Chris M. Hobson
Vice President
Environmental Affairs

Bin 10221
241 Ralph McGill Boulevard NE
Atlanta, Georgia 30308-3374

Tel 404.506.7778
Fax 404.506.1499

GEORGIA POWER
A SOUTHERN COMPANY

July 27, 2001

RECEIVED
JUL 30 2001
GEORGIA EPD WATER PROTECTION BRANCH
PERMITTING, COMPLIANCE AND ENFORCEMENT PROGRAM

Mr. Harold F. Reheis
Director
Environmental Protection Division
Suite 1152 East
205 Butler Street, S.E.
Atlanta, Georgia 30334

RE: Plant Scherer
NPDES Permit No. GA0035564
Application for Permit Renewal

Dear Mr. Reheis:

Attached is the NPDES permit renewal application package for the Georgia Power Company Plant Scherer facility located in Juliette, Georgia. In addition to the required EPA Forms 1 and 2C, the application package includes the following supporting documentation:

1. Line drawing showing the water flow through the facility

2. A site map showing the locations of process wastewater discharges and comingled stormwater discharges.

3. A USGS 7.5 minute topographic map showing the facility location.

4. A segment of the USGS 7.5 minute topographic map showing the locations of the two primary outfalls, outfall numbers 01 and 04.

5. A supplemental map showing the routing of the plant final discharge pipe for outfall number 01 and the location of the River Intake Pump Seal Water Discharge, outfall number 11.

6. An evaluation demonstrating that the Plant Scherer ash treatment systems have adequate storage volume to meet EPA's co-treatment guidelines through the next permit term.

7. Copies of correspondence related to changes approved since issuance of the last permit, which include the 1998 revision to the biocide BMP and the 2000 revision to the Intake Backwash.

8. Lake Juliette water quality information.

9. A revised Best Mangement Plan, dated July 26, 2001, for Macrofouling and Biofouling Control, which supercedes the revision dated August 26, 1998, which was approved by EPD December 30, 1998. This update includes minor revisions which more accurately describe the process.

With this application, Georgia Power requests EPD consideration of a change in the monitoring of outfall number 04, the Service Water Final Discharge. This discharge was permitted in Part I.A.6 of the current permit apart from EPA's Steam Electric Effluent Guidelines, with a monitoring frequency of once per week. Lake Juliette, the receiving waters for this discharge, has experienced exemplary water quality throughout the history of plant operation, with typical characteristics discussed in the attached summary from GPC's annual lake water quality studies (attachment 8). We believe a monitoring frequency of once per quarter is warranted, with a discharge monitoring point not more than 50 feet from the discharge pipe outlet, one meter below the lake surface.

If you need additional information or have questions regarding this matter, please contact Bill Evans at 404-506-7031.

Sincerely,

C. M. Hobson

xc: Mike Creason, EPD Industrial Wastewater Unit, with attachments

Region 4 NPDES Permit Overview Review Check sheet for

Facility Name Plant Scherer

Date of Review 2/15/02

NPDES No. GA0035564

Name & Phone of State Permit Contact Tom Hopkins 404 362 4916

Check:
Major ☐ Minor ☐ Industrial ☑ Municipal ☐
Stormwater only ☐

7757

Short Review

Element	Yes	No	Comment
Correct Application?	✓		Type?
Complete application ? [significant information to determine reasonable potential analysis]	✓		
Fact Sheet/ Rationale?	✓		
New or Expanded discharge?		✓	
Receiving waterbody on the 303(d) list ?			Note pollutants:
TMDL approved?			Note pollutants:
If a TMDL is required, are the limits consistent with the TMDL?			
If new or expanded discharge, was antideg. analysis done?			
Is there a WQ variance (including WER) in the permit? If yes, send to Gail's Branch for review.			

Complete Review

Element	Yes	No	Comment/Data
7Q10			
PERMIT APPLICATION:			
Did state follow its Reasonable Potential procedures?	✓		
Do any EPA criteria apply?			List pollutants:
Are proper minimum levels of detection indicated?			
For industrials: Are pollutants noted as "Believed Absent" reasonable?	✓		
For Municipals: Are the screened pollutants values reasonable?			
Have 3 pollutant analyses been performed within the last 4-5 years?			
Whole Effluent Toxicity Data included?			

PERMIT:			
Complete Boilerplate?	✓		122.41 and 122.42
Are all outfalls indicated in the application covered in the permit?			Outfall 11 OK - Outfall 11 is just river water used to seal pumps
Have any loadings been increased since the previous permit? If yes, explain.		✓	
Have any limits been deleted, or made less stringent, since the previous permit? If yes, has backsliding been addressed?		✓	
Are metals included in terms of "total recoverable"?			OK
Appropriate compliance schedule?	✓		122.47
All monitoring requirements at least 1/year?	✓		122.44(I)(1(ii)

Are the monitoring frequencies reasonable and sampling locations included?	✓		
Element	**Yes**	**No**	**Comment/Data**
Toxicity language? If yes, note the date forwarded to Lisa Spurlin.			
Are there any wastestreams that need internal limits?			
Industrial Permits:			
Applicable Effluent Guideline?	✓		
Are BMPs included?	✓		
For continuous discharges, are daily max. and monthly ave. limits included?	✓		
POTW Permit:			
Secondary treatment requirements included?			133
Nutrients limited?			
Ambient monitoring required? If so, which pollutants? Also indicate upstream or downstream.			
For continuous dischargers, are weekly ave and monthly ave limits included?			122.45(d)(2)
Do Pretreatment procedures apply?			122.44(j) & 403
FACT SHEET:			
Location of facility included?	✓		
Does discharge impact a neighboring state?		✓	
Type of product included (if industrial permit)?	✓		
Long-term production included?			
Basis for permit limits?	✓		
Calculations included? Correct flows? Production values?	✓		
Best Professional Judgment justification included?	✓		
Any applicable seasonal limits justified?	N/A		
Final Decision Procedures include?			

Final Permit:

Element	**Yes**	**No**	**Comment**
Was permit publicly noticed?	✓		
Permit term less than 5 years?	✓		
Any significant changes since last draft version? If yes, does the amended fact sheet explain these changes.		✓	

ACTION

Response (Include hard copy in file)	*Sent Email*	*Sent Letter*
No Comment		
Comment letter		
Interim Objection		
General Objection		
Specific Objection		

Inital and date 2/21/02

COMMENTS

Lets fulfill the commitment
Outfall 11? Why is there no specific date?

permit is already issued

FORM 1 GENERAL

EPA

U. S. ENVIRONMENTAL PROTECTION AGENCY
GENERAL INFORMATION
Consolidated Permits Program
(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

1	2											13	14	15
F	G	A	D	0	0	0	6	1	2	7	9	6	T/A	C D

LABEL ITEMS

- I. EPA I.D. NUMBER
- III. FACILITY NAME
- V. FACILITY MAILING ADDRESS
- VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data is absent (the area to the left of the label space list the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of **bold-faced terms**.

