

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

NAME DUQUESNE LIGHT COMPANY
 ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

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

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

F - FINAL LIMITS
 001 A COOLING TOWER BLOWDOWN

Form Approved
 OMB No. 2040-0004
 Expires 2-29-84

FACILITY _____
 LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	09	01		84	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

ATTN: C. FEITKNECHT, GEN. SUPT

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (46-53)			QUALITY OR CONCENTRATION (54-61)			I. D. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	91°	0	CONTINUOUS RECORD
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		CONTINUOUS RECORD
PH 00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	7.97	*****	*****	8.08	0	3/MONTH GRAB
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	*****	9.0 MAXIMUM		CONTINUOUS RECORD
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<1	<1	<1	0	ONCE/MONTH GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	10 DAILY AV DAILY MX		ONCE/MONTH GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	25.70	37.40	*****	*****	*****	*****	*****		CONTINUOUS RECORD
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		CONTINUOUS RECORD
CHLORINE, FREE AVAILABLE 50064 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.10	0.30	0.10	0	CONTINUOUS RECORD
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.2 DAILY AV	0.5 DAILY MX	0.2		CONTINUOUS RECORD
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

8411130273 840930
 PDR ADOCK 05000334
 R F JR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 C. Feitknecht, Gen. Supt.
 Fossil Generation Unit
 TYPED OR PRINTED

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

Signature of Leonard Steed
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 412 393-4343
 DATE 84 10 26
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 SEE PAGE 2 OF PERMIT FOR INFORMATION REGARDING TEMPERATURE. LOCATION 0 IS THE COOLING TOWER BASIN.

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

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

Form Approved
OMB No. 2040-0004
Expires 2-29-84

NAME DUQUESNE LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
PERMIT NUMBER

101 A
DISCHARGE NUMBER

F - FINAL LIMITS
101 A CHEMICAL WASTE SUMP

FACILITY _____
LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	09	01		84	09	30
	(26-27)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

ATTN: C. FEITKNECHT, GEN. SUPT

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
PH	*****	*****	*****	*****	7.25	*****	8.21		0	THREE/MONTH	GRAB
00400 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	15.4	22.4		*****	115.75	167.80		0	TWICE/MONTH	GRAB
00530 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	3.8 DAILY AV	45 DAILY MX	LBS/DY	*****	*****	*****	MG/L		TWICE/MONTH	COMP24
OIL AND GREASE FREQN EXTR-GRAV METH	SAMPLE MEASUREMENT	1.47	2.81		*****	10	21		0	TWICE/MONTH	GRAB
00556 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	1.9 DAILY AV	9.0 DAILY MX	LBS/DY	*****	*****	*****	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.016	0.047		*****	*****	*****	*****		ONCE/MONTH	ESTIM.
50050 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		TWICE/MONTH	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

C. Feitknecht, Gen. Supt.
Fossil Generation Unit

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.)

Leon L. Steed
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

412 393-4343

AREA CODE

NUMBER

DATE

84 10 26

YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATION (Retain all attachments here)
SAMPLES TAKEN AT LOCATION 0; CHEM WASTE SUMP PRIOR TO COMBINATION WITH OTHER EFFLUENT.
SEE P 23 AND 24, SPECIAL CONDITIONS.

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

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

Form Approved
OMB No. 2040-0004
Expires 2-29-84

NAME DUQUESNE LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

(2-16) PA0025615 PERMIT NUMBER
(17-19) 102 A DISCHARGE NUMBER

I - INITIAL LIMITS
102 A AUX BOILER BLOWDOWN

FACILITY _____
LOCATION _____

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
84	09	01	84	09	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

No Discharge 102

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
COPPER, TOTAL (AS CU) 01042 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	***** DAILY AV	1 DAILY MX	MG/L	TWICE/GRAB MONTH	
IRON, TOTAL (AS FE) 01045 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	***** DAILY AV	1 DAILY MX	MG/L	TWICE/GRAB MONTH	
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

C. Feitknecht, Gen. Supt.
Fossil Generation Unit

TYPED OR PRINTED

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

Leon L Steel
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
412 393-4343
AREA CODE NUMBER
DATE
84 10 26
YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments if necessary)
SAMPLES TAKEN AT LOC 0, BOILER BLOWDOWN PRIOR TO COMBINATION WITH OTHER EFFLUENT.
SEE P 23 AND 24, SPECIAL CONDITIONS.

