

Duquesne Light Company

Beaver Valley Power Station
P.O. Box 4
Shippingport, PA 15077-0004

RONALD L. LeGRAND
Division Vice President -
Nuclear Operations and Plant Manager

(412) 393-7622
Fax (412) 393-4905

May 28, 1997
NPD3VPO: 0696

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

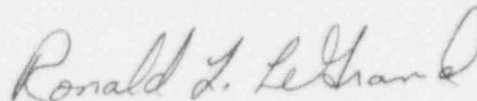
NPDES Monthly Report, EPA Permit No. PA0025615

SUBJECT: Beaver Valley Power Station, Unit No. 1 and No. 2
BV-1 Docket No. 50-334, License No. DPR-66
BV-2 Docket No. 50-412, License No. NPF-73

Dear Sir:

Enclosed is a copy of the NPDES Monthly Report as submitted to the Pennsylvania Department of Environmental Protection.

Sincerely,



Ronald L. LeGrand
Division Vice President
Nuclear Operations

SLV/trs

cc: D. A. Orndorf
J. A. Cool
R. K. Brusi
Central File

9706040341 970430
PDR ADDCK 05000334
R PDR



IE25/1

Duquesne Light Company

Beaver Valley Power Station
P.O. Box 4
Shippingport, PA 15077-0004

RONALD L. LeGRAND
Division Vice President -
Nuclear Operations and Plant Manager

(412) 393-7622
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May 28, 1997
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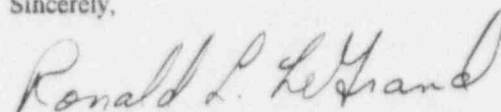
United States Environmental Protection Agency
Region III, Pennsylvania (3WM53)
Water Permits Branch
Water Management Division
841 Chestnut Street
Philadelphia, PA 19107

NPDES Monthly Report, EPA Permit No. PA 0025615

Dear Sir:

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

Sincerely,



Ronald L. LeGrand
Division Vice President
Nuclear Operations

SLV/trs

Attachment

cc: D. A. Orndorf
J. A. Cool
R. K. Brosi
Central File



Duquesne Light Company

Beaver Valley Power Station
P.O. Box 4
Shippingport, PA 15077-0004

RONALD L. LeGRAND
Division Vice President
Nuclear Operations and Plant Manager

(412) 393-7622
Fax (412) 393-4905

May 28, 1997
NPD3VPO: 0695

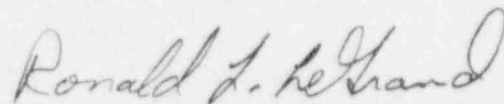
Attention: "DMR Clerk"
Department of Environmental Protection
Bureau of Water Quality Management
400 Waterfront Drive
Pittsburgh, PA 15222

NPDES Monthly Report, EPA Permit No. PA0025615

Gentlemen:

NPDES Monthly Report for Duquesne Light Company, Beaver Valley Power Station for April 1997 is submitted for your consideration.

Sincerely,



Ronald L. LeGrand
Division Vice President
Nuclear Operations

SLV/trs

Enclosure

cc: D. A. Orndorf
J. A. Cool
R. K. Brosi
Central File



Duquesne Light Company

Beaver Valley Power Station
P.O. Box 4
Shippingport, PA 15077-0004

RONALD L. LeGRAND
Division Vice President -
Nuclear Operations and Plant Manager

(412) 393-7622
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May 28, 1997
NPD3VPO: 0696

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U.S. Nuclear Regulatory Commission
Washington, DC 20555

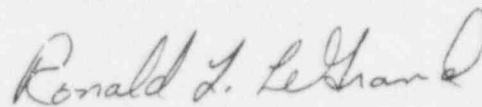
NPDES Monthly Report, EPA Permit No. PA0025615

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BV-1 Docket No. 50-334, License No. DPR-66
BV-2 Docket No. 50-412, License No. NPF-73

Dear Sir:

Enclosed is a copy of the NPDES Monthly Report as submitted to the Pennsylvania Department of Environmental Protection.

Sincerely,



Ronald L. LeGrand
Division Vice President
Nuclear Operations

SLV/trs

cc: D. A. Orndorf
J. A. Cool
R. K. Brosi
Central File



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 8
 ATTN: DAVID ORNDORF
 SHIPPINGSPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

Form Approved, OMB No. 2040-0004
 Approval expires 05-31-98
 UNITS 162 COOLG. (S08R 05)
 F - FINAL
 MAJOR

