OCT 2 0 2009



SCH09-119

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
ARTICLE NUMBER: 7008 0150 0000 5749 4314
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 September 2009.

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 Bob Bernard (856) 339-1636.

Sincerely,

Robert C. Braun

Site Vice President - Salem

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OCT 2 0 2009

Attachment (12 DMR's)

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

September 2009

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.

EXPLANATION OF EXCEEDANCES

Sept	eml	oer	20	09
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The following exceedance(s) are included in the attached report and explained below.

DSN No.

EXPLANATION

None.

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 this 70 day of October 2009

Sheri L. Huston Notary Public State of NJ Commission Expires 1/15/2014 BC Site Vice President – Salem
Director – Regulatory Affairs
John Valeri Jr., Esq.
Salem Radwaste and Environmental Supervisor
E. J. Keating

Helen Gregory Chem File SCH09-119

NJPDES PERMIT	MONITORING PERIOD	MONITO	ORED LOCATION:
NJ0005622	Month Day Year 9 1 2009 To Month Day Year 9 30 2009	FACA – SW O	
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 REGION / COUNTY: Southern / Sale	REPORT REC PSEG NUCLEAR PO BOX 236/N21 HANCOCKS BRII	LLC
CHECK IF APPLICABLE	L	ng Report Comments Att	ched
responsibility or person designa	ated by that person shall also sign the second certification at the	bottom of this page. If th	e local agency has conhacted with
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PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

FACA SW Outfall FACA

9/1/2009 TO 9/30/2009

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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".

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80 PARK PLAZA		GENERATING STATION		PO BOX 236/N21		
NEWARK, NJ 07101		ALLOWAY CREEK NECK R	D	HANCOCKS BRIDG	GE, NJ 08038	
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PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

FACB SW Outfall FACB

9/1/2009 TO 9/30/2009

PSEG NUCLEAR LLC SALEM GENERATIN

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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

	N	IONITORING	G PERIOD		ľ	MONITO	RED LO	CATION:	
NJ0005622	Month Day 9 1	Year To	Month Day 9 30	Year 2009	FACC -	SW O	utfall F.	ACC	-
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30 PARK PLAZA		GENERATING			PO BOX	236/N21	i		
NEWARK, NJ 07101	•	ALLOWAY CR		•	HANCO	CKS BRID	GE, NJ 080	038	
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PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

FACC SW Outfall FACC

9/1/2009 TO 9/30/2009

PSEG NUCLEAR LLC SALEM GENERATIN

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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	2501	2727		. *****	*****	*****		0	1/Day	CHICTO
50050 G Raw Sew/influent	PERMIT. REQUIREMENT	3024 01MOAV	REPORT 01DAMX	MGD	The second secon	historia Service	*****	*****		1/Day	CALCTD
Thermal Discharge Million BTUs per Hr	QL SAMPLE MEASUREMENT	15043	15449		*****	*****	###### ###### *****	k	0	1/Day	CALCTO
00015 2 Effluent Net Value	PERMIT REQUIREMENT	REPORT 01MOAV	30600 01DAMX	MBTU/HR	*****	412441 223	******	******		1/Day	CALCTD
Lab Certification #	SAMPLE MEASUREMENT	17327	17481	,	PA 166		· · · · · · · · · · · · · · · · · · ·				• • • • • • • • • • • • • • • • • • • •
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab#	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab.#			Not Applic	NOT AP

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".

NJPDES PERMIT	MONI	TORING PERIOD		MONITO	DRED LO	CATION:
NJ0005622	Month Day Ye 9 1 200		Year 2009 04	8C – SW Ou	tfall 480	
ERMITTEE: SE&G NUCLEAR LLC) PARK PLAZA EWARK, NJ 07101	PSEG GENI ALLO	CATION OF ACTIVITY S NUCLEAR LLC SALEM ERATING STATION DWAY CREEK NECK RD COCKS BRIDGE, NJ 08038		REPORT REC PSEG NUCLEAR PO BOX 236/N21 HANCOCKS BRII	LLC	938
•	T	REGION / COUNTY: South	ern / Salem Cour	ntv		
CHECK IF APPLICABLE:		nis Monitoring Period		ring Report Comm	ents Attach	ed
HO MUST SIGN The high	est ranking official havin	ig day-to-day managerial and	l operational resp	onsibilities for the	discharging	facility shall sign
te certification or, in his absence certification. Where the high sponsibility or person designal nother entity to operate the treatestify under penalty of law that, based on my inquiry of tho complete. I am aware that there	te a person designated by thest ranking operator doe ted by that person shall a atment works, the highest at I have personally exanse individuals immediated are significant penaltics.	y that person. For a local age es not have the ability to authulso sign the second certificate tranking official of the continued and am familiar with the ly responsible for obtaining so for submitting false inform	ency, the highest norize capital exp tion at the bottom racted entity shall he information su the information, nation, including	ranking operator of enditures and hire properties are the possibility of a second properties and hire prop	the treatment on the treatment on the treatment and the treatment and the treatment on the treatment on the treatment on the treatment of treatment of the trea	nt works shall sign person having that cy has contracted with all attachments, and s true, accurate and
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Juliave Mater Disoriary mornioring report

