

DEC 22 2011

HCH-2011-067



CERTIFIED MAIL  
RETURN RECEIPT REQUESTED  
ARTICLE NUMBER: 7006 0100 0004 0656 9028

Department of Environmental Protection  
Office of Permit Management  
Division of Water Quality  
PO Box 420  
Trenton, N.J. 08625-0420

**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 November 2011, and the Consolidated Waste Characterization Report for DSN 462B located at Hope Creek.

This report is required by and prepared specifically for 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 Christopher White at (856) 339-3301.

Sincerely,

A handwritten signature in black ink that reads "John F. Perry".

John F. Perry  
Site Vice President – Hope Creek

JEAS  
MRL

HCH-2011-067  
NJPDES DMR

2

Attachments

C     Executive Director, DRBC  
       USNRC - Docket number 50-354

HCH-2011-067  
NJPDES DMR

3

## EXPLANATION OF CONDITIONS

### **November 2011**

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.

Results reported on the Discharge Monitoring Report forms are consistent with permit limits, data supplied from contract laboratories, the December 2007 revision of the NJDEP Monitoring Report Form Reference Manual and specific guidance from DEP personnel.

Sampling frequency was increased for DSN-461A to support the DRBC nutrient monitoring study.

Attached is the Consolidated Waste Characterization Report for DSN-462B.

DEC 22 2011

HCH-2011-067  
NJPDES DMR

4

## EXPLANATION OF EXCEEDANCES

**November 2011**

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

DSN No.

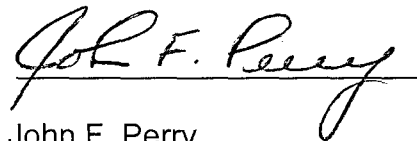
EXPLANATION

**No Exceedances**

COUNTY OF SALEM  
STATE OF NEW JERSEY

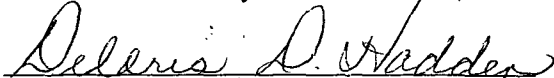
I, John F. Perry, of full age, being duly sworn according to law, upon my oath depose and say:

1. I am the Site Vice President-Hope Creek 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.



John F. Perry  
Site Vice President – Hope Creek

Sworn and subscribed before me  
this 22nd day of December, 2011.



Deloris D. Hadden  
Notary Public of New Jersey  
My Commission Expires 3/29/2015  
ID # 2073649

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"><tr><th>Month</th><th>Day</th><th>Year</th></tr><tr><td>11</td><td>1</td><td>2011</td></tr></table> To <table border="1"><tr><th>Month</th><th>Day</th><th>Year</th></tr><tr><td>11</td><td>30</td><td>2011</td></tr></table>	Month	Day	Year	11	1	2011	Month	Day	Year	11	30	2011	461A – DSN 461A – DSW
Month	Day	Year												
11	1	2011												
Month	Day	Year												
11	30	2011												

**PERMITTEE:**

PSE&G NUCLEAR LLC  
PO BOX 236 – 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

**REPORT RECIPIENT:**

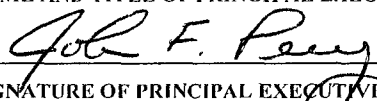
PSE&G  
MARYANN MCLAUGHLIN  
PO BOX 236 / H15  
HANCOCKS BRIDGE, NJ 08038

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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John F. Perry, Site Vice President – Hope Creek	N/A
NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	GRADE AND REGISTRY NUMBER (IF APPLICABLE)
	12-22-11 856-339-3463
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 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 46315

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - DSW

11/1/2011 TO 11/30/2011

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	35.172	39.009	MGD	*****	*****	*****	*****	0	Continuous	METER
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****				
	QL	*****	*****		*****	*****	*****				
Flow, In Conduit or Thru Treatment Plant 50050 7 Intake From Stream	SAMPLE MEASUREMENT	52.130	55.848	MGD	*****	*****	*****	*****	0	Continuous	METER
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****				
	QL	*****	*****		*****	*****	*****				
pH 00400 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	8.6	*****	8.9	SU	0	1/WEEK*	GRAB
	PERMIT REQUIREMENT	*****	*****		6.0 01DAMN	*****	9.0 01DAMX				
	QL	*****	*****		*****	*****	*****				
LC50 Statre 96hr Acu Mysid Bahia TAN3E 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	CODE=N	*****	*****	%EFFL	0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****		REPORT 01RPMN	*****	*****				
	QL	*****	*****		*****	*****	*****				
IC25 Statre 7day Chr Mysid Bahia TBP3E 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	CODE=N	*****	*****	%EFFL	0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****		REPORT 01RPMN	*****	*****				
	QL	*****	*****		*****	*****	*****				
Chlorine Produced Oxidants *CPOX 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1	MG/L	0	3/WEEK*	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 01MOAV	0.5 01DAMX				
	RQL	*****	*****		*****	0.1	0.1				

Comments: If there are any questions regarding the monitoring report form, please contact Heather Genievich of the Bureau of Surface Water Permitting at (609) 292-4860.

