8301 M 8412 770309

MONTHLY REPORT FORM

AGENCY COPY

REPORTED

OhioEPA

NAME, ADDRESS, CITY, COUNTY, ZIP

TOLEDO EDISON COMPANY
DAVIS-BESSE NUCLEAR
POWER STATION - UNIT NO.1
5501 NORTH STATE ROUTE 2
OAK HARBOR 43449 OTTAWA

STATION CODE: 2IB00011001

DATE (MONTH, YEAR): NOV 1984

PAGE OF: 1

PRINTING DATE: 06/08/84

APPLICATION NO: OH0003786

SAMPLING STATION DESCRIPTION: 001 COLLECTION BOX

NOTE: THIS FORM MUST BE TYPE

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE
IN(2) - ENTER FREQUENCY OF SAMPLING

REPORTING LAB: Toledo Edison Co.

ANALYST: R. J. Scott

ENTER PARAMETER CODE FOR EACH COLUMN AND CODE NO. AT RIGHT											
(1)	1	3	1	3	3						
(2)	999	1	999	1	1						
	WATER TEMP. F	PH S.U.	CONDUI FLOW MGD	CHLOR TOT RE MG/L	CHLOR FREE A MG/L						
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	
DAY	00011	00400	50050	50060	50064						
01	57	7.9	16.4	0.0	0.0						
02	57	8.1	14.1	0.0	0.0						
03	AN	AN	AN	AN	AN						
04	58	AN	14.6	AN	AN						
05	57	8.4	14.9	0.0	0.0						
06	54	AD	10.3	AD	AD						
07	47	AD	15.1	AD	AD						
08	49	8.3	14.6	0.0	0.0						
09	53	8.2	15.5	0.0	0.0						
10	53	AN	15.5	AN	AN						
11	51	AN	17.5	AN	AN						
12	51	8.1	15.4	0.2	0.1						
13	51	8.0	14.9	0.2	0.1						
14	54	8.0	15.0	0.0	0.0						
15	51	8.0	15.3	0.0	0.0						
16	49	7.5	15.1	0.0	0.0						
17	46	AN	13.7	AN	AN						
18	AN	AN	AN	AN	AN						
19	44	7.9	11.0	0.0	0.0						
20	45	7.9	8.9	0.0	0.0						
21	47	8.0	3.6	0.0	0.0						
22	44	AN	9.5	AN	AN						
23	43	8.0	7.7	0.0	0.0						
24	42	AN	6.0	AN	AN						
25	43	AN	8.7	AN	AN						
26	AD	AD	AD	AD	AD						
27	44	7.7	11.7	0.2	0.1						
28	44	7.0	15.6	0.2	0.1						
29	45	7.6	10.7	0.0	0.0						
30	45	7.5	6.2	0.0	0.0						
31	--	--	--	--	--						
TOTAL	1324	--	337.5	0.8	0.4						
AVG	49	--	12.5	0.0	0.0						
MAX	58	8.4	17.5	0.2	0.1						
MIN	42	7.0	3.6	0.0	0.0						

ADDITIONAL REMARKS (ALL REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

8501020269 841130
PDR ADOCK 05000346
R PDR

IE 25
1/1

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER

FORM NO. EPA-4500 (10-80)
FORMERLY EPA SUR 1

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED AND BASED ON MY INQUIRY O 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.

DATE REPORT COMPLETED	SIGNATURE OF REPORTER	TITLE OF REPORTER
12/7/84	S. M. Quennoz	Plant Manager, Davis-Besse

8501 M 8412 77035 9

MONTHLY REPORT FORM

AGENCY COPY

REPORTED

OhioEPA

NAME, ADDRESS, CITY, COUNTY, ZIP	STATION CODE	DATE (MONTH, YEAR)	PAGE	PRINTING DATE	APPLICATION NO
TOLEDO EDISON COMPANY DAVIS-BESSE NUCLEAR POWER STATION - UNIT NO.1 5501 NORTH STATE ROUTE 2 OAK HARBOR 43449 OTTAWA	2IB00011002	NOV 1984	OF 1	06/08/84	OH0003786

SAMPLING STATION DESCRIPTION: 002 AREA RUNOFF

NOTE: THIS FORM MUST BE TYPE

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE
IN(2) - ENTER FREQUENCY OF SAMPLING

