

JUL 23 2015



HCH-2015-025

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED  
ARTICLE NUMBER: 7013 1710 0000 6324 5134

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 or Madam:

Attached is the Discharge Monitoring Report for the Hope Creek Generating Station for the month of June 2015.

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 Travis Zigo at (856) 339-2493.

Sincerely,

A handwritten signature in dark ink that reads "Paul J. Davison".

Paul J. Davison  
Site Vice President – Hope Creek

Handwritten initials in dark ink. The top part reads "J E25" and the bottom part reads "NIKK".

JUL 23 2015

HCH-2015-025  
NJPDES DMR

2

Attachments

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

JUL 23 2015

HCH-2015-025  
NJPDES DMR

3

## EXPLANATION OF CONDITIONS

### June 2015

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 indicated on the respective transmittal sheet with explanations below.

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.

For DSN 461A, TRC samples were obtained on 6/18/15 instead of 6/19/15 due to resource availability on 6/19/15.

**JUL 23 2015**

HCH-2015-025  
NJPDES DMR

4

EXPLANATION OF EXCEEDANCES

**June 2015**

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

DSN No.

EXPLANATION

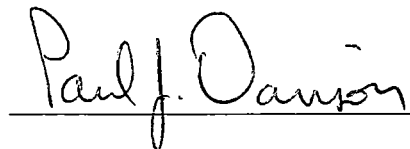
**No Exceedances**



COUNTY OF SALEM  
STATE OF NEW JERSEY

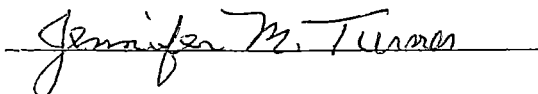
I, Paul J. Davison, of full age, being duly sworn according to law, upon my oath depose and say:

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.



Paul J. Davison  
Site Vice President – Hope Creek

Sworn and subscribed before me  
this 23 day of July, 2015.



JENNIFER M. TURNER  
ID # 2332567  
NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires 8/8/2015

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

PI 46815

NJPDDES PERMIT	MONITORING PERIOD	MONITORED LOCATION:												
NJ0025411	<table border="1"><tr><th>Month</th><th>Day</th><th>Year</th></tr><tr><td>6</td><td>1</td><td>2015</td></tr></table> To <table border="1"><tr><th>Month</th><th>Day</th><th>Year</th></tr><tr><td>6</td><td>30</td><td>2015</td></tr></table>	Month	Day	Year	6	1	2015	Month	Day	Year	6	30	2015	461A – DSN 461A – DSW
Month	Day	Year												
6	1	2015												
Month	Day	Year												
6	30	2015												

**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:**

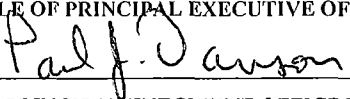
PSE&G  
TRAVIS ZIGO  
PO BOX 236 / H15  
HANCOCKS BRIDGE, NJ 08038

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.

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.

Paul J. Davison, 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)
	7/23/15 856-339-1555
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 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - DSW

6/1/2015 TO 6/30/2015

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	60.262	77.869	MGD	*****	*****	*****	*****	Ø	Continuous	Meter
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****				
	QL	*****	*****		*****	*****	*****				
Flow, In Conduit or Thru Treatment Plant 50050 7 Intake From Stream	SAMPLE MEASUREMENT	72.257	74.853	MGD	*****	*****	*****	*****	Ø	Continuous	Meter
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****				
	QL	*****	*****		*****	*****	*****				
pH 00400 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	8.4	*****	8.7	SU	Ø	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	Ø	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	Ø	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	Ø	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 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - DSW

