

BOSTON EDISON

Pilgrim Nuclear Power Station
Rocky Hill Road
Plymouth, Massachusetts 02360

A.L. Oxsen
Vice President
Nuclear Operations

January 29, 1987
BEC0 87-009

United States Environmental Protection Agency
Region I
Permits Processing Unit - Room 2109
John F. Kennedy Federal Building
Boston, MA 02203

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

Gentlemen:

Enclosed is the Discharge Monitoring Report for Pilgrim Nuclear Power Station, NPDES Permit Number 0003557 (Federal) and Number 359 (State).

The period covered by this report is October 1, 1986 through December 31, 1986.

Very truly yours,



RDA:pac

Attachment - Discharge Monitoring Report

cc: U. S. Nuclear Regulatory Commission
Region I
631 Park Avenue
King of Prussia, PA 19406

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

Senior NRC Resident Inspector
Pilgrim Nuclear Power Station

8702040090 861231
PDR ADCK 05000293
PDR

JE25
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SUMMARY

PILGRIM I DISCHARGE PERMIT REPORT

In accordance with the Federal Clean Water Act, amended (33USC 1251 Et. Seq: the "CWA"), and the Massachusetts Clean Waters Act, as amended (M.G.L., C21, 26-53), regarding effluent limitations, monitoring requirements and other conditions set forth in the Pilgrim Discharge Permits (Federal Permit Number MA0003557, and State Permit Number 359), Parts I and II, the following information is submitted for the period October 1, 1986 - December 31, 1986.

I. Discharge Points Covered in this Report

<u>Discharge Point</u>	<u>Discharge Identification</u>
001	Condenser Cooling Water
002	Condenser Backwash and Slime Control
003	Intake Screen Wash
010	Service Cooling Water
011	Makeup Water and Demineralizer Waste Discharge

II. Summary and Notes of Discharge Report

- A. The flow points 001 and 010 are calculated from system pump capacity and are equal to the total flow for all pumps in each system running at full capacity for a 24-hour period. The flow point 011 is measured by noting sump levels before and after discharge. Flow at point 002 is a conservative figure obtained by calculating flow if backwashing took place for 24 hours. Flow at point 003 is calculated from system pump capacity and mean operating time.
- B. The temperature at point 001 and 002 are measured by resistance temperature detectors (RTD's).
- C. Periodically, total residue chlorine concentration in the service cooling water (010) exceeds Permit requirements, primarily because of the number of service water pumps in operation. Chlorine levels are lowered as a corrective measure although the dilution provided by the flow kept total residual chlorine concentrations discharged to Cape Cod Bay below 0.1 ppm.
- D. Via USEPA letter to Boston Edison Company dated December 1, 1983. Pilgrim Station has been given permission to increase its Service Cooling Water (010) flow rate from 11.7 MGD to 19.4 MGD.
- E. Thirty day average, intake screen wash (003) flow periodically exceeds Permit limits because of continuous screen washing required for removal of heavy debris loads, caused by coastal storms. A letter requesting an increase in this Permit limit from 0.336 MGD to 2.02 MGD

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was sent to T. E. Landry on December 13, 1984 to the EPA, Compliance Branch (BECO Letter 5.84-048).

- F. Intake traveling screens were operated without dechlorination pumps operating on 10/3, 11/11, 11/13, 11/26, 11/30, 12/2, 12/3, 12/9, 12/14, 12/26 and 12/28. One occurrence on each date unless otherwise noted.
- G. Pilgrim Station Marine Ecology Semi-Annual Report #28 was sent to the USEPA and Mass. DWPC on October 31, 1986, as required by the NPDES Permit (BECO Letters 5.86.063 & 5.86-064).
- H. A letter (BECO Letter 5.86-077) was sent to the USEPA on November 25, 1986 confirming a verbal authorization on October 24, 1986 to discharge a 250,000 gallon fire water holding tank to the Pilgrim Station discharge canal, with the dilution of one circulating seawater pump. The tank discharge flow-rate was 50-100 gpm and it contained 640 ppm nitrites.
- I. On October 27, 1986 a telecon (BECO Telecon 4.86.115) was conducted with the USEPA to inform them of PNPS NPDES Permit nonconformances for discharge chlorine (TRC) concentrations. From 1300-1330 on October 26 and 27 TRC ranged from 0.05-0.36 and 0.03-1.05, respectively. Chlorination of the condenser cooling system was suspended until probable cause is determined. EPA was also notified that grab samples were being taken of the continuously chlorinated salt service water system because both continuous chlorine monitors were out of service at the time.
- J. A letter (BECO Letter 5.86-078) was sent to the USEPA on December 9, 1986 requesting permission to make PNPS, intake biofouling control modifications relating to NPDES Permit conditions.
- K. On November 20, 1986 a letter (from BECO Environmental Affairs Department) was sent to the USEPA correcting an error in total residual chlorine analysis by the PNPS chemistry laboratory, done as part of the EPA's Discharge Monitoring Report (DMR) Quality Assurance (QA) Program.