SPECIFIC QUESTIONS	MARK "X" YES	NO	FORM ATTACHED	SPECIFIC QUESTIONS	MARK "X" YES	NO	FORM ATTACHED
A. Is this facility a **publicly owned treatment works** which results in a **discharge** to **waters of the U.S.**? (FORM 2A)	16	X 17	18	B. Does or will this facility *(either existing or proposed)* include a **concentrated animal feeding operation** or **aquatic animal production facility** which results in a **discharge** to **waters of the U.S.**? (FORM 2B)	19	X 20	21
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X 22	23	X 24	D. Is this a proposed facility (other than those described in A or B above) which will result in a **discharge** to waters of the U.S.? (FORM 2D)	25	X 26	27
E. Does or will this facility treat, store, or dispose of **hazardous wastes**? (FORM 3)	28	X 29	30	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)	31	X 32	33
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)	34	X 35	36	H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)	37	X 38	39
I. Is this facility a proposed **stationary source** which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area**? (FORM 5)	40	X 41	42	J. Is this facility a proposed **stationary source** which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an **attainment area**? (FORM 5)	43	X 44	45

III. NAME OF FACILITY

C 1 SKIP PLANT SCHERER (15–69)

IV. FACILITY CONTACT

A. NAME & TITLE (*last, first, & title*)	B. PHONE (*area code & no.*)		
C 2 HOBSON, C. M., VICE PRES., ENVIR. AFFAIRS (15–45)	404 (46–48)	506 (49–51)	7778 (52–55)

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

C 3 241 RALPH MCGILL BLVD., N.E. (15–45)

B. CITY OR TOWN	C. STATE	D. ZIP CODE
C 4 ATLANTA (15–40)	GA (41–42)	30308 (47–51)

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

C 5 10986 HIGHWAY 87 (15–45)

B. COUNTY NAME

MONROE (46–70)

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE
C 6 JULIETTE (15–40)	GA (41–42)	31046 (47–51)	N/A (52–54)

CONTINUE ON REVERSE

VII. SIC CODES (4-digit, in order of priority)

A. FIRST			B. SECOND		
C 7	4911	(specify) Generation of electricity	C 7		(specify) N/A
15	16 19		15	16 19	

C. THIRD			D. FOURTH		
C 7		(specify) N/A	C 7		(specify) N/A
15	16 19		15	16 19	

VIII. OPERATOR INFORMATION

A. NAME	B. Is the name listed in Item VIII-A also the owner?
C 8 GEORGIA POWER COMPANY (15–55)	☒ YES * ☐ NO (66)

C. STATUS OF OPERATOR *(Enter the appropriate letter into the answer box; if "Other", specify.)*

F = FEDERAL; M = PUBLIC *(other than federal or state)*; S = STATE; O = OTHER *(specify)*; P = PRIVATE

P (56) *(specify)*

D. PHONE *(area code & no.)*: C A (15) 404 (16–18) 506 (19–21) 6526 (22–25)

E. STREET OR P.O. BOX: 241 RALPH MCGILL BLVD., N.E. (26–55)

F. CITY OR TOWN	G. STATE	H. ZIP CODE	IX. INDIAN LAND
C B ATLANTA (15–40)	GA (41–42)	30308 (47–51)	Is the facility located on Indian lands? ☐ YES ☒ NO (52)

X. EXISTING ENVIRONMENTAL PERMITS

	C	T	I		
A. NPDES *(Discharges to Surface Water)*	9	N		GA0053364	(15–30)
D. PSD *(Air Emissions from Proposed Sources)*	9	P		N/A	(15–30)
B. UIC *(Underground Injection of Fluids)*	9	U		N/A	(15–30)
E. OTHER *(specify)*	9			N/A	(specify) (15–30)
C. RCRA *(Hazardous Wastes)*	9	R		N/A	(15–30)
E. OTHER *(specify)*	9			N/A	(specify) (15–30)

XI. MAP

Attach to this application a topgraphic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS *(provide a brief description)*

Generation of electricity through combustion of fossil fuels.

* Plant Scherer is jointly owned by: Georgia Power Company, Oglethorpe Power Corporation, Municipal Electric Authority of Georgia, Florida Power and Light, Jacksonville Electric Authority, Gulf Power Company, and City of Dalton.

XIII. CERTIFICATION *(see instructions)*

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of thos persons immediately responsible for obtaining the information contained in the application, I believe that the 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.

A. NAME & OFFICIAL TITLE *(type or print)*	B. SIGNATURE	C. DATE SIGNED
C. M. Hobson, Vice Pres., Envir. Affairs	CMHobson	7/27/01

COMMENTS FOR OFFICIAL USE ONLY

C C (15–55)

Please print or type in the unshaded areas only.

EPA I.D. (*copy from Item 1 of Form 1*)
GAD000612796

Form Approved.
OMB No. 2040-0086
Approval expires 7-31-88

FORM 2C NPDES

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
APPLICATION FOR PERMIT TO DISCHARGE WASTEWATER
EXISTING MANUFACTURING, COMMERCIAL, MINING AND SILVICULTURAL OPERATIONS
Consolidated Permits Program

I. OUTFALL LOCATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. OUTFALL NO. (*list*)	B. LATITUDE			C. LONGITUDE			D. RECEIVING WATER (*name*)
	1.DEG.	2. MIN.	3. SEC.	1.DEG.	2. MIN.	3. SEC.	
01	33	04	51	83	46	36	Ocmulgee River via pipeline
02	33	04	18	83	47	45	Ocmulgee River via Berry Creek
04,05,06, 07,08,09, 10,12,13, 14	33	03	14	83	48	22	Lake Juliette - Service Water Storage
11	33	03	51	83	44	21	Ocmulgee River

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) The average flow contributed by each operation; and (3) The treatment received by the wastewater. Continue on additional sheets if necessary.

1. OUTFALL NO (*list*)	2. OPERATION (S) CONTRIBUTING FLOW		3. TREATMENT		
	a. OPERATION (*list*)	b. AVERAGE FLOW (*include units*)	a. DESCRIPTION	b. LIST CODES FROM TABLE 2C-1	
01	Final Plant Discharge Stormwater	14,052 gpm	25,000 gpm (maximum)	2F **	4A
01A	Cooling Tower Blowdown Units 1-4	7,470 gpm	33,000 gpm (maximum)	2F **	4A
01B	Ash Transport Bleedoff	6,582 gpm	19,753 gpm (maximum)		4A
01C	Unit 3 Cooling Tower Overflow and Basin Drain	*	15,820 gpm (maximum)	2F **	4A
01D	Unit 4 Cooling Tower Overflow and Basin Drain	*	15,820 gpm (maximum)	2F **	4A
01E	NPDES Basin Minimum Flow	*	2,238 gpm (maximum)	2F **	4A
02	Detention Pond (I-pond) Stormwater	222 gpm	22,266 gpm (10 yr - 24 hr rainfall event)		4A
02A	Detention Pond Bottom Drain	*			4A
02B	Fire Training Runoff	*			4A
02C	NPDES Basin Emergency Overflow Stormwater	*		2F **	4A
	* Intermittent or emergency Discharge				
	** During periods of Chlorination				

OFFICIAL USE ONLY (effluent guidelines sub-categories)

CONTINUE ON PAGE 1b

Please print or type in the unshaded areas only.

EPA I.D. (*copy from Item 1 of Form 1*)
GAD000612796

Form Approved.
OMB No. 2040-0086
Approval expires 7-31-88

FORM 2C NPDES

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
APPLICATION FOR PERMIT TO DISCHARGE WASTEWATER
EXISTING MANUFACTURING, COMMERCIAL, MINING AND SILVICULTURAL OPERATIONS
Consolidated Permits Program

I. OUTFALL LOCATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. OUTFALL NO. (*list*)	B. LATITUDE			C. LONGITUDE			D. RECEIVING WATER (*name*)
	1.DEG.	2. MIN.	3. SEC.	1.DEG.	2. MIN.	3. SEC.	

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) The average flow contributed by each operation; and (3) The treatment received by the wastewater. Continue on additional sheets if necessary.

