

Tennessee Valley Authority, Post Office Box 2000, Soddy Daisy, Tennessee 37384-2000

February 9, 2012

Ms. Dana Waits
State of Tennessee
Department of Environment and Conservation
Division of Water Pollution Control
Enforcement & Compliance Section
6th Floor, L & C Annex
401 Church Street
Nashville, Tennessee 37243-1534

Dear Ms. Waits:

SEQUOYAH NUCLEAR PLANT - DISCHARGE MONITORING REPORT FOR JANUARY 2012

Enclosed is the January 2012 Discharge Monitoring Report for Sequoyah Nuclear Plant. If you have any questions or need additional information, please contact Brad Love at (423) 843-6714 of Sequoyah's Environmental staff.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Sincerel

Sile Viće President Sequoyah Nuclear Plant

Enclosures

cc (Enclosures):

Chattanooga Environmental Field Office Division of Water Pollution Control State Office Building, Suite 550 540 McCallie Avenue Chattanooga, Tennessee 37402-2013 U.S. Nuclear Regulatory Commission Attn: Document Control Desk Washington, DC 20555

TE25

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Name TVA - SEQUOYAH NUCLEAR PLANT	Different) NATIONAL POLLUTANT DISCHARGE DISCHARGE MONITO	•	MAJOR (SUBR 01)	Form Approved. OMB No. 2040-0004
Address P.O. BOX 2000 (INTEROFFICE OPS-5N-SQN)	TN0026450	101 G	F - FINAL	
SODDY - DAISY, TN 37384 Facility TVA - SEQUOYAH NUCLEAR PLANT	PERMIT NUMBER	DISCHARGE NUMBER	DIFFUSER DISCHARGE	
Location HAMILTON COUNTY	MONITOR YEAR MO DAY	ING PERIOD	EFFLUENT	
ATTN: Brad Love	From 12 01 01	To 12 01 31	NO DISCHARGE	***
			NOTE: Read instructions before	completing this form.
PARAMETER	QUANTITY OR LOADING	QUALITY OR CO	ONCENTRATION	NO, FREQUENCY SAMPI
	AVEDAGE BANKING INA		******	ANALYSIS

PARAMETER		AUP	NTITY OR LOADING		QUALITY OR CONCENTRATION					FREQUENCY OF	TYPE
·		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS]	ANALYSIS	
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	****	***	**	****	*****	26.0	04	0	31 / 31	RCORDR
00010 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	****	****	***	*****	*****	Req. Mon.	DEG. C.		CONTI	CALCTD
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	***	**	****	*****	10.6	04	0	31 / 31	MODELD
00010 Z 0 INSTREAM MONITORING	PERMIT REQUIREMENT	*****	****	***	****	*****	30.5 DAILY MX	DEG. C.		CONTI	CALCTD
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C	SAMPLE MEASUREMENT	****	****	**	****	****	2	04	0	31 / 31	CALCTD
00016 1 1 EFFLUENT GROSS	PERMIT REQUIREMENT	****	****	****.	****	*****	5 DAILY MX	DEG. C.		CONTI NUOUS	CALCTD
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	****	1668	03	****	****	****	**	0	31 / 31	RCORDR
50050 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	****	Req. Mon. DAILY MAX	MGD	****	*****	*****	****		CONTI NUOUS	RCORDR
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	****	**	****	0.029	0.045	19	0	10 / 31	GRAB
50060 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	****	****	****	****	0.1 MO AVG	0.1 DAILY MAX	MG/L		FIVE PER WEEK	CALCTD
TEMPERATURE - C, RATE OF CHANGE	SAMPLE MEASUREMENT	***	0	62	*****	*****		**	0	31 / 31	CALCTD
82234 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	***	2 DAILY MX	DEG C/HR	*****	****	***	####		CONTI NUOUS	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		·				·				

		<i></i>	$\langle \langle \rangle \rangle$	7	<i>î</i>)	TE	LEPHONE		DATE	
John T. Carlin	direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate,	1	<u> </u>	abyat	n Site Vice President	423	843-7001	12	02	08
• •	and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.				F PRINCIPAL EXECUTIVE R AUTHORIZED AGENT	ADEA	NUMBER	VEAD		DAY
TYPED OR PRINTED			FFIC	EK U	R AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	МО	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
No closed mode operation. Veliger monitoring data is included as an attachment.

