



LR-E02-0302

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
ARTICLE NUMBER: 7099 3400 0003 6394 4911

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

50-354

**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 July 2002.

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 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,


David F. Garchow
Vice President - Operations

IE 25
Rec'd Dec
9/5/02

LR-E02-0302
NJPDES DMR

Attachments

C Executive Director, DRBC
 USNRC - Docket number 50-354 ^
 Vice President - Operations
 Manager - Nuclear Safety & Licensing
 Maureen Vaskis, Esq.
 D. K. Hurka
 E. J. Keating
 J. Buchanan
 J. Serfass
 A. Nurk
 NJPDES Tech
 NBS Room, MC N64
 Chem File HCH 2002-037
 Env Lic File 2.1.6 HC Book

LR-E02-0302
NJPDES DMR

EXPLANATION OF CONDITIONS

July 2002

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-E02-0302
NJPDES DMR

Explanation of Exceedances

July 2002

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

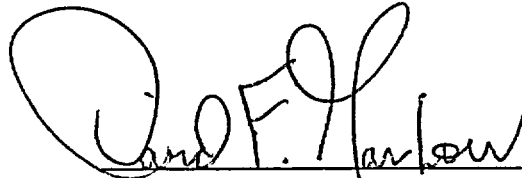
DSN No.	EXPLANATION
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No Exceedances

COUNTY OF SALEM
STATE OF NEW JERSEY

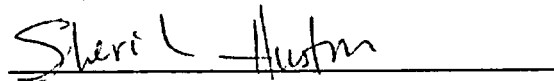
I, David F. Garchow, of full age, being duly sworn according to law, upon my oath depose and say:

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 Aug 2002.



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

New Jersey Department of Environmental Protection
Division of Water Quality

PI 46815

Surface Water Discharge Monitoring Report Submittal Form

NJPDES PERMIT NJ0025411	MONITORING PERIOD						MONITORED LOCATION: 461A - DSN 461A - dsw
	Month 7	Day 1	Year 2002	To	Month 7	Day 31	

PERMITTEE:

PSEG NUCLEAR LLC
PO BOX 236/N21
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 08038-0000

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.

DAVID S. GARCHOW, VP Operations
NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR
GRADE AND REGISTRY NUMBER (IF APPLICABLE)
David F. Garchow
8-22-02 856-339-3250
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.

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

7/1/2002 TO 7/31/2002

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	50.101	54.102	MGD	*****	*****	*****	*****	0	Continuous	Meter	
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****		*****		Continuous	METER
	MDL											
pH 00400 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	8.2	*****	8.6	SU	0	1/Week	Grab	
	PERMIT REQUIREMENT	*****	*****		6.0 01DAMN	*****	9.0 01DAMX		*****		1/Week	GRAB
	MDL											
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		*****		3/Week	GRAB
	MDL											
Temperature, oC 00010 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	32.2	35.3	DEG.C	0	Continuous	Ck Req	
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	36.2 01DAMX		*****		Continuous	CK REQ
	MDL											
Temperature, oC 00010 7 Intake From Stream	SAMPLE MEASUREMENT	*****	*****	*****	*****	28.5	29.4	DEG.C	0	Continuous	Ck Req	
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX		*****		Continuous	CK REQ
	MDL											
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
	MDL											

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".

Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - dsw

7/1/2002 TO 7/31/2002

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	*****	*****	*****	*****	7.4	7.4	MG/L	0	1/Month	Grab
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX		1/Month	GRAB	
	MDL										
Carbon, Tot Organic (TOC) 00680 2 Effluent Net Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	4	4	MG/L	0	1/Month	Calctd
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	20 01DAMX		1/Month	CALCTD	
	MDL										
Carbon, Tot Organic (TOC) 00680 7 Intake From Stream	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.5	2.5	MG/L	0	1/Month	Grab
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX		1/Month	GRAB	
	MDL										
Heat (summer) (per Hr.) 81386 1 Effluent Gross Value	SAMPLE MEASUREMENT	116	186	MBTU/HR	*****	*****	*****	*****	0	1/Day	Calctd
	PERMIT REQUIREMENT	REPORT 01MOAV	534 01DAMX		*****	*****	*****		1/Day	CALCTD	
	MDL										
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	
	MDL										

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
Surface Water Discharge Monitoring Report Submittal Form

PI 46815

NJPDES PERMIT	MONITORING PERIOD						MONITORED LOCATION:	
NJ0025411	Month	Day	Year	To	Month	Day	Year	461C - DSN 461C - DSW internal
	7	1	2002		7	31	2002	

PERMITTEE:
PSEG NUCLEAR LLC
PO BOX 236/N21
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 08038-0000

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.