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 (20-21) (22-23) (24-25) (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			
PH	SAMPLE MEASUREMENT				7.99	7.99	8.24	(17)	0	1/7 grab
00400 1 0 0	PERMIT REQUIREMENT			0.0	MINIMUM		9.0			WEEKLY GRAB
EFFLUENT GROSS VALUE NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT					NA		(17)		
00410 1 0 0	PERMIT REQUIREMENT					REPORT NO AVG	REPORT DAILY MX			WEEKLY GRAB
EFFLUENT GROSS VALUE CHLORIDE CT-1, TOTAL WATER	SAMPLE MEASUREMENT					NA		(17)		
04251 1 0 0	PERMIT REQUIREMENT					NO AVG	DAILY MX			WEEKLY GRAB
EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	30.7	39.4	(17)					0	Daily Contin.
00050 1 0 0	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MX	MGD						DAILY CONTIN.
EFFLUENT GROSS VALUE CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT					.01	.06	(17)	0	1/7 Grab
00060 1 0 0	PERMIT REQUIREMENT					0.5	1.25			WEEKLY GRAB
EFFLUENT GROSS VALUE CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT					.00	.02	(17)	0	1/Day grab
00064 1 0 0	PERMIT REQUIREMENT					0.2	0.5			CONTINUOUS
EFFLUENT GROSS VALUE HYDRAZINE	SAMPLE MEASUREMENT					NA		(17)		
01113 1 0 0	PERMIT REQUIREMENT					NO AVG	DAILY MX			WEEKLY GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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

TELEPHONE DATE
 412 393-5113 97 05 28
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 HYDRAZINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF UNIT LAYUP. REPORT THE DAILY MAXIMUM FOR NETZ D T-1 WHEN DISCHARGING (24 HR. COMP.): MG/L. (THE LIMIT IS 35 MG/L AS A DAILY MAX.) Sample pump out of order. Unit layup used for control not performed during April. no observation during most of April maintenance.

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

PERMIT NUMBER 28025615
 DISCHARGE NUMBER 002 A

INTAKE SCREEN BA
 (SUBB-05)
 F - FINAL
 MAJOR

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98
 12345

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 (20-21) (22-23) (24-25) (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) (54-61)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (54-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW, IN CONDUIT OR TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	0.006	0.046	(03)	*****	*****	*****	0	1/7	EST
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY 3X	NO	*****	*****	*****	*****	*****	*****
	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 David Orndorf Chemistry Manager TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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	AREA CODE	NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

PERMIT NUMBER: 00025615
 DISCHARGE NUMBER: 0011

003 UNCONTAMINATED (SUBR 05)
 F - FINAL
 MAJOR
 Form Approved. OMB No. 2040-0004
 Approval expires 05-31-98

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 (20-21) (22-23) (24-25) (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) (54-61)			(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			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.009	.023	(03)					0	2/30	EST
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MAX MGD								TWICE ESTIM MONTH
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 TYPED OR PRINTED

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

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 412 393-5113
 DATE: 97 05 28
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Refer to all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPOST PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

PERMIT NUMBER 210025615
 DISCHARGE NUMBER 004

UNIT ONE COOLG T
 (SUBR 05)
 F - FINAL
 MAJOR

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 (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			(4 Card Only) QUANTITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	****		NA	*****				
00400 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	E.O	*****	9.0		WEEKLY GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLAN	SAMPLE MEASUREMENT	NA		(03)	*****	*****	*****			
50050 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	****	WEEKLY MEASRD	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NA				
50050 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	*****	0.5	1.25		WEEKLY GRAB	
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****		*****	NA				
50064 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	*****	0.2	0.5		WEEKLY GRAB	
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER David Orndorf Chemistry Manager TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 No discharge

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

NAME HEAVEN VALLEY POWER STATION

ADDRESS P.O. BOX 4
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077

FACILITY HEAVEN VALLEY POWER STATION

LOCATION
ATTN: DAVID ORNDORF

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

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

ADV. INTAKE SCREEN (SDBR 05)
F - FINAL
MAJOR

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

NO DISCHARGE

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) 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			
FLOW, IN CONDUIT OR THROUGH TREATMENT PLANT	0.002	0.016							0	17	EET
EFFLUENT CROSS VALD											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
David Orndorf
Chemistry Manager
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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

TELEPHONE 412 393-5113
DATE 97 05 28
AREA CODE NUMBER YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

210025615 PERMIT NUMBER 0071 DISCHARGE NUMBER

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

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98

ADJ. INTAKE SYST (SUBR 05)
 F - FINAL
 MAJOR

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

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (4C-53) (54-61)			(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			
PH	SAMPLE MEASUREMENT	*****	*****								
00400 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0			WEEKLY GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			(01)	*****	*****	*****			No flow	
50050 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY RX MCD		*****	*****	*****	****		WEEKLY ESTIMATE	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****								
50060 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	*****	0.5	1.25			WEEKLY GRAB	
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****								
50064 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	*****	0.2	0.5			WEEKLY GRAB	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER David Orndorf Chemistry Manager TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE 393-5113	DATE		
			AREA CODE	NUMBER	YEAR
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 			97	05	28

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 MONITORING FOR FLOW, FREE AVAILABLE CHLORINE, AND TOTAL RESIDUAL CHLORINE ARE REQUIRED ONLY DURING THOSE PERIODS OF DISCHARGE FROM THE ALTERNATE FLOW PATH OF THE REACTOR PLANT RIVER WATER SYSTEM.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15877
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

