



LR-E04-0362

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
ARTICLE NUMBER: 7001 1140 0002 6726 2854

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 July 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



LR-E04-0362
NJPDES DMR

Attachments

C Executive Director, DRBC
 USNRC - Docket number 50-3543
 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 2004-038
 Env Lic File 2.1.6 HC Book

LR-E04-0362
NJPDES DMR

EXPLANATION OF CONDITIONS

July 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-E04-0362
NJPDES DMR

EXPLANATION OF EXCEEDANCES

July 2004

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

DSN No.

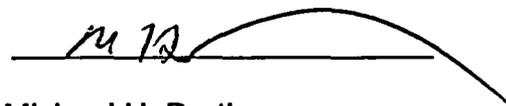
EXPLANATION

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 20 day of August 2004.


Commission Expires 1-15-09

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:	
	Month	Day	Year	To	Month	Day		Year
NJ0025411	7	1	2004		7	31	2004	461A - DSN 461A - dsw

PERMITTEE:

PSE&G NUCLEAR LLC
 ALLOWAY CREEK NECK RD - PO BOX
 236/N21
 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

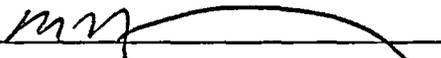
REGION / COUNTY: Southern / Salem County

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)

 8/20/2004 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: 461A DSN 461A - dsw
 MONITORING PERIOD: 7/1/2004 TO 7/31/2004
 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	54.127	57.233	MGD	*****	*****	*****	*****	0	Continuous	Meter	
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****		*****	0	Continuous	METER
	MDL											
Flow, In Conduit or Thru Treatment Plant 50050 7 Intake From Stream	SAMPLE MEASUREMENT	71.067	74.880	MGD	*****	*****	*****	*****	0	Continuous	Meter	
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****		*****	0	Continuous	METER
	MDL											
pH 00400 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	8.4	*****	8.7	SU	0	1/Week	Grab	
	PERMIT REQUIREMENT	*****	*****		*****	6.0 01DAMN	*****		9.0 01DAMX	*****	1/Week	GRAB
	MDL											
Chlorine Produced Oxldants *CPOX 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.1	<0.1	MG/L	0	Continuous	Grab	
	PERMIT REQUIREMENT	*****	*****		*****	*****	0.2 01MOAV		0.5 01DAMX	*****	Continuous	GRAB
	MDL											
Temperature, oC 00010 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	31.7	34.3	DEG.C	0	Continuous	Meter	
	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT 01MOAV		36.2 01DAMX	*****	Continuous	METER
	MDL											
Temperature, oC 00010 7 Intake From Stream	SAMPLE MEASUREMENT	*****	*****	*****	*****	25.4	26.6	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 - Regn 2 at (609) 292-4860 or via email at "rosenwi@dep.state.nj.us".

Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER: NJ0025411
 MONITORED LOCATION: 461A DSN 461A - dsw
 MONITORING PERIOD: 7/1/2004 TO 7/31/2004
 FACILITY NAME: HOPE CREEK GENERATING STATION

PARAMETER	X	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	7	MG/L	0	1/Month	Grab
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX				
	MDL										
Carbon, Tot Organic (TOC) 00680 2 Effluent Net Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	-1	-1	MG/L	0	1/Month	Calctd
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX				
	MDL										
Carbon, Tot Organic (TOC) 00680 7 Intake From Stream	SAMPLE MEASUREMENT	*****	*****	*****	*****	6	6	MG/L	0	1/Month	Grab
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	REPORT 01DAMX				
	MDL										
Heat (summer) (per Hr.) 81386 1 Effluent Gross Value	SAMPLE MEASUREMENT	214	327	MBTU/HR	*****	*****	*****	*****	0	1/Day	Calctd
	PERMIT REQUIREMENT	REPORT 01MOAV	534 01DAMX		*****	*****	*****				
	MDL										
Lab Certification # 99999 99 Lab	SAMPLE MEASUREMENT	17451	PA343		06431						
	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #				
	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

PI 46815

Surface Water Discharge Monitoring Report Submittal Form

NJPDES PERMIT	MONITORING PERIOD						MONITORED LOCATION:	
	Month	Day	Year	To	Month	Day		Year
NJ0025411	7	1	2004		7	31	2004	461C - DSN 461C - DSW internal

PERMITTEE:

PSE&G NUCLEAR LLC
ALLOWAY CREEK NECK RD - PO BOX
236/N21
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)
[Signature] 8/20/09 856-339-2900
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: 461C DSN 461C - DSW Intern MONITORING PERIOD: 7/1/2004 TO 7/31/2004 FACILITY NAME: HOPE CREEK GENERATING STATION

PARAMETER	X	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	0.062	0.260	MGD	*****	*****	*****	*****	0	Continuous	Meter
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****				
	MDL										
Solids, Total Suspended 00530 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****	*****	*****	16	16	MG/L	0	1/Month	Compos
	PERMIT REQUIREMENT	*****	*****		*****	30 01MOAV	100 01DAMX				
	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				
	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				
	MDL										
Lab Certification # 99999 99 Lab	SAMPLE MEASUREMENT	17451	PA343		06431						
	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #				
	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:	
	Month	Day	Year	To	Month	Day		Year
NJ0025411	7	1	2004	To	7	31	2004	462B - dsn 462B - dsw outfall

PERMITTEE:

PSE&G NUCLEAR LLC
ALLOWAY CREEK NECK RD - PO BOX
236/N21
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:

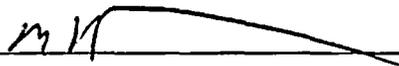
PSE&G
P.O. BOX 236/N21
HANCOCKS BRIDGE, NJ 08038

REGION / COUNTY: Southern / Salem County

CHECK IF APPLICABLE: No Discharge this Monitoring Period Monitoring Report Comments Attached

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<u>Michael H. Brothers, Vice-President – Site Operations</u>	<u>N/A</u>	
NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	GRADE AND REGISTRY NUMBER (IF APPLICABLE)	
<u></u>	<u>8/24/04</u>	<u>856-339-2900</u>
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.

<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
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: 7/1/2004 TO 7/31/2004 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	0.021	0.052	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	*****	*****	*****	*****	214	214	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	*****	4	4	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	*****	*****	*****	98.4	*****	98.4	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	*****	*****	*****	*****	200	200	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	*****	*****	*****	*****	7	7	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 - Regn 2 at (609) 292-4860 or via email at "rosenwi@dep.state.nj.us".

Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER: NJ0025411 MONITORED LOCATION: 462B dsn 462B - dsw outfall MONITORING PERIOD: 7/1/2004 TO 7/31/2004 FACILITY NAME: HOPE CREEK GENERATING STATION

PARAMETER		QUANTITY OR LOADING		UNITS	QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Solids, Total Suspended 00530 K Percent Removal	SAMPLE MEASUREMENT	*****	*****		97	97	*****		0	1/Month	Calcd
	PERMIT REQUIREMENT	*****	*****	*****	85 01DAMN	REPORT 01MOAV	*****	PERCENT		1/Month	CALCTD
	MDL										
Oil and Grease 00556 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****		*****	<1	<1		0	1/Month	Grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	10 01MOAV	15 01DAMX	MG/L		1/Month	GRAB
	MDL										
Collform, Fecal General 74055 1 Effluent Gross Value	SAMPLE MEASUREMENT	*****	*****		*****	<1	<1		0	1/Month	Grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	200 01MOGE	400 01WKGE	#/100ML		1/Month	GRAB
	MDL										
Lab Certification # 99999 99 Lab	SAMPLE MEASUREMENT	17457	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".