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

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

Form Approved
OMB No. 2040-0004
Expires 2-29-84

NAME DUQUESNE LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2641 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
PERMIT NUMBER

103 A
DISCHARGE NUMBER

I - INITIAL LIMITS
103 A SOFTENER REGENERATES

FACILITY _____
LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	09	01		84	09	30
	(26-27)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

ATTN: C. FEITKNECHT, GEN. SUPT

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.2	0.3		0	TWICE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX	MG/L		TWICE/MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	<1	<1		0	TWICE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	0.020	0.020		*****	*****	*****	*****		TWICE/MONTH	ESTIM.
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		TWICE/MONTH	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

C. Feitknecht, Gen. Supt.
Fossil Generation Unit

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.)

Leonard Steed
SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE
412 393-4343
DATE
84 10 26
AREA CODE NUMBER YEAR MO DAY

SAMPLES TAKEN AT LOC 9, SOFTENER REGENERATORS PRIOR TO COMBINATION WITH OTHER EFFLUENT.
SEE P 23 AND 24, SPECIAL CONDITIONS.

NAME DUQUESNE LIGHT COMPANY
 ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
 PERMIT NUMBER

002 A
 DISCHARGE NUMBER

F - FINAL LIMITS
 002 A SCREEN BACKWASH, ETC

FACILITY _____
 LOCATION _____
 ATTN: C. FEITKNECHT, GEN. SUPT

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	09	01		84	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (54-61)	SAMPLE TYPE (64-68)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.78	*****	*****	7.78	0	ONCE/MONTH	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	SU		ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.09	0.09		*****	*****	*****	*****		ONCE/MONTH	CALC.
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		ONCE/MONTH	CALC TO
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C. Feitknecht, Gen. Supt.
Fossil Generation Unit
 TYPED OR PRINTED

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

Leon S. Stead
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 412 393-4343
 DATE: 8/10/26
 AREA CODE: 412 NUMBER: 393-4343 YEAR: 84 MO: 10 DAY: 26

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Attachments here)

SEE P 23 AND 24, SPECIAL CONDITIONS.

NAME DUQUESNE LIGHT COMPANY
 ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233
 FACILITY _____
 LOCATION _____

PA0025615 PERMIT NUMBER
 201 A DISCHARGE NUMBER
 MONITORING PERIOD
 FROM YEAR 84 MO 09 DAY 01 TO YEAR 84 MO 09 DAY 30

I - INITIAL LIMITS
 201 A LOW VOLUME WASTE STREAM
 No Discharge 201

ATTN: C. FEITKNECHT, GEN. SUPT

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 (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	*****	*****	*****	*****	*****	*****	*****			
00400 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	*****	*****	*****	*****	*****	*****	*****			
00530 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX	MG/L	ONCE/ MONTH	GRAB
OIL AND GREASE FREDN EXTR-GRAV METH	*****	*****	*****	*****	*****	*****	*****			
00556 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L	ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
50050 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	ONCE/ MONTH	ESTIMA
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: C. Feitknecht, Gen. Supt. Fossil Generation Unit
 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: *Leon D. Steed*
 TELEPHONE: 412 393-4343
 DATE: 84 10 26

SAMPLES TAKEN AT LOC 0, LOW VOLUME WASTE STREAMS PRIOR TO COMBINATION WITH OTHER EFFLUENT.
 SEE P 23 AND 24, SPECIAL CONDITIONS.

