

26-354



LR-E01-0028

JAN 25 2001

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED  
ARTICLE NUMBER: 7000 0600 0022 5183 5007

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

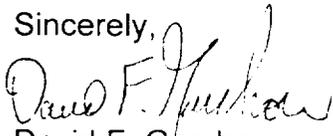
**NEW JERSEY POLLUTANT DISCHARGE ELIMINATION SYSTEM  
DISCHARGE MONITORING REPORT  
HOPE CREEK GENERATING STATION  
NJPDES PERMIT NJ0025411**

Dear Sir:

Attached is the Discharge Monitoring Report for the Hope Creek Generating Station for the month of December 2000.

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 analysis 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 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 Felicia Franceschini at (856) 339-3132

Sincerely,  
  
David F. Garchow  
Vice President – Operations

IE25

JAN 25 2001

LR-E01-0028  
NJPDES DMR

Attachments (2)

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

LR-E01-0028  
NJPDES DMR

JAN 25 2001

ATTACHMENTS

C EXECUTIVE DIRECTOR, DRBC  
USNRC - DOCKET NUMBER 50-354

BC VICE PRESIDENT - OPERATIONS  
MANAGER - LICENSING AND REGULATION - NUCLEAR  
MAUREEN VASKIS, ESQ.  
P. R. LA SALA  
D. K. HURKA  
NJPDES TECH.  
F. FRANCESCHINI  
J. BUCHANAN  
A. NURK  
CHEM FILE HCH 2001-007  
  
ENV LIC FILE 2.1.6 HC BOOK

JAN 25 2001

Explanation of Conditions

**December 2000**

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.

NJPDES DMR

JAN 25 2001

Explanation of Exceedances

**December 2000**

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

DSN No.

EXPLANATION

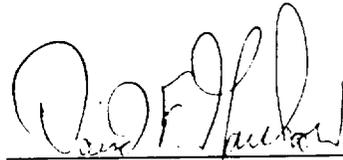
**No Exceedances**

COUNTY OF SALEM  
STATE OF NEW JERSEY

JAN 25 2001

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

1. I am the Vice President, 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.



David F.Garchow  
Vice President  
Operations

Sworn and subscribed before me  
this 25 day of Jan 2001.



SHERI L. HUSTON  
NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires 01/31/02

New Jersey Department of Environmental Protection  
Division of Water Quality

**MONITORING REPORT SUBMITTAL FORM**

NJPDES PERMIT NUMBER: **NJ0025411**  
MONITORING REPORT TYPE: **Surface Water Discharge N**  
MONITORING PERIOD: **12/1/2000 - 12/31/2000**

MONITORED LOCATION: **461A DSN 461A - dsw**  
MONITORED LOCATION GROUP: **N/A**  
REGION / COUNTY: **Southern / Salem County**

PERMITTEE NAME AND ADDRESS:

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

LOCATION OF ACTIVITY:

**PSE&G HOPE CREEK GENERATING ST  
ARTIFICIAL ISLAND  
FOOT OF BUTTONWOOD RD  
LOWER ALLOWAYS CREEK, NJ 08038-0000**

CHECK IF APPLICABLE:  **No Discharge this Monitoring Period**

MONITORING REPORT COMMENTS:

---

---

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and 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. See 18 U.S.C. § 1319.

*(Penalties under these statutes may include fines up to \$10,000 and or a maximum imprisonment of between 6 months and 5 years.)*