1. OUTFALL NO (*list*)	2. OPERATION (S) CONTRIBUTING FLOW		3. TREATMENT		
	a. OPERATION (*list*)	b. AVERAGE FLOW (*include units*)	a. DESCRIPTION	b. LIST CODES FROM TABLE 2C-1	
03	Ash Transport Water Stormwater	32,381 gpm	50,000 gpm (maximum)	4C	4A
03A	No. 2 Sewage Treatment Plant	12 gpm	120 gpm (maximum)	3A, 2F	4C, 4A
03B	No. 4 Sewage Treatment Plant	1 gpm	17 gpm (maximum)	3A, 2F	4C, 4A
03C	No. 1 Sewage Treatment Plant	0 gpm	30 gpm (maximum)	3A,, 2F	4C, 4A
03D	Coal Pile Runoff Basin	693 gpm	5,300 gpm (maximum)	4C	4A
03E	Wastewater Basins - Units 1-4	12,400 gpm	15,000 gpm (maximum)	4C	4A
03F	Low Volume Wastes - Units 1-4	5,388 gpm	8,600 gpm (maximum)	4C	4A
03G	Tractor Garage	1 gpm	500 gpm (maximum)	4C	4A
03H	Coal Pile Runoff	260 gpm	12,800 gpm (maximum)	4C	4A
03I	Chemical Cleaning Wastes	*		2K, 2C	4C, 4A
04	Service Water Final Discharge	1,527 gpm	79,200 gpm (maximum)	2F **	4A
04A	Service Water Return	*	79,200 gpm (maximum)	2F **	4A
04B	Service Water Minimum Flow	1,527 gpm	66,000 gpm (maximum)	2F **	4A
05	Unit 1 Cooling Tower Overflow and Basin Drain	*	15,820 gpm (maximum)	2F **	4A
06	Unit 2 Cooling Tower Overflow and Basin Drain	*	15,820 gpm (maximum)	2F **	4A

OFFICIAL USE ONLY (effluent guidelines sub-categories)

CONTINUE ON PAGE 1c

Please print or type in the unshaded areas only.

EPA I.D. (*copy from Item 1 of Form 1*)
GAD000612796

Form Approved.
OMB No. 2040-0086
Approval expires 7-31-88

FORM 2C NPDES

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
APPLICATION FOR PERMIT TO DISCHARGE WASTEWATER
EXISTING MANUFACTURING, COMMERCIAL, MINING AND SILVICULTURAL OPERATIONS
Consolidated Permits Program

I. OUTFALL LOCATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. OUTFALL NO. (*list*)	B. LATITUDE			C. LONGITUDE			D. RECEIVING WATER (*name*)
	1.DEG.	2. MIN.	3. SEC.	1.DEG.	2. MIN.	3. SEC.	

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) The average flow contributed by each operation; and (3) The treatment received by the wastewater. Continue on additional sheets if necessary.

1. OUTFALL NO (*list*)	2. OPERATION (S) CONTRIBUTING FLOW		3. TREATMENT		
	a. OPERATION (*list*)	b. AVERAGE FLOW (*include units*)	a. DESCRIPTION	b. LIST CODES FROM TABLE 2C-1	
07	Settling Pond Emergency Overflow Stormwater	*	57,000 gpm (maximum)	1U, 2K	4A
08	Employee Car Wash Stormwater	7 gpm	325 gpm (maximum)		4A
09	Service Water Pump Seal Water	65 gpm	78 gpm (maximum)		4A
10	Service Water Screen Backwash	510 gpm	765 gpm (maximum)		4A
11	River Intake Pump Seal Water	100 gpm	100 gpm (maximum)		4A
12	Condensate, Filtered Water, and Potable Water Tank Overflows Stormwater	*	2,536 gpm (maximum)	2F**	4A
13	Units 1-2 Wastewater Basin Emergency Overflow	*	4,300 gpm (maximum)		4A
14	Units 3-4 Wastewater Basin Emergency Overflow	*	4,300 gpm (maximum)		4A

OFFICIAL USE ONLY (effluent guidelines sub-categories)

CONTINUE ON PAGE 2

CONTINUED FROM PAGE 1c

C. Except for storm runoff, leaks, or spills, are any of the discharges described in Items 11-A or B intermittent or seasonal?

☒ YES (complete the following table) ☐ NO (go to Section III)

1. OUTFALL NUMBER (list)	2. OPERATION(s) CONTRIBUTING FLOW (list)	3. FREQUENCY		4. FLOW				
		a. DAYS PER WEEK (specify average)	b. MONTHS PER YEAR (specify average)	a. FLOW RATE (in mgd)		b. TOTAL VOLUME (specify with units)		c. DURATION (in days)
				1. LONG TERM AVERAGE	2. MAXIMUM DAILY	1. LONG TERM AVERAGE	2. MAXIMUM DAILY	
	See attachment 1 for intermittent discharges							
	Analyses on overflows and emergency discharges are submitted with the quarterly Operation Monitoring Reports							

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

☒ YES (complete Item III-B) ☐ NO (go to Section IV)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measure of operation)?

☐ YES (complete Item III-C) ☒ NO (go to Section IV)

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION			2. AFFECTED OUTFALLS (*list outfall numbers*)
a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. (*specify*)	

IV. IMPROVEMENTS

A. Are you now required by any Federal, state or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

☐ YES (complete the following table) ☒ NO (go to Item IV-B)

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS		3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE	
	a. NO.	B. SOURCE OF DISCHARGE		a. REQUIRED	b. PROJECTED

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction.

☐ MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAM IS ATTACHED

 CONTINUE ON PAGE 3

EPA I.D. NUMBER *(copy from Item 1 of Form 1)*

GAD000612796

Form Approved.
OMB No. 2040-0086
Approval expires 7-31-88

V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding - Complete one set of tables for each outfall - Annotate the outfall number in the space provided.
NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered V-1 through V-9.

D. Use the space below to list any of the pollutants listed in Table 2c-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
NONE			

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

Is any pollutant listed in Item V-C a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☐ YES (list all such pollutants below) ☒ NO (go to Item VI-B)

CONTINUE ON PAGE 4

CONTINUED FROM PAGE 3

VII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ YES (identify the test(s) and describe their purposes below) ☒ NO (go to Section VIII)

VIII CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V performed by a contact laboratory or consulting firm?

☒ YES (list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below) ☐ NO (go to Section IX)

A. NAME	B. ADDRESS	C. TELEPHONE *(area code & no.)*	D. POLLUTANTS ANALYZED *(list)*
Analytical Services Inc.	110 Technology Parkway Norcross, GA 30092	770-734-4200	All except pH, temperature, and Total Residual Chlorine

IX. CERTIFICATION

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 personal 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.

A. NAME & OFFICIAL TITLE (type or print)	B. PHONE NO. (Area code & no.)
C. M. Hobson , Vice President, Environmental Affairs	404-506-7778
C. SIGNATURE CMHobson	D. DATE SIGNED 7/27/01

INTERMITTENT FLOW DESCRIPTIONS
Attachment 1 for Form 2C page 2

Outfalls 01C, 01D, 05, and 06 – Cooling Tower Overflow / Basin Drain

Overflows from cooling towers may occur infrequently during equipment malfunction or emergency conditions. The estimated overflow discharge (15580 gpm) is the design make-up water flow. Draining of the cooling tower basins may occur during unit outages. The frequency is dependent on unit operation and is estimated at twice per year.

Outfall 01E - NPDES Basin Minimum Flow

NPDES system minimum flows typically occur during periods of unit outages or cooling tower biocide treatment due to reduced cooling tower blow-down. The effluent is service water with a maximum discharge of 2,238 gpm.

Outfall 02A - I-Pond Bottom Drain

Discharges from the Detention (I-Pond) through the bottom drain could occur if necessary to perform dike, dam, or pond maintenance.

Outfall 02B - Fire Training Runoff

Discharges of filtered water used for fire training purposes may occur during the year due to classes conducted on site.

