
Dear Ms. Cooney:

This letter is submitted for Contracting Officer Representative’s approval to inform you that the SPDES DMR for the reporting period January 1 through January 31, 2018 has been submitted electronically. A copy of this submittal is attached as well as a copy of the email confirmation from the New York State Department of Environmental Conservation (NYSDEC).

If you have any questions, please contact William Kean at extension 4865 or Janice Williams at extension 2913.

Sincerely,

Jeffrey D. Bradford
President & General Manager

cc: W. Delgado, DOE-EMCBC
T. Taggart, DOE-EMCBC
B. C. Bower, DOE-WVDP
S. A. Anderson, CHBWV
J. J. Baker, CHBWV
J. L. Casper, CHBWV
N. Feher, CHBWV
L. K. Hoffelder, CHBWV
W. N. Kean, CHBWV
L. J. Ortega, CHBWV
J. T. Pillittere, CHBWV (Public Reading Room)
D. H. Pritchard, CHBWV
J. E. Wangelin, CHBWV
J. D. Williams, CHBWV
Letter Log (B. Jeffery), CHBWV
CHBWV OITS #1730266
Attachment A
SPDES DMR
**IMR Copy of Submission**

**Permit**
- Permit ID: NY0000973
- Permittee: U.S. DEPT OF ENERGY
- Facility: WEST VALLEY DEMONSTRATION PROJ
- Permitted Feature: 001 - External Outfall
- Report Dates & Status: From 01/01/18 to 01/31/18
- Discharge: 001-M - OUTFALL 001 MONTHLY PROC WW, GW, STORM
- Status: NetDMR Validated

**Considerations for Form Completion**
- Last Name: Bower
- Telephone: 716-942-4368

**No Data Indicator (NODI)**
- Form NODI: -

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<tr>
<th>Parameter</th>
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<th>Name</th>
<th>Quantity or Loading</th>
<th>Quality or Concentration</th>
<th># of Ex.</th>
<th>Freq. of Analysis</th>
<th>Smpl. Type</th>
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**Principal Executive Officer**
- First Name: Bryan C.
- Title: Director, USDOE-WVDP

**Permittee Address**
- 1000 INDEPENDENCE AVE SW
- WASHINGTON, DC 20585

**Permittee Address**
- 10282 ROCK SPRINGS ROAD
- WEST VALLEY, NY 14171-9799

**Facility Location**
- 10282 ROCK SPRINGS ROAD
- WEST VALLEY, NY 14171-9799

**Permit ID**
- NY0000973

**Major**
- Permit ID: NY0000973
- Permittee: U.S. DEPT OF ENERGY
- Facility: WEST VALLEY DEMONSTRATION PROJ
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- Report Dates & Status: From 01/01/18 to 01/31/18
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**Last Name**
- Bower

**Telephone**
- 716-942-4368
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Submission Note
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Edit Check Errors
No errors.

Comments
As required in Title 6 of the New York State Codes, Rules, and Regulations 6NYCCR, Part 750-2(e)(3), the New York Environmental Laboratory Accreditation Program (NYELAP) identification numbers for Laboratories performing analysis for the WVDP Discharge Monitoring Reports (DMRs) are as follows: TestAmerica: NY Lab No. 10026, and General Engineering Laboratory: NY Lab No. 11501. Also, NYCRR Part 750-2(e)(3) requires reporting of Method Detection Limits (MDLs) where monitoring is not performed under ELAP. To that end, the MDL for Total Residual Chlorine analysis, performed by the CHBWV wastewater treatment operators is 0.01 mg/L. Please note that the discharge was started on January 4, 2018 and was temporarily suspended on January 9, 2018. This was due to the site’s inability to get the Lake pump running (Frozen) that is utilized for flow augmentation. With the pump operational, the discharge was re-started on January 15, 2018 and completed on January 18, 2018.

Attachments
No attachments.