\* SEE EXPLANATION OF CONDITIONS

# Surface Water Discharge Monitoring Report

PI 46315

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - DSW

11/1/2011 TO 11/30/2011

HOPE CREEK GENERATING STATION

PARAMETER		QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature, oC	SAMPLE MEASUREMENT	*****	*****		*****	24.8	29.2		0	Continuous	METER
00010 1	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	36.2 01DAMX	DEG.C		Continuous	METER
Effluent Gross Value	QL	*****	*****		*****	*****	*****				
Temperature, oC	SAMPLE MEASUREMENT	*****	*****		*****	14.8	16.0		0	Continuous	METER
00010 7	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.C		Continuous	METER
Intake From Stream	QL	*****	*****		*****	*****	*****				
Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	*****	*****		*****	5.9	5.9		0	1/MONTH	GRAB
00680 1	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		1/Month	GRAB
Effluent Gross Value	QL	*****	*****		*****	*****	*****				
Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	*****	*****		*****	0.3	0.3		0	1/MONTH	CALCTD
00680 2	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		1/Month	CALCTD
Effluent Net Value	QL	*****	*****		*****	*****	*****				
Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	*****	*****		*****	3.9	3.9		0	1/MONTH	GRAB
00680 7	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		1/Month	GRAB
Intake From Stream	QL	*****	*****		*****	*****	*****				
Sulfate, Total (as SO4)	SAMPLE MEASUREMENT	*****	*****		*****	CODE = N	CODE = N		0	CODE = N	CODE = N
00945 1	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	REPORT 01DAMX	UG/L		1/6 Months	COMP24
Effluent Gross Value	QL	*****	*****		*****	*****	*****				

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# Surface Water Discharge Monitoring Report

PI 46315

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - DSW

11/1/2011 TO 11/30/2011

HOPE CREEK GENERATING STATION

PARAMETER		QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Boron, Total (as B) 01022 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	CODE=N	CODE=N	UG/L	0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/6 Months	COMPOS
	QL	*****	*****		*****	*****	*****				
Heat (winter) (per Hr.) 81387 1 Effluent Gross Value	SAMPLE MEASUREMENT	220	294	MBTU/HR	*****	*****	*****	*****	0	1/DAY	CALCTD
	PERMIT REQUIREMENT	REPORT 01MOAV	662 01DAMX		*****	*****	*****			1/Day	CALCTD
	QL	*****	*****		*****	*****	*****				
Copper, Total Recoverable 01119 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	CODE=N	CODE=N	UG/L	0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/6 Months	COMPOS
	RQL	*****	*****		*****	2	2				
Lab Certification #  99999 99 Lab	SAMPLE MEASUREMENT	17451	PA166		04653	PA010					
	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

PI 46815

Surface Water Discharge Monitoring Report Submittal Form

NJPDES PERMIT	MONITORING PERIOD						MONITORED LOCATION:	
NJ0025411	Month	Day	Year	To	Month	Day	Year	461C - DSN 461C - DSW internal
	11	1	2011		11	30	2011	

**PERMITTEE:**

PSE&G NUCLEAR LLC  
PO BOX 236 – 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

**REPORT RECIPIENT:**

PSE&G  
MARYANN MCLAUGHLIN  
PO BOX 236 / H15  
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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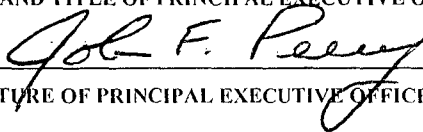
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments, and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of 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.

John F. Perry, Site Vice President – Hope Creek

N/A

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

GRADE AND REGISTRY NUMBER (IF APPLICABLE)



12-22-11

856-339-3463

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 46515

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461C DSN 461C - DSW intern

11/1/2011 TO 11/30/2011

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	0.022	0.100	MGD	*****	*****	*****	*****	0	Continuous	METER
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****			Continuous	METER
	QL	*****	*****		*****	*****	*****				
Solids, Total Suspended 00530 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	2	2	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	*****	*****	*****	*****	< 5	< 5	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	*****	*****	*****	*****	3	3	MG/L	0	1/MONTH	COMPOS
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	50 01DAMX			1/Month	COMPOS
	QL	*****	*****		*****	*****	*****				
Lab Certification # 99999 99 Lab	SAMPLE MEASUREMENT	17451	PA166		04653	PA010					
	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