REPORTING LAB: Toledo Edison Company

ANALYST: R. J. Scott

ENTER ANALYSIS FEATURE AND CODE NO. AT RIGHT

(1)	1	3	3								
(2)	999	1	1								
	CONDUI FLOW MGD	PH S.U.	RESIDU T. NFL MG/L								
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	
DAY	50050	00400	00530								
01	0.051										
02	0.013										
03	0.013										
04	0.149										
05	0.013	8.2	7								
06	0.013										
07	0.013										
08	0.013										
09	0.220										
10	0.022										
11	0.253										
12	0.013	8.6	9								
13	0.013										
14	0.013										
15	0.135										
16	0.013										
17	0.013										
18	0.013										
19	0.013	8.1	10								
20	0.013										
21	0.013										
22	0.013										
23	0.013										
24	0.013										
25	0.013										
26	0.013	8.2	7								
27	0.013										
28	0.177										
29	0.013										
30	0.037										
31	--										
TOTAL	1.330	--	33								
AVG.	0.044	--	8								
MAX.	0.253	8.6	10								
MIN.	0.013	8.1	7								

ADDITIONAL REMARKS (ALL REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER

FORM NO. EPA-4500 (10-80)
FORMERLY EPA-SUR-1

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED AND BASED ON MY INQUIRY O THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I A AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

DATE REPORT COMPLETED	SIGNATURE OF REPORTER	TITLE OF REPORTER
12/7/84	S. M. Quennoz	Plant Manager, Davis-Besse

8301 * 8412 770309

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MONTHLY REPORT FORM

REPORTED

OhioEPA

NAME, ADDRESS, CITY, COUNTY, ZIP	STATION CODE	DATE (MONTH, YEAR)	PAGE	PRINTING DATE	APPLICATION NO
TOLEDO EDISON COMPANY DAVIS-BESSE NUCLEAR POWER STATION - UNIT NO.1 5501 NORTH STATE ROUTE 2 OAK HARBOR 43449 OTTAWA	2IB00011003	NOV 1984	OF 1	06/08/84	OH0003781

SAMPLING STATION DESCRIPTION: 003 SCREEN WASH

NOTE: THIS FORM MUST BE TYPE

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE
IN(2) - ENTER FREQUENCY OF SAMPLING

REPORTING LAB: Toledo Edison Company

ANALYST: R. J. Scott

ENTER ANALYSES PERFORMED AND CODE NO. AT RIGHT											
(1)	1	3									
(2)	999	1									
	CONDUI FLOW MGD	RESIDU T. NFL MG/L									
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	
DAY	50050	00530									
01	0.222										
02	0.222										
03	0.222										
04	0.222										
05	0.222	26									
06	0.222										
07	0.222										
08	0.222										
09	0.222										
10	0.222										
11	0.222										
12	0.222										
13	0.222										
14	0.222										
15	0.222										
16	0.222										
17	0.222										
18	0.222										
19	0.222										
20	0.222										
21	0.222										
22	0.222										
23	0.222										
24	0.222										
25	0.222										
26	0.222										
27	0.222										
28	0.222										
29	0.222										
30	0.222										
31	---										
TOTAL	6.660	26									
AVG.	0.222	26									
MAX.	0.222	26									
MIN.	0.222	26									

ADDITIONAL REMARKS (ALL REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER

FORM NO. EPA-4500 (10-80)
FORMERLY EPA SUR 1

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED AND BASED ON MY INQUIRY O THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I A AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

DATE REPORT COMPLETED	SIGNATURE OF REPORTER	TITLE OF REPORTER
12/7/84	S. M. Quennoz	Plant Manager, Davis-Besse

8301 P 8412 770309

MONTHLY REPORT FORM

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REPORTED

OhioEPA

NAME, ADDRESS, CITY, COUNTY, ZIP	STATION CODE	DATE (MONTH, YEAR)	PAGE	PRINTING DATE	APPLICATION
TOLEDO EDISON COMPANY DAVIS-BESSE NUCLEAR POWER STATION - UNIT NO.1 5501 NORTH STATE ROUTE 2 OAK HARBOR 43449 OTTAWA	2IB00011601	NOV 1984	OF 1	05/08/84	OH00037

SAMPLING STATION DESCRIPTION: 601 SANITARY

NOTE: THIS FORM MUST BE TY

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE
IN(2) - ENTER FREQUENCY OF SAMPLING

REPORTING LAB: Toledo Edison Co.

