

Tennessee Valley Authority, Sequoyah Nuclear Plant, P.O. Box 2000, Soddy Daisy, TN 37384

April 7, 2020

ATTN: Document Control Desk U.S. Nuclear Regulatory Commission Washington, D.C. 20555-0001

Subject: Sequoyah Nuclear Plant, Discharge Monitoring Report (DMR), March 2020

Attached is the March 2020 DMR for Sequoyah Nuclear Plant.

Respectfully,

Kelly Robinette

Environmental Technician

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different Name TVA - SEQUOYAH NUCLEAR PLANT	<u>,</u>	ONAL POLLUTANT DISCHARGE E DISCHARGE MONITOR		MAJOR (SUBR 01)	Form Approved. OMB No. 2040-0004
Address P.O. BOX 2000 (INTEROFFICE OPS-5N-SQN)	Info 🕝	TN0026450	101 G	F - FINAL	
SODDY - DAISY, TN 37384		PERMIT NUMBER	DISCHARGE NUMBER	DIFFUSER DISCHARGE	
Facility TVA - SEQUOYAH NUCLEAR PLANT Location HAMILTON COUNTY	Only 🗀	MONITORIN	IG PERIOD	EFFLUENT	
ATTN:Millicent Garland	From	YEAR MO DAY 20 03 01	YEAR MO DAY To 20 03 31	*** NO DISCHARGE	***

PARAMETER		MID	NTITY OR LOADING	T	QUALITY OR CONCENTRATION				NO.	FREQUENCY	SAMPLE
I ANAME LEN		GOA	NIII I ON LOADING		GOALITY ON GONGENTIATION					OF	TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	******	28.8	04	0	31 / 31	RCORDR
00010 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	******	***	******	******	Req. Mon.	DEG. C.		CONTI	CALCTD
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	******	**	*****	*****	15.4	04	0	31 / 31	MODELD
00010 Z 0 INSTREAM MONITORING	PERMIT REQUIREMENT	******	******	***	******	******	30.5 DAILY MX	DEG. C.		CONTI	CALCTD
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C	SAMPLE MEASUREMENT	******	*****	**	*****	******	1.9	04	0	31 / 31	CALCTD
00016 1 1 EFFLUENT GROSS	PERMIT REQUIREMENT	******	******	****.	******	******	5.0 DAILY MX	DEG. C.		CONTI	CALCTD
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	*****		03	******	******	*****	**	0	31 / 31	RCORDR
50050 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	Req. Mon.	MGD	******	******	******	****		CONTI	RCORDR
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	1743	******	03	*****	******	*****	03	0	31 / 31	CALCTD
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	Req. Mon. MO AVG	******	MGD	******	******	******	MGD		CONTI	CALCTD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	**	*****	0.012	0.019	19	0	12 / 31	GRAB
50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	***	******	0.1 MO AVG	0.1 DAILY MAX	MG/L		FIVE PER WEEK	CALCTD
TEMPERATURE - C, RATE OF CHANGE	SAMPLE MEASUREMENT	*****	0.1	62	*****	******		**	0	31 / 31	CALCTD
82234 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	2.0 DAILY MX	DEG C/HR	******	*****	*****	***		CONTI	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel			TEI	LEPHONE	DATE		
Matthew Rasmussen	properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate,	VJ	Site Vice President	423	843-7001	20	04	02
	and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		URE OF PRINCIPAL EXECUTIVE					
TYPED OR PRINTED	inducing the possibility of fine and imprisorment for knowing violations.	OFFI	CER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	МО	DAY

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

No closed mode operation. The following injections occurred: Spectrus BD1500 (max conc.was 0.049 mg/L, limit is 2.0 mg/L), and Spectrus CT1300 (max conc. was 0.0330 mg/L, limit is 0.05 mg/L)

ERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  TVA - SEQUOYAH NUCLEAR PLANT  TO DO DOY 2000					ONITORING REPOR	MAJOR Form Approved. (SUBR 01) OMB No. 2040-0004						
Address P.O. BOX 2000		= Info	TNI	0026450		101 T	F - FINAL					
(INTEROFFICE OPS-5N-SQN SODDY - DAISY, TN 37384	)			IT NUMBER	DISCHAF	RGE NUMBER	BIOMONITORING	EOD OUTEA	11.40	1		
Facility TVA - SEQUOYAH NUCLEAR	PLANT	∃ Only	FERIVI					FOR OUTER	LL IO			
Location HAMILTON COUNTY		_ 🔾 11113	YEAR	MON MO DA	ITORING PERIOI		EFFLUENT					
ATTN:Millicent Garland			From 20	03 0		03 31	*** NO DISCHA	RGE	***			
ATTIV.Willicett Garland							NOTE: Read ins	structions before	comp	eting this for	n.	
PARAMETER		QUAN'	TITY OR LOADING		1	QUALITY OR CO	ONCENTRATION		NO.	FREQUENCY OF	SAMPLI TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	ANALYSIS	ITPE	
C25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	******	*****	**	Monitoring Not Required	*****	*****	23				
TRP3B 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	******	****	42.8 MINIMUM	******	*****	PERCENT		SEMI ANNUAL	СОМРО	)S
C25 STATRE 7DAY CHR PIMEPHALES	SAMPLE MEASUREMENT	******	*****	**	Monitoring Not Required	*****	******	23				
TRP6C 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	******	****	42.8 MIMINUM	******	******	PERCENT		SEMI ANNUAL	СОМРО	S
	SAMPLE MEASUREMENT											
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NAME/TITLE PRINCIPAL EXECUTIVE O	FFICER   Certify under per	alty of law that this docu	ıment and all attachmen	nts were prepare	ed under my	a.A.		TELEPH	ONE	1 [	DATE	
Matthew Rasmussen	direction or superv properly gather an persons who mana	ision in accordance with d evaluate the information ge the system, or those	i a system designed to a on submitted. Based on persons directly respor	assure that qual my inquiry of th asible for gather	ified personnel ne person or ring the	Site Vice F	President					
Site Vice President	and complete. I an	ormation submitted is , to a aware that there are si bility of fine and impriso	gnificant penalties for su	ubmitting false in	nformation, SIGI		CIPAL EXECUTIVE		3-7001 IMBER		04 02 MO DA	
TYPED OR PRINTED								CODE	,,,DL1\			·· —
COMMENTS AND EXPLANATION OF AN'	Y VIOLATIONS (Referen	ice all attachments he	ere)									

Toxicity was not sampled in March 2020.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  Name TVA - SEQUOYAH NUCLEAR PLANT  Address P.O. BOX 2000 INTEROFFICE OPS-5N-SQN) INTEROFFICE OPS-5N-SQN)  SODDY - DAISY, TN 37384  Facility TVA - SEQUOYAH NUCLEAR PLANT ONLY  Location HAMILTON COUNTY  ATTN: Milliagest Carland			TN	SCHARGE MO 0026450 IIT NUMBER	TORING PERIOD	MAJOR (SUBR 01) F - FINAL LOW VOL. WASTE EFFLUENT	0	form Approved DMB No. 2040 DND			
ATTN:Millicent Garland			From 20	03 01	To <b>20</b>	03 31	*** NO DISCHAR  NOTE: Read instr		]	leting this for	m.
PARAMETER		QUANTITY OR LOADING				QUALITY OR CO	DICENTRATION		NO. EX	OF	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	7	ANALYSIS	
PH	SAMPLE MEASUREMENT	*****	*****	**	7.0	*****	7.2	12	0	5 / 31	GRAB
00400 1 0	PERMIT	*****	******	**	6.0	******	9,0	SU		ONCE/	GRAB
EFFLUENT GROSS	REQUIREMENT				MINIMUM		MAXIMUM			WEEK	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	******	7.7	7.7	19	0	1 / 31	GRAB
00530 1 0	PERMIT	******	*****	**	******	30.0	100.0	MG/L		ONCE/	GRAB
EFFLUENT GROSS	REQUIREMENT					MO AVG	DAILY MX			MONTH	
OIL AND GREASE	SAMPLE	******	******	**	******	<5.0	<5.0	19	0	1 / 31	GRAB

REQUIREMENT						
SAMPLE MEASUREMENT						
PERMIT REQUIREMENT						
SAMPLE MEASUREMENT		-				
PERMIT REQUIREMENT						

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15.0

MO AVG

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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		(N	TEI	_EPHONE		DATE	
Matthew Rasmussen	direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the	Site Vice President					
Site Vice President	information, the information submitted is , to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information,	SIGNATURE OF PRINCIPAL EXECUTIVE	423	843-7001	20	04	02
TYPED OR PRINTED	including the possibility of fine and imprisonment for knowing violations.	OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	МО	DAY

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

The Turbine Building Sump (TBS) was discharged directly to the Yard Pond (YP) from February 27, 2020 until March 3, 2020.

