

NAME **EVA - DEBOYAH NUCLEAR**
 ADDRESS **6411 E. BRAINERD RD.**
CHATTANOOGA TN 37421

TN0026450
 PERMIT NUMBER

1011
 DISCHARGE NUMBER

P - FINAL LIMITS
DIFFUSER GATE TO TLNN RIVER

FACILITY _____
 LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	06	01		84	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. FAHRENHEIT 0011 P 0 SEE COMMENTS BELOW	*****	*****	*****	*****	66.4	77.4	84.5	0	29/30**GR	
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	DEG.F	SEE PERMIT	GRAB
TEMPERATURE, WATER DEG. FAHRENHEIT 0011 Q 0 SEE COMMENTS BELOW	*****	*****	*****	*****	83.7	89.7	99.9	0	29/30**REC	
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	112.5	DEG.F	CONTINUOUS	RECORD
TEMPERATURE, WATER DEG. FAHRENHEIT 0011 R 0 SEE COMMENTS BELOW	*****	*****	*****	*****			*			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	97.0	DEG.F	CONTINUOUS	RECORD
TEMPERATURE, WATER DEG. FAHRENHEIT 0011 6 0 DOWNSTREAM MONITOR	*****	*****	*****	*****			*			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	101.0	DEG.F	DAILY	GRAB
TEMP DIFF. BETWEEN SAMPLE AND UPSTREAM 0018 B 0 UP- AND DOWN-STREAM	*****	*****	*****	*****	0.0	1.8	4.1	0	29/30**GR	
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	5.4	DEG.F	SEE PERMIT	GRAB
							INST MX			
PH 00400 1 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****						
	PERMIT REQUIREMENT	*****	*****	*****	MINIMUM	*****	9.0	SU	SEE PERMIT	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	*****	1583	1850	*****	*****	*****	*****	0	CONT** REC	
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	CONTINUOUS	RECORD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$10,000 and a maximum imprisonment of between 6 months and 5 years.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 856-6601
 DATE: 84 08 28

COMMENT AND EXPLANATION OF ANY VIOLATIONS (reference all attachments here)
***P* CORRESPONDS TO AMBIENT TEMPERATURE, 'Q' TO OPEN NODE, 'S' TO CLOSED NODE. INDICATE WHICH IS APPROPRIATE.**
****COMPUTER MALFUNCTIONED ONE DAY THIS REPORTING PERIOD.**
 IE 25 0/1

Facility Name (Location if different)
TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 I. DRAINERD RD.
CHARLESTON, GA

Facility
 LOCATION
ATTN: SLS VANDEGRIPF

NAME **TVA - SEQUOYAH NUCLEAR**
 ADDRESS **6411 I. DRAINERD RD.**
CHARLESTON, GA

PERMIT NUMBER
TN0026450

DISCHARGE NUMBER
1611

MONITORING PERIOD
 FROM YEAR **84** MO **06** DAY **01** TO YEAR **84** MO **06** DAY **30**

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (46-53)			NO. EX (62-65)	FR. ENCY. OF ANALYSIS (66-68)	SAMPLE TYPE (69-70)
	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS (20-21) (22-23) (24-25)	MINIMUM (36-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
CHLORIDE, TOTAL RESIDUAL	*****	*****	*****	<0.1	<0.1	<0.1	0	21/30	CALC
EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	0	WEEK-DAYS	CALC
TEMPERATURE RATE OF CHANGE DEG. F/HOUR	0.6	1.9	DEG F/HOUR	*****	*****	*****	0	29/30	REC
DOWNSTREAM MONITOR	*****	3.6 INST EX	3.6 HOUR	*****	*****	*****	0	SEE PERMIT	CALC
DOWNSTREAM TEMPERATURE	72.9	79.6	DEG.F				0	29/30*	REC
		86.9	DEG.F					CONT	REC
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
FTS 856-6601

TELEPHONE
856-6601

DATE
84 08 28

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all citations) CORRESPONDS TO ABILENT TELEPHONE, 100 TO OPEN CODE, 15 TO CLOSED CODE. INDICATE WHICH IS APPROPRIATE.
 SEE PERMIT FOR FURTHER MONITORING REQUIREMENTS. *COMPUTER MALFUNCTIONED ONE DAY THIS REPORTING PERIOD.

NAME TVA - SEQUOYAH NUCLEAR
 ADDRESS 6411 E. BRAINERD RD.
 CHATTANOOGA TN 37421

TN0026450
 PERMIT NUMBER

1021
 DISCHARGE NUMBER

F - FINAL LIMITS
 YARD DRAINAGE POND EFFLUENT

FACILITY
 LOCATION
 ATTN: SAM VANDEGRIF

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	00	01		84	00	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.2	*****	11.4		2	12/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		THREE/GRAB WEEK	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	17	48		0	21/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX	MG/L		WEEK-DAYS	GRAB
OIL AND GREASE (SOXHLET METH.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****	<5.0	<5.0		0	4/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	5 DAILY AV	20 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	2.3	5.9		*****	*****	*****	*****	0	30/30	REC
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		CONTINUOUS	RECORDS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE	DATE		
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS AREA CODE 856-6601	84	08

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments):
 PH MEASUREMENT FREQUENCY SHALL NOT BE LESS THAN 1/WEEK AFTER 1 YEAR, UNLESS DETERMINED OTHERWISE.
 A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT NO.
TN0026450 - SEQUOYA NUCLEAR PLANT

Description of the discharge--Discharge No. 102 - Yard drainage pond effluent. Grab samples collected on June 6 at 9:05 a.m. had pH values of 11.36 and 9.63 standard units (s.u.), exceeding the maximum permitted limit of 9.0 s.u.