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Month	Day	Year												
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**PERMITTEE:**

PSE&G NUCLEAR LLC  
PO BOX 236 - ALLOWAY CREEK NECK RD  
HANCOCKS BRIDGE, NJ 08038

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HOPE CREEK GENERATING STATION  
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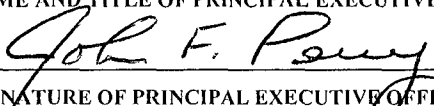
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John F. Perry, Site Vice President - Hope Creek	N/A
NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	GRADE AND REGISTRY NUMBER (IF APPLICABLE)
	12-22-11 856-339-3463
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED 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 Intern:

11/1/2011 TO 11/30/2011

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	0.015	0.024	MGD	*****	*****	*****	*****	0	Continuous	METER
50050 1	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****			Continuous	METER
Effluent Gross Value	QL	*****	*****		*****	*****	*****				
BOD, 5-Day (20 oC)	SAMPLE MEASUREMENT	*****	*****	*****	*****	496	496	MG/L	0	1/MONTH	COMPOS
00310 G	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/Month	COMPOS
Raw Sew/influent	QL	*****	*****		*****	*****	*****				
BOD, 5-Day (20 oC)	SAMPLE MEASUREMENT	1	1	KG/DAY	*****	10	10	MG/L	0	1/MONTH	COMPOS
00310 1	PERMIT REQUIREMENT	8 01MOAV	REPORT 01WKAV		*****	30 01MOAV	45 01WKAV			1/Month	COMPOS
Effluent Gross Value	QL	*****	*****		*****	*****	*****				
BOD, 5-Day (20 oC)	SAMPLE MEASUREMENT	*****	*****	*****	98.0	*****	*****	PERCENT	0	1/MONTH	CALCTD
00310 K	PERMIT REQUIREMENT	*****	*****		87.5 01MOAVMN	*****	*****			1/Month	CALCTD
Percent Removal	QL	*****	*****		*****	*****	*****				
Solids, Total	SAMPLE MEASUREMENT	*****	*****	*****	*****	496	496	MG/L	0	1/MONTH	COMPOS
Suspended	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/Month	COMPOS
00530 G	QL	*****	*****		*****	*****	*****				
Raw Sew/influent											
Solids, Total	SAMPLE MEASUREMENT	*****	*****	*****	*****	9	9	MG/L	0	1/MONTH	COMPOS
Suspended	PERMIT REQUIREMENT	*****	*****		*****	30 01MOAV	45 01WKAV			1/Month	COMPOS
00530 1	QL	*****	*****		*****	*****	*****				
Effluent Gross Value											

Comments: If there are any questions regarding the monitoring report form, please contact Heather Genievich of the Bureau of Surface Water Permitting at (609) 292-4860.

# Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

462B DSN 462B - DSW Intern

11/1/2011 TO 11/30/2011

HOPE CREEK GENERATING STATION

PARAMETER		QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Solids, Total	SAMPLE MEASUREMENT	*****	*****		98	98	*****		0	1/MONTH	CALCTD
Suspended	PERMIT REQUIREMENT	*****	*****	*****	85 01MOAVMN	REPORT 01MOAV	*****	PERCENT		1/Month	CALCTD
00530 K	QL	*****	*****		*****	*****	*****				
Percent Removal											
Oil and Grease	SAMPLE MEASUREMENT	*****	*****		*****	<5	<5		0	1/MONTH	GRAB
00556 1	PERMIT REQUIREMENT	*****	*****	*****	*****	10 01MOAV	15 01DAMX	MG/L		1/Month	GRAB
Effluent Gross Value	QL	*****	*****		*****	*****	*****				
Nitrogen, Ammonia	SAMPLE MEASUREMENT	*****	*****		*****	22	22		0	1/MONTH	COMPOS
Total (as N)	PERMIT REQUIREMENT	*****	*****	*****	*****	35 01MOAV	REPORT 01DAMX	MG/L		1/Month	COMPOS
00610 1	QL	*****	*****		*****	*****	*****				
Effluent Gross Value											
Enterococci	SAMPLE MEASUREMENT	*****	*****		*****	<10	<10		0	1/MONTH	GRAB
61211 1	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOGE	REPORT 01WKGE	#/100ML		1/Month	GRAB
Effluent Gross Value	QL	*****	*****		*****	*****	*****				
Coliform, Fecal	SAMPLE MEASUREMENT	*****	*****		*****	<10	<10		0	1/MONTH	GRAB
General	PERMIT REQUIREMENT	*****	*****	*****	*****	200 01MOGE	400 01WKGE	#/100ML		1/Month	GRAB
74055 1	QL	*****	*****		*****	*****	*****				
Effluent Gross Value											
Lab Certification #	SAMPLE MEASUREMENT	17451	PA166		06005						
99999 99	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic	NOT AP
Lab	QL	*****	*****		*****	*****	*****				

Comments: If there are any questions regarding the monitoring report form, please contact Heather Genievich of the Bureau of Surface Water Permitting at (609) 292-4860.