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

048C SW Outfall 48C

9/1/2009 TO 9/30/2009

PSEG NUCLEAR LLC SALEM GENERATIN

_		SW Outlan 40	· ·	,, ., <u>.</u>	0 9/30/2009	i SEG NOCE	EAR LLC SAL	LIVI GEI	ICNA	HIP	_\$
PARAMETER	X	QUANTITY (OR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NO.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	0.2606	0.4135		****	*****	*****		0	1/Day	CUTCLO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	******	*******	******	******		1/Day	CALCTD
Solids, Total Suspended	SAMPLE MEASUREMENT	****	*****		*****	10	16		0	2/Month	Compos
00530 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	******	30 01MOAV	01DAMX	MG/L		2/Months	COMPOS
Nitrogen, Ammonia Total (as N)	SAMPLE MEASUREMENT	****	****		****	7	12		0	3/Month	compos
00610 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	bisett:	*****	AARTAA AARTAA	35 - 01MOAV	70 01DAMX	MG/L		2/Month	COMPOS
Petroleum Hydrocarbons	SAMPLE MEASUREMENT	*****	*****		*****	〈 5	45			2/Month	GRAB
00551 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	\$2556	10'	15 01DAMX	MG/L		2/Month	GRAB
Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	****	*****	· ·	****	4	5			2/month	COMPOS
00680 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	****** ******	******	*****	REPORT 01MOAV	50 01DAMX	MG/L		2/Month	COMPOS
Lab Certification #	SAMPLE MEASUREMENT	17327	72457		PA 166		<u> </u>	i ·			Section 1
99999 99 Lab	PERMIT. REQUIREMENT	REPORT Lab#	REPORT Lab #		REPORT Lab #	REPORT Lab#	REPORT Lab #			Not Applic	NOT AP
	QL	*****	*****		******	*****		<u> </u>			11 5

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".

• •	N	<u>IONITORIN</u>	G PERIOD		MONITO	RED LO	CATION:
NJ0005622	Month Day 9 1	Year 2009	o Month 9	Day Year 30 2009	481A – SW Ou	tfall 481	A
PERMITTEE:	ř	LOCATION	JOE ACTIV	/ITV·	REPORT REC	IDIENT.	,
PSE&G NUCLEAR LLC		PSEG NUCLEA			PSEG NUCLEAR		
80 PARK PLAZA	:	GENERATING			PO BOX 236/N21		
NEWARK, NJ 07101	**	ALLOWAY CH			HANCOCKS BRII	OGE, NJ 080	38
		HANCOCKS B	BRIDGE, NJ 08	038			'
	•			• • • • • • • • • • • • • • • • • • • •		:	
		REGION A	/ COUNTY: S	outhern / Salem	County	:	
CHECK IF APPLICABLE:	No Disaba	rao this Monitor	ing Pariod	Monitoring	Report Comments Atta	ched	
				,			
WHO MUST SIGN The higher	est ranking officia	l having day-to-	day manageria	l and operationa	responsibilities for the	discharging	facility shall sign
the certification or, in his absence	e a person design	ated by that pers	son. For a loca	l agency, the hig	thest ranking operator of	the treatmen	nt works shall sign
the certification. Where the high responsibility or person designat	nest ranking opera	tor does not hav	the ability to	autnorize capita	of this page. If the	ersonnei, a	person naving inat
another entity to operate the trea	tment works, the	highest-ranking	official of the	contracted entity	shall sign the certificati	on.	y nas contracted wi
						. 1	tr ,, t , t
I certify under penalty of law that	at I have personal	lv examined and	am familiar w	ith the intormat			
that hand an mu inquies of the	aa indiriduala ime	nadiataly rannon	aible for obtai	ning the informs	tion. I believe that the in	ument and a	It attachments, and
that, based on my inquiry of tho	se individuals imi	nediately respon	isible for obtai	ning the informa	ition, I believe that the ir	formation is	s true, accurate and
that, based on my inquiry of tho complete. I am aware that there	se individuals imr e are significant p	nediately responenalties for subr	nsible for obtai mitting false in	ning the information, inclu	ition, I believe that the it iding the possibility of a	formation is nd/or impris	s true, accurate and
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PERMIT NUMBER: MON

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

481A SW Outfall 481A

9/1/2009 TO 9/30/2009

PSEG NUCLEAR LLC SALEM GENERATIN

1430003022	401A	SW Outrail 48	IA :	9/1/2009 1	O 9/30/2009	PSEG NUC	LEAR LLC SAL	EM GEN	VERA	TIP	i 5 -
PARAMETER		QUANTITY	OR LOADING	UNITS	QUAL	TY OR CONCENT	RATION	UNITS	NO.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	451	519		*****	*****	*****		0	Your	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	ARRAN	******	*****		1/Day	CALCTD
рН	SAMPLE MEASUREMENT	****	*****		7.4	*****	7.7			Week	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	6.0 01DAMN	*****	9.0 01DAMX	su		1/Week	GRAB
рН	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.8		0	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	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	CODE N
TAN6A 1 Effluent Gross Value	PERMIT REQUIREMENT	******	*****	*****	50 01DAMN	errate.	*****	%EFFL		2/Year	COMPOS
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	****	****		****	CODE=N	CODE = N		0	CODE = N	CODE=N
*CPOX 1 Effluent Gross Value Option 1	PERMIT REQUIREMENT	******	******	*****	*****	0.3 01MOAV	0.5 01DAMX	MG/L		3/Week	GRAB
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	. ****		*****	۷٥.۱	₹0.1		0	3/Wed	GRAB
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	******	******	*****	######################################	REPORT 01MOAV	0:2 01DAMX	MG/L		3/Week	GRAB:
Option 2	QL				*****	*****			Jac.		e sia

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.