Cause and period of the noncompliance--A manual valve is utilized to obtain small quantities (approximately five gallons) of sodium hydroxide (NaOH) from bulk storage in the sodium hypochlorite generation building. This valve was only partially closed following the withdrawal of NaOH. This resulted in a gradual spillage of 725 gallons of NaOH into the yard drainage system. Other samples collected were as follows.

<u>Date</u>	<u>Time</u>	<u>pH (s.u.)</u>
6/5	9:30 a.m.	8.14
6/7	4:45 p.m.	6.41

Thus, the maximum duration of noncompliance was 55.25 hours.

Other samples collected at the diffuser effluent (discharge No. 101) were as follows.

<u>Date</u>	<u>Time</u>	<u>pH (s.u.)</u>
6/6	4:30 p.m.	7.57
6/7	3:25 a.m.	7.64
6/7	9:30 a.m.	7.43
6/7	4:55 p.m.	7.46
6/8	12:25 a.m.	7.51
6/8	7:40 p.m.	7.53

Thus the NaOH spillage did not result in any adverse impact to the environment.

Steps taken to reduce, eliminate, and prevent recurrence of the noncomplying discharge--All unnecessary flows into discharge No. 102 were immediately stopped upon discovery of the NaOH spillage. The elevation of the diffuser pond was high at this time which resulted in reduced flow from discharge No. 102. Sulfuric acid was added to DSN 102 to lower the pH to within permitted limits.

Plant personnel have been instructed to be more careful when closing valves on the bulk-storage NaOH tank. Additionally, storage of NaOH in this tank has been temporarily discontinued. Future acquisition of small quantities of NaOH will be accomplished from bulk storage inside the turbine building. Relocating this acquisition of NaOH should result in prompter corrective actions should similar spillage occur inside the turbine building.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMB No. 2040-0004 Expires 2-29-84

NAME **TVA - SEQUOYAH NUCLEAR**
 ADDRESS **6411 E. BRAINERD RD.**
CHATTANOOGA TN 37421

TR0026450
 PERMIT NUMBER

1031
 DISCHARGE NUMBER

F - FINAL LIMITS
LOW VOL WASTE TREAT FOND EFFL

FACILITY
 LOCATION
ATTN: SEN VANDEGRIFF

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	05	01		84	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH		*****	*****	*****	7.2	*****	9.4	3	15/30	GR
00400 1 0 EFFLUENT GROSS VALUE		*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	Su	THREE/ WEEK	
SOLIDS, TOTAL SUSPENDED		85	243		*****	11	32		0	10/30 GR
00530 1 0 EFFLUENT GROSS VALUE		380 DAILY AV	1250 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L	THREE/ WEEK	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.		<39	<50		*****	<5.0	<5.0		0	7/30 GR
00550 1 0 EFFLUENT GROSS VALUE		190 DAILY AV	250 DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L	TWICE/ WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.97	1.71		*****	*****	*****	*****	0	30/30 CAL
50050 1 0 EFFLUENT GROSS VALUE		***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****	*****	DAILY TOTAL
		SAMPLE MEASUREMENT								
		PERMIT REQUIREMENT								
		SAMPLE MEASUREMENT								
		PERMIT REQUIREMENT								
		SAMPLE MEASUREMENT								
		PERMIT REQUIREMENT								

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS AREA CODE	856-6601	84	08

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
IN THE EVENT OF DISCHARGE OF TURBINE BLDG SUMP TO COND COOL WATER CHANNEL OR DRAINAGE POND, TSS, OIL AND GREASE, AND PH SHALL BE MONITORED 5/WEEK.
A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT
NO. TN0026450 - SEQUOYAH NUCLEAR PLANT

Description of the discharge--Discharge No. 103 - Low-volume waste treatment pond effluent. Routine samples collected with pH values exceeding the maximum permit limit of 9.0 standard units (s.u.) were as follows.

<u>Date</u>	<u>Time</u>	<u>pH (s.u.)</u>
6/20	9:00 a.m.	9.33
6/27	8:55 a.m.	9.37, 9.42
7/18	11:00 a.m.	9.57

Cause and period of the noncompliance--The June 20 noncompliance was a result of overflow from the lined metal-cleaning waste pond (DSN 107) into the low-volume waste treatment pond. DSN 107 contained regenerant wastes from the temporary demineralizer system and had a pH of 11.0 s.u.