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

NAME PLANT IN CO. 31 FILLMORE PLANT

ADDRESS LUCKY HILL WIND

CO. 31

PLYMOUTH

FACILITY PLYMOUTH

LOCATION PLYMOUTH

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

Form Approved

OMB No. 2040-0004
Approval expires 9-30-8

COOLING WATERS

MAJOR (SUMP S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WAT	SAMPLE MEASUREMENT	*****	*****		39.5	40.2	40.8		0		
DEG. FAHRENHEIT	PERMIT REQUIREMENT	*****	*****		REPORT	REPORT	102				
00011 1 0							INST MX				
EFFLUENT GROSS VOLUME	SAMPLE MEASUREMENT	222.9	223.2		*****	*****	*****		0		
FLOW, IN GROSS	PERMIT REQUIREMENT	447.0	510.0		*****	*****	*****				
THRU TREATMENT PLANT		300A AVG	DAILY MX								
00010 1 0											
EFFLUENT GROSS VOLUME	SAMPLE MEASUREMENT	*****	*****		0.00	0.00	0.00		0		
CHLORINE, TOTAL	PERMIT REQUIREMENT	*****	*****		REPORT	REPORT	.1				
RESIDUAL					DAILY MN		DAILY MX				
00010 1 0											
EFFLUENT GROSS VOLUME	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A.E. PEDERSEN
STATION 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. § 1071 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

617 746-7400

87 1 23

AREA CODE NUMBER YEAR MO DAY

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

PH SHALL NOT VARY MORE THAN 0.5 PH STANDARD UNITS FROM INTAKE WATER.
TEMP. SHALL AT NO TIME EXCEED A 32 DEGREE RISE OVER TEMP OF INTAKE WATER.

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

NAME BOSSON RD #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

RD #1

PLYMOUTH

FACILITY

LOCATION

ATTN: C.J. MATHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

F - FINAL

COOLING WATERS

Form Approved
OMB No. 2040-0004
Approval expires 9-30-85

MA0003557

PERMIT NUMBER

001 1

DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR 86 MO 10 DAY 01 TO YEAR 86 MO 10 DAY 11
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0	SAMPLE MEASUREMENT	*****	*****		56.2	57.0	57.8	0		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	REPORT	REPORT	102 INST MX		CONTIN	CONTIN
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 00050 1 0	SAMPLE MEASUREMENT	223.2	223.2		*****	*****	*****	0		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	447.0 30DA AVG	510.0 DAILY MX	MGD	*****	*****	*****		CONTIN	CONTIN
CHLORINE, TOTAL RESIDUAL 00060 1 0	SAMPLE MEASUREMENT	*****	*****		0.00	0.02	0.45	2	SEE SUMMARY NOTES #II, I.	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	REPORT DAILY MX	.1 MG/L		ONCE/ GRAB-2 DISCHG	
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

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SIGNATURE OF PRINCIPAL EXECUTIVE

OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

617 746-7900

87 1 03

AREA
CODE

NUMBER

YEAR

MO

DAY

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

PH SHALL NOT VARY MORE THAN 0.5 PH STANDARD UNITS FROM INTAKE WATER.
TEMP. SHALL AT NO TIME EXCEED A 32 DEGREE RISE OVER TEMP OF INTAKE WATER.