**DAVID F. GARDNER** vice President OPERATIONS  
NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

*David F. Gardner*  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

**856 339-3250**  
AREA CODE / TELEPHONE NUMBER

**01/25/01**  
DATE (MONTH / DAY / YEAR)

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - dsw

12/1/2000 TO 12/31/2000

PSE&G HOPE CREEK GENERATING ST

PARAMETER		QUANTITY OR LOADING		UNITS	QUANTITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant 50050 1 Effluent Gross Value	SAMPLE MEASUREMENT	39.867	43.154	MGD	*****	*****	*****	*****	0	CONTINUOUS	METER
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****		*****	Continuous	METER
pH 00400 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	8.5	*****	8.6	SU	0	1/week	GRAB
	PERMIT REQUIREMENT	*****	*****		6.0 01DAMN	*****	9.0 01DAMX		1/Week	GRAB	
Chlorine Produced Oxidants *CPOX 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	20.1	20.1	MG/L	0	3/week	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 01MOAV	0.5 01DAMX		3/Week	GRAB	
Temperature, oC 00010 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	18.6	24.7	DEG.C	0	CONTINUOUS	CK REQ
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	36.2 01DAMX		Continuous	CK REQ	
Temperature, oC 00010 7 Intake From Stream	SAMPLE MEASUREMENT	*****	*****	*****	*****	6.8	9.9	DEG.C	0	CONTINUOUS	CK REQ
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX		Continuous	CK REQ	
Phosphorus, Total (as P) 00665 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	Code = N	Code = N	MG/L	0	Code = N	Code = N
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX		1/Month	GRAB	
Carbon, Tot Organic (TOC) 00680 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	9.5	9.5	MG/L	0	1/month	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX		1/Month	GRAB	
Carbon, Tot Organic (TOC) 00680 2 Effluent Net Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	1	1	MG/L	0	1/month	CALCTD
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	20 01DAMX		1/Month	CALCTD	

Comments: Your Monitoring Report Forms have been converted to the Department's new N. J. Environmental Management System (NJEMS). 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".

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - dsw

12/1/2000 TO 12/31/2000

PSE&G HOPE CREEK GENERATING ST

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING		UNITS	QUANTITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Carbon, Tot Organic (TOC) 00680 7 Intake From Stream	SAMPLE MEASUREMENT	*****	*****		*****	6.2	6.2		0	1/Month	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	REPORT 01DAMX	MGL		1/Month	GRAB
Heat (winter) (per Hr.) 81387 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****		*****	292	480		0	1/Day	CALCTD
	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	662 01DAMX	MBTU/HR		1/Day	CALCTD
Lab Certification # 99999 99 Lab	SAMPLE MEASUREMENT	17451	77343		06431						
	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic	NOT AP

Comments: Your Monitoring Report Forms have been converted to the Department's new N. J. Environmental Management System (NJEMS). 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

**MONITORING REPORT SUBMITTAL FORM**

NJPDES PERMIT NUMBER: **NJ0025411**  
MONITORING REPORT TYPE: **Surface Water Discharge N**  
MONITORING PERIOD: **12/1/2000 - 12/31/2000**

MONITORED LOCATION: **461C DSN 461C - DSW internal**  
MONITORED LOCATION GROUP: **N/A**  
REGION / COUNTY: **Southern / Salem County**

PERMITTEE NAME AND ADDRESS:

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

LOCATION OF ACTIVITY:

**PSE&G HOPE CREEK GENERATING ST  
ARTIFICIAL ISLAND  
FOOT OF BUTTONWOOD RD  
LOWER ALLOWAYS CREEK, NJ 08038-0000**

CHECK IF APPLICABLE:  **No Discharge this Monitoring Period**

MONITORING REPORT COMMENTS:

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and 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. See 18 U.S.C. § 1319.

*(Penalties under these statutes may include fines up to \$10,000 and or a maximum imprisonment of between 6 months and 5 years.)*

NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

**856-339-3250**  
AREA CODE / TELEPHONE NUMBER

**01/25/01**  
DATE (MONTH / DAY / YEAR)

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461C DSN 461C - DSW intern:

12/1/2000 TO 12/31/2000

PSE&G HOPE CREEK GENERATING ST

PARAMETER		QUANTITY OR LOADING		UNITS	QUANTITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant 50050 1 Effluent Gross Value	SAMPLE MEASUREMENT	1,039	1,070	MGD	*****	*****	*****	*****	0	Continuous	METER
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****		Continuous	METER	
Solids, Total Suspended 00530 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	3	3	MG/L	0	1/month	COMPOS
	PERMIT REQUIREMENT	*****	*****		*****	*****	30 01MOAV		100 01DAMX	1/Month	COMPOS
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
Carbon, Tot Organic (TOC) 00680 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	3.0	3.0	MG/L	0	1/month	COMPOS
	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT 01MOAV		50 01DAMX	1/Month	COMPOS
Lab Certification # 99999 99 Lab	SAMPLE MEASUREMENT	17451	77343		06431						
	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #		REPORT Lab #	Not Applic	NOT AP

Comments: Your Monitoring Report Forms have been converted to the Department's new N. J. Environmental Management System (NJEMS). If there are any questions in regards to the monitoring report form, please contact Susan Rosenwinkel of the BPSP - Region 2 at (609) 292-4860 or via email at "srosenwi@dep.state.nj.us".

