



LR-E04-0503

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED  
ARTICLE NUMBER: 7001 1140 0002 6726 2991

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  
NJPDES PERMIT NJ0025411**

Dear Sir:

Attached is the Discharge Monitoring Report for the Hope Creek Generating Station for the month of October 2004.

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,

  
Michael H. Brothers  
Vice President – Site Operations

*Rec'd 11/30/04*

*IE25*

LR-E04-0503  
NJPDES DMR

Attachments

C     Executive Director, DRBC  
       USNRC - Docket number 50-354  
       Vice President – Site Operations  
       Director - Nuclear Safety & Licensing  
       Christopher McAuliffe, Esq.  
       D. K. Hurka  
       E. J. Keating  
       NJPDES Technician  
       Chem File HCH 2004-054

LR-E04-0503  
NJPDES DMR

## EXPLANATION OF CONDITIONS

**October 2004**

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-E04-0503  
NJPDES DMR

## EXPLANATION OF EXCEEDANCES

October 2004

The following exceedances are included in the attached report and explained below.

DSN No.

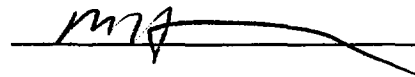
EXPLANATION

**No Exceedances**

COUNTY OF SALEM  
STATE OF NEW JERSEY

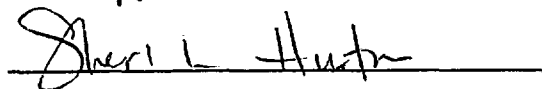
I, Michael H. Brothers, of full age, being duly sworn according to law, upon my oath depose and say:

1. I am the 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.



Michael H. Brothers  
Vice President - Site Operations

Sworn and subscribed before me  
this 18 day of November 2004.



SHERI L. HUSTON  
COUNTY PUBLIC OF NEW JERSEY  
My Commission Expires 11/15/09

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	Month 10	Day 1	Year 2004	To	Month 10	Day 31	Year 2004	461A - DSN 461A - dsw

**PERMITTEE:**

PSE&G NUCLEAR LLC  
ALLOWAY CREEK NECK RD - PO BOX  
236/N21  
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.

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 that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment, pursuant to N.J.A.C. 7:14A-6.9(B). The New Jersey Water Pollution Control Act provides for penalties up to \$50,000 per violation.

Michael H. Brothers, Vice-President – Site Operations

N/A

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

GRADE AND REGISTRY NUMBER (IF APPLICABLE)

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

10/1/2004 TO 10/31/2004

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 50050 1 Effluent Gross Value	SAMPLE MEASUREMENT	51.768	58.930	MGD	*****	*****	*****	*****	0	Continuous	Meter
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****			Continuous	METER
	QL	*****	*****		*****	*****	*****				
Flow, In Conduit or Thru Treatment Plant 50050 7 Intake From Stream	SAMPLE MEASUREMENT	54.071	69.240	MGD	*****	*****	*****	*****	0	Continuous	Meter
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****			Continuous	METER
	QL	*****	*****		*****	*****	*****				
pH 00400 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	7.6	*****	8.3	SU	0	1/week	Grab
	PERMIT REQUIREMENT	*****	*****		6.0 01DAMN	*****	9.0 01DAMX			1/Week	GRAB
	QL	*****	*****		*****	*****	*****				
Chlorine Produced Oxidants *CPOX 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1	MGL	0	Continuous	Grab
	PERMIT REQUIREMENT	*****	*****		*****	0.2 01MOAV	0.5 01DAMX			Continuous	GRAB
	RQL	*****	*****		*****	0.1	0.1				
Temperature, oC 00010 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	20.0	29.3	DEG.C	0	Continuous	Meter
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	36.2 01DAMX			Continuous	METER
	QL	*****	*****		*****	*****	*****				
Temperature, oC 00010 7 Intake From Stream	SAMPLE MEASUREMENT	*****	*****	*****	*****	17.6	20.9	DEG.C	0	Continuous	Meter
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			Continuous	METER
	QL	*****	*****		*****	*****	*****				

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:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - dsw