00556 1 0

EFFLUENT GROSS

TREATMENT PLANT 50050 1 0

EFFLUENT GROSS

FLOW, IN CONDUIT OR THRU

MEASUREMENT

PERMIT

REQUIREMENT

SAMPLE

MEASUREMENT

PERMIT

REQUIREMENT

SAMPLE MEASUREMENT PERMIT

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Req. Mon.

MO AVG

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Req. Mon

**DAILY MX** 

ONCE/

MONTH

4/31

ONCE/

WEEK

GRAB

INSTAN

INSTAN

19

MG/L

20.0

DAILY MX

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)	NATION
Name TVA - SEQUOYAH NUCLEAR PLANT	
Address P.O. BOX 2000 Info	
(INTEROFFICE OFS-5N-SQN)	
SODDY - DAISY, TN 37384	
Facility TVA - SEQUOYAH NUCLEAR PLANT ONly	·
Eccation I PAMILETON OCCURT	·
ATTN:Millicent Garland	From

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) MAJOR

TN0026450 PERMIT NUMBER

YEAR MO DAY

03

01

20

DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

110 G DISCHARGE NUMBER

YEAR MO DAY

To **20 03 31** 

(SUBR 01)

Form Approved. OMB No. 2040-0004

F - FINAL

RECYCLED COOLING WATER

**EFFLUENT** 

\*\*\* NO DISCHARGE XX \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER		QUA	NTITY OR LOADING		QUALITY OR CONCENTRATION					FREQUENCY OF	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	******	-	04		-	
00010 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**	******	******	REPORT DAILY MX	DEG C		CONTIN	CALCTD
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	******	**	*****	*****		04			
00010 Z 0 INSTREAM MONITORING	PERMIT REQUIREMENT	******	******	**	******	******	30.5 DAILY MX	DEG C		CONTIN	CALCTD
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C	SAMPLE MEASUREMENT	*****	******	**	******	******		04			
00016 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**	******	******	5 DAILY MX	DEG C		CONTIN	CALCTD
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	*****		03	*****	*****	*****	**			
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	Req. Mon. DAILY MX	MGD	******	******	******	**		CONTIN	RCORDR
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	**	*****			19			
50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**	******	0.1 MO AVG	0,1 DAILY MX	MG/L		Five per Week	CALCTD
TEMPERATURE - C, RATE OF CHANGE	SAMPLE MEASUREMENT	*****		04	*****	*****	*****	**			
82234 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	2 DAILY MX	DEG C	******	******	*****	**		CONTIN	CALCTD
	SAMPLE MEASUREMENT					-				,	The state of the s
	PERMIT REQUIREMENT	er op is alle stations									

	I Certify under penalty of law that this document and all attachments were prepared under my
Matthew Rasmussen	direction or supervision in accordance with a system designed to assure that qualified personne properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the
Site Vice President	information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.
TYPED OR PRINTED	

27	TE	LEPHONE	DATE				
Site Vice President	423	843-7001	20	04	02		
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA	NUMBER	YEAR	MO	DAY		
OFFICER OR AUTHORIZED AGENT	CODE	NUMBER	YEAR	MO	DAY		

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

No Discharge this Period

PERMITTEE NAME/ADDRESS         (Include It           Name         TVA - SEQUOYAH NUCLE           Address         P.O. BOX 2000	DIS		ARGE ELIMINATION  ONITORING REPO	SYSTEM (NPDES)  ORT (DMR)	(SUBR 01) OMB No. 2040-000								
(INTEROFFICE OPS-5N-SQN) SODDY - DAISY, TN 37384		= Info	DEDM	0026450 IT NUMBER	DISCH	110 T ARGE NUMBER	F - FINAL RECYCLED COOL	F - FINAL RECYCLED COOLING WATER					
Facility TVA - SEQUOYAH NUCLEAR Location HAMILTON COUNTY	<u>PLANT</u>	∃ Only	YEAR	MON MO DA	ITORING PERI		EFFLUENT						
ATTN:Millicent Garland			From 20	03 0			*** NO DISCHARGE XX ***  NOTE: Read instructions before completing this form						
PARAMETER		QUAN.	NTITY OR LOADING			QUALITY OR COM				FREQUENCY			
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	ANALYSIS	'''	-	
C25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	*****	*****	**		*****	*****	23					
TRP3B 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	******	****	42.8 MINIMUM	******	*****	PERCENT		SEMI ANNUAL	СОМ	POS	
C25 STATRE 7DAY CHR PIMEPHALES	SAMPLE MEASUREMENT	*****	*****	**		******	*****	23					
TRP6C 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	****	42.8 MINIMUM	******	*****	PERCENT		SEMI ANNUAL	СОМ	POS	
	SAMPLE MEASUREMENT							···					
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	SAMPLE MEASUREMENT		e e e e e e e e e e e e e e e e e e e					-0.			<u> </u>	201.000.00	
	PERMIT REQUIREMENT												
NAME/TITLE PRINCIPAL EXECUTIVE OF	FFICER   Certify under per	nally of law that this docu	ment and all attachmen	ts were prepare	ed under mv	907		TELEPH	ONF	<u> </u>	DATE		
Matthew Rasmussen	direction or super- properly gather ar	vision in accordance with id evaluate the information age the system, or those	a system designed to a on submitted, Based on	assure that qual my inquiry of th	ified personnel e person or	rV							
Site Vice President	information, the in and complete. I ar	formation submitted is , t n aware that there are si	to the best of my knowle gnificant penalties for si	dge and belief, ubmitting false i	true, accurate,		ICIPAL EXECUTIVE		3-7001	20		02	
TYPED OR PRINTED COMMENTS AND EXPLANATION OF AN			illity of fine and imprisonment for knowing violations.  OFFICER OR AUTHO				TORIZED AGENT	AREA NU CODE	JMBER	YEAR	МО	DAY	
POINIMENTO WIND EVERYINY HOM OF AM.	I VIOLATIONA (Referen	τce all attacnments ne	ere)										