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

NAME ROSTON RD #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

RD #1

PLYMOUTH

FACILITY

LOCATION

ATTN: C.J. MATHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

F - FINAL

COOLING WATERS

Form Approved
OMB No. 2040-0004
Approval expires 9-30-85

MA0003557

PERMIT NUMBER

001 1

DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR 86 MO 10 DAY 01 TO YEAR 86 MO 10 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53)			QUALITY OR CONCENTRATION (4 Card Only) (38-45)			NO. EX	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0	SAMPLE MEASUREMENT	*****	*****		56.2	57.0	57.8		0	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	REPORT	REPORT	102 INST MX		CONTIN	CONTIN
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	SAMPLE MEASUREMENT	223.2	223.2		*****	*****	*****		0	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	447.0 300A AVG	510.0 DAILY MX	MGD	*****	*****	*****	****	CONTIN	CONTIN
CHLORINE, TOTAL RESIDUAL 50060 1 0	SAMPLE MEASUREMENT	*****	*****		0.00	0.02	0.45		2	SEE SUMMARY NOTES # II, I.
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	REPORT	.1 DAILY MX	MG/L	ONCE/	GRAB-2 DISCHG
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

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SIGNATURE OF PRINCIPAL EXECUTIVE

OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

617 746-7900

87 1 03

AREA
CODE

NUMBER

YEAR

MO

DAY

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

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

NAME

ADDRESS

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

AS00030567

PERMIT NUMBER

001 1

DISCHARGE NUMBER

F - FINAL
COOLING WATERS

Form Approved
OMB No. 2040-0074
Approval expires 9-30

MONITORING PERIOD

FROM

YEAR MO DAY
(20-21) (22-23) (24-25)

TO

YEAR MO DAY
(26-27) (28-29) (30-31)

MAJOR (SUPR S)

NOTE: Read instructions before completing this form.

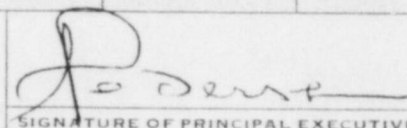
PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING			(4 Card Only) (38-45) QUALITY OR CONCENTRATION				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
	SAMPLE MEASUREMENT	*****	*****		46.9	47.8	48.7		0		
	PERMIT REQUIREMENT	*****	*****	***	REPORT	REPORT	102 INST MX	DEG.F		CONTINCONTIN UOUS	
	SAMPLE MEASUREMENT	220.7	223.2		*****	*****	*****		0		
	PERMIT REQUIREMENT	447.0 300A AVG	510.0 DAILY MX	MO	*****	*****	*****	****		CONTINCONTIN UOUS	
	SAMPLE MEASUREMENT	*****	*****		0.00	0.00	0.00		0		
	PERMIT REQUIREMENT	*****	*****	***	REPORT DAILY MN	REPORT	.1 DAILY MX	MG/L		ONCE/ GRAB-2 DISCHG	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A.E. PEDERSEN
STATION MANAGER

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE

OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

617 746-7000

87 1 23

AREA
CODE

NUMBER

YEAR

MO

DAY

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

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
Approval expires 9-31

NAME BOSTON ED #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

REG #1

PLYMOUTH MA 02360

FACILITY

LOCATION

ATTN: C.J. MATHIS, STATION MANAGER

MA0003557

PERMIT NUMBER

010 A

DISCHARGE NUMBER

F - FINAL
SERVICE COOLING WATER

MONITORING PERIOD

FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
86	10	01	86	10	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(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)	SAMPL TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	SAMPLE MEASUREMENT	4.0	7.2		*****	*****	*****	0		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	11.7	REPORT	MGD	*****	*****	*****	****	CONTINUOUS	ILLUSTRATIVE
CHLORINE, TOTAL RESIDUAL 50060 1 0	SAMPLE MEASUREMENT	*****	*****		0.01	0.19	0.66	11	SEE SUMMARY NOTES #11.C	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	REPORT	0.25 30DA AVG	0.5 DAILY MX	MG/L	CONTINUOUS	ILLUSTRATIVE
	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

A.E. PEDERSEN
STATION 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

617 746-7900

87 1 2

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

CONTINUOUS CHLORINATION OF SERVICE WATER SYSTEM MAY BE USED FOR MACROINVERTEBRATE CONTROL. FLOW RATE SHALL BE ESTIMATED FROM PUMP CAPACITY CURVES AND OPERATIONAL HOURS.