PERMIT NUMBER 770025615
 DISCHARGE NUMBER 0074

UNIT 1 COOLING TOWER (SUHR 05)
 F - FINAL MAJOR
 Form Approved. OMB No. 2040-0004 SE
 Approval expires 05-31-98

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


*** NO DISCHARGE 1 1 ***

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)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT				7.60		8.04	0	2/30	grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***	6.0 MINIMUM		9.0 MAXIMUM			TRICKLE GRAB MONTH
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT					20.4	31.6	0	2/30	grab
00510 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***		NO AVG	DAILY MX			TRICKLE GRAB MONTH
OIL AND GREASE FIBER EXTR-GRAV MKT	SAMPLE MEASUREMENT				<5	<5	<5	0	2/30	grab
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***	15 NO AVG	20 DAILY MX	30 INST MAX			TRICKLE GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	<.001	<.001	(03)				0	1/7	EST
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	NO AVG	DAILY MX	MGD						TRICKLE ESTIM
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT


TELEPHONE 412 393-5113
 DATE 97 05 28
 AREA CODE NUMBER YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Inside Facility Name/ Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 BRIDGESPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
 PERMIT NUMBER 00025615
 DISCHARGE NUMBER 010 A
 MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

UNIT 2 COOLING W (SOBR 05)
 F - FINAL
 MAJOR
 *** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98

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			
PH	SAMPLE MEASUREMENT	*****	*****		7.55	*****	7.88	(12)	0	1/7	grab
00400 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0			WEEKLY	GRAB
CONTROL CT-1, TOTAL WATER	SAMPLE MEASUREMENT	*****	*****			N/A		(19)			
04251 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****			0			WEEK	COMP 20
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	4.0	5.0	(0)	*****	*****	*****		0	1/7	MEASRD
50050 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	REPORT	REPORT	****	*****	*****	*****	****		WEEKLY	MEASRD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	0.00	0.00	(19)	0	1/7	grab
50060 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	*****	0.5	1.25			WEEKLY	GRAB
CHLORINE, FREE AVAILABLE	SAMPLE MEASUREMENT	*****	*****		*****	0.00	0.00	(19)	0	1/7	grab
50064 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	*****	0.2	0.5			WEEKLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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.)	TELEPHONE	DATE		
David Orndorf Chemistry Manager TYPED OR PRINTED			412 893-5113	97	05
	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 REPORT THE DAILY MAXIMUM FOR NETZ DT-1 WHEN DISCHARGING (24 HR. COMP.): NG/L. (THE LIMIT IS 35 MG/L AS A DAILY MAX.)
 No clamsol added during April. No clamsol added.

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

PERMIT NUMBER	DISCHARGE NUMBER
---------------	------------------


Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98
 DIESEL GEN & TURBINE
 (SUBR 05)
 F - FINAL
 MAJOR

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
FROM			TO		
(20-21)	(22-23)	(24-25)	(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			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT CROSS VALU	SAMPLE MEASUREMENT	.002	.002	(03)	000000	000000	000000	0	1/7	EST. GRO
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MAX	NOD	000000	000000	000000	000		WEEKLY TESTING
	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 David Orndorf Chemistry Manager TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (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	TELEPHONE	DATE			
			412 393-5113	97	05	28	
			AREA CODE	NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID QREDFORD
 SNIPPENSPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID QREDFORD

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-18)

PERMIT NUMBER 0121
 DISCHARGE NUMBER

SLOWDOWN FROM THE
 (SUBR 05)
 P - FINAL
 MAJOR

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98
 12345

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 (20-21) (22-23) (24-25) (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 (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-73)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
EFFLUENT GROSS VALU FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0	SAMPLE MEASUREMENT	*****	*****		8.09	*****	8.09	(12)	0	1/30	grab
	PERMIT REQUIREMENT	*****	*****	****	5.0 MINIMUM	*****	9.0 MAXIMUM	50		ONCE/ MONTH	GRAB
EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	<.001	<.001	(03)	*****	*****	*****		0	1/30	EST
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MI TGS		*****	*****	*****	*****		ONCE/ MONTH	ESTIM
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER * David Qredford Chemistry Manager TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE	DATE		
			AREA CODE NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

NATIONAL POLLUTANT CHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (12-15) (17-19)

PERMIT NUMBER
 DISCHARGE NUMBER

OUTFALL 013
 (SUBR 05)
 P - FINAL
 MAJOR

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98

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


*** 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			
EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT				6.60		7.60	0	1/7	grab
	PERMIT REQUIREMENT				MINIMUM		MAXIMUM			
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.012	.027	(03)				0	1/7	EST
	PERMIT REQUIREMENT	NO AVG	DAILY MAX	MGD						
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT					0.10	0.24	0	2/30	CALC.
	PERMIT REQUIREMENT					NO AVG	INST MAX			MONTH
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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


TELEPHONE 412 393-5113
 DATE 97 05 28
 AREA CODE NUMBER YEAR MO DAY

COMMENTS 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.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID GRUNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID GRUNDORF