ANALYST: R. J. Scott

ENTER ANALYSES PERFORMED AND CODE NO. AT RIGHT

(1)	3	3	3	1	3	3	3	3	3		
(2)	1	1	1	999	1	1	1	1	1		
	COLOR SEVER UNITS	ODOR SEVER UNITS	TURBID SEVER UNITS	CONDUI FLOW MGD	CHLOR TOT RE MG/L	BOD 5 DAY MG/L	PH S.U.	RESIDU TO NFL MG/L	FEC CO MF-FCB #/100M		
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CO	
DAY	00083	01330	01350	50050	50060	00310	00400	00530	31616		
01	1	1	2	0.009	1.8						
02	1	1	2	0.009	1.5						
03	AN	AN	AN	0.009	AN						
04	AN	AN	AN	0.009	AN						
05	3	4	3	0.009	3.0						
06	3	4	3	0.009	2.0	7			74		
07	3	4	3	0.009	2.0						
08	3	4	3	0.009	2.0						
09	1	2	2	0.009	2.0						
10	AN	AN	AN	0.009	AN						
11	AN	AN	AN	0.009	AN						
12	1	2	2	0.009	2.0						
13	1	2	2	0.009	2.0						
14	1	2	2	0.009	0.5						
15	1	2	2	0.009	0.8						
16	1	1	1	0.009	1.5						
17	AN	AN	AN	0.009	AN						
18	AN	AN	AN	0.009	AN						
19	1	1	1	0.009	1.0		7.6	28			
20	1	1	1	0.009	1.5						
21	1	1	1	0.009	1.8						
22	AN	AN	AN	0.009	AN						
23	1	1	1	0.009	1.8						
24	AN	AN	AN	0.009	AN						
25	AN	AN	AN	0.009	AN						
26	1	1	1	0.009	1.0						
27	1	1	1	0.009	0.8						
28	1	1	1	0.009	1.0						
29	1	1	1	0.009	1.0						
30	1	1	1	0.009	0.5						
31	--	--	--	0.009	--						
TOTAL	29	38	36	0.270	31.5	7	--	28	74		
AVG	1	2	2	0.009	1.5	7	--	28	74		
MAX	3	4	3	0.009	3.0	7	7.6	28	74		
MIN	1	1	1	0.009	0.5	7	7.6	28	74		

ADDITIONAL REMARKS (ALL REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER

FORM NO. EPA-6500 (10-80)
FORMERLY EPA-SUR 1

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED 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.

DATE REPORT COMPLETED	SIGNATURE OF REPORTER	TITLE OF REPORTER
12/7/84	S. M. Quennoz	Plant Manager, Davis-Besse

8301 N 8412 772309

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MONTHLY REPORT FORM

OhioEPA

NAME, ADDRESS, CITY, COUNTY, ZIP.	STATION CODE	DATE (MONTH, YEAR)	PAGE	PRINTING DATE	APPLICATION N
TOLEDO EDISON COMPANY DAVIS-BESSE NUCLEAR POWER STATION - UNIT NO.1 5501 NORTH STATE ROUTE 2 OAK HARBOR 43449 OTTAWA	2IP00011602	NOV 1984	PF 1	06/08/84	OH0003786

SAMPLING STATION DESCRIPTION: 602 LOW VOLUME WASTES

NOTE: THIS FORM MUST BE TYP

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE
IN(2) - ENTER FREQUENCY OF SAMPLING

REPORTING LAB: Toledo Edison Company

ANALYST: R. J. Scott

ENTER ABBREVIATED PERMITTED AND CODE NO. AT RIGHT											
(1)	3	3	3	1							
(2)	1	1	1	999							
	PH S.U.	RESIDU T. N L MG/L	C&G TOTAL MG/L	CONDUI FLOW MGD							
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	
DAY	00400	00530	00550	50050							
01				0.076							
02				0.076							
03				0.076							
04				0.076							
05	7.7	2	0	0.076							
06				0.076							
07				0.076							
08				0.076							
09				0.076							
10				0.076							
11				0.076							
12	7.9	3	0	0.076							
13				0.076							
14				0.076							
15				0.076							
16				0.076							
17				0.076							
18				0.076							
19	7.7	7	0	0.076							
20				0.076							
21				0.076							
22				0.076							
23				0.076							
24				0.076							
25				0.076							
26	7.3	4	0	0.076							
27				0.076							
28				0.076							
29				0.076							
30				0.076							
31	--	--	--	--							
TOTAL	--	16	0	2.280							
AVG.	--	4	0	0.076							
MAX.	7.9	7	0	0.076							
MIN.	7.3	2	0	0.076							

ADDITIONAL REMARKS (ALL REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER

FORM NO. EPA 4500 (10-80)
FORMERLY EPA SUR-1

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED AND BASED ON MY INQUIRY O THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I A AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

DATE REPORT COMPLETED	SIGNATURE OF REPORTER	TITLE OF REPORTER
12/7/84	S. M. Quennoz	Plant Manager, Davis-Besse

8301 N 8412 770309

AGENCY COPY

MONTHLY REPORT FORM

REPORTED

OhioEPA

NAME, ADDRESS, CITY, COUNTY, ZIP

TOLEDO EDISON COMPANY
DAVIS-BESSE NUCLEAR
POWER STATION - UNIT NO.1
5501 NORTH STATE ROUTE 2
OAK HARBOR 43449 OTTAWA

STATION CODE: 2IB00011603

DATE (MONTH, YEAR): NOV 1984

PAGE: OF 1

PRINTING DATE: 06/08/84

APPLICATION NO: OH000378

SAMPLING STATION DESCRIPTION: 603. REGENERATES

NOTE: THIS FORM MUST BE TYPE

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE

IN(2) - ENTER FREQUENCY OF SAMPLING

REPORTING LAB:

ANALYST:

ENTER MONITORING FEATURE NAME AND CODE NO. AT RIGHT

	(1)									
	(2)									
	PH S.U.	RESIDU T. NFL MG/L	CONDUI FLOW MGD							
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
DAY	00400	00530	50050							
01										
02										
03										
04										
05										
06										
07										
08										
09										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										
TOTAL										
AVG										
MAX										
MIN										

ADDITIONAL REMARKS (AH REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

AH: A permit-to-install (Application No. 03-1960) effective as of October 25, 1984 states: The facilities monitoring station 2IB00011603 will be eliminated, with the discharge monitored at 2IB00011602 (collection box) and 2IB00011001 (Final Outfall)

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER

FORM NO. EPA 4500 (10-80)
FORMERLY EPA SUR-1

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED 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.

DATE REPORT COMPLETED	SIGNATURE OF REPORTER	TITLE OF REPORTER
12/7/84	S. M. Quennoz	Plant Manager, Davis-Besse

8301 M 8412 77[illegible]

MONTHLY REPORT FORM

AGENCY COPY

REPORTED)

OhioEPA

NAME, ADDRESS, CITY, COUNTY, ZIP

TOLEDO EDISON COMPANY
DAVIS-BESSE NUCLEAR
POWER STATION - UNIT NO.1
5501 NORTH STATE ROUTE 2
OAK HARBOR 43449 OTTAWA

STATION CODE: 2IR00011604

DATE (MONTH, YEAR): NOV 1984

PAGE: OF 1

PRINTING DATE: 06/08/84

APPLICATION NO: OH0003781

SAMPLING STATION DESCRIPTION
604 FLOOR DRAINS

NOTE: THIS FORM MUST BE TYPE

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE
IN(2) - ENTER FREQUENCY OF SAMPLING

REPORTING LAB: Toledo Edison Co.

ANALYST: R. J. Scott

ENTER ANALYTICAL PARAMETER AND CODE NO. AT RIGHT

(1)	1	3	3							
(2)	999	1	1							
	CONDUI FLOW MGD	PH S.U.	O&G TOTAL MG/L							
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING COD
DAY	50050	00400	00550							
01	0.013									
02	0.013									
03	0.013									
04	0.013									
05	0.013	7.8	0							
06	0.013									
07	0.013									
08	0.013									
09	0.013									
10	0.013									
11	0.013									
12	0.013	8.1	0							
13	0.013									
14	0.013									
15	0.013									
16	0.013									
17	0.013									
18	0.013									
19	0.013	7.6	0							
20	0.013									
21	0.013									
22	0.013									
23	0.013									
24	0.013									
25	0.013									
26	0.013	8.0	1							
27	0.013									
28	0.013									
29	0.013									
30	0.013									
31	--									
TOTAL	0.390	--	1							
AVG.	0.013	--	0							
MAX	0.013	8.1	1							
MIN.	0.013	7.6	0							

ADDITIONAL REMARKS (ALL REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER

FORM NO. EPA-4500 (10-80)
FORMERLY EPA SUR-1

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED AND BASED ON MY INQUIRY O 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.

DATE REPORT COMPLETED	SIGNATURE OF REPORTER	TITLE OF REPORTER
12/7/84	S. M. Quennoz	Plant Manager, Davis-Besse

8301 R 8412 770309

MONTHLY REPORT FORM

AGENCY COPY

REPORTED

OhioEPA

NAME, ADDRESS, CITY, COUNTY, ZIP	STATION CODE	DATE (MONTH, YEAR)	PAGE	PRINTING DATE	APPLICATION NO
TOLEDO EDISON COMPANY DAVIS-BESSE NUCLEAR POWER STATION - UNIT NO.1 5501 NORTH STATE ROUTE 2 OAK HARBOR 43449 OTTAWA	21B00011801	NOV 1984	OF 1	06/08/84	OH0003786

SAMPLING STATION DESCRIPTION: 801 INTAKE STATION

NOTE: THIS FORM MUST BE TYPE

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE
IN(2) - ENTER FREQUENCY OF SAMPLING

REPORTING LAB: Toledo Edison Company

ANALYST: R. J. Scott

ENTER ANALYSES PERFORMED AND CODE NO. AT RIGHT

(1)	1									
(2)	999									
	WATER TEMP. F									
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
DAY	00011									
01	56									
02	55									
03	AN									
04	53									
05	53									
06	52									
07	51									
08	50									
09	50									
10	50									
11	50									
12	47									
13	46									
14	51									
15	45									
16	45									
17	42									
18	AN									
19	42									
20	41									
21	41									
22	40									
23	40									
24	40									
25	40									
26	AN									
27	42									
28	43									
29	42									
30	42									
31	--									
TOTAL	1249									
AVG.	46									
MAX.	56									
MIN.	40									

ADDITIONAL REMARKS (ALL REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER

FORM NO. EPA-4500 (10-80)
FORMERLY EPA-SUR-1

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED 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.

