SEP 2 3 2008

SCH08-106



CERTIFIED MAIL
RETURN RECEIPT REQUESTED
ARTICLE NUMBER: 7006 0100 0004 0657 9355

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 SALEM GENERATING STATION NJPDES PERMIT NJ0005622

Dear Sir:

Attached is the Discharge Monitoring Report for the Salem Generating Station for the month of August 2008. Additionally, the tracer evaluation report for Unit 2 is attached as required by permit condition G.1.b.ii.

This report is required by and prepared specifically for 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 Greg Suey at (856) 339-5066.

Sinc<del>ere</del>ly,

Robert C. Braun

Site Vice President – Salem

I E25

SCH08-106 NJPDES DMR 2

Attachments

C Executive Director, DRBC USNRC - Docket numbers 50-272 & 50-311

SCH08-106 NJPDES DMR

3

#### **EXPLANATION OF CONDITIONS**

#### August 2008

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 2007 revision of the NJDEP DMR Instruction Manual and specific guidance from DEP personnel.

\*\*\*

NJPDES DMR	
EXPLANATION OF EXCEEDAN	CES
August 2008	
The following exceedances are in	ncluded in the attached report and explained below.
DSN No.	EXPLANATION

SCH08-106

None.

SCH08-106 NJPDES DMR

5

COUNTY OF SALEM STATE OF NEW JERSEY

- I, Robert C. Braun, of full age, being duly sworn according to law, upon my oath depose and say:
- 1. I am the Site Vice President-Salem for PSEG Nuclear, and as such am authorized to sign Salem'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.

Robert C. Braun

Site Vice President - Salem

Sworn and subscribed before me day of September 2008

> SHERI L. HUSTON NOTARY PUBLIC OF NEW JERSEY My Commission Intras

BC Site Vice President – Salem
Director – Regulatory Assurance
John Valeri Jr., Esq.
Salem Radwaste and Environmental Supervisor
E. J. Keating
Chiristine Neely
NBS Room M/C N64



August 4, 2008 Report No. TP08055

TO: William G. Biggs

Technical Analyst

Salem Chemistry - PSEG Power

SUBJECT:

DETERMINATION OF CIRCULATING WATER FLOW AT

SALEM GENERATING STATION

CONDUCTED BY:

Victor Simpson

Sr. Test Engineer, Maplewood Testing Services

#### SUMMARY

The Mechanical Division of Maplewood Testing Services conducted a series of test runs at Salem Unit No. 2 to determine the capacities of the circulating water pumps shown in the table below.

Work was performed under SAP work orders: 30153882, 30153912, 30153857, 30153858, 30153883, 30153884

Please note that the CMS designation for the pump in 22B could not be determined due to the orientation of the pump. Pumps 23A and 23B are both designated as "F", but due to deterioration of the markings, it was difficult to verify.

Final results are as follows:

#### SUMMARY OF TEST RESULTS

Pump	CMS	Test	Measured	Pump	Pump	Total
No.	Pump	Date	Pump	Suction	Discharge	Static
	Desig.		Capacity	Head	Head	Head
			(gpm)	(ft h2o)	(ft h2o)	(ft h2o)
21A	· Ī	07/30/08	150683	-10.5	9.4	19.9
21B	В	07/30/08	139469	-9.2	11.1	20.3
22A	М	07/22/08	156713	-6.5	15.2	21.7
22B	?	07/22/08	151157	-6.5	15.6	22.1
23A	F	07/22/08	122378	-8.1	19.7	27.8
23B	F	07/22/08	137967	-8.9	15.6	24.5

Note: Pump suction heads and discharge heads corrected to elevation 100'

William G. Biggs
Technical Analyst
Salem Chemistry - PSEG Power

August 4, 2008 Report No. TP08055

#### SUMMARY (Cont'd)

For reporting purposes, shown below is the data pertinent to the injection of Rhodamine WT dye released to the river during testing. Testing is complete at this station.

#### RECORD OF RHODAMINE WT DYE INJECTION

Test	Pump	Inje	ction	Pure	Number of	Total	Effluent
Date	No.	Ti	me	Dye	Pumps in	System	Concentration
				Injected	Service	Flow	, and the second
		(start)	(stop)	(ml)		(1000 gpm)	. (ppb)
07/30/08	21A	1720	1759	52.87	12	2220.0	0.16
07/30/08	21B	1810	1845	49.46	12	2220.0	0.17
07/22/08	22A	1342	1407	34.26	11	2035.0	0.18
07/22/08	22B	1419	1446	37.80	11	2035.0	0.18
07/22/08	23A	1545	1612	37.49	11	2035.0	0.18
07/22/08	23B	1622	1647	34.75	11	2035.0	0.18
07/22/08	21A	1130	1159	39.16	11	2035.0	0.18

#### TEST METHOD

The circulating water flow rate was determined by fluorometry using MTS Mechanical Division Work Instruction TPG-19 Rev. 7 "Water Flow Using The Turner Fluorometer". Rhodamine WT dye was injected into the bell mouth of each pump using 1/2 inc PVC pipe with a carrier flow of screen wash water at 3 gallons per minute.

The dye was injected at a known rate using a peristaltic pump and a class A burette to measure rate. The diluted sample was retrieved and monitored by taking a sample from the inlet water box piping. The ratio of the injected concentration to the sample concentration multiplied by the injection flow rate yielded the circulator flow rate.

The total static head was obtained by measuring the pump suction head in feet from elevation

William G. Biggs
Technical Analyst
Salem Chemistry - PSEG Power

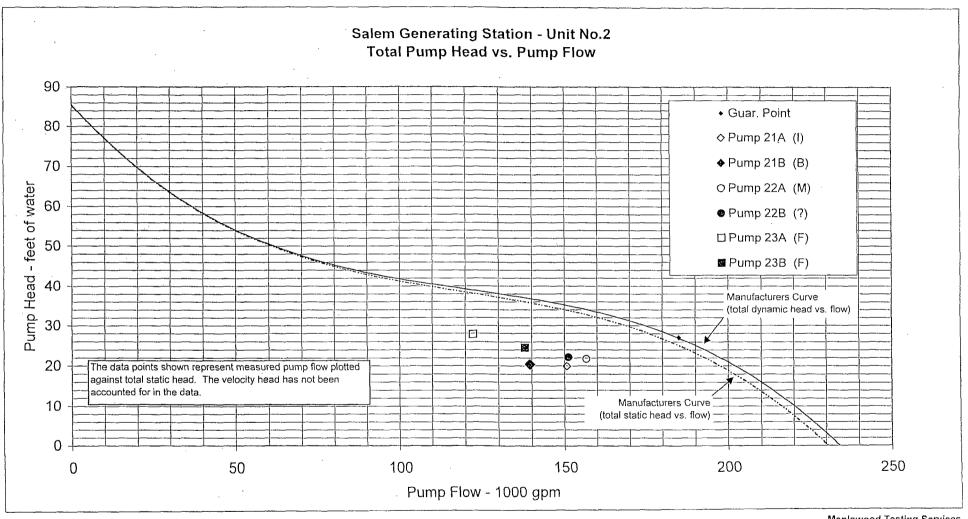
August 4, 2008 Report No. TP08055

#### TEST METHOD (Cont'd)

100' and the pump discharge head in feet of water at the water box inlet. After correcting for elevation, the total pump head was calculated as the pump discharge head minus the pump suction head.

