



The power to change life.
The energy to make it happen.®

NRG REMA LLC
Warren Generating Station
20085 Route 6
Warren, PA 16365
Telephone: (724) 597-8633

NPDES Permit No. PA0005053
Renewal Application
NRG Warren Generating Station

NRG REMA LLC
Warren Generating Station
Warren, PA
September 2016

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Warren, PA
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Section 1
General Information Form

Form



pennsylvania

DEPARTMENT OF ENVIRONMENTAL PROTECTION

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION

GENERAL INFORMATION FORM – AUTHORIZATION APPLICATION

Before completing this General Information Form (GIF), read the step-by-step instructions provided in this application package. This version of the General Information Form (GIF) must be completed and returned with any program-specific application being submitted to the Department.

Related ID#s (If Known)		RECEIVED DEP USE ONLY Date Received & General Notes SEP 29 2016 <i>Environmental Protection Northwest Regional Office</i>
Client ID# 135779	APS ID#	
Site ID#	Auth ID# 1007342	
Facility ID#		

CLIENT INFORMATION

DEP Client ID#	Client Type / Code LLC			
Organization Name or Registered Fictitious Name NRG REMA LLC		Employer ID# (EIN) 522154847	Dun & Bradstreet ID# 082679788	
Individual Last Name N/A	First Name N/A	MI N/A	Suffix N/A	SSN N/A
Additional Individual Last Name N/A	First Name N/A	MI N/A	Suffix N/A	SSN N/A
Mailing Address Line 1 121 Champion Way		Mailing Address Line 2 STE 300		
Address Last Line – City Canonsburg		State PA	ZIP+4 15317-5817	Country USA
Client Contact Last Name Vondracek	First Name Sarah	MI H	Suffix Ms.	
Client Contact Title Environmental Specialist		Phone 724-597-8633	Ext N/A	
Email Address Sarah.Vondracek@nrg.com		FAX 724-597-8870		

SITE INFORMATION

DEP Site ID#	Site Name Warren Generating Station			
EPA ID#	Estimated Number of Employees to be Present at Site			1-4
Description of Site Electric generating station - currently closed				
County Name	Municipality	City	Boro	Twp State
Warren	Conewango	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> State
County Name	Municipality	City	Boro	Twp State
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> State
Site Location Line 1 20085 Route 6		Site Location Line 2		
Site Location Last Line – City Warren		State PA	ZIP+4 16365	
Detailed Written Directions to Site From Meadville, take PA-27 East through Titusville to the junction with US-6 at Pittsfield. Follow US-6 East through Youngsville toward the city of Warren. Warren Generating Station will be on the right before entering the city of Warren.				
Site Contact Last Name Erickson	First Name Al	MI	Suffix Mr.	
Site Contact Title Mobile Maintenance Service Technician		Site Contact Firm		
Mailing Address Line 1 20085 Route 6		Mailing Address Line 2		

Mailing Address Last Line – City Warren			State PA	ZIP+4 16365
Phone 814-726-8349	Ext	FAX N/A	Email Address Al.Erickson@nrg.com	
NAICS Codes (Two- & Three-Digit Codes – List All That Apply) 221			6-Digit Code (Optional)	

Client to Site Relationship
OWNOP

FACILITY INFORMATION

Modification of Existing Facility		Yes	No
1.	Will this project modify an existing facility, system, or activity?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.	Will this project involve an addition to an existing facility, system, or activity?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If "Yes", check all relevant facility types and provide DEP facility identification numbers below.

Facility Type	DEP Fac ID#	Facility Type	DEP Fac ID#
<input type="checkbox"/> Air Emission Plant		<input type="checkbox"/> Industrial Minerals Mining Operation	
<input type="checkbox"/> Beneficial Use (water)		<input type="checkbox"/> Laboratory Location	
<input type="checkbox"/> Blasting Operation		<input type="checkbox"/> Land Recycling Cleanup Location	
<input type="checkbox"/> Captive Hazardous Waste Operation		<input type="checkbox"/> MineDrainageTrmt/LandRecyProjLocation	
<input type="checkbox"/> Coal Ash Beneficial Use Operation		<input type="checkbox"/> Municipal Waste Operation	
<input type="checkbox"/> Coal Mining Operation		<input type="checkbox"/> Oil & Gas Encroachment Location	
<input type="checkbox"/> Coal Pillar Location		<input type="checkbox"/> Oil & Gas Location	
<input type="checkbox"/> Commercial Hazardous Waste Operation		<input type="checkbox"/> Oil & Gas Water Poll Control Facility	
<input type="checkbox"/> Dam Location		<input type="checkbox"/> Public Water Supply System	
<input type="checkbox"/> Deep Mine Safety Operation -Anthracite		<input type="checkbox"/> Radiation Facility	
<input type="checkbox"/> Deep Mine Safety Operation -Bituminous		<input type="checkbox"/> Residual Waste Operation	
<input type="checkbox"/> Deep Mine Safety Operation -Ind Minerals		<input type="checkbox"/> Storage Tank Location	
<input type="checkbox"/> Encroachment Location (water, wetland)		<input type="checkbox"/> Water Pollution Control Facility	
<input type="checkbox"/> Erosion & Sediment Control Facility		<input type="checkbox"/> Water Resource	
<input type="checkbox"/> Explosive Storage Location		<input type="checkbox"/> Other:	

Latitude/Longitude Point of Origin	Latitude			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	41	49	48	79	11	24
Horizontal Accuracy Measure	Feet			--or-- Meters		
Horizontal Reference Datum Code	<input type="checkbox"/> North American Datum of 1927 <input checked="" type="checkbox"/> North American Datum of 1983 <input type="checkbox"/> World Geodetic System of 1984					
Horizontal Collection Method Code	TIGER					
Reference Point Code	CENTER					
Altitude	Feet			--or-- Meters		
Altitude Datum Name	<input checked="" type="checkbox"/> The National Geodetic Vertical Datum of 1929 <input type="checkbox"/> The North American Vertical Datum of 1988 (NAVD88)					
Altitude (Vertical) Location Datum Collection Method Code	TOPO					
Geometric Type Code	POINT					
Data Collection Date	November 25, 2005					
Source Map Scale Number	1	Inch(es)	=	2000	Feet	
	--or--	Centimeter(s)	=		Meters	

PROJECT INFORMATION

Project Name Warren Generating Station			
Project Description Renewal of NPDES permit for this facility. This is a closed station.			
Project Consultant Last Name	First Name	MI	Suffix
N/A			
Project Consultant Title	Consulting Firm		
Mailing Address Line 1	Mailing Address Line 2		

Address Last Line – City		State	ZIP+4
Phone	Ext	FAX	Email Address
Time Schedules September 2016	Project Milestone (Optional) A renewal application is being submitted within 180 days of expiration date of the existing NPDES permit for the facility		
1. Have you informed the surrounding community and addressed any concerns prior to submitting the application to the Department?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
2. Is your project funded by state or federal grants?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Note: If "Yes", specify what aspect of the project is related to the grant and provide the grant source, contact person and grant expiration date. Aspect of Project Related to Grant _____ Grant Source: _____ Grant Contact Person: _____ Grant Expiration Date: _____			
3. Is this application for an authorization on Appendix A of the Land Use Policy? (For referenced list, see Appendix A of the Land Use Policy attached to GIF instructions)		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Note: If "No" to Question 3, the application is not subject to the Land Use Policy. If "Yes" to Question 3, the application is subject to this policy and the Applicant should answer the additional questions in the Land Use Information section.			
LAND USE INFORMATION			
Note: Applicants are encouraged to submit copies of local land use approvals or other evidence of compliance with local comprehensive plans and zoning ordinances.			
1. Is there an adopted county or multi-county comprehensive plan?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
2. Is there an adopted municipal or multi-municipal comprehensive plan?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3. Is there an adopted county-wide zoning ordinance, municipal zoning ordinance or joint municipal zoning ordinance?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Note: If the Applicant answers "No" to either Questions 1, 2 or 3, the provisions of the PA MPC are not applicable and the Applicant does not need to respond to questions 4 and 5 below. If the Applicant answers "Yes" to questions 1, 2 and 3, the Applicant should respond to questions 4 and 5 below.			
4. Does the proposed project meet the provisions of the zoning ordinance or does the proposed project have zoning approval? If zoning approval has been received, attach documentation.		<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Have you attached Municipal and County Land Use Letters for the project?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

COORDINATION INFORMATION

Note: The PA Historical and Museum Commission must be notified of proposed projects in accordance with DEP Technical Guidance Document 012-0700-001 and the accompanying Cultural Resource Notice Form.

If the activity will be a mining project (i.e., mining of coal or industrial minerals, coal refuse disposal and/or the operation of a coal or industrial minerals preparation/processing facility), respond to questions 1.0 through 2.5 below.

If the activity will not be a mining project, skip questions 1.0 through 2.5 and begin with question 3.0.