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

101 1
 PERMIT NUMBER DISCHARGE NUMBER

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

101 CHEMICAL WASTE (SUBR-05)
 F - FINAL MAJOR
 Form Approved. OMB No. 2040-0004
 Approval expires 05-31-98

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

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(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			
PH 00400 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT				7.34		7.93	(12)	0	7/30 grab
	PERMIT REQUIREMENT				MINIMUM		MAXIMUM			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT					5.5	13.1	(19)	0	1/7 composite
	PERMIT REQUIREMENT					MO AVG	DAILY MAX	MG/L		WEEKLY COMP
OIL AND GREASE FROM EXH-GRAV NET 00556 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT					<5	<5	(17)	0	1/7 grab
	PERMIT REQUIREMENT					MO AVG	DAILY MAX	MG/L		WEEKLY GRAB
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT					NA		(19)		
	PERMIT REQUIREMENT					REPORT	REPORT			WEEKLY GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	.002 MGD	.010 MGD	(33)						Daily Cont.
	PERMIT REQUIREMENT	REPORT	REPORT							DAILY CONT
HYDRAZINE 01313 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	.002 MGD	.010 MGD	MG/L		NA		(19)		
	PERMIT REQUIREMENT					REPORT	REPORT			WEEKLY GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT					MO AVG	DAILY MAX	MG/L		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Grundorf
 Chemistry Manager
 TYPED OR PRINTED

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

David Grundorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE
 412 393-5113 97 05 28
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 HYDRAZINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF WET LAYUP. NA - Part not in wet layer condition.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SNIPPIESPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
 102 INTAKE SCREEN (SHBR 05)
 F - FINAL
 MAJOR
 *** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98

10023615 102 A
 PERMIT NUMBER DISCHARGE NUMBER
 MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH 00400 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****		7.82	*****	7.88	(12)	0	2/30	grab
	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	50		TWICE	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****		*****	80	97	(19)	0	2/30	grab
	PERMIT REQUIREMENT	*****	*****	****	*****	30 NO AVG	100 DAILY MV	MG/L		TWICE	GRAB
OIL AND GREASE FROM EXTR-GRAV NET 00556 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****		*****	<5	<5	(19)	0	2/30	grab
	PERMIT REQUIREMENT	*****	*****	****	*****	15 NO AVG	20 DAILY MV	MG/L		TWICE	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	0.001	0.001	(03)	*****	*****	*****		0	2/30	Est.
	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MV	MG/D	*****	*****	*****	****		TWICE	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER * David Orndorf Chemistry Manager * TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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 	TELEPHONE		DATE		
			AREA CODE	NUMBER	YEAR	MO	DAY
			412	393-5113	97	05	28

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

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID DRNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID DRNDORF

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

SLUDGE SETTLING (SBBH 05)
 F - FINAL MAJOR

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98

10/25/85	1078
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY	YEAR MO DAY
(20-21) (22-23) (24-25)	(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) (54-61)			(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			
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				7.72		7.94	(12)	0	2/30	grab
	PERMIT REQUIREMENT			***	MINIMUM		MAXIMUM	50			TWICE/MONTH
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT					8.0	12.0	(10)	0	2/30	10 min/comp.
	PERMIT REQUIREMENT			***		NO AVG	DAILY MX	MG/L			TWICE/MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT S0050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.002	.004	(03)					0	2/30	EST
	PERMIT REQUIREMENT	REPORT	REPORT								TWICE/ESTIM MONTH
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Drndorf
 Chemistry Manager
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

David Drndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
412	393-5113	97	05	28
AREA CODE	NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)
 NAME **BEAVER VALLEY POWER STATION**
 ADDRESS **P.O. BOX 4**
ATTN: DAVID ORNDORF
SHIPPINGPORT PA 15077
 FACILITY **BEAVER VALLEY POWER STATION**
 LOCATION
ATTN: DAVID ORNDORF

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

PERMIT NUMBER
PA00075615

DISCHARGE NUMBER
110 A

UNIT 2 SERVICE W
 (SUBR 05)
 F - FINAL
 MAJOR

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98

MONITORING PERIOD

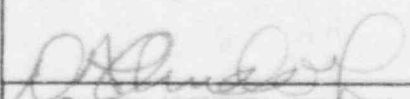
FROM YEAR MO DAY TO YEAR MO DAY
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			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 0 EFFLUENT GROSS VALUE		No flow		(03)	*****	*****	*****		No flow	WEEKLY ESTIMATE
		PERMIT REQUIREMENT	REPORT	REPORT	*****	*****	*****	****		
			NO AVG	DAILY ME TGD				****		
		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
 * David Orndorf
 Chemistry Manager
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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


TELEPHONE
 412 393-5113
 AREA CODE NUMBER
 97 05 28
 YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 No discharge.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

