



Boston Edison

Pilgrim Nuclear Power Station
Rocky Hill Road
Plymouth, Massachusetts 02360

Henry V. Oheim
General Manager - Technical Section

March 20, 1996
BEC0 Ltr. 5.96.018

NPDES Programs (SPA)
U.S. Environmental Protection Agency
P.O. Box 8127
Boston, MA 02114-8127

Massachusetts Division of Water Pollution Control
Lakeville Hospital
Lakeville, MA 02346

Discharge Monitoring Report

Dear Sirs:

Enclosed is the Discharge Monitoring Report for Pilgrim Nuclear Power Station (PNPS), NPDES permit number MA0003557 (Federal) and number 359 (State).

The period covered by this report is February, 1996.

Should you have any questions on this report, please direct them to our Principal Marine Biologist, Mr. Robert Anderson, at (508) 830-7935.

Respectfully,

H. V. Oheim

RDA/pkk/RAP96/DMR

- Attachments: 1. Summary
- 2. Discharge Monitoring Report

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

U. S. Nuclear Regulatory Commission
Region I
475 Allendale Road
King of Prussia, PA 19406

Senior NRC Resident Inspector
Pilgrim Nuclear Power Station

9603250505 960229
PDR ADDCK 05000293
R PDR

SUMMARY

PILGRIM I DISCHARGE MONITORING REPORT

In accordance with the Federal Clean Water Act, as amended (33USC 1251 et seq: the "CWA"), and the Massachusetts Clean Water Act, as amended (M.G.L.; Chap. 21, 26-53), regarding effluent limitations, monitoring requirements and other conditions set forth in the Pilgrim NPDES permit (Federal Permit Number MA0003557, and State Permit Number 359), Parts I and II, the following information is submitted for the period February, 1996.

I. Discharge Points Covered in this Report

| <u>Discharge Point</u> | <u>Discharge Identification</u> |
|------------------------|--|
| 001 | Condenser Cooling Water |
| 002 | Thermal Backwash for Biofouling Control |
| 003 | Intake Screen Wash |
| 004, 005, 006, and 007 | Yard Drains (April and September) |
| 008 | Sea Foam Suppression |
| 010 | Service Cooling Water |
| 011 | Makeup Water and Demineralizer Waste Discharge |

II. Summary and Notes of Discharge Report

- A. The flows at points 001 and 010 are calculated from system pump capacity and are equal to the total for all pumps in each system running at full capacity for a 24-hour period. The flow at 011 is measured by noting sump levels before and after discharge. Flow at point 002 is a conservative figure obtained by calculating flow if backwashing took place for 24 hours. Flows at points 003 and 008 are calculated from system pump capacity and mean operating time.
- B. The temperatures at points 001 and 002 are measured by resistance temperature detectors (RTD's).
- C. Periodically, total residual chlorine (TRC) concentration in the service cooling water (010) exceeds permit requirements (0.50 ppm daily average TRC and 1.00 ppm daily maximum TRC) prior to mixing with any other stream, primarily because of the number of service water pumps in operation. Chlorine injection levels are lowered as a corrective measure. The dilution provided by the PNPS circulating water flow keeps total residual chlorine concentrations discharged to Cape Cod Bay below the NPDES permit limit of 0.1 ppm.
- D. For stormwater outfalls 004, 005, 006 and 007, Sigma 800 SL Portable Composite Samplers are utilized. The samplers are equipped with a "liquid level activator" that commences the sampling when the liquid reaches a predetermined level. This assures a sample is taken "within the first hour of the start of a significant storm event." The intake and collection assemblies of the samplers conform to U.S. EPA requirements for collecting oil and grease samples (USEPA letter to BECo dated 1/7/92). No additional inputs to these stormwater outfalls occur downstream of the composite samplers' sampling locations.