The June 27 noncompliance was caused by caustic regenerant wastes from the temporary demineralizer system.

The July 18 noncompliance was caused by leaking valves on the NaOH tank associated with the temporary demineralizer system. These valves leaked NaOH into the building overflow sump that discharges into DSN 103 via the main turbine building sump piping.

DSN 103 was isolated because of these noncompliances. Other samples collected were as follows.

<u>Date</u>	<u>Time of Sample</u>	<u>pH (s.u.)</u>	<u>Time of Pond Isolation</u>
6/19	9:15 a.m.	8.76	
6/20	---	---	2:20 p.m.
6/26	9:00 a.m.	8.93	
6/27	---	---	1:55 p.m.
7/17	9:05 a.m.	8.75	
7/18	---	---	11:24 a.m.

Thus, the maximum noncompliance periods for the June 20, June 27, and July 18 noncompliances were 29, 29, and 26 hours, respectively.

Steps taken to reduce, eliminate, or prevent recurrence of the noncomplying discharge--June 20 noncompliance: The overflow of the lined pond, DSN 107, has been alleviated by the installation of additional piping to provide alternate usage of the lined and the unlined metal-cleaning waste ponds associated with DSN 107.

June 27 noncompliance: Operating instructions have been improved to prevent future routing of temporary demineralizer wastes to DSN 103. These wastes are to be routed to DSN 107 for treatment and will be discharged on a batch basis.

July 18 noncompliance: The diaphragms on the leaking valves have been replaced.

NAME **TVA - SNOGUYAH NUCLEAR**
 ADDRESS **6411 E. BRAINERD RD.**
CHATTANOOGA TN 37421

TN0026450
 PERMIT NUMBER

104 1
 DISCHARGE NUMBER

F - FINAL LIMITS
RAWSTE SYST TO COOL THE BLWDR

FACILITY _____
 LOCATION _____
ATTN: SAM VANDEGRIF

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
84	06	01	TO	84	06	30
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS (54-61)	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
PH		*****	*****	*****	6.1	*****	8.0		0	8/30	GR
00400 1 0 EFFLUENT GROSS VALUE		*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		TWICE/GRAB WEEK	
SOLIDS, TOTAL SUSPENDED		4.5	25		*****	17	98		0	8/30	COMP
00530 1 0 EFFLUENT GROSS VALUE		13 DAILY AV	42 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L		TWICE/COMPOS WEEK	
OIL AND GREASE (SOXHLET EXTR.) TOT.		<1.6	<1.9		*****	<5.0	<5.0		0	5/30*	GR
00550 1 0 EFFLUENT GROSS VALUE		6.3 DAILY AV	8.3 DAILY MX	LBS/DY	*****	15 DAILY AV	20 DAILY MX	MG/L		TWICE/GRAB WEEK	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.040	0.124		*****	*****	*****	*****	0	30/30	REC
50050 1 0 EFFLUENT GROSS VALUE		***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****		ONCE/RECORD MATCH	
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT									
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT									
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS AREA CODE	856-6601 NUMBER	84 YEAR	08 MO

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments if any)
DURING ABNORMAL FLOW CONDITIONS, EXCEEDING .05 MGD AS A 7 DAY AVERAGE, DAILY MAXIMUM QUANTITY LIMITS MAY BE EXCEEDED, BUT SHALL NOT EXCEED 4 TIMES LIMITATIONS LISTED. TSS SAMPLE TYPE = 1 GRAB/BATCH COMPOSITED FOR ANALYSIS OVER A 24 HOUR DAY. *THREE SAMPLES WERE INADVERTENTLY NOT COLLECTED.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMB No. 2040-0004 Expires 2-29-84

NAME TVA - SEQUOYAH NUCLEAR
 ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

TN0026450
 PERMIT NUMBER

1001
 DISCHARGE NUMBER

P - FINAL LIMITS
 REGEN TO COOL TWA ELWDN LINE

FACILITY _____
 LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	06	01		84	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH		*****	*****	*****	6.8	*****	9.0	0	15 BATCHES	GR
00400 1 0 EFFLUENT GROSS VALUE		*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	0	ONCE/	GRAB BATCH
SOLIDS, TOTAL SUSPENDED		2.4	4.0		*****	15	43	0	9 BATCHES	COMP
00530 1 0 EFFLUENT GROSS VALUE		25	63	LES/DY	*****	30	100	0	ONCE/	COMPOS BATCH
OIL AND GREASE (SOXHLET EXTR.) TOT.		<1.2	<3.0		*****	<5.2	7.0	0	9 BATCHES	GR
00550 1 0 EFFLUENT GROSS VALUE		13	17	LES/DY	*****	15	20	0	DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.027	0.072		*****	*****	*****	0	9 BATCHES	CAL
50050 1 0 EFFLUENT GROSS VALUE		*****	*****	MGD	*****	*****	*****	0	ONCE/	CALCULATED BATCH

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 43 USC § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 856-6601
 DATE: 84 08 28

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SHOULD ABNORMAL CONDITIONS NECESSITATE INCREASED WASTE FLOW ABOVE 0.10 MGD, AS A 7 DAY AVERAGE, DAILY MAXIMUM QUANTITY LIMITATIONS MAY BE EXCEEDED BUT SHALL NOT EXCEED 2 TIMES THE LIMITATIONS LISTED.