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

NAME DUQUESNE LIGHT COMPANY
 ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

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

PA0025615
 PERMIT NUMBER

003 A
 DISCHARGE NUMBER

F - FINAL LIMITS
 003 A SANITARY WASTE

Form Approved
 OMB No. 2040-0004
 Expires 2-29-84

FACILITY _____
 LOCATION _____
 ATTN: C. FEITKNECHT, GEN. SUPT

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	09	01		84	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	*****	8.91	*****	*****	*****	0	ONCE/MONTH	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	SU		ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.08	0.11		*****	*****	*****	*****		ONCE/MONTH	CALC
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		ONCE/MONTH	CALC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C. Feitknecht, Gen. Supt.
Fossil Generation Unit
 TYPED OR PRINTED

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

Leon J. Steed
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 412 393-4343
 DATE: 84 10 26
 AREA CODE: 412 NUMBER: 393-4343 YEAR: 84 MO: 10 DAY: 26

SEE PAGES 23 AND 24, SPECIAL CONDITIONS.

NAME DUQUESNE LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

(2-16) PA0025615
PERMIT NUMBER

(17-'9) 301 A
DISCHARGE NUMBER

F - FINAL LIMITS
301 A CLARIFIER BLOWDOWN

FACILITY _____
LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	09	01		84	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
PH		*****	*****	*****	7.37	*****	7.72		0	TWICE/MONTH	GRAB
00400 0 0 SEE COMMENTS BELOW		*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED		0.22	0.28		*****	17.19	26.15		0	TWICE/MONTH	COMP.
00530 0 0 SEE COMMENTS BELOW		2.8 DAILY AV	14.3 DAILY MX	LBS/DY	*****	*****	*****	MG/L		TWICE/MONTH	COMP 24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.002	0.003		*****	*****	*****	*****		30/MONTH	MEAS.
50050 0 0 SEE COMMENTS BELOW		*****	*****	MGD	*****	*****	*****	*****		TWICE/MONTH	MEASRD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER C. Feitknecht, Gen. Supt. Fossil Generation Unit	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE	DATE			
		412 393-4343	84	10	26	
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Leon S. Stead</i>	AREA CODE	NUMBER	YEAR	MO	DAY

SAMPLES TAKEN AT LOCATION 8; TREATED CLARIFIER BLOWDOWN & FILTER BKWSH, PRIOR TO EFFLUENT.
SEE P 23 AND 24, SPECIAL CONDITIONS.

NAME DUQUESNE LIGHT COMPANY
 ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
 PERMIT NU' JER

302 A
 DISCHARGE NUMBER

F - FINAL LIMITS
 302 A SEWAGE TREATMENT SYSTEM

FACILITY _____
 LOCATION _____

MONITORING PERIOD					
FROM	YEAR	MO	DAY	T	TO
	84	09	01		84 09 30
	(20-21)	(22-23)	(24-25)		(26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) 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			
BOD, 5-DAY (20 DEG. C) 00310 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	24	37		0	FOUR/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30	45	MG/L		TWICE/MONTH	COMP-8
						30DA AV	7DA AV				
PH 00400 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	6.10	*****	6.90		0	THIRTY/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0	SU		TWICE/MONTH	GRAB
					MINIMUM		MAXIMUM				
SOLIDS, TOTAL SUSPENDED 00530 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	22	24		0	THIRTY/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30	45	MG/L		TWICE/MONTH	COMP-8
						30DA AV	7DA AV				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	0.067	0.077	*****	*****	*****	*****	*****		THIRTY/MONTH	MEAS.
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****		TWICE/MONTH	MEASRD
COLIFORM, FECAL GENERAL 74055 0 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	52	91	#/	0	TWICE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	200	400	100ML		TWICE/MONTH	GRAB
						30DA GEO	7DA GEO				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 C. Feitknecht, Gen. Supt.
 Fossil Generation Unit
 TYPED OR PRINTED

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

Leon S. Stead
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 412 393-4343
 DATE 84 10 26
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference will be made to this report)
 SAMPLES TAKEN AT LOC 0; SEWAGE TREATMENT SYSTEM PRIOR TO COMBINATION WITH OTHER EFFLUENT.
 SEE P 23 AND 24, SPECIAL CONDITIONS.