Outfall 02C - NPDES Basin Emergency Overflow

The normal discharge for the NPDES basin is through outfall 01. In the event of equipment malfunctions or emergency conditions, the basin may discharge though this outfall. Past events have been infrequent and of short duration.

Outfall 03I - Chemical Cleaning Wastes

Boiler and Turbine cleaning wastes are usually treated with sodium hydroxide or lime to a pH sufficient to precipitate the iron and copper suspended in solution. The water is then pumped to the ash pond via the wastewater basin. Boiler cleaning is infrequent and turbine cleaning is anticipated to be performed once per year. Rainwater is also pumped out of the chemical cleaning basin into the Units 1 & 2 wastewater basin.

Outfall 07 - Settling Pond Emergency Overflow

The normal settling pond discharge is through the ash transport bleed-off system. The capacity of the bleed-off was approximately doubled in 1997 by addition of an 8" bypass around the existing regulator valve. The addition was performed in order to reduce the occurrence of settling pond overflows. Discharges from the emergency overflow should only occur during periods of equipment malfunction, heavy rainfall, or emergency conditions. Overflow volume is variable with an estimated maximum of 57,000 gpm.

Outfall 12 - Condensate/Filtered Water/Potable Water Tank Overflows to Lake Juliette (Service Water Pond)

Storage tanks could overflow during abnormal operations. These infrequent overflows would consist of condensate, demineralized water, filtered water, or potable water. An overflow is typically less than 100 gpm and short in duration.

Outfall 13 and 14 - Waste Water Basin Emergency Overflow

Discharges could occur from equipment malfunctions or emergency conditions. An emergency portable pump is in standby mode to reduce the likelihood of an overflow.

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate hseets *(use the same format)* instead of completing these pages. SEE INSTRUCTIONS.

EPA I.D. NUMBER *(copy from Item 1 of Form 1)*
GAD000612796

Form Approved.
OMB No. 2040-0086
Appproval expires 7-31-88

V. INTAKE AND EFFLUENT CHARACTERISTICS (continued from page 3 of Form 2-C)

OUTFALL NO 01

PART A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT							3. UNITS *(specify if blank)*		4. INTAKE *(optional)*		
	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE *(if available)*		c. LONG TERM AVRG. VALUE *(if available)*		d. NO. OF ANALYSES	a. CONCEN-TRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
	(1) CONCEN-TRATION	(2) MASS	(1) CONCEN-TRATION	(2) MASS	(1) CONCEN-TRATION	(2) MASS				(1) CONCEN-TRATION	(2) MASS	
a. Biochemical Oxygen Demand (BOD)	<8	<1063					1	mg/l	lb/day	<8		1
b. Chemical Oxygen Demand (COD)	17	2259					1	mg/l	lb/day	12		1
c. Total Organic Carbon (TOC)	5	665					1	mg/l	lb/day	2		1
d. Total Suspended Solids (TSS)	<5	<665					1	mg/l	lb/day	12		1
e. Ammonia *(as N)*	<0.1	<13.3					1	mg/l	lb/day	<0.1		1
f. Flow	VALUE 11,075		VALUE		VALUE 25,000 max		8	gpm		VALUE		
g. Temperature *(winter)*	VALUE		VALUE		VALUE			°C		VALUE		
h. Temperature *(summer)*	VALUE 25.2 17.36		VALUE		VALUE		8	°C		VALUE 24.1		8
i. pH	MINIMUM 8.50	MAXIMUM 8.58	MINIMUM	MAXIMUM			4	STANDARD UNITS				

PART B - Mark "X: in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data for an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. (if available)	2. MARK 'X'		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	a. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE *(if available)*		c. LONG TERM AVRG. VALUE *(if available)*		d. NO. OF ANAL-YSES	a. CONCEN-TRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANAL-YSES
			(1) CONCEN-TRATION	(2) MASS	(1) CONCEN-TRATION	(2) MASS	(1) CONCEN-TRATION	(2) MASS				(1) CONCEN-TRATION	(2) MASS	
a. Bromide (24959-67-9)	x		0.18	23.9					1	mg/l	lb/day	<0.1		1
b. Chlorine, Total Residual	x		0						4	mg/l	lb/day	0		4
c. Color	x		10						1	pcu		10		1
d. Fecal Coliform	x		2						1	col/100ml		84		1
e. Fluoride (16984-48-8)	x		1.0	132.9					1	mg/l	lb/day	0.2		1
f. Nitrate-Nitrite *(as N)*	x		0.7	93.0					1	mg/l	lb/day	0.5		1

CONTINUE ON REVERSE

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (if available)	2. MARK 'X'		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	a. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE *(if available)*		c. LONG TERM AVRG. VALUE *(if available)*		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
g. Nitrogen, Total Organic *(as N)*	x		0.6	79.7					1	mg/l	lb/day	0.6		1
h. Oil and Grease		x	<6	<797					1	mg/l	lb/day	<6		1
I. Phosphorus *(as P)*, Total (7723-14-0)	x		0.05	6.6					1	mg/l	lb/day	0.04		1
J. Radioactivity														
(1) Alpha, Total														
(2) Beta, Total														
(3) Radium, Total														
(4) Radium 226, Total														
k. Sulfate *(as SO_4)* (14808-79-8)	x		155	20,600					1	mg/l	lb/day	10		1
l. Sulfide *(as SO_3)* (14265-45-3)		x	<0.2	<26.6					1	mg/l	lb/day	<0.2		1
m. Sulfite *(as SO_3)* (14265-45-3)		x	<2	<266					1	mg/l	lb/day	<2		1
n. Surfactants		x	<0.04	<5.3					1	mg/l	lb/day	<0.04		1
o. Aluminum, Total (7440-39-3)	x		0.4	53					1	mg/l	lb/day	0.4		1
p. Barium, Total (7440-39-3)	x		0.15	19.9					1	mg/l	lb/day	0.02		1
q. Boron, Total (7440-42-8)	x		0.98	130.2					1	mg/l	lb/day	0.04		1
r. Cobalt, Total (7440-48-4)		x	<0.04	<5.3					1	mg/l	lb/day	<0.04		1
s. Iron, Total (7439-89-6)		x	<0.04	<5.3					1	mg/l	lb/day	0.68		1
t. Magnesium, Total (7439-95-4)	x		5.5	731					1	mg/l	lb/day	1.6		1
u. Molybdenum, Total (7439-98-7)	x		0.06	8.0					1	mg/l	lb/day	<0.04		1
v. Manganese, Total (7439-96-5)		x	<0.04	<5.3					1	mg/l	lb/day	0.08		1
w. Tin, Total (7440-31-5		x	<0.04	<5.3					1	mg/l	lb/day	<0.04		1
x. Titanium, Total (7440-32-6)		x	<0.1	<13.3					1	mg/l	lb/day	<0.1		1