Anthony R. Fortunato
Supervising Test Engineer
MTS Mechanical Division

C S. Rund



Maplewood Testing Services
Report No. TP08055
8/ 2008

## **Surface Water Discharge Monitoring Report Submittal Form**

NJPDES PERMIT	MONITORING PERIOD	MONITO	RED LOCATION:							
NJ0005622	Month         Day         Year           8         1         2008   To           Month         Day         Year           8         31         2008	FACA – SW Oı	ıtfall FACA							
PERMITTEE:  PSE&G NUCLEAR LLC  PSEG NUCLEAR LLC SALEM  PSEG NUCLEAR LLC  PSEG NUCLEAR LLC SALEM  PSEG NUCLEAR LLC  PO BOX 236/N21  HANCOCKS BRIDGE, NJ 08038  HANCOCKS BRIDGE, NJ 08038										
REGION / COUNTY: Southern / Salem County										
CHECK IF APPICABLE:	☐ No Discharge this Monitoring Period ☐ N	Monitoring Report Cor	nments Attached							
the certification. Where the hig responsibility or person designa another entity to operate the treat I certify under penalty of law the that, based on my inquiry of the complete. I am aware that there	ce a person designated by that person. For a local agency, the higher thest ranking operator does not have the ability to authorize capital exted by that person shall also sign the second certification at the bott atment works, the highest-ranking official of the contracted entity shat I have personally examined and am familiar with the information use individuals immediately responsible for obtaining the information are are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to	expenditures and hire p tom of this page. If the hall sign the certification is submitted in this docu on, I believe that the in- ing the possibility of ar	ersonnel, a person having that local agency has contracted with on.  Innent and all attachments, and formation is true, accurate and id/or imprisonment, pursuant							
Robert C. Braun,	Site Vice President - Salem	:	N/A							
NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR GRADE AND REGISTRY NUMBER (IF APPLICABLE)  09/18/2008 856-339-1998										
16										
SIGNATURE OF PRINCIPAL EXEC	UTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	DATE	AREA CODE/PHONE NUMBER							
*For a local agency where the high	UTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR  thest-ranking operator does not have the ability to authorize capital expending shall sign the following certification:	DATE	AREA CODE/PHONE NUMBER							

N/A

SIGNATURE

DATE

AREA CODE/PHONE NUMBER

N/A

MONITORED LOCATION:

**MONITORING PERIOD:** 

FACILITY NAME:

NJ0005622

**FACA SW Outfall FACA** 

8/1/2008 TO 8/31/2008

PSEG NUCLEAR LLC SALEM GENERATIN

		·			<del></del>						
PARAMETER		QUANTITY (	OR LOADING	UNITS	QUALI	TY OR CONCENTR	ATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature, oC	SAMPLE MEASUREMENT	****	****		*****	26.9	28.7		0	(bητίλωσος	Conzig
00010 G Raw Sew/influent	PERMIT REQUIREMENT	*****		*****	******	REPORT 01MOAV	REPORT 01DAMX	DEG.C		Continuous	CONTIN
	QL	*****	*****		*****	*****	*****				
Temperature, oC	SAMPLE MEASUREMENT	*****	*****		****	35,5	37.1		0	(phriman)	(pully)
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	*****	REPORT 01MOAV	46.1 01DAMX	DEG.C		Continuous	CONTIN
	QL	*****	*****		*****	*****	*****				
Temperature,	SAMPLE MEASUREMENT	*****	*****		*****	86	10.1		0	1/DAY	CALCTO
00010 2 Effluent Net Value	PERMIT REQUIREMENT	attaka	*****	*****	*****	REPORT 01MOAV	15.3 01DAMX	DEG.C		1/Day	CALCTD
	QL -	*****	*****		****	*****	*****				
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PAIGG						
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab#	REPORT Lab#		REPORT Lab#	REPORT Lab#	REPORT Lab#			Not Applic	NOT AP
	QL	*****	******		*****	******	*****				

Comments: 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 Submittal Form**

NJPDES PERMIT	MONITORING PERIOD		MONITORED LOCATION:						
NJ0005622	Month         Day         Year           8         1         2008   To           Month         Day           8         31	Year 2008	FACB – SW O	utfall FACB					
PERMITTEE: PSE&G NUCLEAR LLC 30 PARK PLAZA NEWARK, NJ 07101	ICLEAR LLCPSEG NUCLEAR LLC SALEMPSEG NUCLEAR LLCLAZAGENERATING STATIONPO BOX 236/N21								
	REGION / COUNTY: Southern	/ Salem C	County						
CHECK IF APPICABLE:									
another entity to operate the tree  I certify under penalty of law the that, based on my inquiry of the complete. I am aware that ther	ted by that person shall also sign the second certification atment works, the highest-ranking official of the contract at I have personally examined and am familiar with the use individuals immediately responsible for obtaining the are significant penalties for submitting false informat New Jersey water Pollution Control Act provides for pe	ted entity s informatio e informati on, includ	shall sign the certification submitted in this doction, I believe that the integrating the possibility of a	on.  ument and all attachments, and formation is true, accurate and and/or imprisonment, pursuant					
Robert C. Braun,	Site Vice President - Salem			N/A					
NAME AND TITLE OF PRINCIPAL	EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSEI	OPERATO	R GRADE AND RE	CGISTRY NUMBER (IF APPLICABLE)					
16-			09/18/2008	856-339-1998					
SIGNATURE OF PRINCIPAL EXEC	UTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPE	RATOR	DATE	AREA CODE/PHONE NUMBER					
	hest-ranking operator does not have the ability to authorize co shall sign the following certification:	pital expen	ditures and hire personne	l, a person having that responsibility or					
I certify under penalty of law and i	n accordance with N.J.S.A. 58:10A-6F(5) that I have reviewed	the attache	ed discharge monitoring ro	eports.					
N/A	N/A	·	N/A	N/A					

DATE

AREA CODE/PHONE NUMBER

SIGNATURE

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

**FACB SW Outfall FACB** 

8/1/2008 TO 8/31/2008

PSEG NUCLEAR LLC SALEM GENERATIN

PARAMETER		QUANTITY C	DR LOADING	UNITS	QUALI	TY OR CONCENTR	ATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature, oC	SAMPLE MEASUREMENT	****	****		*****	26.9	28.7		0	Connous	Contil
00010 G Raw Sew/influent	PERMIT REQUIREMENT	ANTON (C. C.)	*****	*****	******	REPORT 01MOAV	REPORT 01DAMX	DEG.C		Continuous	CONTIN
	QL	*****	****		*****	****	*****	·			
Temperature, oC	SAMPLE MEASUREMENT	****	*****		*****	35,0	37.0		0	Connidous	(Control
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	•••••	REPORT 01MOAV	46.1 01DAMX	DEG.C		Continuous	CONTIN
	QL	*****	*****		*****	*****	*****				
Temperature, oC	SAMPLE MEASUREMENT	****	*****	·	*****	81	8.4		0	1/DAY	CALCTO
00010 2 Effluent Net Value	PERMIT REQUIREMENT	*****	******	*****	*****	REPORT 01MOAV	15.3 01DAMX	DEG.C		1/Day	CALCTD
	QL	****	****		****	****	*****				
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PA166						
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab#	REPORT Lab #		REPORT Lab#	REPORT Lab #	REPORT*			Not Applic	NOT AP
	QL	*****	*****		44444	*****	*****			1.2	

Comments: 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 Submittal Form**

NJ0005622	Month         Day         Year           8         1         2008   To           Month         Day           8         31	Year 2008 FA	CC – SW Ou	tfall FACC
		2000		ian PACC
ERMITTEE: SE&G NUCLEAR LLC 0 PARK PLAZA EWARK, NJ 07101	LOCATION OF ACTIVITY: PSEG NUCLEAR LLC SALEM GENERATING STATION ALLOWAY CREEK NECK RD HANCOCKS BRIDGE, NJ 08038	P P	REPORT RECH SEG NUCLEAR LI O BOX 236/N21 IANCOCKS BRIDG	J.C
	REGION / COUNTY: Southern	ı / Salem County	ÿ	
CHECK IF APPICABLE:	No Discharge this Monitoring Period	☐ Mon	itoring Report Con	aments Attached
nother entity to operate the treat certify under penalty of law that nat, based on my inquiry of tho omplete. I am aware that there	atted by that person shall also sign the second certification at at I have personally examined and am familiar with the use individuals immediately responsible for obtaining the eare significant penalties for submitting false information. New Jersey water Pollution Control Act provides for personal states.	ted entity shall s information sub e information, I ion, including th	sign the certification mitted in this docur believe that the info ne possibility of and	nent and all attachments, and primation is true, accurate and
Robert C. Braun, S	Site Vice President - Salem			N/A
AME AND TITLE OF PRINCIPAL F	EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSEI	D OPERATOR	GRADE AND REG 09/18/2008	SISTRY NUMBER (IF APPLICABLE)
IGNATURE OF PRINCIPAL EXECU	UTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPE	RATOR	DATE	AREA CODE/PHONE NUMBER