1.0	Is this a coal mining project? If "Yes", respond to 1.1-1.6. If "No", skip to Question 2.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
1.1	Will this coal mining project involve coal preparation/ processing activities in which the total amount of coal prepared/processed will be equal to or greater than 200 tons/day?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.2	Will this coal mining project involve coal preparation/ processing activities in which the total amount of coal prepared/processed will be greater than 50,000 tons/year?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.3	Will this coal mining project involve coal preparation/ processing activities in which thermal coal dryers or pneumatic coal cleaners will be used?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.4	For this coal mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.5	Will this coal mining project involve the construction of a permanent impoundment meeting one or more of the following criteria: (1) a contributory drainage area exceeding 100 acres; (2) a depth of water measured by the upstream toe of the dam at maximum storage elevation exceeding 15 feet; (3) an impounding capacity at maximum storage elevation exceeding 50 acre-feet?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.6	Will this coal mining project involve underground coal mining to be conducted within 500 feet of an oil or gas well?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.0	Is this a non-coal (industrial minerals) mining project? If "Yes", respond to 2.1-2.6. If "No", skip to Question 3.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
2.1	Will this non-coal (industrial minerals) mining project involve the crushing and screening of non-coal minerals other than sand and gravel?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.2	Will this non-coal (industrial minerals) mining project involve the crushing and/or screening of sand and gravel with the exception of wet sand and gravel operations (screening only) and dry sand and gravel operations with a capacity of less than 150 tons/hour of unconsolidated materials?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.3	Will this non-coal (industrial minerals) mining project involve the construction, operation and/or modification of a portable non-metallic (i.e., non-coal) minerals processing plant under the authority of the General Permit for Portable Non-metallic Mineral Processing Plants (i.e., BAQ-PGPA/GP-3)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.4	For this non-coal (industrial minerals) mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.5	Will this non-coal (industrial minerals) mining project involve the construction of a permanent impoundment meeting one or more of the following criteria: (1) a contributory drainage area exceeding 100 acres; (2) a depth of water measured by the upstream toe of the dam at maximum storage elevation exceeding 15 feet; (3) an impounding capacity at maximum storage elevation exceeding 50 acre-feet?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

3.0	Will your project, activity, or authorization have anything to do with a well related to oil or gas production, have construction within 200 feet of, affect an oil or gas well, involve the waste from such a well, or string power lines above an oil or gas well? If "Yes", respond to 3.1-3.3. If "No", skip to Question 4.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
3.1	Does the oil- or gas-related project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a watercourse, floodway or body of water (including wetlands)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
3.2	Will the oil- or gas-related project involve discharge of industrial wastewater or stormwater to a dry swale, surface water, ground water or an existing sanitary sewer system or storm water system? If "Yes", discuss in <i>Project Description</i> .	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
3.3	Will the oil- or gas-related project involve the construction and operation of industrial waste treatment facilities?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
4.0	Will the project involve a construction activity that results in earth disturbance? If "Yes", specify the total disturbed acreage.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
4.0.1	Total Disturbed Acreage				
5.0	Does the project involve any of the following? If "Yes", respond to 5.1-5.3. If "No", skip to Question 6.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.1	Water Obstruction and Encroachment Projects – Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a watercourse, floodway or body of water?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
5.2	Wetland Impacts – Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a wetland?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
5.3	Floodplain Projects by the commonwealth, a Political Subdivision of the commonwealth or a Public Utility – Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a floodplain?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
6.0	Will the project involve discharge of stormwater or wastewater from an industrial activity to a dry swale, surface water, ground water or an existing sanitary sewer system or separate storm water system?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
7.0	Will the project involve the construction and operation of industrial waste treatment facilities?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
8.0	Will the project involve construction of sewage treatment facilities, sanitary sewers, or sewage pumping stations? If "Yes", indicate estimated proposed flow (gal/day). Also, discuss the sanitary sewer pipe sizes and the number of pumping stations/treatment facilities/name of downstream sewage facilities in the <i>Project Description</i> , where applicable.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
8.0.1	Estimated Proposed Flow (gal/day)				
9.0	Will the project involve the subdivision of land, or the generation of 800 gpd or more of sewage on an existing parcel of land or the generation of an additional 400 gpd of sewage on an already-developed parcel, or the generation of 800 gpd or more of industrial wastewater that would be discharged to an existing sanitary sewer system?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
9.0.1	Was Act 537 sewage facilities planning submitted and approved by DEP? If "Yes" attach the approval letter. Approval required prior to 105/NPDES approval.	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
10.0	Is this project for the beneficial use of biosolids for land application within Pennsylvania? If "Yes" indicate how much (i.e. gallons or dry tons per year).	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
10.0.1	Gallons Per Year (residential septage)				
10.0.2	Dry Tons Per Year (biosolids)				
11.0	Does the project involve construction, modification or removal of a dam? If "Yes", identify the dam.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
11.0.1	Dam Name				

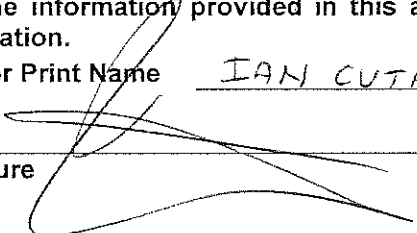
12.0	Will the project interfere with the flow from, or otherwise impact, a dam? If "Yes", identify the dam.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
12.0.1	Dam Name				
13.0	Will the project involve operations (excluding during the construction period) that produce air emissions (i.e., NOX, VOC, etc.)? If "Yes", identify each type of emission followed by the amount of that emission.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
13.0.1	Enter all types & amounts of emissions; separate each set with semicolons.				
14.0	Does the project include the construction or modification of a drinking water supply to serve 15 or more connections or 25 or more people, at least 60 days out of the year? If "Yes", check all proposed sub-facilities.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
14.0.1	Number of Persons Served				
14.0.2	Number of Employee/Guests				
14.0.3	Number of Connections				
14.0.4	Sub-Fac: Distribution System	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.5	Sub-Fac: Water Treatment Plant	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.6	Sub-Fac: Source	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.7	Sub-Fac: Pump Station	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.8	Sub Fac: Transmission Main	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.0.9	Sub-Fac: Storage Facility	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
15.0	Will your project include infiltration of storm water or waste water to ground water within one-half mile of a public water supply well, spring or infiltration gallery?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
16.0	Is your project to be served by an existing public water supply? If "Yes", indicate name of supplier and attach letter from supplier stating that it will serve the project.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
16.0.1	Supplier's Name				
16.0.2	Letter of Approval from Supplier is Attached	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
17.0	Will this project involve a new or increased drinking water withdrawal from a stream or other water body? If "Yes", should reference both Water Supply and Watershed Management.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
17.0.1	Stream Name				
18.0	Will the construction or operation of this project involve treatment, storage, reuse, or disposal of waste? If "Yes", indicate what type (i.e., hazardous, municipal (including infectious & chemotherapeutic), residual) and the amount to be treated, stored, re-used or disposed.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
18.0.1	Type & Amount				
19.0	Will your project involve the removal of coal, minerals, etc. as part of any earth disturbance activities?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
20.0	Does your project involve installation of a field constructed underground storage tank? If "Yes", list each Substance & its Capacity. Note: Applicant may need a Storage Tank Site Specific Installation Permit.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
20.0.1	Enter all substances & capacity of each; separate each set with semicolons.				
21.0	Does your project involve installation of an aboveground storage tank greater than 21,000 gallons capacity at an existing facility? If "Yes", list each Substance & its Capacity. Note: Applicant may need a Storage Tank Site Specific Installation Permit.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
21.0.1	Enter all substances & capacity of each; separate each set with semicolons.				

- 22.0 Does your project involve installation of a tank greater than 1,100 gallons which will contain a highly hazardous substance as defined in DEP's Regulated Substances List, 2570-BK-DEP2724? If "Yes", list each Substance & its Capacity. Note: Applicant may need a Storage Tank Site Specific Installation Permit. ☐ Yes ☒ No
- 22.0.1 Enter all substances & capacity of each; separate each set with semicolons.
- 23.0 Does your project involve installation of a storage tank at a new facility with a total AST capacity greater than 21,000 gallons? If "Yes", list each Substance & its Capacity. Note: Applicant may need a Storage Tank Site Specific Installation Permit. ☐ Yes ☒ No
- 23.0.1 Enter all substances & capacity of each; separate each set with semicolons.
- 24.0 Will the intended activity involve the use of a radiation source? ☐ Yes ☒ No

CERTIFICATION

I certify that I have the authority to submit this application on behalf of the applicant named herein and that the information provided in this application is true and correct to the best of my knowledge and information.

Type or Print Name IAN CUTHBERTSON

Signature 

PLANT MANAGER
Title

9-22-16
Date



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NPDES Permit No. PA0005053
Renewal Application
NRG Warren Generating Station

NRG REMA LLC
Warren Generating Station
Warren, PA
September 2016

Section 2
Act 14 Notifications



NRG Energy
Southpointe Operations Center
121 Champion Way
Canonsburg, PA 15317
Telephone: (724) 597-8633
Email: Sarah.Vondracek@nrg.com

September 2, 2016

VIA OVERNIGHT MAIL

Conewango Township Supervisors
4 Fireman Street
Warren, PA 16365

**Re: NRG REMA LLC – Warren Generating Station, Inactive Station
National Pollutant Discharge Elimination System (NPDES) Permit No. PA0005053
Renewal Application – Acts 14, 67, 68, and 127 Notifications**

Dear Township Supervisors:

Pursuant to Acts 14, 67, 68 and 127 of the Municipalities Planning Code (MPC), NRG REMA LLC, a wholly owned subsidiary of NRG Energy, Inc., is providing notification to Conewango Township of our intention to file an application with the Pennsylvania Department of Environmental Protection (PaDEP) for the renewal of our existing NPDES Permit PA0005053 for water discharges at the inactive Warren Generating Station in Conewango Township, Warren County.

Section 1905-A of the Commonwealth Administrative Code, as amended by Act 14, requires that each application for a PaDEP permit must give written notice to the municipality and county in which the permitted activity is located. The written notification is to be received by the municipality and the county at least 30 days before PaDEP may issue or deny the permit.

Acts 67, 68, and 127, which amended the MPC to support sound land use practices and planning efforts, direct state agencies to consider comprehensive plans and zoning ordinances when reviewing applications for permitting of facility or infrastructures, and specify that state agencies may relay upon comprehensive plans and zoning ordinances under certain conditions as described in Sections 619.2 and 1105 of the MPC.