CONTINUE ON PAGE V-3

CONTINUED FROM PAGE 3 OF FORM 2-C

EPA I.D. NUMBER *(copy from Item 1 of Form 1)*	OUTFALL NUMBER
GAD000612796	01

Form Approved.
OMB No. 2040-0086
Appproval expires 7-31-88

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a (secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions), mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for the pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2.4 of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2.4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table (all 7 pages) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	a. Testing Required	b. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE *(if available)*		c. LONG TERM AVRG. VALUE *(if available)*		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, CYANIDE, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-0)	x		x	<0.05	<6.6					1	mg/l	lb/day	<0.05		1
2M. Aresenic, Total (7440-38-2)	x		x	<0.03	<4.0					1	mg/l	lb/day	<0.03		1
3M. Beryllium, Total, 7440-41-7	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
4M. Cadmium, Total (7440-43-9)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
5M. Chromium Total (7440-47-3)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
6M. Copper, Total (7440-50-8)	x	x		0.02	2.7					1	mg/l	lb/day	<0.02		1
7M. Lead, Total (7439-92-1)	x		x	<0.025	<3.3					1	mg/l	lb/day	<0.025		1
8M. Mercury, Total (7439-97-6)	x		x	<0.0005	<0.07					1	mg/l	lb/day	<0.0005		1
9M. Nickel, Total (7440-02-0)	x		x	<0.02	<2.7					1	mg/l	lb/day	<0.02		1
10M. Selenium, Total (7782-49-2)	x		x	<0.04	<5.3					1	mg/l	lb/day	<0.04		1
11M. Silver, Total (7440-22-4)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
12M. Thallium, Total (7440-28-0)	x		x	<0.05	<6.6					1	mg/l	lb/day	<0.05		1
13M. Zinc, Total (7440-66-6)	x		x	<0.02	<2.7					1	mg/l	lb/day	<0.02		1
14M. Cyanide, Total (57-12-5)	x		x	<0.02	<2.7					1	mg/l	lb/day	<0.02		1
15M. Phenols, Total	x		x	<0.05	<6.6					1	mg/l	lb/day	<0.05		1
DIOXIN															
2,3,7,8-Tetrachlorodibenzo-P-Dioxin (1764-01-6)			x	DESCRIBE RESULTS											

CONTINUE ON REVERSE

CONTINUED FROM FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	b. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, CYANIDE, AND TOTAL PHENOLS															
1V. Acrolein (107-02-8)	x		x	<0.05	<6.6					1	mg/l	lb/day	<0.05		1
2V. Acrylonitrile (107-13-1)	x		x	<0.05	<6.6					1	mg/l	lb/day	<0.05		1
3V. Benzene (71-43-2)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
4V. Bis *(Chloromethyl)* Ether (542-88-1)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
5V. Bromoform (75-25-2)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
6V. Carbon Tetrachloride (56-23-5)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
7V. Chlorobenzene (108-90-7)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
8V. Chlorodibromomethane (124-48-1)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
9V. Chloroethane (75-00-3)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
10V. 2-Chloroethylvinyl Ether (110-75-8)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
11V. Chloroform (67-66-3)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
12V. Dichlorobromomethane (75-71-8)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
13V. Dichlorodifluoromethane (75-71-8)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
14V. 1,1-Dichloroethane (75-34-3)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
15V. 1,2-Dichloroethane (107-06-2)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
16V. 1,1-Dichloroethylene (75-35-4)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
17V. 1,2-Dichloropropane (78-87-5)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
18V. 1,3-Dichloropropylene (542-75-6)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
19V. Ethylbenzene (100-41-4)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
20V. Methyl Bromide (74-83-9)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
21V. Methyl Chloride (74-87-3)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1

CONTINUE ON PAGE V-5

CONTINUED FROM PAGE V-4

EPA I.D. NUMBER *(copy from Item 1 of Form 1)*	OUTFALL NUMBER
GAD000612796	01

Form Approved.
OMB No. 2040-0086
Appproval expires 7-31-88

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	a. Testing Required	b. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE *(if available)*		c. LONG TERM AVRG. VALUE *(if available)*		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION — VOLATILE COMPOUNDS *(continued)*															
22V. Methylene Chloride (75-09-2)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
23V. 1,1,2,2-Tetrachloroethane (79-34-5)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
24V. Tetrachloroethylene (127-18-4)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
25V. Toluene (108-88-3)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
26V. 1,2-Trans-Dichloroethylene (156-60-5)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
27V. 1,1,1-Trichlorothene (71-56-6)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
28V. 1,1,2-Tri chloroethane (79-00-5)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
29V. Trichloroethylene (79-01-6)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
30V. Trichlorofluoromethane (75-69-4)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
31V. Vinyl Chloride (75-01-4)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
GC/MS FRACTION — ACID COMPOUNDS															
1A. 2-Chlorophenol (95-57-8)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
2A. 2,4-Dichlorophenol (120-83-2)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
3A. 2,4-Dimethylphenol (105-67-9)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
4A. 4,6-Dinitro-O-Cresol (534-52-1)	x		x	<0.05	<6.6					1	mg/l	lb/day	<0.05		1
5A. 2,4-Dinitrophenol (51-28-5)	x		x	<0.05	<6.6					1	mg/l	lb/day	<0.05		1
6A. 2-Nitrophenol (88-75-5)	x		x	<0.05	<6.6					1	mg/l	lb/day	<0.05		1
7A. 4-Nitrophenol (100-02-7)	x		x	<0.05	<6.6					1	mg/l	lb/day	<0.05		1
8A. P-Chloro-M-Cresol (59-50-7)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
9A. Pentachlorophenol (87-86-5)	x		x	<0.02	<2.7					1	mg/l	lb/day	<0.02		1
10A. Phenol (108-95-2)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
11A. 2,4,6-Trichlorophenol (88-06-2)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1

CONTINUE ON REVERSE

CONTINUED FROM FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	b. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION — BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
2B. Acenaphtylene (208-96-8)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
3B. Anthracene (120-12-7)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
4B. Benzidine (92-87-5)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
5B. Benzo *(a)* Anthracene (56-55-3)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
6B. Benzo *(a)* Pyrene (50-32-8)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
7B. 3,4-Benzo-fluoranthene (205-99-2	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
8B. Benzo *(ghi)* Perylene (191-24-2)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
9B. Benzo *(k)* Fluoranthene (207-08-9)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
10B. Bis *(2-Chloro-ethoxy)* Methane (111-91-1)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
11B. Bis *(2-Chloro-ethyl)* Ether (111-44-4)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
12B. Bis *(2-Chloro-isopropyl)* Ether (102-60-1)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
13B. Bis *(2-Ethyl-hexyl)* Phthalate (117-81-7)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
14B. 4-Bromo-phenyl Phenyl Ether (101-55-3)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
15B. Butyl Benzyl Phthalate (85-68-7)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
16B. 2-Chloro-naphthalene (91-58-7)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
17B. 4-Chloro-phenyl Phenyl Ether (7005-72-3)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
18B. Chrysene (218-01-9)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
19B. Dibenzo *(a,h)* Anthracene (53-70-3)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
20B. 1,2-Dichloro-benzene (95-50-1)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
21B. 1,3-Dichloro-benzene (541-73-1)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1

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EPA I.D. NUMBER *(copy from Item 1 of Form 1)*	OUTFALL NUMBER
GAD000612796	01

Form Approved.
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1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	a. Testing Required	b. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE *(if available)*		c. LONG TERM AVRG. VALUE *(if available)*		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION — BASE/NEUTRAL COMPOUNDS *(continued)*															
22B. 1,4-Dichlorobenzene (106-46-7)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
23B. 3,3-Dichlorobenzidine (91-94-1)	x		x	<0.02	<2.7					1	mg/l	lb/day	<0.02		1
24B. Diethyl Phthalate (84-66-2)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
25B. Dimethyl Phthalate (131-11-3)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
26B. Di-N-Butyl Phthalate (84-74-2)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
27B. 2,4-Dinitrotoluene (121-14-2)	x		x	<0.02	<2.7					1	mg/l	lb/day	<0.02		1
28B. 2,6-Dinitrotoluene (606-20-2)	x		x	<0.02	<2.7					1	mg/l	lb/day	<0.02		1
29B. Di-N-Octyl Phthalate (117-84-0)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
30B. 1,2-Diphenylhydrazine *(as Azobenzene)* (122-66-7)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
31B. Fluoranthene (206-44-0)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
32B. Fluorene (86-73-7)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
33B. Hexachlorobenzene (118-74-1)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
34B. Hexachlorobutadiene (87-68-3)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
35B. Hexachlorocyclopentadiene (77-47-4)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
36B. Hexachloroethane (67-72-1)	x		x	<0.002	<0.27					1	mg/l	lb/day	<0.002		1
37B. Indeno *(1,2,3-cd)* Pyrene (193-39-5)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
38B. Isophorone (78-59-1)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
39B. Naphthalene (91-20-3)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
40B. Nitrobenzene (98-95-3)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
41B. N-Nitrosodimethylamine (62-75-9)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
42B. N-Nitrosodi-N-Propylamine (621-64-7)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1

