



State of New Hampshire
DEPARTMENT OF ENVIRONMENTAL SERVICES

6 Hazen Drive, P.O. Box 95, Concord, NH 03302-0095
(603) 271-3503 FAX (603) 271-2867

AR-1262



July 21, 1999

Allan Palmer, Senior Engineer
PSNH - Merrimack Station
97 River Road
Bow, N.H. 03304

Subject: National Pollutant Discharge Elimination System (NPDES) Compliance
Inspection at Public Service of New Hampshire (PSNH) Merrimack Station (MS)
Bow, NPDES # NH0001465

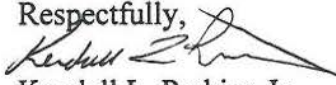
Dear Mr. Palmer:

On May 21, 1999, a Compliance Evaluation Inspection (CEI) was conducted at PSNH-MS in Bow. Objectives of a CEI include determining compliance status with NPDES permit conditions, verifying accuracy of permit required information and verifying the adequacy of permittee sampling and monitoring. The following people were present during this inspection:

Allan Palmer, Senior Engineer, PSNH
Bruce Evans, Maintenance Supervisor, PSNH-MS
Kendall Perkins, Environmental Inspector, NHDES

This inspection involved evaluations of the PSNH-MS permit, records, reports, site, effluent, receiving waters, flow, laboratory and self-monitoring program. There were no deficiencies recorded for this CEI.

Please note that areas not covered in this CEI may be evaluated during a future NPDES inspection, and any area evaluated during this CEI is subject to a more thorough evaluation in the future. I would like to thank everyone for your time and efforts during this compliance inspection. Feel free to contact me if you have any questions.

Respectfully,

Kendall L. Perkins Jr.
Environmental Inspector,
Wastewater Engineering Bureau

cc. Charles I. Hirshberg, P.E., Compliance Supervisor, SWQB, NHDES
Joy Palmer, Compliance Section, USEPA
William Nadeau, Vice President, Northeast Utilities System
Bruce Evans, Chemistry Supervisor, PSNH-MS

Water Compliance Inspection Report

Form Approved.
OMB No. 2040-0057
Approval expires 10-31-95

Section A: National Data System Coding (i.e., PCS)

Transaction Code		NPDES										yr/mo/day					Inspection Type		Inspector		Fac Type							
1	N	2	5	3	N	H	0	0	0	1	4	6	5	11	12	9	9	0	5	2	1	17	18	C	19	S	20	2
Remarks																												
21																												
66																												
Inspection Work Days						Facility Self-Monitoring Evaluation Rating						B1		QA		Reserved												
67	4	0	69	70	4	71	N	72	N	73		74		75				80										

Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number) PSNH Merrimack Station 97 River Road Bow NH 03304		Entry Time/Date 9:00 AM 5/21/99	Permit Effective Date 7/25/92
		Exit Time/Date 1:00 PM 5/21/99	Permit Expiration Date 7/25/97
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) Allan Palmer Senior Engineer Bruce Evans Maint. Supervisor <div style="text-align: right;"> Phone: 634-2439 Fax: </div>		Other Facility Data	
Name, Address of Responsible Official/Title/Phone and Fax Number William Nadeau Phone: 860-665-5315 VP Engineering and Operations Fax: 860-665-6263 <div style="text-align: right;"> Contacted <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>			

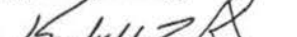
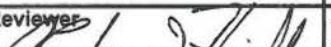
Section C: Areas Evaluated During Inspection (Check only those areas evaluated)

<input checked="" type="checkbox"/> Permit	<input checked="" type="checkbox"/> Flow Measurement	<input type="checkbox"/> Operations & Maintenance	<input type="checkbox"/> CSO/SSO (Sewer Overflow)
<input checked="" type="checkbox"/> Records/Reports	<input checked="" type="checkbox"/> Self Monitoring Program	<input type="checkbox"/> Sludge Handling/Disposal	<input type="checkbox"/> Pollution Prevention
<input checked="" type="checkbox"/> Facility Site Review	<input type="checkbox"/> Compliance Schedules	<input type="checkbox"/> Pretreatment	<input type="checkbox"/> Multimedia
<input checked="" type="checkbox"/> Effluent/Receiving Waters	<input checked="" type="checkbox"/> Laboratory	<input type="checkbox"/> Storm Water	<input type="checkbox"/> Other:

Section D: Summary of Findings/Comments (Attach additional sheets of narrative and checklists as necessary)

See attached report

DB 6/3

Name(s) and Signature(s) of Inspector(s) Kendall L Perkins 	Agency/Office/Phone and Fax Numbers NHDES/WD/SWQB (603)271-2457/7894	Date 7/14/99
Signature of Mangement QA Reviewer Charles I. Hirshberg, P.E. 	Agency/Office/Phone and Fax Numbers NHDES/WD/SWQB (603)271-2457/7894	Date 7/14/99