- E. Intake traveling water screens were operated with dechlorination pumps operating at all times.
- F. No sawdust was applied to seek and seal PNPS condenser leaks in February.
- G. The following boron and sodium nitrite discharges (ppm) occurred in February 1996 from discharge point #001. All discharges were below NPDES permit limits prior to entering Cape Cod Bay.

| <u>Date Discharged</u> | <u>Gallons Discharged</u> | <u>Concentration Before Discharge</u> | <u>Concentration Discharged</u> |
|------------------------|---------------------------|---------------------------------------|---------------------------------|
|------------------------|---------------------------|---------------------------------------|---------------------------------|

Boron

No Discharge

Sodium Nitrite

No Discharge

- H. Approximately 5 cubic yards of sand were removed from the concrete surface of the intake structure on February 6, 1996. It was pumped into breakwater crevices above the high tide mark. The sand removal was necessary to alleviate concern over its effects on normal operation of mechanical components/traveling screens, and it was expected to have no adverse environmental impact. The removal operation was in accordance with Part I, Paragraph A.1.0 of the NPDES permit.

ATTACHMENT 2 TO BECo LETTER 5.96.018

DISCHARGE MONITORING REPORT

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BOSTON ED #1 PILGRIM PLANT
 ADDRESS ROCKY HILL ROAD
 RFD #1
 PLYMOUTH MA 02350

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

MA000557 PERMIT NUMBER
 0011 DISCHARGE NUMBER

CONDENSER COOLING WATER
 (SUBS 1)
 F - FINAL
 MAJ 83
 Form Approved. OMB No. 40-004
 Approval expires 05-31-98

| MONITORING PERIOD | | | | | |
|-------------------|----|---------|------|---------|-----|
| YEAR | MO | DAY | YEAR | MO | DAY |
| 98 | 12 | 01 | 98 | 02 | 29 |
| (20-21) | | (22-23) | | (24-25) | |
| | | (26-27) | | (28-29) | |
| | | | | (30-31) | |

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

FACILITY LOCATION
 ATTN: T.A. SULLIVAN, PLANT MANAGER

| PARAMETER (32-37) | X | (3 Card Only) QUANTITY OR LOADING (46-53) | | | (4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61) | | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-68) | SAMPLE TYPE (69-70) |
|--|--------------------|---|-------------------|-------------|---|---------|---------|--------------------|-------------------|----------------------------------|------------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | UNITS | | | |
| TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | ***** | ***** | | ***** | ***** | 67.3 | (15) OF | 0 | 99/99 | RC |
| | PERMIT REQUIREMENT | ***** | ***** | *** | ***** | ***** | 132 | DAILY MX | | | CONTIN RECORD |
| OXIDANTS, TOTAL RESIDUAL 34044 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | ***** | ***** | | ***** | 0.01 | 0.03 | (17) MG/L | 0 | WH/05 | GR |
| | PERMIT REQUIREMENT | ***** | ***** | *** | ***** | 0.1 | 0.1 | NO AVG DAILY MX | | | WHEN GRAB DISCHR |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | 446.4 | 446.4 | (03) MGD | ***** | ***** | ***** | | 0 | 99/99 | ES |
| | PERMIT REQUIREMENT | 447.0 NO AVG | 510.0 DAILY MX | MGD | ***** | ***** | ***** | *** | | | CONTIN ESTIMA |
| TEMP. DIFF. BETWEEN INTAKE AND DISCHARGE 61576 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | ***** | ***** | | ***** | ***** | 29.5 | (15) OF | 0 | 99/99 | CA |
| | PERMIT REQUIREMENT | ***** | ***** | *** | ***** | ***** | 32 | DAILY MX | | | CONTIN CALCT |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 T.A. SULLIVAN
 PLANT 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 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

T.A. Sullivan
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 508.747.8100
 DATE 96 3 15
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 PH SHALL NOT VARY MORE THAN 0.5 PH STANDARD UNITS FROM INTAKE WATER. SEE PERMIT PAGE 5 PARAGRAPHS W3N F3 R BORON AND SODIUM NITRATE REPORTING REQUIREMENTS. ATTACH ALL RELATED REPORTS TO THIS FORM. A BARRIER NET SHALL BE MAINTAINED AT THE THERMAL END OF DISCHARGE CANAL AT ALL TIMES.