N/A

DATE

AREA CODE/PHONE NUMBER

SIGNATURE

N/A

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

**FACC SW Outfall FACC** 

8/1/2008 TO 8/31/2008

PSEG NUCLEAR LLC SALEM GENERATIN

PARAMETER		QUANTITY C	DR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	2562	2593		*****	*****	****		0	MAGI	CALCID
50050 G Raw Sew/influent	PERMIT REQUIREMENT	3024 01MOAV	REPORT 01DAMX	MGD	******	*****	******	*****		1/Day	CALCTD
:	QL	*****	*****		*****	*****	*****				
Thermal Discharge Million BTUs per Hr	SAMPLE MEASUREMENT	14032	14329		****	****	****		0	YADI	CALCID
00015 2 Effluent Net Value	PERMIT REQUIREMENT	REPORT 01MOAV	30600 01DAMX	MBTU/HR	*****	******	*****	*****		1/Day	CALCTD
,	QL	*****	*****		*****	*****	*****				
Lab Certification #	SAMPLE MEASUREMENT	17327	17451	*	PA 166						
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab#	REPORT Lab#		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applie	NOT AP
	QL	*****	*****		*****	*****	*****				

Comments: 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 Submittal Form

NJPDES PERMIT	MONITORING PERIOD		MONITOR	RED LOCATION:							
NJ0005622	Month         Day         Year           8         1         2008   To           Month         Day           8         31	Year 2008	048C – SW Outf	all 48C							
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101	TUCLEAR LLC PSEG NUCLEAR LLC SALEM PSEG NUCLEAR LLC PLAZA GENERATING STATION PO BOX 236/N21										
REGION / COUNTY: Southern / Salem County											
CHECK IF APPICABLE:	No Discharge this Monitoring Period		Monitoring Report Com	ments Attached							
the certification. Where the hig responsibility or person designs another entity to operate the tre I certify under penalty of law the that, based on my inquiry of the complete. I am aware that then	ce a person designated by that person. For a local age hest ranking operator does not have the ability to auth ted by that person shall also sign the second certificat atment works, the highest-ranking official of the contrast I have personally examined and am familiar with these individuals immediately responsible for obtaining the are significant penalties for submitting false inform New Jersey water Pollution Control Act provides for	orize capital on at the bo acted entity e information the information, include	expenditures and hire per trom of this page. If the I shall sign the certification on submitted in this docur- tion, I believe that the info ling the possibility of and	rsonnel, a person having that ocal agency has contracted with a.  nent and all attachments, and ormation is true, accurate and							
Robert C. Braun,	Site Vice President - Salem			N/A							
NAME AND TITLE OF PRINCIPAL	EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENS	ED OPERATO	OR GRADE AND REG	ISTRY NUMBER (IF APPLICABLE) 856-339-1998							
SIGNATURE OF PRINCIPAL EXEC	UTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OI	DATE	AREA CODE/PHONE NUMBER								
*For a local agency where the high person designated by that person is	hest-ranking operator does not have the ability to authorize shall sign the following certification:	capital expen	ditures and hire personnel, a	a person having that responsibility or							
I certify under penalty of law and i	n accordance with N.J.S.A. 58:10A-6F(5) that I have review	ed the attache	ed discharge monitoring repo	orts.							
N/A	N/A		N/A	N/A							

DATE

AREA CODE/PHONE NUMBER

SIGNATURE

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

048C SW Outfall 48C

歌 9/1/2008 TO 9/30/2008。

PSEG NUCLEAR LLC SALEM GENERATIN

NJ0005622	048C	SW Outfall 480	ં બાર્ના 68	1/2000	TO 8/31/20	200	EAR LLC SAL	LIVI GLIV	LIIA		
PARAMETER		QUANTITY C	•	UNITS		TY OR CONCENTR		UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	0.3790	0,5650	·	*****	*****	*****		0	YADII	CALCID
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	******	*****	*****	*****		1/Day	CALCTD
Solids, Total	QL	*****	******		*******	******	******				
Suspended	SAMPLE MEASUREMENT	*****	*****		****	5	6		0	2/movi4	(bmPos
00530 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	******	30 01MOAV	100 01DAMX	MG/L		2/Month	COMPOS
	OL.	*****	*****		*****	*****	*****				
Nitrogen, Ammonia Total (as N)	SAMPLE MEASUREMENT	****	****		*****	8	10		0	2/month	Compos
00610 1 Effluent Gross Value	PERMIT REQUIREMENT	******	******	*****	****	35 01MOAV	70 01DAMX	MG/L		2/Month	COMPOS
	QL	*****	*****		*****	*****	*****				
Petroleum Hydrocarbons	SAMPLE MEASUREMENT	*****	*****		****	45	<5		0	2/mon74	GRAB
00551 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	******	10 01MOAV	15 01DAMX	MG/L		2/Month	GRAB
	QL	*****	*****		*****	*****	*****			25	
(TOC)	SAMPLE MEASUREMENT	*****	*****		*****	6	9		0	2/mon74	Compos
00680 1 Effluent Gross Value	«PERMIT REQUIREMENT	******	*****	*****	*****	REPORT 01MOAV	50 01DAMX	MG/L		2/Month	COMPOS
	© QL	*****	*****		*****	*****	*****				Appendig Appendig
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PA166						
99999 99 Lab	PERMIT REQUIREMENT	-REPORT Lab#	REPORT :- Lab #	F 63.00 F	REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic	NOT AP
	// QL	*****	*****		****	*****	*****				

Comments: If there are any questions in regards to the monitoring report form, please contact Susan Rosenwinkel of the BPSP - Region 2 at (609)292-4680 or via email at "srosenwi@dep.state.nj.us".

# **Surface Water Discharge Monitoring Report Submittal Form**

NJPDES PERMIT	MONITORING PERIOD	MONITOR	ED LOCATION:								
NJ0005622	Month         Day         Year           8         1         2008   To           Month         Day         Year           8         31         2008	481A – SW Outf	all 481A								
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101	2&G NUCLEAR LLC PSEG NUCLEAR LLC SALEM PSEG NUCLEAR LLC PARK PLAZA GENERATING STATION PO BOX 236/N21										
REGION / COUNTY: Southern / Salem County											
CHECK IF APPICABLE:											
the certification. Where the hig responsibility or person designs another entity to operate the tre I certify under penalty of law th that, based on my inquiry of the complete. I am aware that then	ce a person designated by that person. For a local agency, the highest ranking operator does not have the ability to authorize capitated by that person shall also sign the second certification at the beatment works, the highest-ranking official of the contracted entity at I have personally examined and am familiar with the informationse individuals immediately responsible for obtaining the information are significant penalties for submitting false information, incluing New Jersey water Pollution Control Act provides for penalties up	I expenditures and hire per ottom of this page. If the lo shall sign the certification on submitted in this docum tion, I believe that the info ding the possibility of and	sonnel, a person having that ocal agency has contracted with  nent and all attachments, and rmation is true, accurate and								
Robert C. Braun,	Site Vice President - Salem		N/A								
NAME AND TITLE OF PRINCIPAL	EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERAT	OR GRADE AND REGI	STRY NUMBER (IF APPLICABLE)								
- Va-		09/18/2008	856-339-1998								
SIGNATURE OF PRINCIPAL EXEC	UTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	DATE	AREA CODE/PHONE NUMBER								
	hest-ranking operator does not have the ability to authorize capital expensions.  Shall sign the following certification:	nditures and hire personnel, a	person having that responsibility or								
I certify under penalty of law and i	n accordance with N.J.S.A. 58:10A-6F(5) that I have reviewed the attach	ned discharge monitoring repo	orts.								

