



Nuclear Group
P.O. Box 4
Shippingport, PA 15077-0004

Telephone (412) 393-6000

May 20, 1992

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

NPDES Monthly Reports, EPA Permit No. PA0025615 & PA001589

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.

Very truly yours

T. P. Noonan
General Manager
Nuclear Operations Unit

DNH/ijj

280000

9205290164 920430
PDR ADOCK 05000334
R PDR

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Nuclear Group
P.O. Box 4
Shippingport, PA 15077-0004

Telephone (412) 393-6000

May 20, 1992

Department of Environmental Resources
Bureau of Water Quality Management
400 Waterfront Drive
Pittsburgh, PA 15222

Gentlemen:

NPDES Monthly Reports for Duquesne Light Company, Beaver Valley Power Station and Shippingport Atomic Power Plant for April 1992 are 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.

Very truly yours,

T. P. Noonan
General Manager
Nuclear Operations

DNH/ijj



Duquesne Light

Nuclear Group
P.O. Box 4
Shippingport, PA 15077-0004

Telephone (412) 393-6000

May 20, 1992
ND1PCD: 1638

U.S. Environmental Protection Agency
Region III, Pennsylvania Section (3WM52)
Water Permits Branch
Water Management Division
841 Chestnut Street
Philadelphia, PA 19107

NPDES Monthly Reports, EPA Permit Number PA0025615 & PA0001589

Gentlemen:

This letter forwards copies of our NPDES Monthly Reports as submitted to the Pennsylvania Department of Environmental Resources, Bureau of Water Quality Management.

Very truly yours,

T. P. Noonan
General Manager
Nuclear Operations Unit

DNH/ijj



Nuclear Group
P.O. Box 4
Shippingport, PA 15077-9004

Telephone (412) 353-6000

May 20, 1992

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

EPA Permit No. PA0025615 Reportable Occurrence

Dear Sir:

As required by the EPA Permit No. PA0025615, the following information is provided in regard to a reportable occurrence at Beaver Valley Power Station:

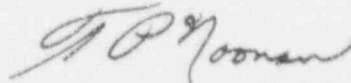
Discharge 203, Unit One Sewage Treatment Plant, exceeded the monthly average specification of 30.00 mg/l TSS in April 1992. No individual sample exceeded the daily maximum average of 60.00 mg/l but samples measured 59.40 mg/l and 48.20 mg/l resulting in a monthly average of 53.80 mg/l.

Elevated TSS in the treatment plant effluent was a result of problems which began in March 1992 and were described in the reportable occurrence letter of April 20, 1992. Efforts through March and April to optimize plant operation through adjustments in flow rate, blowdown schedules, sludge age and chemical treatment were successful as noted by improvements in CBOD₅ and fecal coliform results which were reduced to 8.00 mg/l and 17 colonies/100 ml respectively, in April.

The Total Suspended Solids has now been reduced with the monthly average TSS results in May 1992 being 25.10 mg/l. Cumulative efforts to enhance operation have resulted in an improved effluent quality. Since all other parameters were in specification and the proportional volume of discharge 203 is less than thirty percent of the flow discharged to the environment through outfall 003, then no environmental impact or harm is suspected.

If you have any questions concerning this report, please do not hesitate to contact me.

Very truly yours,

A handwritten signature in cursive script, appearing to read "T. P. Noonan".

T. P. Noonan
General Manager
Nuclear Operations Unit

DNH/ijj


PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME HEAVEN VALLEY POWER STATION
ADDRESS Box 4
ATTN: ANDREW DULICK
SHIPPINGPORT PA 15077
FACILITY
LOCATION
ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
 (12-16) (17-19)
PAG025615 (PERMIT NUMBER)
101 A (DISCHARGE NUMBER)
MONITORING PERIOD
 FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUPER 05) Form Approved. OMB No. 2040-0004. Approval expires 6-30-91.
 F - FINAL
 101 CHEMICAL WASTE TREATMENT

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

PARAMETER (32-37)	SAMPLE MEASUREMENT	(1 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			
PH		*****	*****	()	7.85	*****	8.44	(12)	0	1/wk G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0			WEEKLY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	5.57	8.54	(19)	0	1/wk 2HC
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30	100			WEEKLY COMP-2
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	*****	*****	()	*****	5.47	6.88	(19)	0	1/wk G
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	15	20			WEEKLY GRAB
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	*****	*****	()	*****			(19)		
00610 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT	REPORT			WEEKLY GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.005	0.029	(03)	*****	*****	*****	()	0	D CONT
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	*****	*****	*****	*****	*****		DAILY CONTIN
HYDRAZINE	SAMPLE MEASUREMENT	*****	*****	()	*****			(19)		
81313 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT	REPORT			WEEKLY GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER A. M. Dulick 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 KNOWLEDGE 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 § 1919. Penalties under these statutes may include fines up to \$250,000 and/or maximum imprisonment of between 6 months and 5 years.	TELEPHONE		DATE		
		412 393-5113		92	05	18
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		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.
 No applicable wet layup conditions in effect.

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

NAME HEAVEN VALLEY POWER STATION

ADDRESS E.C. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

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

PA0025615

PERMIT NUMBER

201 A

DISCHARGE NUMBER

MAJOR
(SUBR 05)
F - FINAL
201 SOFTENER REGENERANTS

Form Approved
OMB No. 2040-0004
Approval expires 6-30-91.