DATE REPORT COMPLETED	SIGNATURE OF REPORTER	TITLE OF REPORTER
12/7/84	S. M. Quennoz	Plant Manager, Davis-Besse

TOLEDO EDISON

File: RR 2 P-12-84-11
E 2.40.1.1.2
G84 835AL

December 14, 1984

Ohio Environmental Protection Agency
Technical Records Section
P.O. Box 1049
Columbus, Ohio 43216

Gentlemen:

Attached is a copy of the November 1984 Ohio EPA Discharge Monitoring Report for Davis-Besse Nuclear Power Station.

Yours truly,

Stephen M. Quennoz

Stephen M. Quennoz
Plant Manager, Davis-Besse
Davis-Besse Nuclear Power Station
(419) 259-5000, Ext. 223

SMQ/KLN/yml

Attachment

cc: J. E. Sullivan
W. G. Rogers, U.S. NRC Resident Inspector
J. L. Scott-Wasilk
J. F. Stolz, NRC

OhioEPA DISCHARGE MONITORING REPORT

COMMENTS:

PERMITTEE NAME: Toledo Edison Company
ADDRESS: Davis-Besse Nuclear Power Station
PHONE: 5501 North State Route 2
Oak Harbor, Ohio 43449
(419) 259-5000

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS	SIC	LATITUDE	LONGITUDE
OH	2IB00011	001		W 83° 5'	N 41° 35'

REPORTING PERIOD FROM (20-21) YEAR 84 (22-23) MO 11 (24-25) DAY 01 TO (26-27) YEAR 84 (28-29) MO 11 (30-31) DAY 30

PARAMETER (32-37)		QUANTITY (38-45) MINIMUM	QUANTITY (46-53) AVERAGE	QUANTITY (54-61) MAXIMUM	QUANTITY (62-63) UNITS	QUANTITY (3 card only) NO	CONCENTRATION (38-45) MINIMUM	CONCENTRATION (46-53) MAXIMUM	CONCENTRATION (54-61) AVERAGE	CONCENTRATION (62-63) UNITS	CONCENTRATION (4 card only) NO	FREQUENCY OF ANALYSIS (64-66)	SAMPLE TYPE (68-70)
00011 Water Temperature	REPORTED	42	49	58	°F							1/1	CONT
	PERMIT CONDITION												
00400 pH	REPORTED						7.0	8.4		pH S.U.	0	1/1	GRAB
	PERMIT CONDITION						6.0	9.0					
50050 Conduit Flow	REPORTED	3.6	12.5	17.5	MGD							CONT.	24 hour Total
	PERMIT CONDITION												
50060 Total Residual Chlorine	REPORTED						0.0	0.2	0.0	mg/l		1/1	GRAB
	PERMIT CONDITION												
50064 Free Available Chlorine	REPORTED						0.0	0.1	0.2	mg/l	0	1/1	GRAB
	PERMIT CONDITION							0.5	0.2				
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE	
CROUSE, RICHARD P.	VICE PRES/NUCLEAR	84 12 07	I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.
LAST FIRST MI	TITLE	YEAR MO DAY	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT

OhioEPA DISCHARGE MONITORING REPORT

COMMENTS:

PERMITTEE NAME: Toledo Edison Company
ADDRESS: Davis-Besse Nuclear Power Station
5501 North State Route 2
PHONE: Oak Harbor, Ohio 43449
(419) 259-5000

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS	SIC	LATITUDE	LONGITUDE
OH	2IB00011	002		W 83° 5'	N 41° 35'

REPORTING PERIOD FROM (20-21) YEAR 84 (22-23) MO 11 (24-25) DAY 01 TO (26-27) YEAR 84 (28-29) MO 11 (30-31) DAY 30

(32-37) PARAMETER		(38-45) QUANTITY MINIMUM	(46-53) QUANTITY AVERAGE	(54-61) QUANTITY MAXIMUM	(62-63) UNITS	(3 card only) SD	(38-45) CONCENTRATION MINIMUM	(46-53) CONCENTRATION MAXIMUM	(54-61) CONCENTRATION AVERAGE	(62-63) CONCENTRATION UNITS	(4 card only) SD	(64-66) FREQUENCY OF ANALYSIS	(68-70) SAMPLE TYPE
00400 pH	REPORTED						8.1	8.6		pH S.U.	0	1/7	GRAB
	PERMIT CONDITION						6.0	9.0					
00530 Total nonfilterable Residue	REPORTED						7	10	8	mg/l	0	1/7	GRAB
	PERMIT CONDITION							50					
50050 Conduit Flow	REPORTED	0.013	0.044	0.253	MGD							CONT	24 hour Total
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER: CROUSE, RICHARD P. (LAST, FIRST, MI)