PERMITTEE NAME/ADDRESS (Include Facility Name, Location if Different)
 NAME BOSTON ED #1 PILGRIM PLANT
 ADDRESS ROCKY HILL ROAD
 RFD #1
 PLYMOUTH MA 02560

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (12-16) (17-19)

MA003557 PERMIT NUMBER
 0721 DISCHARGE NUMBER

Form Approved. OMB No. 2040-0004
 Approval expires 05-31-98
 THERMAL BACKWASH (SURS)
 F - FINAL
 MAJOR

FACILITY LOCATION
 ATTN: T.A. SULLIVAN, PLANT MANAGER

MONITORING PERIOD

| | | | | | |
|------|----|-----|------|----|-----|
| YEAR | MO | DAY | YEAR | MO | DAY |
| 96 | 12 | 01 | 96 | 07 | 20 |

FROM (20-21) (22-23) (24-25) TO (26-27) (28-29) (30-31)

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

| PARAMETER (32-37) | X | (3 Card Only) QUANTITY OR LOADING (46-53) | | | (4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61) | | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-68) | SAMPLE TYPE (69-70) |
|---|--------------------|---|--------------|--------------|---|---------|---------|-------|----------------|-------------------------------|----------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | UNITS | | | |
| TEMPERATURE WATER DEG. FAHRENHEIT 00011 1 0 0 | SAMPLE MEASUREMENT | ***** | ***** | | ***** | ***** | | | (15) | 0 | 99/99 RC |
| EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ***** | *** | ***** | ***** | | | OF | | CONTINUOUS RECORD |
| FLOW IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 | SAMPLE MEASUREMENT | ***** | no discharge | (13) MGD | ***** | ***** | | | DAILY MX | DEG. F | 0 WH/DS ES |
| EFFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | 255.0 | DAILY MX MGD | ***** | ***** | | | **** | | WHEN ESTIMATED DISCH |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
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| | PERMIT REQUIREMENT | | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | | |

| | | | | |
|---|---|---|---------------------------|-----------------|
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER T. A. SULLIVAN PLANT MANAGER TYPED OR PRINTED | I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 6 years.) | SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>T. A. Sullivan</i> | TELEPHONE 508-747-8100 | DATE 96 3 15 |
|---|---|---|---------------------------|-----------------|

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 THE PH SHALL NOT VARY MORE THAN 0.5 STANDARD UNITS FROM THAT OF THE INTAKE WATER. FLOW RATE IS TO BE ESTIMATED AS IF BACKFLUSHING TOOK PLACE FOR 24 CONTINUOUS HOURS. SEE PERMIT PAGE 3 FOR CONDITIONS REGARDING THE FREQUENCY OF DISCHARGE.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BOSTON ED #1 PILGRIM PLANT
 ADDRESS ROCKY HILL ROAD
 RFD #1
 PLYMOUTH MA 02360
 FACILITY
 LOCATION
 ATTN: T.A. SULLIVAN, PLANT MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (12-16) (17-19)
 4807557 PERMIT NUMBER
 073 A DISCHARGE NUMBER

Form Approved
 EPA Form No. 2040-0004
 Approval Expires 05-31-98
 INTAKE SCREEN (SUBR S)
 F - FINAL
 48118

| MONITORING PERIOD | | | | | |
|------------------------------|----|-----|----------------------------|----|-----|
| YEAR | MO | DAY | YEAR | MO | DAY |
| 96 | 2 | 11 | 95 | 12 | 27 |
| FROM (20-21) (22-23) (24-25) | | | TO (26-27) (28-29) (30-31) | | |

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

| PARAMETER (32-37) | X | QUANTITY OR LOADING (3 Card Only) (46-53) | | | QUANTITY OR CONCENTRATION (4 Card Only) (38-45) | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-68) | SAMPLE TYPE (69-70) |
|--|---|---|--------------|-----------|---|---------|---------|----------------|-------------------------------|---------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | | | |
| FLOW IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 1 EFFLUENT GROSS VALUE | | 1.51 | 3.17 | (0.3) MGD | ***** | ***** | ***** | | 0 01/01 | ES |
| | | 4.1 MO AVG | 4.1 DAILY MX | MGD | ***** | ***** | ***** | **** | DAILY | ESTIMATE |
| | | | | | | | | | | |
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 T.A. SULLIVAN
 PLANT MANAGER
 TYPED OR PRINTED

