



LR-E01-0068

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED  
ARTICLE NUMBER: 7000 0600 0022 5183 4994

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 January 2001.

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,

A handwritten signature in dark ink, appearing to read "David F. Garchow", written over the word "Sincerely,".

David F. Garchow  
Vice President – Operations

JE25

LR-E01-0068  
NJPDES DMR

Attachments

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

LR-E01-0068  
NJPDES DMR

BC    Vice President - Operations  
      Manager - Licensing and Regulation  
      Maureen Vaskis, Esq.  
      P. R. La Sala  
      D. K. Hurka  
      NJPDES Tech.  
      F. Franceschini  
      J. Buchanan  
      A. Nurk  
      Chem File HCH 2001-011  
      Env Lic File 2.1.6 HC Book

NJPDES DMR

## Explanation of Conditions

**January 2001**

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

Explanation of Exceedances

**January 2001**

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

DSN No.

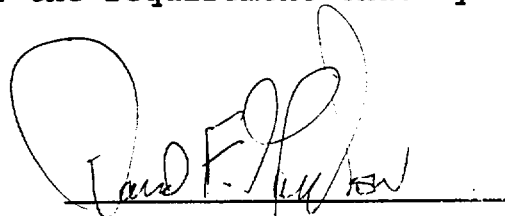
EXPLANATION

**No Exceedances**

COUNTY OF SALEM  
STATE OF NEW JERSEY

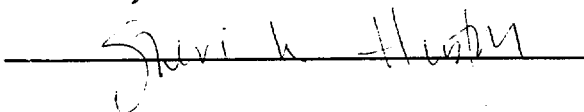
I, David F. Garchow, of full age, being duly sworn according to law, upon my oath depose and say:

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 22 day of Feb 2001.



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

New Jersey Department of Environmental Protection  
Division of Water Quality

**MONITORING REPORT SUBMITTAL FORM**

NJPDES PERMIT NUMBER: NJ0025411  
MONITORING REPORT TYPE: Surface Water Discharge  
MONITORING PERIOD: 1/1/2001 - 1/31/2001

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

REPORT RECIPIENT:

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

NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

856-339-3250

AREA CODE / TELEPHONE NUMBER



SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

02/27/01

DATE (MONTH / DAY / YEAR)

# Surface Water Discharge Monitoring Report

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - dsw

1/1/2001 TO 1/31/2001

PSE&G HOPE CREEK GENERATING ST

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	SAMPLE MEASUREMENT	38.732	41.584	MGD	*****	*****	*****	*****	0	CONT	meter
Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****			Continuous	METER
pH 00400 1	SAMPLE MEASUREMENT	*****	*****	*****	8.2	*****	8.6	SU	0	1/week	GRAB
Effluent Gross Value	PERMIT REQUIREMENT	*****	*****		6.0 01DAMN	*****	9.0 01DAMX			1/Week	GRAB
Chlorine Produced Oxidants *CPOX 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	20.1	20.1	MG/L	0	3/week	GRAB
Effluent Gross Value	PERMIT REQUIREMENT	*****	*****		*****	0.2 01MOAV	0.5 01DAMX			3/Week	GRAB
Temperature, oC 00010 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	18.1	22.1	DEG.C	0	CONT.	CK REQ
Effluent Gross Value	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	36.2 01DAMX			Continuous	CK REQ
Temperature, oC 00010 7	SAMPLE MEASUREMENT	*****	*****	*****	*****	3.6	4.7	DEG.C	0	CONT	CK REQ
Intake From Stream	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			Continuous	CK REQ
Phosphorus, Total (as P) 00665 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	Code=N	Code=N	MG/L	0	Code=N	Code=N
Effluent Gross Value	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/Month	GRAB
Carbon, Tot Organic (TOC) 00680 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	6.1	6.1	MG/L	0	1/month	GRAB
Effluent Gross Value	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX			1/Month	GRAB
Carbon, Tot Organic (TOC) 00680 2	SAMPLE MEASUREMENT	*****	*****	*****	*****	0	0	MG/L	0	1/month	CALCTD
Effluent Net Value	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 - Region 2 at (609) 292-4860 or via email at "srosenwi@dep.state.nj.us"



