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April 19, 2002

Mr. Robert Desmarais Director, Project Management Division U. S. Department of Energy Brookhaven Group Upton, NY 11973

Dear Mr. Desmarais:

SUBJECT: NPDES - Discharge Monitoring Report (DMR) for March 2002 REFERENCE: Letter from Robert Desmarais to Cunniff dated March 27, 2002

Included as Attachment I, please find the DMR for the month of March 2002. Chemical analyses for the reported parameters are conducted by a NYS Department of Health certified contractor laboratory. Copies of the analytical reports are contained in Attachments II, III, and IV. Field measured parameters (pH, settleable solids, flow) are recorded and/or measured by the Plant Engineering Division, Sewage Treatment Plant Operators or the Environmental Services Division, Field Sampling Team.

With the exception of one excursion for total lead analysis at Outfall 010, review of the analytical data shows that all parameters met their respective SPDES effluent limitations this reporting period. Please refer to item ten of the Discharge Monitoring Report Notes section for a description of this excursion. Soils at this outfall contain lead at concentrations of up to 50,000 mg/kg due to historical operations at the Central Steam Facility. The elevated lead levels are thought to originate from suspended sediment during rain events. The source and extent of contamination is being investigated and plans to remediate the area are being prepared.

Brookhaven National Laboratory received approval for a modified SPDES permit in early February. This DMR reflects the modified permit although some discrepancies have been found. For outfalls 001A, 001B, and 001D, the flow monitoring for these stations remains quarterly in the modified permit. The quarterly flow as recorded on the DMR is for the period 1/1/02 - 3/31/-02 not 2/1/02 - 3/31/02 as marked on the DMR. In addition, total aluminum at Outfall 002, and total vanadium at Outfall 010 although required by the modified permit does not appear in the DMR. The requirements and monitoring results have therefore been added.

Please note that for the majority of the Outfalls, flow measurements are conducted weekly or monthly; consequently, a daily maximum flow rate cannot be reported. All flow values reported for Outfalls 002, 002B, 003, 005, 006A, 006B, and 007 are therefore, daily averages. Collection and analysis of the SPDES permit samples are performed in accordance with the guidelines of the BNL Quality Assurance

program. These guidelines include the routine calibration of instruments, standard operating procedures for collection and analysis of samples, use of standard methods of analysis, and validation of the contractor analytical data by the BNL analytical services laboratory. Brookhaven National Laboratory personnel collected all samples. A Quality Assurance inspection is performed periodically on contractor laboratories. The Quality Assurance documentation is available from the Environmental Services Division and Plant Engineering Divisions. Based on this information, we believe the values reported on the DMR are representative of the effluent from the BNL during the month of March 2002.

Please sign each page of the DMR where indicated and transmit the DMR and associated attachments to the New York State Department of Environmental Conservation and the Suffolk County Department of Health Services no later than April 28, 2002. If there are any questions regarding the information contained on the DMR or the analytical data packages, please do not hesitate to contact R. Lee at extension 3148 or M. Allocco at extension 3166.

Sincerely,

Lori Cunniff, CEP Division Manager

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Attachment I: Discharge Monitoring Report for March 2002.

Attachment II: Analytical Results from H2M Labs for samples collected on 3/4/02, 3/6/02, and

3/8/02 from Outfall 001.

Attachment III: Analytical Results from H2M Labs for samples collected from Outfalls 001A,

001B, 001D, 002, 002B, 005, 006A, 006B, 007, 008, and 010.

Attachment IV: Analytical Results from CHEMTEX, Inc. for samples collected from Outfalls

001F, 002, 002B, 005, 006A, and 006B.

Attachment V: Non-Compliance Report for March SPDES Permit Excursion at Outfall 010.

w/attachments M. Allocco w/attachments M. Baldwin cc: L. Cunniff w/o attachments W. Chaloupka w/attachments G. Granzen w/o attachments S. Dierker w/o attachments C. Johnson w/o attachments J. Higbie w/attachments R. Lee w/attachments E. Lessard w/o attachments D. Lowenstein E. Murphy w/attachments w/o attachments V. Radeka w/o attachments w/o attachments A. Oueirolo D. Van Duvne w/attachments T. Sheridan w/o attachments

ATTACHMENT I

BROOKHAVEN NATIONAL LABORATORY

SPDES PERMIT NO. NY0005835

DISCHARGE MONITORING REPORT FOR MARCH 2002

FOR OUTFALLS NO. 001 - 010

Brookhaven National Laboratory SPDES Permit No. NY0005835 Discharge Monitoring Report for March 2002 Discharge Monitoring Report Notes:

- 1. The reported concentration is estimated at less than the method detection limit but greater than the instrument detection limit.
- 2. The reported concentration was estimated by the analytical laboratory.
- 3. Since flow records are maintained on a weekly or monthly basis, the flow rate provided is the daily average.
- 4. Flow is estimated based upon an instantaneous flow measurement and the assumption that flow continued for the entire day (i.e., 1,440 minutes).
- 5. Photographic rinse waters discharged from Building 197B, are generated by two individual photographic processors. Wastewater samples are collected from each processor and analyzed separately. Table I summarizes the individual results. The maximum concentrations and total average flow have been reported in the DMR.