Sample Date	Mean # of ZM/m3	% Settlers	Water Temp. (*C)	Sample Date	Mean# of Asiatic Clams/m3	Water Temp. (*C)	LOCATION	SUB LOCATION	NOTES: % Gravid Asiatic Clam	COLLECTED BY
01/03/2012	14	100	26	01/03/2012	0	26		1-25-545		PKS
01/10/2012	0	0 .	9	01/10/2011	0 .	9	RCW ·		•	WBE
01/17/2011	0	0	10	01/17/2011	. 0	10		1-ISV-24-1234		PB
01/24/2012	0	0	13	01/24/2012	0	13		1-25-545		WPT
01/31/2012	0	0	17.6	01/31/2012	0	17.6		1-25-545		CR

PERMITTEE NAME/ADDRESS (Include Fac Name TVA - SEQUOYAH NUCLEA		Different) . —			ONITORING REP	ORT (DMR)	MAJOR (SUBR 01)		Form OMB			
Address P.O. BOX 2000		· 	TN	0026450		101 T	F - FINAL					
(INTEROFFICE OPS-5N-SQN) SODDY - DAISY, TN 37384					5100	The second secon		COD OUT	-011 40			
Facility TVA - SEQUOYAH NUCLEAR PL	ANT		PERM	IIT NUMBER	DISCI	HARGE NUMBER	BIOMONITORING	FOR OUT	ALL 10	Į		
Location HAMILTON COUNTY		_			ITORING PER		EFFLUENT					
				MO DA		AR MO DAY	*** NO DISCHA	RGF	***			
ATTN: Brad Love			From 12	01 0	1 To 12	2 01 31		L	_			
							NOTE: Read ins	structions before				
PARAMETER		QUA	NTITY OR LOADING			QUALITY OR C	ONCENTRATION		NO.	FREQUENC		IPLE PE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS	''	FE
IC25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	****	****	**	Monitoring Not Requir		****	23				
TRP3B · 1 0	PERMIT	******	*****	****	43.2	******	*****	PERCEN	т 🗀	SEMI	COM	IPOS
EFFLUENT GROSS	REQUIREMENT				MINIMU	M I		İ		ANNUAL		i
IC25 STATRE 7DAY CHR	SAMPLE	*****	*****		Monitorin		*****			-	<u> </u>	
PIMEPHALES	MEASUREMENT			**	Not Requir			23				
TRP6C 1 0	PERMIT	******	*****	***	43.2	*****	*****	PERCEN	Т	SEMI	COM	/IPOS
EFFLUENT GROSS	REQUIREMENT				MIMINU	M			•	ANNUAL		1
	SAMPLE MEASUREMENT											
	PERMIT			-						-		
· <u>·</u>	REQUIREMENT						-					
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											_
·	PERMIT											
	REQUIREMENT											
				_								
NAME/TITLE PRINCIPAL EXECUTIVE OFF			ocument and all attachme with a system designed to			MIA	F .	TELEF	PHONE		DATE	
John T. Carlin	properly gather a persons who man	ind evaluate the information and evaluate the system, or the	ation submitted. Based o se persons directly resp	on my inquiry of the consible for gather	he person or ring the	Sequeryan Site	Vice President	j 422 .	343 700	1 1	00	00
Sequoyah Site Vice President	and complete. I a	m aware that there are	 to the best of my know significant penalties for sonment for knowing vio 	submitting false		SIGNATURE OF PRI	NCIPAL EXECUTIVE		343-700		02	08
TYPED OR PRINTED						OFFICER OR AUT	HORIZED AGENT	AREA CODE	NUMBER	R YEAR	MO	DAY

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

Toxicity was not sampled in January 2012.

