



Duquesne Light Company

Beaver Valley Power Station
P.O. Box 4
Shippingport, PA 15077-0004

THOMAS P. NOONAN
Division Vice President
Nuclear Operations

(412) 393-7622
Fax (412) 393-4905

September 25, 1995
NPD3VPO: 0387

Document Control Desk
U.S. Nuclear Regulatory Commission
Washington, DC 20555

NPDES Monthly Report, EPA Permit No. PA0025615

SUBJECT: Beaver Valley Power Station, Unit No. 1 and No. 2
BV-1 Docket No. 50-334, License No. DPR-66
BV-2 Docket No. 50-412, License No. NPF-73

Dear Sir:

Enclosed is a copy of the NPDES Monthly Report as submitted to the Pennsylvania Department of Environmental Resources.

Sincerely,

T. P. Noonan
Division Vice President
Nuclear Operations

DNH/trs

cc: D. A. Orndorf
S. L. Pernick
N. R. Tonet
Central File

050033

9510030073 950831
PDR ADDCK 05000334
R PDR

Cart# P342 008707



JE2311



Duquesne Light Company

Beaver Valley Power Station
P.O. Box 4
Shippingport, PA 15077-0004

THOMAS P. NOONAN
Division Vice President
Nuclear Operations

(412) 393-7622
Fax (412) 393-4905

September 25, 1995
NPD3VPO: 0386

Attention: "DMR Clerk"
Department of Environmental Resources
Bureau of Water Quality Management
400 Waterfront Drive
Pittsburgh, PA 15222

NPDES Monthly Report, EPA Permit Number PA0025615

Gentlemen:

NPDES Monthly Report for Duquesne Light Company, Beaver Valley Power Station for August 1995 is submitted for your consideration.

Please be advised that required techniques, even if performed properly, do not measure actual conditions with 100 percent accuracy 100 percent of the time, and therefore, some reported values in the attached DMRs may not represent actual conditions with absolute accuracy.

Sincerely,

T. P. Noonan
Division Vice President
Nuclear Operations

DNH/trs

Enclosure

cc: D. A. Orndorf
S. L. Pernick
N. R. Tonet
Central File





Duquesne Light Company

Beaver Valley Power Station
P.O. Box 4
Shippingport, PA 15077-0004

THOMAS P. NOONAN
Division Vice President
Nuclear Operations

(412) 393-7622
Fax (412) 393-4905

September 25, 1995
NPD3VPO: 0385

United States Environmental Protection Agency
Region III, Pennsylvania (3WM53)
Water Permits Branch
Water Management Division
841 Chestnut Street
Philadelphia, PA 19107

NPDES Monthly Report, EPA Permit No. PA0025615

Dear Sir:

This letter forwards a copy of our NPDES Monthly Report as submitted to the Pennsylvania Department of Environmental Resources, Bureau of Water Quality Management

Sincerely,

T. P. Noonan
Division Vice President
Nuclear Operations

DNH/trs

Attachment

cc: D. A. Orndorf
S. L. Pernick
N. R. Tonet
Central File

DELIVERING
QUALITY
ENERGY

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
BAYER VALLEY POWER STATION
P.O. BOX 4
ATM; DAVID ORNDORF
SHIPPINGPORT PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (17-19)
PA0025615
 PERMIT NUMBER
001 A
 DISCHARGE NUMBER

UNITS 162 COOLG. TOWER BLVDH.
(SOBR 05) Form Approved. **12345**
P R FINAL OMB No. 2040-0004
MAJOR Approval expires 10-31-94

MONITORING PERIOD
 FROM **95 08 01** TO **95 08 31**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NO DISCHARGE
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	QUANTITY OR LOADING (54-61)		QUALITY OR CONCENTRATION (46-53)		NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	AVERAGE (46-53)	MAXIMUM (54-61)	MINIMUM (38-45)	AVERAGE (46-53)			
PH					0	1/7	G
00400 1 0 0 EFFLUENT GROSS VALUE			6.19	8.12		WEEKLY	CRAB
NITROGEN, AMMONIA TOTAL (AS N)			NA	NA	0	NA	NA
00610 1 0 1 EFFLUENT GROSS VALUE			REPORT NO AVG	REPORT DAILY MAX	0	DAILY CONT.	CRAB
FLOW, IN CONDUIT OR TREATMENT PLANT					0	DAILY CONT.	CRAB
50050 1 0 0 EFFLUENT GROSS VALUE		64.584			0	DAILY CONT.	CRAB
CHLORINE, FREE AVAILABLE				0.04	0	CONTINUED	CRAB
50064 1 0 1 EFFLUENT GROSS VALUE				0.5	0	CONTINUED	CRAB
HYDRASINE				NA	0	NA	NA
61313 1 0 1 EFFLUENT GROSS VALUE				DAILY MAX	0	WEEKLY	CRAB

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY KNOWLEDGE OF THOSE FACTS I AM IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION AND BELIEVE THE SUBMITTED INFORMATION IS TRUE AND ACCURATE. 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.)

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 TYPED OR PRINTED

TELEPHONE
 412 393-5113
 AREA NUMBER

DATE
 95 09 25
 YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
HYDRASINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF WET LAYUP. QUARTERLY SAMPLING TO BE CONDUCTED IN SAME MONTH. NA = Not Applicable, wet layup conditions did not exist.

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

NAME **BEAVER VALLEY POWER STATION**

ADDRESS **P.O. BOX 8**

ATTN: DAVID ORNDORF

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: DAVID ORNDORF

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

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

002 A

DISCHARGE NUMBER

IMPACT SCREEN BACKWASH

(SUBR 05) Form Approved. **12305**

F # FINAL OMB No. 2040-0004

HAJOS Approval expires 10-31-94

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	08	01		95	08	31

***** NO DISCHARGE *****

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 (38-45)				NO EX (62-67)	FREQUENCY OF ANALYSIS (64-68)	SAMP TYP (69-7)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE		0.006	0.046	(03)	*****	*****	*****	****		0 1/7	EST
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY HI	NO	*****	*****	*****	****			ANALYST
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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

David Orndorf
Chemistry Manager

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 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 5 years.)