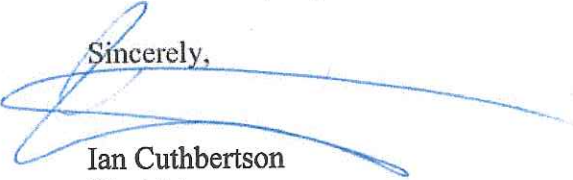
Enclosed is a General Information Form (GIF) completed for this project. Please review the GIF for the accuracy of answers provided with regard to land use aspects of this project; please be specific and focus on relationship to zoning ordinances. If you wish to submit comments for a land-use review of this project, you must respond within 30 days to the PaDEP regional office listed below. If there are no land use comments received by the end of the comment period, PaDEP will assume that there are no substantive land use conflicts and proceed with the normal application review process.

Please submit any comments concerning this project within 30 days from the date of receipt of this letter to:

Pennsylvania Department of Environmental Protection
Northwest Regional Office
230 Chestnut Street
Meadville, PA 16335-3481
Telephone: 814-332-6945

Should you have any questions regarding this notice or our application for permit renewal, please contact me at (724) 597-8633 or Sarah.Vondracek@nrg.com.

Sincerely,



Ian Cuthbertson
Plant Manager

Enclosure

cc: Al Erickson – NRG Energy, Mobile Maintenance
Sarah Vondracek – NRG Energy, Environmental Specialist
Steve Frank – NRG Energy, Sr. Environmental Specialist

From: [Kamzelski, Jean](#)
To: [Vondracek, Sarah](#)
Subject: FW: UPS Delivery Notification, Tracking Number 1ZV321W50197716889
Date: Tuesday, September 06, 2016 1:20:53 PM

From: UPS Quantum View [mailto:pkginfo@ups.com]
Sent: Tuesday, September 06, 2016 10:38 AM
To: Kamzelski, Jean
Subject: UPS Delivery Notification, Tracking Number 1ZV321W50197716889



Your package has been delivered.

Delivery Date: Tuesday, 09/06/2016
Delivery Time: 10:34 AM

At the request of NRG ENERGY INC AT SOUTHPOINTE, , this notice alerts you that the status of the shipment listed below has changed.

Shipment Detail

Tracking Number:	1ZV321W50197716889
Ship To:	Conewango Township Supervisors 4 FIREMANS ST WARREN, PA 16365 US
UPS Service:	UPS NEXT DAY AIR
Number of Packages:	1
Weight:	1.0 LBS
Delivery Location:	OFFICE
Signed by:	RIGGIN
Reference Number 1:	231517
Reference Number 2:	Warren Renewal App Notification



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NRG Energy
Southpointe Operations Center
121 Champion Way
Canonsburg, PA 15317
Telephone: (724) 597-8633
Email: Sarah.Vondracek@nrg.com

September 2, 2016

VIA OVERNIGHT MAIL

Warren County Commissioners
County Courthouse Building
204 Fourth Avenue
Warren, PA 16365

**Re: NRG REMA LLC – Warren Generating Station, Inactive Station
National Pollutant Discharge Elimination System (NPDES) Permit No. PA0005053
Renewal Application – Acts 14, 67, 68, and 127 Notifications**

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Section 1905-A of the Commonwealth Administrative Code, as amended by Act 14, requires that each application for a PaDEP permit must give written notice to the municipality and county in which the permitted activity is located. The written notification is to be received by the municipality and the county at least 30 days before PaDEP may issue or deny the permit.

Acts 67, 68, and 127, which amended the MPC to support sound land use practices and planning efforts, direct state agencies to consider comprehensive plans and zoning ordinances when reviewing applications for permitting of facility or infrastructures, and specify that state agencies may relay upon comprehensive plans and zoning ordinances under certain conditions as described in Sections 619.2 and 1105 of the MPC.

Enclosed is a General Information Form (GIF) completed for this project. Please review the GIF for the accuracy of answers provided with regard to land use aspects of this project; please be specific and focus on relationship to zoning ordinances. If you wish to submit comments for a land-use review of this project, you must respond within 30 days to the PaDEP regional office listed below. If there are no land use comments received by the end of the comment period, PaDEP will assume that there are no substantive land use conflicts and proceed with the normal application review process.

Please submit any comments concerning this project within 30 days from the date of receipt of this letter to:

Pennsylvania Department of Environmental Protection
Northwest Regional Office
230 Chestnut Street
Meadville, PA 16335-3481
Telephone: 814-332-6945

Should you have any questions regarding this notice or our application for permit renewal, please contact me at (724) 597-8633 or Sarah.Vondracek@nrg.com.

Sincerely,



Ian Cuthbertson
Plant Manager

Enclosure

cc: Al Erickson – NRG Energy, Mobile Maintenance
Sarah Vondracek – NRG Energy, Environmental Specialist
Steve Frank – NRG Energy, Sr. Environmental Specialist

From: [Kamzelski, Jean](#)
To: [Vondracek, Sarah](#)
Subject: FW: UPS Delivery Notification, Tracking Number 1ZV321W50197197075
Date: Tuesday, September 06, 2016 1:19:47 PM

From: UPS Quantum View [mailto:pkginfo@ups.com]
Sent: Tuesday, September 06, 2016 11:03 AM
To: Kamzelski, Jean
Subject: UPS Delivery Notification, Tracking Number 1ZV321W50197197075



Your package has been delivered.

Delivery Date: Tuesday, 09/06/2016
Delivery Time: 10:55 AM

At the request of NRG ENERGY INC AT SOUTHPOINTE, , this notice alerts you that the status of the shipment listed below has changed.

Shipment Detail

Tracking Number:	1ZV321W50197197075
Ship To:	Warren County Commissioners Warren County Courthouse Bldg 204 4TH AVE WARREN, PA 16365 US
UPS Service:	UPS NEXT DAY AIR
Number of Packages:	1
Weight:	1.0 LBS
Delivery Location:	RECEIVER
Signed by:	MATSON
Reference Number 1:	231517
Reference Number 2:	Warren Renewal App Notification



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NRG Energy
Southpointe Operations Center
121 Champion Way
Canonsburg, PA 15317
Telephone: (724) 597-8633
Email: Sarah.Vondracek@nrg.com

September 16, 2016

VIA OVERNIGHT MAIL

Conewango Township Supervisors
4 Fireman Street
Warren, PA 16365

**Re: NRG REMA LLC – Warren Generating Station, Inactive Station
National Pollutant Discharge Elimination System (NPDES) Permit No. PA0005053
Renewal Application - General Information Form (GIF) Correction**

Dear Township Supervisors:

NRG REMA LLC, a wholly owned subsidiary of NRG Energy, Inc., is providing notification to Conewango Township of correction to the General Information Form (GIF) associated with the Warren Generating Station NPDES Renewal Application. The GIF was originally sent to you on September 2, 2016 in order to inform you of our intention to file an application with the Pennsylvania Department of Environmental Protection (PaDEP) for the renewal of our existing NPDES Permit PA0005053 for water discharges at the inactive Warren Generating Station in Conewango Township, Warren County.

The Warren County Planning & Zoning Department informed NRG REMA LLC of a minor correction to the Land Use Information section of the GIF. Please see the enclosed GIF excerpt with the correction of line 3.

Should you have any questions regarding this notice or our application for permit renewal, please contact me at (724) 597-8633 or Sarah.Vondracek@nrg.com.

Sincerely,

A handwritten signature in black ink that reads "Sarah Vondracek". The signature is written in a cursive, flowing style.

Sarah Vondracek
Environmental Specialist

Enclosure

cc: Ian Cuthbertson – NRG Energy, Shawville Station Plant Manager

From: [Kamzelski, Jean](#)
To: [Vondracek, Sarah](#)
Subject: FW: UPS Delivery Notification, Tracking Number 1ZV321W50196139595
Date: Monday, September 19, 2016 11:07:42 AM

From: UPS Quantum View [mailto:pkginfo@ups.com]
Sent: Monday, September 19, 2016 10:28 AM
To: Kamzelski, Jean
Subject: UPS Delivery Notification, Tracking Number 1ZV321W50196139595



Your package has been delivered.

Delivery Date: Monday, 09/19/2016
Delivery Time: 10:21 AM

At the request of NRG ENERGY INC AT SOUTHPOINTE, , this notice alerts you that the status of the shipment listed below has changed.

Message from NRG ENERGY INC AT SOUTHPOINTE:
Warren NPDES

Shipment Detail

Tracking Number:	1ZV321W50196139595
Ship To:	Township Supervisors Conewango Township Supervisors 4 FIREMANS ST WARREN, PA 16365 US
UPS Service:	UPS NEXT DAY AIR
Number of Packages:	1
Weight:	1.0 LBS
Delivery Location:	RECEIVER
Signed by:	RIGGIN
Reference Number 1:	231517
Reference Number 2:	Warren NPDES



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[Contact UPS](#)



NRG REMA LLC
Warren Generating Station
20085 Route 6
Warren, PA 16365
Telephone: (724) 597-8633

The power to change life.
The energy to make it happen.®

NPDES Permit No. PA0005053
Renewal Application
NRG Warren Generating Station

NRG REMA LLC
Warren Generating Station
Warren, PA
September 2016

Section 3
Application Fee

NRG REMA, LLC

REFERENCE NUMBER	DATE	VOUCHER	GROSS AMOUNT	DISCOUNT	NET AMOUNT
R NPDESAPPFEE	09/19/2016	1700062568	\$500.00	0.00	\$500.00

CHECK NUMBER	DATE	VENDOR NUMBER	VENDOR NAME	TOTAL AMOUNT
05015156	09/19/16	0000221454	COMMONWEALTH OF PA CLEAN	\$500.00

Refer to above check number and voucher number when inquiring about your payment

0006



Bank Of New York Mellon
PITTSBURGH, PA 15262

60-160
433

Date: 09/19/2016
Check Number: 05015156
Vendor Number: 0000221454

NRG REMA, LLC
804 Carnegie Center,
Princeton, NJ 08540

PAY *Five hundred and 00/100 Dollars*

TO THE
ORDER OF

COMMONWEALTH OF PA CLEAN
WATER FUND
208 WEST THIRD STREET
WILLIAMSPORT PA 17701-6441

Pay Exactly
*****\$500.00

AUTHORIZED SIGNATURE
VOID WITHOUT SIGNATURE
VOID AFTER NINETY DAYS

⑈05015156⑈ ⑈043301601⑈ 119 2112⑈



NRG REMA LLC
Warren Generating Station
20085 Route 6
Warren, PA 16365
Telephone: (724) 597-8633

The power to change life.
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NPDES Permit No. PA0005053
Renewal Application
NRG Warren Generating Station

NRG REMA LLC
Warren Generating Station
Warren, PA
September 2016

Section 4
Application Checklist and Form



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF CLEAN WATER

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
APPLICATION FOR INDIVIDUAL PERMIT TO DISCHARGE
INDUSTRIAL WASTEWATER**

APPLICANT'S ✓ CHECKLIST

Applicant Name NRG REMA, LLC

Check the following list to make sure you have included all the required information. Place a checkmark in the box provided for all items completed and/or provided.