PERMIT NUMBER: MONITORED LOCATION: MONITORING PERIOD: FACILITY NAME: NJ0005622 481A SW Outfall 481A 9/1/2009 TO 9/30/2009 PSEG NUCLEAR LLC SALEM GENERATIN FREQ. OF SAMPLE PARAMETER QUANTITY OR LOADING UNITS QUALITY OR CONCENTRATION UNITS EX. ANALYSIS TYPE Temperature. SAMPLE MEASUREMENT 33.6 37.8 ***** 0 Day CONTEN οС 00010 1 REPORT REPORT 1/Day CONTIN PERMIT REQUIREMENT ***** DEG.C 01MOAV 01DAMX Effluent Gross Value ***** QL Lab Certification # SAMPLE MEASUREMENT 17327 17451 PA 166 PERMIT NOT AP REPORT REPORT REPORT REPORT REPORT 99999 99 **Not Applic** REQUIREMENT Lab# Lab# Lab# Lab# Lab# Lab ***** ***** ***** ***** ***** OL

1.

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.

NJPDES PERMIT	MC	DNITORING	PERIOD		MONITO	RED LO	CATION:
NJ0005622	Month Day 9 1	Year 2009 To		ear 009 482A	– SW Ou	fall 482	A
PERMITTEE: PSE&G NUCLEAR LLC 30 PARK PLAZA NEWARK, NJ 07101	P: G A	OCATION O SEG NUCLEAR ENERATING ST LLOWAY CREI IANCOCKS BRI	ΓΑΤΙΟΝ EK NECK RD	PSEC PO B	PORT REC G NUCLEAR I OX 236/N21 COCKS BRID	LC	38
		REGION / C	OUNTY: Southern / S	Salem County		<u>.</u>	
CHECK IF APPLICABLE	No Discharge	this Monitoring	(,	toring Report Co	ammonts Atta	bod	
	Tio Discharge	ting Monton	, 1 11104 1110111	toring report e		circu	
the certification. Where the hig responsibility or person designa- another entity to operate the tre	ated by that person sha	all also sign the s	second certification at	the bottom of th	is page. If the	local agen	
	ated by that person shat atment works, the hig nat I have personally e ose individuals immediate are are significant pena	all also sign the since the stream ined and am diately responsibulties for submitters.	second certification at icial of the contracted a familiar with the infole for obtaining the inting false information	the bottom of the entity shall sign ormation submitted formation, I belified, including the position of the po	is page. If the the certification this document in this document that the incossibility of an	local agen on. Iment and a formation ind/or impri	cy has contracted wall attachments, and strue, accurate and
cesponsibility or person designation ther entity to operate the tree certify under penalty of law that, based on my inquiry of the complete. I am aware that there o N.J.A.C. 7:14A-6.9(B). The	ated by that person shat atment works, the hig nat I have personally e ose individuals immediate are are significant pena	all also sign the sthest-ranking officexamined and amdiately responsibilities for submitted llution Control A	second certification at icial of the contracted a familiar with the infole for obtaining the inting false information	the bottom of the entity shall sign ormation submitted formation, I belified, including the position of the po	is page. If the the certification this document in this document that the incossibility of an	local agen on. Iment and a formation ind/or impri	cy has contracted wall attachments, and strue, accurate and sonment, pursuant
esponsibility or person designate the tree certify under penalty of law that, based on my inquiry of the complete. I am aware that the N.J.A.C. 7:14A-6.9(B). The Robert C. Braun,	ated by that person shat atment works, the hig nat I have personally enter individuals immediate are significant penal New Jersey water Posite Vice President - Site Vice Presid	all also sign the shest-ranking off examined and amdiately responsibulties for submitted llution Control A	second certification at icial of the contracted a familiar with the infole for obtaining the inting false information act provides for penal	the bottom of the entity shall sign ormation submitted formation, I belief, including the poties up to \$50,000	is page. If the the certification the certification ed in this document that the incossibility of an oper violation	local agenon. Imment and a formation ind/or impri	cy has contracted wall attachments, and strue, accurate and sonment, pursuant
esponsibility or person designate nother entity to operate the tree certify under penalty of law that, based on my inquiry of the omplete. I am aware that the N.J.A.C. 7:14A-6.9(B). The Robert C. Braun,	ated by that person shat atment works, the hig nat I have personally enter individuals immediate are significant penal New Jersey water Posite Vice President - Site Vice Presid	all also sign the shest-ranking off examined and amdiately responsibulties for submitted llution Control A	second certification at icial of the contracted a familiar with the infole for obtaining the inting false information act provides for penal	the bottom of the entity shall sign ormation submitted formation, I belief, including the poties up to \$50,000	is page. If the the certification of the certificat	local agenon. Iment and a formation ind/or impri	cy has contracted wall attachments, and strue, accurate and sonment, pursuant
esponsibility or person designare nother entity to operate the tree certify under penalty of law that, based on my inquiry of the complete. I am aware that there o N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL	atted by that person shatatment works, the highest I have personally expected individuals immediate are significant penal New Jersey water Possite Vice President - EXECUTIVE OFFICER,	all also sign the schest-ranking office examined and am diately responsibilities for submitted Ilution Control A Salem AUTHORIZED AG	second certification at icial of the contracted icial of the contracted in familiar with the infole for obtaining the inting false information. Act provides for penalment, OR *LICENSED OF	the bottom of the entity shall sign ormation submitte formation, I belify including the poties up to \$50,000.	is page. If the the certification define this document that the inconsibility of an Oper violation GRADE AND RE	local agenon. Imment and a formation i id/or impri N/A GISTRY NU	cy has contracted wall attachments, and strue, accurate and sonment, pursuant MBER (IF APPLICABL
certify under penalty of law the hat, based on my inquiry of the complete. I am aware that there o N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL EXECUTE For a local agency where the hig person designated by that person	atted by that person shatatment works, the highest later works, the hig	all also sign the schest-ranking office examined and am diately responsibilities for submitted llution Control A Salem AUTHORIZED AGENT, Coes not have the accertification:	second certification at icial of the contracted icial of the contracted in familiar with the infole for obtaining the intended in false information. Act provides for penalment, OR *LICENSED OPERATED OF *LICENSED OPERATED ICID (Contract of the contract of	the bottom of the entity shall sign ormation submitte formation, I belified including the potties up to \$50,000 PERATOR TOR DA all expenditures and	is page. If the the certification the certification ed in this document that the inconsibility of an Oper violation GRADE AND RE 10/20/2009 TE Thire personnel	local agenon. Imment and a formation i id/or impri N/A GISTRY NU 85 AREA CO	cy has contracted wall attachments, and strue, accurate and sonment, pursuant MBER (IF APPLICABL 66-339-1998 DDE/PHONE NUMBER
responsibility or person designation of the tree another entity to operate the tree 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	atted by that person shatatment works, the highest later works, the hig	all also sign the schest-ranking office examined and am diately responsibilities for submitted llution Control A Salem AUTHORIZED AGENT, Coes not have the accertification:	second certification at icial of the contracted icial of the contracted in familiar with the infole for obtaining the intended in false information. Act provides for penalment, OR *LICENSED OPERATED OF *LICENSED OPERATED ICID (Contract of the contract of	the bottom of the entity shall sign ormation submitte formation, I belified including the potties up to \$50,000 PERATOR TOR DA all expenditures and	is page. If the the certification the certification ed in this document that the inconsibility of an Oper violation GRADE AND RE 10/20/2009 TE Thire personnel	local agenon. Imment and a formation i id/or impri N/A GISTRY NU 85 AREA CO	cy has contracted wall attachments, and strue, accurate and sonment, pursuant MBER (IF APPLICABL 66-339-1998 DDE/PHONE NUMBER
certify under penalty of law the hat, based on my inquiry of the complete. I am aware that there o N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL EXECUTE For a local agency where the higher son designated by that person	atted by that person shatatment works, the highest later works, the hig	all also sign the sthest-ranking off thest-ranking off examined and amdiately responsibilities for submitted Ilution Control A Salem AUTHORIZED AGENT, Coes not have the accertification: S.A. 58:10A-6F(5)	second certification at icial of the contracted icial of the contracted in familiar with the infole for obtaining the intended in false information. Act provides for penalment, OR *LICENSED OPERATED OF *LICENSED OPERATED ICID (Contract of the contract of	the bottom of the entity shall sign ormation submitte formation, I belified including the potties up to \$50,000 PERATOR TOR DA all expenditures and	is page. If the the certification the certification ed in this document that the inconsibility of an Oper violation GRADE AND RE 10/20/2009 TE Thire personnel	local agenon. Imment and a formation i id/or impri N/A GISTRY NU 85 AREA CO	cy has contracted wall attachments, and strue, accurate and sonment, pursuant MBER (IF APPLICABL 66-339-1998 DDE/PHONE NUMBER