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	04	01		92	04	30
	(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 (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH		*****	*****	()	7.34	*****	7.47	(12)	0	2/MO	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		TWICE/GRAB MONTH	
50400 1 0 0 SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	4.00	4.00	(19)	0	2/MO	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 Mnth AVG	100 DLY MAX	MG/L		TWICE/GRAB MONTH	
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	()	*****	5.00	8.1	(19)	0	2/MO	G
FREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	*****	*****	15 Mnth AVG	20 DLY MAX	MG/L		TWICE/GRAB MONTH	
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.001	0.020	(03)	*****	*****	*****	()	0	2/MO	FSE
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT Mnth AVG	REPORT DLY MAX	MGD	*****	*****	*****	*****		TWICE/ESTIMA MONTH	
50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
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 § 1313. Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 6 months and 3 years.


SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
412 393-5113
AREA CODE NUMBER

DATE
92 05 18
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: ANDREW DULICK
 SHIPPINGPORT PA 15077
FACILITY
LOCATION
 ATTN: ANDREW DULICK

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

MAJOR (SUBR 05) Form Approved. OMB No. 2040-0004. Approval expires 6-30-91.
 F - FINAL
 UNIT 2 AUX BOILER BLOWDOWN

MONITORING PERIOD
 FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30
 (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	(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (48-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0		*****	*****	()	*****	4.00	4.00	(19)	0	2/mo G
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	30 Mnth Avg	100 Dly Max	MG/L		TWICE/GRAB MONTH
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0		*****	*****	()	*****	5.00	5.00	(19)	0	2/mo G
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	15 Mnth Avg	20 Dly Max	MG/L		TWICE/GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0		0.001	0.001	(03)	*****	*****	*****	()	0	1/yr EST
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	***		WEEKLY ESTIMA
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: **A. M. Dulick**, Chemistry Manager
 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: *Andrew Dulick*
 TELEPHONE: 412 393-5113
 DATE: 92 05 18
 AREA CODE: 412 NUMBER: 393-5113 YEAR: 92 MO: 05 DAY: 18

COMMENT AND EXPLANATION OF ANOMALIES: (Reference all attachments here)

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY _____

LOCATION _____

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

PA0025615

PERMIT NUMBER

401 A

DISCHARGE NUMBER

MAJOR (SUFR 05)
F - FINAL

Form Approved
OMB No. 2040-0004
Approval expires 6-30-91.

CHEM. FEED AREA OF AUX BOILERS


MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	04	01		92	04	30
	(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 (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (54-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH		*****	*****	()		*****		(12)			
00400 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	REPORT MAXIMUM	SU		TWICE/GRAB MONTH	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****			(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30 Mnth AVG	100 DLY MAX	MG/L		TWICE/GRAB MONTH	
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	()	*****			(19)			
FREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	*****	*****	15 Mnth AVG	20 DLY MAX	MG/L		TWICE/GRAB MONTH	
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	NO DISCHARGE			(03)	*****	*****	*****	()		0 /wk EST
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT Mnth AVG	REPORT DLY MAX	MGD	*****	*****	*****	*****	*****		WEEKLY ESTIMA
00950 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER A. M. Dulick Chemistry Manager	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 43 U.S.C. § 3359. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of five years, 6 months and 1 year.	TELEPHONE 412 393-5113	DATE			
			92	05	18	
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	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
 SHIPPINGPORT PA 15077
ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
PA0025615 (PERMIT NUMBER)
501 A (DISCHARGE NUMBER)
MONITORING PERIOD
 FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBS 05) Form Approved. OMB No. 2040-9004. Approval expires 6-30-91.
 F - FINAL
 UNIT 1 GENRTR PLWDWN FILT RW
 *** NO DISCHARGE [X] ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(1 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			
SOLIDS, TOTAL SUSPENDED		*****	*****	()	*****					
00530 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	30	100			WEEKLY GRAB
EFFLUENT GROSS VALUE						MNTH AVG	DLY MAX			MG/L
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	NO DISCHARGE (03)			*****	*****	*****			()
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****			****
EFFLUENT GROSS VALUE		MNTH AVG	DLY MAX	MGD						WEEKLY ESTIMA
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER A. M. Dulick Chemistry Manager	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.	TELEPHONE	DATE			
		412 393-5113	92	05	18	
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	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: ANDREW DULICK
 SHIPPINGPORT PA 15077
FACILITY
LOCATION
 ATTN: ANDREW DULICK

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

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

MAJOR (SUBR 05) Form Approved
 F - FINAL OMB No. 2040-0004
 UNITS 1&2 COOLG. TOWER BLWDN. Approval expires 6-30-91.

MONITORING PERIOD
 FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30
 (12-21) (12-23) (12-25) (12-27) (12-29) (12-31)

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

PARAMETER (32-37)	X	(1 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			
PH	SAMPLE MEASUREMENT	*****	*****	()	7.36	*****	7.75	(12)	0 /wk G	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	5U	WEEKLYGRAB	
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	*****	*****	()	*****	0.12	0.16	(19)	0 /wk G	
00610 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	REPORT Mnth Avg	REPORT Dly Max	MG/L	WEEKLYGRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	27.187	33.696	(03)	*****	*****	*****	()	0 Daily cont	
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	***	DAILY CONTIN	
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****	()	*****	0.13	0.13	(19)	0 2/DAY G	
50064 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	0.2 DAILY MX	0.5 INST MX	MG/L	CONTINUOUS	
HYDRAZINE	SAMPLE MEASUREMENT	*****	*****	()	*****	*****	0.00	(19)	0 /wk G	
81313 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	0 DLY MAX	MG/L	WEEKLYGRAB	
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: A. M. Dulick, Chemistry Manager
 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 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 41001 AND 41002. A FIRM'S name and a three digit zip code (plus zip 4 digit) and a maximum time interval of between 3 months and 1 year.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: *Andrew M. Dulick*
 TELEPHONE: 412 393-5113
 DATE: 92 05 18
 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. QUARTERLY SAMPLING TO BE CONDUCTED IN SAME MONTH.