PERMITTEE NAME/ADDRESS (Include Fac Name TVA - SEQUOYAH NUCLEA	-	Different) 			ARGE ELIMINATION SY NITORING REPORT		MAJOR (SUBR 01)			rm Approved IB No. 2040		
Address P.O. BOX 2000 (INTEROFFICE OPS-5N-SQN) SODDY - DAISY TN 37384		· — · —		026450 T NUMBER	DISCHAR	103 G GE NUMBER	F - FINAL LOW VOL. WASTE	TREATME	NT PO	4D		
Facility TVA - SEQUOYAH NUCLEAR PL Location HAMILTON COUNTY	<u>LANT</u>	- <u>-</u> -	YEAR	MONI MO DAY	TORING PERIOD		EFFLUENT					
ATTN: Brad Love			From 12	01 01		01 31	*** NO DISCHAR NOTE: Read inst		*** e comple	eting this forr	n.	
PARAMETER		QUAN	TITY OR LOADING			QUALITY OR CO	ONCENTRATION		NO. EX	FREQUENCY OF		7
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		ANALYSIS		
PH	SAMPLE MEASUREMENT	****	****	**	7	*****	8	12	0	15 / 31	GRAB	1
00400 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	****	****	**	6 MINIMUM	*****	9 MUMIXAM	su		THREE/ WEEK	GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	****	**	****	6	6	19	0	2/31	GRAB	
00530 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	*****	****	**	****	30 MO AVG	100 DAILY MX	MG/L		TWICE/ MONTH	GRAB	
OIL AND GREASE	SAMPLE MEASUREMENT	****	*****	**	****	<6	<6	19	0	2/31	GRAB	
00556 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	****	****	**	****	15 MO AVG	20 DAILY MX	MG/L		TWICE/ MONTH	GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	1.077	1.187	03	*****	*****	***	**	0	31 / 31	RCORDE	₹
50050 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon	MGD	*****	******	*****	**		SEE PERMIT	RCORDE	\$
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT				·							
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT				·							
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											1
NAME/TITLE PRINCIPAL EXECUTIVE OFF	ICER Certify under pe	enalty of law that this doc	ument and all attachmen	ts were prepare	d under my	- 100 C	7	TELEPH	IONE	<u>'</u>	DATE	٦
John T. Carlin	property gather a persons who man	nd evaluate the informat nage the system, or those	th a system designed to a ion submitted. Based on a persons directly respon to the best of my knowle	my inquiry of the sible for gatheri	e person or	Seguoyal Site	Vice President	423 84	13-7001	12	02 08	1
Sequoyah Site Vice President	and complete. I a	m aware that there are s	ignificant penalties for su	bmitting false in	formation, SIGN	ATURE OF PRIN	ICIPAL EXECUTIVE		THREE/ WEEK O 2/31 TWICE/ MONTH O 31/31 SEE PERMIT ONE DATE			

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

TYPED OR PRINTED

including the possibility of fine and imprisonment for knowing violations.

YEAR

MO

DAY

NUMBER

AREA CODE

SIGNATURE OF PRINCIPAL EXECUTIVE

OFFICER OR AUTHORIZED AGENT

PERMITTE	EE NAME/ADDRESS (Include Facility Name/Location if Different)
Name	TVA - SEQUOYAH NUCLEAR PLANT
Address	P.O. BOX 2000
	(INTEROFFICE OPS-5N-SQN)
	SODDY - DAISY, TN 37384
Facility	TVA - SEQUOYAH NUCLEAR PLANT
<u>Location</u>	HAMILTON COUNTY

ATTN: Brad Love

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

To 12

(NPDES) MAJOR IR) (SUBR 01)

DAY

31

Form Approved.
OMB No. 2040-0004

TN0026450 PERMIT NUMBER

From 12

YEAR MO DAY

01

01

110 G DISCHARGE NUMBER

01

YEAR MO

RECYCLED COOLING WATER

EFFLUENT

F - FINAL

*** NO DISCHARGE

XX ***

NOTE: Read instructions before completing this form.

PARAMETER		QUA	NTITY OR LOADING		QUALITY OR CONCENTRATION					FREQUENCY OF	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	ANALYSIS	
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		04			
00010 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**	*****	*****	REPORT DAILY MX	DEG C		CONTIN	CALCTD
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		04			
00010 Z 0 INSTREAM MONITORING	PERMIT REQUIREMENT	*****	****	**	*****	*****	30.5 DAILY MX	DEG C		CONTIN	CALCTD
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C	SAMPLE MEASUREMENT	*****	****	**	****	****		04			
00016 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**	****	*****	5 DAILY MX	DEG C		CONTIN	CALCTD
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	*****		03	****	****	******	**			
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	Req. Mon.	MGD	****	*****	****	**		CONTIN	RCORDR
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	****	**	*****			19			
50060 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	****	**	*****	0.1 MO AVG	0.1 DAILY MX	MG/L		Five per Week	CALCTD
TEMPERATURE - C, RATE OF CHANGE	SAMPLE MEASUREMENT	****		04	*****	*****	****	**			
82234 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	2 DAILY MX	DEG C	*****	*****	安安安安安安安	**		CONTIN	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

	Certify under penalty of law that this document and all attachments were prepared under my		TE	LEPHONE	1	DATE	
John T. Carlin	direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the	Seguovan Site Vice President					
Sequoyan Site vice President	information, the information submitted is , to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information,	SIGNATURE OF PRINCIPAL EXECUTIVE	423	843-7001	12	02	08
TYPED OR PRINTED	including the possibility of fine and imprisonment for knowing violations.	OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	МО	DA

