



**Public Service  
of New Hampshire**

AR-202  
1000 Elm Street, Manchester, NH 03101

Public Service Company of New Hampshire  
P.O. Box 330  
Manchester, NH 03105-0330  
(603) 669-4000

The Northeast Utilities System

September 30, 1994

D08007

DC 10/6/94  
**OCT 03 1994**

Ms. Veronica C. Harrington, Chief  
U.S. Environmental Protection Agency (WCP)  
NPDES Program Operations Section  
J. F. Kennedy Building  
Boston, MA 02203-2211

- Reference:
1. Stormwater Application, A.G. Palmer to S. Puleo, dated September 30, 1992.
  2. Letter (C05871), V. C. Harrington to D. R. Brown, dated September 1, 1994.

Dear Ms. Harrington:

Schiller Station  
NPDES Permit No. NH0001473  
Stormwater Application No. NH5000003

Attached is an amended application for an individual stormwater discharge permit for our Schiller Station, NPDES Permit No. NH0001473, located in Portsmouth, New Hampshire. The original application (Reference 1) has been revised in the following areas per your instructions (Reference 2):

Form 1 - General

Item VIII - Operator Information

Shelley Puleo agreed in a conversation with Allan Palmer that the original information was correct. The facility mailing address, Item V, has been changed to Hartford, Connecticut, however, to reflect the merger between Northeast Utilities and Public Service Company of New Hampshire (PSNH).

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Item XIII - Certification

Per Shelley Puleo's suggestion, a responsible corporate officer, R. G. Chevalier, has signed and dated the application alongside the original D. R. Brown certification.

Form 2F - NPDES

Item V - Nonstormwater Discharges  
Item X - Certification

R. G. Chevalier has also certified these two items.

Item VIII - Discharge Information

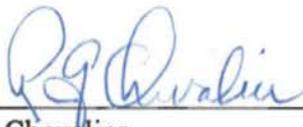
All "BDL" (Below Detection Limits) references have been replaced with the actual analytical detection limits for the four outfalls.

The Schiller Station NPDES Facility Permit expires in September of 1995. Shelley Puleo has agreed to consider including stormwater regulation within the scope of the individual permit reissuance. PSNH has found this approach to be very practical at two other power plants and requests a single, comprehensive NPDES permit.

Please contact Allan Palmer, Senior Engineer, at (603) 634-2439 if you have any questions or require additional information.

Very truly yours,

PUBLIC SERVICE COMPANY OF NEW HAMPSHIRE



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R. G. Chevalier  
Vice President

cc: Mr. J. G. Andrews  
Department of Environmental Services  
6 Hazen Drive, P.O. Box 95  
Concord, NH 03302-0095

FORM <b>1</b> GENERAL	<b>EPA</b>	U.S. ENVIRONMENTAL PROTECTION AGENCY <b>GENERAL INFORMATION</b> Consolidated Permits Program <i>(Read the "General Instructions" before starting.)</i>	EPA I.D. NUMBER F N H D 0 0 0 8 4 2 6 6 6
<b>LABEL ITEMS</b> I. EPA I.D. NUMBER III. FACILITY NAME V. FACILITY MAILING ADDRESS VI. FACILITY LOCATION		PLEASE PLACE LABEL IN THIS SPACE	
		<b>GENERAL INSTRUCTIONS</b> If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.	

**II. POLLUTANT CHARACTERISTICS**

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

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

**III. NAME OF FACILITY**

1 SKIP SCHILLER STATION

**IV. FACILITY CONTACT**

A. NAME & TITLE (last, first, & title) PALMER, ALLAN, SENIOR ENGINEER

B. PHONE (area code & no.) 603 634 2439

**V. FACILITY MAILING ADDRESS**

A. STREET OR P.O. BOX 3 P.O. BOX 270

B. CITY OR TOWN HARTFORD

C. STATE CT

D. ZIP CODE 06141

**VI. FACILITY LOCATION**

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER 5 GOSLING ROAD

B. COUNTY NAME ROCKINGHAM

C. CITY OR TOWN 6 PORTSMOUTH

D. STATE NH

E. ZIP CODE 03801

F. COUNTY CODE (if known)

OCT 03 1994

