



PECO NUCLEAR

A Unit of PECO Energy

Station Support Department

EPP 3.2

PECO Energy Company
965 Chesterbrook Boulevard
Wayne, PA 19087-5691

June 7, 1999

Docket Nos. 50-352
50-353

License Nos. NPF-39
NPF-85

NPDES Permit No. PA0052221

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

Subject: Limerick Generating Station, Units 1 and 2
Changes to National Pollutant Discharge
Elimination System Permit

Dear Sir/Madam:

This letter is being submitted in accordance with the Limerick Generating Station (LGS), Units 1 and 2, Environmental Protection Plan (EPP) Section 3.2, which stipulates that the NRC shall be notified within 30 days following the date of approval of a change to the National Pollutant Discharge Elimination System (NPDES) permit.

By letter dated May 18, 1999, the Pennsylvania Department of Environmental Protection (PA DEP) amended Bradshaw Reservoir NPDES Permit No. PA0052221. The Bradshaw Reservoir facility supports the operation of Limerick Generating Station (LGS), Units 1 and 2. The amendment to NPDES Permit No. PA0052221 reflects modifications to the monitoring frequency for dissolved oxygen, fecal coliform, and pH. The NRC was previously notified regarding the pending changes to the NPDES permit by letter dated December 9, 1998.

Accordingly, this letter provides the required notification of a change to the NPDES permit and is being submitted within 30 days of the permitting agency's approval in accordance with the requirements of the LGS EPP. A copy of the PA DEP letter amending the Bradshaw Reservoir NPDES permit is attached.

If you have any questions or require additional information, please do not hesitate to contact us.

Very truly yours,

Garrett D. Edwards for 19990606

Garrett D. Edwards
Director - Licensing

Attachment

cc: H. J. Miller, Administrator, Region I, USNRC (w/ attachment)
A. L. Burritt, USNRC Senior Resident Inspector, LGS, (w/ attachment)

1/1
Cool



Pennsylvania Department of Environmental Protection

Lee Park, Suite 6010
555 North Lane
Conshohocken, PA 19428

May 18, 1999

610-832-6130
Fax 610-832-6133

Southeast Regional Office

Mr. Robert M. Matty, Jr.
Engineer, Environmental Affairs
PECO Energy Company
2600 Monroe Boulevard
Norristown, PA 19403

Re: IW NPDES Permit PA0052221
Amendment No. 1
Bradshaw Reservoir Release
Bedminster Township
Bucks County

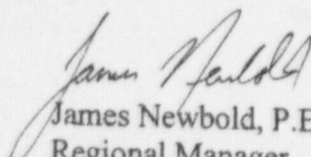
Dear Mr. Matty:

Referenced amended permit pages 1, 2 and 2a are enclosed.

Please study the amended permit pages carefully and substitute these pages for those similarly numbered pages in your permit issued November 9, 1998. Please direct any questions to the Permits Section of this office.

This amendment reflects modifications to the monitoring frequency for dissolved oxygen, fecal coliform and pH. A minimum of five samples must be collected every month at Outfall 001 and be analyzed for these parameters. The sampling period for these parameters is May to September. The fecal coliform level shall not exceed a geometric mean of 200 col. per 100 milliliters based on five consecutive samples, each sample collected on different days.

Sincerely,


James Newbold, P.E.
Regional Manager
Water Management

Enclosures: Amended Permit pages 1, 2 and 2a
Amended Master Discharge Monitoring Report (Only page 1 of 3)

cc: Bucks County Health Department
Bedminster Township (Transmittal letter only)
Permits and Compliance
Mr. Roth
Re 30 (GJC99)113-11



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
WATER MANAGEMENT PROGRAM

AUTHORIZATION TO DISCHARGE UNDER THE
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM

NPDES PERMIT NO. PA 0052221
Amendment No. 1

In compliance with the provisions of the Clean Water Act, 33 U.S.C. Section 1251 et seq. (the "Act") and Pennsylvania's Clean Streams Law, as amended, 35 P.S. Section 691.1 et seq.,

PECO Energy Company - Client ID No. 83285

is authorized to discharge from a facility located at

Bradshaw Reservoir - Site ID No. 452264

Elephant Road and Central School Road

Bedminster, PA 18944

Municipality Bedminster Township County Bucks

to receiving waters named East Branch Perkiomen Creek

in accordance with effluent limitations, monitoring requirements and other conditions set forth in Parts A, B, and C hereof.