111 A
 PERMIT NUMBER DISCHARGE NUMBER

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

111 DIESEL GENERATOR (SUB: 05)
 F - FINAL MAJOR
 Form Approved. CMB No. 2040-0004
 Approval expires 05-31-98

000 NO DISCHARGE [] 000

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			
PH	SAMPLE MEASUREMENT				6.83		7.02	(14)	0	1/7	grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			0000	MINIMUM		MAXIMUM	SU		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT					4.1	4.2	(19)	0	1/7	grab
00430 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			0000		NO AVG	DAILY MX	MG/L		WEEKLY	GRAB
OIL AND GREASE	SAMPLE MEASUREMENT				5.4	6.7	6.7	(19)	0	1/7	grab
FROM EXTRA-GRAV MPT	PERMIT REQUIREMENT			0000	15	NO AVG	DAILY MX	INST MAX	MG/L	WEEKLY	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.002	.002	(03)					0	1/7	EST
FLOW, IN CONDUIT OF THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT	REPORT	0000						WEEKLY	ESTIM
50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 * David Orndorf
 Chemistry Manager
 TYPED OR PRINTED

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

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE
 412 393-5113 97 05 28
 AREA CODE NUMBER YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

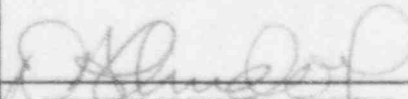
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)				

UNIT 2 SEWAGE
 (SUFR 05)
 F - FINAL
 MAJOR
 FROM: Approved
 OMB No. 2040-0004
 Approval expires 05-31-98

*** 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			
PH	SAMPLE MEASUREMENT	*****	*****		6.89		7.60	(12)	0	5/30	grab
00400 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0			TWICE	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****				18.2	23.0	0	2/30	8hr
00530 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	*****	30	50			TWICE	COMP-
FLOW, IN CONDUIT OR THRU TREATMENT PLAN	SAMPLE MEASUREMENT	.010	.025	(03)	*****	*****	*****	*****	0	1/7	meas*
50050 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	0.043	REPORT	****	*****	*****	*****	****		WEEKLY	MEASHD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****		0.22	0.47	0	4/30	grab
50060 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT			TWICE	GRAB
COLIFORM, FOCAL GENERAL	SAMPLE MEASUREMENT	*****	*****		*****		0	*****	0	2/30	grab
74055 1 1 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	*****	2000	*****	100ML		TWICE	GRAB
SOD, CARBOXYCEOUS 5 DAY, 20C	SAMPLE MEASUREMENT	*****	*****		*****		3.4	3.7	0	2/30	8hr
80082 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****	*****	25	50			TWICE	COMP-
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER * David Orndorf Chemistry Manager TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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 	TELEPHONE	DATE
			AREA CODE NUMBER	YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 *Visual level measurement

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID GRNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID GRNDORF

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

PERMIT NUMBER 10025613
 DISCHARGE NUMBER 2013

201 SOFTENER REG
 (SUBR 05)
 F - FINAL
 MAJOR

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98

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

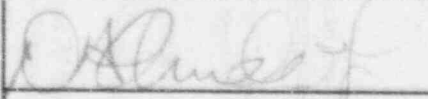
*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(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			
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT				MINIMUM		MAXIMUM			
00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT					NO AVG	DAILY MAX	MG/L		
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT					NO AVG	DAILY MAX	MG/L		
50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	No flow →								
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Grndorf
 Chemistry Manager
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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


TELEPHONE 412 393-5113
 DATE 97 05 28
 AREA CODE NUMBER YEAR MO DAY

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

No discharge. The plant purchases deionized water from Midland instead of running the softener.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME HEAVEN VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15077
 FACILITY HEAVEN VALLEY POWER STATION
 LOCATION
 ATTY: DAVID ORNDORF

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

PERMIT NUMBER 00075615
 DISCHARGE NUMBER 203 A

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

MAIN SEWAGE TMT
 (SUBR 05)
 F - FINAL
 MAJOR

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98

*** 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			
PERMIT 00000 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****	****	6.52	*****	7.03	(12)	0	4/30	grab
	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0			TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****	****	*****	29.8	40.4	(19)	0	5/30	8hr comp
	PERMIT REQUIREMENT	*****	*****	****	*****	30	50			TWICE/MONTH	COMP-
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	.006	.021	(03)	*****	*****	*****			14/30	MEASRD
	PERMIT REQUIREMENT	0.021	REPORT	****	*****	*****	*****			WEEKLY	MEASRD
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****	****	*****	0.36	1.00	(19)	0	6/30	grab
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT			TWICE/MONTH	GRAB
COLIFORM, FECAL GENERAL 70055 1 1 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****	****	*****	0	*****	(13)	0	2/30	grab
	PERMIT REQUIREMENT	*****	*****	****	*****	2000	*****			TWICE/MONTH	GRAB
BOO, CARBOXYCEOUS 5 DAY, 20C 80062 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****	****	*****	7.1	11.1	(19)	0	2/30	8hr comp
	PERMIT REQUIREMENT	*****	*****	****	*****	25	50			TWICE/MONTH	COMP-
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER David Orndorf Chemistry Manager * TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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 <i>David Orndorf</i>	TELEPHONE	DATE		
			AREA CODE NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID GRNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID GRNDORF