DAVID F. GARCHOW - Operations _____ 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	8-22-02 856-339-3250 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.

NAME AND TITLE	SIGNATURE	DATE	AREA CODE/PHONE NUMBER
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Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461C DSN 461C - DSW intern:

7/1/2002 TO 7/31/2002

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	0.030	MGD	*****	*****	*****	*****	0	Continuous	Meter
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****		*****	Continuous	METER
	MDL										
Solids, Total Suspended 00530 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	6	6	MG/L	0	1/Month	Compos
	PERMIT REQUIREMENT	*****	*****		*****	30 01MOAV	100 01DAMX		*****	1/Month	COMPOS
	MDL										
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
	MDL										
Carbon, Tot Organic (TOC) 00680 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	13	13	MG/L	0	1/Month	Compos
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	50 01DAMX		*****	1/Month	COMPOS
	MDL										
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
	MDL										

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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	462B - dsn 462B - dsw outfall
	7	1	2002		7	31	2002	

PERMITTEE:
PSEG NUCLEAR LLC
PO BOX 236/N21
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 08038-0000

REPORT RECIPIENT:
PSE&G
P.O. BOX 236/N21
HANCOCKS BRIDGE, NJ 08038

REGION / COUNTY: Southern / Salem County

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<p>DAVID F. GARCHOW VP Operations</p> <hr/> <p>NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR</p>	<hr/> <p>GRADE AND REGISTRY NUMBER (IF APPLICABLE)</p>
<p>David F. Garchow</p> <hr/> <p>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR</p>	<p>8-22-02 856-339-3250</p> <hr/> <p>DATE AREA CODE/PHONE NUMBER</p>

*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.

<hr/> <p>NAME AND TITLE</p>	<hr/> <p>SIGNATURE</p>	<hr/> <p>DATE</p>	<hr/> <p>AREA CODE/PHONE NUMBER</p>
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Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

462B dsn 462B - dsw outfall

7/1/2002 TO 7/31/2002

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	0.011	0.023	MGD	*****	*****	*****	*****	0	1/Day	Meter
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****		1/Day	METER	
	MDL										
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	
	MDL										
BOD, 5-Day (20 oC) 00310 K Percent Removal	SAMPLE MEASUREMENT	*****	*****	*****	96.6	*****	*****	PERCENT	0	1/Month	Calctd
	PERMIT REQUIREMENT	*****	*****		87.5 01DAMN	*****	*****		1/Month	CALCTD	
	MDL										
Solids, Total Suspended 00530 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	4	4	MG/L	0	1/Month	Compos
	PERMIT REQUIREMENT	*****	*****		*****	30 01MOAV	REPORT 01DAMX		1/Month	COMPOS	
	MDL										
Solids, Total Suspended 00530 K Percent Removal	SAMPLE MEASUREMENT	*****	*****	*****	99	*****	*****	PERCENT	0	1/Month	Calctd
	PERMIT REQUIREMENT	*****	*****		85 01MOAVMN	*****	*****		1/Month	CALCTD	
	MDL										
Oil and Grease 00556 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	<1	<1	MG/L	0	1/Month	Grab
	PERMIT REQUIREMENT	*****	*****		*****	10 01MOAV	15 01DAMX		1/Month	GRAB	
	MDL										

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

PI 46815

PERMIT NUMBER: NJ0025411
 MONITORED LOCATION: 462B dsn 462B - dsw outfall
 MONITORING PERIOD: 7/1/2002 TO 7/31/2002
 FACILITY NAME: HOPE CREEK GENERATING STATION

PARAMETER		QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE	
Coliform, Fecal General 74055 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	2	2	#/100ML	0	1/Month	Grab	
	PERMIT REQUIREMENT	*****	*****		*****	200 01MOGE	400 01WKGE				1/Month	GRAB
	MDL											
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
	MDL											

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".