# Surface Water Discharge Monitoring Report

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - dsw

1/1/2001 TO 1/31/2001

PSE&G HOPE CREEK GENERATING ST

PARAMETER		QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Carbon, Tot Organic (TOC) 00680 7 Intake From Stream	SAMPLE MEASUREMENT	*****	*****		*****	4.4	4.4		0	1/month	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		1/Month	GRAB
Heat (winter) (per Hr.) 81387 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****		*****	309	343		0	1/DAY	CALC'D
	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 - Reg'n 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: **1/1/2001 - 1/31/2001**

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

REPORT RECIPIENT:  
**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: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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*(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. Grachow  
NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

David F. Grachow  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

856-339-3250  
AREA CODE / TELEPHONE NUMBER

2/22/01  
DATE (MONTH / DAY / YEAR)

# Surface Water Discharge Monitoring Report

PERMIT NUMBER:

NJ0025411

MONITORED LOCATION:

461C DSN 461C - DSW intern:

MONITORING PERIOD:

1/1/2001 TO 1/31/2001

FACILITY NAME:

PSE&G HOPE CREEK GENERATING ST

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	0.041	0.090	MGD	*****	*****	*****	*****	0	Cont	Meter
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****			Continuous	METER
Solids, Total Suspended 00530 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	10	10	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	*****	*****	*****	*****	6	6	MG/L	0	1/month	COMPOS
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	50 01DAMX			1/Month	COMPOS
Lab Certification # 99999 99 Lab	SAMPLE MEASUREMENT	17451	7343		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 - 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: 1/1/2001 - 1/31/2001

MONITORED LOCATION:

462B dsn 462B - dsw outfall

MONITORED LOCATION GROUP: N/A

REGION / COUNTY:

Southern / Salem County

REPORT RECIPIENT:

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

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David F. Gachew

NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

856-339-3250

AREA CODE / TELEPHONE NUMBER

David F. Gachew

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

2/22/01

DATE (MONTH / DAY / YEAR)

# Surface Water Discharge Monitoring Report

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

462B dsn 462B - dsw outfall

1/1/2001 TO 1/31/2001

PSE&G HOPE CREEK GENERATING ST

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	SAMPLE MEASUREMENT	0.010	0.017	MGD	*****	*****	*****	*****	0	1/Day	METER
Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****			1/Day	METER
BOD, 5-Day (20 oC) 00310 1	SAMPLE MEASUREMENT	0	0.	KG/DAY	*****	*****	*****	*****	0	1/month	COMPOS
Effluent Gross Value	PERMIT REQUIREMENT	8 01MOAV	REPORT 01DAMX		*****	*****	*****			1/Month	COMPOS
BOD, 5-Day (20 oC) 00310 K	SAMPLE MEASUREMENT	*****	*****	*****	98.5	*****	*****	PERCENT	0	1/month	CALCTD
Percent Removal	PERMIT REQUIREMENT	*****	*****		87.5 01DAMN	*****	*****			1/Month	CALCTD
Solids, Total Suspended 00530 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	19	19	MG/L	0	1/month	COMPOS
Effluent Gross Value	PERMIT REQUIREMENT	*****	*****		*****	30 01MOAV	REPORT 01DAMX			1/Month	COMPOS
Solids, Total Suspended 00530 K	SAMPLE MEASUREMENT	*****	*****	*****	94	*****	*****	PERCENT	0	1/month	CALCTD
Percent Removal	PERMIT REQUIREMENT	*****	*****		85 01MOAVMN	*****	*****			1/Month	CALCTD
Oil and Grease Freon Ext-grav Meth 00556 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	7	7	MG/L	0	1/month	GRAB
Effluent Gross Value	PERMIT REQUIREMENT	*****	*****		*****	10 01MOAV	15 01DAMX			1/Month	GRAB
Coliform, Fecal General 74055 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	<1	<1	#/100ML	0	1/month	GRAB
Effluent Gross Value	PERMIT REQUIREMENT	*****	*****		*****	200 01MOGE	400 01WKGE			1/Month	GRAB
Lab Certification # 99999 99	SAMPLE MEASUREMENT	17451	77343	*****	06431						
Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic	NOT AP

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