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

NAME BOSION RD #1 PILGRIM PLANT

ADDRESS JACKY HILL ROAD

RD #1

PLYMOUTH

MA 02350

FACILITY

LOCATION

ATTN: C.J. MATHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

F - FINAL

SERVICE COOLING WATER

Form Approved
OMB No. 2040-0004
Approval expires 9-30-85

MA0003557

PERMIT NUMBER

010 A

DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY
85 11 01 85 11 30
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	QUANTITY OR LOADING (46-53)			QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-55)	UNITS (56-57)	MINIMUM (58-59)	AVERAGE (60-61)	MAXIMUM (62-63)			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	3.7	6.0		*****	*****	*****		0	
	PERMIT REQUIREMENT	11.7	REPORT	MGD	*****	*****	*****	***		CONTIN DAILY VUUS
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		0.01	0.27	0.56		9	SEE SUMMARY NOTES # II, C.
	PERMIT REQUIREMENT	*****	*****	***	REPORT	0.25 30DA AVG	0.5 DAILY MX	MG/L		CONTIN DAILY VUUS
	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 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE			
A.E. PEDERSEN STATION MANAGER			617 746-7900	87	1	03	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

CONTINUOUS CHLORINATION OF SERVICE WATER SYSTEM MAY BE USED FOR MACROINVERTEBRATE CONTROL. FLOW RATE SHALL BE ESTIMATED FROM PUMP CAPACITY CURVES AND OPERATIONAL HOURS.

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

NAME STATION #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

RED #1

PLYMOUTH

MA 02360

FACILITY

LOCATION

ATTN: C.J. MATHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

MA0003557

PERMIT NUMBER

010 A

DISCHARGE NUMBER

F - FINAL

SERVICE COOLING WATER

Form Approved
OMB No. 2040-0004
Approval expires 9-30

MONITORING PERIOD

FROM YEAR 86 MO 12 DAY 01 TO YEAR 86 MO 12 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLI TYPE (69-70)
		(3 Card Only) (46-53)			(4 Card Only) (38-45)						
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT IR THRU TREATMENT PLANT 00050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	<u>5.0</u>	<u>7.2</u>		*****	*****	*****		<u>0</u>		
	PERMIT REQUIREMENT	<u>11.7</u>	<u>REPORT</u>		*****	*****	*****	****			CONTIN DAILA VUOUS
CHLORINE, TOTAL RESIDUAL 00060 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		<u>0.09</u>	<u>0.20</u>	<u>0.76</u>		<u>9</u>		SEE SUMMAR, NOTES #II.C
	PERMIT REQUIREMENT	*****	*****	****	REPORT	<u>0.25</u>	<u>0.5</u>				CONTIN DAILA VUOUS
	SAMPLE MEASUREMENT					<u>30DA AVG</u>	<u>DAILY MX</u>	MG/L			
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A.E. PEDERSEN
STATION 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

617 746-7900

87 1 23

AREA CODE

NUMBER

YEAR

MO

DA

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

CONTIN US CHLORINATION OF SERVICE WATER SYSTEM MAY BE USED FOR MACROINVERTEBRATE CONTROL. FLOW RATE SHALL BE ESTIMATED FROM PUMP CAPACITY CURVES AND OPERATIONAL HOURS.

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

NAME BOSION ED #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

RED #1

PLYMOUTH MA 02360

FACILITY

LOCATION

ATTN: C.J. MATHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

F - FINAL

INTAKE SCREEN WASH

Form Approved
OMB No. 2040-0004
Approval expires 9-30-85

MA0003557

PERMIT NUMBER

003 A

DISCHARGE NUMBER

MONITORING PERIOD

FROM

YEAR MO DAY
85 10 01

TO

YEAR MO DAY
86 10 31

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

NOTE: Read instructions before completing this form.														
PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53)			QUALITY OR CONCENTRATION (4 Card Only) (38-45)				QUALITY 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	UNITS						
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.193	0.966		*****	*****	*****				0			
	PERMIT REQUIREMENT	0.336 30DA AVG	2.02 DAILY MX MGD		*****	*****	*****	***				CONTINUED	ESTIMATE	
	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

A.E. PEDERSEN
STATION 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

617 746-7700

87 1 23

AREA
CODE

NUMBER

YEAR

MO

DAY

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

THE TEMPERATURE OF THIS DISCHARGE SHALL AT NO TIME EXCEED THE TEMPERATURE OF THE INTAKE WATER.
ALL FISH SHELLFISH AND OTHER ORGANISMS COLLECTED OR TRAPPED ON INTAKE SCREEN SHOULD BE RETURNED TO WATER
UNTIL SUPPLY IS EXHAUSTED.