NAME DUQUESNE LIGHT COMPANY
 ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

(2-16) PA0025615 (17-19) 303 A
 PERMIT NUMBER DISCHARGE NUMBER

I - INITIAL LIMITS
 303 A NONRAD SYSTEM LEAKAGE

FACILITY _____
 LOCATION _____

MONITORING PERIOD						
FROM			TO			
YEAR	MO	DAY	YEAR	MO	DAY	
84	09	01	84	09	30	
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)	

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH		*****	*****	*****	7.56	*****	7.56		0	ONCE/MONTH	GRAB
00400 0 0 SEE COMMENTS BELOW		*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED		*****	*****	*****	*****	126	126		1	ONCE/MONTH	GRAB
00530 0 0 SEE COMMENTS BELOW		*****	*****	*****	*****	30 30DA AV	100 7DA AV	MG/L		ONCE/MONTH	GRAB
OIL AND GREASE FREQN EXTR-GRAV METH		*****	*****	*****	*****	<1	<1		0	ONCE/MONTH	GRAB
00556 0 0 SEE COMMENTS BELOW		*****	*****	*****	*****	15 30DA AV	20 7DA AV	MG/L		ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.084	0.114	MGD	*****	*****	*****	*****		ONCE/MONTH	ESTIM
50050 0 0 SEE COMMENTS BELOW		*****	*****	*****	*****	*****	*****	*****		ONCE/MONTH	ESTIMA

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 C. Feitknecht, Gen. Supt.
 Fossil Generation Unit

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.)

Leon J. Steed
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 412 393-4343
 DATE 84 10 26
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 SAMPLES TAKEN AT NONRAD SYSTEM & FLOOR DRAIN SYSTEM PRIOR TO COMBINATION WITH EFFLUENT.
 SEE P 23 AND 24, SPECIAL CONDITIONS.

NAME DUQUESNE LIGHT COMPANY
 ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
 PERMIT NUMBER

004 A
 DISCHARGE NUMBER

F - FINAL LIMITS
 004 A COOLING TOWER OVERFLOW

FACILITY _____
 LOCATION _____
 ATTN: C. FEITKNECHT, GEN. SUPT

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
84	09	01		84	09	30
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****	8.36	*****	8.36		ONCE/MONTH	GRAB
00400 1 0	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	SU	ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	<0.001	<0.001		*****	*****	*****	*****	ONCE/MONTH	ESTIM
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	ONCE/MONTH	ESTIM
50050 1 0	SAMPLE MEASUREMENT									
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C. Feitknecht, Gen. Supt.
Fossil Generation Unit
 TYPED OR PRINTED

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

TELEPHONE: 412 393-4343
 DATE: 84 10 26
 AREA CODE: _____ NUMBER: _____ YEAR: _____ MO: _____ DAY: _____

FLOW MONITORED ONCE PER MONTH ONLY WHEN DISCHARGING.
 SEE P 23 AND 24, SPECIAL CONDITIONS.

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

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

Form Approved OMB No. 2040-0004 Expires 2-29-84

NAME DUQUESNE LIGHT COMPANY
 ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
 PERMIT NUMBER

401 A
 DISCHARGE NUMBER

I - INITIAL LIMITS
 401 A COOLING TOWER PUMPHOUSE.

FACILITY _____
 LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	09	01		84	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

No Discharge 401

NOTE: Read instructions before completing this form.

ATTN: C. FEITKNECHT, GEN. SUPT

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	*****		*****				
00400 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00530 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AV	100 DAILY MX	MG/L	ONCE/ MONTH	GRAB
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	*****	*****	*****	*****					
00556 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	15 DAILY AV	20 DAILY MX	MG/L	ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT				*****	*****	*****	*****		
50050 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	*****	ONCE/ MONTH	ESTIMA
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 C. Feitknecht, Gen. Supt.
 Fossil Generation Unit
 TYPED OR PRINTED

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

Leon J. Stead
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 412 393-4343
 DATE 84 10 26
 AREA CODE NUMBER YEAR MO DAY

COMMENTS TO EXPLANATION OF ANY VIOLATIONS (Reference to attachments, if any)
 SAMPLES TAKEN AT LOC 9; COOL TOWER PUMPHOUSE LOW VOLUME, PRIOR TO COMB WITH OTHER EFFLUENT.
 SEE P 23 AND 24, SPECIAL CONDITIONS.