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PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

482A SW Outfall 482A

9/1/2009 TO 9/30/2009

PSEG NUCLEAR LLC SALEM GENERATIN

1430005622	402A	SW Outlan 40	E.A . 3.	/1/2003 1	O 9/30/2009	i ola itool	LEAN LLC SAL	FIVI GET	12117	, , , , , , , , , , , , , , , , , , ,	
PARAMETER	X	QUANTITY (OR LOADING	UNITS	QUALI	TY OR CONCENTE	IATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE . MEASUREMENT	421	474		*****	*****	*****		0	11 Day	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	******	******	******	*****		1/Day	CALCTD
рН	SAMPLE MEASUREMENT	****	****		7.5	· 表示表示表	7,7	100	0	1/week	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	******	*****	*****	6.0 - 01DAMN	******	9:0 01DAMX	SU		1/Week	GRAB)°
pH ·	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.8		0	Yweek	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	1. () () () () () () () () () (*****	1000	0	CODE: N	CODE = N
TAN6A 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	50 01DAMN	******	ganten Attens	%EFFL		2/Year	COMPOS
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****		*****	C006 = N	CODE= N		0	CODE = N	CODE = N
*CPOX 1 Effluent Gross Value Option 1	PERMIT REQUIREMENT	******	******	****	**************************************	0.3 01MOAV	0.5 01DAMX	MG/L	G.	3/Week	GRAB
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****		*****	₹0.1	₹0.1	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	J						 			

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.

Disonarge monitoring report PERMIT NUMBER: MONITORED LOCATION: FACILITY NAME: **MONITORING PERIOD:** NJ0005622 482A SW Outfall 482A PSEG NUCLEAR LLC SALEM GENERATIN 9/1/2009 TO 9/30/2009 NO. EX. SAMPLE FREQ. OF **PARAMETER** QUANTITY OR LOADING UNITS QUALITY OR CONCENTRATION UNITS **ANALYSIS** TYPE Temperature, SAMPLE MEASUREMENT 32.8 35.8 ***** ***** ***** 1004 NATHO 0 οС 00010 1 REPORT REPORT 1/Day CONTIN PERMIT REQUIREMENT ***** DEG.C 01MOAV 01DAMX Effluent Gross Value ***** ***** **** ***** QL Lab Certification # SAMPLE MEASUREMEN 17327 17481 PA 166 REPORT REPORT REPORT REPORT 99999 99 REPORT : **Not Applic** NOT AP PERMIT REQUIREMENT Lab# Lab# Lab# Lab# Lab# Lab ***** ***** ***** 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. .