00025/062435-1540

PAGE OF

1

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

NAME BOSTON ED #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

ED #1

PLYMOUTH

MA 02360

FACILITY

LOCATION

ATTN: C.J. MATHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

MA0003557

PERMIT NUMBER

003

DISCHARGE NUMBER

F - FINAL

INTAKE SCREEN WASH

Form Approved
OMB No. 2040-0004
Approval expires 9-30-8

MONITORING PERIOD

FROM YEAR 86 MO 11 DAY 01 TO YEAR 86 MO 11 DAY 30
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

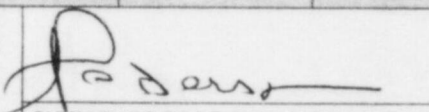
PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			(46-53) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT DOUSE I O EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.265	1.008		*****	*****	*****				0		
	PERMIT REQUIREMENT	0.336	2.02		*****	*****	*****	****					
		30DA AVG	DAILY MX	MGD									
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
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	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A.E. PEDERSEN
STATION 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

617 746-7900 87 1 23

AREA
CODE

NUMBER

YEAR

MO

DAY

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

THE TEMPERATURE OF THIS DISCHARGE SHALL AT NO TIME EXCEED THE TEMPERATURE OF THE INTAKE WATER.
ALL FISH SHELLFISH AND OTHER ORGANISMS COLLECTED OR TRAPPED ON INTAKE SCREEN SHOULD BE RETURNED TO WATER
EPA Form 3320-1 (Rev. 10-79) PREVIOUS EDITION TO BE USED FROM INTAKE STRUCTURES TO PREVENT REIMPINGEMENT.
(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

00026/062486-1540

PAGE OF

1

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

NAME BOSTON RD #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

2FD #1

PLYMOUTH

MA 02360

FACILITY

LOCATION

ATTN: C.J. MATHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

MA0003557

PERMIT NUMBER

003 A

DISCHARGE NUMBER

F - FINAL
INTAKE SCREEN WASH

Form Approved
OMB No. 2040-0004
Approval expires 9-30-

MONITORING PERIOD

FROM YEAR 86 MO 12 DAY 01 TO YEAR 86 MO 12 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only) (46-53)			QUALITY OR CONCENTRATION (4 Card Only) (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 30050 1 0 EFFLUENT GROSS VALU		0.249	1.008		*****	*****	*****				
	PERMIT REQUIREMENT	0.336 30DA AVG	2.02 DAILY MX MGD		*****	*****	*****	**** ****			CONTINUED UOUS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A.E. PEDERSEN
STATION 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

617 746-7900

87 1 23

AREA CODE

NUMBER

YEAR

MO

DAY

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

THE TEMPERATURE OF THIS DISCHARGE SHALL AT NO TIME EXCEED THE TEMPERATURE OF THE INTAKE WATER.
ALL FISH SHELLFISH AND OTHER ORGANISMS COLLECTED OR TRAPPED ON INTAKE SCREEN SHOULD BE RETURNED TO WATER

EPA Form 3320-1 (Rev. 10-79)

PREVIOUS EDITIONS TO BE USED
UNTIL SUPPLY IS EXHAUSTED.

(REPLACES EPA FORM 1-40 WHICH MAY NOT BE USED.)

00027/062486-1540

PAGE OF

1

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

NAME BOSTON ED #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

ED #1

PLYMOUTH

MA 02360

FACILITY

LOCATION

ATTN: C.J. MAHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

MA0003557

PERMIT NUMBER

011 A

DISCHARGE NUMBER

F - FINAL

MAKE UP WATER AND DEMINERALIZE

Form Approved
OMB No. 2040-0004
Approval expires 9-30

MONITORING PERIOD

FROM

YEAR MO DAY
86 10 01

(20-21) (22-23) (24-25)