6/1/2015 TO 6/30/2015

HOPE CREEK GENERATING STATION

PARAMETER		QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature, oC 00010 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	31.5	34.6	DEG.C	Ø	Continuous	Meter
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	36.2 01DAMX			Continuous	METER
	QL	*****	*****		*****	*****	*****				
Temperature, oC 00010 7 Intake From Stream	SAMPLE MEASUREMENT	*****	*****	*****	*****	27.3	29.6	DEG.C	Ø	Continuous	Meter
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			Continuous	METER
	QL	*****	*****		*****	*****	*****				
Carbon, Tot Organic (TOC) 00680 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.1	2.1	MG/L	Ø	1/month	Grab
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/Month	GRAB
	QL	*****	*****		*****	*****	*****				
Carbon, Tot Organic (TOC) 00680 2 Effluent Net Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.63	0.63	MG/L	Ø	1/month	Calctd
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/Month	CALCTD
	QL	*****	*****		*****	*****	*****				
Carbon, Tot Organic (TOC) 00680 7 Intake From Stream	SAMPLE MEASUREMENT	*****	*****	*****	*****	1.5	1.5	MG/L	Ø	1/month	Grab
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/Month	GRAB
	QL	*****	*****		*****	*****	*****				
Sulfate, Total (as SO4) 00945 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	Code=N	Code=N	UG/L	Ø	Code=N	Code=N
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/6 Months	COMP24
	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.



# Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - DSW

6/1/2015 TO 6/30/2015

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	Ø	Code=N	Code=N
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/6 Months	COMPOS
	QL	*****	*****		*****	*****	*****				
Heat (summer) (per Hr.) 81386 1 Effluent Gross Value	SAMPLE MEASUREMENT	154	243	MBTU/HR	*****	*****	*****	*****	Ø	1/Day	Calctd
	PERMIT REQUIREMENT	REPORT 01MOAV	534 01DAMX		*****	*****	*****			1/Day	CALCTD
	QL	*****	*****		*****	*****	*****				
Copper, Total Recoverable 01119 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	Code=N	Code=N	UG/L	Ø	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		03036						
	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic	NOT AP
	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  
**Surface Water Discharge Monitoring Report Submittal Form**

PI 46815

NJPDES PERMIT	MONITORING PERIOD	MONITORED LOCATION:												
<b>NJ0025411</b>	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 25%;">Month</td><td style="width: 25%;">Day</td><td style="width: 25%;">Year</td></tr><tr><td style="text-align: center;">6</td><td style="text-align: center;">1</td><td style="text-align: center;">2015</td></tr></table> To <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 25%;">Month</td><td style="width: 25%;">Day</td><td style="width: 25%;">Year</td></tr><tr><td style="text-align: center;">6</td><td style="text-align: center;">30</td><td style="text-align: center;">2015</td></tr></table>	Month	Day	Year	6	1	2015	Month	Day	Year	6	30	2015	<b>461C - DSN 461C - DSW internal</b>
Month	Day	Year												
6	1	2015												
Month	Day	Year												
6	30	2015												

**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:**

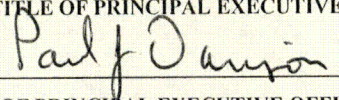
PSE&G  
TRAVIS ZIGO  
PO BOX 236 / H15  
HANCOCKS BRIDGE, NJ 08038

**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.

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.

Paul J. Davison, 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)
	7/23/15      856-339-1555
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 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461C DSN 461C - DSW interna

6/1/2015 TO 6/30/2015

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	0.056	0.160	MGD	*****	*****	*****	*****	Ø	Continuous	Meter
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****			Continuous	METER
	QL	*****	*****		*****	*****	*****				
Solids, Total Suspended 00530 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	5	5	MG/L	Ø	1/month	Compos
	PERMIT REQUIREMENT	*****	*****		*****	30 01MOAV	100 01DAMX			1/Month	COMPOS
	QL	*****	*****		*****	*****	*****				
Petrol Hydrocarbons, Total Recoverable 45501 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	42	42	MG/L	Ø	2/month	GRab
	PERMIT REQUIREMENT	*****	*****		*****	10 01MOAV	15 01DAMX			2/Month	GRAB
	QL	*****	*****		*****	*****	*****				
Carbon, Tot Organic (TOC) 00680 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	6	6	MG/L	Ø	1/month	Compos
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	50 01DAMX			1/Month	COMPOS
	QL	*****	*****		*****	*****	*****				
Lab Certification # 99999 99 Lab	SAMPLE MEASUREMENT	17451	PA166		03036						
	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic	NOT AP
	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  
Surface Water Discharge Monitoring Report Submittal Form