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

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

PERMIT NUMBER: PA0025615 (2-16)
 DISCHARGE NUMBER: 192 A (17-19)

MAJOR (SUBR 05)
 F - FINAL
 102 INTAKE SCREENHOUSE


Form Approved
 CMB No. 2040-0004
 Approval expires 6-30-91.

FACILITY LOCATION
 ATTN: ANDREW DULICK

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
92	04	01		92	04	30
(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	(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (46-51)			NO. EX (42-43)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH		*****	*****	()	7.20	*****	7.34	(12)	0	2/mo G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	50		TWICE/GRAB MONTH
SOLIDS, TOTAL SUSPENDED		*****	*****	()	*****	4.00	5.00	(19)	0	2/mo G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 MONTH AVG	100 DLY MAX	MG/L		TWICE/GRAB MONTH
OIL AND GREASE		*****	*****	()	*****	5.00	5.00	(19)	0	2/mo G
FREON EXTR-GRAV METH		*****	*****	****	*****	15 MONTH AVG	20 DLY MAX	MG/L		TWICE/GRAB MONTH
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	()	0	2/mo EST
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.001	0.001	(03)	*****	*****	*****	****		TWICE/ESTIMA MONTH
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MONTH AVG	REPORT DLY MAX	MGD	*****	*****	*****	****		
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER A. M. Dulick 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 42 USC § 1319. (b) Once under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 1 year.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE	DATE		
			AREA CODE	NUMBER	YEAR	MO

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: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

002 A

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR

(CRR 05)

F - FINAL

INTAKE SCREEN BACKWASH

Form Approved

OMB No. 2040-0004

Approval expires 6-30-91


MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	04	01		92	04	30
	(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	(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (54-61)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	0.006	0.046	(03)	*****	*****	*****	()	0	1/WK	ESC
	PERMIT REQUIREMENT	REPORT MTH AVG	REPORT DLY MAX	FGD	*****	*****	*****	****	WEEKLY	ESTIMA
	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 A. M. Dulick Chemistry Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND RELY 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 18 USC § 1003. Penalties under these statutes may include fines up to \$1000 and/or maximum imprisonment of 5 years (6 months) and 1 year.	TELEPHONE 412 393-5113	DATE 92 05 18		
			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	AREA CODE	NUMBER

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 1st Qx BOX 4
ATTN: ANDREW DULICK
SHIPPINGPORT PA 15077

FACILITY _____
 LOCATION _____
 ATTN: ANDREW DULICK

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

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

MAJOR (SUBR 05)
 F - FINAL
 SLUDGE SETTLING BASIN

Form Approved
 OMB No. 2040-0004
 Approval expires 6-30-91.

MONITORING PERIOD
 FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30
 (120-21) (122-23) (124-25) (126-27) (128-29) (130-31)

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

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	()	7.20	*****	7.48	(12)	0	2/mo	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	50		TWICE/CRAB	MONTH
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	4.00	4.00	(19)	0	2/mo	24HC
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30	100	MG/L		TWICE/COMP	24 MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.001	0.001	(03)	*****	*****	*****	()	0	2/mo	EST
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****		TWICE/ESTIMA	MONTH
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 A. M. Dulick
 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 19 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 3 years.

Andrew M. Dulick
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENCY

TELEPHONE 412 393-5113
 DATE 92 05 18
 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 HEAVEN VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

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

PA0025615

PERMIT NUMBER

203 A

DISCHARGE NUMBER

MAJOR (SBBR 05) F - FINAL

Form Approved. OMB No. 2040-0004. Approval expires 6-30-91.

MAIN SEWAGE TMT PLANT

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	04	01		92	04	30
	(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	(1 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			
PH	SAMPLE MEASUREMENT	*****	*****	()	6.48	*****	7.09	(12)	0	2/mo	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0			TWICE/GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	53.8	59.4	(19)	1	2/mo	8 HC
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30	()			TWICE/COMP-8	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.007	0.613	(03)	*****	*****	*****	()	0	1/wk	MEAS.
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.023	REPORT	MGD	*****	*****	*****	*****		WEEKLY	BEASRD
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****	()	*****	17,00	*****	(13)	0	2/mo	G
74055 1 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	2000	*****	1		TWICE/GRAB	
BOD, CARBONACEOUS 05 DAY, 20C	SAMPLE MEASUREMENT	*****	*****	()	*****	30DA GEO	*****	100ML			
80082 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	8.00	8.00	(19)	0	2/mo	8HC
	SAMPLE MEASUREMENT					25	50			TWICE/COMP-8	
	PERMIT REQUIREMENT					MNTH AVG	DLY MAX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
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 11 USC 1321. 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
92 05 18
AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Please refer to the enclosed reportable occurrence letter concerning the elevated TSS.

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

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

PA0025615

PERMIT NUMBER

303 A

DISCHARGE NUMBER

MAJOR (SUPP 05)
F - FINAL

Form Approved.
OMB No. 2040-0094.
Approval expires 6-30-91.