TO

YEAR MO DAY
86 10 31

(26-27) (28-29) (30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(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			
24	SAMPLE MEASUREMENT	*****	*****		8.0	*****	8.0	0		
00400 1 0	PERMIT REQUIREMENT	*****	*****	****	6.1	*****	8.4			GRAB
EFFLUENT GROSS VALU				*****	MINIMUM		MAXIMUM	SU		
SOLIDS, TOTAL	SAMPLE MEASUREMENT	*****	*****		*****	0.61	18.8	0		
SUSPENDED	PERMIT REQUIREMENT	*****	*****	****	*****	30	100			GRAB
00530 1 0				*****		30DA AVG	DAILY MX	MG/L		
EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	0.0003	0.009		*****	*****	*****	0		
FLOW, IN CONDUIT OR	PERMIT REQUIREMENT	0.015	0.06		*****	*****	*****	***		ESTIMA
THRU TREATMENT PLANT		30DA AVG	DAILY MX	MGD				****		
30050 1 0	SAMPLE MEASUREMENT									
EFFLUENT GROSS VALU	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A.E. PEDERSEN
STATION 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

617746-7900

87 1 23

AREA
CODE

NUMBER

YEAR

MO

DAY

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

FORMERLY DESIGNATED DISCHARGE 0013. SAMPLES TAKEN IN COMPLIANCE WITH THE MONITORING REQUIREMENTS SPECIFIED ABOVE SHALL BE TAKEN AT A POINT PRIOR TO MIXING WITH ANY OTHER STREAM. SEE PG 11 OF PERMIT FOR BIOLOGICAL MONITORING.

EPA Form 3320-1 (Rev. 10-79) PREVIOUS EDITION TO BE USED
UNTIL SUPPLY IS EXHAUSTED.

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

00043/062486-1540

PAGE OF

1

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

NAME BOSTON ED #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

ED #1

PLYMOUTH

MA 02360

FACILITY

LOCATION

ATTN: C.J. MAHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

MA0003557

PERMIT NUMBER

011 A

DISCHARGE NUMBER

F - FINAL

MAKE UP WATER AND DEMINERALIZE

Form Approved
OMB No. 2040-000-
Approval expires 9-3

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	86	11	01		86	11	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX	FREQUENCY OF ANALYSIS (64-68)	SAMP TYPE (69-71)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****		7.1	*****	7.7			
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.1 MINIMUM	*****	8.4 MAXIMUM			GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	0.43	13.6			
00100 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 30DA AVG	100 DAILY MX			GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0008	0.013		*****	*****	*****			
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.015 30DA AVG	0.06 DAILY MX	MGD	*****	*****	*****	****		ESTIM
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A.E. PEDERSEN
STATION 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]

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

617 746-7900

87 1 2

AREA CODE

NUMBER

YEAR

MO

DAY

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

FORMERLY DESIGNATED DISCHARGE 001B. SAMPLES TAKEN IN COMPLIANCE WITH THE MONITORING REQUIREMENTS SPECIFIED ABOVE SHALL BE TAKEN AT A POINT PRIOR TO MIXING WITH ANY OTHER STREAM. SEE PG 11 OF PERMIT FOR BIOLOGICAL MONITORING.

EPA Form 3320-1 (Rev. 10-79) PREVIOUS EDITION TO BE USED UNTIL SUPPLY IS EXHAUSTED.

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

00344/062486-1540

PAGE OF

1

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

NAME BOSION RD #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

RFD #1

PLYMOUTH MA 02360

FACILITY

LOCATION

ATTN: C.J. MAHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

MA0003557

PERMIT NUMBER

011 A

DISCHARGE NUMBER

F - FINAL

MAKE UP WATER AND DEMINERALIZE

Form Approved
OMB No. 2040-0004
Approval expires 9-30

MONITORING PERIOD

FROM YEAR 85 MO 12 DAY 01 TO YEAR 86 MO 12 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(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)	SAMPL TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****		<u>6.3</u>	*****	<u>7.5</u>		<u>0</u>	
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	<u>6.1</u>	*****	<u>8.4</u>			GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	<u>0.14</u>	<u>4.4</u>		<u>0</u>	
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	<u>30</u>	<u>100</u>			GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	<u>00008</u>	<u>0.013</u>		*****	*****	*****		<u>0</u>	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	<u>0.015</u>	<u>0.06</u>	***	*****	*****	*****			ESTIM
	SAMPLE MEASUREMENT	<u>30DA AVG</u>	<u>DAILY MX</u>	MGD						
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

