



LR-E04-0307

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED  
ARTICLE NUMBER: 7001 1140 0002 6726 2847

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 June 2004.

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 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 J. Serfass at (856) 339-5411.

Sincerely,

  
Michael H. Brothers  
Vice President – Site Operations

*IE25*

LR-E04-0307  
NJPDES DMR

Attachments

C     Executive Director, DRBC  
       USNRC - Docket number 50-354  
       Vice President – Site Operations  
       Manager - Nuclear Safety & Licensing  
       Christopher McAuliffe, Esq.  
       D. K. Hurka  
       E. J. Keating  
       J. Buchanan  
       J. Serfass  
       Patrick Whyte, Jr.  
       NJPDES Tech  
       NBS Room, MC N64  
       Chem File HCH 2004-035  
       Env Lic File 2.1.6 HC Book

LR-E04-0307  
NJPDES DMR

## EXPLANATION OF CONDITIONS

**June 2004**

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-E04-0307  
NJPDES DMR

EXPLANATION OF EXCEEDANCES

**June 2004**

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

DSN No.

EXPLANATION

**No Exceedances**

COUNTY OF SALEM  
STATE OF NEW JERSEY

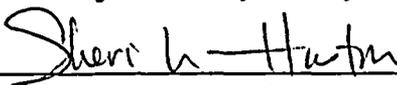
I, Michael H. Brothers, of full age, being duly sworn according to law, upon my oath depose and say:

1. I am the Vice President-Site 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.



Michael H. Brothers  
Vice President - Site Operations

Sworn and subscribed before me  
this 22 day of July 2004.

  
Commission expires 11/15/04

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	461A - DSN 461A - dsw
	6	1	2004		6	30	2004	

**PERMITTEE:**  
PSE&G 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.

Michael H. Brothers, Vice-President – Site Operations

N/A

NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	GRADE AND REGISTRY NUMBER (IF APPLICABLE)
<i>MHB</i>	7-22-04      856-339-2900

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	DATE	AREA CODE/PHONE NUMBER
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*\*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

N/A

N/A

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

461A DSN 461A - dsw

6/1/2004 TO 6/30/2004

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	53.463	57.551	MGD	*****	*****	*****	*****	0	Continuous	Meter	
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****		*****		Continuous	METER
	MDL											
Flow, In Conduit or Thru Treatment Plant 50050 7 Intake From Stream	SAMPLE MEASUREMENT	67.087	69.516	MGD	*****	*****	*****	*****	0	Continuous	Meter	
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****		*****		Continuous	METER
	MDL											
pH 00400 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	8.6	*****	8.6	SU	0	1/Week	Grab	
	PERMIT REQUIREMENT	*****	*****		6.0 01DAMX	*****	9.0 01DAMX		*****		1/Week	GRAB
	MDL											
Chlorine Produced Oxidants *CPOX 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1	MGL	0	Continuous	Grab	
	PERMIT REQUIREMENT	*****	*****		*****	0.2 01MOAV	0.5 01DAMX		*****		Continuous	GRAB
	MDL											
Temperature, oC 00010 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	29.8	32.9	DEG.C	0	Continuous	Meter	
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	36.2 01DAMX		*****		Continuous	METER
	MDL											
Temperature, oC 00010 7 Intake From Stream	SAMPLE MEASUREMENT	*****	*****	*****	*****	23.8	25.1	DEG.C	0	Continuous	Meter	
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX		*****		Continuous	METER
	MDL											

Comments: 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

6/1/2004 TO 6/30/2004

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	*****	*****	*****	*****	8	8	MG/L	0	1/Month	Grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		1/Month	GRAB
	MDL	*****	*****	*****	*****	*****	*****	MG/L			
Carbon, Tot Organic (TOC) 00680 2 Effluent Net Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	3	3	MG/L	0	1/Month	Calctd
	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		1/Month	CALCTD
	MDL	*****	*****	*****	*****	*****	*****	MG/L			
Carbon, Tot Organic (TOC) 00680 7 Intake From Stream	SAMPLE MEASUREMENT	*****	*****	*****	*****	4	4	MG/L	0	1/Month	Grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		1/Month	GRAB
	MDL	*****	*****	*****	*****	*****	*****	MG/L			
Heat (summer) (per Hr.) 81386 1 Effluent Gross Value	SAMPLE MEASUREMENT	200	290	*****	*****	*****	*****	*****	0	1/Day	Calctd
	PERMIT REQUIREMENT	REPORT 01MOAV	534 01DAMX	MBTU/HR	*****	*****	*****	*****		1/Day	CALCTD
	MDL	*****	*****	*****	*****	*****	*****	*****			
Lab Certification # 99999 99 Lab	SAMPLE MEASUREMENT	17451	PA343	*****	06431	*****	*****	*****			
	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #	*****	REPORT Lab #	REPORT Lab #	REPORT Lab #	*****		Not Applic	NOT AP
	MDL	*****	*****	*****	*****	*****	*****	*****			

Comments: 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  
 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
	6	1	2004		6	30	2004	

**PERMITTEE:**

PSE&G 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.