No Discharge this Period

PERMITTE	EE NAME/ADDRESS (Include Facility Name/Location if Differ	ent)
Name	TVA - SEQUOYAH NUCLEAR PLANT	
Address	P.O. BOX 2000	Info
	(INTEROFFICE OPS-5N-SQN)	
	SODDY - DAISY, TN 37384	
Facility	TVA - SEQUOYAH NUCLEAR PLANT	Only
Location	HAMILTON COUNTY	

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) MAJOR

DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

To **20** 

(SUBR 01) F - FINAL

Form Approved. OMB No. 2040-0004

TN0026450 PERMIT NUMBER

20

From

YEAR MO DAY

03

01

118 G DISCHARGE NUMBER

03

DAY

31

YEAR MO

WASTEWATER & STORM WATER

**EFFLUENT** 

\*\*\* NO DISCHARGE

XX \*\*\* NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING		QUALITY OR CONCENTRATION				NO. EX	OF	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	*****	**	,	*****	*****	19			
00300 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	******	****	2 MINIMUM	******	******	MG/L		TWICE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	******	**	*****	*****		19			
00530 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	******	****	******	******	100 DAILY MX	MG/L		TWICE/ WEEK	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	**	*****	******		25			
00545 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	******	*****	***	******	******	1 DAILY MX	ML/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			03	*****	*****	*****	**			
50050 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	MGD	******	******	*****	*		ONCE/ BATCH	ESTIMA
	SAMPLE MEASUREMENT			•••••							
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	PERMIT REQUIREMENT										

		l Certify under penalty of law that this document and all attachments were prepared under my	WS
		direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or	-//
		persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is , to the best of my knowledge and belief, true, accurate,	Sit
	Site Vice President	and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE
ĺ	TYPED OR PRINTED	inducing the possibility of fine and imprisorment for knowing violations.	OFFICER

	NA.		LEPHONE	DATE			
31							
9,	Site Vice President	423	843-7001	20	04	02	
	SIGNATURE OF PRINCIPAL EXECUTIVE						
	OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	МО	DAY	

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

During this reporting period, there has been no flow from the Dredge Pond other than that resulting from rainfall. No Discharge this Period

EPA Form 3320-1 (REV 3/99)

ATTN:Millicent Garland

Previous editions may be used

Page 1 of 1

## TVA Sequoyah Nuclear Plant NPDES Permit Number TN0026450 Attachment 1

## Turbine Building Sump Monitoring Data – February 27, 2020 - March 3, 2020

The turbine building sump was discharged directly to the yard drainage pond February 27, 2020 and re-aligned back on March 3, 2020. During this period, the turbine building sump was monitored in accordance with the narrative condition found in Part 1.A.2 of the NPDES Permit TN0026450. There are no permit limits applicable at this monitoring point, which flows to the yard drainage pond, mixes with other flows in the diffuser pond, then discharges to the Tennessee River at Outfall 101.

Parameter	Parameter Minimum		Maximum	No. of Samples	
Flow	-	1.33 MGD	1.67 MGD	6	
pН	7.78	-	8.19	2	
O&G	-	< 4.8	< 4.8	2	
TSS	-	9.05 mg/L	9.9 mg/L	2	