NAME **TVE - SEQUOYAH NUCLEAR**
 ADDRESS **0411 E. BRAINERD RD.**
CHATTANOOGA TN 37421

(2-16)
TN0026450
 PERMIT NUMBER

(17-19)
106 1
 DISCHARGE NUMBER

F - FINAL LIMITS
STM GEN BLWDN TO COOL TWR BLDN

FACILITY
 LOCATION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	06	01		84	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Pd		*****	*****	*****	*****	*****	*****	*****			
00400 1 0 EFFLUENT GROSS VALUE		*****	*****	*****	*****	*****	*****	*****	50	SEE PERMIT	
SOLIDS, TOTAL SUSPENDED					*****						
00530 1 0 EFFLUENT GROSS VALUE		50 DAILY AV	170 DAILY MX	LBS/DY	*****	30 DAILY AV	100 DAILY MX	MG/L		ONCE/MONTH	GRAB
FLOW, IN CONDEIT OR THRU TREATMENT PLANT		NO DISCHARGE			*****	*****	*****	*****			
50050 1 0 EFFLUENT GROSS VALUE		***** DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****		ONCE/MONTH	INSTANT
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT									
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT									
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT									
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS AREA CODE	856-6601	84	08

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
**SHOULD INTERNAL PLANT CHEMISTRY REQUIREMENTS NECESSITATE INCREASED
 SHUTDOWN FLOW OVER .2 MGD AS A 7 DAY AVERAGE, DAILY MAXIMUM QUANTITY LIMITATIONS MAY BE EXCEEDED BUT
 SHALL NOT EXCEED 4 TIMES THE LIMITATIONS LISTED.**

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
TVA - SEQUOYAH NUCLEAR
6411 K. BRAINERD RD.
CHATTANOOGA TN 37421

FACILITY _____
 LOCATION _____
ATTN: SAE VANDEGRIF

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

(2-16) **1N0026450** PERMIT NUMBER
 (17-19) **107 1** DISCHARGE NUMBER

MONITORING PERIOD
 FROM YEAR **84** MO **06** DAY **01** TO YEAR **84** MO **06** DAY **30**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

Form Approved
 OMB No. 2040-0004
 Expires 2-29-84

F - FINAL LIMITS
METAL CLEANING WASTE END TO COND CH

NOTE: Read instructions before completing this form.

PARAMETER (12-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
CHEM. OXYGEN DEMAND (HIGH LEVEL) (COD) 00340 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*	LBS/DY	*****					
	PERMIT REQUIREMENT	*****	834		*****	DAILY AV	100	MG/L		WEEKLY COMP-6
PH 00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	7.6		8.1		0	3/30 GR
	PERMIT REQUIREMENT	*****	*****	*****	6.0		9.0	50		WEEKLY GRAB
					MINIMUM		MAXIMUM			
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	48	52	LBS/DY	*****	9.7	19		0	2/30 B-HR COMP
	PERMIT REQUIREMENT	*****	250		*****	DAILY AV	30	MG/L		WEEKLY COMP-6
GIL AND GREASE (SOXHLET EXTR.) TOT. 00550 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	<15	<15	LBS/DY	*****	<5.3	<5.5		0	2/30 GR
	PERMIT REQUIREMENT	*****	125		*****	DAILY AV	15	MG/L		WEEKLY GRAB
PHOSPHORUS, TOTAL (AS P) 00665 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*	LBS/DY	*****		*			
	PERMIT REQUIREMENT	*****	8.3		*****	DAILY AV	1.0	MG/L		WEEKLY COMP-6
COPPER, TOTAL (AS CU) 01042 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.06	0.10	LBS/DY	*****	0.02	0.04		0	2/30 B-HR COMP
	PERMIT REQUIREMENT	*****	8.3		*****	DAILY AV	1.0	MG/L		WEEKLY COMP-6
IRON, TOTAL (AS FE) 01045 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	3.2	3.6	LBS/DY	*****	1.2	1.3		1	3/30 B-HR COMP
	PERMIT REQUIREMENT	*****	8.3		*****	DAILY AV	1.0	MG/L		WEEKLY COMP-6

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS AREA CODE	856-6601	84	08

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
IN NO CASE SHALL THE QUANTITY DISCHARGED EXCEED THE QUANTITY DETERMINED BY MULTIPLYING THE VOLUME OF THE BATCH OF METAL CLEANING WASTE GENERATED BY THE CONCENTRATION. SEE PERMIT FOR ADDITIONAL SAMPLING REQUIREMENTS.
***NO PHOSPHORUS OR ORGANIC CHEMICAL BEARING COMPOUNDS WERE USED. A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.**

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT
NO. TN0026450 - SEQUOYAH NUCLEAR PLANT (SQN)

Description of the discharge--Discharge No. 107 - Metal-cleaning waste pond effluent. A composite sample collected on June 25 during a batch discharge that occurred on June 25 and 26 had a total iron (Fe) concentration of 1.3 mg/L, exceeding the permitted limitation of 1.0 mg/L. The volume of the batch release was 0.663 million gallons.