N/A

DATE

AREA CODE/PHONE NUMBER

SIGNATURE

N/A

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

481A SW Outfall 481A

8/1/2008 TO 8/31/2008

PSEG NUCLEAR LLC SALEM GENERATIN

		<u> </u>	· · · · · · · · · · · · · · · · · · ·			· :					
PARAMETER		QUANTITY (	OR LOADING	UNITS	QUALI	TY OR CONCENTR	ATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	482	493		*****	*****	*****		0	1/084	CALCID
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	******	******	*****		1/Day	CALCTD
	QL	*****	*****		*****	*****	*****				
рН	SAMPLE MEASUREMENT	*****	*****		7.3	*****	7.6		0	1/week	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	6.0 01DAMN	areas;	9.0 01DAMX	su		1/Week	GRAB
	QL	*****	*****		*****	*****	*****				
рН	SAMPLE MEASUREMENT	*****	*****		7.8	*****	7.9		0	1/WEEK	GRAB
00400 7 Intake From Stream	PERMIT REQUIREMENT	*****	*****	*****	REPORT 01DAMN	*****	REPORT 01 DAMX	SU		1/Week	GRAB
	QL	*****	*****		*****	*****	*****				
LC50 Statre 96hr Acu Cyprinodon	SAMPLE MEASUREMENT	*****	*****		CODE = N	*****	*****	-	0	CODE=N	COE=N
TAN6A 1 Effluent Gross Value	PERMIT REQUIREMENT		******	*****	50. 01DAMN	*****	*****	%EFFL		2/Year	COMPOS
	QL	****	*****	i ·	*****	*****	*****				
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****		****	CODE=N	CODE=N		0	CODE-N	CODE=N
*CPOX 1	PERMIT			*****		0.3	0.5			3/Week	GRAB
Effluent Gross Value	REQUIREMENT	*****	*****		*****	01MOAV	01DAMX	MG/L			
Option 1	QL	****	*****		*****	*****	*****				
Chlorine Produced	SAMPLE MEASUREMENT	****	****		*****	40.1	LO.1		0	3/WEEK	GPAB
Oxidants									-	N. C. O. (1990) A. (1990) A. (1990) A.	Annual Control
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	*****	REPORT 01MOAV	0.2 01DAMX	MG/L		3/Week	GRAB
Option 2	QL	*****	*****		*****	*****	*****				

Comments: The permittee is required to perform acute toxicity testing on a minimum of one representative CWS outfall while DSN 48C is being routed to that outfall.

140014

PERMIT NUMBER:

MONITORED LOCATION:

**MONITORING PERIOD:** 

FACILITY NAME:

NJ0005622

481A SW Outfall 481A

8/1/2008 TO 8/31/2008

PSEG NUCLEAR LLC SALEM GENERATIN

PARAMETER		QUANTITY C	OR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature, oC	SAMPLE MEASUREMENT	****	*****		*****	35.3	37.9		0	1/DAY	Conna
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	******	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.C		1/Day	CONTIN
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PA166						
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab#	REPORT Lab#	REPORT Lab #			Not Applic	NOT AP

Comments: The permittee is required to perform acute toxicity testing on a minimum of one representative CWS outfall while DSN 48C is being routed to that outfall.

## **Surface Water Discharge Monitoring Report Submittal Form**

MONITORED LOCATION:

MONITORING PERIOD

NJPDES PERMIT

NJ0005622	Month Day 8 1	Year 2008	o Month	Day 31	Year 2008	482A – SW Out	fall 482A
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101		PSEG NUCLE GENERATING ALLOWAY C HANCOCKS I	AR LLC SA 3 STATION REEK NEC	LEM K RD		REPORT RECI PSEG NUCLEAR L PO BOX 236/N21 HANCOCKS BRID	LC
		REGION	/ COUNTY	: Souther	n / Salem	County	
CHECK IF APPICABLE:	No Disch	arge this Moni				Monitoring Report Con	nments Attached
another entity to operate the treat I certify under penalty of law the that, based on my inquiry of the complete. I am aware that ther to N.J.A.C. 7:14A-6.9(B). The	ated by that person atment works, the last I have personall ose individuals imple are significant personal ose individuals implements. New Jersey water	shall also sign highest-ranking by examined and nediately respoenalties for sub Pollution Contract.	the second of official of the desired of the desire	ertification the contract with the otaining the informa	n at the betted entity informatic e information, inclu	ottom of this page. If the v shall sign the certification submitted in this docustion, I believe that the infliction of the possibility of an	local agency has contracted with on.  Imment and all attachments, and formation is true, accurate and ad/or imprisonment, pursuant.
	Site Vice President						N/A
NAME AND TITLE OF PRINCIPAL	EXECUTIVE OFFICE	CR, AUTHORIZED	AGENT, OR	*LICENSE	D OPERAT	OR GRADE AND REG	GISTRY NUMBER (IF APPLICABLE)
							856-339-1998
SIGNATURE OF PRINCIPAL EXEC	UTIVE OFFICER, AU	THORIZED AGE	NT, OR *LICI	ENSED OPI	RATOR	DATE	AREA CODE/PHONE NUMBER
person designated by that person s	hest-ranking operato shall sign the followi	or does not have t ing certification:	he ability to o	nuthorize c	apital expe	enditures and hire personnel,	AREA CODE/PHONE NUMBER , a person having that responsibility
*For a local agency where the high	hest-ranking operato shall sign the followi	or does not have t ing certification:	he ability to o	nuthorize c	apital expe	enditures and hire personnel,	AREA CODE/PHONE NUMBER , a person having that responsibility

MONITORED LOCATION:

**MONITORING PERIOD:** 

FACILITY NAME:

NJ0005622

482A SW Outfall 482A

8/1/2008 TO 8/31/2008

**PSEG NUCLEAR LLC SALEM GENERATIN** 

					•	•				,	
PARAMETER		QUANTITY (	OR LOADING	UNITS	QUALI	TY OR CONCENTR	ATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	436	454		*****	· *****	*****		0	1/DAY	CALCID
50050 1 Effluent Gross Value	PERMIT	REPORT 01MOAV	REPORT 01DAMX	MGD	******	*******	******	*****		1/Day	CALCTD
рН	SAMPLE MEASUREMENT	****	****		7.6	*****	7.6		0	1/WEEK	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	6.0 01DAMN	*****	9:0 01 DAMX	SU		1/Week	GRAB
рН	QL SAMPLE MEASUREMENT	*****	*****	,	7.8	*****	7.9		0	1/WEEK	GRAB
00400 7 Intake From Stream	PERMIT REQUIREMENT	•••••	******	*****	REPORT - 01DAMN	*****	REPORT 01DAMX	su		1/Week	GRAB
LC50 Statre 96hr Acu Cyprinodon	SAMPLE MEASUREMENT	*****	*****		CODE = N	*****	*****		0	CODE=N	BOE=W
TAN6A 1 Effluent Gross Value	PERMIT REQUIREMENT	******		*****	50 01DAMN	******	******	%EFFL		2/Year	COMPOS
Chlorine Produced	SAMPLE MEASUREMENT	*****	*****		*****	CODE=N	CODE=N		0	ade=N	ODE=Y
Oxidants  *CPOX 1  Effluent Gross Value	PERMIT REGUIREMENT	******	******	*****	*****	0.3 01MOAV	0.5 01DAMX	MG/L		3/Week	GRAB
Option 1 Chlorine Produced	GL SAMPLE MEASUREMENT	*****	*****		*****	······································	(0)		0	3/WEK	GRAB.
Oxidants *CPOX 1 Effluent Gross Value	PERMIT	*****	er- execution	*****	*****	∠⊘, \ REPORT 01MOAV	0:2 01DAMX	MG/L		3/Week	GRAB,
Option 2	QL	******	******		*****	anthi	4****	-	-2.1		4

Comments: The permittee is required to perform acute toxicity testing on a minimum of one representative CWS outfall while DSN 48C is being routed to that outfall.

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

482A SW Outfall 482A

8/1/2008 TO 8/31/2008

PSEG NUCLEAR LLC SALEM GENERATIN

PARAMETER		QUANTITY	OR LOADING	UNITS	QUALI	TY OR CONCENTE	IATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature, oC	SAMPLE MEASUREMENT	*****	*****		****	36.0	38.7		0	1/DAY	MITUD
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	enteen enteen	******	*****	*******	REPORT 01MOAV	REPORT 01DAMX	DEG.C		1/Day	CONTIN
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PAILLE						
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab#	REPORT Lab#			Not Applic	NOT AP

Comments: The permittee is required to perform acute toxicity testing on a minimum of one representative CWS outfall while DSN 48C is being routed to that outfall. .