Report Last Saved By
U.S. DEPT OF ENERGY
User: william.kean@chbwv.com
Name: William Kean
E-Mail: william.kean@chbwv.com
Date/Time: 2018-02-20 08:43 (Time Zone:-05:00)

Report Last Signed By
User: janice.williams@chbwv.com
Name: Janice Williams
E-Mail: janice.williams@chbwv.com
Date/Time: 2018-02-20 08:44 (Time Zone:-05:00)
**Principal Executive Officer**

| First Name: | Bryan C. |
| Title: | Director, USDOE-WVDP |
| Telephone: | 716-942-4368 |

**Permit ID:** NY0000973

**Permittee:** U.S. DEPT OF ENERGY

**Facility:** WEST VALLEY DEMONSTRATION PROJ

**Permitted Feature:** 007 - External Outfall

**Permittee Address:** 1000 INDEPENDENCE AVE SW
WASHINGTON, DC20585

**Facility Location:** 10282 ROCK SPRINGS ROAD
WEST VALLEY, NY14171-9799

**Discharge:** 007-M - SANITARY, NC COOLING WATER, UTILITY WASTEWATER, STORMWATER

**Status:** NetDMR Validated

**Report Dates & Status**

| Monitoring Period: | From 01/01/18 to 01/31/18 |
| DMR Due Date: | 02/28/18 |

**No Data Indicator (NODI)**

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Submission Note
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Comments

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User: william.keane@chbwv.com
Name: William Kean
E-Mail: william.keane@chbwv.com
Date/Time: 2018-02-20 08:43 (Time Zone: -05:00)
Permit
Permit ID: NY0000973
Permittee: U.S. DEPT OF ENERGY
Facility: WEST VALLEY DEMONSTRATION PROJ
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Discharge: 001-W - OUTFALL 001 WET TESTING QUARTERLY

Major:
Permittee Address: 1000 INDEPENDENCE AVE SW WASHINGTON, DC 20585
Facility Location: 10282 ROCK SPRINGS ROAD WEST VALLEY, NY 14171-9799

Status: NetDMR Validated

Considerations for Form Completion
SEE PERMIT FOOTNOTES FOR WET TESTING REQUIREMENTS

Principal Executive Officer
First Name: Bryan C.
Last Name: Bower
Title: Director, USDOE-WVDP
Telephone: 716-942-4368

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Submission Note

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Edit Check Errors

No errors.

Comments

As required in Title 6 of the New York State Codes, Rules, and Regulations 6NYCRR, Part 750-2.5(e)(3), the New York Environmental Laboratory Accreditation Program (NYELAP) identification numbers for Laboratories performing analysis for the WVDP DMR's are as follows: 1) TestAmerica: NY Lab No. 10026; and 2) General Engineering Laboratory: NY Lab No. 11501. Also, NYCRR Part 750-2.5(e)(3) requires reporting of Method Detection Limits (MDLs) where monitoring is not performed under ELAP. to that end, the MDL for Total Residual Chlorine analysis, performed by the CHBWV wastewater treatment operators is 0.01 mg/L. Please note that the Whole Effluent Summary pages have been attached to this DMR for sampling that was conducted in September, 2017. The full report has been sent under separate cover to Ms. Nicole Wright of NYSDEC's Toxicity Testing Unit on November 29, 2017. As you will note, the testing results for the Ceriodaphnia dubia (Water Flea) and the Pimephales promelas (Fathead minnow) passed the Acute and Chronic reporting limits. This sampling completed the quarterly WET testing requirements for the 2017 calendar year.