[Signature]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412 393-5113

95 09 25

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077
 FACILITY _____
 LOCATION _____
ATTN: DAVID ORNDORF

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

PA0025615
 PERMIT NUMBER

008 A
 DISCHARGE NUMBER

UNIT ONE COOLG TOWER OVERFLOW
(SUBR 05) Form Approved. **12345**
P # FINAL OMB No. 2040-0004
MAJOR Approval expires 10-31-94

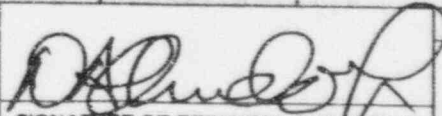
MONITORING PERIOD
 FROM YEAR **95** MO **08** DAY **01** TO YEAR **95** MO **08** DAY **31**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

***** NO DISCHARGE *****
 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 (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PE 00400 1 0 0 EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	*****	*****		8.19	*****	8.42	(12)	0 1/7	G
	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SD		WEEKLY GRAB
50050 1 0 0 EFFLUENT GROSS VALUE CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	0.151	0.151	(03)	*****	*****	*****		0 1/7	MEASRD
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY BY	MGD	*****	*****	*****	****		WEEKLY MEASRD
50064 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	0.02	0.04	(19)	0 2/DAY	G
	PERMIT REQUIREMENT	*****	*****	****	*****	0.2 DAILY BY	0.5 INST MAX	MG/L		CONTINUOUS
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
David Orndorf
 Chemistry Manager
 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
 412 393-5113
 AREA CODE NUMBER
 DATE
 95 09 25
 YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
BEAVER VALLEY POWER STATION
ADDRESS P.O. BOX 4
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
 (17-19)
003 A
 DISCHARGE NUMBER

003 UNCONTAMINATED STORM WATER
 (SUBR 05) Form Approved. 12345
P & PINAL OMB No. 2040-0004
MAJOR Approval expires 10-31-94

MONITORING PERIOD
 FROM YEAR 95 MO 08 DAY 01 TO YEAR 95 MO 08 DAY 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

QUALITY OR CONCENTRATION
 (4 Card Only) (38-45) (46-53) (54-61)

QUANTITY OR LOADING
 (3 Card Only) (46-53) (54-61)

PARAMETER (32-37)
FLOW, IN CONDUIT OR THRU TREATMENT PLANT
50C50 1 0 0
EFFLUENT GROSS VALUE

PARAMETER (32-37)	AVERAGE (46-53)			MINIMUM (38-45)			MAXIMUM (54-61)			UNITS	FREQ. OF ANALYSIS (64-68)	FID. EX. (62-63)	SAMPLE TYPE (69-70)
	AVERAGE (46-53)	MINIMUM (38-45)	MAXIMUM (54-61)	AVERAGE (46-53)	MINIMUM (38-45)	MAXIMUM (54-61)	UNITS						
SAMPLE MEASUREMENT	0.012	0.0000	0.027	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0	EST	
PERMIT REQUIREMENT	REPORT TO AVG	REPORT TO COMPLETE	REPORT DAILY BY HGD	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0	TRICE/ MONTH	
SAMPLE MEASUREMENT													
PERMIT REQUIREMENT													
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
David Orndorf
Chemistry Manager

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

 412 393-5113
 AREA CODE NUMBER

TELEPHONE DATE
 412 393-5113 95 09 25

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 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 KNOWLEDGE OF THESE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION TO BE SUBMITTED, I AM AWARE THAT THERE ARE TRUE, ACCURATE AND COMPLETE INFORMATION THAT THESE 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. § 1519. (Penalties under these statutes may include fines, up to \$10,000 and or maximum imprisonment of between 6 months and 3 years.)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077
 FACILITY _____
 LOCATION _____
ATTN: DAVID ORNDORF

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

PA0025625
 PERMIT NUMBER

006 A
 DISCHARGE NUMBER

BOX INTAKE SCREEN BACKWASH
(SOBR 05) Form Approved **12305**
P 4 FINAL OMB No. 2040-0004
HAJORE Approval expires 10-31-94

MONITORING PERIOD
 FROM YEAR **95** MO **08** DAY **01** TO YEAR **95** MO **08** DAY **31**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)


*** NO DISCHARGE ***

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	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.002	0.016	(03)	*****	*****	*****		0 1/4	EST	
	PERMIT REQUIREMENT	REPORT NO. AVG	REPORT DAILY MAX	MGD	*****	*****	*****	****			WEEKLY ESTIMA
	SAMPLE MEASUREMENT										
	PER. REQUIRE.										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 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 412 393-5113
 AREA CODE NUMBER
 DATE 95 09 25
 YEAR MO DAY

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

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

NAME **BEAVER VALLEY POWER STATION**

ADDRESS **P.O. BOX 4**

ATTN: DAVID ORNDORF

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: DAVID ORNDORF

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

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

007 A

DISCHARGE NUMBER

AUX. INTAKE SYSTEM

(SUBR 95)

Form Approved. **12345**

F @ FINAL

OMB No. 2040-0004

HAJOR

Approval expires 10-31-94

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	08	01		95	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

***** NO DISCHARGE *****

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only) (46-53)			QUALITY OR CONCENTRATION (4 Card Only) (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMP TYP. (69-71)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0		NO FLOW			(03)	*****	*****	*****			
EFFLUENT GROSS VALUE CHLORINE, FREE AVAILABLE 50064 1 0 1	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY HI	NGD	*****	*****	*****	****			WEEKLY ESTIP
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	0.2	0.5	****			WEEKLY GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	DAILY HI	INST. MAX	NG/L			
	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