# **Surface Water Discharge Monitoring Report Submittal Form**

NJPDES PERMIT	MONITORING PERIOD	MONITORE	D LOCATION:
NJ0005622	Month         Day         Year           8         1         2008   To           Month         Day         Year           8         31         2008	483A – SW Outfal	l 483A
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101	LOCATION OF ACTIVITY: PSEG NUCLEAR LLC SALEM GENERATING STATION ALLOWAY CREEK NECK RD HANCOCKS BRIDGE, NJ 08038	REPORT RECIPION PSEG NUCLEAR LLC PO BOX 236/N21 HANCOCKS BRIDGE,	
	REGION / COUNTY: Southern / Salem Co	ounty	
CHECK IF APPICABLE:	No Discharge this Monitoring Period	Monitoring Report Comme	nts Attached
responsibility or person designa another entity to operate the tree I certify under penalty of law th that, based on my inquiry of the complete. I am aware that ther	thest ranking operator does not have the ability to authorize capital exted by that person shall also sign the second certification at the bott atment works, the highest-ranking official of the contracted entity shat I have personally examined and am familiar with the information are individuals immediately responsible for obtaining the information are are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to	tom of this page. If the loc hall sign the certification.  I submitted in this document on, I believe that the informing the possibility of and/o	al agency has contracted with nt and all attachments, and nation is true, accurate and
Robert C. Braun,	Site Vice President - Salem	_	N/A
NAME AND TITLE OF PRINCIPAL	EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	GRADE AND REGIST 09/18/2008	FRY NUMBER (IF APPLICABLE) 856-339-1998
SIGNATURE OF PRINCIPAL EXEC	UTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	DATE A	REA CODE/PHONE NUMBER
	hest-ranking operator does not have the ability to authorize capital expend shall sign the following certification:	litures and hire personnel, a p	erson having that responsibility or
Legify under negative of law and i	n accordance with N.J.S.A. 58:10A-6F(5) that I have reviewed the attached	d diaghanaa manitarina ranart	

N/A

SIGNATURE

N/A

NAME AND TITLE

N/A

DATE

N/A

AREA CODE/PHONE NUMBER

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

483A SW Outfall 483A

8/1/2008 TO 8/31/2008

PSEG NUCLEAR LLC SALEM GENERATIN

		<u> </u>				·			1		CAMPLE
PARAMETER		QUANTITY (	OR LOADING	UNITS	QUALI	TY OR CONCENTR	ATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	473	474		*****	*****	*****		0	1/DAY	CALCID
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	******	*****		1/Day	CALCTD
	QL	*****	*****		*****	******	*****				
pH	SAMPLE MEASUREMENT	****	*****		7.5	*****	7,7		0	1/WEEK	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	6.0 01DAMN	*****	9.0 01DAMX	su		1/Week	GRAB
	QL	*****	*****		****	*****	*****				
pH ·	SAMPLE MEASUREMENT	*****	****		7.8	*****	7.9		0	I/WEEK	GEAB
00400 7	PERMIT	*****	*****	*****	REPORT	*****	REPORT	ຮບ		1/Week	GRAB
Intake From Stream	REQUIREMENT	*****	*****		01DAMN	*****	01DAMX				
Chlorine Produced				1			0 - 1	<u> </u>	- 1		7 - 7
Oxidants	SAMPLE MEASUREMENT	*****	*****		*****	CODE=N	CODE=N		0	CODE=N	(60E=N
*CPOX 1	PERMIT			*****		0.3	0.5	MG/L		3/Week	GRAB
Effluent Gross Value	PERMIT REQUIREMENT	******	******		******	VAOMIO	01DAMX	III.G/L			
Option 1	OL.	*****	*****		*****	*****	*****		(6)		
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	****		*****	<0.1 ·	<0.1		0	3/WEEK	GRAB
*CPOX 1	PERMIT	*****	*****	*****	*****	REPORT	0.2	MG/L		3/Week	GRAB
Effluent Gross Value	REQUIREMENT					01MOAV	01DAMX				
Option 2	QL	*****	*****		*****	******	*****				
Temperature, oC	SAMPLE MEASUREMENT	*****	*****		*****	35.2	39,2		0	1/DAY	GMIN
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.C		1/Day	CONTIN
	QL	*****	*****		*****	*****	*****				

Comments: Any questions in regards to the monitoring report form can be directed to S. Rosenwinkel of the BPSP - Region 2 at (609)292-4860.

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

483A SW Outfall 483A

8/1/2008 TO 8/31/2008

PSEG NUCLEAR LLC SALEM GENERATIN

PARAMETER	X	QUANTITY O	R LOADING	UNITS	QUALI	TY OR CONCENT	NOITAF	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PA166	-					
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab#	REPORT Lab #			Not Applic	NOT AP

Comments: Any questions in regards to the monitoring report form can be directed to S. Rosenwinkel of the BPSP - Region 2 at (609)292-4860.

## **Surface Water Discharge Monitoring Report Submittal Form**

NJPDES PERMIT	MONITORING PERIOD	MONITORED LOCATION:									
NJ0005622	Month         Day         Year           8         1         2008   To           Month         Day         Year           8         31         2008	484A – SW Outfall 484A									
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101	LOCATION OF ACTIVITY: PSEG NUCLEAR LLC SALEM GENERATING STATION ALLOWAY CREEK NECK RD HANCOCKS BRIDGE, NJ 08038	REPORT RECIPIENT: PSEG NUCLEAR LLC PO BOX 236/N21 HANCOCKS BRIDGE, NJ 08038									
REGION / COUNTY: Southern / Salem County											
CHECK IF APPICABLE:	CHECK IF APPICABLE: 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											
complete. I am aware that the	ose individuals immediately responsible for obtaining the informative are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to	ing the possibility of and/or imprisonment, pursuant									
Robert C. Braun,	Site Vice President - Salem	N/A									
NAME AND TITLE OF PRINCIPAL	EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATO	OR GRADE AND REGISTRY NUMBER (IF APPLICABLE)  09/18/2008 856-339-1998									
SIGNATURE OF PRINCIPAL EXEC	UTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	DATE AREA CODE/PHONE NUMBER									
	hest-ranking operator does not have the ability to authorize capital expend shall sign the following certification:	ditures and hire personnel, a person having that responsibility or									
I certify under penalty of law and i	n accordance with N.J.S.A. 58:10A-6F(5) that I have reviewed the attached	ed discharge monitoring reports.									

N/A

DATE

SIGNATURE

N/A

AREA CODE/PHONE NUMBER

N/A

MONITORED LOCATION:

**MONITORING PERIOD:** 

FACILITY NAME:

NJ0005622

484A SW Outfall 484A

8/1/2008 TO 8/31/2008

PSEG NUCLEAR LLC SALEM GENERATIN

PARAMETER QUANTITY OR LOADING UNITS QUALITY OR CONCENTRATION UNITS EX. ANALYSIS TO THE Treatment Plant South Flow, In Conduit or Thru Treatment Plant Peanit Report OiMOAV OIDAMX MgD	
Thru Treatment Plant   MEASUREMENT   45   45   45	MPLE TYPE
### Effluent Gross Value   REDUREMENT   O1MOAV   O1DAMX   MGD	CTD.
PH	ALCTD
O0400 1   PERMIT	Secretary and pro-
### ##################################	2AB
PH	RAB
00400 7 PERMIT SU DIDAMN SU SU SU SIWEEK G	
PERIODEMENT ****** OIDAMY SU	RAB
	RAB
QL ****** ****** ******	
Cyprinodon  Cyprinodon  CODE = N  CO	E=N
	OMPOS
QL service service service	
Chlorine Produced	DE=N
	IRAB
Effluent Gross Value Option 1 QL: ******* ****************************	
Chlorine Produced	RAB
Oxidants MEASUREMENT ****** 40.1 40.1 0 3 LUBER G	H·U
*CPOX 1 PERMIT REQUIREMENT NO.2 NG/L 3/Week G	RAB
Option 2 QL ******* *******	

Comments: The permittee is required to perform acute toxicity testing on a minimum of one representative CWS outfall while DSN 48C is being routed to that outfall.