| Location | Flow | pН | Total Nitrogen | Cyanide | Silver . | Phenolics |
|------------|----------|--------|-------------------|-------------------------|----------------------------|------------------------|
| 1-87 | 54.2 GPD | 6.5 SU | 148 mg/L | $< 10 \mu \mathrm{g/L}$ | 374 μg/L | $< 5.0 \mu \text{g/L}$ |
| 1-93B | 20.2 GPD | 7.9 SU | 0.5 mg/L | $< 10 \mu \text{g/L}$ | $3.7 \mu \text{g/L}^{(a)}$ | $< 5.0 \mu \text{g/L}$ |
| Total Flow | 74.2 GPD | | | | | |

- a. The reported concentration is estimated at less than the method detection limit but greater than the instrument detection limit.
- 6. PCBs were not detected at a method detection limit of 0.065 ppb per congener. Total PCBs have been reported as less than the individual detection limit.
- 7. The percent removals for BOD, 5-day and Total Suspended solids were calculated using one-half the method detection limit as the value for all concentrations reported as less than the method detection limit (<MDL).
- 8. Brookhaven National Laboratory received approval for a modified SPDES permit in early February. This DMR reflects the modified permit although some discrepancies have been found. For outfalls 001A, 001B, and 001D, the flow monitoring for these stations remains quarterly in the modified permit. The quarterly flow as recorded on the DMR is for the period 1/1/02 3/31/02 as marked on the DMR.
- 9. Brookhaven National Laboratory received approval for a modified SPDES permit in early February. This DMR reflects the modified permit although some discrepancies have been found. This parameter although required by the modified permit does not appear in the DMR. The requirements have therefore been added.

10. The total lead concentration at outfall 010 on January 11, 2002 was 0.09 mg/L, which exceeds the permit level of 0.05 mg/L. Soils at this outfall contain lead at concentrations of up to 50,000 mg/kg due to historical operations at the Central Steam Facility. The source and extent of contamination is being investigated and plans to remediate the area are being prepared.

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NY 11973

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

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ME/TITLE PRINCIPAL EXECUTIVE OFFICER

Ir. Frank Crescenzo

Acting Area Group Manager

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

TELEPHONE DATE

631-344-3424

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

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
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MMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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

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

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E PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS orm 3320-1 (Rev. 3/99) Previous editions may be used.

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DRESS BROOKHAVEN NATIONAL LABORATORY

BROOKHAVEN NATIONAL LABORATORY

NY 11973

USDOF

UPTON

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NY0005835 PERMIT NUMBER

OOT M DISCHARGE NUMBER MAJOR (SUBR 01) F - FINAL

PROCESS SANIT & STORMHTR RNOFF

MONITORING PERIOD YEAR MO DAY YEAR MO DAY

| BROOKHAVEN NAT | | DRATORY IY 11973 | FROM 0.2 | MO DA | | MO DAY | | | | | |
|-------------------------------------|--|--|--------------------|-------|--|----------------|------------------------------|-------------------------|--------|----------------|--|
| ITN: GEORGE MALOSH | | | FROM 02 | 03 0 | 1 TO 02 | 03 31 * | ** NO DIS NOTE: Read inst | CHARGE ructions befo | re con | 本本本 | form. |
| PARAMETER | | | ANTITY OR LOADIN | 1G | QUAL | ITY OR CONCENT | | | NO. | FREQUENCY | SAMPLE |
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| EMPERATURE, WATER EG. FAHRENHEIT | SAMPLE MEASUREMENT | ***** | ***** | | ***** | **** | 54 | (15) | 0 | 5/7 . | GRAB |
| 0011 1 0 0 EFLUENT GROSS VALUE | PERMIT REQUIREMENT | | | *** | | | | 3/25/4 | | | |
| JD. 5-DAY (20 DEG. C) | SAMPLE MEASUREMENT | ***** | ***** | | ***** | < 2 | <2 | (19) | | 3/MO | COMP24 |
| 3310 1 0 0 EFLUENT GROSS VALUE | PERMIT REQUIREMENT | ***** | ****** | **** | | | | #12 H | | | |
| • | SAMPLE MEASUREMENT | ***** | ***** | | 6.1 | ***** | 6.4 | (12) | | Daily | GRAB |
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| TROGEN, TOTAL (AS N) | SAMPLE MEASUREMENT | **** | **** | | ***** | ***** | 7.8 | (19) | 0 | 3/MO | COMP24 |
| 1600 1 0 0 FLUENT GROSS VALUE | | ***** | | *** | | | DAILY P | | | ONCE/ MONTH | COMP2 |
| HAE THO ILL | SAMPLE MEASUREMENT | **** | ***** | | ***** | **** | 0.1 | (19) | 0 | 3/мо | COMP24 |
| 610 1 0 0 FLUENT GROSS VALUE | PERMIT REQUIREMENT | **** | ******* | **** | | | DAILY | X MG/L | | ONCE/ MONTH | |
| ME/TITLE PRINCIPAL EXECUTIVE | Under my direction or num | is occument and all attachs ervision in accordance with operly gather and evaluate i | a avalam destern | 4 | | | TELEPHON | Ε | DA | | |
| • Frank Crescenzo | d. Based on my inquiry of t | he person or persons who w | | 1, | | İ | | | | | |
| ting Area Group Manage | i is, to life best of my know | for gathering the information ledge and belief, true, accur | win and normalist. | e. | | | 631 ₁ -344-: | 3424 | | | |
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ANTITIES OR CONCENTRATIONS OF RADIOACTIVITY IN EFFLUENT ARE SUBJECT TO REQUIREMENTS OF THE USDOE INCL UT NOT LIMITED TO USDOE ORDER 5400.5. APPROX 15% OF STP DISCHARGE CAN BE TO GW VIA EXFILT FROM SFB.S.