David Orndorf
Chemistry Manager

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 13 USC § 1319 (Penalties under these statutes may include fines, up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

David Orndorf
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412 393-5113 95 09 25
AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
MONITORING FOR FLOW AND FREE AVAILABLE CHLORINE ARE REQUIRED ONLY DURING THOSE PERIODS OF DISCHARGE FROM THE ALTERNATE FLOW PATH OF THE REACTOR PLANT RIVER WATER SYSTEM. NO DISCHARGE

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **SPAWER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077
 FACILITY _____
 LOCATION _____
ATTN: DAVID ORNDORF

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

PA0025615 (17-19)
 PERMIT NUMBER
008 A
 DISCHARGE NUMBER

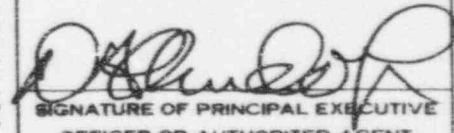
UNIT 1 COOLING TOWER PUMPHOUSE
(SOBR 05) Form Approved. **12345**
P M FINAL OMB No. 2040-0034
MAJOR Approval expires 10-31-94

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	08	01		95	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

***** NO DISCHARGE [] *****
 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 (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	*****	*****		7.89	*****	7.97	(12)	0	2/31	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0	*****	9.0	SD			TWICE/GRAB MONTH
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	10.7	15.2	(19)	0	2/31	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	30 NO AVG	100 DAILY MX	NG/L			TWICE/GRAB MONTH
OIL AND GREASE FROM EXTRA GRAY WATER	SAMPLE MEASUREMENT	*****	*****		< 5	< 5	< 5	(19)	0	2/31	G
00556 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	15 30DA AVG	20 DAILY MX	30 INST MAX	NG/L			TWICE/GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.001	0.001	(03)	*****	*****	*****		0	1/4	EST
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	NGD	*****	*****	*****	***			WEEKLY ESTIMA
	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		
David Orndorf Chemistry Manager			412 393-5113	95	09
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	YEAR	MO	DAY

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

PA0025615
 PERMIT NUMBER

010 A
 DISCHARGE NUMBER

UNIT 2 COOLING WATER
(SOBR 05) Form Approved. 12-5
F & FINAL OMB No. 2040-0004
MAJOR Approval expires 10-31-94

FACILITY
 LOCATION
ATTN: DAVID ORNDORF

MONITORING PERIOD							
YEAR	MO	DAY	TO	YEAR	MO	DAY	
95	08	01	TO	95	08	31	
(20-21)		(22-23)		(24-25)		(26-27)	
(28-29)		(30-31)					

***** NO DISCHARGE *****
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61))			QUALITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61))				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPL TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
00400 1 0 0 EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	*****	*****	****	7.52	*****	8.31	(12)	0	1/7	G	
50050 1 0 0 EFFLUENT GROSS VALUE CHLORINE, FREE AVAILABLE	PERMIT REQUIREMENT	*****	*****	****	MINIMUM	*****	MAXIMUM	50	0	1/7	MEAS	
50060 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	*****	0	1/7	G	
	SAMPLE MEASUREMENT	3.600	4.320	(03)	*****	*****	*****	*****	0	1/7	G	
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MAX	MGD	*****	*****	*****	*****	0	1/7	G	
	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	(19)	0	1/7	G	
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.2	0.5	DAILY MAX INST MAX	MG/L	0	1/7	G
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
David Orndorf
 Chemistry Manager
 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.)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
412 393-5113
 AREA CODE NUMBER
 DATE
95 09 25
 YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
PA0025615
 * PERMIT NUMBER

011 A
 DISCHARGE NUMBER

DIESEL GEN & TURBINE DRAINS
 (SOBB 05) Form Approved. 12345
F A FINAL OMB No. 2040-0004
MAJOR Approval expires 10-31-94

FACILITY
 LOCATION
ATTN: DAVID ORNDORF

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
95 08 01 TO **95 08 31**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

***** NO DISCHARGE *****
 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 (38-45)				NO EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.002	0.002	(03)	*****	*****	*****				
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY BE	MGD	*****	*****	*****	****			EST
	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
David Orndorf
 Chemistry Manager
 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 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 5 years.)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
412 393-5113
 AREA CODE NUMBER
 DATE
95 09 25
 YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) **PA0625615** (17-19)
 PERMIT NUMBER **012 A**
 DISCHARGE NUMBER

BLOWDOWN FROM THE HVAC C.TOWER
 (SUBR 05) Form Approved. **12345**
FINAL OMB No. 2040-0004
MAJOR Approval expires 10-31-94

FACILITY
 LOCATION
ATTN: DAVID ORNDORF

MONITORING PERIOD
 FROM YEAR **95** MO **08** DAY **01** TO YEAR **95** MO **08** DAY **31**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

***** NO DISCHARGE *****
 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	UNITS			
PH 00000 1 0 0 EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		8.21	*****	8.21	(12)	0	1/31	G
	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0				ONCE/ YEAR
	SAMPLE MEASUREMENT	0.001	0.001	(03)	*****	*****	*****	50			ONCE/ YEAR
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY BY HGD		*****	*****	*****	****	0	1/31	EST
	SAMPLE MEASUREMENT										ONCE/ YEAR
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
David Orndorf
Chemistry Manager
 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 \$100,000 and/or maximum imprisonment of between 6 months and 5 years.)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE **412 393-5113** DATE **95 09 25**
 AREA CODE NUMBER YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077