PI 46815

NJPDDES PERMIT	MONITORING PERIOD	MONITORED LOCATION:												
NJ0025411	<table border="1"><tr><th>Month</th><th>Day</th><th>Year</th></tr><tr><td>6</td><td>1</td><td>2015</td></tr></table> To <table border="1"><tr><th>Month</th><th>Day</th><th>Year</th></tr><tr><td>6</td><td>30</td><td>2015</td></tr></table>	Month	Day	Year	6	1	2015	Month	Day	Year	6	30	2015	462B - DSN 462B - DSW Internal
Month	Day	Year												
6	1	2015												
Month	Day	Year												
6	30	2015												

**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:**

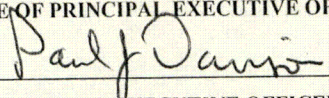
PSE&G  
TRAVIS ZIGO  
PO BOX 236 / H15  
HANCOCKS BRIDGE, NJ 08038

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.

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.

Paul J. Davison, 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)
	7/23/15 856-339-1555
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 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:


FACILITY NAME:

NJ0025411

462B DSN 462B - DSW Intern

6/1/2015 TO 6/30/2015

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	0.024	0.042	MGD	*****	*****	*****	*****	φ	Continuous	Meter
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****			Continuous	METER
	QL	*****	*****		*****	*****	*****				
BOD, 5-Day (20 oC) 00310 G Raw Sew/influent	SAMPLE MEASUREMENT	*****	*****	*****	*****	540	540	MG/L	φ	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	1	1	KG/DAY	*****	11	11	MG/L	φ	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	*****	*****	*****	97.9	*****	*****	PERCENT	φ	1/Month	Calctd
	PERMIT REQUIREMENT	*****	*****		87.5 01MOAVMN	*****	*****			1/Month	CALCTD
	QL	*****	*****		*****	*****	*****				
Solids, Total Suspended 00530 G Raw Sew/influent	SAMPLE MEASUREMENT	*****	*****	*****	*****	297	297	MG/L	φ	1/Month	Compos
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/Month	COMPOS
	QL	*****	*****		*****	*****	*****				
Solids, Total Suspended 00530 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	10	10	MG/L	φ	1/Month	Compos
	PERMIT REQUIREMENT	*****	*****		*****	30 01MOAV	45 01WKAV			1/Month	COMPOS
	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.



# Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

462B DSN 462B - DSW Intern

6/1/2015 TO 6/30/2015

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	*****	*****	*****	97	97	*****	PERCENT	0	1/month	Calcd
	PERMIT REQUIREMENT	*****	*****		85 01MOAVMN	REPORT 01MOAV	*****			1/Month	CALCTD
	QL	*****	*****		*****	*****	*****				
Oil and Grease 00556 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	2	2	MG/L	0	1/month	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	10 01MOAV	15 01DAMX			1/Month	GRAB
	QL	*****	*****		*****	*****	*****				
Nitrogen, Ammonia Total (as N) 00610 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	33	33	MG/L	0	1/month	Compos
	PERMIT REQUIREMENT	*****	*****		*****	35 01MOAV	REPORT 01DAMX			1/Month	COMPOS
	QL	*****	*****		*****	*****	*****				
Enterococci 61211 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	<10	<10	#/100ML	0	1/month	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOGE	REPORT 01WKGE			1/Month	GRAB
	QL	*****	*****		*****	*****	*****				
Coliform, Fecal General 74055 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	<10	<10	#/100ML	0	1/month	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	200 01MOGE	400 01WKGE			1/Month	GRAB
	QL	*****	*****		*****	*****	*****				
Lab Certification # 99999 99 Lab	SAMPLE MEASUREMENT	17451	PA166	*****	06005						
	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic	NOT AP
	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.