DRESS BROOKHAVEN NATIONAL LABORATORY

BROOKHAVEN NATIONAL LABORATORY

USDOE

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Form, Appluses. OMB No. 2040-0004

NYODOS835 PERMIT NUMBER

NY 11973

OOT M DISCHARGE NUMBER MAJOR (SUBR 01) F - FINAL

PROCESS SANIT & STORMWTR RNOFF

MONITORING PERIOD YEAR MO DAY YEAR MO DAY

| TN: GEORGE MALOSH. | | Y 11973 | FROM 02 | 03 (| 1 TO 02 | | ** NO DISC NOTE: Read Instr | | com | *** pleting this | form. |
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| 720 1 0 0 FLUENT GROSS VALUE | | | | *** | | | | 3.71 | | | B. II C to think the start of the |
| IPPER. TOTAL AS CU) | SAMPLE MEASUREMENT | ***** | **** | | **** | * ***** | 0.07 | (19) | 0 | 3/MO | COMP24 |
| 042 1 0 0 FLUENT GROSS VALUE | PERMIT REQUIREMENT | | | *** | | | | MG/L | | MEX | COMP24 |
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| c mord 2 MI) I | SAMPLE MEASUREMENT | ***** | **** | | **** | | 0.008 | (19) | 0 | 3/MO | COMP24 |
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| . Frank Crescenzo ting Area Group Manage | er those submitte | d. Based on my inquiry of persons directly responsible d is, to the best of my know | the person or persons who i for gathering the informat fedge and belief, true, accu | manage the syste ilon, the informal trate, and compl | llon ete. | | | 531 ₇ 344-: | 3424 | • | |
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IMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

JANTITIES OR CONCENTRATIONS OF RADIOACTIVITY IN EFFLUENT ARE SUBJECT TO REQUIREMENTS OF THE USDOE INCL BUT NOT LIMITED TO USDOE ORDER 5400.5. APPROX 15% OF STP DISCHARGE CAN BE TO GW VIA EXFILT FROM SFB S.

FE PERMIT FOR ADDITIONAL NOTES COMMENTS AND REQUIREMENTS

Form 3320-1 (Rev. 3/99) Previous editions may be used.

01254/0203sa4-paf49m.

MONITORING PERIOD

DAY

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USDOE DRESS BROOKHAVEN NATIONAL LABORATORY BROOKHAVEN AREA DEFICE

NYODOS835 PERMIT NUMBER

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MAJOR (SUBR 01) F - FINAL

PROCESS SANIT & STORMWTR RNOFF

DAY 31

*** NO DISCHARGE I

UPT ON NY 11973 BROOKHAVEN NATIONAL LABORATORY ATION UPT ON **FROM** NY 11973 'TN: GEORGE MALOSH. GROUP MGR

NOTE: Read Instructions before completing this form. **PARAMETER** QUANTITY OR LOADING NO. FREQUENCY QUALITY OR CONCENTRATION SAMPLE ΩF EX TYPE ANALYSIS **AVERAGE MAXIMUM** UNITS MINIMUM MAXIMUM UNITS **AVERAGE** SAMPLE INC. TOTAL **** **** **** **** (19) MEASUREMENT 0.1 3/MO COMP24 S ZN) PERMIT **** .092 1 0 0 TINCE! COMP2 REQUIREMENT EL LIENT GROSS *** DAILY MX MG/I HONTH LESS. SAMPLE LUENE **** ***** **** (28) **MEASUREMENT** く1 3/MO GRAB PERMIT 010 1 0 0 WICE/GRAB ***** ***** REQUIREMENT *** ELUENT GROSS VALU HONIH **DAILY HX** UG/L SAMPLE THYLENE CHLORIDE **** **** ***** **** (28) MEASUREMENT 0.7 e Note 2 0 3/MO GRAB PERMIT 423 1 0 0 ***** ***** LIFE AREAS REQUIREMENT ELUENT GROSS VALU *** DAILY HX UG/L HONTH SAMPLE 1.1-TRICHLORO-**** (28) MEASUREMENT HA NE **<** 1 GRAB 3/MO PERMIT 506 1 0 0 2 1 5 I WICE/GRAB ***** ***** REQUIREMENT ELLIENT GROSS VALUE DATLY HX UG/L MONTH SAMPLE .OW. IN CONDUIT OR ** ** ** (03)***** **** CONTINUOUS MEASUREMENT 0.4 0.5 O IRU TREATMENT PLAN PERMIT 1050 1 0 0 REPORT TONTINGCORD REQUIREMENT ELUENT GROSS VALU UOUS DATEY AV DATLY MX MGD *** SAMPLE RCURY. TOTAL **** ***** ***** **** (19 0.0003 3/MO COMP24 MEASUREMENT IS HG) PERMIT .900 1 0 0 **** 0-0008 DNCE/ COMP2 REQUIREMENT FLUENT GROSS VALU DAILY HX MONTH *** MG/L SAMPLE OLIFORM. FECAL **** **** (13) **<** 2 **<** 2 3/MO **GRAB** MEASUREMENT **:NERAL** PERMIT 055 1 0 0 200 400 4/ DNCE/ GRAB REQUIREMENT FLUENT GROSS VAL DAILY MX 100ML HONTH I certify under penalty of law that this document and all attachments were **ME/TITLE PRINCIPAL EXECUTIVE OFFICER** TELEPHONE DATE prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel property gather and evaluate the information . Frank Crescenzo 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 ting Area Group Manager 631-344-3424 submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information **SIGNATURE OF PRINCIPAL EXECUTIVE** including the possibility of fine and imprisonment for knowing violations. TYPED OR PRINTED NUMBER YEĂR OFFICER OR AUTHORIZED AGENT DAY MO