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

PA0025615
 PERMIT NUMBER

013 A
 DISCHARGE NUMBER

UNCONTAMINATED STORMWATER
 (SUBR 05) Form Approved 12305
P & FINAL OMB No. 2040-0004
HAJOR Approval expires 10-31-94

FACILITY
 LOCATION
ATTN: DAVID ORNDORF

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	08	01		95	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

***** NO DISCHARGE *****
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only) (46-53)			QUALITY OR CONCENTRATION (4 Card Only) (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THROUGH TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	0.008	0.014	(03)	*****	*****	*****	*****	0	1/7	EST	
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY BE	NGD	*****	*****	*****	****		WEEKLY ESTINA	
	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
David Orndorf
 Chemistry Manager
 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.)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 412 393-5113
 AREA CODE NUMBER
 DATE
 95 09 25
 YEAR '40 DAY

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

THERE SHALL BE NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

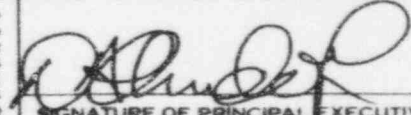
PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077
 FACILITY
 LOCATION
ATTN: DAVID ORNDORF

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (Part 2)
 (2-16) (17-19)
BA0025615 (PERMIT NUMBER)
101 A (DISCHARGE NUMBER)
 MONITORING PERIOD
 FROM YEAR **95** MO **08** DAY **01** TO YEAR **95** MO **08** DAY **31**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

101 CHEMICAL WASTE TREATMENT
 (SOBR 05) Form Approved. 12345
P * FINAL OMB No. 2040-0004
BAJOR Approval expires 10-31-94

*** NO DISCHARGE [] ***
 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 (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH		*****	*****		7.17	*****	8.42	(12)	0	1/4	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0				WEEKLYGRAB
SOLIDS, TOTAL SUSPENDED		*****	*****		*****	13.1	26.0	(19)	0	1/7	2HC
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30	100				WEEKLYCOMPOSITE
OIL AND GREASE FROM EXTRA GRAB NETS		*****	*****		*****	< 5	< 5	(19)	0	1/7	G
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15	20				WEEKLYGRAB
NITROGEN, AMMONIA TOTAL (AS N)		*****	*****		*****	NA	NA	(19)	0	NA	NA
00610 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT				WEEKLYGRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.003	0.014	(03)	*****	*****	*****		0	1/DAY	CONT.
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	NGD	*****	*****	*****	****			DAILY CONTIN
HYDRAZINE		*****	*****		*****	NA	NA	(19)	0	NA	NA
81313 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT				WEEKLYGRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER David Orndorf Chemistry Manager 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 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 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE		DATE		
			412	393-5113	95	09	25
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
HYDRAZINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF WET LAYUP.
NA = Not Applicable, wet layup conditions did not exist.

PERMITTEE NAME/ADDRESS (include Facility Name/Location if different)
 NAME **HEAVY VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077

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

PA0025615
 PERMIT NUMBER

192 A
 DISCHARGE NUMBER

102 INTAKE SCREENHOUSE
(SOBR 05) Form Approved. **12345**
F # FINAL OMB No. 2040-0004
MAJOR Approval expires 10-31-94

FACILITY
 LOCATION
ATTN: DAVID ORNDORF

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
95	08	01		95	08	31

***** NO DISCHARGE [] *****
 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 (46-53) (54-61)				NO. EX (62-67)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
00400 1 0 0 EFFLUENT GROSS VALUE		*****	*****		7.87	*****	7.93	(12)	0	2/31	G
SOLIDS, TOTAL SUSPENDED		*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	50		TWICE/GRAB MONTH	
00530 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	5.1	6.1	(19)	0	2/31	G
OIL AND GREASE FROM FINE GRAV NETS		*****	*****	****	*****	30 NO AVG	100 DAILY HI	MG/L		TWICE/GRAB MONTH	
00556 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	< 5	< 5	(19)	0	2/31	G
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		*****	*****	****	*****	15 NO AVG	20 DAILY HI	MG/L		TWICE/GRAB MONTH	
50050 1 0 0 EFFLUENT GROSS VALUE		0.001	0.001	(03)	*****	*****	*****		0	2/31	EST
		REPORT NO AVG	REPORT DAILY HI	MGD	*****	*****	*****	****		TWICE/ESTIMA MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 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.)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 412 | 393-5113
 AREA CODE | NUMBER
 DATE
 95 | 09 | 25
 YEAR | MO | DAY

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

Facility Name/Location if different
BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX #
ATTN: DAVID ORNDORF
SLIPPINGPORT PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
PA0025615
 PERMIT NUMBER

103 A
 DISCHARGE NUMBER

SLUDGE SETTLING BASIN
 (SOBR 05) Form Approved. 12345
 P # PINAL OMB No. 2040-0004
HAJOR Approval expires 10-31-94

FACILITY
 LOCATION
ATTN: DAVID ORNDORF

MONITORING PERIOD
 FROM YEAR **95** MO **08** DAY **01** TO YEAR **95** MO **08** DAY **31**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

***** NO DISCHARGE *****
 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 (64-65)	SAMPL. TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH		*****	*****		7.63	*****	7.74	(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	6.0	*****	9.0				
	PERMIT REQUIREMENT	*****	*****	****	MINIMUM	*****	MAXIMUM				TWICE/GRAB MONTH
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	****	*****	<4	<4	50			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30	100	(19)			0 2/31 24HC
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.003	0.003	(03)	*****	NO AVG	DAILY MX	MG/L			0 2/31 EST
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	HGD	*****	*****	*****	*****			0 2/31 EST
	SAMPLE MEASUREMENT										TWICE/ESTIMA MONTH
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
David Orndorf
Chemistry Manager
 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. I 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 5 years.)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
412 393-5113
 AREA CODE NUMBER
 DATE
95 09 25
 YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (include Facility Name/Location if different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077
 FACILITY _____
 LOCATION _____
ATTN: DAVID ORNDORF