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	04	01		92	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

UNIT 1 OIL WATER SEPARATOR

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (48-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	()	6.97	*****	7.50	(12)	0	1/wk G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0			WEEKLYGRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	5.47	6.24	(19)	0	1/wk G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30	100			WEEKLYGRAB
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	()	*****	5.00	5.00	(19)	0	1/wk G
FREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	*****	*****	15	20			WEEKLYGRAB
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.019	0.056	(03)	*****	*****	*****	()	0	1/wk EST
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	*****		WEEKLYESTIMA
50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER A. M. Dulick Chemistry Manager	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 1 year.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Andrew M. Dulick</i>	TELEPHONE	DATE			
			412 393-5113	92	05	18	
TYPED OR PRINTED			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: ANDREW DULICK
 SHIPPINGPORT PA 15077
FACILITY
LOCATION
 ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
PA0025615 (20-23) (22-23) (24-25)
PERMIT NUMBER
403 A (26-27) (28-29) (30-31)
DISCHARGE NUMBER
MONITORING PERIOD
 FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30
 (20-23) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SU8R 05) F - FINAL
 CONDENSATE BLOWDOWN & RIVR WAT
 Form Approved OMB No. 2040-0004
 Approval expires 6-30-91.

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

PARAMETER (32-37)	X	(1 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			
PH		*****	*****	()		*****				
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	()	6.0 MINIMUM	*****	9.0 MAXIMUM			WEEKLY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****					
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	30 Mnth Avg	100 Dly Max			WEEKLY GRAB
OIL AND GREASE FROM EXT-GRAV METH	SAMPLE MEASUREMENT	*****	*****	()	*****					
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	15 Mnth Avg	20 Dly Max			WEEKLY GRAB
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	****	*****	()	*****					
00610 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	REPORT Mnth Avg	REPORT Dly Max			WEEKLY GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	NO Flow			(03)	*****	*****	*****		0 / week EST
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	***		WEEKLY ESTIMA
HYDRAZINE	SAMPLE MEASUREMENT	*****	*****	()	*****	*****				
01313 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	0 Dly Max			WEEKLY GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER A. M. Dulick 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 1303. A FINE (Penalties under these statutes may include fines up to \$100,000 and/or imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
		412 393-5113		92	05	18
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Andrew M. Dulick</i>		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.

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

NAME BEAVER VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

PA0025615

PERMIT NUMBER

003 A

DISCHARGE NUMBER

MAJOR (SUFR 05)
P - FINAL

Form Approved
OMB No. 2040-0004
Approval expires 6-30-91.

003 UNCONTAMINATED STORM WATER

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	04	01		92	04	30
	(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	(1 Cont.) QUANTITY OR LOADING (41-43)			(4 Cont Only) QUALITY OR CONCENTRATION (45-51)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-67)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT SC050 1 0 0 EFFLUENT GROSS VALUE	0.027	0.070	(03)	*****	*****	*****	()	0	2/mo	FST	
	PERMIT REQUIREMENT	REPORT MONTH AVG	REPORT DLY MAX	MGD	*****	*****	*****	****		TWICE/MONTH	
	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

A. M. Dulick
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 KNOWLEDGE OF THESE RECORDS I AM IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION AND BELIEVE I AM AWARE THAT THERE ARE NO ALLEGED PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT (SEE 18 USC § 1001 AND 18 USC § 1003). Penalties under these statutes may include fines up to \$500,000 and/or maximum imprisonment of between 5 months and 5 years.


SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 412 393-5113
DATE: 92 05 18
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 BLAYER VALLEY POWER STATION
ADDRESS P.O. BOX 4
 ATTN: ANDREW DULICK
 SHIRINGPORT PA 15077
FACILITY
LOCATION
 ATTN: ANDREW DULICK


NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
 (2-18) (17-19)
PA0025615 (PERMIT NUMBER)
004 A (DISCHARGE NUMBER)
MONITORING PERIOD
 FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30
 (120-21) (122-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUD-05)
 F - FINAL
 UNIT OR COOLG TOWER OVERFLOW
 Form Approved
 OMB No. 2040-0004
 Approval expires 6-30-91.
 *** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(1 Card Only) QUANTITY OR LOADING (45-51)			(4 Card Only) QUALITY OR CONCENTRATION (48-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (66-67)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH		*****	*****	()		*****				
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*** MINIMUM	6.0	*****	9.0			WEEKLY GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	AMPLE DREIGHT	No FLOW			(03)	*****	*****			0 1/WR MEAS
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*** MTH AVG	*****	*****	*****			WEEKLY MEAS
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****	()	*****					
50064 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*** DAILY MX	*****	0.2	0.5			CONTINUOUS
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 A. M. Dulick
 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 KNOWLEDGE OF THOSE INDIVIDUALS INDICATED I AM 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 \$25,000 and/or maximum imprisonment of between 6 months and 1 year.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT


TELEPHONE
 412 393-5113
 AREA CODE NUMBER

DATE
 92 05 18
 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: ANDREW DULICK
SHIPPINGPORT PA 15077
 FACILITY _____
 LOCATION _____
 ATTN: ANDREW DULICK

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


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

MAJOR (SUBR 05) Form Approved OMB No. 2040-0004
 F - FINAL Approval expires 6-30-91.
 AUX. INTAKE SCREEN BACKWASH