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

IANTITIES OR CONCENTRATIONS OF RADIOACTIVITY IN EFFLUENT ARE SUBJECT TO REQUIREMENTS OF THE USDOE INCL SUT NOT LIMITED TO USDOE ORDER 5400.5%__APPROX 15% OF STP DISCHARGE CAN BE TO GW VIA EXFILT FROM SFB S.

E PERMIT FUR ADDITIONAL NOTES COMMENTS AND REQUIREMENTS Form 3320-1 (Rev. 3/99) Previous editions may be used.

Form Approved. OMB No. 2040-0004

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BROOKHAVEN NATIONAL LABORATORY

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PROCESS SANIT & STORMWTR RNOFF

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ATIONUPTON 02 0301 02 03 31 NOTE: Read Instructions before completing this form. TN: GEORGE MALOSH. GROUP MGR FREQUENCY **PARAMETER** NO. **QUANTITY OR LOADING** SAMPLE QUALITY OR CONCENTRATION EX **TYPE** ANALYSIS **AVERAGE MAXIMUM** UNITS MINIMUM AVERAGE **MAXIMUM** UNITS SAMPLE **BUTANONE** **** (28) **** **** **4** 5 0 MEASUREMENT B/MO GRAB PERMIT 356 1 0 0 50 WICE/GRAB REQUIREMENT **ELUENT GROSS VAL** HONTHE DAILY MX UG/L SAMPLE D. 5-DAY PERCENT (23] > 98 MEASUREMENT 11 /MO CALCID MOVAL See Note 7 PERMIT 010 K 0 0 85 DNCE/ CALCU 'ER-REQUIREMENT RC ENTR EMOVAL HD AY HN HONTH *** CENT SAMPLE LIDS, SUSPENDED **** (23) > 98 CALCID **MEASUREMENT** O IL/MO RCENT REMOVAL PERMIT 011 K 0 0 85 ONEF CALCIO ÞER-REQUIREMENT THE MONTH RC ENTR ENOVAL Section 18 Section 18 *** CENT. SAMPLE ! Note 7 **MEASUREMENT** PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE **MEASUREMENT** PERMIT REQUIREMENT

| AE/TITLE | PRINCIPAL | EXECUTIVE | OFFICER |
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Frank Crescenzo ing Area Group Manager

TYPED OR PRINTED

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

TELEPHONE DATE 631-344-3424 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT NUMBER YEAR MO DAY

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

SAMPLE MEASUREMENT PERMIT REQUIREMENT

ANTITIES OR CONCENTRATIONS OF RADIOACTIVITY IN EFFLUENT ARE SUBJECT TO REQUIREMENTS OF THE USDOE INCL UT NOT LIMITED TO USDOE ORDER 5400.5. APPROX 15% OF STP DISCHARGE CAN BE TO GW VIA EXFILT FROM SFB.S.

E PERMIT FOR ADDITIONAL NOTES COMMENTS AND REQUIREMENTS orm 3320-1 (Rev. 3/99) Previous editions may be used.

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MAJOR (SUBR 01) F - FINAL

PROCESS SANIT EFFL & STORMHTR

MONITORING PERIOD YEAR MO DAY YEAR MO DAY

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

B ANALYSIS TO USE EPA METHOD 608 WITH AN MOL GOAL OF 0.065 PPB

UPTON

DRESS BROOKHAVEN NATIONAL LABORATORY

BROOKHAVEN NATIONAL LABORATORY

NY 11973

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MAJOR (SUBR 01) F - FINAL

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| ting Area Group Manager submitted is, to the best of my knowledge and better, true, accurate, and complete. | |
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SCHARGE MAY BE DIRECTED TO SURROUNDING LOW LYING AREA INSIDE ROADWAY THAT IS INSIDE RHIC RING. ONCE TORMWATER COLLECTION SYSTEM IS EXTENDED TO BLDG 1010 & A NEW RECHARGE BASIN IS CONSTRUCTED, DISCHARGE

HOULD BE TO NEW BASIN. Form 3320-1 (Rev. 3/99) Previous editions may be used.