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) **PA0025615** (17-19) **110 A**
 PERMIT NUMBER DISCHARGE NUMBER
 MONITORING PERIOD
 FROM YEAR **95** MO **08** DAY **01** TO YEAR **95** MO **08** DAY **31**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

UNIT 2 SERVICE WATER BACKWASH
(SOBR 05) Form Approved. **12345**
P N FINAL OMB No. 2040-0004
MAJOR Approval expires 10-31-94

***** NO DISCHARGE *****
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only) (46-53) (54-61)			QUALITY OR CONCENTRATION (4 Card Only) (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			
FLOW IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	NO FLOW			(03)	*****	*****	*****			
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY BK	MGD		*****	*****	*****	****		WEEKLY/ESTINA
	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
 David Orndorf
 Chemistry Manager
 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.)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 412 | 393-5113
 DATE: 95 | 09 | 25
 AREA CODE NUMBER YEAR MO DAY

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

NO DISCHARGE

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

NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SNIPPINGPORT PA 15077

FACILITY _____
 LOCATION _____
ATTN: DAVID ORNDORF

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

PA0025615
 PERMIT NUMBER

111 A
 DISCHARGE NUMBER

111 DIESEL GENERATOR BLDG
(SOBR 05) Form Approved **12345**
P * FINAL OMB No. 2040-0001
HAJ0R Approval expires 10-31-94

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	08	01		95	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

***** NO DISCHARGE [] *****
 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 (38-45)				NO. EX (62-67)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH		*****	*****		6.80	*****	7.00	(12)	0	1/7	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0				
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		MINIMUM	*****	MAXIMUM	50			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	<4	<4	(19)	0	1/7	G
OIL AND GREASE FROM EXTRA-GRAV METER	SAMPLE MEASUREMENT	*****	*****			NO AVG	DAILY MAX	MG/L			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30	100				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.001	0.001	(03)	<5	<5	<5	(19)	0	1/7	G
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MAX	MGD	15	30DA AVG	DAILY MAX	INST MAX	MG/L		
	SAMPLE MEASUREMENT				*****	*****	*****	****			EST
	PERMIT REQUIREMENT				*****	*****	*****	****			EST
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
David Orndorf
 Chemistry Manager
 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 WITH 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.)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE **412 393-5113**
 AREA CODE NUMBER
 DATE **95 09 25**
 YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **HEAVY VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
PA0025615
 PERMIT NUMBER
113 A
 DISCHARGE NUMBER

UNIT 2 SEWAGE TMT PLANT
 (SUBR 05) Form Approved. 12345
F - FINAL OMB No. 2040-0004
MAJOR Approval expires 10-31-94

FACILITY _____
 LOCATION _____
ATTN: DAVID ORNDORF

MONITORING PERIOD
 FROM YEAR **95** MO **08** DAY **01** TO YEAR **95** MO **08** DAY **31**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

***** NO DISCHARGE [] *****
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(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			
PH	SAMPLE MEASUREMENT	*****	*****		7.01	*****	7.41	(12)		G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0			TWICE/GRAB MONTH
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	18.2	20.8	(19)		8HC
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30	60			TWICE/COMPOUND MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.007	0.013	(03)	*****	*****	*****			1/7 MEASRD
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.003	REPORT	NO AVG DAILY BX MGD	*****	*****	*****	****		WEEKLY MEASRD
COLIFORM, FCAL GENERAL	SAMPLE MEASUREMENT	*****	*****		*****	0	*****	(13)		G
74055 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	200	*****	*/100NL		TWICE/GRAB MONTH
BOD, CARBOHYDROUS 05 DAY, 20C	SAMPLE MEASUREMENT	*****	*****		*****	3	3	(19)		8HC
80082 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	25	50			TWICE/COMPOUND MONTH
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
David Orndorf
 Chemistry Manager
 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 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 5 years.)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 412 | 393-5113
 AREA CODE | NUMBER
 DATE
 95 | 09 | 25
 YEAR | MO | DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077

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

PA0025615
 PERMIT NUMBER

201 A
 DISCHARGE NUMBER

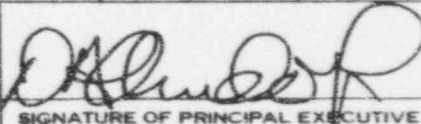
201 SEPTEMBER REGENERANTS
(SOBR 05) Form Approved. **12345**
P # FINAL OMB No. 2040-0004
MAJOR Approval expires 10-31-94

FACILITY
 LOCATION
ATTN: DAVID ORNDORF

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	08	01		95	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

***** NO DISCHARGE *****
 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 (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH		*****	*****					(12)		
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	50		TWICE/GRAB MONTH
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****			(19)		
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 MD AVG	100 DAILY MX	MG/L		TWICE/GRAB MONTH
OIL AND GREASE FROM EXTRA GRAY WELLS	SAMPLE MEASUREMENT	*****	*****		*****			(19)		
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15 MD AVG	20 DAILY MX	MG/L		TWICE/GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	No FLOW			(03)	*****	*****	*****		
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		TWICE/ESTIMA MONTH
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER David Orndorf Chemistry Manager 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		
			412 393-5113 AREA CODE NUMBER	95	09	25 YEAR MO DAY

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

NO DISCHARGE

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

NAME **BEAVER VALLEY POWER STATION**

ADDRESS **P.O. BOX 4**

ATTN: DAVID ORNDORF

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: DAVID ORNDORF

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

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

203 A

DISCHARGE NUMBER

MAIN SEWAGE TMT PLANT

(SUBR 05) Form Approved. 12345

F & FINAL OMB No. 2040-0004

MAJOR Approval expires 10-31-94

MONITORING PERIOD							
YEAR	MO	DAY	TO	YEAR	MO	DAY	
95	08	01		95	08	31	
(20-21)		(22-23)		(24-25)		(26-27)	
(28-29)		(30-31)					