ENCLOSE THIS CHECKLIST WITH YOUR COMPLETED APPLICATION. FAILURE TO SUBMIT ALL REQUIRED INFORMATION MAY RESULT IN DENIAL OF THE APPLICATION.

	REQUIREMENTS	Check ✓ If Included	DEP Use Only
1.	Application Fee. Amount Enclosed \$ <u>500</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.	One signed original and 2 copies of the <i>completed</i> application with all applicable Analytical Results Tables.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.	One additional copy of application for ECHD (if located in Erie County).	<input type="checkbox"/>	<input type="checkbox"/>
4.	One copy of application mailed to Delaware River Basin Commission (if discharge is in the Delaware River Basin)	<input type="checkbox"/>	<input type="checkbox"/>
5.	One copy of the General Information Form (1300-PM-BIT0001).	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.	Proper evidence of Act 14 municipal and county notifications.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.	Evidence of newspaper publication for 4 consecutive weeks (new and modified discharges only)	<input type="checkbox"/>	<input type="checkbox"/>
8.	Copy of topographic map treatment facilities, intake structures, and outfalls.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9.	Site plan identifying significant site features.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10.	Line drawing / process flow diagram illustrating the flow of water and wastewater through the facility(ies), with a water balance.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.	Chemical Additives Notification Form(s) (if applicable).	<input type="checkbox"/>	<input type="checkbox"/>
12.	Whole Effluent Toxicity Test Reports / WET Analysis Spreadsheet (if applicable).	<input type="checkbox"/>	<input type="checkbox"/>
13.	Documentation supporting variance requests (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
14.	Preparedness, Prevention and Contingency (PPC) Plan (optional)	<input type="checkbox"/>	<input type="checkbox"/>
15.	Module 1 – Stormwater, and attachments (if applicable).	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16.	Module 2 – Groundwater Remediation, and attachments (if applicable).	<input type="checkbox"/>	<input type="checkbox"/>
17.	Module 3 – Aquatic Animal Production Facilities, and attachments (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
18.	Module 4 – Anti-Degradation, and attachments (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
19.	Module 5 – Cooling Water Intake Structures, and attachments (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
20.	Optional site-specific data: _____	<input type="checkbox"/>	<input type="checkbox"/>

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) APPLICATION FOR INDIVIDUAL PERMIT TO DISCHARGE INDUSTRIAL WASTEWATER

Before completing this form, please read the instructions (3850-PM-BCW0008a). FAILURE TO FOLLOW THE INSTRUCTIONS MAY RESULT IN DENIAL OF THE APPLICATION.

Related ID#s (If Known)		DEP USE ONLY	
Client ID#	<u>135779</u>	APS ID#	
Site ID#	<u>263250</u>	Facility ID#	
		Date Received:	
		Permit No.:	
		Auth ID:	PDG?

GENERAL INFORMATION	
Applicant/Operator Name <u>NRG REMA, LLC</u>	25 Pa. Code § 92a.26 Fee Category <i>(See instructions for fees)</i>
<input type="checkbox"/> New Permit (Anticipated Discharge Date: _____) <input checked="" type="checkbox"/> Permit Renewal: NPDES No. <u>PA 0005053</u> Permit Expiration Date: <u>03/31/2017</u> Permit Renewal Application Due Date: <u>09/27/2016</u> WQM Permit No(s): <u>6203201 & 6274203</u> WQM Permit Issuance Date(s): <u>4/9/2003 & 5/19/1975</u> Currently Using eDMR System? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Start Date: <u>2011</u>	<input checked="" type="checkbox"/> Minor facility without ELG <input type="checkbox"/> Minor facility with ELG <input type="checkbox"/> Major facility < 250 MGD <input type="checkbox"/> Major facility ≥ 250 MGD <input type="checkbox"/> CAAP <input type="checkbox"/> IW Stormwater Is applicant a "small business"? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Is there on-site sewage treatment facility? ☐ Yes ☒ No

If Yes, is the facility operated by operator(s) certified in compliance with the Operators Certification Act? ☐ Yes ☐ No

Describe the nature of the business or operations resulting in discharge(s): **Warren Generating Station - Steam Electric Generating Station, which is currently closed.**

SIC Code	Primary?	Description	NAICS Code	Primary?	Description
4911	Yes	Electrical Services	221112	Yes	Fossil Fuel Electric Power Service

OTHER ENVIRONMENTAL PERMITS		
Type of Permit	Agency That Issued Permit	Date Issued
WQM - 6274203 T-3	PA DEP	March 31, 2014

DISCHARGE INFORMATION
1. Attach a site plan, a line drawing with a water balance and topographic map(s) showing the treatment facility(ies), intake location(s), discharge location(s), and internal monitoring point location(s). USGS Topographic map name: <u>NPDES Renewal Appl. Permit No. PA0005035</u>

[illegible]

Additional pages as necessary. See instructions.

[illegible]

TREATMENT FACILITY INFORMATION

Complete this sheet for each existing and proposed industrial waste, sewage and/or stormwater treatment facility (one sheet per facility).

Treatment Facility Name: Industrial Waste Treatment

Effluent Discharged To Outfall / IMP No.: 002

1. Provide a narrative description of the wastewater treatment process. Attach a line drawing or process flow diagram to the application.

This facility is for the treatment of leachate. See attached.

2. List each treatment unit at the facility in sequential order of treatment.

Treatment Unit Description	Method for Handling and Disposal of Solid or Liquid Residue Resulting from Treatment
Neutralization	Leachate treatment only.
Mixing/aeration	Leachate treatment only.
Flocculation	Leachate treatment only.
Sedimentation (settling)	Leachate treatment only. Any sludge generated will be shipped offsite to a permitted facility
Discharge to surface water	Leachate treatment only.

3. Describe any proposed upgrades to this treatment facility within the next five years.

None.

4. Identify all chemicals that have been used for wastewater treatment over the past two years.

Chemical Name	Purpose	Max Usage Rate	Units	Acrylamide?
Sodium hydroxide (20 - 30%)	pH control (neutralization) of leachate discharging from closed ash site.	899 (662 avg.)	lbs/day	<input type="checkbox"/>
Muriatic Acid (25 - 35% HCl)	pH control (neutralization) of leachate discharging from closed ash site.	as needed	bs/day	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

5. List any additional proposed wastewater treatment chemicals anticipated in the next five years.

Chemical Name	Purpose	Max Usage Rate	Units	Acrylamide?
N/A				<input type="checkbox"/>
				<input type="checkbox"/>

CHEMICAL ADDITIVES

1. Identify all chemical additives that have been introduced to any waste stream over the past two years.

Chemical Additive Name	Outfall / IMP No.	Purpose	Usage Frequency	Max Usage Rate	Units
POL-E-Z2706 Polymer	002	Flocculation of leachate discharging from closed ash site.	Continuous, Daily	10 (3 avg.)	lbs/day

2. List all chemical additives that the applicant is requesting approval to use upon issuance of the permit by DEP. Identify the point of introduction on a line or process diagram.

Chemical Additive Name	Outfall / IMP No.	Purpose	Proposed Usage Frequency	Proposed Max Usage Rate	Units
None.					

3. List all chemical additives in the same order as question 2, above, and provide the requested information. For chemical additives that are not on DEP's Approved List, submit New Chemical Additive Request Form(s) to DEP's Central Office. For chemical additives that are on DEP's Approved List but a Chemical Additives Notification Form was not previously submitted, attach a Chemical Additives Notification Form to the application.

Chemical Additive Name	On Approved List?	Notification Form Attached?	Notification Form Previously Submitted?	Notification Form Submission Date	Analytical Method
None.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

PRODUCTION DATA FOR EFFLUENT LIMITATION GUIDELINES (ELGs)

Complete this section for each production line with an applicable ELG. See instructions and use additional sheets as necessary.

1. Production line and process description: N/A
2. Applicable ELG: 40 CFR: _____ Subpart: _____
3. Is this production considered a new source? ☐ Yes ☐ No
4. Outfall / IMP No. receiving wastewater: _____
5. Units of production measurement for ELG: _____
6. Design production capacity: _____
7. Complete the table below for the five last years of production. Report production data using the same units of measurement as reported in question 4.

Parameter	Production Years				
	20	20	20	20	20
Total Annual Production					
Max Monthly Production					
Month of Max Production					
Avg Annual Production					
Avg Production Hours/Day					
Avg Production Days/Month					
Avg Annual Water Usage (MGD)					
Avg Annual Wastewater Flow (MGD)					

8. Average annual production over the past five years: _____ Units: _____
9. Anticipated average annual production for the next five years: _____ Units: _____
10. Explain the basis for the anticipated average annual production for the next five years: _____

11. Attach any pertinent information from the applicable ELG in 40 CFR that would allow DEP to appropriately determine technology-based effluent limitations.