	MONITORING PERIOD	MONITORED LOCATION:	
NJ0005622	Month Day Year 9 1 2009 To 9 30 2009 4	83A – SW Outfall 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 RECIPIENT: PSEG NUCLEAR LLC PO BOX 236/N21 HANCOCKS BRIDGE, NJ 08038	
	REGION / COUNTY: Southern / Salem Cou	unty	\$
CHECK IF APPLICABLES	No Discharge this Monitoring Period Monit	oring Report Comments Attached	•
	thest ranking operator does not have the ability to authorize capital exited by that person shall also sign the second certification at the botto		
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 ther	atment works, the highest-ranking official of the contracted entity shat I have personally examined and am familiar with the information as 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	submitted in this document and all attachments, a, I believe that the information is true, accurate g the possibility of and/or imprisonment, pursua	and and
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 ther to N.J.A.C. 7:14A-6.9(B). The	atment works, the highest-ranking official of the contracted entity sha at I have personally examined and am familiar with the information use individuals immediately responsible for obtaining the information the are significant penalties for submitting false information, including	submitted in this document and all attachments, a, I believe that the information is true, accurate g the possibility of and/or imprisonment, pursua	and and
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 ther to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun,	atment 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 to	submitted in this document and all attachments, a, I believe that the information is true, accurate g the possibility of and/or imprisonment, pursua \$50,000 per violation. N/A GRADE AND REGISTRY NUMBER (IF APPLICATION)	and and ant
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 ther to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL	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 Site Vice President - Salem	submitted in this document and all attachments, a, I believe that the information is true, accurate g the possibility of and/or imprisonment, pursua \$50,000 per violation. N/A	and and ant ABLE)
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 ther to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL SIGNATURE OF PRINCIPAL EXECT *For a local agency where the high person designated by that person se	atment works, the highest-ranking official of the contracted entity shat I have personally examined and am familiar with the information see individuals immediately responsible for obtaining the information re 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 UTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR hest-ranking operator does not have the ability to authorize capital expenditions the following certification:	submitted in this document and all attachments, a, I believe that the information is true, accurate g the possibility of and/or imprisonment, pursua \$50,000 per violation. N/A GRADE AND REGISTRY NUMBER (IF APPLICATION OF AREA CODE/PHONE NUMBERS and hire personnel, a person having that response	and and ant (ABLE)
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 ther to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL SIGNATURE OF PRINCIPAL EXECT *For a local agency where the high person designated by that person se	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 Site Vice President - Salem EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR UTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR Diest-ranking operator does not have the ability to authorize capital expendituations.	submitted in this document and all attachments, a, I believe that the information is true, accurate g the possibility of and/or imprisonment, pursua \$50,000 per violation. N/A GRADE AND REGISTRY NUMBER (IF APPLICATION OF AREA CODE/PHONE NUMBERS and hire personnel, a person having that response	and and ant (ABLE)

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PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

483A SW Outfall 483A

9/1/2009 TO 9/30/2009

PSEG NUCLEAR LLC SALEM GENERATIN

		OW Outlan 40	_		0 3/30/2003		LEAR LLC SAL		·-· ·	. 1 11	\$v 1
PARAMETER	X	QUANTITY	OR LOADING	UNITS	QUAL	TY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	444	471		*****	*****	*****		0	1/0ay	CHLOID
50050 1 Effluent Gross Value	PERMIT REQUIREMENTS	REPORT 01MOAV	REPORT: 01DAMX	MGD	*****	*****	******	*****		1/Day	CALCTD
рН	SAMPLE MEASUREMENT	*****	*****		7.5	*****	7.7		0	1/week	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	Anna.	Arriva Arriva	*****	6.0 01DAMN	******	9:0 01DAMX	su		1/Week	GRAB
рН	SAMPLE MEASUREMENT	*****	****		7.6	*****	7.8		0	Meek	GRAG
00400 7 Intake From Stream	PERMIT: REQUIREMENT:	Attain.	*****	*****	REPORT 01DAMN	******	REPORT 01DAMX	su		1/Week	GRAB.
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****		*****	CODE = N	CODE=N	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0	CODE = 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	SAMPLE MEASUREMENT	*****	*****		*****	40.1	< 0.1			3/week	GRAB
Oxidants *CPOX 1 Effluent Gross Value Option 2	PERMIT REQUIREMENT	******	25****	*****	Annana .	REPORT 01MOAV	0.2 01DAMX	MG/L		3/Week	GRAB
Temperature,	SAMPLE MEASUREMENT	*****	*****		*****	32.9	35.6	The state of the s	0	Voay	CONTIN
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	******	*****	*****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.C		1/Day	CONTIN
	QL	******	*****	L	*****	*****	*****	. !			(1) E

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.

PERMIT NUMBER: **MONITORED LOCATION: MONITORING PERIOD:** FACILITY NAME: 483A SW Outfall 483A NJ0005622 9/1/2009 TO 9/30/2009 PSEG NUCLEAR LLC SALEM GENERATIN NO. EX. SAMPLE FREQ. OF **PARAMETER** QUANTITY OR LOADING UNITS UNITS QUALITY OR CONCENTRATION **ANALYSIS** TYPE Lab Certification # SAMPLE MEASUREMENT 17451 17327 PA 166 PERMIT REQUIREMENT. REPORT 99999 99 REPORT REPORT REPORT REPORT **Not Applic** NOT AP Lab# Lab# Lab# Lab # Lab # Lab ***** ***** ***** ***** ***** 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. Pre-Print Creation Date: 7/1/2009 Page 2 of 2