New Jersey Department of Environmental Protection  
Division of Water Quality

**MONITORING REPORT SUBMITTAL FORM**

NJPDES PERMIT NUMBER: **NJ0025411**  
MONITORING REPORT TYPE: **Surface Water Discharge N**  
MONITORING PERIOD: **12/1/2000 - 12/31/2000**

MONITORED LOCATION: **462B dsn 462B - dsw outfall**  
MONITORED LOCATION GROUP: **N/A**  
REGION / COUNTY: **Southern / Salem County**

PERMITTEE NAME AND ADDRESS:

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

LOCATION OF ACTIVITY:

**PSE&G HOPE CREEK GENERATING ST  
ARTIFICIAL ISLAND  
FOOT OF BUTTONWOOD RD  
LOWER ALLOWAYS CREEK, NJ 08038-0000**

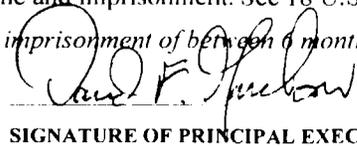
CHECK IF APPLICABLE:  **No Discharge this Monitoring Period**

MONITORING REPORT COMMENTS:

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and 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. See 18 U.S.C. § 1319.

*(Penalties under these statutes may include fines up to \$10,000 and or a maximum imprisonment of between 6 months and 5 years.)*

**DAVID F. GARCHOW vice President Operations**  
NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

**856-339-3250**  
AREA CODE / TELEPHONE NUMBER

**01/25/01**  
DATE (MONTH / DAY / YEAR)

PARAMETER		QUANTITY OR LOADING		UNITS	QUANTITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant 50050 1 Effluent Gross Value	SAMPLE MEASUREMENT	.007	.012	MGD	*****	*****	*****	*****	0	1/Day	METER
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****		*****	1/Day	METER
BOD, 5-Day (20 oC) 00310 1 Effluent Gross Value	SAMPLE MEASUREMENT	0	0	KG/DAY	*****	*****	*****	*****	0	1/month	COMPOS
	PERMIT REQUIREMENT	8 01MOAV	REPORT 01DAMX		*****	*****	*****		*****	1/Month	COMPOS
BOD, 5-Day (20 oC) 00310 K Percent Removal	SAMPLE MEASUREMENT	*****	*****	*****	98.3	*****	*****	PERCENT	0	1/month	CALCTD
	PERMIT REQUIREMENT	*****	*****		*****	87.5 01DAMN	*****		*****	1/Month	CALCTD
Solids, Total Suspended 00530 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	20	20	MG/L	0	1/month	COMPOS
	PERMIT REQUIREMENT	*****	*****		*****	*****	30 01MOAV		REPORT 01DAMX	1/Month	COMPOS
Solids, Total Suspended 00530 K Percent Removal	SAMPLE MEASUREMENT	*****	*****	*****	95	*****	*****	PERCENT	0	1/month	CALCTD
	PERMIT REQUIREMENT	*****	*****		*****	85 01MOAVMN	*****		*****	1/Month	CALCTD
Oil and Grease Freon Ext-grav Meth 00556 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	1.9	1.9	MG/L	0	1/month	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	*****	10 01MOAV		15 01DAMX	1/Month	GRAB
Coliform, 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
Lab Certification # 99999 99 Lab	SAMPLE MEASUREMENT	17451	77343	*****	06431			*****			
	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #		REPORT Lab #	Not Applic	NOT AP

Comments: Your Monitoring Report Forms have been converted to the Department's new N.J. Environmental Management System (NJEMS). If there are any questions in regards to the monitoring report form, please contact Susan Rosenwinkel of the BPSP - Region 2 at (609) 292-4860 or via email at "srosenwi@dep.state.nj.us".