ANTI-DEGRADATION

If the applicant is proposing a new or increased discharge to High Quality (HQ) or Exceptional Value (EV) waters, Module 4 (Anti Degradation Module) must be attached to the application. In addition, for HQ waters only, if the analysis concludes that the new or increased discharge will produce a measurable change in water quality, a social or economic justification (SEJ) must be attached if the applicant desires approval for the discharge.

1. Is the Anti-Degradation Module (Module 4) attached to the application? ☐ Yes ☒ No
2. Is a social or economic justification (SEJ) (HQ waters only) attached to the application? ☐ Yes ☒ No

VARIANCES

If the applicant is requesting a variance authorized under federal regulations at 40 CFR 122.21(m), complete the section below and attach to this application documentation necessary under federal regulations to support the variance request.

1. Description of variance requested: **None**
2. Federal regulation authorizing the variance: **None**
3. Supporting documentation attached to the application? ☐ Yes ☒ No

LABORATORY INFORMATION

Did an off-site laboratory perform any of the analyses required by this application? ☒ Yes ☐ No

If Yes, provide the information below.

Name	Geochemical Testing	Analyses Performed: Group 1, Group 2, and Stormwater sampling
Address	2005 N. Center Ave, Somerset, PA 15501	
Phone	(814) 443-1671	
Name		Analyses Performed:
Address		
Phone	()	

COMPLIANCE HISTORY REVIEW

Is the facility owner or operator in violation of any DEP regulation, permit, order or schedule of compliance at this or any other facility?
☒ Yes ☐ No

If Yes, list each permit, order or schedule of compliance and provide compliance status. Use additional sheets as necessary.

Permit Program:		Permit No.:	
Permit Program:		Permit No.:	
Permit Program:		Permit No.:	

Brief Description of Non-Compliance:

Please see attached NRG REMA LLC Compliance History

Steps Taken to Achieve Compliance	Date(s) Compliance Achieved

Current Compliance Status: ☒ In Compliance ☐ In Non-Compliance

1. Summary of Required Analyses (see instructions):

[illegible]

a. GC/MS "Five Peaks" Pollutants (see instructions).

Outfall / IMP No.	Group Number (3 - 6)	Chemical or Compound Name	Quantitation Limit (µg/L)	Avg Effluent Concentration (µg/L)	Max Effluent Concentration (µg/L)	No. Samples Positive / No. Analyzed
						/
						/
						/
						/
						/

Outfall / IMP No.	Chemical Substance or Compound Name	Reason/Suspected Reason for Presence in Discharge	Avg Concentration (µg/L)	Indicate if Presence is Known (K) or Suspected (S)

3. Additional Analysis Results Tables may be attached to provide any of the optional site-specific information discussed in Appendix A of the instructions.

- 12 -

WHOLE EFFLUENT TOXICITY

1. Summarize the results of all Whole Effluent Toxicity (WET) tests completed in the last five years (or attach a separate sheet with these results). If required by the NPDES permit, attach a copy of DEP's WET Analysis Spreadsheet to the application (electronic transmission to DEP is acceptable) that provides replicate data for all species tested and for the most recent four consecutive tests.

Outfall No. Tested: **N/A**

Type of tests completed: ☐ Chronic ☐ Acute

Dilution series used: %, %, %, %, and % effluent

Target Instream Waste Concentration (TIWC): % effluent

Test Date	Ceriodaphnia Results (% Effluent)			Pimephales Results (% Effluent)			Pass or Fail
	Survival NOEC	Reproduction NOEC	LC50	Survival NOEC	Growth NOEC	LC50	

2. Describe the status of any Phase I or II Toxicity Reduction Evaluation (if applicable):

PREPAREDNESS, PREVENTION AND CONTINGENCY (PPC) PLAN

The applicant may optionally attach its PPC Plan or related plan to the application. This information may be useful to DEP in completing its review of the application. If the PPC Plan is not attached to the application, DEP may request submission of the Plan during the review. Electronic transmission of large PPC Plans is encouraged.

Type or Description of Plan (e.g., PPC, SPCC, etc.)	Attached?	Approved by DEP?	Approval Date	Date of Latest Plan Update
Environmental Emergency Response Plan (EERP)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	05/06/2014	02/2016
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		

COOLING WATER INTAKE STRUCTURES

Under Section 316(b) of the Clean Water Act and its implementing regulations, certain new and existing facilities with cooling water intake structures must provide specific information in its application. Module 5 of this application must be submitted by facilities that meet the regulatory definitions of new and existing facilities. Check the appropriate boxes below.

Is the facility considered a new facility as defined in 40 CFR § 125.81? ☐ Yes ☒ No

Is the facility considered an existing facility as defined in 40 CFR § 125.91? ☐ Yes ☒ No

Is Module 5 is attached to this application? ☐ Yes ☒ No

ANALYSIS RESULTS TABLE POLLUTANT GROUP 1

Please read instructions carefully before completing this form.

APPLICANT NAME		NRG REMA, LLC												
<input checked="" type="checkbox"/> Outfall / IMP Number 002 (Show location of sampling point on Line Drawing) <input type="checkbox"/> Treatment Facility Influent Sampling Results (Show location of sampling point on Line Drawing) <input type="checkbox"/> Intake Sampling Results (Specify Source: _____) <input type="checkbox"/> Background (Upstream) Sampling Results (Specify Location: _____) <input type="checkbox"/> New Discharge (Basis for Information: _____)														
POLLUTANT GROUP 1 PARAMETERS	CONCENTRATION / MASS PRESENT										No. "Non-Detect" Results	QL Used	Method Used	
	Min/Max Daily Value		Max Avg Monthly Value		Long-Term Avg Value		No. Analyses	Conc	Mass (lbs/day)	Conc				Mass (lbs/day)
	Conc	Mass (lbs/day)	Conc	Mass (lbs/day)	Conc	Mass (lbs/day)								
BOD ₅ (mg/L)	2.0	0.27	<1.3	<0.17	<1.3	<0.17	<1.3	<0.17	3	1	0.80	SM 5210 B		
COD (mg/L)	<5.0	0.67	<5.0	<0.67	<5.0	<0.67	<5.0	<0.67	3	3	5.0	HACH 8000		
TOC (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--		
TSS (mg/L)	1.0	0.13	<1.0	<0.13	<1.0	<0.13	<1.0	<0.13	3	2	1.0	SM 2540 D		
Ammonia-Nitrogen (mg/L)	0.44	0.059	0.42	0.056	0.42	0.056	0.42	0.056	3	0	0.040	EPA 350.1		
Temperature (Winter) (°F)	--	XXX	--	XXX	--	XXX	--	XXX	0	XXX	XXX	--		
Temperature (Summer) (°F)	66.2	XXX	63.9	XXX	63.9	XXX	63.9	XXX	3	XXX	XXX	SM 2550 B		
pH – Minimum (S.U.)	7.46	XXX	XXX	XXX	XXX	XXX	7.57	7.57	3	XXX	XXX	SM4500H B		
pH – Maximum (S.U.)	7.75	XXX	XXX	XXX	XXX	XXX	7.57	7.57	3	XXX	XXX	SM4500H B		
Fecal Coliform (No./100 mL)	--	XXX	--	XXX	--	XXX	--	XXX	0	--	XXX	--		
Oil and Grease (mg/L)	<2.2	<0.30	<2.1	<0.28	<2.1	<0.28	<2.1	<0.28	3	3	2.0	EPA 1664		
TRC (mg/L)	--	XXX	--	XXX	--	XXX	--	XXX	0	--	--	--		
Total Phosphorus (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--		
TKN (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--		
Nitrite + Nitrate-Nitrogen (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--		
Total Dissolved Solids (mg/L)	2550	340.3	2527	337.2	2527	337.2	2527	337.2	3	0	1.0	SM 2540 C		
Color (Pt-Co Units)	--	XXX	--	XXX	--	XXX	--	XXX	0	--	--	--		
Bromide (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--		
Chloride (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--		
Sulfate (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--		
Sulfide (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--		
Surfactants (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--		
Fluoride (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--		
Total Hardness (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--		

ANALYSIS RESULTS TABLE POLLUTANT GROUP 2

Please read instructions carefully before completing this form.