NJPDES PERMIT		MONITO	RING	PERIO	D			MONIT	ORE	D LO	CATION:	
NJ0005622	Month 1	Day Year 1 2009	То	Month 9	Day 30	Year 2009	484A	- SW O	utfall	1 484	A	
PERMITTEE:				OF ACT				ORT RE		NT:	-	
PSE&G NUCLEAR LLC 80 PARK PLAZA		PSEG NU GENERA		R LLC SA	LEM			NUCLEAR OX 236/N21				
NEWARK, NJ 07101				EEK NECK	K RD			COCKS BR		NJ 080)38	
		HANCO	CKS BR	IDGE, NJ	08038						-	
	*	•		·				,				
•		REC	ION / C	COUNTY	: Souther	n / Salem	County					,
CHECK IF APPLICABLE:	: No Dis	scharge this M	onitorin	g Period	\square N	Ionitoring	g Report C	omments At	tached	:		
the certification or, in his absen the certification. Where the hig responsibility or person designa	thest ranking o	signated by the perator does no rson shall also	nt person ot have sign the	the ability second co	ocal agen to autho ertification	rize capita on at the b	al expendita ottom of th	ires and hire is page. If t	persor he loca	mel, a	person having the	nat
the certification. Where the hig responsibility or person designa 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 the	thest ranking of the by that per atment works, that I have personed individuals the are signification	signated by the operator does not reson shall also the highest-ran conally examined immediately in the penalties fo	at person of have sign the aking of ad and a responsi r submi	n. For a lotthe ability second conficial of the m familianuble for obtting false	ocal agen to autho ertification he contra- r with the taining the informa	rize capita on at the b cted entity information tion, inclu	al expendituent of the value of the period of th	ares and hire is page. If the the certificated in this do eve that the possibility of	person he loca tion. cumen informa and/or	mel, a l agen t and a ation i	person having the cy has contracted all attachments, as true, accurate a	hat d with and and
the certification. Where the hig responsibility or person designary another entity to operate the tre I certify under penalty of law that, based on my inquiry of the complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The	thest ranking of the by that per atment works, at I have perso ose individuals re are significa New Jersey w	signated by the perator does not shall also the highest-ran conally examines immediately interpenalties for ater Pollution	at person of have sign the aking of ad and a responsi r submi	n. For a lotthe ability second conficial of the m familianuble for obtting false	ocal agen to autho ertification he contra- r with the taining the informa	rize capita on at the b cted entity information tion, inclu	al expendituent of the value of the period of th	ares and hire is page. If the the certificated in this do eve that the possibility of	person he loca tion. cumen informa and/or	mel, a l agen t and a ation i	person having the cy has contracted all attachments, as true, accurate a sonment, pursua	hat d with and and
the certification. Where the highest person designary another entity to operate the treat certify under penalty of law that, based on my inquiry of the complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun,	thest ranking of the depth of t	signated by the operator does not shall also the highest-randonally examined immediately in the penalties for ater Pollution ident - Salem	at person to thave sign the aking of ad and a responsi r submi Control	n. For a lotthe ability second conficial of the m familianuble for obtting false Act provi	ocal agen to autho ertification he contra- r with the taining the informa des for po	rize capita on at the b cted entity e informati ne informa- tion, inclu- enalties up	al expendituottom of the shall sign ion submittation, I belinding the period to \$50,000	ares and hire is page. If the certificated in this do eve that the cossibility of the per violation	person he loca tion. cumen informa and/or on.	nel, a l agen t and a ation i impri	person having the cy has contracted all attachments, as true, accurate a sonment, pursua	nat d with and and
the certification. Where the highesponsibility or person designation another entity to operate the treat certify under penalty of law the hat, based on my inquiry of the complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun,	thest ranking of the depth of t	signated by the operator does not shall also the highest-randonally examined immediately in the penalties for ater Pollution ident - Salem	at person to thave sign the aking of ad and a responsi r submi Control	n. For a lotthe ability second conficial of the m familianuble for obtting false Act provi	ocal agen to autho ertification he contra- r with the taining the informa des for po	rize capita on at the b cted entity e informati ne informa- tion, inclu- enalties up	al expendituottom of the shall sign ion submittation, I belinding the period to \$50,000	ares and hire is page. If the certificated in this do eve that the cossibility of the per violation	person he loca tion. cumen informa and/or on.	nel, a l agen t and a ation i impri N/A RY NU	person having the person having the cy has contracted attachments, as true, accurate a sonment, pursua	nat d with and and
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 ther to N.J.A.C. 7:14A-6.9(B). The	thest ranking of the by that per atment works, not I have persone individuals are are significated New Jersey where the Vice Present EXECUTIVE OF	signated by the operator does not shall also the highest-ran conally examine simmediately int penalties for ater Pollution dident - Salem	at person to thave sign the sign the aking of ad and a responsi r submi Control	n. For a lotthe ability is second or ficial of the for obtting false Act provi	ocal agen to autho ertification he contra- r with the taining the informa- des for po- *LICENSE	rize capita on at the b cted entity e informati ne informa- tion, inclu- enalties up	al expendituottom of the shall sign ion submittation, I belinding the period to \$50,000	ares and hire is page. If the certifical ed in this do eve that the ossibility of D per violation GRADE AND I	person he loca tion. cumen informa and/or on.	t and a ation i impri	person having the cy has contracted attachments, as true, accurate a sonment, pursua	nat d with and and nt
the certification. Where the highest person designaries another entity to operate the treat certify under penalty of law that, based on my inquiry of the complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL	thest ranking of the by that per atment works, at I have personate individuals are are significantly with the best-ranking op the best-ranking op the best-ranking op the best-ranking op the steed by the best-ranking op the bes	signated by the operator does not shall also the highest-ran conally examine simmediately not penalties for ater Pollution dident - Salem FICER, AUTHORIZED erator does not person to the signature of the salem of t	at person of have sign the sign the sign the sign the sign the sign the sign that are sponsion of the sign that sign sign tha	n. For a lotthe ability a second conficial of the manilian ible for obtting false Act proving GENT, OR	coal agen to autho ertification he contra- r with the taining the information for po- *LICENSE	rize capita on at the b octed entity e informati ne informa tion, incluenalties up	al expendituottom of the shall sign ion submitted ition, I believed to \$50,000.	ares and hire is page. If the certifical ed in this do eve that the ossibility of per violation GRADE AND In 10/20/200	person he loca tion. cumen informa and/or cn.	t and a ation i impri	person having the cy has contracted attachments, as true, accurate a sonment, pursua MBER (IF APPLICATE) 56-339-1998 DDE/PHONE NUMI	nat d with and and nt ABLE)
the certification. Where the hig responsibility or person designar another entity to operate the treat I certify under penalty of law that, based on my inquiry of the complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL SIGNATURE OF PRINCIPAL EXECT *For a local agency where the hig person designated by that person in the section of the sec	thest ranking of the by that per atment works, at I have personate individuals re are significated New Jersey was the Vice Presented EXECUTIVE OF UTIVE OFFICE thest-ranking opshall sign the formatted by the sign the sign the formatted by the sign the sign the formatted by the sign that the sign	signated by the perator does not shall also the highest-ran conally examine simmediately not penalties for ater Pollution dident - Salem FICER, AUTHORIZED erator does not allowing certifical	at person of have sign the sign that sign that sign the sign that sign the sign that sign the sign that sign	n. For a lotthe ability is second of ficial of the final field for obting false Act provides Act	coal agen to authorize of	rize capita on at the b octed entity e informati ne informati tion, incluenalties up CD OPERAT	al expendituottom of the shall sign ion submitted ition, I beliation, I beliating the poor to \$50,000.	ares and hire is page. If the certifical ed in this does that the ossibility of the per violation of the certifical ed in this does that the ossibility of the per violation of the certification of t	person he loca tion. cumen informa and/or on. REGIST	t and a ation i impri N/A RY NU 8 REA Co	person having the cy has contracted attachments, as true, accurate a sonment, pursua MBER (IF APPLICATE) 56-339-1998 DDE/PHONE NUMI	nat d with and and nt ABLE)
the certification. Where the hig responsibility or person designs another entity to operate the tre I certify under penalty of law that, based on my inquiry of the complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The Robert C. Braun, NAME AND TITLE OF PRINCIPAL SIGNATURE OF PRINCIPAL EXECT *For a local agency where the hig	thest ranking of the by that per atment works, at I have personate individuals re are significated New Jersey was the Vice Presented EXECUTIVE OF UTIVE OFFICE thest-ranking opshall sign the formatted by the sign the sign the formatted by the sign the sign the formatted by the sign that the sign	signated by the perator does not shall also the highest-ran conally examine simmediately not penalties for ater Pollution dident - Salem FICER, AUTHORIZED erator does not allowing certifical	at person of have sign the sign that sign that sign the sign that sign the sign that sign the sign that sign	n. For a lotthe ability is second of ficial of the final field for obting false Act provides Act	coal agen to authorize of	rize capita on at the b octed entity e informati ne informati tion, incluenalties up CD OPERAT	al expendituottom of the shall sign ion submitted ition, I beliation, I beliating the poor to \$50,000.	ares and hire is page. If the certifical ed in this does that the ossibility of the per violation of the certifical ed in this does that the ossibility of the per violation of the certification of t	person he loca tion. cumen informa and/or on. REGIST	t and a ation i impri N/A RY NU 8 REA Co	person having the cy has contracted attachments, as true, accurate a sonment, pursua MBER (IF APPLICATE) 56-339-1998 DDE/PHONE NUMI	nat d with and and nt ABLE)