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

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

Form Approved
OMB No. 2040-0004
Expires 2-29-84

NAME DUQUESNE LIGHT COMPANY
ADDRESS BEAVER VALLEY ATOMIC POWER ST.
2841 NEW BEAVER AVENUE
PITTSBURGH PA 15233

PA0025615
PERMIT NUMBER

013 A
DISCHARGE NUMBER

F - FINAL LIMITS
OUTFALL 013-MAY TO SEPT.

FACILITY _____
LOCATION _____

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	84	09	02		84	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.73	0.73		*****	22	22		0	ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT	10.8 30DA AVG	21.5 DAILY MX	LBS/DY	*****	30 30DA AVG	60 DAILY MX	MG/L		ONCE/ MONTH	GRAB
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.00	*****	7.00		0	ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2.0	2.0		*****	60	60		0	ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT	10.8 30DA AVG	21.5 DAILY MX	LBS/DY	*****	30 30DA AVG	60 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.004	0.004		*****	*****	*****	*****	0	ONCE/ MONTH	MEAS.
	PERMIT REQUIREMENT	0.043 AVERAGE	*****	MGD	*****	*****	*****	*****		ONCE/ MONTH	MEASRD
COLIFORM, FECAL GENERAL 74055 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<1	<1	#/	0	ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	200 30DA GEO	1000 7DA GEO	100ML		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER C. Feitknecht, Gen. Supt. Fossil Generation Unit TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE 412 393-4343	DATE		
			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Leon S. Steel</i>	AREA CODE	NUMBER

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.



Duquesne Light

One Oxford Centre
301 Grant Street
Pittsburgh, PA 15279

(412) 393-6000

Duquesne Light Company
Fossil Generation Unit
2841 New Beaver Avenue, Bldg. #3
Pittsburgh, PA 15233

October 26, 1984

Director of Nuclear Reactor Regulations
Attention: Mr. Robert W. Reid, Chief
Operating Reactor Branch, No. 4
U. S. Nuclear Regulatory Commission
Washington, D. C. 20555

NPDES Monthly Report

Subject: BVPS No. 1
Docket No. 50-334
License DPR-66

Dear Mr. Reid:

Enclosed is a copy of the subject report as submitted to the Pennsylvania Department of Environmental Resources.

Very truly yours,

C. Feitknecht
General Manager
Fossil Generation

CF:cz

Enclosure

IE25
1/1



Duquesne Light

One Oxford Centre
301 Grant Street
Pittsburgh, PA 15279

(412) 393-6000

Duquesne Light Company
Fossil Generation Unit
2841 New Beaver Avenue, Bldg. #3
Pittsburgh, PA 15233

October 26, 1984

Department of Environmental Resources
Bureau of Water Quality Management
600 Highland Building
121 S. Highland Avenue
Pittsburgh, PA 15206-3988

NPDES Monthly Report

Gentlemen:

The subject reports for Duquesne Light Company for September, 1984 are submitted for your consideration. A list of the permit numbers follows:

PA 0001571	Elrama Power Station
PA 0001619	Phillips Power Station
PA 0001627	Cheswick Power Station
PA 0025615	Beaver Valley Atomic Power Station
PA 0031933	Brunot Island Power Station

Very truly yours,

C. Feitknecht
General Manager
Fossil Generation

CF/cz

Enclosure



Duquesne Light

One Oxford Centre
301 Grant Street
Pittsburgh, PA 15279

(412) 393-6000

Duquesne Light Company
Fossil Generation Unit
2841 New Beaver Avenue, Bldg. #3
Pittsburgh, PA 15233

October 26, 1984

Mr. Joseph A. Galda (3WM50)
U. S. Environmental Protection Agency, Region III
Sixth and Walnut Streets
Philadelphia, PA 19106

NPDES Monthly Report

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,

CF
C. Feitknecht
General Manager
Fossil Generation

CF/cz

Enclosure