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUALITY OR CONCENTRATION				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPL. TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS			
PH	*****	*****	*****	*****	6.03	*****	6.40	(12)	0	2/31	G
EFFLUENT GROSS VALUE SOLIDS, TOTAL SUSPENDED	*****	*****	*****	*****	*****	*****	9.0	*****	0	2/31	8HC
EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT	*****	*****	*****	*****	*****	*****	*****	*****	0	2/31	8HC
EFFLUENT GROSS VALUE COLIFORM, FCAL GENERAL	*****	*****	*****	*****	*****	*****	*****	*****	0	1/7	MEAS
EFFLUENT GROSS VALUE BOD, CARBONACEOUS 05 DAY, 20C	*****	*****	*****	*****	*****	*****	*****	*****	0	2/31	G
EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	*****	*****	0	2/31	8HC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

David Orndorf
Chemistry Manager

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]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412 393-5113 95 09 25
AREA CODE NUMBER YEAR MO DAY

PERMITTEE NAME/ADDRESS (include Facility Name/Location if different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077

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

PA0025615
 PERMIT NUMBER

211 A
 DISCHARGE NUMBER

211 TURBINE BLDG
(SUBB 05) Form Approved. **12345**
P # FINAL OMB No. 2040-0004
MAJOR Approval expires 10-31-94

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	08	01		95	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

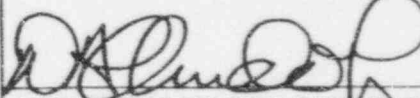
***** NO DISCHARGE *****
 NOTE: Read instructions before completing this form.

FACILITY
 LOCATION
ATTN: DAVID ORNDORF

PARAMETER (32-37)	SAMPLE MEASUREMENT	(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			
PH		*****	*****		6.78	*****	8.00	(12)	0	1/7	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM				WEEKLYGRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	<4	55 <4	(19)	0	1/7	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 NO AVG	100 DAILY BK	MG/L			WEEKLYGRAB
OIL AND GREASE FROM EXTRA GRAY NETS	SAMPLE MEASUREMENT	*****	*****		<5	<5	<5	(19)	0	1/7	G
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	15 30DA AVG	20 DAILY BK	30 INST MAX	MG/L			WEEKLYGRAB
FLOW, IN CONDUIT OR TRAP TREATMENT PLANT	SAMPLE MEASUREMENT	0.001	0.001	(03)	*****	*****	*****		0	1/7	EST
500.0 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY BK	MGD	*****	*****	*****	****			WEEKLYESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
David Orndorf
Chemistry Manager
 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
412 393-5113
 AREA CODE NUMBER
 DATE
95 09 25
 YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077
 FACILITY
 LOCATION
ATTN: DAVID ORNDORF

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

PA0025615 (2-16) **213 A** (17-19)
 PERMIT NUMBER DISCHARGE NUMBER

UNIT 2 COOL TOWER Pumphouse
 (SOBR 05) Form Approved. 12345
 P # FINAL OMB No. 2040-0004
 MAJOR Approval expires 10-31-94

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	08	01		95	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

***** NO DISCHARGE *****
 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 (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS			
00400 1 0 0 EFFLUENT GROSS VALUE SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		6.0 MINIMUM	*****	9.0 MAXIMUM		(12)		TWICE/CRAB MONTH
	PERMIT REQUIREMENT	*****	*****	****							
00530 1 0 0 EFFLUENT GROSS VALUE OIL AND GREASE PROM EXTR GRAY NETE	SAMPLE MEASUREMENT	*****	*****		*****	30 NO AVG	100 DAILY MX		(19)		TWICE/CRAB MONTH
	PERMIT REQUIREMENT	*****	*****	****							
00556 1 0 0 EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	No Flow			(03)	*****	*****	*****			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY: BE	MGD	*****	*****	*****	****			WEEKLY/STINA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 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 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 5 years.)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 412 393-5113
 DATE 95 09 25
 AREA CODE NUMBER YEAR MO DAY

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

No Discharge

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTH; DAVID ORNDORF
SNIPPINGPORT PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

PA0025615
 PERMIT NUMBER

301 A
 DISCHARGE NUMBER

UNIT 2 AUX BOILER BLOWDOWN
 (SUBR 05) Form Approved. 12345
P # FINAL OMB No. 2040-0004
MAJOR Approval expires 10-31-94

FACILITY
 LOCATION
ATTH; DAVID ORNDORF

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	08	01		95	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

***** NO DISCHARGE *****
 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 (38-45)				NO EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE		*****	*****		*****			(19)			
	PERMIT REQUIREMENT	*****	*****	***	*****	30	100				
OIL AND GREASE FROM EXTRA-GRAV MESH 00556 1 0 0 EFFLUENT GROSS VALUE		*****	*****		*****	NO AVG	DAILY MX	MG/L			TWICE/GRAB MONTH
	PERMIT REQUIREMENT	*****	*****	***	*****	15	20				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE		NO FLOW		(03)	*****	*****	*****				
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	HGD	*****	*****	*****	***			WEEKLY TESTING
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
David Orndorf
Chemistry Manager
 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.)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
412 393-5113
 AREA CODE NUMBER

DATE
95 09 25
 YEAR MO DAY

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

NO DISCHARGE

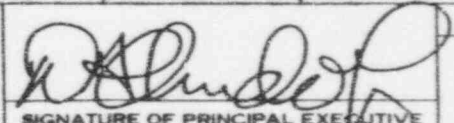
PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 8**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077
 FACILITY _____
 LOCATION _____
ATTN: DAVID ORNDORF