10/1/2004 TO 10/31/2004

HOPE CREEK GENERATING STATION

PARAMETER		QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Carbon, Tot Organic (TOC) 00680 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	6	6	MG/L	0	1/month	Grab
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/Month	GRAB
	QL	*****	*****		*****	*****	*****				
Carbon, Tot Organic (TOC) 00680 2 Effluent Net Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	1	1	MG/L	0	1/month	Calctd
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/Month	CALCTD
	QL	*****	*****		*****	*****	*****				
Carbon, Tot Organic (TOC) 00680 7 Intake From Stream	SAMPLE MEASUREMENT	*****	*****	*****	*****	4	4	MG/L	0	1/month	Grab
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/Month	GRAB
	QL	*****	*****		*****	*****	*****				
Heat (winter) (per Hr.) 81387 1 Effluent Gross Value	SAMPLE MEASUREMENT	75	299	MBTU/HR	*****	*****	*****	*****	0	1/day	Calctd
	PERMIT REQUIREMENT	REPORT 01MOAV	662 01DAMX		*****	*****	*****			1/Day	CALCTD
	QL	*****	*****		*****	*****	*****				
Lab Certification #  99999 99 Lab	SAMPLE MEASUREMENT	17451	PA 343		06431						
	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic.	NOT AP
	QL	*****	*****		*****	*****	*****				

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".



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="display: inline-table; border-collapse: collapse;"><tr><td style="text-align: center;">Month</td><td style="text-align: center;">Day</td><td style="text-align: center;">Year</td></tr><tr><td style="text-align: center;">10</td><td style="text-align: center;">1</td><td style="text-align: center;">2004</td></tr></table> To <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="text-align: center;">Month</td><td style="text-align: center;">Day</td><td style="text-align: center;">Year</td></tr><tr><td style="text-align: center;">10</td><td style="text-align: center;">31</td><td style="text-align: center;">2004</td></tr></table>	Month	Day	Year	10	1	2004	Month	Day	Year	10	31	2004	461C - DSN 461C - DSW internal
Month	Day	Year												
10	1	2004												
Month	Day	Year												
10	31	2004												

**PERMITTEE:**

PSE&G NUCLEAR LLC  
ALLOWAY CREEK NECK RD - PO BOX  
236/N21  
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.

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 that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment, pursuant to N.J.A.C. 7:14A-6.9(B). The New Jersey Water Pollution Control Act provides for penalties up to \$50,000 per violation.

Michael H. Brothers, Vice-President – Site Operations

N/A

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

GRADE AND REGISTRY NUMBER (IF APPLICABLE)

  
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

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

461C DSN 461C - DSW intern

10/1/2004 TO 10/31/2004

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 50050 1 Effluent Gross Value	SAMPLE MEASUREMENT	0.035	0.210	MGD	*****	*****	*****	*****	0	continuous	meter
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****			Continuous	METER
	QL	*****	*****		*****	*****	*****				
Solids, Total Suspended 00530 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	17	17	MG/L	0	1/month	Compos
	PERMIT REQUIREMENT	*****	*****		*****	30 01MOAV	100 01DAMX			1/Month	COMPOS
	QL	*****	*****		*****	*****	*****				
Petrol Hydrocarbons, Total Recoverable 45501 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	<1	<1	MG/L	0	2/month	Grab
	PERMIT REQUIREMENT	*****	*****		*****	10 01MOAV	15 01DAMX			2/Month	GRAB
	QL	*****	*****		*****	*****	*****				
Carbon, Tot Organic (TOC) 00680 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	7	7	MG/L	0	1/month	Compos
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	50 01DAMX			1/Month	COMPOS
	QL	*****	*****		*****	*****	*****				
Lab Certification #  99999 99 Lab	SAMPLE MEASUREMENT	17451	PA 343		06431						
	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic	NOT AP
	QL	*****	*****		*****	*****	*****				

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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><td style="width: 15%;">Month</td><td style="width: 15%;">Day</td><td style="width: 15%;">Year</td><td rowspan="2" style="width: 10%; text-align: center;">To</td><td style="width: 15%;">Month</td><td style="width: 15%;">Day</td><td style="width: 15%;">Year</td></tr><tr><td style="text-align: center;">10</td><td style="text-align: center;">1</td><td style="text-align: center;">2004</td><td style="text-align: center;">10</td><td style="text-align: center;">31</td><td style="text-align: center;">2004</td></tr></table>	Month	Day	Year	To	Month	Day	Year	10	1	2004	10	31	2004	462B - dsn 462B - dsw outfall
Month	Day	Year	To	Month		Day	Year								
10	1	2004		10	31	2004									