THIS PERMIT SHALL EXPIRE AT MIDNIGHT, 11/09/2003

The authority granted by this permit is subject to the following further qualifications:

1. If there is a conflict between the application, its supporting documents and/or amendments and the terms and conditions of this permit, the terms and conditions shall apply.
2. Failure to comply with the terms, conditions, or effluent limitations of this permit is grounds for enforcement action; for permit termination, revocation and reissuance, or modification; or for denial of a permit renewal application.
3. Complete application for renewal of this permit, or notification of intent to cease discharging by the expiration date, must be submitted to the Department at least 180 days prior to the above expiration date (unless permission has been granted by the Department for submission at a later date), using the appropriate NPDES permit application form.

In the event that a timely and complete application for renewal has been submitted and the Department is unable, through no fault of the permittee, to reissue the permit before the above expiration date, the terms and conditions of this permit, including submission of the Discharge Monitoring Reports, will be automatically continued and will remain fully effective and enforceable pending the grant or denial of the application for permit renewal.

4. This NPDES permit does not constitute authorization to construct or make modifications to wastewater treatment facilities necessary to meet the terms and conditions of this permit.

DATE PERMIT ISSUED 11/09/98 ISSUED BY Jeanne Harold
DATE PERMIT AMENDMENT ISSUED 05/18/99 TITLE: Regional Manager
DATE EFFECTIVE 06/01/99 Water Management

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES
PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS

Permit No. PA0052221

Amendment No. 1

1. For Outfall 001, Latitude 40°24'45", Longitude 75°13'21", River Mile Index 23.57, Stream Code 01168

which receives waste water from Bradshaw Reservoir

- a. The permittee is authorized to discharge during the period from _____ issuance through _____ expiration
- b. Based on the production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (see also Additional Requirements, Footnotes and Supplemental Information on page 2a).

Discharge Parameter	Effluent Limitations							Monitoring Requirements		
	Mass Units (lbs/day) ⁽¹⁾		Concentrations (mg/l)				Minimum Measurement Frequency	Required Sample Type	24 Hour Report Under A3.C(4)	
	Average Monthly	Maximum Daily	Inst. Minimum	Average Monthly	Minimum Daily Avg.	Inst. Maximum ⁽²⁾				
FLOW (MGD)							Continuous	Recorded		
DISSOLVED OXYGEN * (5-1 to 9-30)			5.0	Monitor/ Report	6.0	Monitor/ Report	5/Month	Grab		
FECAL COLIFORM ** (5-1 to 9-30)				200 # col/ 100ml			1/Month	Grab		
pH * (5-1 to 9-30)							5/Month	Grab		

Within Limits of 6.0 to 9.0 Standards Units at all times

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 001

* Sample shall be collected during fecal coliform sampling. ** Also, see Footnote "d" on page 2a.

DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES**PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING, AND REPORTING REQUIREMENTS (CONT'D)**

- c. All discharges of floating materials, oil, grease, scum and substances which produce tastes, odors, turbidity or settle to form deposits shall be controlled to levels which will not be inimical or harmful to the water uses to be protected as to human, animal, plant or aquatic life.
- d. The permittee shall provide for effective disinfection of this discharge to control disease-producing organisms. During the swimming season (May 1st through September 30th), the maximum fecal coliform level shall be a geometric mean of 200 per 100 milliliters (ml), based on five consecutive samples each sample collected on different days.

Footnotes (Refer to Page 2)

- (1) When sampling to determine compliance with mass effluent limitations, the discharge flow at the time of sampling must be measured, recorded and reported on the Discharge Monitoring Report Form.
- (2) The Instantaneous Maximum Discharge Limitations are for compliance use by the Department only. Do not report instantaneous maximums on Discharge Monitoring Reports (DMRs) or supplemental DMRs unless specifically required on those forms to do so.

PERMITTEE NAME/ADDRESS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Amendment No. 1

FORM APPROVED.

OMB NO. 2040-0004.

Southeast Region Facsimile

NAME: **PECO ENERGY COMPANY**
 ADDRESS: **2301 MARKET STREET** PHILADELPHIA, PA 19101-8699
 FAC ADDRESS: **BRADSHAW RESERVOIR RELEASE TO CREEK AT CENTRAL SCHOOL/LELEPHANT ROADS**
 MUNICIPALITY: **BEDMINSTER TOWNSHIP** COUNTY: **BUCKS**

