



LR-E03-0395

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
ARTICLE NUMBER: 7099 3400 0003 6394 4430

Department of Environmental Protection
Division of Water Quality
Bureau of Permit Management
P.O. Box 029
Trenton, N.J. 08625-0029

**NEW JERSEY POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT
HOPE CREEK GENERATING STATION
NJPDDES PERMIT NJ0025411**

Dear Sir:

Attached is the Discharge Monitoring Report for the Hope Creek Generating Station for the month of September 2003.

This report is required by and prepared specifically for the Environmental Protection Agency (EPA) and the New Jersey Department of Environmental Protection (NJDEP). It presents only the observed results of measurements and analyses required to be performed by the above agencies. The choice of the measurement devices and analytical methods are controlled by the EPA and the NJDEP, not by the company, and there are limitations on the accuracy of such measurement devices and analytical techniques even when used and maintained as required. Accordingly, this report is not intended as an assertion that any instrument has measured, or that any reading or analytical result represents the true value with absolute accuracy, nor is it an endorsement of the suitability of any analytical or measurement procedure.

If you have any questions concerning this report, please feel free to contact J. Serfass at (856) 339-5411.

Sincerely,

A handwritten signature in black ink, appearing to read "A. Christopher Bakken III".

A. Christopher Bakken III
Sr. Vice President – Site Operations

JE25

LR-E03-0395
NJPDES DMR

Attachments

C Executive Director, DRBC
 USNRC - Docket number 50-354
 Vice President - Operations
 Manager - Nuclear Safety & Licensing
 Christopher McAuliffe, Esq.
 D. K. Hurka
 E. J. Keating
 J. Buchanan
 J. Serfass
 Patrick Whyte, Jr.
 NJPDES Tech
 NBS Room, MC N64
 Chem File HCH 2003-046
 Env Lic File 2.1.6 HC Book

LR-E03-0395
NJPDES DMR

EXPLANATION OF CONDITIONS

September 2003

The following explanations are included to clarify possible deviation from permit conditions.

General - The columns labeled "No. Ex" on the enclosed DMR tabulate the number of daily discharge values outside the indicated limits.

Data reporting and accuracy reflect the working environment, the design capabilities and reliability of the monitoring instruments and operating equipment.

Deviations from required sampling, analysis monitoring and reporting methods and periodicities are noted on the respective transmittal sheet.

Results reported on the Discharge Monitoring Report forms are consistent with permit limits, data supplied from contract laboratories, the December 1993 revision of the NJDEP DMR Instruction Manual and specific guidance from DEP personnel.

LR-E03-0395
NJPDES DMR

EXPLANATION OF EXCEEDANCES

September 2003

The following exceedance is included in the attached report and explained below.

1. A description of the discharge, including the time of the discharge, the location of discharge, the volume of the discharge, the concentration of pollutants discharged, and the receiving water of the discharge;

On Sept. 11, 2003, the vendor laboratory notified PSEG Nuclear LLC - Hope Creek Chemistry that the sewage treatment plant effluent, DSN 462B, fecal coliform sample result for the sample taken on 9/3/2003 was 620 col/100 ml. Hope Creek Station NJPDES permit NJ0025411 has a monthly average limitation of 200 col/100 ml and a weekly average limitation of 400 col/100 ml. The sample analysis result exceeded the weekly average limitation.

DSN 462B co-mingles with the cooling tower blowdown flow and ultimately discharges to the Delaware River via DSN 461A. It is unknown what the total volume of the discharge was.

2. Steps being taken to determine the cause of the permit noncompliance;

When the sewage treatment plant operator learned of the fecal coliform exceeding NJPDES limits, he walked down the sewage treatment plant system. He found the chlorine tablets, used to treat sewage plant effluent, were discolored with a gray appearance. The operator replaced the chlorine tablets in use with fresh chlorine tablets from an unopened container. The new tablets were bright white with a strong chlorine odor.