CONTINUE ON REVERSE

CONTINUED FROM FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	b. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION — BASE/NEUTRAL COMPOUNDS *(continued)*															
43B. N-Nitrosodiphenylamine (86-30-6_	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
44B. Phenanthrene (85-01-8)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
45B. Pyrene (129-00-0)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
46B. 1,2,4-Trichlorobenzene (120-82-1)	x		x	<0.01	<1.3					1	mg/l	lb/day	<0.01		1
GC/MS FRACTION — PESTICIDES															
1P. Aldrin (309-00-2)	x		x	<0.0001	<0.01					1	mg/l	lb/day	<0.0001		1
2P. α-BHC (319-84-6)	x		x	<0.0001	<0.01					1	mg/l	lb/day	<0.0001		1
3P. β-BHC (319-85-7)	x		x	<0.0001	<0.01					1	mg/l	lb/day	<0.0001		1
4P. γ-BHC (58-89-9)	x		x	<0.0001	<0.01					1	mg/l	lb/day	<0.0001		1
5P. δ-BHC (319-86-8)	x		x	<0.0001	<0.01					1	mg/l	lb/day	<0.0001		1
6P. Chlordane (57-74-9)	x		x	<0.0005	<0.07					1	mg/l	lb/day	<0.0005		1
7P. 4,4'-DDT (50-29-3)	x		x	<0.0002	<0.03					1	mg/l	lb/day	<0.0002		1
8P. 4,4'-DDE (72-55-9)	x		x	<0.0002	<0.03					1	mg/l	lb/day	<0.0002		1
9P. 4,4'-DDD (72-54-8)	x		x	<0.0002	<0.03					1	mg/l	lb/day	<0.0002		1
10P. Dieldrin (60-57-1)	x		x	<0.0001	<0.01					1	mg/l	lb/day	<0.0001		1
11P. α-Endosulfan (115-29-7)	x		x	<0.0005	<0.07					1	mg/l	lb/day	<0.0005		1
12P. β-Endosulfan (115-29-7)	x		x	<0.0005	<0.07					1	mg/l	lb/day	<0.0005		1
13P. Endosulfan Sulfate (1031-07-8)	x		x	<0.0005	<0.07					1	mg/l	lb/day	<0.0005		1
14P. Endrin (72-20-8)	x		x	<0.0002	<0.03					1	mg/l	lb/day	<0.0002		1
15P. Endrin Aldehyde (7421-93-4)	x		x	<0.0002	<0.03					1	mg/l	lb/day	<0.0002		1
16P. Heptachlor (76-44-8)	x		x	<0.0001	<0.01					1	mg/l	lb/day	<0.0001		1

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EPA I.D. NUMBER *(copy from Item 1 of Form 1)*	OUTFALL NUMBER
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Appproval expires 7-31-88

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	a. Testing Required	b. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE *(if available)*		c. LONG TERM AVRG. VALUE *(if available)*		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION — PESTICIDES *(continued)*															
17P. Heptachlor Epoxide (1024-57-3)	x		x	<0.0001	<0.01					1	mg/l	lb/day	<0.0001		1
18P. PCB-1242 (53469-21-9)	x		x	<0.001	<0.1					1	mg/l	lb/day	<0.001		1
19P. PCB-1254 (11097-69-1)	x		x	<0.001	<0.1					1	mg/l	lb/day	<0.001		1
20P. PCB-1221 (11104-28-2)	x		x	<0.001	<0.1					1	mg/l	lb/day	<0.001		1
21P. PCB-1232 (11141-16-5)	x		x	<0.001	<0.1					1	mg/l	lb/day	<0.001		1
22P. PCB-1248 (12672-29-6)	x		x	<0.001	<0.1					1	mg/l	lb/day	<0.001		1
23P. PCB-1260 (11096-82-5)	x		x	<0.001	<0.1					1	mg/l	lb/day	<0.001		1
24P. PCB-1016 (12674-11-2)	x		x	<0.001	<0.1					1	mg/l	lb/day	<0.001		1
25P. Toxaphene (8001-35-2)	x		x	<0.002	<0.3					1	mg/l	lb/day	<0.002		1

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate hseets *(use the same format)* instead of completing these pages. SEE INSTRUCTIONS.

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V. INTAKE AND EFFLUENT CHARACTERISTICS (continued from page 3 of Form 2-C)

OUTFALL NO. 04

PART A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCEN-TRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE *(if available)* (1) CONCEN-TRATION	b. MAXIMUM 30 DAY VALUE (2) MASS	c. LONG TERM AVRG. VALUE *(if available)* (1) CONCEN-TRATION	c. LONG TERM AVRG. VALUE (2) MASS	d. NO. OF ANALYSES	3. UNITS *(specify if blank)* a. CONCEN-TRATION	b. MASS	4. INTAKE *(optional)* a. LONG TERM AVERAGE VALUE (1) CONCEN-TRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
a. Biochemical Oxygen Demand (BOD)	<8	<146.4					1	mg/l	lb/day	<8		1
b. Chemical Oxygen Demand (COD)	13	237.9					1	mg/l	lb/day	11		1
c. Total Organic Carbon (TOC)	2	36.6					1	mg/l	lb/day	2		1
d. Total Suspended Solids (TSS)	<5	<91.5					1	mg/l	lb/day	<5		1
e. Ammonia *(as N)*	0.1	1.8					1	mg/l	lb/day	<0.1		1
f. Flow	VALUE 1,527calc		VALUE		VALUE 79,200 max			gpm		VALUE		
g. Temperature *(winter)*	VALUE		VALUE		VALUE			°C		VALUE		
h. Temperature *(summer)*	VALUE 24.2		VALUE		VALUE		8	°C		VALUE 24.2		8
i. pH	MINIMUM 7.22	MAXIMUM 7.31	MINIMUM	MAXIMUM			4	STANDARD UNITS				

PART B - Mark "X: in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data for an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. (if available)	2. MARK 'X' a. Believed Present	b. Believed Absent	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCEN-TRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE *(if available)* (1) CONCEN-TRATION	b. MAXIMUM 30 DAY VALUE (2) MASS	c. LONG TERM AVRG. VALUE *(if available)* (1) CONCEN-TRATION	c. LONG TERM AVRG. VALUE (2) MASS	d. NO. OF ANAL-YSES	4. UNITS a. CONCEN-TRATION	b. MASS	5. INTAKE *(optional)* a. LONG TERM AVERAGE VALUE (1) CONCEN-TRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANAL-YSES
a. Bromide (24959-67-9)	x		0.1	1.8					1	mg/l	lb/day	<0.1		1
b. Chlorine, Total Residual	x		0						4	mg/l	lb/day	0		4
c. Color	x		5						1	pcu		<5		1
d. Fecal Coliform	x		2						1	col/100ml		<2		1
e. Fluoride (16984-48-8)	x		0.2	3.7					1	mg/l	lb/day	0.2		1
f. Nitrate-Nitrite *(as N)*	x		0.2	3.7					1	mg/l	lb/day	<0.1		1