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

No Discharge this Period

PERMITTEE NAME/ADDRESS (Include Fa		Different) —			ARGE ELIMINATION INTORING REI	ON SYSTEM (NPDES) PORT (DMR)	MAJOR (SUBR 01)			rm Approved MB No. 2040-	
Address P.O. BOX 2000 (INTEROFFICE OPS-5N-SQN)			TN	0026450		110 T	F - FINAL				
SODDY - DAISY, TN 37384		_		IT NUMBER	DISC	HARGE NUMBER	RECYCLED COO	LING WATER			
Facility TVA - SEQUOYAH NUCLEAR P	LANT	_	1 21319								
Location HAMILTON COUNTY		_	NEAD.		TORING PER		EFFLUENT				
			YEAR 10			AR MO DAY	*** NO DISCHA	RGE XX	***		
ATTN: Brad Love			From 12	01 01	To 1	2 01 31		structions before		oting this for	
PARAMETER		QUAN	TITY OR LOADING			QUALITY OR C	ONCENTRATION	ISUBCIONS DEION	NO.	FREQUENCY	SAMPLE
,		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	OF ANALYSIS	TYPE
IC25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	****	*****	**		*****	****	23			
TRP3B 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	43.2 MINIMU	******	*****	PERCENT		SEMI ANNUAL	COMPOS
IC25 STATRE 7DAY CHR PIMEPHALES	SAMPLE MEASUREMENT	****	*****	**	MINAHAIO	*****	****	23		7.1110712	
TRP6C 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	****	****	43.2 MINIMU	*******	******	PERCENT		SEMI ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT		·								
			···								
NAME/TITLE PRINCIPAL EXECUTIVE OF		nalty of law that this doc vision in accordance wit				(-(1/11		TELEPH	ONE		DATE
John T. Carlin	properly gather ar	nd evaluate the informat age the system, or those	ion submitted. Based or	my inquiry of the	e person or	Hall	Vice President				
Sequoyah Site Vice President	information, the in and complete. I a	nformation submitted is , m aware that there are s sibility of fine and impris	to the best of my knowl ignificant penalties for s	edge and belief, submitting false in	true, accurate,	SIGNATURE OF PRIN	ICIPAL EXECUTIVE		3-7001		02 08
TYPED OR PRINTED		monty or mis and miphs	State of Allowing VIO	undiid.		OFFICER OR AUT	HORIZED AGENT	CODE N	JMBER	YEAR	MO DAY
COMMENTS AND EXPLANATION OF ANY	VIOLATIONS (Refere	nce all attachments h	iere)								
No Discharge this Period											
EPA Form 3320-1 (REV 3/99) Pres	vious editions may be u	sed							- 1	Page 1 of	1

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different) Name TVA - SEQUOYAH NUCLEAR PLANT	NATIONAL POLLUTANT DISCHARGE E DISCHARGE MONITOR	,	MAJOR (SUBR 01)
Address P.O. BOX 2000 (INTEROFFICE OPS-5N-SQN)	TN0026450	118 G	F - FINAL
SODDY - DAISY, TN 37384 Facility TVA - SEQUOYAH NUCLEAR PLANT	PERMIT NUMBER	DISCHARGE NUMBER	WASTEWATER & STORM WATER
Location HAMILTON COUNTY		NG PERIOD	EFFLUENT
ATTN: Brad Love	From 12 01 01	To 12 01 31	*** NO DISCHARGE XX *** NOTE: Read instructions before com

PARAMETER		QUAN	TITY OR LOADING			QUALITY OR CON	CENTRATION			FREQUENCY	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	OF ANALYSIS	TYPE
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	****	**		****	******	19			
00300 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	****	*****	***	2 MINIMUM	******	******	MG/L		TWICE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	**	****	****		19			
00530 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	****	*****	****	*****	*****	100 DAILY MX	MG/L		TWICE/ WEEK	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	*****	*****	**	*****	*****		25			
00545 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	*****	*****	***	****	*****	1 DAILY MX	ML/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			03	****	****	****	**			·
50050 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT	Req. Mon. MO AVG	Req. Mon. DAILY MX	MGD	*****	*****	****	*		ONCE/ BATCH	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT				-	-					
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT		-								
	PERMIT REQUIREMENT							1			

	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel	(1//2/)		TELEPHONE		DATE	
John T. Carlin	properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the	Alleller		· 			
Company Site Vice Bresident	information, the information submitted is , to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information,	Sequoyah Site Vice President SIGNATURE OF PRINCIPAL EXECUTIVE	423	843-7001	12	02	80
TYPED OR PRINTED	including the possibility of fine and imprisonment for knowing violations.	OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	МО	DAY

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

During this reporting period, there has been no flow from the Dredge Pond other than that resulting from rainfall.

Form Approved.

OMB No. 2040-0004