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

484A SW Outfall 484A

9/1/2009 TO 9/30/2009

PSEG NUCLEAR LLC SALEM GENERATIN

NJ0005622	484A	SW Outfall 48	4 A	9/1/2009	TO 9/30/2009	PSEG NUC	LEAR LLC SAL	EM GEN	IERĀ	TIN	4 - 4 - 5 - 1
PARAMETER	\times	QUANTITY	OR LOADING	UNITS	QUAL	TY OR CONCENTI	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	454	506		****	*****	*****		0	11 Day	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	PARTIE ATTAC	******		1/Day	CALCTD
рH	SAMPLE MEASUREMENT	****			7.6	*****	7.7		0	Yweek	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	******	6:0 01DAMN	******	9.0 01DAMX	su	E .	1/Week	GRAB
рН	SAMPLE MEASUREMENT	****	*****		7.6	*****	7.8		0	\ 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	*****	*****	and the state of t	0	CODE = N	CODE: N
TAN6A 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	attant Terret	*****	50 01DAMN	*****	seekes keekes	%EFFL		2/Year	COMPOS
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	****	*****		******	CODE=N	CODE = N	- 10 th	0	COOE=N	C005 = N
*CPOX 1 Effluent Gross Value Option 1	PERMIT REQUIREMENT	*****	******	******	###### ######	0.3 01MOAV	0.5 01DAMX	MG/L		3/Week	GRAB
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****		*****	₹011	(01)		0	3/week	GRAB
*CPOX 1 Effluent Gross Value	PERMIT. REQUIREMENT.	******	******	******	SAATPA AMATTA	REPORT 01MOAV	0.2 01DAMX	MG/L		3/Week	GRAB
Option 2	QL	有 其或者	*****		FFRERE	*****		<u> </u>	18.81		100

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

1470014 ,

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

484A SW Outfall 484A

9/1/2009 TO 9/30/2009

PSEG NUCLEAR LLC SALEM GENERATIN

Temperature, oC 00010 1 Effluent Gross Value		*****	*****		T			. [1 5 1	1 1 1	1	TYPE
Effluent Gross Value	300000000		*****		*****	33.1	37.4		0	1004	CONTIN
	MENT	******	******	*****	******	REPORT 01MOAV	REPORT 01DAMX	DEG.C		1/Day	CONTIN
Lab Certification # SAMI MEASUR	LΕ	17327	17451		PA 166	eserie	32.8	30			1 to
99999 99 PERI REGUIRI	MENT	REPORT:	REPORT Lab#		REPORT Lab #	REPORT:	REPORT Lab #			Not Applic	NOT AP