UPTON

DRESS BROOKHAVEN NATIONAL LABORATORY

BROOKHAVEN NATIONAL LABORATORY

NY 11973

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

Form Approved. OMB No. 2040-0004

NY0005835 **PERMIT NUMBER**

OO2 M DISCHARGE NUMBER MAJOR (SUBR 01) F - FINAL

AGS NON-C COOLNG. PRCP. ETC (HN)

*** NO DISCHARGE !

MONITORING PERIOD MO DAY YEAR MO DAY FROM 02 03 01 02 03 31

CATIONUPTON NY 11973 NOTE: Read instructions before completing this form. TN: GEORGE MALOSH. GROUP MGR **PARAMETER** NO. FREQUENCY **QUANTITY OR LOADING QUALITY OR CONCENTRATION** SAMPLE OF EX TYPE ANALYSIS **AVERAGE MAXIMUM** UNITS MINIMUM AVERAGE **MAXIMUM** UNITS SAMPLE **** **** **** (12)MEASUREMENT 7.4 8.1 4/MO GRAB PERMIT 44010 1400 1 0 0 ***** ***** *** REPORT GRAB INCE REQUIREMENT and the second ELUENT GROSS VAL AND LOCAL PROPERTY. MONTH MINTMIN SAMPLE L & GREASE (19) **** MEASUREMENT **く** 5 O 1 /MO **GRAB** PERMIT JUNE 115 1556 1 0 ER AB REQUIREMENT FLUENT GROSS VALU HONTH DATIVERK MG/L SAMPLE .OW. IN CONDUIT OR **** (03) **MEASUREMENT** 0.03 4/MO 0 RCORDE IRU TREATMENT PLAN PERMIT)050 1 0 0 REPORT THEE! REQUIREMENT FLUENT GROSS VALU DATLY MX MGD **** HONTH SAMPLE e Note 3 **MEASUREMENT** PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE **MEASUREMENT** PERMIT REQUIREMENT I certify under penalty of law that this document and all attachments were ME/TITLE PRINCIPAL EXECUTIVE OFFICER **TELEPHONE** DATE prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. 631-344-3424 I am aware that there are significant penalties for submitting false information, **BIGNATURE OF PRINCIPAL EXECUTIVE** TYPED OR PRINTED including the possibility of fine and imprisonment for knowing violations. NUMBER YEAR DAY OFFICER OR AUTHORIZED AGENT MO

r. Frank Crescenzo cting Area Group Manager CODE

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

EE PERMIT FOR ADDITIONL NOTES. COMMENTS AND REQUIREMENTS. AMPLNG FOR THIS OUTFALL SHALL BE CONDUCTED AT A LOCATION DOWNSTREAM OF WHERE EXISTING DISCHARGE MIXES

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USDDE DRESS BROOKHAVEN NATIONAL LABORATORY

BROOKHAVEN AREA OFFICE UPTON NY 11973

BROOKHAVEN NATIONAL LABORATORY ATION HOT ON

NY0005835 PERMIT NUMBER

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MONITORING PERIOD YEAR MO DAY YEAR MO MAJOR (SUBR 01) F - FINAL

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| ME/TITLE PRINCIPAL EXECUTIVE | prepare | d under my direction or sup | his document and all attachs ervision in accordance with | a system designe | sd. | | | TELEPHON | 1E | D/ | ATE |
| r. Frank Crescenzo | to assure submitte or those | e that qualified personnel pr ed. Based on my inquiry of persons directly responsible | roperly gather and evaluate the person or persons who r tor gathering the informati | the information manage the system ion, the information | n, Ion | | | | | | |
| cting Area Group Manag | submitte | ed is, to the best of my know | viedge and belief, true, accu t penalties for submitting fa | rate, and comple | te. | ATURE OF PRINCIPAL | | 31-344-3 | 424 | <u> </u> | |
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AMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

3 ADDITIONAL WATER TREATMENT CHEMICAL ADDITIVES W/O PRIOR NYSDEC APPROVAL

EE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS

AMPLING TO BE DOWNSTREAM OF WHERE EXISTING DISCHARGE MIXES WITH COOLING TOWER BLOWDOWN FROM STAR DETECTR Form 3320-1 (Rev. 3/99) Previous editions may be used.

UPTON

MONITORING PERIOD

YEAR MO DAY YEAR MO DAY

USDBE DRESS BROOKHAVEN NATIONAL LABORATORY BROOKHAVEN AREA DFFICE

NY 11973 BROOKHAVEN NATIONAL LABORATORY

NYDOD5835 PERMIT NUMBER

002 8 DISCHARGE NUMBER MAJOR (SUBR 01) F - FINAL

RF(1004) & BRAHMS(1002) BLOWDN

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ME/TITLE PRINCIPAL EXECUTIVE OFFICER

:. Frank Crescenzo sting Area Group Manager TYPED OR PRINTED

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

TELEPHONE DATE 631-344-3424 SIGNATURE OF PRINCIPAL EXECUTIVE NUMBER YEÄR OFFICER OR AUTHORIZED AGENT MO DAY

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

MEASUREMENT PERMIT REQUIREMENT

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DRESS BROOKHAVEN NATIONAL LABORATORY

BROOKHAVEN NATIONAL LABORATORY

NY 11973

USDOE

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

Form Approved. OMB No. 2040-0004

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005 M DISCHARGE NUMBER MAJOR (SUBR 01) F - FINAL