APPLICANT NAME		NRG REMA, LLC											
<input checked="" type="checkbox"/> Outfall / IMP Number 002 (Show location of sampling point on Line Drawing) <input type="checkbox"/> Treatment Facility Influent Sampling Results (Show location of sampling point on Line Drawing) <input type="checkbox"/> Intake Sampling Results (Specify Source: _____) <input type="checkbox"/> Background (Upstream) Sampling Results (Specify Location: _____) <input type="checkbox"/> New Discharge (Basis for Information: _____)													
POLLUTANT GROUP 2 PARAMETERS	CONCENTRATION / MASS PRESENT										No. "Non-Defect" Results	QL Used	Method Used
	Min/Max Daily Value		Max Avg Monthly Value		Long-Term Avg Value		No. Analyses						
	Conc	Mass (lbs/day)	Conc	Mass (lbs/day)	Conc	Mass (lbs/day)							
Aluminum, Total (µg/L)	61.6	0.00822	53.9	0.0719	53.9	0.00719	3			0	2.00	EPA 200.8	
Antimony, Total (µg/L)	<0.50	<0.0007	<0.50	<0.0007	<0.50	<0.0007	3			3	0.50	EPA 200.8	
Arsenic, Total (µg/L)	<0.50	<0.0007	<0.50	<0.0007	<0.50	<0.0007	3			3	0.50	EPA 200.8	
Barium, Total (µg/L)	10.4	0.00139	10.1	0.00135	10.1	0.00135	3			0	2.00	EPA 200.8	
Beryllium, Total (µg/L)	0.7	0.00009	<0.6	<0.00008	<0.6	<0.00008	3			2	0.50	EPA 200.8	
Boron, Total (µg/L)	2640	0.352	2503	0.334	2503	0.334	3			0	10	EPA 200.7	
Cadmium, Total (µg/L)	<0.10	<0.00001	<0.10	<0.00001	<0.10	<0.00001	3			3	0.10	EPA 200.8	
Chromium, Total (µg/L)	<2.00	<0.0003	<2.00	<0.0003	<2.00	<0.0003	3			3	2.00	EPA 200.8	
Chromium, Hexavalent (µg/L)	<10	<0.00133	<10	<0.00133	<10	<0.0013	4			4	10	USGS 1-1230-85	
Cobalt, Total (µg/L)	18.2	0.0024	17.4	0.0023	17.4	0.0023	3			0	0.20	EPA 200.8	
Copper, Total (µg/L)	<0.50	<0.00007	<0.50	<0.00007	<0.50	<0.00007	3			3	0.50	EPA 200.8	
Cyanide, Total (µg/L)	<10.0	<0.0013	<10.0	<0.0013	<10.0	<0.0013	3			3	10.0	ASTM D7511-09	
Iron, Total (µg/L)	414	0.055	283	0.038	283	0.038	3			0	10	EPA 200.7	
Iron, Dissolved (µg/L)	385	0.051	290	0.039	290	0.039	3			0	10	EPA 200.7	
Lead, Total (µg/L)	<0.20	<0.00003	<0.20	<0.00003	<0.20	<0.20	3			3	0.20	EPA 200.8	
Manganese, Total (µg/L)	4880	0.65	4547	0.61	4547	0.61	3			0	25.00	EPA 200.8	
Mercury, Total (µg/L)	0.100	0.00001	<0.100	<0.00001	<0.100	<0.00001	3			2	0.100	SM3112 B	
Molybdenum, Total (µg/L)	180	0.024	166.3	0.022	166.3	0.22	3			0	0.50	EPA 200.8	
Nickel, Total (µg/L)	52.6	0.007	49.9	0.007	49.9	0.007	3			0	0.20	EPA 200.8	
Phenols, Total (µg/L)	10.0	0.0013	<10.0	<0.0013	<10.0	<0.0013	3			2	10.00	EPA 420.1	
Selenium, Total (µg/L)	0.8	0.0001	0.7	0.00009	0.7	0.00009	3			0	0.50	EPA 200.8	
Silver, Total (µg/L)	<0.10	<0.00001	<0.10	<0.00001	<0.10	<0.00001	3			3	0.10	EPA 200.8	

Thallium, Total (µg/L)	0.3	0.00004	0.3	0.00004	0.3	0.00004	0.3	0.00004	3	0	0.10	EPA 200.8
Zinc, Total (µg/L)	8.4	0.0011	7.0	0.0093	7.0	0.0093	7.0	0.0093	3	0	2.00	EPA 200.8

ANALYSIS RESULTS TABLE POLLUTANT GROUP 1

Please read instructions carefully before completing this form.

APPLICANT NAME	NRG REMA, LLC		CONCENTRATION / MASS PRESENT								No. "Non-Detect" Results	QL Used	Method Used
	POLLUTANT GROUP 1 PARAMETERS	Min/Max Daily Value		Max Avg Monthly Value		Long-Term Avg Value		No. Analyses					
		Conc	Mass (lbs/day)	Conc	Mass (lbs/day)	Conc	Mass (lbs/day)						
<input type="checkbox"/> Outfall / IMP Number 002 - Influent (Show location of sampling point on Line Drawing)													
<input checked="" type="checkbox"/> Treatment Facility Influent Sampling Results (Show location of sampling point on Line Drawing)													
<input type="checkbox"/> Intake Sampling Results (Specify Source: _____)													
<input type="checkbox"/> Background (Upstream) Sampling Results (Specify Location: _____)													
<input type="checkbox"/> New Discharge (Basis for Information: _____)													
BOD ₅ (mg/L)	3	0.34	--	--	--	--	--	--	--	1	0	0.80	SM 5210 B
COD (mg/L)	5	0.67	--	--	--	--	--	--	--	1	0	5.0	HACH 8000
TOC (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--	--
TSS (mg/L)	93	10.5	--	--	--	--	--	--	1	0	1.0	SM 2540 D	
Ammonia-Nitrogen (mg/L)	0.43	0.049	--	--	--	--	--	--	1	0	0.040	EPA 350.1	
Temperature (Winter) (°F)	--	XXX	--	XXX	--	XXX	--	XXX	0	XXX	XXX	XXX	--
Temperature (Summer) (°F)	63.9	XXX	--	XXX	--	XXX	--	XXX	1	XXX	XXX	XXX	SM 2550 B
pH -- Minimum (S.U.)	6.66	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	XXX	XXX	XXX	SM4500H B
pH -- Maximum (S.U.)	6.66	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	XXX	XXX	XXX	SM4500H B
Fecal Coliform (No./100 mL)	--	XXX	--	XXX	--	XXX	--	XXX	0	--	--	XXX	--
Oil and Grease (mg/L)	<2.2	<0.25	--	--	--	--	--	--	1	1	2.0	EPA 1664	--
TRC (mg/L)	--	XXX	--	XXX	--	XXX	--	XXX	0	--	--	--	--
Total Phosphorus (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--	--
TKN (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--	--
Nitrite + Nitrate-Nitrogen (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--	--
Total Dissolved Solids (mg/L)	2460	277.7	--	--	--	--	--	--	1	0	1.0	SM 2540 C	--
Color (Pt-Co Units)	--	XXX	--	XXX	--	XXX	--	XXX	0	--	--	--	--
Bromide (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--	--
Chloride (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--	--
Sulfate (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--	--
Sulfide (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--	--
Surfactants (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--	--
Fluoride (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--	--
Total Hardness (mg/L)	--	--	--	--	--	--	--	--	0	--	--	--	--

ANALYSIS RESULTS TABLE POLLUTANT GROUP 2

Please read instructions carefully before completing this form.

APPLICANT NAME		NRG REMA, LLC									
<input type="checkbox"/> Outfall / IMP Number 002 - Influent (Show location of sampling point on Line Drawing) <input checked="" type="checkbox"/> Treatment Facility Influent Sampling Results (Show location of sampling point on Line Drawing) <input type="checkbox"/> Intake Sampling Results (Specify Source: _____) <input type="checkbox"/> Background (Upstream) Sampling Results (Specify Location: _____) <input type="checkbox"/> New Discharge (Basis for Information: _____)											
POLLUTANT GROUP 2 PARAMETERS	CONCENTRATION / MASS PRESENT								No. "Non-Detect" Results	QL Used	Method Used
	Min/Max Daily Value		Max Avg Monthly Value		Long-Term Avg Value		No. Analyses				
	Conc	Mass (lbs/day)	Conc	Mass (lbs/day)	Conc	Mass (lbs/day)					
Aluminum, Total (µg/L)	2220	0.25	--	--	--	--	1	0	2.00	EPA 200.8	
Antimony, Total (µg/L)	<0.50	<0.00006	--	--	--	--	1	1	0.50	EPA 200.8	
Arsenic, Total (µg/L)	1.4	0.0002	--	--	--	--	1	0	0.50	EPA 200.8	
Barium, Total (µg/L)	17.8	0.0020	--	--	--	--	1	0	2.00	EPA 200.8	
Beryllium, Total (µg/L)	2.1	0.00024	--	--	--	--	1	0	0.50	EPA 200.8	
Boron, Total (µg/L)	2540	0.29	--	--	--	--	1	0	10	EPA 200.7	
Cadmium, Total (µg/L)	0.3	0.00003	--	--	--	--	1	0	0.10	EPA 200.8	
Chromium, Total (µg/L)	<2.00	<0.0002	--	--	--	--	1	1	2.00	EPA 200.8	
Chromium, Hexavalent (µg/L)	<10	<0.0013	--	--	--	--	1	1	10	USGS I-1230-85	
Cobalt, Total (µg/L)	38.2	0.0043	--	--	--	--	1	0	0.20	EPA 200.8	
Copper, Total (µg/L)	0.6	0.00007	--	--	--	--	1	0	0.50	EPA 200.8	
Cyanide, Total (µg/L)	<10.0	<0.0011	--	--	--	--	1	1	10.0	ASTM D7511-09	
Iron, Total (µg/L)	64100	7.2	--	--	--	--	1	0	10	EPA 200.7	
Iron, Dissolved (µg/L)	62900	7.1	--	--	--	--	1	0	10	EPA 200.7	
Lead, Total (µg/L)	<0.20	<0.00002	--	--	--	--	1	1	0.20	EPA 200.8	
Manganese, Total (µg/L)	4710	0.53	--	--	--	--	1	0	25.00	EPA 200.8	
Mercury, Total (µg/L)	<0.100	<0.00001	--	--	--	--	1	1	0.100	SM3112 B	
Molybdenum, Total (µg/L)	180	0.024	--	--	--	--	1	0	0.50	EPA 200.8	
Nickel, Total (µg/L)	91.5	0.01	--	--	--	--	1	0	0.20	EPA 200.8	
Phenols, Total (µg/L)	<10.0	<0.001	--	--	--	--	1	1	10.00	EPA 420.1	
Selenium, Total (µg/L)	0.8	0.00009	--	--	--	--	1	0	0.50	EPA 200.8	
Silver, Total (µg/L)	<0.10	<0.001	--	--	--	--	1	1	0.10	EPA 200.8	

Thallium, Total (µg/L)	0.3	0.00003	--	--	--	--	1	0	0.10	EPA 200.8
Zinc, Total (µg/L)	174	0.020	--	--	--	--	1	0	2.00	EPA 200.8

Please read instructions carefully before completing this form

[illegible]

Is the applicant requesting a hazardous substance spill reporting requirement exemption for any of the substances listed in Attachment A, Table 3 of the instructions?