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

211 TURNING BLVD
 (SUBR 05)
 F - FINAL
 MAJOR

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98

PERMIT NUMBER 10025813
 DISCHARGE NUMBER 1114

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

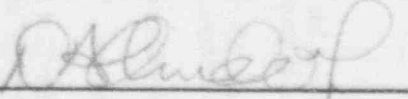
000 NO DISCHARGE [] 000

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(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			
PH	SAMPLE MEASUREMENT				7.39		8.39	(17)	0	1/7 grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT				MINIMUM		MAXIMUM	50		
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT					10	100	(17)	0	1/7 grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT				NO AVG	NO AVG	DAILY MAX	MG/L		
OIL AND GREASE	SAMPLE MEASUREMENT				5.8	8.3	8.3	(17)	0	1/7 grab
PHENOL EXTH-CBAV NET	PERMIT REQUIREMENT				NO AVG	DAILY MAX	INST MAX	MG/L		
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.002	.002	(03)					0	1/7 grab
FLOW, IN CONDUIT OR TRFM TREATMENT PLN	PERMIT REQUIREMENT	NO AVG	DAILY MAX	MGD						
50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Grndorf
 Chemistry Manager
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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


TELEPHONE 412 393-5113
 DATE 97 '05 28
 AREA CODE NUMBER YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SKIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

PERMIT NUMBER 18025515
 DISCHARGE NUMBER 2123

UNIT 2 COOL TOWER
 (SRR 05)
 F - FINAL
 MAJOR

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98
 12345

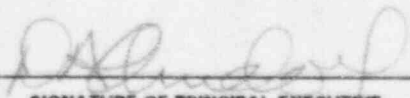
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
FROM	7	0	TO		
	(20-21)	(22-23)	(24-25)	(26-27)	(28-29) (30-31)

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

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) 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			
PH	SAMPLE MEASUREMENT	*****	*****		No flow			(13)			
00400 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	***	6.0	*****	3.0			TWICE GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		No flow			(19)		No flow	
00530 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	***	30	100				TWICE GRAB	
OIL AND GREASE PERSON EXTN-GRAV MET	SAMPLE MEASUREMENT	*****	*****		No flow			(19)		No flow	
00556 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	***	15	20				TWICE GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLAN	SAMPLE MEASUREMENT	No flow		(03)						No flow	
30050 1 0 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	NO AVG	DAILY MX	MGD						WEEKLY ESTIMA	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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


TELEPHONE 412 393-5113
 DATE 97 05 28
 AREA NUMBER YEAR MO DAY

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

No discharge.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15877
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

PERMIT NUMBER
 DISCHARGE NUMBER

UNIT 2 AUY BOILER
 (SUBR 05)
 F - FINAL
 MAJOR

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 (20-21) (22-23) (24-25) (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)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (54-61)	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
50.00, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT					30	100			WICHA GRAB MONTH
OIL AND GREASE FREON RXTR-GRAV RET 00556 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT					15	20			WICHA GRAB MONTH
FLOW, IN CONDUIT OR TERTY TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	No flow		(03)						WEEKLY ESTIMA
	PERMIT REQUIREMENT	REPORT	REPORT							
		NO AVG	DAILY MX	MGD						
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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
 [Signature]

TELEPHONE DATE
 412 393-5113 97 05 28
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 No flow - No discharge

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SNIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

PERMIT NUMBER 00025815
 DISCHARGE NUMBER 101A

UNIT 1 OIL WATER (SUBB 05)
 7 - FINAL MAJOR
 Form Approved. OMB No. 2040-0004
 Approval expires 05-31-98

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 (20-21) (22-23) (24-25) (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) (54-61)			(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				
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		6.86	*****	7.43	(13)	0	1/7	grab	
	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0			WEEKLY	GRAB	
00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****				5.4	9.7	(19)	0	1/7	grab
	PERMIT REQUIREMENT	*****	*****	****	*****	30	100			WEEKLY	GRAB	
00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****				<5	<5	(19)	0	1/7	grab
	PERMIT REQUIREMENT	*****	*****	****	*****	15	20			WEEKLY	GRAB	
00050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.019	0.056	(03)	*****	*****	*****	*****		0	1/7	EST.
	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	*****	****		WEEKLY	ESTIM
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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

TELEPHONE
 DATE
 AREA CODE NUMBER YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

313 X
 PERMIT NUMBER DISCHARGE NUMBER

313 TURBINE BLDG
 (SUBR 05)
 F - FINAL
 MAJOR

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98

MONITORING PERIOD
 FROM TO
 (20-21) (22-23) (24-25) (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) (54-61)			(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			
00400 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT				6.60		7.42	0	1/7	grab
	PERMIT REQUIREMENT				MINIMUM		MAXIMUM			
00530 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT					7.5	11.6	0	1/7	grab
	PERMIT REQUIREMENT					70 AVG	DAILY MX			
00556 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT					<5	<5	0	1/7	grab
	PERMIT REQUIREMENT					70 AVG	DAILY MX			
50050 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	.002	.002	(.03)				0	1/7	EST.
	PERMIT REQUIREMENT	NO AVG	DAILY MX	MGD						
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1316. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE
 412 393-5113 97 05 28
 AREA CODE NUMBER YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