3. Steps being taken to reduce, remediate, and eliminate the noncomplying discharge and any damage to the environment, and the anticipated time frame to initiate and complete the steps to be taken;

After the tablet replacement on 9/11/03, subsequent fecal coliform results were:

9/16/03	<1 col/100 ml
9/17/03	<1 col/100 ml
9/18/03	<1 col/100 ml
9/24/03	33 col/100 ml

There was no apparent damage to the environment.

4. The duration of the discharge, including the dates and times of the commencement and, for an unanticipated bypass, the dates and times of the end or anticipated end of the discharge, and if the discharge has not been corrected, the anticipated time when the permittee will correct the situation and return the discharge to compliance;

It is unknown when the discharge started but after replacing the chlorine tablets subsequent samples were below permit limits.

5. The cause of the noncompliance;

The cause appears to be the use of degraded chlorine tablets. Additionally, the vendor laboratory performing the analysis did not notify PSEG Nuclear personnel in time to allow system adjustments and additional grab sampling analysis to reduce the weekly average to within the limit.

6. Steps being taken to reduce, eliminate, and prevent reoccurrence of the noncomplying discharge;

Establish a routine to replace chlorine tablets with fresh tablets on a periodic basis. Review the lessons learned from this event with the contract sewage treatment plant operators and reinforce the need for a questioning attitude and self-checking. Clarify expectations for timely sample result follow-up to allow proactive operator actions. Review expectations with the vendor laboratory and if necessary create expectations to immediately notify PSEG Nuclear of exceeded permit limits. Provide revised PSEG Nuclear Chain of Custody forms with contact information and PSEG Nuclear NJPDES permit limits with special instructions for immediate notification.

COUNTY OF SALEM
STATE OF NEW JERSEY

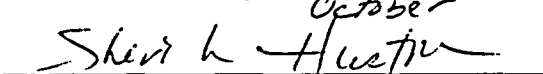
I, A. Christopher Bakken III, of full age, being duly sworn according to law, upon my oath depose and say:

1. I am the Sr. Vice President, Site Operations for PSEG Nuclear, and as such am authorized to sign Hope Creek's Discharge Monitoring Reports submitted to the New Jersey Department of Environmental Protection pursuant to the Station's New Jersey Pollutant Discharge Elimination System permit.
2. I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.
3. The signature on the attached Discharge Monitoring Reports is my signature and I am submitting this affidavit in satisfaction of the requirement that my signature be notarized.



A. Christopher Bakken III
Sr. Vice President - Site Operations

Sworn and subscribed before me
this 22 day of September 2003.



SHERI L. HUSTON
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires 12/08/2003

New Jersey Department of Environmental Protection
Division of Water Quality
Surface Water Discharge Monitoring Report Submittal Form

PI 46815

NJPDES PERMIT	MONITORING PERIOD	MONITORED LOCATION:														
NJ0025411	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><th style="width: 15%;">Month</th><th style="width: 15%;">Day</th><th style="width: 15%;">Year</th><th style="width: 10%; text-align: center;">To</th><th style="width: 15%;">Month</th><th style="width: 15%;">Day</th><th style="width: 15%;">Year</th></tr><tr><td style="text-align: center;">9</td><td style="text-align: center;">1</td><td style="text-align: center;">2003</td><td style="text-align: center;">To</td><td style="text-align: center;">9</td><td style="text-align: center;">30</td><td style="text-align: center;">2003</td></tr></table>	Month	Day	Year	To	Month	Day	Year	9	1	2003	To	9	30	2003	461A - DSN 461A - dsw
Month	Day	Year	To	Month	Day	Year										
9	1	2003	To	9	30	2003										

PERMITTEE:

PSEG NUCLEAR LLC
PO BOX 236/N21
ALLOWAY CREEK NECK RD
HANCOCKS BRIDGE, NJ 08038

LOCATION OF ACTIVITY:

HOPE CREEK GENERATING STATION
ARTIFICIAL ISLAND
FOOT OF BUTTONWOOD RD
LOWER ALLOWAYS CREEK, NJ 08038-0000

REPORT RECIPIENT:

PSE&G
P.O. BOX 236/N21
HANCOCKS BRIDGE, NJ 08038

REGION / COUNTY: Southern / Salem County

CHECK IF APPLICABLE: ☐ No Discharge this Monitoring Period ☐ Monitoring Report Comments Attached

WHO MUST SIGN The highest ranking official having day-to-day managerial and operational responsibilities for the discharging facility shall sign the certification or, in his absence a person designated by that person. For a local agency, the highest ranking operator of the treatment works shall sign the certification. Where the highest ranking operator does not have the ability to authorize capital expenditures and hire personnel, a person having that responsibility or person designated by that person shall also sign the second certification at the bottom of this page. If the local agency has contracted with another entity to operate the treatment works, the highest-ranking official of the contracted entity shall sign the certification.

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A. Christopher Bakken III, Sr. Vice-President - Site Operations

N/A

NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR

GRADE AND REGISTRY NUMBER (IF APPLICABLE)



10-22-03

856-339-5700

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR

DATE

AREA CODE/PHONE NUMBER

**For a local agency where the highest ranking operator does not have the ability to authorize capital expenditures and hire personnel, a person having that responsibility or person designated by that person shall sign the following certification:*

I certify under penalty of law and in accordance with N.J.S.A. 58:10A-6F(5) that I have received and reviewed the attached discharge monitoring reports.

N/A

N/A

N/A

N/A

NAME AND TITLE

SIGNATURE

DATE

AREA CODE/PHONE NUMBER

Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - dsw

9/1/2003 TO 9/30/2003

HOPE CREEK GENERATING STATION

PARAMETER		QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	57.252	68.309	MGD	*****	*****	*****	*****	0	CONTINUOUS	METER
50050 1	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****			Continuous	METER
Effluent Gross Value	MDL	*****	*****		*****	*****	*****				
pH	SAMPLE MEASUREMENT	*****	*****	*****	8.2	*****	8.6	SU	0	1/Week	GRAB
00400 1	PERMIT REQUIREMENT	*****	*****		6.0 01DAMN	*****	9.0 01DAMX			1/Week	GRAB
Effluent Gross Value	MDL	*****	*****		*****	*****	*****				
Chlorine Produced	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	0.16	MG/L	0	3/Week	GRAB
Oxidants	PERMIT REQUIREMENT	*****	*****		*****	0.2 01MOAV	0.5 01DAMX			3/Week	GRAB
*CPOX 1	MDL	*****	*****		*****	*****	*****				
Temperature, oC	SAMPLE MEASUREMENT	*****	*****	*****	*****	26.8	32.5	DEG.C	0	CONTINUOUS	METER
00010 1	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	36.2 01DAMX			Continuous	METER
Effluent Gross Value	MDL	*****	*****		*****	*****	*****				
Temperature, oC	SAMPLE MEASUREMENT	*****	*****	*****	*****	24.9	27.7	DEG.C	0	CONTINUOUS	METER
00010 7	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			Continuous	METER
Intake From Stream	MDL	*****	*****		*****	*****	*****				
Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	*****	*****	*****	*****	12	12	MG/L	0	1/Month	GRAB
00680 1	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/Month	GRAB
Effluent Gross Value	MDL	*****	*****		*****	*****	*****				

Comments: If there are any questions in regards to the monitoring report form, please contact Susan Rosenwinkel of the BPSP - Reg'n 2 at (609) 292-4860 or via email at "srosenwi@dep.state.nj.us".

Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER: NJ0025411
 MONITORED LOCATION: 461A DSN 461A - dsw
 MONITORING PERIOD: 9/1/2003 TO 9/30/2003
 FACILITY NAME: HOPE CREEK GENERATING STATION

PARAMETER		QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	*****	*****		*****	2	2		0	1/Month	CALCTD
00680 2 Effluent Net Value	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		1/Month	CALCTD
	MDL	*****	*****		*****						
Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	*****	*****		*****	8	8		0	1/Month	GRAB
00680 7 Intake From Stream	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		1/Month	GRAB
	MDL	*****	*****		*****						
Heat (winter) (per Hr.)	SAMPLE MEASUREMENT	78	318 ² ₃₁₈		*****	*****	*****		0	1/Day	CALCTD
81387 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MBTU/HR	*****	*****	*****	*****		1/Day	CALCTD
	MDL	*****	*****		*****						
Lab Certification #	SAMPLE MEASUREMENT	PA 343	17451		06431				-	-	-
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic	NOT AP
	MDL	*****	*****		*****						