NSLS COOLING TOWN BLON ETC(HS)

*** NO DISCHARGE |

MONITORING PERIOD YEAR MO DAY YEAR MO DAY 02 03 01 02 03 31

:ATION UPT ON NY:11973 NOTE: Read Instructions before completing this form. TN: GEORGE MALOSH. GROUP MGR NO. FREQUENCY **PARAMETER** QUANTITY OR LOADING SAMPLE QUALITY OR CONCENTRATION OF EX TYPE ANALYSIS **AVERAGE MAXIMUM** UNITS MINIMUM **AVERAGE MAXIMUM** UNITS SAMPLE **** (12) **** ***** 7.6 8.3 0 4/MO **GRAB** MEASUREMENT PERMIT GRAB! DHCE/ REPORT 8.5 1 0 0 REQUIREMENT HONTHUM SU FLUENT GROSS VALUE MINIMUM HAXIHUH SAMPLE ***** (19)L & GREASE **** **** < 5 ¹ 0 GRAB MEASUREMENT PERMIT 15 DNCE! GRAB 1556 1 0 0 REQUIREMENT MONTH FLUENT GROSS VALUE DAILY HX MG/L SAMPLE .OW. IN CONDUIT OR (03) **** ***** **** 0.3 4/MO RCORDR MEASUREMENT IRU TREATMENT PLANT PERMIT DNCE/ RCORDA REPORT ***** REPORT 1050 1 0 1 REQUIREMENT MONTH *** FLUENT GROSS VALU DAILY MX MGD e Note 3 SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT der penalty of law that this document and all attachments were ME/TITLE PRINCIPAL EXECUTIVE OFFICER TELEPHONE DATE prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, :. Frank Crescenzo or those persons directly responsible for gathering the information, the information 631-344-3424 submitted is, to the best of my knowledge and belief, true, accurate, and complete. ting Area Group Manager I am aware that there are significant penalties for submitting false information, SIGNATURE OF PRINCIPAL EXECUTIVE NUMBER YEĂR OFFICER OR AUTHORIZED AGENT MO DAY

TYPED OR PRINTED

including the possibility of fine and imprisonment for knowing violations.

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

!E PERMIT FOR ADDITIONAL NOTES. COMMENTS & REQUIREMENTS

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FROM

NY 0005835 PERMIT NUMBER BROOKHAVEN AREA DEFTCE UPTON NY 11973 MONITORING PERIOD BROOKHAVEN NATIONAL LABORATORY YEAR МО DAY ATION LIPT ON

005 0 DISCHARGE NUMBER

YEAR MO DAY

(SUBR 01) F - FINAL NSLS COOLG TOWN BLOWDN FICCHS)

*** NO DISCHARGE I

NY 11973 02 03 31 TN: GEORGE MALOSH. GROUP HGR NOTE: Read instructions before completing this form. **PARAMETER** QUANTITY OR LOADING FREQUENCY NO. **QUALITY OR CONCENTRATION** SAMPLE EX TYPE ANALYSIS **AVERAGE MAXIMUM** UNITS MINIMUM **AVERAGE MAXIMUM** UNITS SAMPLE IPPER. TOTAL ***** **** ***** **** (19) MEASUREMENT AS CU) See Note 1 0.004 0 OTRLY GRAB PERMIT 042 1 0 0 DIRLY CRAR REQUIREMENT **ELUENT GROSS VALU** DATLY MG/L SAMPLE HYDROXY-ETHYL IDENE **** ***** (19) MEASUREMENT **<** 0.05 OTRLY GRAB PERMIT 812 1 0 0 0.5 DIRLY GRAB REQUIREMENT FLUENT GROSS VALUE DAILY HX MG/L SAMPLE LY TRIA ZOLE **** (19) **<** 0.005 MEASUREMENT OTRLY GRAB PERMIT 813 1 0 0 #** 0.2 TRLY GRAB REQUIREMENT **ELUENT GROSS VALUE** DAILY MX MG/L SAMPLE **MEASUREMENT** PERMIT REQUIREMENT SAMPLE **MEASUREMENT** PERMIT REQUIREMENT SAMPLE **MEASUREMENT** PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT I certify under penalty of law that this document and all attachments were **VE/TITLE PRINCIPAL EXECUTIVE OFFICER TELEPHONE** DATE

. Frank Crescenzo ting Area Group Manager TYPED OR PRINTED

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

631-344-3424 **BIGNATURE OF PRINCIPAL EXECUTIVE** OFFICER OR AUTHORIZED AGENT NUMBER YEAR MO DAY

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

ADDITIONAL WATER TREATMENT CHEMICAL ADDITIVES W/O PRIOR NYSDEC APPROVAL E PERMIT FOR ADDITIONAL NOTES. COMMENTS AND REQUIREMENTS

CILITY BROOKHAVEN NATIONAL LABORATORY

UPTON

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

Form Approved. OMB No. 2040-0004

USDDE DRESS BROOKHAVEN NATIONAL LABORATORY BROOKHAVEN AREA OFFICE

NY 11973

NY0005835 **PERMIT NUMBER**

007 M DISCHARGE NUMBER

MAJOR (SUBR 01) F - FINAL

WATER TREATMENT PLT BKWSH (HX)

MONITORING PERIOD YEAR MO DAY YEAR MO DAY FROM 02 03 01 TO 02 03 31

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| Frank Crescenzo sing Area Group Manager submitted. Based on my or those persons directly submitted is, to the best | | | el properly gather and evaluate the information y of the person or persons who manage the system, sible for gathering the information, the information knowledge and belief, true, accurate, and complete. | | | SIGNATURE OF PRINCIPAL EXECUTIVE | | | 424 | • | |
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IMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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E PERMIT FOR ADDITIONL NOTES, COMMENTS & REQUIREMENTS

Form 3320-1 (Rev. 3/99) Previous editions may be used.