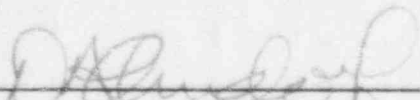
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
 PERMIT NUMBER 00025815
 DISCHARGE NUMBER 501 A
 MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

Form Approved. OMB No. 2040-0004
 Approval expires 05-31-98
 CHECK FEED AREA (SUBR 05)
 F - FINAL MAJOR
 *** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOAD (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 (54-61)	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	0.0 MINIMUM	*****	REPORT MAXIMUM	50		TWICE MONTHLY	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	10 NO AVG	100 DAILY MAX	MG/L		TWICE MONTHLY	GRAB
00558 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	15 NO AVG	20 DAILY MAX	MG/L		TWICE MONTHLY	GRAB
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	No flow	REPORT	REPORT	*****	*****	*****	****		WEEKLY ESTIMATE	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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


TELEPHONE
 DATE
 AREA CODE NUMBER YEAR MO DAY
 000 5113 07 05 28

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

No discharge

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

PERMIT NUMBER 10025615
 DISCHARGE NUMBER 493

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

CONDENSATE BLOWDOWN
 (SUBR 05)
 F - FINAL
 MAJOR

Form Approved.
 OMB No. 2040-0004 AT
 Approval expires 05-31-98

*** NO DISCHARGE 1-1-98

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)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
EFFLUENT GROSS VALUE					7.38		8.65		0	1/7	grab
SOLIDS, TOTAL SUSPENDED						15.0	34.7		0	6/30	grab
OIL AND GREASE						5.2	6.1		0	1/7	grab
NITROGEN, AMMONIA TOTAL (AS N)						NA					
CHLORIDE						NA					
THRU TREATMENT PLANT		0.010	0.010						0	1/7	EST
CHLORINE, TOTAL RESIDUAL						0.12	0.48		0	1/7	grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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

TELEPHONE 412 393-5113
 DATE 97 05 28
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 HYDRAZINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF NET LAYUP. REPORT THE DAILY MAXIMUM FOR NETZ. D T-14UREN DISCHARGING (24 HR. COMP.): NG/L. (THE LIMIT IS 35 NG/L AS A DAILY MAX.)
 Plant not in net layup during April. NO chloride treatment.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

PERMIT NUMBER 0A0025625
 DISCHARGE NUMBER 4333

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
97	05	01	97	05	01

CONDENSATE BLOWDOWN (SUBP 05)
 F - FINAL
 MAJOR
 Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98

*** 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	UNITS			
HYDRAZINE	SAMPLE MEASUREMENT	*****	*****		*****	N/A					
81313 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	0000	*****	0	0	NO AVG	DAILY	150/L	WEEKLY GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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.)	TELEPHONE	DATE		
David Orndorf Chemistry Manager TYPED OR PRINTED			AREA CODE NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 HYDRAZINE AND AMMONIA MONITORING TO APPLY DURING PERIODS OF WET LAYUP. REPORT THE DAILY MAXIMUM FOR BETA D T-1 WHEN DISCHARGING (24 HR. COMP.) 150/L. (THE LIMIT IS 15 MG/L AS A DAILY MAX.)
 Plant not in wet layup in April

NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

PERMIT NUMBER: VAD025615

DISCHARGE NUMBER: 117 A

BULK FUEL STORAGE (SUBP 05)
 F - FINAL MAJOR

Form Approved. OMB No. 2040-0004
 Approval expires 05-31-91

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

NO DISCHARGE

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only) (46-53) (54-61)			QUANTITY OR CONCENTRATION (4 Card Only) (38-45) (46-53) (54-61)				NO. EX (52-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT				No discharge						
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT				MINIMUM		MAXIMUM	30		WEEKLY	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT				No discharge						
OIL AND GREASE	SAMPLE MEASUREMENT					NO AVG	DAILY MAX	MG/L		WEEKLY	
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT				No discharge						
FLOW, IN CONDUIT OR TREATMENT PLANT	SAMPLE MEASUREMENT	No flow				NO AVG	DAILY MAX	MG/L		WEEKLY	
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT NO AVG	REPORT DAILY MAX	MGD						No discharge	
	SAMPLE MEASUREMENT									WEEKLY	
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
 [Signature]

TELEPHONE: 412 393-5113
 DATE: 97 05 28
 AREA CODE NUMBER YEAR MO DAY

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

No discharge

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)
 NAME BEAVER VALLEY POWER STATION
 ADDRESS P.O. BOX 4
 ATTN: DAVID ORNDORF
 SHIPPINGPORT PA 15077
 FACILITY BEAVER VALLEY POWER STATION
 LOCATION
 ATTN: DAVID ORNDORF

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

BULK FUEL STORAGE (SUBR 05)
 7 - FINAL MAJOR
 Form Approved. OMB No. 2040-0004
 Approval expires 05-31-98