MONITORING PERIOD
 FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30
 (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	(1 Card Only) QUANTITY OR LOADING (46-51)			(If Card Only) QUALITY OR CONCENTRATION (46-51)			NO. EX (52-63)	FREQUENCY OF ANALYSIS (54-65)	SAMPLE TYPE (69-70)
		AVERAGE (46-51)	MAXIMUM (46-51)	UNITS (46-51)	MINIMUM (46-51)	AVERAGE (46-51)	MAXIMUM (46-51)			
FLOW, IN CONDUIT OF THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	NO FLOW 0.000	REPORT Mnth Avg	REPORT Dly Max	(03) MGD	*****	*****	*****	()	0 /WK	FSE
	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		WEEKLY ESTIMA
	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 A. M. Dulick 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 KNOWLEDGE OF THOSE INDIVIDUALS ORIGINALLY 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). Facilities under this statute may include fines up to \$200,000 and/or maximum imprisonment of between 6 months and 3 years.	SIGNATURE 	TELEPHONE 412 393-5113	DATE		
				OFFICIAL TITLE PRINCIPAL EXECUTIVE AUTHORIZED AGENT	AREA CODE	NUMBER

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME DEARB VALLEY POWER STATION
ADDRESS P.O. BOX 4
 ATTN: ANDREW DULICK
 SHIPPINGPORT FA 15077

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

(12-16) (17-19)
PAG025615 **009 A**
 PERMIT NUMBER DISCHARGE NUMBER

MAJOR (S) (S) (S)
 F - FINAL
 UNIT 1 COOLING TOWER PUMPHOUSE

Form Approved.
 OMB No. 2040-0004.
 Approval expires 6-30-91.

FACILITY LOCATION
 ATTN: ANDREW DULICK

MONITORING PERIOD
 FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE | 1 | ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (46-51)			QUALITY OR CONCENTRATION (46-51)			NO. EX (52-61)	FREQUENCY OF ANALYSIS (6-9)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH		*****	*****	()	7.43	*****	7.44	(12)	0	2/mo G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*** ***	6.0 MINIMUM	*****	9.0 MAXIMUM			TWICE/GRAB MONTH
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	8.88	11.98	(19)	0	2/mo G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*** ***	*****	30 Mnth AVG	100 DLY MAX			TWICE/GRAB MONTH
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	()	5	5	5	(19)	0	2/mo G
FREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	*** ***	15 30 DA AV	20 DAILY MX	30 INST MX			TWICE/GRAB MONTH
00556 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.001	0.001	(03)	*****	*****	*****	()	0	1/wk EST
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT Mnth AVG	REPORT DLY MAX	NGD	*****	*****	*****	*** ***		WEEKLY ESTIMA
50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 A. M. Dulick
 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 RELEASE 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 1332 AND 33 U.S.C. 1363. Penalties under these statutes may include fines up to \$250,000 and/or maximum imprisonment of between 6 months and 5 years.

Andrew Dulick
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 412 393-5113
 DATE 92 05 18
 AREA CODE NUMBER YEAR MO DAY

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

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

NAME BEAVER VALLEY POWER STATION

ADDRESS 2,0, BOX 4

ATTN: ANDREW DULICK

SHIPENGPOR

PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(3-19)

PA0025615

PERMIT NUMBER

010 A

DISCHARGE NUMBER

MAJOR

(SURS 05)

F - FINAL

UNIT 2 COOLING WATER

Form Approved

OMB No. 2040-0004

Approval expires 6-30-91.

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	04	01		92	04	30
	(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 (46-51)			QUALITY OR CONCENTRATION (46-57)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (66-70)
		AVERAGE	MAXIMUM	UNITS	MIN	UM	AVERAGE			
PH		*****	*****	()	7.11		*****		(12)	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0	***	9.0			WEEKLY GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	5,000	5,000	(03)	*****	*****	*****		()	
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	MGD	***	*****	*****	***		WEEKLY MEASRD
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****	()	*****				(19)	
50054 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	0.2	0.5			WEEKLY GRAB
						DAILY MX	INST MX			MG/L
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
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 1325) 11319. (Facilities under New Jersey law include fines up to \$200,000 or maximum imprisonment of between 6 months and 5 years.)

Andrew Dulick
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-3113

AREA CODE

DATE

92 05 18

YEAR MO DAY

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

Information was not performed through this system in April 1992.

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

NAME LEAVEN VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: ANDREW DULICK

SHIPPINGPORT FA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

PA0025615
PERMIT NUMBER

111 A
DISCHARGE NUMBER

MAJOR
(SUBR 05)
F - FINAL
111 DIESEL GENERATOR PLDG

Form Approved
OMB No 2040-0004
Approval expires 6-30-91.

MONITORING PERIOD

FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30
(12-31) (12-31) (12-31) (12-29) (12-29) (12-31)

*** NO DISCHARGE | 1 | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	1 Card Only (46-51) QUANTITY OR LOADING (54-61)			4 Card Only (48-53) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (66-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	()	7.81	*****	8.41	(12)	0	1/wk	G
00460 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*** ****	6.0 MINIMUM	*****	9.0 MAXIMUM	30			WEEKLYGRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	5.55	10.22	(19)	0	1/wk	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*** ****	*****	30 MTH AVG	100 DLY MAX	MG/L			WEEKLYGRAB
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	()	5.72	7.90	7.90	(19)	0	1/wk	G
FREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	*** ****	15 30 DA AV	20 DAILY MI	30 INST MI	MG/L			WEEKLYGRAB
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.001	0.001	(03)	*****	*****	*****	()	0	1/wk	FST
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT MTH AVG	REPORT DLY MAX	MGD	*****	*****	*****	*** ****			WEEKLYESTIMA
50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A. M. Dulick
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 KNOWLEDGE OF THESE 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 33 USC 1325 AND 33 USC 1325a. A 15% (fifteen) percent fine penalty may be levied for each day of non-compliance. Imprisonment is 6 months and 1 year.