CONTINUE ON REVERSE

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (if available)	2. MARK 'X'		3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	a. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE *(if available)*		c. LONG TERM AVRG. VALUE *(if available)*		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
g. Nitrogen, Total Organic *(as N)*	x		0.5	9.2					1	mg/l	lb/day	0.7		1
h. Oil and Grease		x	<6	<109.8					1	mg/l	lb/day	<6		1
I. Phosphorus *(as P)*, Total (7723-14-0)		x	<0.02	<0.4					1	mg/l	lb/day	<0.02		1
J. Radioactivity														
(1) Alpha, Total														
(2) Beta, Total														
(3) Radium, Total														
(4) Radium 226, Total														
k. Sulfate *(as SO_4)* (14808-79-8)	x		11	201.3					1	mg/l	lb/day	11		1
l. Sulfide *(as SO_3)* (14265-45-3)		x	<0.2	<3.7					1	mg/l	lb/day	<0.2		1
m. Sulfite *(as SO_3)* (14265-45-3)		x	<2	<36.6					1	mg/l	lb/day	<2		1
n. Surfactants		x	<0.04	<0.7					1	mg/l	lb/day	<0.04		1
o. Aluminum, Total (7440-39-3)		x	<0.1	<1.8					1	mg/l	lb/day	<0.1		1
p. Barium, Total (7440-39-3)	x		0.02	0.4					1	mg/l	lb/day	0.02		1
q. Boron, Total (7440-42-8)	x		0.04	0.7					1	mg/l	lb/day	0.05		1
r. Cobalt, Total (7440-48-4)		x	<0.04	<0.7					1	mg/l	lb/day	<0.04		1
s. Iron, Total (7439-89-6)	x		0.06	1.1					1	mg/l	lb/day	<0.04		1
t. Magnesium, Total (7439-95-4)	x		1.8	32.9					1	mg/l	lb/day	1.8		1
u. Molybdenum, Total (7439-98-7)		x	<0.04	<0.7					1	mg/l	lb/day	<0.04		1
v. Manganese, Total (7439-96-5)		x	<0.04	<0.7					1	mg/l	lb/day	<0.04		1
w. Tin, Total (7440-31-5		x	<0.04	<0.7					1	mg/l	lb/day	<0.04		1
x. Titanium, Total (7440-32-6)		x	<0.1	<1.8					1	mg/l	lb/day	<0.1		1

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CONTINUED FROM PAGE 3 OF FORM 2-C

EPA I.D. NUMBER *(copy from Item 1 of Form 1)*	OUTFALL NUMBER
GAD000612796	04

Form Approved.
OMB No. 2040-0086
Appproval expires 7-31-88

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a (secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions), mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for the pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2.4 of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2.4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table (all 7 pages) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	a. Testing Required	b. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE *(if available)*		c. LONG TERM AVRG. VALUE *(if available)*		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, CYANIDE, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-0)	x		x	<0.05	<0.9					1	mg/l	lb/day	<0.05		1
2M. Aresenic, Total (7440-38-2)	x		x	<0.03	<0.5					1	mg/l	lb/day	<0.03		1
3M. Beryllium, Total, 7440-41-7	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
4M. Cadmium, Total (7440-43-9)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
5M. Chromium Total (7440-47-3)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
6M. Copper, Total (7440-50-8)	x		x	<0.02	<0.4					1	mg/l	lb/day	<0.02		1
7M. Lead, Total (7439-92-1)	x		x	<0.025	<0.5					1	mg/l	lb/day	<0.025		1
8M. Mercury, Total (7439-97-6)	x		x	<0.0005	<0.01					1	mg/l	lb/day	<0.0005		1
9M. Nickel, Total (7440-02-0)	x		x	<0.02	<0.4					1	mg/l	lb/day	<0.02		1
10M. Selenium, Total (7782-49-2)	x		x	<0.04	<0.7					1	mg/l	lb/day	<0.04		1
11M. Silver, Total (7440-22-4)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
12M. Thallium, Total (7440-28-0)	x		x	<0.05	<0.9					1	mg/l	lb/day	<0.05		1
13M. Zinc, Total (7440-66-6)	x	x		0.02	0.4					1	mg/l	lb/day	<0.02		1
14M. Cyanide, Total (57-12-5)	x		x	<0.02	<0.4					1	mg/l	lb/day	<0.02		1
15M. Phenols, Total	x		x	<0.05	<0.9					1	mg/l	lb/day	<0.05		1
DIOXIN															
2,3,7,8-Tetrachlorodibenzo-P-Dioxin (1764-01-6)			x	DESCRIBE RESULTS											

CONTINUE ON REVERSE

CONTINUED FROM FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	b. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, CYANIDE, AND TOTAL PHENOLS															
1V. Acrolein (107-02-8)	x		x	<0.05	<0.9					1	mg/l	lb/day	<0.05		1
2V. Acrylonitrile (107-13-1)	x		x	<0.05	<0.9					1	mg/l	lb/day	<0.05		1
3V. Benzene (71-43-2)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
4V. Bis *(Chloromethyl)* Ether (542-88-1)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
5V. Bromoform (75-25-2)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
6V. Carbon Tetrachloride (56-23-5)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
7V. Chlorobenzene (108-90-7)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
8V. Chlorodibromomethane (124-48-1)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
9V. Chloroethane (75-00-3)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
10V. 2-Chloroethylvinyl Ether (110-75-8)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
11V. Chloroform (67-66-3)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
12V. Dichlorobromomethane (75-71-8)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
13V. Dichlorodifluoromethane (75-71-8)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
14V. 1,1-Dichloroethane (75-34-3)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
15V. 1,2-Dichloroethane (107-06-2)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
16V. 1,1-Dichloroethylene (75-35-4)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
17V. 1,2-Dichloropropane (78-87-5)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
18V. 1,3-Dichloropropylene (542-75-6)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
19V. Ethylbenzene (100-41-4)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
20V. Methyl Bromide (74-83-9)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
21V. Methyl Chloride (74-87-3)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1

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EPA I.D. NUMBER *(copy from Item 1 of Form 1)*	OUTFALL NUMBER
GAD000612796	04

Form Approved.
OMB No. 2040-0086
Appproval expires 7-31-88

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	a. Testing Required	b. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE *(if available)*		c. LONG TERM AVRG. VALUE *(if available)*		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION — VOLATILE COMPOUNDS *(continued)*															
22V. Methylene Chloride (75-09-2)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
23V. 1,1,2,2-Tetrachloroethane (79-34-5)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
24V. Tetrachloroethylene (127-18-4)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
25V. Tohuene (108-88-3)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
26V. 1,2-Trans-Dichloroethylene (156-60-5)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
27V. 1,1,1-Trichlorothene (71-56-6)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
28V. 1,1,2-Tri chloroethane (79-00-5)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
29V. Trichloroethylene (79-01-6)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1
30V. Trichlorofluoromethane (75-69-4)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
31V. Vinyl Chloride (75-01-4)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
GC/MS FRACTION — ACID COMPOUNDS															
1A. 2-Chlorophenol (95-57-8)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
2A. 2,4-Dichlorophenol (120-83-2)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
3A. 2,4-Dimethylphenol (105-67-9)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
4A. 4,6-Dinitro-O-Cresol (534-52-1)	x		x	<0.05	<0.9					1	mg/l	lb/day	<0.05		1
5A. 2,4-Dinitrophenol (51-28-5)	x		x	<0.05	<0.9					1	mg/l	lb/day	<0.05		1
6A. 2-Nitrophenol (88-75-5)	x		x	<0.05	<0.9					1	mg/l	lb/day	<0.05		1
7A. 4-Nitrophenol (100-02-7)	x		x	<0.05	<0.9					1	mg/l	lb/day	<0.05		1
8A. P-Chloro-M-Cresol (59-50-7)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
9A. Pentachlorophenol (87-86-5)	x		x	<0.02	<0.4					1	mg/l	lb/day	<0.02		1
10A. Phenol (108-95-2)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
11A. 2,4,6-Trichlorophenol (88-06-2)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1