Attachments

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Report Last Saved By

U.S. DEPT OF ENERGY

User: william.kean@chbwv.com
Name: William Kean
E-Mail: william.kean@chbwv.com
Date/Time: 2018-02-20 08:43 (Time Zone:-05:00)

Report Last Signed By

User: janice.williams@chbwv.com
Name: Janice Williams
E-Mail: janice.williams@chbwv.com
Date/Time: 2018-02-20 08:44 (Time Zone:-05:00)

©2008 NetDMR
**Permit ID:** NY0000973  
**Major:**  
**Permittee:** U.S. DEPT OF ENERGY  
**Permittee Address:** 1000 INDEPENDENCE AVE SW WASHINGTON , DC20585  
**Facility:** WEST VALLEY DEMONSTRATION PROJ  
**Facility Location:** 10382 ROCK SPRINGS ROAD WEST VALLEY , NY14171-9799  
**Permitted Feature:** 007 - External Outfall  
**Discharge:** 007-W - OUTFALL 007 WET TESTING QUARTERLY  
**Report Dates & Status**  
**Monitoring Period:** From 10/01/17 to 12/31/17  
**DMR Due Date:** 02/28/18  
**Status:** NetDMR Validated  

### Considerations for Form Completion

SEE PERMIT FOOTNOTES FOR WET TESTING REQUIREMENTS

### Principal Executive Officer

**First Name:** Bryan C.  
**Last Name:** Bower  
**Title:** Director, UEDOE-WVDP  
**Telephone:** 716-942-4368

### No Data Indicator (NODI)

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**Submission Note**

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

**Edit Check Errors**

No errors.

**Comments**

**Attachments**

No attachments.

**Report Last Saved By**

**U.S. DEPT OF ENERGY**  
**User:** william.kean@chbwv.com  
**Name:** William Kean  
**E-Mail:** william.kean@chbwv.com  
**Date/Time:** 2018-02-20 08:43 (Time Zone:-05:00)

**Report Last Signed By**

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**Name:** Janice Williams  
**E-Mail:** janice.williams@chbwv.com  
**Date/Time:** 2018-02-20 08:44 (Time Zone:-05:00)
Permit
Permit ID: NY0000973
Permittee: U.S. DEPT OF ENERGY
Facility: WEST VALLEY DEMONSTRATION PROJ
Permitted Feature: 01B - Internal Outfall
Report Dates & Status
Monitoring Period: From 01/01/18 to 01/31/18
Status: DMR Due Date: 02/28/18

Considerations for Form Completion
Principal Executive Officer
First Name: Bryan C.
Title: Director, USDOE-WVDP
Last Name: Bower
Telephone: 716-942-4368

Parameter NODI Quantity or Loading Quality or Concentration
Code Name Value 1 Value 2 Units Value 1 Value 2 Value 3 Units
00056 Flow rate Smpl.
1 - Effluent Gross
Season: 0 Req. Req Mon MO AVG Req Mon DAILY MX 07 - gal/d
NODI: -
71990 Mercury, total [as Hg]
1 - Effluent Gross
Season: 0 Req. Req Mon MO AVG < =50 DAILY MX 3M - ng/L
NODI: -

Submission Note
If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors
No errors.

Comments

Attachments
No attachments.

Report Last Saved By
U.S. DEPT OF ENERGY
User: william.kean@chbwv.com
Name: William Kean
E-Mail: william.kean@chbwv.com
Date/Time: 2018-02-20 08:43 (Time Zone: -05:00)

Report Last Signed By
User: janice.williams@chbwv.com
Name: Janice Williams
E-Mail: janice.williams@chbwv.com
Date/Time: 2018-02-20 08:44 (Time Zone: -05:00)
IMR Copy of Submission

Permit
Permit ID: NY0000973
Permittee: U.S. DEPT OF ENERGY
Facility: WEST VALLEY DEMONSTRATION PROJ
Permitted Feature: 116 - Internal Outfall

Major:
Permittee Address: 1000 INDEPENDENCE AVE SW WASHINGTON, DC20585
Facility Location: 16282 ROCK SPRINGS ROAD WEST VALLEY, NY14171-9799
Discharge: 116-M - PSEUDO MON. POINT @FRANKS CRK

Report Dates & Status
Monitoring Period: From 01/01/18 to 01/31/18
DMR Due Date: 02/28/18
Status: NatDMR Validated

Considerations for Form Completion
IF PSUEDO MONITORING POINT REPORT IS NOT REQUIRED DURING THE MONITORING PERIOD, EITHER CHECK THENO DISCHARGE BOX OR ENTER 'NODI A' IN PLACE OF A MEASUREMENT TO INDICATE A GENERAL PERMIT EXEMPTION.