Andrew Dulick
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-5113
AREA CODE NUMBER

DATE

92 05 18
YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all applicable laws)

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

NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
ATTN: ANDREW DULICK
SHIPPINGPORT PA 15077

FACILITY _____
 LOCATION _____

ATTN: ANDREW DULICK

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

PA0025615
 PERMIT NUMBER

211 A
 DISCHARGE NUMBER

MAJOR (SUBP 05)
 F - FINAL
 211 TURBINE BLDG
 Form Approved
 OMB No. 2040-0004
 Approval expires 6-30-91

MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
92	04	01		92	04	30
(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	(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH		*****	*****	()	7.14	*****	7.51	(12)	0	1/wk G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	..0			WEEKLY GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	4.00	4.00	(19)	0	1/wk G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30	100			WEEKLY GRAB
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	()	5.00	5.00	5.00	(19)	0	1/wk G
FREON EXTR-GRAV METH	PERMIT REQUIREMENT	*** **	*****	****	15	20	30			WEEKLY GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.001	0.001	(03)	*****	*****	*****	()	0	1/wk EST
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****		WEEKLY ESTIMA
50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
A. M. Dulick
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. § 1312. Penalties under these statutes may include fines up to \$250,000 and/or maximum imprisonment of 5 years, 6 months and 3 years.

Andrew Dulick
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 412 393-5113
 DATE 92 05 18
 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: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

PA0025615

PERMIT NUMBER

011 A

DISCHARGE NUMBER

MAJOR (SUBR 05)
F - FINAL
DIESEL GEN & TURBINE DRAINS

Form Approved.
OMB No. 2040-0004.
Approval expires 6-30-91.

MONITORING PERIOD

FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30

*** NO DISCHARGE [] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				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	SAMPLE MEASUREMENT	0.002	0.002	(03)	*****	*****	*****	()	0	1/week	EST
50050 1 0 0	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	***			WEEKLY ESTIMA
EFFLUENT GROSS VALUE	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:
A. M. Dulick
Chemistry Manager

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(7)(1), § 1314. (Violations under these statutes may include fines up to \$20,000 and/or maximum imprisonment of between 6 months and 1 year.)

Andrew Dulick
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 412 393-5113
DATE: 92 05 18
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: ANDREW DULICK

SHIPPINGPORT

PA 15077

FACILITY

LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

PA0025615

PERMIT NUMBER

012 A

DISCHARGE NUMBER

MAJOR (SUBR US) F - FINAL

Form Approved OMB No. 2040-0004 Approval expires 6-30-91.

MONITORING PERIOD

FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (46-51)				NO. EX (62-69)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH		*****	*****	()	7.42	*****	7.42	(12)		1/mo	G
00400 1 0 0 EFFLUENT GROSS VALUE		*****	*****	***	6.0	*****	9.0	SU		ONCE/	GRAB
FLOW, IN CONDUIT OF				***	MINIMUM		MAXIMUM			MONTH	
THRU TREATMENT PLANT		0.001	0.001	(03)	*****	*****	*****	()		1/mo	Est
50050 1 0 0 EFFLUENT GROSS VALUE		REPORT	REPORT		*****	*****	*****	***		ONCE/	ESTIMA
		MNTH AVG	DLY MAX	MGD				****		MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER A. M. Dulick 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 KNOWLEDGE 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. § 1333). Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of three (3) months and/or one (1) year.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE		DATE		
			412	393-5113	92	05	18

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: ANDREW DULICK
 SHIPPINGPORT PA 15077
FACILITY
LOCATION
 ATTN: ANDREW DULICK

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

MAJOR (SUITE 05) Form Approved. OMB No. 2040-0004. Approval expires 6-30-91.
 F - FINAL UNIT 2 SERVICE WATER BACKWASH

MONITORING PERIOD
 FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30
 (120-27) (122-28) (124-29) (126-27) (128-29) (30-31)

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

PARAMETER (32-37)	SAMPLE MEASUREMENT	(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (48-55)			NO. EX (62-65)	FREQUENCY OF ANALYSIS (64-67)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	NO FLOW	REPORT Mnth Avg	REPORT Dly Max	(03) MGD	*****	*****	*****	()	0 / wk est	WEEKLY ESTIMA
	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: A. M. Dulick, Chemistry Manager
 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 1345) 4-1-79. Penalties under this statute may include fines up to \$250K and/or maximum imprisonment of 5 months and 3 years.
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: *Andrew Dulick*
 TELEPHONE: 412 393-5113
 DATE: 92 05 18
 AREA CODE: 412 NUMBER: 393-5113 YEAR: 92 MO: 05 DAY: 18

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: ANDREW DULICK

SHIPPINGPORT PA 15077

FACILITY LOCATION

ATTN: ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA0025615

PERMIT NUMBER

113 A

DISCHARGE NUMBER

MAJOR (SUBR 05)
F - FINAL

Form Approved.
OMB No. 2040-0004.
Approval expires 6-30-91.