MONITORED LOCATION:

**MONITORING PERIOD:** 

FACILITY NAME:

NJ0005622

484A SW Outfall 484A

8/1/2008 TO 8/31/2008

PSEG NUCLEAR LLC SALEM GENERATIN

PARAMETER		QUANTITY (	OR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature, oC	SAMPLE MEASUREMENT	****	*****		*****	35,5	38.6		0	1 (DAY	Contra
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	******	REPORT 01MOAV	REPORT 01DAMX	DEG.C		1/Day	CONTIN
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PAIGLE						
99999 99 Lab	PERMIT REQUIREMENT	REPORT ** Lab #	REPORT Lab #		REPORT Lab#	REPORT Lab #	REPORT Lab#			Not Applic	NOT/AP
	QL	*****	*****		*****	*****	*****				

Comments: The permittee is required to perform acute toxicity testing on a minimum of one representative CWS outfall while DSN 48C is being routed to that outfall.

# **Surface Water Discharge Monitoring Report Submittal Form**

NJPDES PERMIT	MONITORING PERIOD	MONITORED LOCATION:
NJ0005622	Month         Day         Year           8         1         2008   To           Month         Day         Year           8         31         2008	485A – SW Outfall 485A
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101	LOCATION OF ACTIVITY: PSEG NUCLEAR LLC SALEM GENERATING STATION ALLOWAY CREEK NECK RD HANCOCKS BRIDGE, NJ 08038	REPORT RECIPIENT: PSEG NUCLEAR LLC PO BOX 236/N21 HANCOCKS BRIDGE, NJ 08038
	REGION / COUNTY: Southern / Salem C	County
CHECK IF APPICABLE:		Monitoring Report Comments Attached
I certify under penalty of law the that, based on my inquiry of the complete. I am aware that the	atment works, the highest-ranking official of the contracted entity s nat I have personally examined and am familiar with the information ose individuals immediately responsible for obtaining the information are are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to	n submitted in this document and all attachments, and on, I believe that the information is true, accurate and ing the possibility of and/or imprisonment, pursuant
Robert C. Braun,	Site Vice President - Salem	<u>N/A</u>
NAME AND TITLE OF PRINCIPAL	EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATO	R GRADE AND REGISTRY NUMBER (IF APPLICABLE)  09/18/2008 856-339-1998
SIGNATURE OF PRINCIPAL EXEC	CUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	DATE AREA CODE/PHONE NUMBER
	hest-ranking operator does not have the ability to authorize capital expend shall sign the following certification:	ditures and hire personnel, a person having that responsibility o
I certify under penalty of law and	in accordance with N.J.S.A. 58:10A-6F(5) that I have reviewed the attache	ed discharge monitoring reports.
N/A	N/A	N/A N/A

DATE

AREA CODE/PHONE NUMBER

SIGNATURE

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

485A SW Outfall 485A

8/1/2008 TO 8/31/2008

PSEG NUCLEAR LLC SALEM GENERATIN

PARAMETER		QUANTITY (	OR LOADING	UNITS	QUALI	TY OR CONCENTR	ATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	449	449		****	****	*****		O	1/DAY	CALCTD
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	******		******		1/Day	CALCTD
pH	SAMPLE MEASUREMENT	****	*****		7.6	******	7.7		0	1/WEEK	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	******	******	*****	6.0 01DAMN		9.0 01DAMX	SU		1/Week	GRAB
рН	SAMPLE MEASUREMENT	****	*****		7.8	*****	7.9		0	NWEEK	GRAB
00400 7 Intake From Stream	PERMIT REQUIREMENT.	******	******	*****	REPORT 01DAMN	*****	REPORT 01DAMX	SU		1/Week	GRAB
LC50 Statre 96hr Acu	SAMPLE MEASUREMENT	****	*****		CODE=N	*****	*****		O	Code=N	CODE=N
TAN6A 1 Effluent Gross Value	PERMIT REQUIREMENT:	******	******	*****	50 01DAMN	******	******	%EFFL		2/Year	COMPOS
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****		*****	CODE=N	CODE=N	-	0	BOE=N	CODE=N
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	******	*****	*****	*****	0.3 01MOAV	0.5 01DAMX	MG/L		3/Week	GRAB
Option 1 Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****		****	40.1	<0.1		0	3/WEEK	GRAB
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	0.2 01DAMX	MG/L		3/Week	GRAB
Option 2	QL	*****	****		****	*****	*****		)		

Comments: The permittee is required to perform acute toxicity testing on a minimum of one representative CWS outfall while DSN 48C is being routed to that outfall.

MONITORED LOCATION:

**MONITORING PERIOD:** 

FACILITY NAME:

NJ0005622

485A SW Outfall 485A

8/1/2008 TO 8/31/2008

PSEG NUCLEAR LLC SALEM GENERATIN

	QUANTITY OR LOADING		ADING UNITS QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE	
SAMPLE MEASUREMENT	****	*****	-	*****	35.0	38.7		0	YAGII	Contra
PERMIT REQUIREMENT	******		· ******	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.C		1/Day	CONTIN
SAMPLE MEASUREMENT	17327	17451		PA 166						
PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab#		REPORT Lab #	REPORT Lab#	REPORT Lab #			Not Applic	NOT AP
	PERMIT REGUIREMENT  GL  SAMPLE MEASUREMENT  PERMIT REGUIREMENT	SAMPLE MEASUREMENT	SAMPLE MEASUREMENT ******  QL ********  SAMPLE MEASUREMENT   7327   1745   PERMIT REQUIREMENT   Lab #   Lab #	SAMPLE MEASUREMENT ******  QL ********  SAMPLE MEASUREMENT   17327   1745   PERMIT REQUIREMENT   Lab # REPORT Lab #	SAMPLE MEASUREMENT	SAMPLE   MEASUREMENT	SAMPLE   MEASUREMENT   MEPORT   REPORT   REPORT   COUREMENT   CO	SAMPLE   MEASUREMENT   MEPORT   MEPORT   MEPORT   MEPORT   MEPORT   MERCUREMENT   MERCUREMENT   MERCUREMENT   MEPORT   MEPORT   MEPORT   MERCUREMENT   MEPORT   METOR   ME	SAMPLE MEASUREMENT COLOR CONCENTRATION UNITS EX.  SAMPLE MEASUREMENT COLOR COLOR CONCENTRATION UNITS EX.  SAMPLE MEASUREMENT COLOR C	GUANTITY OF LOADING UNITS GUALITY OF CONCENTRATION UNITS EX. ANALYSIS  SAMPLE MEASUREMENT

Comments: The permittee is required to perform acute toxicity testing on a minimum of one representative CWS outfall while DSN 48C is being routed to that outfall.

## **Surface Water Discharge Monitoring Report Submittal Form**

NJPDES PERMIT	MONITORING PERIOD	MONITORED LOCATION:  486A – SW Outfall 486A					
NJ0005622	Month         Day         Year           8         1         2008   To           Month         Day         Year           8         31         2008						
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101	LOCATION OF ACTIVITY: PSEG NUCLEAR LLC SALEM GENERATING STATION ALLOWAY CREEK NECK RD HANCOCKS BRIDGE, NJ 08038	REPORT RECIP PSEG NUCLEAR LL PO BOX 236/N21 HANCOCKS BRIDG	C				
	REGION / COUNTY: Southern / Salem Co	ounty					
CHECK IF APPICABLE:	No Discharge this Monitoring Period	Ionitoring Report Com	nents Attached				
another entity to operate the tre I certify under penalty of law th that, based on my inquiry of the complete. I am aware that then	atted by that person shall also sign the second certification at the botto atment works, the highest-ranking official of the contracted entity shat I have personally examined and am familiar with the information are individuals immediately responsible for obtaining the information are are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to	nall sign the certification submitted in this docum on, I believe that the info ng the possibility of and	nent and all attachments, and rmation is true, accurate and				
Robert C. Braun,	Site Vice President - Salem	<u>N/A</u>					
NAME AND TITLE OF PRINCIPAL	EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	GRADE AND REG	ISTRY NUMBER (IF APPLICABLE)  856-339-1998				
SIGNATURE OF PRINCIPAL EXEC	UTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	DATE	AREA CODE/PHONE NUMBER				
	hest-ranking operator does not have the ability to authorize capital expendi shall sign the following certification:	itures and hire personnel, a	n person having that responsibility o				
I certify under penalty of law and i	n accordance with N.J.S.A. 58:10A-6F(5) that I have reviewed the attached	l discharge monitoring repo	orts.				