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

T.A. Sullivan
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 508 747-8100
 DATE 96 3 15
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 THE TEMPERATURE OF THIS DISCHARGE SHALL AT NO TIME EXCEED THE TEMPERATURE OF THE INTAKE WATER.
 ALL FISH SHELLFISH AND OTHER ORGANISMS COLLECTED OR TRAPPED ON INTAKE SCREEN SHOULD BE RETURNED TO WATER OF AMBIENT TEMP. SUFFICIENTLY DISTANT FROM INTAKE STRUCTURES TO PREVENT REIMPRISONMENT.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BOSTON ED #1 PILGRIM PLANT
 ADDRESS ROCKY HILL ROAD
 RFD #1
 PLYMOUTH MA 02560

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

14003337
 PERMIT NUMBER

078 A
 DISCHARGE NUMBER

Form Approved.
 SEA FOAM SUPPRESSANT (SUPER S)
 F - FINAL
 MAJ
 Approval expires 05-31-98

FACILITY LOCATION
 ATTN: T.A. SULLIVAN, PLANT MANAGER

| MONITORING PERIOD | | | | | | |
|-------------------|----|-----|----|------|----|-----|
| YEAR | MO | DAY | TO | YEAR | MO | DAY |
| 96 | 2 | 01 | | 96 | 2 | 27 |

(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 (45-53) | | | (4 Card Only) QUANTITY OR CONCENTRATION (38-45) | | | | NO. EX (62-63) | FREQUENCY OF ANALYSIS (64-68) | SAMPLE TYPE (69-70) |
|--|--------------------|---|----------|-------|---|---------|---------|-------|----------------|-------------------------------|---------------------|
| | | AVERAGE | MAXIMUM | UNITS | MINIMUM | AVERAGE | MAXIMUM | UNITS | | | |
| FLOW IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 3 EFFLUENT GROSS VALUE | no discharge | 0.73 | 0.73 | MGD | ***** | ***** | ***** | ***** | 0 | 01/01 | ES |
| | PERMIT REQUIREMENT | NO AVG | DAILY MX | MGD | ***** | ***** | ***** | ***** | | DAILY | 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
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 PLANT MANAGER
 TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE NUMBER: 508 747-8100
 DATE: 96 3 15

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

PERMITTEE NAME/ADDRESS (Include Facility Name, Location if Different)
 NAME BOSTON ED #1 PILGRIM PLANT
 ADDRESS ROCKY HILL ROAD
 RFD #1
 PLYMOUTH MA 02360

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

MA000557
 PERMIT NUMBER

011 A
 DISCHARGE NUMBER

Form Approved
 MAKE UP WATER AND CONDENSATE
 (SUBR S)
 F - FINAL
 MAJ00
 Approval Expires 05-31-98

FACILITY LOCATION
 ATTN: T.A. SULLIVAN, PLANT MANAGER

| MONITORING PERIOD | | | | | |
|-------------------|----|-----|------|----|-----|
| YEAR | MO | DAY | YEAR | MO | DAY |
| 96 | 02 | 11 | 96 | 02 | 29 |

FROM (20-21) (22-23) (24-25) TO (26-27) (28-29) (30-31)

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

| PARAMETER (32-37) | X | (3 Card Only) QUANTITY OR LOADING (46-53) | | | (4 Card Only) QUANTITY OR CONCENTRATION (46-53) | | | 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 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | ***** | ***** | | ***** | no discharge | (17) | 0 | 01/BA GR | |
| | PERMIT REQUIREMENT | ***** | ***** | *** | ***** | 30 MU AVG | 100 DAILY MX | MG/L | ONCE GRAB BATCH | |
| FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE | SAMPLE MEASUREMENT | no discharge | (03) | MGD | ***** | ***** | ***** | 0 | WH/DS ES | |
| | PERMIT REQUIREMENT | 0.015 MO AVG | 0.05 DAILY MX | MGD | ***** | ***** | ***** | *** | WHEN DISCH | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |
| | SAMPLE MEASUREMENT | | | | | | | | | |
| | PERMIT REQUIREMENT | | | | | | | | | |

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
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 PLANT MANAGER
 TYPED OR PRINTED

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

T.A. Sullivan
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE
 508 747-8100 96 3 15
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 SEE PAGE 5 OF PERMIT PARAGRAPH W FOR SOUTUM NITRATE REPORTING REQUIREMENTS. ATTACH ALL RELATED REPORTS TO THIS FORM