Cause and period of the noncompliance--The batch release occurred between 11:30 a.m. and 6:30 p.m. on June 25 and between 9:45 a.m. and 6:45 p.m. on June 26. The prerelease sample for total Fe had a value of 0.32 mg/L. This sample was analyzed without digestion by the laboratory at SQN. The composite sample (1.3 mg/L) was analyzed with digestion by TVA's central laboratory in Chattanooga. Personnel responsible for discharging DSN 107 assumed the reported total Fe concentration of 0.32 mg/L had been analyzed properly. This is the only explanation available for the discrepancy between the prerelease sample value and the first composite sample value. The last composite sample on June 26 had a total Fe concentration of 1.0 mg/L. Thus, the period of the noncompliance was seven hours on June 25.

Steps taken to reduce, eliminate, and prevent recurrence of the noncomplying discharge--All future analyses for DSN 107 are being performed by TVA's central laboratory. This should prevent any future discrepancies.

NAME TVA - SEQUOYAH NUCLEAR
 ADDRESS 6411 E. BRAINERD RD.
CHATTANOOGA TN 37421

TN0026450
 PERMIT NUMBER

107 1
 DISCHARGE NUMBER

F - FINAL LIMITS
 METAL CLN WASTE PND TO COND CH

FACILITY _____
 LOCATION _____

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
84	06	01		84	06	30
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE		0.332	0.332	MGD	*****	*****	*****	*****	1	BATCH	CALC
	PERMIT REQUIREMENT	***** DAILY AV	***** DAILY MX		*****	*****	*****	*****		ONCE/ BATCH	CALC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.	TELEPHONE		DATE		
		TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS	856-6601	84

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
IN NO CASE SHALL THE QUANTITY DISCHARGED EXCEED THE QUANTITY DETERMINED BY MULTIPLYING THE VOLUME OF THE BATCH OF METAL CLEANING WASTE GENERATED BY THE CONCENTRATION. SEE PERMIT FOR ADDITIONAL SAMPLING REQUIREMENTS.

NAME TVA - SNOOPYAH NUCLEAR
ADDRESS 6411 W. BRAINARD RD.
CHAFFALOGA TN 37421

TH0026450
PERMIT NUMBER

1081
DISCHARGE NUMBER

F - FINAL LIMITS
CONCRETE PLT SETTLING POND

FACILITY
LOCATION
ATTN: SAE VANDEGRIFF

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	06	01		84	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (48-55)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****			
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	MINIMUM	*****	*****	SU	SEE PERMIT	
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	8.3	12		0	3/30 GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	DAILY AV	40 DAILY MX	MG/L	WEEKLY	GRAB
OIL AND GREASE (SOXHLELY EXTRA.) TOT. 00550 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****		<5.0		0	1/30 GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	DAILY AV	20 DAILY MX	MG/L	ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.017	0.054		*****	*****	*****	*****	0	4/30 WEIR
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	WEEKLY	FLOWING
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR
OF ENVIRONMENTAL QUALITY
STAFF
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND STATUTE 11219. (Penalties under 18 USC statute may include fines up to \$100,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE
FTS 856-6601 84 08 28
AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
THERE WAS NO DISCHARGE ONE WEEK THIS REPORTING PERIOD.

NAME **TVA - SEQUOYAH NUCLEAR**
 ADDRESS **6411 E. BRAINERD RD.**
CHATTANOOGA TN 37421

PERMIT NUMBER **TN0026450**
 DISCHARGE NUMBER **1101**

F - FINAL LIMITS
RECYCLED COOLING WATER FLOW

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
84	06	01		84	06	30
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

FACILITY _____
 LOCATION _____
ATTN: SAM VANDEGRIFF

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING (46-53)			QUALITY OR CONCENTRATION (45-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	NO DISCHARGE						
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	101.0	DEG.F		DAILY	GRAB
PH 00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****							
	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0	PH		WEEKLY	GRAB
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****							
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.10	MG/L		WEEKLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 3 years.)	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS AREA CODE	856-6601	84	08

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
ADDITIONAL MONITORING FROM TN DEPT OF PUBLIC HEALTH CERTIFICATION LETTER OF JAN 31, 1983. SEE LETTER FOR REQUIREMENTS TO ESTABLISH RELATIONSHIP BETWEEN FISH DISTRESS/KILL AND CHLORINATION LEVEL.