TITLE OF AUTH. OFFICER: VICE PRES./NUCLEAR (TITLE)

DATE: 84 (YEAR) 12 (MO) 07 (DAY)

I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT

OhioEPA DISCHARGE MONITORING REPORT

COMMENTS:

PERMITTEE NAME: Toledo Edison Company
ADDRESS: Davis-Besse Nuclear Power Station
PHONE: 5501 North State Route 2
Oak Harbor, Ohio 43449
(419) 259-5000

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS	SIC	LATITUDE	LONGITUDE
OH	2IB00011	003		W 83° 5'	N 41° 35'

REPORTING PERIOD FROM (20-21) YEAR 84 (22-23) MO 11 (24-25) DAY 01 TO (26-27) YEAR 84 (28-29) MO 11 (30-31) DAY 30

(32-37) PARAMETER		(3 card only) QUANTITY (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	(62-63) UNITS	(4 card only) CONCENTRATION (38-45) MINIMUM	(46-53) MAXIMUM	(54-61) AVERAGE	(62-63) UNITS	(64-66) FREQUENCY OF ANALYSIS	(68-70) SAMPLE TYPE
50050 Conduit Flow	REPORTED	0.222	0.222	0.222	MGD					CONT	24 hour Total
	PERMIT CONDITION										
00530 Total nonfilterable Residue	REPORTED					26	26	26	mg/l	1/30	GRAB
	PERMIT CONDITION										
	REPORTED										
	PERMIT CONDITION										
	REPORTED										
	PERMIT CONDITION										
	REPORTED										
	PERMIT CONDITION										
	REPORTED										
	PERMIT CONDITION										
	REPORTED										
	PERMIT CONDITION										
	REPORTED										
	PERMIT CONDITION										

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE	
CROUSE, RICHARD P. (LAST, FIRST, MI)	VICE PRES/NUCLEAR (TITLE)	84 12 07 (YEAR MO DAY)	I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT

OhioEPA DISCHARGE MONITORING REPORT

COMMENTS:

PERMITTEE NAME: Toledo Edison Company
ADDRESS: Davis-Besse Nuclear Power Station
PHONE: 5501 North State Route 2
Oak Harbor, Ohio 43449
(419) 259-5000

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS	SIC	LATITUDE	LONGITUDE
OH	21B00011	601		W 83° 5'	N 41° 35'

REPORTING PERIOD FROM (20-21) YEAR 84 (22-23) MO 11 (24-25) DAY 01 TO (26-27) YEAR 84 (28-29) MO 11 (30-31) DAY 30

(32-37) PARAMETER		(3 card only) QUANTITY (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	(62-63) UNITS	SD	(4 card only) CONCENTRATION (38-45) MINIMUM	(46-53) MAXIMUM	(54-61) AVERAGE	(62-63) UNITS	SD	(64-66) FREQUENCY OF ANALYSIS	(68-70) SAMPLE TYPE
00083 Color	REPORTED						1	3	1	Severity Units		1/1	GRAB
	PERMIT CONDITION												
01330 Odor	REPORTED						1	4	2	Severity Units		1/1	GRAB
	PERMIT CONDITION												
01350 Turbidity	REPORTED						1	3	2	Severity Units		1/1	GRAB
	PERMIT CONDITION												
50050 Conduit Flow	REPORTED	0.009	0.009	0.009	MGD							CONT	24 hour Total
	PERMIT CONDITION												
50060 Total Residual Chlorine	REPORTED						0.5	3.0	1.5	mg/1		1/1	GRAB
	PERMIT CONDITION												
00310 BOD (5-day)	REPORTED						7	7	7	mg/1	0	1/30	GRAB
	PERMIT CONDITION							45	30				
00400 pH	REPORTED						7.6	7.6		pH S.U.	0	1/30	GRAB
	PERMIT CONDITION						6.0	10.0					
00530 Total nonfilterable Residue	REPORTED						28	28	28	mg/1	0	1/30	GRAB
	PERMIT CONDITION							45	30				

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF PRINCIPAL EXECUTIVE OFFICER	DATE	I certify that I am personally familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
CROUSE RICHARD P. (LAST FIRST MI)	VICE PRES/NUCLEAR (TITLE)	84 (YEAR) 12 (MO) 07 (DAY)		

OhioEPA DISCHARGE MONITORING REPORT

COMMENTS:

PERMITTEE NAME Toledo Edison Company
ADDRESS Davis-Besse Nuclear Power Station
PHONE 5501 North State Route 2
Oak Harbor, Ohio 43449
(419) 259-5000

ST (2-3)	PERMIT NUMBER (4-16)	DIS (17-19)	SIC	LATITUDE	LONGITUDE
OH	2IB00011	601		W 83° 5'	N 41° 35'

REPORTING PERIOD FROM (20-21)(22-23)(24-25) YEAR 84 MO 11 DAY 01 TO (26-27)(28-29)(30-31) YEAR 84 MO 11 DAY 30

(3 card only) (4 card only)

PARAMETER (32-37)		QUANTITY MINIMUM (38-45)	QUANTITY AVERAGE (46-53)	QUANTITY MAXIMUM (54-61)	UNITS	NO EX (62-63)	CONCENTRATION MINIMUM (38-45)	CONCENTRATION MAXIMUM (46-53)	CONCENTRATION AVERAGE (54-61)	UNITS	NO EX (62-63)	FREQUENCY OF ANALYSIS (64-66)	SAMPLE TYPE (68-70)
31616 Fecal Coliform (MF-FCB)	REPORTED	74	74	74	No/100 ml	0						1/30	GRAB
	PERMIT CONDITION		200	400									
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE		SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT
CROUSE, (LAST) RICHARD (FIRST) P. (MI)	VICE PRES/NUCLEAR (TITLE)	YEAR 84 MO 12 DAY 07	*I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.*	[signature]

OhioEPA DISCHARGE MONITORING REPORT

COMMENTS:

PERMITTEE NAME: Toledo Edison Company
ADDRESS: Davis-Besse Nuclear Power Station
PHONE: 5501 North State Route 2
Oak Harbor, Ohio 43449
(419) 259-5000

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS	SIC	LATITUDE	LONGITUDE
OH	2IB00011	602		W 83° 5'	N 41° 35'

REPORTING PERIOD FROM (20-21) YEAR 84 (22-23) MO 11 (24-25) DAY 01 TO (26-27) YEAR 84 (28-29) MO 11 (30-31) DAY 30

(32-37) PARAMETER		QUANTITY (38-45) MINIMUM	QUANTITY (46-53) AVERAGE	QUANTITY (54-61) MAXIMUM	QUANTITY (62-63) UNITS	QUANTITY (3 card only) NO EX	CONCENTRATION (4 card only) (38-45) MINIMUM	CONCENTRATION (46-53) MAXIMUM	CONCENTRATION (54-61) AVERAGE	CONCENTRATION (62-63) UNITS	CONCENTRATION NO EX	(64-66) FREQUENCY OF ANALYSIS	(68-70) SAMPLE TYPE
00400 pH	REPORTED						7.3	7.9		pH S.U.	0	1/7	GRAB
	PERMIT CONDITION						6.0	10.5					
00530 Total Nonfilterable Residue	REPORTED						2	7	4	mg/l	0	1/7	GRAB
	PERMIT CONDITION							100	30				
00550 Total oil & grease	REPORTED						0	0	0	mg/l	0	1/7	GRAB
	PERMIT CONDITION							20	15				
50050 Conduit Flow	REPORTED	0.076	0.076	0.076	MGD							CONT	24 hour total
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE	
COURSE, RICHARD P.	VICE PRES/NUCLEAR	84 12 07	
LAST FIRST MI	TITLE	YEAR MO DAY	

I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT

OhioEPA DISCHARGE MONITORING REPORT

PERMITTEE NAME: Toledo Edison Company
ADDRESS: Davis-Besse Nuclear Power Station
5501 North State Route 2
PHONE: Oak Harbor, OH 43449
(419) 259-5000

COMMENTS: AH: A permit-to-install (Application No. 03-1960) effective as of October 25, 1984 states: The facilities monitoring station 21B00011603 will be eliminated, with the discharge monitored at 21B00011602 (collection box) and 21B00011001 (Final Outfall)

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS	SIC	LATITUDE	LONGITUDE
OH	2IB00011	603		W 83° 5'	N 41° 35'