UNIT 2 SEWAGE TMT PLANT

MONITORING PERIOD

FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 10
(20-21) (10-29) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(* Card Only) QUANTITY OR LOADING (46-51)			(* Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX. (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNIT	MINIMUM	AVERAGE	MAXIMUM	UNIT			
PH		*****	*****	()	6.71	*****	6.75	(12)		2/mo	G
00400 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	6.0	*****	9.0	SU		TWICE/GRAB MONTH	
SOLIDS, TOTAL SUSPENDED		*****	*****	()	*****	24.35	28.70	(19)		2/mo	BHC
00530 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	30	60	MG/L		TWICE/COMP-8 MONTH	
FLOW, IN CONDUIT OR THROUGH TREATMENT PLANT		0.036	0.045	(03)	*****	*****	*****	()		1/wk	Aves
50050 1 0 0 EFFLUENT GROSS VALUE		0.043	REPORT	MGD	*****	*****	*****	****		WEEKLY	ASRD
COLIFORM, FECAL GENERAL		*****	*****	()	*****	10700	*****	(13)		2/mo	G
74055 1 1 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	2000	*****	/		TWICE/GRAB MONTH	
BOD, CARBONACEOUS 05 DAY, 20C		*****	*****	()	*****	30DA GEO	*****	100ML		2/mo	BHC
80082 1 0 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	25	50	MG/L		TWICE/COMP-8 MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
A. M. Dulick
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 A 1001 AND 33 USC A 1312. Penalties under these statutes may include fines up to \$100,000 or the terms imprisonment of not over 6 months and 1 year.

Andrew Dulick
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 412 393-5113
DATE: 92 05 18
AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATION

Reference all attachments here.

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
 (2.16) (17.19)
PA0025615 (213 A)
PERMIT NUMBER (DISCHARGE NUMBER)
MONITORING PERIOD
 FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBE 05) Form Approved. OMB No. 2040-0004. Approval expires 6-30-91.
F - FINAL
UNIT 2 COOL TOWER PUMPHOUSE
 *** 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) (46-53) (54-62)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH		*****	*****	()		*****		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		TWICE/GRAB MONTHS	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****			(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 Mnth Avg	100 DLY MAX	MG/L		TWICE/GRAB MONTH	
OIL AND GREASE PEEON EXTRE-GRAY METH	SAMPLE MEASUREMENT	*****	*****	()	*****			(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15 Mnth Avg	20 DLY MAX	MG/L		TWICE/GRAB MONTH	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	No flow			(03)	*****	*****	*****	()	Q /wk EST	
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT DLY MAX	MGD	*****	*****	*****	****	****	WEEKLY ESTINA	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
A. M. Dulick
 Chemistry Manager
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM AWARE OF THE INFORMATION SUBMITTED HEREIN AND BASED ON MY BELIEF OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING AND COMPLETELY 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. § 1329. Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 6 months and 1 year.

Andrew Dulick
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 412 393-5113
 DATE 92 05 18
 AREA CODE NUMBER YEAR MO DAY

COMMENTS 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: ANDREW DULICK
SHIPPINGPORT PA 15077

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER PA0025615 (12-16)
 DISCHARGE NUMBER 313 A (17-19)

MAJOR (SUBR 05)
 F - FINAL
 313 TURBINE BLDG DRAIN

Form Approved
 OMB No. 2040-0007
 Approval expires 6-30-91

FACILITY LOCATION

MONITORING PERIOD
 FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30
(120-21) (122-23) (124-25) (126-27) (128-29) (30-31)

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

ATTN: ANDREW DULICK

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (46-53)			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		*****	*****	()	6.65	*****	7.10	(12)	0	1/week	G
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY	CRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****	4.00	4.00	(19)	0	1/week	G
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 Mnth Avg	100 Dly Max	MG/L		WEEKLY	CRAB
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	()	*****	5.84	6.78	(19)	0	1/week	G
FREON EXTP-GRV METH	PERMIT REQUIREMENT	*****	*****	****	*****	15 Mnth Avg	20 Dly Max	MG/L		WEEKLY	CRAB
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	(03)	*****	*****	*****	()	0	1/week	Est
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		WEEKLY	ESTIMA
50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
A. M. Dulick
 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 § 1339. Penalties under these statutes may include fines up to \$250,000 and/or maximum imprisonment of between 6 months and 5 years.

Andrew Dulick
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 412 393-5113
 AREA CODE NUMBER
 DATE
 92 05 18
 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: ANDREW DULICK
SHIPPINGPORT PA 15077

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

PAG025615
 PERMIT NUMBER

413 A
 DISCHARGE NUMBER

MAJOS
 (SUPE 05)
 F - FINAL
 BULK FUEL STORAGE DRAIN

Form Approved.
 OMB No. 2040-0004.
 Approval expires 6-30-91.

FACILITY LOCATION

ATTN: ANDREW DULICK

MONITORING PERIOD

FROM YEAR 92 MO 04 DAY 01 TO YEAR 92 MO 04 DAY 30
(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	(1 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		*****	*****	()		*****		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	SD			WEEKLYGRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	()	*****			(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	30 MNTB AVG	100 DLY MAX	MG/L			WEEKLYGRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	*****	*****	()	*****			(19)			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	15 MNTB AVG	20 DLY MAX	MG/L			WEEKLYGRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	No Flow			(03)	*****	*****	*****	()		0 /est est
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTB AVG	REPORT DLY MAX	MGD	*****	*****	*****	***			WEEKLYESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 A. M. Dulick
 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 \$250,000 and/or maximum imprisonment of 5 years and 5 years.

Andrew Dulick
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE
 412 393-5113 92 05 18
 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: ANDREW DULICK

SHIPPING POINT PA 15077

FACILITY

LOCATION

AT : ANDREW DULICK

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER PAC025615

(2-16)

DISCHARGE NUMBER 013 A

(17-19)

MAJOR (SUBR 05)
F - FINAL

Form Approved.
OMB No. 2040-0004.
Approval expires 6-30-91.