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UPTON

DORESS BROOKHAVEN NATIONAL LABORATORY

NY0005835 PERMIT NUMBER

OOS M DISCHARGE NUMBER HAJOR

. 4 (SUBR 01) F - FINAL STORMWTR RUNOFF WAREHOUSE (HW)

NY 11973 BROOKHAVEN NATIONAL LABORATORY

MONITORING PERIOD YEAR MO DAY YEAR MO DAY

| PROOKHAVEN NATIONAL LABORATORY OCATION UPT ON NY 11973 FROM 02 03 01 TO 02 03 31 *** NO DISCHARGE *** NOTE: Read instructions before completing the | | | | | | | | | | | |
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| ir. Frank Crescenzo | d. Based on my inquiry of t persons directly responsible | he person or persons who n for eathering the informati | anage the system | ! | | | | | . | | |
| cting Area Group Manag | er submitte | d is, to the best of my know are that there are significant | ledge and belief, true, accur | ale, and complete | . — | SIGNATURE OF PRINCIPAL EXECUTIVE AREA CODE | | | 3424 | | |
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MMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

ARAMETERS EXCEPT FOR FLOW TO BE SAMPLED MONTHLY DURING A STORM EVENT. (IF NO DISCHARGE, ENTER AN "X" IN THE "NO DISCHARGE" BOX AT THE UPPER RIGHT.) SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS & REQUIREMENTS.

HIDTON

USDOE HORESS BROOKHAVEN NATIONAL LABORATORY **BROOKHAVEN AREA DFFICE**

MV 11072

NY0005835 PERMIT NUMBER

0.08 0 DISCHARGE NUMBER MAJOR (SUBR 01) F - FINAL SW RUNOFF FROM WAREHOUSE AREA

*** NO DISCHARGE ! ! ***

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| ITN: GEORGE MALOSH | | Y 11973 R | FROM 02 | 03 0 | <u>)1</u>] 10 [| 02 | 03 31 ** | k* NO DI: lote: Read ine | SCHARGE tructions before | re com | 本本本 pleting this | form. |
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AMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DORESS BROOKHAVEN NATIONAL LABORATORY

NY 11973

USDDE

UPTON

Form Approved. OMB No. 2040-0004

DIO M DISCHARGE NUMBER

MAJOR (SUBR 01) F - FINAL

STORMWIR R O CENTRAL STEAM (H)

NY0005835 PERMIT NUMBER

MONITORING PERIOD YEAR MO DAY YEAR MO DAY 02 03 01 02 03

ACILITY BROOKHAVEN NATIONAL LABORATORY DCATION UPT ON *** NO DISCHARGE I NY 11973 31 NOTE: Read instructions before completing this form. ITN: GEORGE MALOSH. GROUP MGR NO. FREQUENCY **PARAMETER** SAMPLE QUANTITY OR LOADING **QUALITY OR CONCENTRATION** EX TYPE ANALYSIS **AVERAGE MAXIMUM** UNITS MINIMUM **AVERAGE MAXIMUM** UNITS LOW RATE SAMPLE **** (07)***** ***** **** MEASUREMENT 48828 1/MO INSTAN PERMIT 0056 1 0 0 REPORT REQUIREMENT **EFLUENT GROSS VAI** **** HINTH DATEY MY GPD SAMPLE **** ***** (12)MEASUREMENT 7.4 GRAB 7.4 0 1/MO PERMIT GRAB 3400 1 0 D REPORT 8.5 DNCE REQUIREMENT FFLUENT GROSS VALUE MONTH MAYTHUM SU MINI MUM SAMPLE IL & GREASE **** (19)**** MEASUREMENT **<** 5 0 1/MO GRAB PERMIT 0556 1 INCE! GRAB 0 REQUIREMENT **EFLUENT GROSS VALUE** HG/L HONTH DAILY HX SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE **MEASUREMENT** PERMIT REQUIREMENT ME/TITLE PRINCIPAL EXECUTIVE OFFICER **TELEPHONE** DATE prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, r. Frank Crescenzo or those persons directly responsible for gathering the information, the information 631-344-3424 submitted is, to the best of my knowledge and belief, true, accurate, and complete. cting Area Group Manager I am aware that there are significant penalties for submitting false information, SIGNATURE OF PRINCIPAL EXECUTIVE including the possibility of fine and imprisonment for knowing violations. NUMBER YEAR OFFICER OR AUTHORIZED AGENT MO DAY