☐ Yes ☒ No (If Yes, attach the information specified in the instructions).

CERTIFICATION AND SIGNATURE OF APPLICANT

I certify under penalty of law that this document and all attachments and modules were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated 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. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Ian Cuthbertson

Plant Manager

Name (Type or Print Legibly)

Official Title

Signature

Date

9-22-16

(Use corporate or professional seal as appropriate.)



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Renewal Application
NRG Warren Generating Station

NRG REMA LLC
Warren Generating Station
Warren, PA
September 2016

Section 5
Modules

3. List all outfalls receiving stormwater in the same order as question 2, above, and provide the requested information.

[illegible]

	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
4. All non-stormwater discharges from these outfall(s) are identified in the Discharge Information section of the application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> There are no non-stormwater discharges associated with these outfalls (If No, attach an explanation)					
5. If there have been leaks or spills on-site within the past five years that have reached stormwater outfall(s), identify the outfall(s) receiving the leaks or spills, the substance(s) released, measures taken to remediate the incident(s) and preventative measure(s) taken to reduce the possibility of future incidents. Attach additional sheets as necessary. N/A					
6. Describe how often stormwater outfalls are inspected and routine maintenance performed, if not identified in question 3. Visual inspections of the facility are performed in compliance with facility EERP (PPC and SPCC plan). Station personnel conduct the Annual Inspection or stormwater as stated by the EERP (PPC and SPCC plan). Good housekeeping practices are maintained. Site activities are limited as the plant is shut down.					

Complete the following tables for each stormwater outfall sampled for analysis.

- 4 -

OUTFALL NO.: 001

3. List all pollutants contained in Pollutant Groups 1 through 7, as identified in the Analysis Results Tables of the industrial wastewater application (3850-PM-BCW0008b), which are not identified in questions 1 or 2 of the Stormwater Sampling Results section, but the applicant knows or has reason to believe are present in the stormwater discharge.

[illegible]

4. Provide the information requested below for the storm event(s) that resulted in the maximum values reported in questions 1, 2 and 3 for the flow-weighted composite sample.

Storm Event Date	Duration of Storm Event (Min)	Total Rainfall During Storm Event (In)	No. Hours Since End of Previous Measurable Storm Event	Maximum Flow Rate During Storm Event (GPM)	Volume of Stormwater at Outfall from Storm Event
7/18/2016 - All Parameters except pH	220	0.17	125	--	--
9/17/2016 - pH	150	1.0	165	--	--

Complete the following tables for each stormwater outfall sampled for analysis.

- 3 -

[illegible]

STORMWATER SAMPLING RESULTS

Complete the following tables for each stormwater outfall sampled for analysis.

[illegible]

[illegible]

STORMWATER SAMPLING RESULTS

Complete the following tables for each stormwater outfall sampled for analysis.

[illegible]

OUTFALL NO.: 004

3. List all pollutants contained in Pollutant Groups 1 through 7, as identified in the Analysis Results Tables of the industrial wastewater application (3850-PM-BCW0008b), which are not identified in questions 1 or 2 of the Stormwater Sampling Results section, but the applicant knows or has reason to believe are present in the stormwater discharge.

[illegible]

4. Provide the information requested below for the storm event(s) that resulted in the maximum values reported in questions 1, 2 and 3 for the flow-weighted composite sample.

Storm Event Date	Duration of Storm Event (Min)	Total Rainfall During Storm Event (In)	No. Hours Since End of Previous Measurable Storm Event	Maximum Flow Rate During Storm Event (GPM)	Volume of Stormwater at Outfall from Storm Event
7/30/2016 - All Parameters except BOD5 & pH	160	0.24	11	--	--
8/10/2016 - BOD5	160	1.27	116	--	--
9/17/2016 - pH	150	1.0	163-4	--	--

Complete the following tables for each stormwater outfall sampled for analysis.

- 3 -

[illegible]



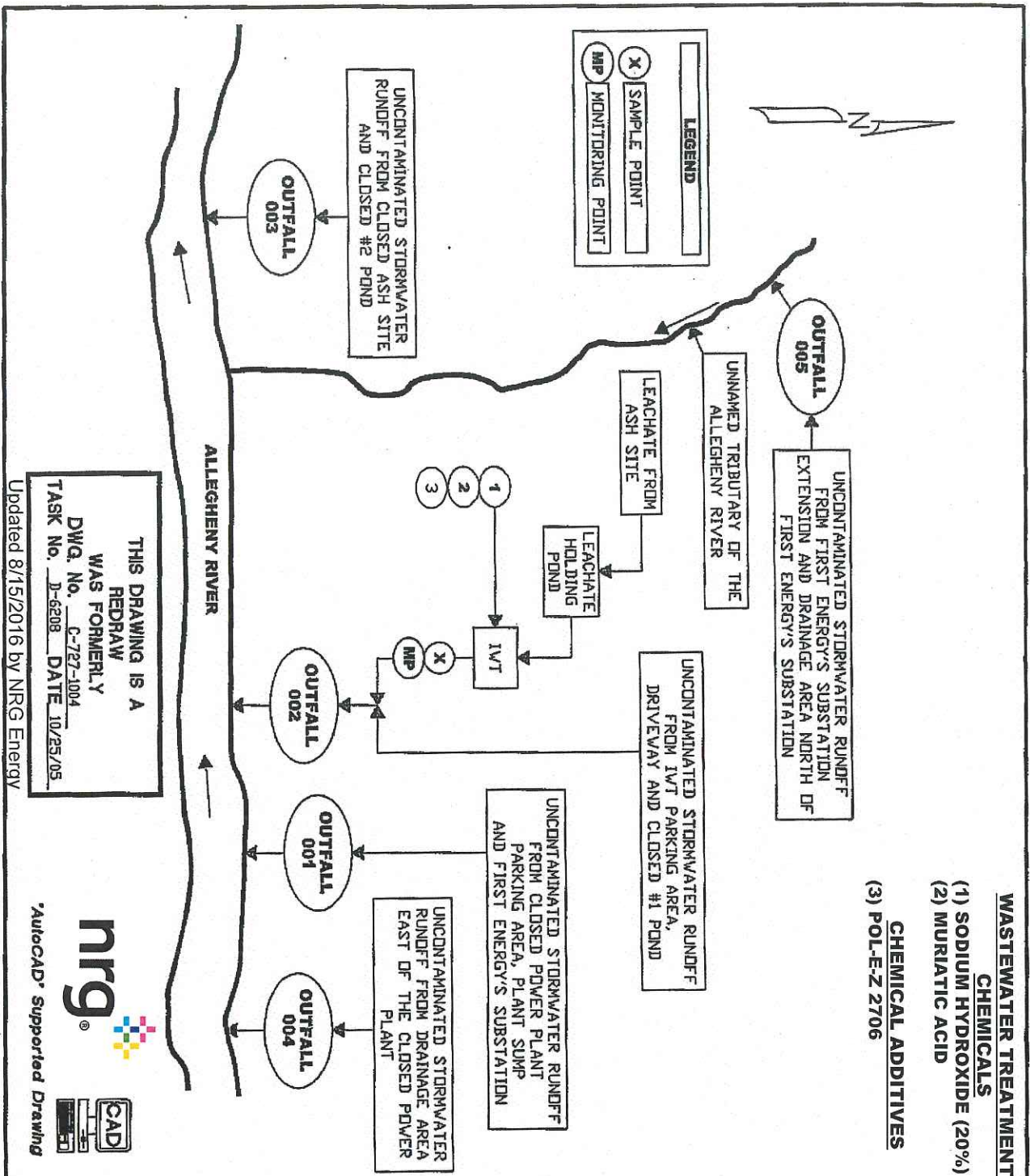
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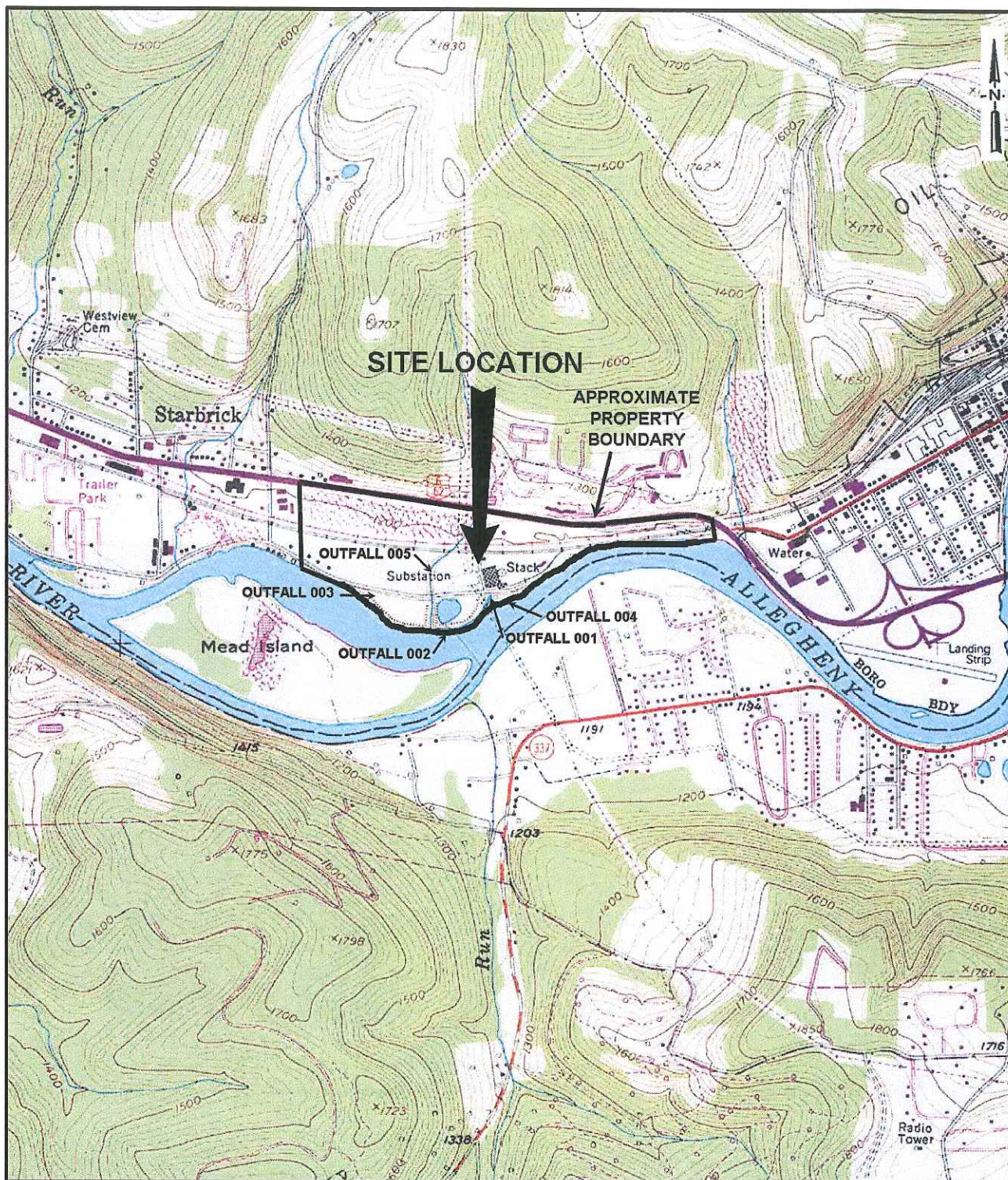
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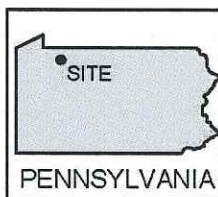
Section 6
Figures