REPORTING PERIOD FROM (20-21) YEAR 84 (22-23) MO 11 (24-25) DAY 01 TO (26-27) YEAR 84 (28-29) MO 11 (30-31) DAY 30

(32-37) PARAMETER		(38-45) QUANTITY MINIMUM	(46-53) QUANTITY AVERAGE	(54-61) QUANTITY MAXIMUM	(62-63) QUANTITY UNITS	(3 card only) NO EX	(38-45) CONCENTRATION MINIMUM	(46-53) CONCENTRATION MAXIMUM	(54-61) CONCENTRATION AVERAGE	(62-63) CONCENTRATION UNITS	(4 card only) NO EX	(64-66) FREQUENCY OF ANALYSIS	(68-70) SAMPLE TYPE
00400 pH	REPORTED												
	PERMIT CONDITION					■					■		
00530 Total nonfilterable residue	REPORTED												
	PERMIT CONDITION					■					■		
50050 Conduit flow	REPORTED												
	PERMIT CONDITION					■					■		
	REPORTED												
	PERMIT CONDITION					■					■		
	REPORTED												
	PERMIT CONDITION					■					■		
	REPORTED												
	PERMIT CONDITION					■					■		
	REPORTED												
	PERMIT CONDITION					■					■		
	REPORTED												
	PERMIT CONDITION					■					■		

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE	
CROUSE RICHARD P.	VICE PRES/NUCLEAR	84 12 07	I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.
LAST FIRST MI	TITLE	YEAR MO DAY	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT

OhioEPA DISCHARGE MONITORING REPORT

COMMENTS:

PERMITTEE NAME: Toledo Edison Company
ADDRESS: Davis-Besse Nuclear Power Station
PHONE: 5501 North State Route 2
Oak Harbor, Ohio 43449
(419) 259-5000

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS	SIC	LATITUDE	LONGITUDE
OH	2IB00011	604		W 83° 5'	N 41° 35'

REPORTING PERIOD FROM (20-21) YEAR 84 (22-23) MO 11 (24-25) DAY 01 TO (26-27) YEAR 84 (28-29) MO 11 (30-31) DAY 30

(32-37) PARAMETER		(38-45) QUANTITY MINIMUM	(46-53) QUANTITY AVERAGE	(54-61) QUANTITY MAXIMUM	(62-63) QUANTITY UNITS	(3 card only) NO. EX.	(38-45) CONCENTRATION MINIMUM	(46-53) CONCENTRATION MAXIMUM	(54-61) CONCENTRATION AVERAGE	(62-63) CONCENTRATION UNITS	(4 card only) NO. EX.	(64-66) FREQUENCY OF ANALYSIS	(68-70) SAMPLE TYPE
00400 pH	REPORTED						7.6	8.1		pH S.U.	0	1/7	GRAB
	PERMIT CONDITION						6.0	9.0	0				
00550 Total oil & grease	REPORTED						0	1		mg/1	0	1/7	GRAB
	PERMIT CONDITION							20	15				
50050 Conduit Flow	REPORTED	0.013	0.013	0.013	MGD							CONT	24 hour Total
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE	
CROUSE, RICHARD P.	VICE PRES/NUCLEAR	84 12 07	
LAST FIRST MI	TITLE	YEAR MO DAY	

I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT

OhioEPA DISCHARGE MONITORING REPORT

COMMENTS:

PERMITTEE NAME Toledo Edison Company
ADDRESS Davis-Besse Nuclear Power Station
5501 North State Route 2
PHONE Oak Harbor, Ohio 43449
(419) 259-5000

(2-3) ST	(4-16) PERMIT NUMBER	(17-19) DIS	SIC	LATITUDE	LONGITUDE
OH	2IB00011	801		W 83° 5'	N 41° 35'

REPORTING PERIOD FROM (20-21) YEAR 84 (22-23) MO 11 (24-25) DAY 01 TO (26-27) YEAR 84 (28-29) MO 11 (30-31) DAY 30

(3 card only) (4 card only)

PARAMETER (32-37)		QUANTITY (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(62-63) NO. EX	CONCENTRATION (38-45) MINIMUM	(46-53) MAXIMUM	(54-61) AVERAGE	UNITS	(62-63) NO. EX	(64-66) FREQUENCY OF ANALYSIS	(68-70) SAMPLE TYPE
00011 Water Temperature	REPORTED	40	46	56	°F							1/1	CONT
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER			TITLE OF THE OFFICER	DATE				
CROUSE,	RICHARD	P.	VICE PRES/NUCLEAR	84	12	07	*I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.*	[signature]
LAST	FIRST	MI	TITLE	YEAR	MO	DAY		SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT

TOLEDO EDISON

File: RR 2 P-8-84-11
E 2.40.1.1.3
G84 834AL

December 17, 1984

Ohio Environmental Protection Agency
Technical Records Section
P.O. Box 1049
Columbus, Ohio 43216

Gentlemen:

Attached is a copy of the November, 1984 Wastewater Report for Davis-Besse Nuclear Power Station, Unit No. 1.

Yours truly,

S. M. Quennoz
Plant Manager, Davis-Besse
Davis-Besse Nuclear Power Station
(419) 259-5660

SMQ/KLN/yml

Attachments (2 copies)

cc: J. E. Sullivan
W. G. Rogers, NRC Resident Inspector
J. L. Scott-Wasilk
J. F. Stolz, NRC

IE25
1/1