TYPED OR PRINTED

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

ARAMETERS EXCEPT FOR FLOW TO BE SAMPLED MONTHLY DURING STORM EVENT. (IF NO DISCHARGE, ENTER "X" IN THE "NO DISCHARGE" BOX AT THE UPPER RIGHT). SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS

DORESS BROOKHAVEN NATIONAL LABORATORY

ICILITY BROOKHAVEN NATIONAL LABORATORY

NY 11973

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NY0005835 PERMIT NUMBER

010 0 DISCHARGE NUMBER MAJOR (SUBR 01) F - FINAL

SW RUNDEF FROM CENTRAL STM (H)

*** NO DISCHARGE |

MONITORING PERIOD YEAR MO DAY YEAR MO DAY **FROM** 02 03 01 TO 02 31 03

HEATION UPT ON NY 11973 NOTE: Read instructions before completing this form. ITN: GEORGE MALOSH. GROUP MGR **PARAMETER** FREQUENCY QUANTITY OR LOADING NO. SAMPLE QUALITY OR CONCENTRATION EX TYPE ANALYSIS **AVERAGE MAXIMUM** UNITS MINIMUM **AVERAGE** MAXIMUM UNITS SAMPLE OPPER. TOTAL **** **** ***** **** (19) MEASUREMENT 0.01 OTRLY GRAB (AS CU)See Note 1 PERMIT 1042 1 0 0 TRLY GRAB REQUIREMENT **EFLUENT GROSS VALUE** HG/L **** DAILY SAMPLE EAD. TOTAL (19) ***** ***** MEASUREMENT 0.09 1 **QTRLY** GRAB AS PB See Note 10 PERMIT -05 11051 1 0 0 DIRLY GRAB REQUIREMENT FFLUENT GROSS VALUE *** DAILY HX MG/L SAMPLE LUMINUM. TOTAL ***** (19) MEASUREMENT 1.2 **OTRLY** GRAB ee NotéAS AL) 2 PERMIT 11105 1 0 0 mars 2.0 OTRLY GRAB REQUIREMENT FFLUENT GROSS VALUE *** DAILY HX MG/L SAMPLE 'ANADIUM, TOTAL (AS V) **** ***** *** ***** **MEASUREMENT** ***** 0.02 0 OTRLY GRAB FFLUENT GROSS VALUE PERMIT EE NOTES 1 and 9 **** ***** REPORT **** **** REQUIREMENT State of the state of the ite de la lacida Daily MY MG/I. OTRLY CRAR. SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE MEASUREMENT PERMIT REQUIREMENT SAMPLE **MEASUREMENT** PERMIT REQUIREMENT ler penalty of law that this document and all attachments were AME/TITLE PRINCIPAL EXECUTIVE OFFICER **TELEPHONE** DATE prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, ir. Frank Crescenzo 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. Acting Area Group Manager 631-344-3424 I am aware that there are significant penalties for submitting false information, SIGNATURE OF PRINCIPAL EXECUTIVE TYPED OR PRINTED including the possibility of fine and imprisonment for knowing violations. OFFICER OR AUTHORIZED AGENT NUMBER YEAR MO DAY

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

USDOE DORESS BROOKHAVEN NATIONAL LABORATORY

BROOKHAVEN AREA OFFICE UPTON NY 11973

BROOKHAVEN NATIONAL LABORATORY CATION UPT ON

NY0005835 PERMIT NUMBER

D6A M DISCHARGE NUMBER

MONITORING PERIOD FROM 02 03 01 TO 02 03 31 MAJOR (SUBR 01) F - FINAL

LINAC NCCH, FLOOR DNS, ETC(HT1)

*** NO DISCHARGE I I ***

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| r. Frank Crescenzo eting Area Group Manage | to assure submitte or those submitte | e that qualified personnel pr ed. Based on my inquiry of persons directly responsible ed is, to the best of my know | roperly gather and evaluate the person or persons who re for gathering the informati riedge and belief, true, accu | the information nanage the syste ion, the informat rate, and comple | m, ilon | | | 631-344-3 | 3424 | · | |
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MMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS

UPTON

PERMIT NUMBER

Form Approved. OMB No. 2040-0004

USDOE DORESS BROOKHAVEN NATIONAL LABORATORY

NY0005835 **BROOKHAVEN AREA DEFICE** NY 11973

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

10 ADDITIONAL WATER TREATMENT CHEMICAL ADDITIVES W/O PRIOR NYSDEC APPROVAL EE PERMIT FOR ADDITIONAL NOTES. COMMENT AND REQUIREMENTS

ADDRESS BROOKHAVEN NATIONAL LABORATORY

NY 11973

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

Form Approved. OMB No. 2040-0004

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NY0005835

068 M DISCHARGE NUMBER MAJOR (SUBR 01) F - FINAL

COOLING TOWR FROM 919 ETC(HT2)

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IDDRESS BROOKHAVEN NATIONAL LABORATORY

BROOKHAVEN NATIONAL LABORATORY

NY 11973

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COOLG TOWRS FROM 919 ETC (HT2)

MONITORING PERIOD YEAR MO DAY YEAR MO DAY

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| Ir. Frank Crescenzo | or those submitte | persons directly responsible for gathering the information, the information and is, to the best of my knowledge and belief, true, accurate, and complete. | | | | ilon ete. | | | | -3424 | 1. | |
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