NAME TVA - SEQUOYAH NUCLEAR
 ADDRESS 6411 E. BRAINARD AD.
 CHATTANOOGA TN 37421

TN0026450
 PERMIT NUMBER

111 1
 DISCHARGE NUMBER

F - FINAL LIMITS
 STP DISCHARGE

FACILITY
 LOCATION
 ATTN: SAM VANDEGRIPP

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
84	05	01		84	05	30
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (46-51)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT 0.42	3.8	5.0	LBS/DY	*****	3.3	3.8	MG/L	0	2/30	GR
	PERMIT REQUIREMENT 30DA AVG	DAILY MX				30 DA AVG	40 DAILY MAX				TWICE/GRAB MONTH
TH	SAMPLE MEASUREMENT *****	*****	*****	*****	*****	*****	*****	*****	0	2/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT *****	*****	*****	*****	MINIMUM	*****	MAXIMUM	50	0	2/30	SEE PERMIT
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT 1.3	3.8	5.0	LBS/DY	*****	10	11	MG/L	0	2/30	GR
	PERMIT REQUIREMENT 30DA AVG	DAILY MX				30 DA AVG	40 45 DAILY MX				TWICE/GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT 0.015*	0.015*		MGD	*****	*****	*****	*****	0	21/30	WEIR
	PERMIT REQUIREMENT DAILY AV	DAILY MX									WEEK-FLOWING DAYS
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT *****	*****	*****	*****	0.0	<0.1	0.5	MG/L	0	21/30	WEIR
	PERMIT REQUIREMENT *****	*****	*****	*****	*****	DAILY AV	2.0 DAILY MX				WEEK-GRAB DAYS
FECAL COLIFORM	SAMPLE MEASUREMENT <10	<4005	8000	N/100 ML					1	2/30	GR
	PERMIT REQUIREMENT NA	NA	1000								2/30 GR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: TS 856-6601
 DATE: 84 08 28
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

*ESTIMATED FLOW.
 A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.

NOTIFICATION OF NONCOMPLIANCE WITH EFFLUENT LIMITATIONS - NPDES PERMIT
NO. TN0026450 - SEQUOYAH NUCLEAR PLANT

Description of the discharge--Discharge No. 111 - Sewage treatment plant effluent. Routine samples collected on June 26 and July 5 had fecal coliform concentrations of 8,000 and 60,000 N/100 ml, respectively, exceeding the permit limit of 1,000 N/100 ml. Routine samples collected on July 13 and 24 had total residual chlorine (TRC) concentrations of 3.0 and 2.95 mg/L, respectively, exceeding the permit limit of 2.0 mg/L.

Cause and period of the noncompliances--The fecal coliform noncompliances were caused by sodium hypochlorite feed pump problems and this resulted in low chlorine residuals of less than 0.1 mg/L. Other samples collected were as follows.

<u>Date</u>	<u>Time</u>	<u>Fecal Coliform Concentration</u>
6/6	4:15 p.m.	<10 N/100 ml
7/9	2:00 p.m.	<10 N/100 ml

Thus, the maximum duration of the fecal coliform noncompliance was 34 days.

The TRC noncompliances resulted from improper pump stroke settings. Sand filters A and B were in the process of being removed from service during the week of June 25. Removing sand filters A and B from service reduces the estimated effluent flow from 14,500 gpd to 8,500 gpd. The flow was being reduced but the NaOCl pump stroke had not been adjusted and resulted in a TRC concentration greater than 2.0 mg/L. Other samples collected were as follows.

<u>Date</u>	<u>Time</u>	<u>TRC (mg/L)</u>
7/12	9:00 a.m.	<0.1
7/16	4:00 p.m.	<0.1
7/23	8:00 a.m.	<0.1
7/25	8:00 a.m.	<0.1

Thus, the maximum durations for the July 13 and 24 noncompliances were 103 and 48 hours, respectively.

Steps taken to reduce, eliminate, or prevent recurrence of the noncomplying discharge--The stroke setting of the sodium hypochlorite feed pump is being adjusted and monitored more closely to prevent future fecal coliform and TRC noncompliances.

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME TVA - SEQUOYAH NUCLEAR
ADDRESS 6411 E. BRAINERD RD.
 CHATTANOOGA TN 37421

(2-16)
TN0026450
 PERMIT NUMBER

(17-19)
112 1
 DISCHARGE NUMBER

P - FINAL LIMITS
STP DISCHARGE

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	06	31		84	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	NO DISCHARGE			MGD						
	PERMIT REQUIREMENT	0.025	NA							5/7	WEIR
BOD ₅	SAMPLE MEASUREMENT			LBS/DAY				MG/L			
	PERMIT REQUIREMENT	6.3	8.3			30	40			2/30	GR
SUSPENDED SOLIDS	SAMPLE MEASUREMENT			LBS/DAY				MG/L			
	PERMIT REQUIREMENT	6.3	8.3			30	40			2/30	GR
TOTAL CHLORINE RESIDUAL	SAMPLE MEASUREMENT							MG/L			
	PERMIT REQUIREMENT						2.0			5/7	GR
FECAL COLIFORM	SAMPLE MEASUREMENT							N/100 ML			
	PERMIT REQUIREMENT				NA	NA	1,000			2/30	GR
SETTLABLE SOLIDS	SAMPLE MEASUREMENT							ML/L			
	PERMIT REQUIREMENT						1.0			2/7	GR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS AREA CODE	856-6601	84	08