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Month	Day	Year												
9	1	2003												
Month	Day	Year												
9	30	2003												

PERMITTEE:

PSEG NUCLEAR LLC
PO BOX 236/N21
ALLOWAY CREEK NECK RD
HANCOCKS BRIDGE, NJ 08038

LOCATION OF ACTIVITY:

HOPE CREEK GENERATING STATION
ARTIFICIAL ISLAND
FOOT OF BUTTONWOOD RD
LOWER ALLOWAYS CREEK, NJ 08038-0000

REPORT RECIPIENT:

PSE&G
P.O. BOX 236/N21
HANCOCKS BRIDGE, NJ 08038

REGION / COUNTY: Southern / Salem County

CHECK IF APPLICABLE: ☐ No Discharge this Monitoring Period ☐ Monitoring Report Comments Attached

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A. Christopher Bakken III, Sr. Vice-President - Site Operations

N/A

NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR

GRADE AND REGISTRY NUMBER (IF APPLICABLE)



10-22-03 856-339-5700

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR

DATE

AREA CODE/PHONE NUMBER

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N/A

N/A

N/A

N/A

NAME AND TITLE

SIGNATURE

DATE

AREA CODE/PHONE NUMBER

Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER: NJ0025411
MONITORED LOCATION: 461C DSN 461C - DSW Interni
MONITORING PERIOD: 9/1/2003 TO 9/30/2003
FACILITY NAME: HOPE CREEK GENERATING STATION

PARAMETER		QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	0.036	0.100	MGD	*****	*****	*****	*****	0	CONTINUOUS	METER
50050 1	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****			Continuous	METER
Effluent Gross Value	MDL	*****	*****		*****	*****	*****				
Solids, Total	SAMPLE MEASUREMENT	*****	*****	*****	*****	24	24	MG/L	0	1/Month	COMPOS
Suspended	PERMIT REQUIREMENT	*****	*****		*****	30 01MOAV	100 01DAMX			1/Month	COMPOS
00530 1	MDL	*****	*****		*****	*****	*****				
Effluent Gross Value											
Petrol Hydrocarbons, Total Recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	<1	<1	MG/L	0	2/Month	GRAB
45501 1	PERMIT REQUIREMENT	*****	*****		*****	10 01MOAV	15 01DAMX			2/Month	GRAB
Effluent Gross Value	MDL	*****	*****		*****	*****	*****				
Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	*****	*****	*****	*****	14	14	MG/L	0	1/Month	COMPOS
00680 1	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	50 01DAMX			1/Month	COMPOS
Effluent Gross Value	MDL	*****	*****		*****	*****	*****				
Lab Certification #	SAMPLE MEASUREMENT	PA 343	17451		06431				-	-	-
99999 99	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic	NOT AP
Lab	MDL	*****	*****		*****	*****	*****				

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New Jersey Department of Environmental Protection
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Surface Water Discharge Monitoring Report Submittal Form

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	Month	Day	Year											
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Month	Day	Year												
9	30	2003												

PERMITTEE:

PSEG NUCLEAR LLC
PO BOX 236/N21
ALLOWAY CREEK NECK RD
HANCOCKS BRIDGE, NJ 08038

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A. Christopher Bakken III, Sr. Vice-President - Site Operations	N/A
NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	GRADE AND REGISTRY NUMBER (IF APPLICABLE)
	10-22-03 856-339-5700
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	DATE AREA CODE/PHONE NUMBER

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I certify under penalty of law and in accordance with N.J.S.A. 58:10A-6F(5) that I have received and reviewed the attached discharge monitoring reports.