Principal Executive Officer
First Name: Bryan C.
Title: Director, USDOE-WVDP
Telephone: 716-942-4368

No Data Indicator (NODI)
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Submission Note
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Edit Check Errors
No errors.

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Attachments
Name
WVDP_January_2017_TDS_Calc.pdf

Report Last Saved By
U.S. DEPT OF ENERGY
User: William Kean
E-Mail: william.kean@chbwv.com
Date/Time: 2018-02-20 08:43 (Time Zone: -05:00)
Report Last Signed By
User: Janice Williams
E-Mail: janice.williams@chbwv.com
Date/Time: 2018-02-20 08:44 (Time Zone: -05:00)
### IMR Copy of Submission

**Permit**  
Permit ID: NY0000973  
Permittee: U.S. DEPT OF ENERGY  
Facility: WEST VALLEY DEMONSTRATION PROJ  
Permitted Feature: SUM - Internal Outfall  
Report Dates & Status  
Monitoring Period: From 01/01/18 to 01/31/18  
Status: NetDMR Validated  
Permittee Address: 1000 INDEPENDENCE AVE SW WASHINGTON, DC 20585  
Facility Location: 10282 ROCK SPRINGS ROAD WEST VALLEY, NY 14171-9799  
Discharge: SUM-N - SUM OF OUTFALLS 1 & 7  
DMR Due Date: 02/28/18

### Considerations for Form Completion

**Principal Executive Officer**  
First Name: Bryan  
Title: Director, USDOE-WVDP  
Last Name: Bower  
Telephone: 716-942-4368

### Parameter NODI

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### Edit Check Errors

No errors.

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### Attachments

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### Report Last Saved By

**U.S. DEPT OF ENERGY**  
User: william.keangichbwv.com  
Name: William Kean  
E-Mail: william.keangichbwv.com  
Date/Time: 2018-02-20 08:43 (Time Zone: -05:00)

### Report Last Signed By

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Name: Janice Williams  
E-Mail: janice.williams@chbwv.com  
Date/Time: 2018-02-20 08:44 (Time Zone: -05:00)

©2008 NetDMR
ATTACHMENT

SPDES DISCHARGE MONITORING REPORT - JANUARY 1 THROUGH JANUARY 31, 2018
NET IRON EFFLUENT CONCENTRATION CALCULATION
WEST VALLEY DEMONSTRATION PROJECT, SPDES PERMIT NO. NY-0000973

OUTFALL 001

\[ M_1 = \frac{(X_1 + X_2) V_1}{2} = 1960289.83 \text{ mg/month} \]

\[ X_1 = 0.446 \text{ mg/L} \]
\[ X_2 = 0.494 \text{ mg/L} \]
\[ V_1 = 4170829.43 \text{ L/month} \]

OUTFALL 007

\[ M_7 = \frac{(X_1 + X_2) V_7}{2} = 0.00 \text{ mg/month} \]

\[ X_1 = 0.00 \text{ mg/L} \]
\[ X_2 = 0.00 \text{ mg/L} \]
\[ V_7 = 0.00 \text{ L/month} \]

Note: There was no discharge from outfall 007 during this monitoring period.