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME ADDRESS (include Facility Name/Location if different)

NAME TVA - SEQUOYAH NUCLEAR
 ADDRESS 6411 E. BRAINERD RD.
 CHATTANOOGA TN 37421

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

TN0026450
 PERMIT NUMBER

113 1
 DISCHARGE NUMBER

F - FINAL LIMITS
 STOP TO COND COOLING WATER CHAN

Form Approved
 OMB No. 2040-0004
 Expires 2-29-84

FACILITY _____
 LOCATION _____
 ATTN: SAE VANDEGRIPP

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	06	01		84	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(1 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.05	0.06	LBS/DY	*****	2.1	2.2	0	2/30	GR
		7.5	10.0	LBS/DY	*****	30	40		TWICE/MONTH	GRAB
		30DA AVG	DAILY MX			30DA AVG	DAILY MX			
TH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	*****	*****
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****	*****	SU
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	0.93	0.97	LBS/DY	*****	47	58	1	2/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	7.5	10.0	LBS/DY	*****	30	40	*****	TWICE/MONTH	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1	0	21/30	GR
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.0	*****	WEEK-DAYS	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.004	0.010	MGD	*****	*****	*****	0	21/30	WEIR
50050 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.030	NA	MGD	*****	*****	*****	*****	WEEK-DAYS	FLOWING
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	0.7	1.0	1.9	0	21/30	GR
50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	2.0	*****	WEEK-DAYS	GRAB
FECAL COLIFORM	SAMPLE MEASUREMENT	*****	*****	*****	<10	<10	<10	0	2/30	GR
PERMIT REQUIREMENT	*****	*****	*****	*****	NA	NA	1000	*****	2/30	GR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 19 U.S.C. § 1001 AND 19 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and a maximum imprisonment of between 6 months and 3 years.)	TELEPHONE	DATE		
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS 856-6601 AREA CODE NUMBER	84	08

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

A NOTIFICATION OF NONCOMPLIANCE IS ATTACHED.

Description of the discharge - Discharge No. 113 - Construction sewage treatment plant (STP) effluent to the CCW channel. Grab samples of this discharge from May 8 through July 5, 1984, indicate the following noncompliances.

<u>Date</u>	<u>Flow</u>	<u>Parameter</u>	<u>Concentration</u>	<u>Maximum Permit Limitation</u>
May 8	5,000 gpd	Fecal Coliform	>2,000 colonies/ 100 ml sample	1,000 colonies/ 100 ml sample
		Total Suspended Solids	70 mg/l	45 mg/l
May 22	4,000 gpd	Total Suspended Solids	96 mg/l	45 mg/l
June 26	2,000 gpd	Total Suspended Solids	58 mg/l	45 mg/l
July 5	200 gpd	Total Suspended Solids	55 mg/l	45 mg/l

Cause and period of the noncompliance - The exact cause of the fecal coliform noncompliance is unknown. However, we suspect an increase in flow due to infiltration was not accompanied by a proportionate increase in the hypochlorite feed rate, resulting in incomplete disinfection.

Fecal coliform samples taken on April 24 and May 22 had fecal coliform counts of less than 10 and 100 colonies per 100 ml of sample, respectively. Therefore, the maximum possible duration of this noncompliance was approximately 28 days.

The total suspended solids (TSS) noncompliances were due to denitrification and rising solids. The wastewater flow to this treatment plant had been significantly reduced as construction at SQN nears completion. Flow rate on the dates of the TSS noncompliance are given in the table above. The flow rates resulted in long retention times promoting denitrification.

Grab samples collected on April 5 and June 6 contained a TSS concentration of 30 and 35 mg/l, respectively. Therefore, the possible period of the first noncompliance was 31 days. The remaining influent flow to this STP was rerouted to the new sand filter, DSN 112, on July 7. Therefore, the possible duration of the second period of noncompliance was approximately 31 days.

Steps taken to reduce, eliminate, and prevent recurrence of the noncomplying discharge - As mentioned above, this STP was taken out of service on July 7. TVA plans to relocate this STP onsite to serve a temporary office building which will accommodate approximately 165 to 200 persons relocated to the SQN site from its Chattanooga and Knoxville offices. The STP should be back in service on or about September 1, 1984. Modified permit pages to reflect plant relocation will be provided.