N/A	N/A	N/A
NAME AND TITLE	SIGNATURE	DATE
AREA CODE/PHONE NUMBER		

Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:


FACILITY NAME:

NJ0025411

462B dsn 462B - dsw outfall

9/1/2003 TO 9/30/2003

HOPE CREEK GENERATING STATION

PARAMETER		QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	0.011	0.021	MGD	*****	*****	*****	*****	0	1/Day	METER
50050 1	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****		0	1/Day	METER
Effluent Gross Value	MDL	*****	*****		*****	*****	*****		0	1/Day	METER
BOD, 5-Day (20 oC)	SAMPLE MEASUREMENT	*****	*****	*****	*****	300	300	MG/L	0	1/Month	COMPOS
00310 G	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX		0	1/Month	COMPOS
Raw Sew/Influent	MDL	*****	*****		*****	*****	*****		0	1/Month	COMPOS
BOD, 5-Day (20 oC)	SAMPLE MEASUREMENT	0	0	KG/DAY	*****	6	6	MG/L	0	1/Month	COMPOS
00310 1	PERMIT REQUIREMENT	8 01MOAV	REPORT 01WKAV		*****	30 01MOAV	45 01WKAV		0	1/Month	COMPOS
Effluent Gross Value	MDL	*****	*****		*****	*****	*****		0	1/Month	COMPOS
BOD, 5-Day (20 oC)	SAMPLE MEASUREMENT	*****	*****	*****	98.2	*****	98.2	PERCENT	0	1/Month	CALCTD
00310 K	PERMIT REQUIREMENT	*****	*****		87.5 01DAMN	*****	REPORT 01MOAV		0	1/Month	CALCTD
Percent Removal	MDL	*****	*****		*****	*****	*****		0	1/Month	CALCTD
Solids, Total Suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	334	334	MG/L	0	1/Month	COMPOS
00530 G	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX		0	1/Month	COMPOS
Raw Sew/Influent	MDL	*****	*****		*****	*****	*****		0	1/Month	COMPOS
Solids, Total Suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	10	10	MG/L	0	1/Month	COMPOS
00530 1	PERMIT REQUIREMENT	*****	*****		*****	30 01MOAV	45 01WKAV		0	1/Month	COMPOS
Effluent Gross Value	MDL	*****	*****		*****	*****	*****		0	1/Month	COMPOS

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Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER: NJ0025411
 MONITORED LOCATION: 462B dsn 462B - dsw outfall
 MONITORING PERIOD: 9/1/2003 TO 9/30/2003
 FACILITY NAME: HOPE CREEK GENERATING STATION

PARAMETER		QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Solids, Total	SAMPLE MEASUREMENT	*****	*****		97	97	*****		0	1/Month	CALCTD
Suspended	PERMIT REQUIREMENT	*****	*****	*****	85 01DAMN	REPORT 01MOAV	*****	PERCENT		1/Month	CALCTD
00530 K	NOI	*****	*****								
Percent Removal											
Oil and Grease	SAMPLE MEASUREMENT	*****	*****		*****	<1	<1		0	1/Month	GRAB
00556 1	PERMIT REQUIREMENT	*****	*****	*****	*****	10 01MOAV	15 01DAMX	MG/L		1/Month	GRAB
Effluent Gross Value	NOI	*****	*****								
Coliform, Fecal	SAMPLE MEASUREMENT	*****	*****		*****	7	620		1	1/Month*	GRAB
General	PERMIT REQUIREMENT	*****	*****	*****	*****	200 01MOGE	400 01WKGE	#/100ML		1/Month	GRAB
74055 1	NOI	*****	*****								
Effluent Gross Value											
Lab Certification #	SAMPLE MEASUREMENT	PA 343	17451		06431				-	-	-
99999 99	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic	NOT AP
Lab	NOI	*****	*****								

* 4 Additional samples were taken to insure compliance and reduce the monthly average.

Comments: If there are any questions in regards to the monitoring report form, please contact Susan Rosenwinkel of the-BPSP - Regin 2 at (609) 292-4860 or via email at "srosenwi@dep.state.nj.us".