CONTINUE ON REVERSE

CONTINUED FROM FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	b. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION — BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
2B. Acenaphtylene (208-96-8)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
3B. Anthracene (120-12-7)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
4B. Benzidine (92-87-5)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
5B. Benzo *(a)* Anthracene (56-55-3)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
6B. Benzo *(a)* Pyrene (50-32-8)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
7B. 3,4-Benzo-fluoranthene (205-99-2	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
8B. Benzo *(ghi)* Perylene (191-24-2)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
9B. Benzo *(k)* Fluoranthene (207-08-9)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
10B. Bis *(2-Chloro-ethoxy)* Methane (111-91-1)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
11B. Bis *(2-Chloro-ethyl)* Ether (111-44-4)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
12B. Bis *(2-Chloro-isopropyl)* Ether (102-60-1)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
13B. Bis *(2-Ethyl-hexyl)* Phthalate (117-81-7)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
14B. 4-Bromo-phenyl Phenyl Ether (101-55-3)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
15B. Butyl Benzyl Phthalate (85-68-7)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
16B. 2-Chloro-naphthalene (91-58-7)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
17B. 4-Chloro-phenyl Phenyl Ether (7005-72-3)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
18B. Chrysene (218-01-9)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
19B. Dibenzo *(a,h)* Anthracene (53-70-3)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
20B. 1,2-Dichloro-benzene (95-50-1)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
21B. 1,3-Dichloro-benzene (541-73-1)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1

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EPA I.D. NUMBER *(copy from Item 1 of Form 1)*	OUTFALL NUMBER
GAD000612796	04

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Appproval expires 7-31-88

1. POLLUTANT AND CAS NUMBER *(if available)*	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE *(optional)*		
	a. Testing Required	b. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE *(if available)*		c. LONG TERM AVRG. VALUE *(if available)*		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION — BASE/NEUTRAL COMPOUNDS *(continued)*															
22B. 1,4-Dichlorobenzene (106-46-7)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
23B. 3,3-Dichlorobenzidine (91-94-1)	x		x	<0.02	<0.4					1	mg/l	lb/day	<0.02		1
24B. Diethyl Phthalate (84-66-2)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
25B. Dimethyl Phthalate (131-11-3)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
26B. Di-N-Butyl Phthalate (84-74-2)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
27B. 2,4-Dinitrotoluene (121-14-2)	x		x	<0.02	<0.4					1	mg/l	lb/day	<0.02		1
28B. 2,6-Dinitrotoluene (606-20-2)	x		x	<0.02	<0.4					1	mg/l	lb/day	<0.02		1
29B. Di-N-Octyl Phthalate (117-84-0)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
30B. 1,2-Diphenylhydrazine *(as Azobenzene)* (122-66-7)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
31B. Fluoranthene (206-44-0)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
32B. Fluorene (86-73-7)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
33B. Hexachlorobenzene (118-74-1)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
34B. Hexachlorobutadiene (87-68-3)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
35B. Hexachlorocyclopentadiene (77-47-4)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
36B. Hexachloroethane (67-72-1)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.01		1
37B. Indeno *(1,2,3-cd)* Pyrene (193-39-5)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.002		1
38B. Isophorone (78-59-1)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
39B. Naphthalene (91-20-3)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
40B. Nitrobenzene (98-95-3)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
41B. N-Nitrosodimethylamine (62-75-9)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
42B. N-Nitrosodi-N-Propylamine (621-64-7)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1

CONTINUE ON REVERSE

CONTINUED FROM FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	b. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION — BASE/NEUTRAL COMPOUNDS *(continued)*															
43B. N-Nitrosodiphenylamine (86-30-6	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
44B. Phenanthrene (85-01-8)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
45B. Pyrene (129-00-0)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
46B. 1,2,4-Trichlorobenzene (120-82-1)	x		x	<0.01	<0.2					1	mg/l	lb/day	<0.01		1
GC/MS FRACTION — PESTICIDES															
1P. Aldrin (309-00-2)	x		x	<0.0001	<0.002					1	mg/l	lb/day	<0.0001		1
2P. α-BHC (319-84-6)	x		x	<0.0001	<0.002					1	mg/l	lb/day	<0.0001		1
3P. β-BHC (319-85-7)	x		x	<0.0001	<0.002					1	mg/l	lb/day	<0.0001		1
4P. γ-BHC (58-89-9)	x		x	<0.0001	<0.002					1	mg/l	lb/day	<0.0001		1
5P. δ-BHC (319-86-8)	x		x	<0.0001	<0.002					1	mg/l	lb/day	<0.0001		1
6P. Chlordane (57-74-9)	x		x	<0.0005	<0.01					1	mg/l	lb/day	<0.0005		1
7P. 4,4'-DDT (50-29-3)	x		x	<0.0002	<0.004					1	mg/l	lb/day	<0.0002		1
8P. 4,4'-DDE (72-55-9)	x		x	<0.0002	<0.004					1	mg/l	lb/day	<0.0002		1
9P. 4,4'-DDD (72-54-8)	x		x	<0.0002	<0.004					1	mg/l	lb/day	<0.0002		1
10P. Dieldrin (60-57-1)	x		x	<0.0001	<0.002					1	mg/l	lb/day	<0.0001		1
11P. α-Endosulfan (115-29-7)	x		x	<0.0005	<0.01					1	mg/l	lb/day	<0.0005		1
12P. β-Endosulfan (115-29-7)	x		x	<0.0005	<0.01					1	mg/l	lb/day	<0.0005		1
13P. Endosulfan Sulfate (1031-07-8)	x		x	<0.0005	<0.01					1	mg/l	lb/day	<0.0005		1
14P. Endrin (72-20-8)	x		x	<0.0002	<0.004					1	mg/l	lb/day	<0.0002		1
15P. Endrin Aldehyde (7421-93-4)	x		x	<0.0002	<0.004					1	mg/l	lb/day	<0.0002		1
16P. Heptachlor (76-44-8)	x		x	<0.0001	<0.002					1	mg/l	lb/day	<0.0001		1

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GAD000612796	04

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	a. Testing Required	b. Believed Present	b. Believed Absent	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE *(if available)*		c. LONG TERM AVRG. VALUE *(if available)*		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION — PESTICIDES *(continued)*															
17P. Heptachlor Epoxide (1024-57-3)	x		x	<0.0001	<0.002					1	mg/l	lb/day	<0.0001		1
18P. PCB-1242 (53469-21-9)	x		x	<0.001	<0.02					1	mg/l	lb/day	<0.001		1
19P. PCB-1254 (11097-69-1)	x		x	<0.001	<0.02					1	mg/l	lb/day	<0.001		1
20P. PCB-1221 (11104-28-2)	x		x	<0.001	<0.02					1	mg/l	lb/day	<0.001		1
21P. PCB-1232 (11141-16-5)	x		x	<0.001	<0.02					1	mg/l	lb/day	<0.001		1
22P. PCB-1248 (12672-29-6)	x		x	<0.001	<0.02					1	mg/l	lb/day	<0.001		1
23P. PCB-1260 (11096-82-5)	x		x	<0.001	<0.02					1	mg/l	lb/day	<0.001		1
24P. PCB-1016 (12674-11-2)	x		x	<0.001	<0.02					1	mg/l	lb/day	<0.001		1
25P. Toxaphene (8001-35-2)	x		x	<0.002	<0.04					1	mg/l	lb/day	<0.002		1