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
PA0025615 (PERMIT NUMBER)
303 A (DISCHARGE NUMBER)
 MONITORING PERIOD
 FROM YEAR **95** MO **08** DAY **01** TO YEAR **95** MO **08** DAY **31**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

UNIT 1 OIL WATER SEPARATOR (SOBR 05) Form Approved. **12345**
P # FINAL OMB No. 2040-0004
MAJOR Approval expires 10-31-94

***** NO DISCHARGE [] *****
 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 (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (54-61)	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****		7.30	*****	7.30	(12)	0	1/7	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0				WEEKLYGRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	<4	<4	(19)	0	1/7	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30	100				WEEKLYGRAB
OIL AND GREASE FROM EXTRA GRAB WITH	SAMPLE MEASUREMENT	*****	*****		*****	<5	<5	(19)	0	1/7	G
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15	20				WEEKLYGRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.001	0.005	(03)	*****	*****	*****		0	1/7	EST
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY HI	MGD	*****	*****	*****	****			WEEKLYESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER David Orndorf Chemistry Manager 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 412 393-5113	DATE 95 09 25		
		AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
The unit one oil & water separator was isolated for cleaning during the last three weeks of August 1995.

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

NAME **BEAVER VALLEY POWER STATION**

ADDRESS **P.O. BOX 4**

ATTN: DAVID ORNDORF

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: DAVID ORNDORF

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

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

313 A

DISCHARGE NUMBER

313 TURBINE BLDG DRAIN

(SUBR 95)

Form Approved. **12345**

P * FINAL

OMB No. 2040-0004

MAJOR

Approval expires 10-31-94

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	08	01		95	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

***** NO DISCHARGE [] *****

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 (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLING TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
PH		*****	*****		7.14	*****	7.59	(12)	0	1/7	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0				WEEKLYGRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	<4	<4	(19)	0	1/7	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 NO AVG	100 DAILY MX	MG/L			WEEKLYGRAB
OIL AND GREASE FRESH EXTRACTION	SAMPLE MEASUREMENT	*****	*****		*****	<5	<5	(19)	0	1/7	G
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15 NO AVG	20 DAILY MX	MG/L			WEEKLYGRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.001	0.001	(03)	*****	*****	*****		0	1/7	EST
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****			WEEKLYESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

David Orndorf
Chemistry Manager

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 13 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]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

412 393-5113 95 09 25
AREA CODE NUMBER YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

PA0025615
 PERMIT NUMBER

401 A
 DISCHARGE NUMBER

CHEN. FEED AREA OF AUX BOILERS
(SOBR 05) Form Approved. **12345**
P & FINAL OMB No. 2040-0004
HAJOR Approval expires 10-31-94

FACILITY _____
 LOCATION _____
ATTN: DAVID ORNDORF

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
95	08	01	TO	95	08	31
		(20-21)	(22-23)	(24-25)		
		(26-27)	(28-29)			(30-31)

***** NO DISCHARGE *****
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (46-53)			QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
PH	SAMPLE MEASUREMENT	*****	*****						(12)	
00400 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	REPORT MAXIMUM	50		TWICE/GRAB MONTH
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****				(19)	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 NO AVG	100 DAILY MX	MG/L		TWICE/GRAB MONTH
OIL AND GREASE FRESH EXTRA GRAV METER	SAMPLE MEASUREMENT	*****	*****		*****				(19)	
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15 NO AVG	20 DAILY MX	MG/L		TWICE/GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	NO FLOW		(03)	*****	*****	*****			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		WEEKLY ESTIMATE
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 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 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 5 years)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 412 393-5113
 AREA CODE NUMBER
 DATE
 95 09 25
 YEAR MO DAY

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

NO DISCHARGE

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

PA0025615
 PERMIT NUMBER

409 &
 DISCHARGE NUMBER

CONDENSATE BLOWDOWN & RIVER WAT (SUBR 05) Form Approved. **12305**
F & FINAL OMB No. 2040-0004
MAJOR Approval expires 10-31-94

FACILITY
 LOCATION
ATTN: DAVID ORNDORF

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	08	01		95	08	31

***** NO DISCHARGE [] *****
 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	UNITS			
PH		*****	*****		7.75	*****	8.97	(12)	0	1/7	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0				
SOLIDS, TOTAL SUSPENDED		*****	*****		MINIMUM	*****	MAXIMUM	50			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	5.8	9.7	(19)	0	1/7	G
OIL AND GREASE FROM EXTREME GRAV WHTH	SAMPLE MEASUREMENT	*****	*****		*****	NO AVG	DAILY HI	MG/L			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15	20	(19)	0	1/7	G
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	*****	*****		*****	NO AVG	DAILY HI	MG/L			
00610 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT	(19)	0	1/7	G
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.004	0.010	(03)	*****	*****	*****	MG/L			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	****	0	1/7	ESC
HYDRAZINE	SAMPLE MEASUREMENT	*****	*****		*****	*****	NA	(19)	0	NA	NA
01313 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0				
	SAMPLE MEASUREMENT						DAILY HI	MG/L			
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
David Orndorf
 Chemistry Manager
 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.)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 412 393-5113
 DATE: 95 09 25

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
HYDRAZINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF WET LAYUP.
NA = Not Applicable, wet layup conditions did not exist.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SNIPPINGPORT PA 15077
 FACILITY _____
 LOCATION _____
ATTN: DAVID ORNDORF

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

PA0025615
 PERMIT NUMBER

413 A
 DISCHARGE NUMBER

ROCK FUEL STORAGE DRAIN
(SOBR 05) Form Approved 12305
P P FINAL OMB No. 2040-0004
HAJOK Approval expires 10-31-94

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
95	08	01		95	08	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