A.E. PEDERSEN
STATION 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

617 746-7900

87 1 2

AREA
CODE

NUMBER

YEAR

MO

DA

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

FORMERLY DESIGNATED DISCHARGE 0018. SAMPLES TAKEN IN COMPLIANCE WITH THE MONITORING REQUIREMENTS SPECIFIED ABOVE SHALL BE TAKEN AT A POINT PRIOR TO MIXING WITH ANY OTHER STREAM. SEE PG 11 OF PERMIT FOR BIOLOG

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

NAME BOSTON ED #1 PILGRIM PLANT
 ADDRESS ROCKY HILL ROAD
ED #1
PLYMOUTH MA 02360
 FACILITY
 LOCATION

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

MA0003557
 PERMIT NUMBER

002 1
 DISCHARGE NUMBER

F - FINAL
 CONDENSER BACKWASH

Form Approved
 OMB No. 2040-0004
 Approval expires 9-30-85

MONITORING PERIOD

FROM YEAR 85 MO 10 DAY 01 TO YEAR 96 MO 10 DAY 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADINGS (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	UNITS			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0	SAMPLE MEASUREMENT	*****	*****		<i>non-thermal backwashes</i>				0		
EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT 500 0 1 0	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	REPORT DAILY MX	120 DEG.F			CONTIN UOUS	CONTIN
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	9.3	9.3		*****	*****	*****		0		
	PERMIT REQUIREMENT	REPORT	255.0 DAILY MX	MGD	*****	*****	*****	****			ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
A.E. PEDERSEN
STATION 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]
 SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE 617 746-7900 DATE 87 1 23
 AREA CODE NUMBER YEAR MO DAY

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

THE PH SHALL NOT VARY MORE THAN 0.5 STANDARD UNITS FROM THAT OF THE INTAKE WATER. FLOW RATE IS TO BE ESTIMATED AS IF BACKFLUSHING TOOK PLACE FOR 24 CONTINUOUS HOURS. SEE PERMIT PAGE 7 FOR CONDITIONS REGARDING THE

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

NAME BOSTON RD #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

RD #1

PLYMOUTH

MA 02360

FACILITY

LOCATION

ATTN: C.J. MATHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

MA0003557

PERMIT NUMBER

002 1

DISCHARGE NUMBER

F - FINAL

CONDENSER BACKWASH

Form Approved
OMB No. 2040-0004
Approval expires 9-30

MONITORING PERIOD

FROM YEAR 86 MO 11 DAY 01 TO YEAR 86 MO 11 DAY 30
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (46-53)			QUALITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPL TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS (54-61)	MAXIMUM (46-53)	AVERAGE (54-61)	MAXIMUM (54-61)	UNITS (54-61)			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0	SAMPLE MEASUREMENT	*****	*****		<i>non-thermal backwashes</i>						
EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	PERMIT REQUIREMENT	*****	*****	****	REPORT DAILY MN	REPORT	120 DAILY MX	DEG.F		CONTINCONTIN UOUS	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	9.3	9.3		*****	*****	*****				
	PERMIT REQUIREMENT	REPORT	255.0 DAILY MX	MGD	*****	*****	*****	****		ESTIM	
	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

A.E. PEDERSEN
STATION MANAGER

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

617 746-7900

87 1 2

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

THE PH SHALL NOT VARY MORE THAN 0.5 STANDARD UNITS FROM THAT OF THE INTAKE WATER. FLOW RATE IS TO BE ESTIMATED AS IF BACKFLUSHING TOOK PLACE FOR 24 CONTINUOUS HOURS. SEE PERMIT PAGE 7 FOR CONDITIONS REGARDING THE

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

NAME BOSTON ED #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

ED #1

PLYMOUTH MA 02360

FACILITY

LOCATION

ATTN: C.J. MATHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

MA0003557

PERMIT NUMBER

002 1

DISCHARGE NUMBER

F - FINAL
CONDENSER BACKWASH

Form Approved
OMB No. 2040-0004
Approval expires 9-30

MONITORING PERIOD

FROM

YEAR MO DAY
85 12 01

TO

YEAR MO DAY
85 12 31

(70-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				(54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPL TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS						
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 EFFLUENT GROSS VALU FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****	***** *****										

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OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

617 746 7900

87 1 2

AREA
CODE

NUMBER

YEAR

MO

DA

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