N/A

SIGNATURE

N/A

AREA CODE/PHONE NUMBER

DATE

N/A

MONITORED LOCATION:

**MONITORING PERIOD:** 

FACILITY NAME:

NJ0005622

486A SW Outfall 486A

8/1/2008 TO 8/31/2008

**PSEG NUCLEAR LLC SALEM GENERATIN** 

PARAMETER		QUANTITY (	OR LOADING	UNITS	QUALI	TY OR CONCENTE	ATION	UNITS	NO. EX:	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	398	399		*****	*****	*****		0	1/DAY	CALCID
50050 1 Effluent Gross Value	PERMIT REQUIREMENT.	REPORT. 01MOAV	REPORT 01DAMX	MGD	******	******		*****		1/Day	GALCTD
рН	SAMPLE MEASUREMENT	*****	*****	,	7.6	****	7.7		0	1/WEEK	GRAS
00400 1 Effluent Gross Value	PERMIT. REQUIREMENT	*****	******	*****	6.0 01DAMN	*****	9.0 01DAMX	SU		1/Week	GRAB
рН	SAMPLE MEASUREMENT	*****	*****	<del></del>	7.8	*****	7.9	<del>,</del>	0	1/WEEK	GRAB
00400 7 Intake From Stream	PERMIT REQUIREMENT	******	*****	*****	REPORT 01DAMN	*****	REPORT 01DAMX	su		1/Week	GRAB
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****		*****	CODE=N	CODE=N		Ö	CODE=N	00E=N
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****		0:3 01MOAV	, 0.5 01DAMX	MG/L		3/Week	GRAB
Option 1 Chlorine Produced	SAMPLE MEASUREMENT	*****	*****		*****	<0.1	<0.1		0	3/WEEK	GRAB
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT		******	*****	University of the Control of the Con	REPORT 01MOAV	0.2 01DAMX	· MG/L		3/Week	GRAB
Option 2 Temperature,	QL	******	******	<u>.                                    </u>	******	******	*****				0 1
oC	SAMPLE MEASUREMENT:	. *****	*****		*****	34.3	38.9		0	1/DAY	Contin
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.C		1/Day	CONTIN

Comments: Any questions in regards to the monitoring report form can be directed to S. Rosenwinkel of the BPSP - Region 2 at (609)292-4860.

MONITORED LOCATION:

**MONITORING PERIOD:** 

FACILITY NAME:

NJ0005622

486A SW Outfall 486A

8/1/2008 TO 8/31/2008

PSEG NUCLEAR LLC SALEM GENERATIN

PARAMETER		QUANTITY C	DR LOADING	UNITS	QUALI	TY OR CONCENTR	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE	
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PAllolo					_	
99999 99 Lab	PERMIT REQUIREMENT.	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab.#	REPORT Lab #			Not Applic	NOT AP

Comments: Any questions in regards to the monitoring report form can be directed to S. Rosenwinkel of the BPSP - Region 2 at (609)292-4860.

# **Surface Water Discharge Monitoring Report Submittal Form**

NJPDES PERMIT	MONITORING PERIOD	MONITO	RED LOCATION:
NJ0005622	Month         Day         Year           8         1         2008   To           Month         Day         Year           8         31         2008	487B – SW Out	fall 487B
PERMITTEE: PSE&G NUCLEAR LLC 30 PARK PLAZA NEWARK, NJ 07101	LOCATION OF ACTIVITY:  PSEG NUCLEAR LLC SALEM  GENERATING STATION  ALLOWAY CREEK NECK RD	REPORT RECL PSEG NUCLEAR LI PO BOX 236/N21 HANCOCKS BRIDG	LC
AZWING, NO OFFOI	HANCOCKS BRIDGE, NJ 08038	minos one Biab	
	DECION (COMPUTE O 1) (C.)		•
	REGION / COUNTY: Southern / Salem C	County	
CHECK IF APPICABLE:	No Discharge this Monitoring Period	Monitoring Report Con	nments Attached
the certification. Where the hig responsibility or person designa another entity to operate the tre	ace a person designated by that person. For a local agency, the high ghest ranking operator does not have the ability to authorize capital ated by that person shall also sign the second certification at the bot eatment works, the highest-ranking official of the contracted entity s	expenditures and hire pettom of this page. If the shall sign the certification	ersonnel, a person having that local agency has contracted with n.
the certification. Where the highest person designation another entity to operate the tree. I certify under penalty of law that, based on my inquiry of the complete. I am aware that the	ghest ranking operator does not have the ability to authorize capital ated by that person shall also sign the second certification at the both	expenditures and hire pettom of this page. If the shall sign the certification submitted in this docuion, I believe that the infling the possibility of an	ersonnel, a person having that local agency has contracted with n.  ment and all attachments, and ormation is true, accurate and d/or imprisonment, pursuant
the certification. Where the highest person designs another entity to operate the tree of the certify under penalty of law that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The	ghest ranking operator does not have the ability to authorize capital ated by that person shall also sign the second certification at the bot eatment works, the highest-ranking official of the contracted entity shat I have personally examined and am familiar with the information ose individuals immediately responsible for obtaining the information are significant penalties for submitting false information, including	expenditures and hire pettom of this page. If the shall sign the certification submitted in this docuion, I believe that the infling the possibility of an	ersonnel, a person having that local agency has contracted with n.  ment and all attachments, and formation is true, accurate and dor imprisonment, pursuant
the certification. Where the higher esponsibility or person designs another entity to operate the tree. I certify under penalty of law that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun,	chest ranking operator does not have the ability to authorize capital atted by that person shall also sign the second certification at the bot eatment works, the highest-ranking official of the contracted entity shat I have personally examined and am familiar with the information ose individuals immediately responsible for obtaining the informative are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to the state of the second certification at the bot saturday.	expenditures and hire pettom of this page. If the shall sign the certification on submitted in this docu ion, I believe that the infling the possibility of an to \$50,000 per violation.  OR GRADE AND RECORD	ersonnel, a person having that local agency has contracted with n.  ment and all attachments, and formation is true, accurate and d/or imprisonment, pursuant  N/A  GISTRY NUMBER (IF APPLICABLE)
the certification. Where the highest person designation another entity to operate the tree of certify under penalty of law that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL	ghest ranking operator does not have the ability to authorize capital ated by that person shall also sign the second certification at the bot eatment works, the highest-ranking official of the contracted entity shat I have personally examined and am familiar with the information ose individuals immediately responsible for obtaining the information are are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up the Site Vice President - Salem  EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATORIZED AGENT, OPERATORIZED	expenditures and hire pettom of this page. If the shall sign the certification on submitted in this docution, I believe that the infling the possibility of an to \$50,000 per violation.  OR GRADE AND RECOMPAGE 199/18/2008	ersonnel, a person having that local agency has contracted with n.  ment and all attachments, and formation is true, accurate and d/or imprisonment, pursuant
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the certification. Where the highesponsibility or person designated another entity to operate the treatment of law that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL SIGNATURE OF PRINCIPAL EXECUTE.	chest ranking operator does not have the ability to authorize capital atted by that person shall also sign the second certification at the botted that person shall also sign the second certification at the botted that person shall also sign the second certification at the botted that it is a second certification at the botted that I have personally examined and am familiar with the information ose individuals immediately responsible for obtaining the information are are significant penalties for submitting false information, include New Jersey water Pollution Control Act provides for penalties up a Site Vice President - Salem  EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR CHEST-Panking operator does not have the ability to authorize capital expensions.	expenditures and hire pettom of this page. If the shall sign the certification on submitted in this docution, I believe that the infling the possibility of an to \$50,000 per violation.  OR GRADE AND RECOMPAND ATE  OP/18/2008  DATE  ditures and hire personnel,	ersonnel, a person having that local agency has contracted with n.  ment and all attachments, and formation is true, accurate and d/or imprisonment, pursuant  N/A  GISTRY NUMBER (IF APPLICABLE)  856-339-1998  AREA CODE/PHONE NUMBER a person having that responsibility
the certification. Where the highesponsibility or person designated another entity to operate the treatment of law that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL SIGNATURE OF PRINCIPAL EXECUTE.	chest-ranking operator does not have the ability to authorize capital atted by that person shall also sign the second certification at the botted that person shall also sign the second certification at the botted that person shall also sign the second certification at the botted that it is a state of the contracted entity is that I have personally examined and am familiar with the information ose individuals immediately responsible for obtaining the information are are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to Site Vice President - Salem  EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR whest-ranking operator does not have the ability to authorize capital expensional sign the following certification:	expenditures and hire pettom of this page. If the shall sign the certification on submitted in this docution, I believe that the infling the possibility of an to \$50,000 per violation.  OR GRADE AND RECOMPAND ATE  OP/18/2008  DATE  ditures and hire personnel,	ersonnel, a person having that local agency has contracted with n.  ment and all attachments, and formation is true, accurate and d/or imprisonment, pursuant  N/A  GISTRY NUMBER (IF APPLICABLE)  856-339-1998  AREA CODE/PHONE NUMBER a person having that responsibility