UNCONTAMINATED STORMWATER

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	04	01		92	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)


*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (52-57)	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 (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW, IN CONDUIT OR THROUGH TREATMENT PLANT				(03)	*****	*****	*****			
50050 1 0 4		0.038	0.047		*****	*****	*****			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NNTK AVG	REPORT DLY MAX	MGD	*****	*****	*****	***		WEEKLY ESTIMA
	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
A. M. Dulick
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 3325. 3325A (b)(3)(B) and these penalties may include fines up to \$10,000 and/or maximum imprisonment of 5 years or 6 months and 1 year.


SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
412 393-5113
AREA CODE NUMBER
DATE
92 05 18
YEAR MO 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.

NAME: Duquesne Light Company
 ADDRESS: One Grand Centre
 301 Grant Street
 PITTSBURGH, PA 15279
 FACILITY: Shippingport Atomic Power Station
 LOCATION: Shippingport Borough, Beaver County

PA 001589
 FERRIT NUMBER

DISCHARGE NO.

MONITORING PERIOD
 FROM 92 04 01 TO 92 04 30

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

NOTE: See instructions before completing this form.

PARAMETER	QUANTITY OR LOADING			UNITS	FREQUENCY	QUALITY OR CONCENTRATION			NO. EX. OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	MINIMUM			AVERAGE	MAXIMUM	MINIMUM		
Flow	No Flow			MGD					CONT	EST
Sample Measure.										
Permit Require.										
Sample Measure.										
Permit Require.										
Sample Measure.										
Permit Require.										
Sample Measure.										
Permit Require.										
Sample Measure.										
Permit Require.										
Sample Measure.										
Permit Require.										
Sample Measure.										
Permit Require.										

A. M. Dulick
 Chemistry Manager

I, the undersigned, hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am duly qualified to make such a statement.

NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER
 A. M. Dulick
 Chemistry Manager

NO DISCHARGE

NAME: Duquesne Light Company
 ADDRESS: One J. P. Co Centre
 301 Scott Street
 Pittsburgh, Pa 15279

FACILITY: Shippopot Steam Power Station
 LOCATION: Shippingport Borough, Beaver County

FA0001589
 PERMIT NUMBER

10:
 DISCHARGE NO.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
 (NPDES)

MONITORING PERIOD

Year	Month	Day
92	04	01

FROM

Year	Month	Day
92	04	30

DISCHARGE MONITORING REPORT (DMR)

NOTE: Read instructions before completing this form.

PARAMETER	QUANTITY OR LOADING			QUALITY OF CONCENTRATION				NO. EX. OF ANALYSIS	SAMPLE TYPE	
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Flow	No Flow	*	MGD	*	*	*	*	2/MO	EST	
Suspended Solids	*	*	*	*	30	100	MG/L	2/MO	GRAB	
B.O.D.	*	*	*	*	15	20	MG/L	2/MO	GRAB	
	*	*	*	6.0	9.0	9.0	S.U.	2/MO	GRAB	
	*	*	*	*	*	*	*	*	*	
	*	*	*	*	*	*	*	*	*	
	*	*	*	*	*	*	*	*	*	
	*	*	*	*	*	*	*	*	*	
	*	*	*	*	*	*	*	*	*	
	*	*	*	*	*	*	*	*	*	
	*	*	*	*	*	*	*	*	*	
	*	*	*	*	*	*	*	*	*	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER A. M. Dulick Chemistry Manager TYPED OR PRINTED				SIGNATURE OF ANALYST: [Signature] DATE: 05 18 92					TELEPHONE NUMBER: 412-393-5113	

MIN. 30% VIOLATION OF ANY VIOLATIONS (Reference all attachments here)

No Discharge

NAME Duquesne Light Company
 ADDRESS One Oxford Centre
 301 Spruce Street

Pittsburgh, PA 15279

FACILITY Shippingport Atomic Power Station

LOCATION Shippingport Borough, Beaver County

FA0001589
 PERMIT NUMBER

301
 DISCHARGE NO.

NATIONAL POLLUTANT ELIMINATION SYSTEM
 (NPDES)

MONITORING PERIOD

Year	Month	Day	Year	Month	Day
92	04	01	10	04	30

DISCHARGE POINT (OR IN SEPTIC DRAIN)

NOTE: Read instructions before completing this form.

PARAMETER	QUANTITY OR LOADING			QUALITY OF CONCENTRATION			NO. OF EX. OF ANALYSIS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
Flow	No Flow		MGD						
Sample Measure.	*	*		*	*				
Permit Require.	*	*		*	*			2 MO	EST
Suspended Solids					25	100	MG/L		
Sample Measure.	*	*		*	*				
Permit Require.	*	*		*	15	20	MG/L		GRAB
Oil & Grease									
Sample Measure.	*	*		*	*				
Permit Require.	*	*		6.0	*	9.0	S.B.		GRAB
Sample Measure.	*	*		*	*				
Permit Require.	*	*		*	*				
Sample Measure.	*	*		*	*				
Permit Require.	*	*		*	*				
Sample Measure.	*	*		*	*				
Permit Require.	*	*		*	*				

I, John M. Dulick, in your presence, certify that the above information was prepared and verified by me or under my direct supervision. I am duly qualified to perform the above duties and I am duly sworn to perform the same. My commission expires on 05/18/98.
 My V. No. 100, and my registration number is 100.
 My V. No. 100, and my registration number is 100.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
A.M. DULICK
 CHEMISTRY MANAGER

TELED OR PRINTED
 TELEPHONE NUMBER
412 393-5113
 DATE
05 18 92

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

No DISCHARGE