1 REV		SPELLING CORRECTED		S H D		11 23 05		REV				Station: WARREN					
REV		REV		REV		REV		REV				Unit(s): ALL					
Operations Technical Support		Engineering Approvals					Discipline: CHEMICAL										
Discipline		Architectural		Civil		Electrical		Mechanical		Title: NPDES RENEWAL APPLICATION - PERMIT No. PA0005053 STORMWATER AND LEACHATE FLOW DIAGRAM							
Engineer								S.M.B.									
Drafting		Date						10/25/05									
R/CHP		10/25/05		Reviewed By						D-6208		NTS		S-352-1701		1	
Made		Date		Date						Project Control No.		Scale		DRAWING NUMBER		REV	



0 2000 4000
 APPROXIMATE SCALE IN FEET



**FIGURE 1. SITE LOCATION
 WARREN GENERATING STATION
 WARREN, PENNSYLVANIA**



BASE MAP SOURCE: USGS 7.5 minute series topographic quadrangle map Warren, Pennsylvania (1954, revised 1981).

Updated by NRG Energy September 2016

C-727-1001
SH. 2 OF 2

LEGEND

- 1180 EXISTING GRADE CONTOURS
- 1184 FINAL GRADE CONTOUR
- 1184.5 FINAL GRADE SPOT ELEVATION
- TOP
TOE
NEW SIDE SLOPE
- EXISTING PIPE
- NEW PIPE
- DRAINAGE SWALE OR DITCH
- EXISTING FENCE
- NEW FENCE
- NEW FENCE BY OTHERS
- 6" STRUCTURAL FILL
- 8" STRUCTURAL FILL OVER TYPE "C" GEOTEXTILE
- DIP DUCTILE IRON PIPE
- HDPE HIGH DENSITY POLYETHYLENE PIPE
- UNNAMED TRIBUTARY

NOTES:

- BACKGROUND TOPOGRAPHY WAS OBTAINED FROM DRAWING D-744-1005, SHEET 1.
- SURVEY CONTROL CAN BE ESTABLISHED FROM THE FOLLOWING PERMANENT MONUMENTS:
MONUMENT NO. 9 (N 612,691.58, E 1,605,695.30), EL. 1218.42. LOCATED NEAR NORTHEAST CORNER OF EXISTING NORTH ASH DISPOSAL SITE, APPROXIMATELY 730 FEET EAST OF PRESTON ROAD.
MONUMENT NO. 10 (N 612,400, E 1,607,500), EL. 1226.65. LOCATED NEAR NORTHEAST CORNER OF EXISTING NORTH ASH DISPOSAL SITE, APPROXIMATELY 420 FEET WEST OF THE WARREN STATION ENTRANCE.
THIS INFORMATION WAS OBTAINED FROM DRAWING 53-E-0079. OTHER SURVEY CONTROL MONUMENTS ARE SHOWN ON DRAWING 53-E-0130.
- CONTRACTOR MUST VERIFY BOTTOM ELEVATION OF 10" AND 14" SLUICE LINES PRIOR TO INSTALLING 3" RAW LEACHATE AND 6" TREATED LEACHATE PIPES.
- THE BASE INFORMATION FOR THIS DRAWING IS BASED ON DRAWING D-728-1038

NOTE:
SCALE NOTED APPLIES TO 22" X 34" SHEET SIZE. IF PRINT SIZE IS 11" X 17", THEN ACTUAL SCALE IS ONE HALF OF SCALE NOTED. (EXAMPLE: 1" = 50' BECOMES 1" = 100' ON 11" X 17" SHEET SIZE). THIS NOTE APPLIES TO ALL DRAWING SHEETS.

SCALE
0 100 200 FEET

WARREN GENERATING STATION									
WARREN STATION DRAINAGE AREAS									
10	12/10/13	UPDATED LOGO	BPC	PK					
9	1/18/11	UPDATED LOGO	JEP	JP					
8	5/18/10	ADDED NOTE 4, CORRECTED DWG NUMBER IN TITLE BLOCK	JEP	JP					
7	11/17/08	UPDATED TITLE BLOCK	JEP	JP					
6	4/2/07	REVISED AS PER SPCC PLAN	KG	ROO					
5	9/25/05	REVISED AS PER AS BUILT	CMP/J	SMB					
4	4/1/00	ADDITION OF OCB-115 kv	MDC	RAS					
3	5/1/97	OUTFALL DESIGNATIONS ADDED	CMP/J	GJM					
2	12/1/95	230/115 kv FENCED IN AREA ADDED	CMP/J	WBJ					
1	12/1/95	UPDATED TO REFLECT 8/4/93 ISSUE	CMP/J	WBJ					
NO.	DATE	REVISION	BY	CHK.	APP.	APP.	SCALE: 1" = 100'	SIZE: 22x34	FILE: C7271001

DRAWN:	JEP	DRAWING NUMBER
CHECKED:	JP	C-727-1001
APPROVED:		
APPROVED:		
DISCIPLINE:		
SCALE: 1" = 100'	SIZE: 22x34	SHEET: 2 OF 2
		FILE: C7271001



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Section 7
Attachments

DATE	LOCATION	ID NUMBER	AGENCY	Five Year Compliance History		PENALTY
				TYPE OF ACTION	VIOLATION	
9/15/2011	TITUS	06-05024	PADEP	CACP	Opacity violations during 4Q08, 2Q10, & 1Q11	DISPOSITION PENALTY PAID \$12,167
9/16/2011	SHAWVILLE	PA0010031	PADEP/PFBC	Consent Adjudication	To resolve any thermal stream mortality issues associated with the Shawville Station including the alleged 2011 fish kill, A Consent Adjudication was negotiated between GenOn, the DEP and PFBC to resolve any thermal stream mortality issues.	A penalty was paid, \$300,000. Note \$150K paid by 3/1/2012, \$75K by 3/1/2013, an \$75K by 3/1/2014. \$300,000
1/4/2012	TITUS	WQM Part II Permit No. 0686402	PADEP	COA	Groundwater monitoring results indicate that there is a measureable increase in the concentration of one or more contaminants in the groundwater down gradient from Basin 1 and the Emergency Basin. A COA was finalized on May 22, 2012 to address this issue by closing both basins. A minor modification to the WQM Part II Permit was issued by the DEP. Basins were closed in 2015.	Closed None
5/3/2012	TITUS	06-05024	PADEP	CACP	Opacity violations during 1Q12. GenOn received a proposed CACP for the violations on 11/06/12 with a \$484.00 penalty. PADEP required that the agreement be signed by GenOn and returned to PADEP along with a check in the amount of \$484.00 within 14 days.	The CACP was signed by GenOn on 11/19/12 and submitted to PADEP along with a check in the amount of \$484. Agreement executed (signed) on December 13, 2012 by PADEP. A fully executed copy of CACP was received on December 20, 2012. \$484
8/30/2012	SHAWVILLE	PA0010031	PADEP	CACP	Settlement associated with the unanticipated bypass of bottom ash pond decant water at Outfall 008 and the use of an incorrect analytical method for measuring total chlorine residual at Internal Monitoring Point 205.	The CACP was signed by GenOn on 10/11/12 and submitted to PADEP along with a check in the amount of \$3,300. PADEP executed the agreement on 10/22/12 and a copy was returned to GenOn on 10/23/12. \$3,300
11/25/2015	SHAWVILLE	PA0010031	PADEP	COA	Settlement is associated with groundwater impacts resulting from the former storage of coal.	The COA became effective on 11/25/15. NRG submitted a civil penalty settlement of \$50,000 to PADEP and agreed to install a groundwater collection system. \$50,000