# **Surface Water Discharge Monitoring Report Submittal Form**

MONITORED LOCATION:

MONITORING PERIOD

NJPDES PERMIT

NJ0005622	T- T-	$\begin{array}{ c c c c c } \hline 489A - S \\ \hline \end{array}$	W Outfall 489A
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101	LOCATION OF ACTIVITY: PSEG NUCLEAR LLC SALEM GENERATING STATION ALLOWAY CREEK NECK RD HANCOCKS BRIDGE, NJ 08038	PSEG NU PO BOX	RT RECIPIENT: JCLEAR LLC 236/N21 CKS BRIDGE, NJ 08038
	REGION / COUNTY: Southern	/ Salem County	
CHECK IF APPICABLE:	No Discharge this Monitoring Period	☐ Monitoring F	Report Comments Attached
responsibility or person design	ated by that person shall also sign the second certification	at the bottom of this pa	age. If the local agency has contracted with
I certify under penalty of law t that, based on my inquiry of th complete. I am aware that the	ated by that person shall also sign the second certification eatment works, the highest-ranking official of the contracted at I have personally examined and am familiar with the irrose individuals immediately responsible for obtaining the re are significant penalties for submitting false information. New Jersey water Pollution Control Act provides for penaltics.	ed entity shall sign the aformation submitted i information, I believe on, including the possil	n this document and all attachments, and that the information is true, accurate and pility of and/or imprisonment, pursuant
another entity to operate the tree I certify under penalty of law that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The	eatment works, the highest-ranking official of the contracted that I have personally examined and am familiar with the incose individuals immediately responsible for obtaining the re are significant penalties for submitting false information. New Jersey water Pollution Control Act provides for penaltics.	ed entity shall sign the aformation submitted i information, I believe on, including the possil	n this document and all attachments, and that the information is true, accurate and pility of and/or imprisonment, pursuant
I certify under penalty of law t that, based on my inquiry of th complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun,	eatment works, the highest-ranking official of the contracted that I have personally examined and am familiar with the incose individuals immediately responsible for obtaining the tre are significant penalties for submitting false information	ed entity shall sign the aformation submitted information, I believe on, including the possibilities up to \$50,000 pe	n this document and all attachments, and that the information is true, accurate and polity of and/or imprisonment, pursuant reviolation.  N/A  DE AND REGISTRY NUMBER (IF APPLICABLE)
I certify under penalty of law that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL	nat I have personally examined and am familiar with the incose individuals immediately responsible for obtaining the re are significant penalties for submitting false information. New Jersey water Pollution Control Act provides for penalties Vice President - Salem	ed entity shall sign the aformation submitted in information, I believe on, including the possibilities up to \$50,000 pe	n this document and all attachments, and that the information is true, accurate and pility of and/or imprisonment, pursuant r violation.
I certify under penalty of law that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL SIGNATURE OF PRINCIPAL EXECUTE.	eatment works, the highest-ranking official of the contracted that I have personally examined and am familiar with the incose individuals immediately responsible for obtaining the re are significant penalties for submitting false information. New Jersey water Pollution Control Act provides for penaltite Vice President - Salem  EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED	ed entity shall sign the aformation submitted it information, I believe on, including the possibilities up to \$50,000 per operator GRA	n this document and all attachments, and that the information is true, accurate and polity of and/or imprisonment, pursuant reviolation.  N/A  DE AND REGISTRY NUMBER (IF APPLICABLE)  9/18/2008 856-339-1998  AREA CODE/PHONE NUMBER
another entity to operate the tree I certify under penalty of law to that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL SIGNATURE OF PRINCIPAL EXECUTE A local agency where the his person designated by that person	catment works, the highest-ranking official of the contracted that I have personally examined and am familiar with the incose individuals immediately responsible for obtaining the re are significant penalties for submitting false information. New Jersey water Pollution Control Act provides for penalties Vice President - Salem  EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERALTICE.	and entity shall sign the enformation submitted in information, I believe on, including the possibilities up to \$50,000 per operator GRA  OPERATOR GRA  ATOR DATE  ital expenditures and hir	n this document and all attachments, and that the information is true, accurate and polity of and/or imprisonment, pursuant reviolation.  N/A  DE AND REGISTRY NUMBER (IF APPLICABLE)  9/18/2008  856-339-1998  AREA CODE/PHONE NUMBER  the personnel, a person having that responsibility of
another entity to operate the tree I certify under penalty of law to that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL SIGNATURE OF PRINCIPAL EXECUTE A local agency where the his person designated by that person	catment works, the highest-ranking official of the contracted that I have personally examined and am familiar with the incose individuals immediately responsible for obtaining the re are significant penalties for submitting false information. New Jersey water Pollution Control Act provides for penalties Vice President - Salem  EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERALTIVE OFFICER, AUTHORIZED OP	and entity shall sign the enformation submitted in information, I believe on, including the possibilities up to \$50,000 per operator GRA  OPERATOR GRA  ATOR DATE  ital expenditures and hir	n this document and all attachments, and that the information is true, accurate and polity of and/or imprisonment, pursuant reviolation.  N/A  DE AND REGISTRY NUMBER (IF APPLICABLE)  9/18/2008  856-339-1998  AREA CODE/PHONE NUMBER  the personnel, a person having that responsibility of conitoring reports.

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

489A SW Outfall 489A

8/1/2008 TO 8/31/2008

PSEG NUCLEAR LLC SALEM GENERATIN

1400003022									<del></del>		<del></del>
PARAMETER		QUANTITY C	DR LOADING	UNITS	QUALI	TY OR CONCENTR	IATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	0.0170	0.0170		*****	*****	*****		0	HTUSMI	CALCID
50050 1 Effluent Gross Value	PERMIT REQUIREMENT,	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	. *****		1/Month	CALCTD
	QL	*****	******		*****	*****	****** I	<u> </u>	A A S		
pH ,	SAMPLE MEASUREMENT	*****	*****		7.9	****	7.9		0	HENOMI	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	******	*****	*****	6.0 01DAMN	*****	9.0 01DAMX	SU		1/Month	GRAB
	OL.	*****	*****		*****	*****	*****	ļ	1000		
Solids, Total Suspended	SAMPLE MEASUREMENT	*****	****		5	5	****		0	MONTH	GRAB
00530 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	100 01DAMX	30 01MOAV	******	MG/L		1/Month	GRAB
	QL	*****	*****		*****	*****	******	,			
Petroleum  Hydrocarbons	SAMPLE MEASUREMENT	****	****		****	<5	15		O	1/month	GRAB
00551 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	*****	10 01MOAV	15 01DAMX	MG/L		1/Month	GRAB
	QL	*****	*****		*****	*****	*****				
Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	****	****		****	13	13		0	1/MONTH	GRAB
00680 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	50 01DAMX	MG/L		1/Month	GRAB
	QL	*****	*****		*****	*****	*****				
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PA166						
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab#		REPORT Lab #	REPORT Lab#	REPORT Lab #			Not Applic	NOT AP
	QL	*****	*****		*****	******	*****				

Comments: 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".