***** NO DISCHARGE [X] *****
 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 (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****			*****			(12)		
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	50		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****				(19)		
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	30 NO AVG	100 DAILY ME	MG/L		WEEKLY	GRAB
OIL AND GREASE FREON EXTRA GRAV METH	SAMPLE MEASUREMENT	*****	*****		*****				(19)		
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	15 NO AVG	20 DAILY ME	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	NO FLOW			(03)	*****	*****	*****			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY ME	MGD	*****	*****	*****	***		WEEKLY	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 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.)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 412 393-5113
 DATE 95 25

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

NAME/ADDRESS (include location if different)

CAVER VALLEY POWER STATION

P.O. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGPORT

PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

PA0025615
PERMIT NUMBER

501 A
DISCHARGE NUMBER

UNIT 1 GENRTR BLDGWN FILT BW (SOBR 05)

Form Approved 12385

F - FINAL OMB No. 2040-0004

MAJOR Approval expires 10-31-94

CITY LOCATION

ATTN: DAVID ORNDORF

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	08	01		95	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

***** NO DISCHARGE *****
NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only) (46-53)			QUALITY OR CONCENTRATION (4 Card Only) (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLING TYPE (69-71)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****					
	PERMIT REQUIREMENT	*****	*****	****	*****	30	100			WEEKLY GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	NO FLOW			(03)	NO AVG	DAILY MX	MG/L		
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	HGD	*****	*****	*****	****		WEEKLY SYT
	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

David Orndorf
Chemistry Manager

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 33 U.S.C. § 1319 (Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 6 months and 5 years.)

David Orndorf
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 412 393-5113
DATE: 95 09 25

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

DISCHARGE MONITORING REPORT SUPPLEMENTAL SEWAGE SLUDGE REPORT

Month: AUGUST

Year: 1995

Instructions:

1. Complete monthly and submit with each DMR. Attach additional sheets and comments as needed for completeness and clarity.
2. Sludge production information will be used to evaluate plant performance. Report only sludge which has been removed from digesters and other solids which have been permanently removed from the treatment process. Do not include sludge from other plants which is processed at your facility.
3. In the disposal site section, report all sludge leaving your facility for disposal. If another plant processes and disposes of your sludge, just provide the name of that plant. If you dispose of sludge from other plants, include their tonnage in the disposal site section and provide their names and individual dry tonnage on the back of this form.
4. If no sludge was removed, note on form.

Permittee: Duquesne Light Co.
 Plant: Beaver Valley Sewer Station Unit I
 NPDES: PA 0005615
 Municipality: Shippingport Borough
 County: Beaver

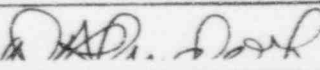
For sludge that is incinerated:
 Pre-incineration weight = dry tons
 Post-incineration weight = dry tons

SLUDGE PRODUCTION INFORMATION (prior to incineration)

HAULED AS LIQUID SLUDGE				HAULED AS DEWATERED SLUDGE			
(Gallons)	X (% Solids)	(Conversion Factor)	= Dry Tons	(Tons of Dewatered Sludge)	X (% Solids)	X (.01)	= Dry Tons
<u>8000</u>	<u>2%</u>	<u>.000417</u>	<u>0.667</u>			<u>.01</u>	
TOTAL			= <u>0.667</u>	TOTAL			= <u> </u>

DISPOSAL SITE INFORMATION: List all sites, even if not used this month

	Site 1	Site 2	Site 3	Site 4
Name:	<u>Beaver Valley Sewer Treatment Plant</u>			
Permit No.:	<u>PA0005615</u>			
Dry Tons Disposed:	<u>0.667</u>			
Type: (check one)				
Landfill				
Agr. Utilization				
Other (specify)				
County:	<u>Beaver</u>			


 CHEMISTRY MANAGER 9/27/95 (412) 393-5113

DISCHARGE MONITORING REPORT SUPPLEMENTAL SEWAGE SLUDGE REPORT

Month: AUGUST

Year: 1995

Instructions:

1. Complete monthly and submit with each DMR. Attach additional sheets and comments as needed for completeness and clarity.
2. Sludge production information will be used to evaluate plant performance. Report only sludge which has been removed from digesters and other solids which have been permanently removed from the treatment process. Do not include sludge from other plants which is processed at your facility.
3. In the disposal site section, report all sludge leaving your facility for disposal. If another plant processes and disposes of your sludge, just provide the name of that plant. If you dispose of sludge from other plants, include their tonnage in the disposal site section and provide their names and individual dry tonnage on the back of this form.
4. If no sludge was removed, note on form.

Permittee: Duquesne Light Co.
 Plant: Beaver Valley Power Station Unit II
 NPDES: PA 0025615
 Municipality: Shippingport Borough
 County: Beaver

For sludge that is incinerated:
 Pre-incineration weight = _____ dry tons
 Post-incineration weight = _____ dry tons

SLUDGE PRODUCTION INFORMATION (prior to incineration)

HAULED AS LIQUID SLUDGE				HAULED AS DEWATERED SLUDGE			
(Gallons)	X (% Solids)	(Conversion Factor)	= Dry Tons	(Tons of Dewatered Sludge)	X (% Solids)	X (.01)	= Dry Tons
20000	2%	.0000417	1.668			.01	
			TOTAL =				TOTAL =
			1.668				

DISPOSAL SITE INFORMATION: List all sites, even if not used this month

	Site 1	Site 2	Site 3	Site 4
Name:	Beaver Valley Sewage Treatment Plant			
Permit No.:	PA0025615			
Dry Tons Disposed:	1.668			
Type: (check one)				
Landfill				
Agr. Utilization				
Other (specify)				
County:	Beaver			

[Signature] CHEMISTRY MANAGER 9/27/95 (412) 373-5113