PERMIT NUMBER: **PA0052221** DISCHARGE NUMBER: **001**

MONITORING PERIOD: YEAR MO DAY TO YEAR MO DAY

NOTE: Read instructions before completing this form

Parameter	QUANTITY OR LOADING				QUALITY OR CONCENTRATION				UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE MONTHLY	MAXIMUM DAILY	UNITS	MINIMUM INST.	AVERAGE MONTHLY	MINIMUM DAILY AVG.	UNITS					
FLOW	Sample Measurement				XXXX	XXXX	XXXX					
	Permit Requirement	MONITOR/REPORT	MONITOR/REPORT	MGD	XXXX	XXXX	XXXX	XXXX	XXXX		CONTINUOUS	RECORDED
	Sample Measurement	XXXX	XXXX	XXXX								
DISSOLVED OXYGEN (5-1 to 9-30)	Permit Requirement	XXXX	XXXX	XXXX	5.0	MONITOR/REPORT	6.0	MCL			5/MONTH	GRAB
	Sample Measurement	XXXX	XXXX	XXXX								
	Permit Requirement	XXXX	XXXX	XXXX	XXXX	XXXX	XXXX	# COL/100ML			1/MONTH	GRAB
pH (5-1 to 9-30)	Permit Requirement	XXXX	XXXX	XXXX	6.0	XXXX	INST. MAX 9.0	STD			5/MONTH	GRAB
	Sample Measurement	XXXX	XXXX	XXXX								
	Permit Requirement	XXXX	XXXX	XXXX	XXXX	XXXX	XXXX					

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: _____ TELEPHONE: _____ DATE: _____

TYPE OR PRINT COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) PERMIT EXPIRES: 11/09/2003 SUBMIT RENEWAL BY: 05/09/2003

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. §1901 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

AREA CODE _____ NUMBER _____ YEAR _____ MO _____ DAY _____

Paperwork Reduction Act Notice

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

General Instructions

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

Legal Notice

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

To Calculate Mass of Pollutants For a Sampling Event

Use the sampling event reported concentration and perform the appropriate calculation as follows:

$$\text{_____ concentration } (\mu\text{g/l} \times 0.00834 \times \text{_____ flow (million gallons/day)}) = \text{_____ lb/day}$$

or

$$\text{_____ concentration (mg/l)} \times 8.34 \times \text{_____ flow (million gallons/day)} = \text{_____ lb/day}$$

The value assigned to "flow (million gallons/day)" should be the 24-hour average flow for the outfall on the day the sample was taken. Where an outfall discharges for only part of a day (x hours), the daily mass value should be determined by using the x-hour average flow.

To Calculate an Arithmetic Average or Mean

Use the following equation:

$$\frac{X_1 + X_2 + X_3 + X_4 + \dots X_N}{n}$$

n = number of results

X = value of each analytical results

For example,

five samples were analyzed, their results were 75, 82, 90, 70, and 85.

$$\frac{75 + 82 + 90 + 70 + 85}{5} = 80.4$$

To Calculate a Geometric Mean or Geometric Average (For Fecal Coliform Only)

Use the following equation:

$$n\sqrt{X_1 \times X_2 \times X_3 \times X_4 \times \dots X_N}$$

n = number of analysis results

X = value of each analytical result

Note: If any value of X is zero, substitute a 1.0 for the calculation.

For example,

five samples were analyzed, their results were 75, 82, 90, 70, and 85.

$$5\sqrt{75 \times 82 \times 90 \times 70 \times 85} = 5\sqrt{3,293,325,000} = 80.1$$

INSTRUCTIONS FOR UTILIZING

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

The original DMR form(s) included with your permit are provided to serve as a master. Copies of this form must be used when reporting the results of the monitoring requirements in your permit. Do not write on or send the original master. If you receive computer generated preprinted DMR forms, they should be used in place of the enclosed forms.

Please make a note of your permit expiration date on the master DMR so that you will be reminded to submit your renewal application 180 days prior to expiration.

A "Monitor/Report" requirement contained in a permit requirement block indicates that the parameter is monitored and the test result reported in the appropriate block. Any test methods specified in Part A or Part C of the permit must be used.

An "Average Weekly" value is defined as the highest weekly arithmetic average value observed during the monthly monitoring period.

Loading or mass units shall be reported as the average of the calculated daily loadings during the monthly, weekly, or daily measurement period.

For parameters for which the effluent limit is lower than the Method Detection Limit (MDL) of the most sensitive existing EPA approved (40 CFR Part 136) test method or DEP approved method, the parameters should be analyzed using the test method specified in Part C of the permit. The sample results must be specified on the DMR form as either the measured (quantified) value or as "less than" the detection limit used in the test (e.g. < x.x). Results SHALL NOT be reported as "Not Detectable" or "ND". For computing monthly averages, all "less than" sample results may be counted as zero values. All sample results used in computing monthly average values must be reported on the DMR form in the DMR comment section.

You should also note any other special instructions or definitions contained on the front and back of the DMR as well as in the permit.

Submit the completed forms to: DEP, EPA and the County Health Department as required in the permit. Unless otherwise specified in the permit, the DMR form must be submitted each month. If there is no discharge during the month, the DMR must be submitted with "NO DISCHARGE" written across the front.