RAW WATER

\[ MRW = \frac{(X_1 + X_2 + X_3 + X_4) VRW}{4} = 0.00 \text{ mg/month} \]

\[ X_1 = 0.00 \text{ mg/L} \]
\[ X_2 = 0.00 \text{ mg/L} \]
\[ X_3 = 0.00 \text{ mg/L} \]
\[ X_4 = 0.00 \text{ mg/L} \]
\[ VRW = 0.00 \text{ L/month} \]

Note: Raw water from the reservoir system is no longer used for process water since the site installed two groundwater wells. This eliminated the need to collect raw water samples on a weekly basis and altered the iron discharge concentration equation as the mass of iron entering the system is no longer necessary.

IRON DISCHARGE CONCENTRATION

\[ \frac{M_1 + M_7 - MRW}{V_1 + V_7} = 0.47 \text{ mg/L} \]
SPDES DISCHARGE MONITORING REPORT - JANUARY 1 THROUGH JANUARY 31, 2018
TOTAL DISSOLVED SOLIDS (TDS) CONCENTRATION CALCULATION - MONITORING POINT 116
WEST VALLEY DEMONSTRATION PROJECT, SPDES PERMIT No. NY-0000973

Date: January 4, 2018

\[ C_4 = \frac{(Q_1)(C_1)+(Q_2)(C_2)+(Q_3)(C_3))}{Q_4} \]
\[ = \frac{(0.140 \text{ MGD})(893 \text{ mg/L})+(0.238 \text{ MGD})(239 \text{ mg/L})+(0.0 \text{ MGD})(0 \text{ mg/L})}{0.378 \text{ MGD}} \]
\[ = 481 \text{ mg/L} \]

Date: January 17, 2018

\[ C_4 = \frac{(Q_1)(C_1)+(Q_2)(C_2)+(Q_3)(C_3))}{Q_4} \]
\[ = \frac{(0.140 \text{ MGD})(869 \text{ mg/L})+(0.687 \text{ MGD})(198 \text{ mg/L})+(0.324 \text{ MGD})(128 \text{ mg/L})}{1.151 \text{ MGD}} \]
\[ = 260 \text{ mg/L} \]

Q1 = Flow at Outfall 001, million gallons per day (MGD).

C1 = Total Dissolved Solids (TDS) concentration at Outfall 001, mg/L.

Q2 = Flow in Franks Creek, MGD (without Outfall 001), measured at WNSP006 just prior to, and shortly after the discharge event.

C2 = TDS concentration in Franks Creek measured at WNSP006 just prior to, and shortly after the discharge event.

Q3 = Flow of augmentation water, MGD, if required.

C3 = TDS concentration in augmentation water, MGD.

Q4 = Q1 + Q2 + Q3, MGD (Flow in Franks Creek, including Outfall 001).

C4 <= 500 mg/L (calculated TDS concentration at 116 in Franks Creek, which includes Outfall 001).
Attachment B
Whole Effluent Toxicity (WET)
Testing Summary Pages
Facility Name: West Valley Demonstration Project  
NPDES Permit Number: NY0000973  
Pipe Number: 001  
Test Start Date: 9/22/17  

Test Type | Test Species | Sample Type | Sample Method
--- | --- | --- | ---
Acute | Fathead Minnow | Prechlorinated | _Grab_
Chronic | Ceriodaphnia | Dechlorinated | _Composite_
Modified (chronic reporting acute values) | Daphnia Pulex | Chlorine Spiked in Lab | _Flowthru_
| Mysis Shrimp | Chlorinated on site | 
| Daphnia Pulex | | _Other_
| Menid | X Unchlorinated | 
| Sea Urchin | | 
| Champia | | 
| Selenastrum | | 

**Dilution Water**

- receiving water collected at a point upstream of or away from the discharge, free from toxicity or other sources of contamination; (Receiving water name: Erdman Brook)
- alternate surface water of known quality and a hardness, etc. to generally reflect the characteristics of the receiving water; (Surface water name: ____________)
- synthetic water prepared using either Millipore Mill-Q or equivalent deionized water and reagent grade chemicals; or deionized water combined with mineral water; or artificial sea salts mixed with deionized water; or deionized water and hypersaline brine; or