J. A. Nicholls

PERMITTEE NAME/ADDRESS (Facility Name/Location if different)

NAME **TVA - SEQUOYAH NUCLEAR**
 ADDRESS **6411 E. BRAINERD RD.**
CHATTANOOGA TN 37421

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

PERMIT NUMBER **TN0026450**

DISCHARGE NUMBER **114 1**

F - FINAL LIMITS
STEP DISCHARGE TO TENN RIVER

OMB No. 2040-0004
 Expires 2-29-84

FACILITY _____
 LOCATION _____
 A T T N : **SAS VANDEGRAFF**

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	06	01		84	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE	0.31	3.8	5.0	LBS/DY	*****	3.0	4.4	0	2/30	GR
	PERMIT REQUIREMENT	30DA AVG	DAILY MX		*****	30	40 45		TWICE/MONTH	GRAB
PH 00400 1 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	6.6	*****	7.0	0	11/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0		TWICE/WEK	GRAB
					MINIMUM		MAXIMUM			
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	1.1	3.8	5.0	LBS/DY	*****	11	13	0	2/30	GR
	PERMIT REQUIREMENT	30DA AVG	DAILY MX		*****	30	40 45		TWICE/MONTH	GRAB
SOLIDS, SETTLEABLE 00545 1 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	<0.1	<0.1	0	21/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	30DA AVG	DAILY MX		TWICE/WEK	GRAB
							1.0			ML/L
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	0.012	0.023	NA	MGD	*****	*****	*****	0	21/30	WEIR
	PERMIT REQUIREMENT	0.015	NA	DAILY AV	*****	*****	*****		WEEK-DAYS	FLOIN
COLIFORMS, FECAL GENERAL 74055 1 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	<10	10	0	2/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	*****	30DA GEO	DAILY MX		TWICE/MONTH	GRAB
							1000			1000L
TOTAL RESIDUAL CHLORINE	0.4	0.9	2.0		0.4	0.9	2.0	0	23/30	GR
	PERMIT REQUIREMENT						2.0		WEEK-DAYS	GR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. § 1001 AND 23 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 DATE
 FTS AREA CODE 856-6601
 84 08 28
 YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NAME TVA - SEQUOYAH NUCLEAR
 ADDRESS 6411 E. BRAINERD RD.
 CHATTANOOGA TN 37421

TN0026450
 PERMIT NUMBER

114 2
 DISCHARGE NUMBER

F - FINAL LIMITS
 STP DISCHARGE TO TENN RIVER

FACILITY LOCATION
 STATION: SAN VANDEGRIPP

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	06	01		84	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(1 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (46-53)	AVERAGE (46-53)	MAXIMUM (54-61)			
WATER TEMPERATURE, 5-DAY (20 DEG. C)					*****					
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.8 30DA AVG	5.6 DAILY MX	LBS/DY	*****	30 30DA AVG	45 DAILY MX	MG/L		TWICE/GRAB MONTH
PH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****			
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SD		TWICE/GRAB WEEK
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT				*****					
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.8 30DA AVG	5.6 DAILY MX	LBS/DY	*****	30 30DA AVG	45 DAILY MX	MG/L		TWICE/GRAB MONTH
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 30DA AVG	1.0 DAILY MX	ML/L		TWICE/GRAB WEEK
FLOW, IN CONDUIT OR THIRD TREATMENT PLANT	SAMPLE MEASUREMENT				*****	*****	*****	*****		
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	.005 DAILY AV	***** DAILY MX	MGD	*****	*****	*****	*****		WEEK-FLOWING DAYS
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	*****	*****			#/		
74055 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 30DA GEO	1000 DAILY MX	100ML		TWICE/GRAB MONTH
DISSOLVED OXYGEN	SAMPLE MEASUREMENT				3.5	5.0	6.4	MG/L	0	21/30 GR
	PERMIT REQUIREMENT				1.0					5/7 GR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: FTS 856-6601
 DATE: 84 08 28
 AREA CODE: NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Facility Name/Location if different

NAME TVA - SEQUOYAH NUCLEAR
 ADDRESS 6411 L. BRAINERD RD.
 CHATTANOOGA TN 37421

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

OMB No. 2040-0004

Expires 2-29-84

TN0026450

PERMIT NUMBER

115 1

DISCHARGE NUMBER

P - FINAL LIMITS
 VEHICLE WASH POND EFFLUENT

FACILITY _____
 LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	06	01		84	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

ATTN: SAM VANDEGRIPF

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.3	*****	7.3		0	1/30	GR
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	0.0 MINIMUM	*****	9.0 MAXIMUM	DU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	4.5	7.0		0	4/30	GR
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	40 DAILY MX	MG/L		WEEKLY	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1		0	4/30	GR
00545 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	DAILY AV	.5 DAILY MX	ML/L		WEEKLY	GRAB
OIL AND GREASE (SOXHLET EXTR.) TOT.	SAMPLE MEASUREMENT	*****	*****	*****	*****	<5.0	<5.0		0	4/30	GR
00550 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR TERR TREATMENT PLANT	SAMPLE MEASUREMENT	0.0009	0.0014	*****	*****	*****	*****	*****	0	4/30	WEIR
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		WEEKLY	FLOWING
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER MARTIN E. RIVERS, DIRECTOR OF ENVIRONMENTAL QUALITY STAFF TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 18 U.S.C. § 1319. Penalties under these statutes may include fines up to \$10,000 and/or a maximum imprisonment of between 6 months and 5 years.	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	FTS AREA CODE	856-6601	84	08

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)