PA0025813
 PERMIT NUMBER

0111A
 DISCHARGE NUMBER

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

000 NO DISCHARGE 000

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			
PH					No discharge			(12)			
00400 1 0 0 EFFLUENT GROSS VALUE				0000	0.0		9.0			WEEKLY GRAB	
SOLIDS, TOTAL SUSPENDED					No discharge			(12)			
00530 1 0 0 EFFLUENT GROSS VALUE				0000	30		100			WEEKLY GRAB	
OIL AND GREASE FROM EXTRA-GRAV MET					No discharge			(12)			
00556 1 0 0 EFFLUENT GROSS VALUE				0000	15		20			WEEKLY GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLAN		No flow								No discharge	
50050 1 0 0 EFFLUENT GROSS VALUE				NO AVG			DAILY MX	MG/L		WEEKLY ESTIM	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 David Orndorf
 Chemistry Manager
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 23 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

David Orndorf
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 412 393-5113
 DATE 97 05 28
 AREA CODE NUMBER YEAR MO DAY

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

No discharge

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

NAME HEAVEN VALLEY POWER STATION

ADDRESS P.O. BOX 4

ATTN: DAVID ORNDORF

SHIPPINGSPOET

PA 15077

FACILITY HEAVEN VALLEY POWER STATION

LOCATION

ATTN: DAVID ORNDORF

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

PA0025615
PERMIT NUMBER

5072
DISCHARGE NUMBER

UNIT 1 GENERATOR BL
(30000005)
P - FINAL
MAJOR

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-95

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
FROM	20	21	TO	26	27
	(22-23)	(24-25)		(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 (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 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****		*****	No flow		(19)			
	PERMIT REQUIREMENT	*****	*****	***	*****	30	100			WEEKLY GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	No flow		(03)	*****	*****	*****			No flow	
	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	***		WEEKLY ESTIMA	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER David Orndorf Chemistry Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 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.)	TELEPHONE	DATE			
		412 393-5113	97	05	28	
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

No discharge.

Paperwork Reduction Act Notice

Public reporting burden for this collection of information is estimated to vary from a range of 10 hours as an average per response for some minor facilities, to 110 hours as an average per response for some major facilities, with a weighted average for major and minor facilities of 18 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M Street, SW Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

General Instructions

1. If form has been partially completed by preprinting, disregard instructions directed at entry of that information already preprinted.
2. Enter "Permittee Name/Mailing Address (and facility name/location, if different)," "Permit Number," and "Discharge Number" where indicated. (A separate form is required for each discharge.)
3. Enter dates beginning and ending "Monitoring Period" covered by form where indicated.
4. Enter each "Parameter" as specified in monitoring requirements of permit.
5. Enter "Sample Measurement" data for each parameter under "Quantity" and "Quality" in units specified in permit. "Average" is normally arithmetic average (geometric average for bacterial parameters) of all sample measurements for each parameter obtained during "Monitoring Period." "Maximum" and "Minimum" are normally extreme high and low measurements obtained during "Monitoring Period." (Note to municipalities with secondary treatment requirement: Enter 30-day average of sample measurements under "Average," and enter maximum 7-day average of sample measurements obtained during monitoring period under "Maximum.")
6. Enter "Permit Requirement" for each parameter under "Quantity" and "Quality" as specified in permit.
7. Under "No Ex" enter number of sample measurements during monitoring period that exceed maximum (and/or minimum or 7-day average as appropriate) permit requirement for each parameter. If none, enter "0".
8. Enter "Frequency of Analysis" both as "Sample Measurement" (actual frequency of sampling and analysis used during monitoring period) and as "Permit Requirement" specified in permit. (e.g., Enter "Cont." for continuous monitoring, "1/7" for one day per week, "1/30" for one day per month, "1/90" for one day per quarter, etc.)
9. Enter "Sample Type" both as "Sample Measurement" (actual sample type used during monitoring period) and as "Permit Requirement" (e.g., Enter "Grab" for individual sample, "24HC" for 24-hour composite, "N/A" for continuous monitoring, etc.)
10. Where violations of permit requirements are reported, attach a brief explanation to describe cause and corrective actions taken, and reference each violation by date.
11. If "no discharge" occurs during monitoring period, enter "No Discharge" across form in place of data entry.
12. Enter "Name/Title of Principal Executive Officer" with "Signature of Principal Executive Officer of Authorized Agent," "Telephone Number," and "Date" at bottom of form.
13. Mail signed Report to Office(s) by date(s) specified in permit. Retain copy for your records.
14. More detailed instructions for use of this *Discharge Monitoring Report (DMR)* form may be obtained from Office(s) specified in permit.

Legal Notice

This report is required by law (33 U.S.C. 1318; 40 C.F.R. 125.27). Failure to report or failure to report truthfully can result in civil penalties not to exceed \$10,000 per day of violation; or in criminal penalties not to exceed \$25,000 per day of violation, or by imprisonment for not more than one year, or by both.