Effluent sampling date(s): 9/20-21/17 9/24-25/17

Effluent concentrations tested (in%): 0 6.25 12.5 25 50 100

* Permit limit concentration: TUa < 0.3, TUc < 1.0

Was effluent salinity adjusted? No

Actual effluent concentrations tested after salinity adjustment (%): 0 6.25 12.5 25 50 100

Reference Toxicant test date: 9/5/17

**Test Acceptability Criteria**

Mean Control Survival: N/A  
Mean Control Reproduction: N/A

Mean Diluent Survival: 100%  
Mean Diluent Reproduction: 26.6 young/female

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<th>LC50</th>
<th>Limits</th>
<th>Results</th>
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<tbody>
<tr>
<td>N/A</td>
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<table>
<thead>
<tr>
<th>TUa</th>
<th>Upper Value</th>
<th>Lower Value</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

Data Analysis Method Used: Graphical

<table>
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<tr>
<th>TUa</th>
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<th>C-NOEC</th>
</tr>
</thead>
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<tr>
<th>LOEC</th>
<th>IC25</th>
<th>IC50</th>
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<tbody>
<tr>
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<td>&gt;100%</td>
<td>&gt;100%</td>
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</tbody>
</table>

TRC: 0.061 mg/L
**NEW ENGLAND BIOASSAY, A DIVISION OF GZA EPA TEST SUMMARY SHEET**

| Facility Name: West Valley Demonstration Project | Test Start Date: 9/22/17 |
| NPDES Permit Number: NY0000973 | Pipe Number: 001 |

<table>
<thead>
<tr>
<th>Test Type</th>
<th>Test Species</th>
<th>Sample Type</th>
<th>Sample Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acute</td>
<td>Fathead Minnow</td>
<td>Prechlorinated</td>
<td>Grab</td>
</tr>
<tr>
<td>Chronic</td>
<td>Ceriodaphnia</td>
<td>Dechlorinated</td>
<td>X Composite</td>
</tr>
<tr>
<td>Modified (chronic reporting acute values)</td>
<td>X Daphnia Pulex</td>
<td>Chlorine Spiked in Lab</td>
<td>Flowthru</td>
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<tr>
<td>24hr screening</td>
<td>X Mysid Shrimp</td>
<td>Chlorinated on site</td>
<td>Other</td>
</tr>
<tr>
<td></td>
<td>Sheepshead</td>
<td>X Unchlorinated</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Menidia</td>
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<tr>
<td></td>
<td>Sea Urchin</td>
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<td>Champia</td>
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</tr>
<tr>
<td></td>
<td>Selenstrum</td>
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</tbody>
</table>

**Dilution Water**
- Receiving water collected at a point upstream of or away from the discharge, free from toxicity or other sources of contamination; (Receiving water name: Erdman Brook)
- Alternate surface water of known quality and a hardness, etc. to generally reflect the characteristics of the receiving water; (Surface water name: ___)
- X Synthetic water prepared using either Millipore Mill-Q or equivalent deionized water and reagent grade chemicals; or deionized water combined with mineral water;
- or artificial sea salts mixed with deionized water;
- deionized water and hypersaline brine; or

Effluent sampling date(s): 9/20-21/17 9/24-25/17

Effluent concentrations tested (in%): 0 6.25 12.5 25 50 100

* Permit limit concentration: TUa < 0.3, TUc < 1.0

Was effluent salinity adjusted? No

Actual effluent concentrations tested after salinity adjustment (%): 0 6.25 12.5 25 50 100

Reference Toxicant test date: 9/5/17

**Test Acceptability Criteria**

| Mean Control Survival: N/A | Mean Control Weight: N/A |
| Mean Diluent Survival: 100% | Mean Diluent Weight: 9.604 mg |

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