Michael H. Brothers, Vice-President – Site Operations

N/A

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

GRADE AND REGISTRY NUMBER (IF APPLICABLE)

*N/A*

*7-22-04*

856-339-2900

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-6(F)(5) that I have received and 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 Intern

6/1/2004 TO 6/30/2004

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	0.049	0.120	MGD	*****	*****	*****	*****	0	Continuous	Meter	
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****		*****		Continuous	METER
	MDL											
Solids, Total Suspended 00530 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	27	27	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	*****	*****	*****	*****	12	12	MG/L	0	1/Month	Compos	
	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT 01MOAV		50 01DAMX	*****	1/Month	COMPOS
	MDL											
Lab Certification # 99999 99 Lab	SAMPLE MEASUREMENT	17451	PA343		06431							
	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic	NOT AP	
	MDL											

Comments: 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  
 Surface Water Discharge Monitoring Report Submittal Form

PI 46815

NJPDES PERMIT	MONITORING PERIOD						MONITORED LOCATION:	
NJ0025411	Month	Day	Year	To	Month	Day	Year	462B - dsn 462B - dsw outfall
	6	1	2004		6	30	2004	

**PERMITTEE:**

PSE&G 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

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Michael H. Brothers, Vice-President – Site Operations

N/A

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

GRADE AND REGISTRY NUMBER (IF APPLICABLE)

*M.H.B.*

*7-22-04*

856-339-2900

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.

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: NJ0025411     
 MONITORED LOCATION: 462B dsn 462B - dsw outfall     
 MONITORING PERIOD: 6/1/2004 TO 6/30/2004     
 FACILITY NAME: 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	0.018	0.029	MGD	*****	*****	*****	*****	0	1/Day	Meter	
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****		*****		1/Day	METER
	MDL											
BOD, 5-Day (20 oC) 00310 G Raw Sew/Influent	SAMPLE MEASUREMENT	*****	*****	*****	*****	322	322	MG/L	0	1/Month	Compos	
	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT 01MOAV		REPORT 01DAMX	*****	1/Month	COMPOS
	MDL											
BOD, 5-Day (20 oC) 00310 1 Effluent Gross Value	SAMPLE MEASUREMENT	0	0	KG/DAY	*****	8	8	MG/L	0	1/Month	Compos	
	PERMIT REQUIREMENT	8 01MOAV	REPORT 01WKAV		*****	*****	30 01MOAV		45 01WKAV	*****	1/Month	COMPOS
	MDL											
BOD, 5-Day (20 oC) 00310 K Percent Removal	SAMPLE MEASUREMENT	*****	*****	*****	97.5	*****	97.5	PERCENT	0	1/Month	Calctd	
	PERMIT REQUIREMENT	*****	*****		*****	*****	87.5 01DAMN		REPORT 01MOAV	*****	1/Month	CALCTD
	MDL											
Solids, Total Suspended 00530 G Raw Sew/Influent	SAMPLE MEASUREMENT	*****	*****	*****	*****	305	305	MG/L	0	1/Month	Compos	
	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT 01MOAV		REPORT 01DAMX	*****	1/Month	COMPOS
	MDL											
Solids, Total Suspended 00530 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	14	14	MG/L	0	1/Month	Compos	
	PERMIT REQUIREMENT	*****	*****		*****	*****	30 01MOAV		45 01WKAV	*****	1/Month	COMPOS
	MDL											

Comments: 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: NJ0025411     
 MONITORED LOCATION: 462B dsn 462B - dsw outfall     
 MONITORING PERIOD: 6/1/2004 TO 6/30/2004     
 FACILITY NAME: HOPE CREEK GENERATING STATION

PARAMETER		QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Solids, Total		*****	*****		95	95	*****		0	1/Month	Calctd
Suspended	SAMPLE MEASUREMENT										
00530 K	PERMIT REQUIREMENT	*****	*****	*****	85 01DAMN	REPORT 01MOAV	*****	PERCENT		1/Month	CALCTD
Percent Removal	MDL										
Oil and Grease		*****	*****		*****	<1	<1		0	1/Month	Grab
00556 1	SAMPLE MEASUREMENT										
Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	*****	10 01MOAV	15 01DAMX	MG/L		1/Month	GRAB
	MDL										
Coliform, Fecal		*****	*****		*****	1	1		0	1/Month	Grab
General	SAMPLE MEASUREMENT										
74055 1	PERMIT REQUIREMENT	*****	*****	*****	*****	200 01MOGE	400 01WKGE	#/100ML		1/Month	GRAB
Effluent Gross Value	MDL										
Lab Certification #		17451	PA343		06431						
99999 99	SAMPLE MEASUREMENT										
Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic.	NOT AP
	MDL										

Comments: 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".