**PERMITTEE:**

PSE&G NUCLEAR LLC  
ALLOWAY CREEK NECK RD - PO BOX  
236/N21  
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

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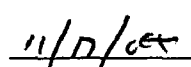
Michael H. Brothers, Vice-President – Site Operations

N/A

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

GRADE AND REGISTRY NUMBER (IF APPLICABLE)



 856-339-2900

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:

MONITORED LOCATION:

MONITORING PERIOD:


FACILITY NAME:

NJ0025411

462B dsn 462B - dsw outfall

10/1/2004 TO 10/31/2004

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 50050 1 Effluent Gross Value	SAMPLE MEASUREMENT	0.017	0.032	MGD	*****	*****	*****	*****	0	1/Day	Meter
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****			1/Day	METER
	QL	*****	*****		*****	*****	*****				
BOD, 5-Day (20 oC) 00310 G Raw Sew/Influent	SAMPLE MEASUREMENT	*****	*****	*****	*****	170	170	MG/L	0	1/month	Compos
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/Month	COMPOS
	QL	*****	*****		*****	*****	*****				
BOD, 5-Day (20 oC) 00310 1 Effluent Gross Value	SAMPLE MEASUREMENT	0	0	KG/DAY	*****	4	4	MG/L	0	1/month	Compos
	PERMIT REQUIREMENT	8 01MOAV	REPORT 01WKAV		*****	30 01MOAV	45 01WKAV			1/Month	COMPOS
	QL	*****	*****		*****	*****	*****				
BOD, 5-Day (20 oC) 00310 K Percent Removal	SAMPLE MEASUREMENT	*****	*****	*****	97.6	*****	97.6	PERCENT	0	1/month	Calctd
	PERMIT REQUIREMENT	*****	*****		87.5 01DAMN	*****	REPORT 01MOAV			1/Month	CALCTD
	QL	*****	*****		*****	*****	*****				
Solids, Total Suspended 00530 G Raw Sew/Influent	SAMPLE MEASUREMENT	*****	*****	*****	*****	202	202	MG/L	0	1/month	Compos
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/Month	COMPOS
	QL	*****	*****		*****	*****	*****				
Solids, Total Suspended 00530 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	4	4	MG/L	0	1/month	Compos
	PERMIT REQUIREMENT	*****	*****		*****	30 01MOAV	45 01WKAV			1/Month	COMPOS
	QL	*****	*****		*****	*****	*****				

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

# Surface Water Discharge Monitoring Report

PI 46815~

PERMIT NUMBER:

MONITORED LOCATION:

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FACILITY NAME:

NJ0025411

462B dsn 462B - dsw outfall

10/1/2004 TO 10/31/2004

HOPE CREEK GENERATING STATION

PARAMETER		QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Solids, Total Suspended 00530 K Percent Removal	SAMPLE MEASUREMENT	*****	*****	*****	98	98	*****	PERCENT	0	1/month	Calctd
	PERMIT REQUIREMENT	*****	*****		85 01DAMN	REPORT 01MOAV	*****			1/Month	CALCTD
	QL	*****	*****		*****	*****	*****				
Oil and Grease 00556 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	3	3	MG/L	0	1/month	Grab
	PERMIT REQUIREMENT	*****	*****		*****	10 01MOAV	15 01DAMX			1/Month	GRAB
	QL	*****	*****		*****	*****	*****				
Collform, Fecal General 74055 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	<1	<1	#/100ML	0	1/month	Grab
	PERMIT REQUIREMENT	*****	*****		*****	200 01MOGE	400 01WKGE			1/Month	GRAB
	QL	*****	*****		*****	*****	*****				
Lab Certification # 99999 99 Lab	SAMPLE MEASUREMENT	17451	PA 343		06431						
	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic	NOT AP
	QL	*****	*****		*****	*****	*****				

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".