New Jersey Department of Environmental Protection  
Division of Water Quality  
**Consolidated Waste Characterization Report Submittal Form**

PI 46815

<b>NJPDES PERMIT</b>	<b>MONITORING PERIOD</b>	<b>MONITORED LOCATION:</b>														
<b>NJ0025411</b>	<table style="width: 100%; border-collapse: collapse;"><tr><td style="border: 1px solid black; text-align: center;">Month</td><td style="border: 1px solid black; text-align: center;">Day</td><td style="border: 1px solid black; text-align: center;">Year</td><td style="border: none; text-align: center;">To</td><td style="border: 1px solid black; text-align: center;">Month</td><td style="border: 1px solid black; text-align: center;">Day</td><td style="border: 1px solid black; text-align: center;">Year</td></tr><tr><td style="text-align: center;">7</td><td style="text-align: center;">1</td><td style="text-align: center;">2011</td><td style="border: none;"></td><td style="text-align: center;">12</td><td style="text-align: center;">31</td><td style="text-align: center;">2011</td></tr></table>	Month	Day	Year	To	Month	Day	Year	7	1	2011		12	31	2011	<b>462B - DSN 462B - DSW I</b>
Month	Day	Year	To	Month	Day	Year										
7	1	2011		12	31	2011										

**PERMITTEE:**

PSE&G NUCLEAR LLC  
PO BOX 236 - ALLOWAY CREEK NE  
HANCOCKS BRIDGE, NJ 08038

**LOCATION OF ACTIVITY:**

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

**REPORT RECIPIENT:**

PSE&G  
MARYANN MCLAUGHLIN  
P.O. BOX 236 / H15  
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.

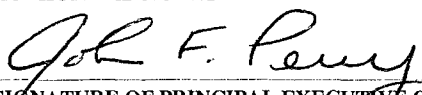
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments, and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate 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.

John F. Perry, Site Vice President-Hope Creek

N/A

NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER OR  
AUTHORIZED AGENT

GRADE AND REGISTRY NUMBER (IF APPLICABLE)

  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR  
AUTHORIZED AGENT

12-22-11  
DATE (MONTH / DAY  
/ YEAR)

856-339-3463  
AREA CODE / TELEPHONE 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

NAME AND TITLE  
N/A

SIGNATURE  
N/A

DATE

AREA CODE/PHONE NUMBER

# Consolidated Waste Characterization Report

PI 46815

PERMIT NUMBER: MONITORED LOCATION: MONITORING PERIOD: FACILITY NAME:

NJ0025411

462B DSN 462B - DSW Intern 7/1/2011 TO 12/31/2011

HOPE CREEK GENERATING STATION

SAMPLE DATE OF REPORT: 11-16-2011

PARAMETER	QL	REPORTED VALUE	UNITS	REMARK CODE	SAMPLE TYPE
<b>Cyanide, Total (as CN)</b> 00720 Effluent Gross Value	RQL = 40	< 20	UG/L		GRAB
<b>Nickel, Total Recoverable</b> 01074 Effluent Gross Value	RQL = 10	2.8	UG/L		GRAB
<b>Zinc, Total Recoverable</b> 01094 Effluent Gross Value	RQL = 10	128	UG/L		GRAB
<b>Cadmium, Total Recoverable</b> 01113 Effluent Gross Value	RQL = 4	0.2	UG/L		GRAB
<b>Chromium, Total Recoverable</b> 01118 Effluent Gross Value	RQL = 10	2.1	UG/L		GRAB
<b>Copper, Total Recoverable</b> 01119 Effluent Gross Value	RQL = 2	82.6	UG/L		GRAB
<b>Lab Certification #</b> 99999 Lab	PA166				NOT AP
<b>Lab Certification #</b> 99999 Lab					NOT AP
<b>Lab Certification #</b> 99999 Lab					NOT AP
<b>Lab Certification #</b> 99999 Lab					NOT AP
<b>Lab Certification #</b> 99999 Lab					NOT AP

Comments: If there are any questions regarding the monitoring report form, please contact Heather Genievich of the Bureau of Surface Water Permitting at (609) 292-4860.