Comments:	The permittee i	s required to	perform acute	toxicity tes	sting on a	minimun	n of one	representative	CWS outfal	II while DSN 48	C is being rol	ited to th	at outfal	II.
			201 · · · · · · · · · · · · · · · · · · ·		·	T						: ;	- 1	

NJPDES PERMIT							i L	1
11JI DESTERMIT	N	MONITORING	PERIOD			MONIT	ORED LO	CATION:
NJ0005622	Month Day 9 1	Year 2009 To		Day Year 30 2009	485A -	- SW Oı	tfall 48	5A
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101		LOCATION (PSEG NUCLEAR GENERATING S ALLOWAY CRE HANCOCKS BRI	LLC SALEN TATION EK NECK RE	<u>М</u>	PSEG PO B	NUCLEAR OX 236/N21		
		REGION / C	OUNTY: Soi	ıthern / Salem	County			•
CHECK IF APPLICABLE:	No Discha	rge this Monitoring		-	·	mments Att	ached	
responsibility or person designal another entity to operate the treat I certify under penalty of law that that, based on my inquiry of the complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The law to the complete is the complete of the complete o	at I have personal see individuals impersonal see are significant p	highest-ranking off ly examined and an nediately responsil enalties for submit	ficial of the co n familiar wit ole for obtaini ting false info	ontracted entity th the informati ng the informa ormation, inclu	shall sign to ion submittention, I belied ding the po	the certificated in this do eve that the issibility of	cument and nformation and/or impr	all attachments, and is true, accurate and
Robert C. Braun, S	Site Vice Presiden	<u>t -</u> Salem						-
NAME AND TITLE OF PRINCIPAL E	EXECUTIVE OFFICE					<u> </u>	N/A	X
2-		ER, AUTHORIZED AG	SENT, OR *LIC	ENSED OPERAT	OR G		EGISTRY NU	MBER (IF APPLICABLE)
Ve	ITIVE OFFICER, AU				OR G	10/20/200	egistry nu	[
SIGNATURE OF PRINCIPAL EXECU	nest-ranking operato	THORIZED AGENT,	OR *LICENSEI	O OPERATOR	DAT	<u>10/20/200</u> E	EGISTRY NU 9 8 AREA C	MBER (IF APPLICABLE) 56-339-1998 ODE/PHONE NUMBER
*For a local agency where the high person designated by that person s	nest-ranking operato hall sign the followi	THORIZED AGENT, or does not have the aing certification:	OR *LICENSEI	O OPERATOR	DAT nditures and	10/20/200 E hire personn	9 8 AREA C	MBER (IF APPLICABLE) 56-339-1998 ODE/PHONE NUMBER
SIGNATURE OF PRINCIPAL EXECU	nest-ranking operato hall sign the followi	THORIZED AGENT, or does not have the aing certification:	OR *LICENSEI	O OPERATOR	DAT nditures and	10/20/200 E hire personn	9 8 AREA C	MBER (IF APPLICABLE) 56-339-1998 ODE/PHONE NUMBER

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

485A SW Outfall 485A

9/1/2009 TO 9/30/2009

PSEG NUCLEAR LLC SALEM GENERATIN

1430003022	400A	SW Outlan 46	5A 9	/1/2009 1	0 9/30/2009	PSEG NUCI	EAR LLC SAL	EW GEN	IEHA	111	$\{0, 3, \dots\}$
PARAMETER		QUANTITY (OR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NÓ. EX.	FREQ. OF ANALYSIS	SAMPLÉ TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	404	448		****	*****	*****		0	YDay	CHLCTD
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	******	*****	*****		1/Day	CALCTD
pH	SAMPLE MEASUREMENT	*****	****		7.5	****	7.6		O	Yweek	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	******	*****	*****	6.0 01DAMN	ANNAL IN	9.0 01DAMX	su		1/Week	GRAB
pH	SAMPLE MEASUREMENT	*****	*****		7.6	****	7.8		0	Yweek	GRAB
00400 7 Intake From Stream	PERMIT REQUIREMENT	andre de la contraction de la	254222 24422	****	REPORT 01DAMN	Activity Parket	REPORT 01DAMX	SU		1/Week	GRAB
LC50 Statre 96hr Acu	SAMPLE MEASUREMENT	*****	****		> 100	****	*****		0	2/Year	compos
TAN6A 1 Effluent Gross Value	PERMIT REQUIREMENT	ARTAR	*****	****	50 01DAMN	*****	AAAAAA AAAAAA	%EFFL		2/Year	COMPOS
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****		*****	CODE=N	CODE=M		0	C00E = N	CODE = N
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	ANTEN	. tthatt	*****	*****	0.3 01MOAV	0:5a 01DAMX	MG/L		3/Week	GRAB
Option 1 Chlorine Produced	SAMPLE MEASUREMENT	*****	*****		*****	40.1	₹0:1	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	9	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.

Juliace Water Discharge Monitoring report

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

485A SW Outfall 485A

9/1/2009 TO 9/30/2009

PSEG NUCLEAR LLC SALEM GENERATIN

			<u> </u>					'. la.	!		
PARAMETER		QUANTITY (OR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NO.	FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature, oC	SAMPLE MEASUREMENT	*****	*****		*****	32.5	38.1		0	1/0ay	CONTIN
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	42244	******	*****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.C		1/Day	CONTIN
	QL	*****	*****		*****	*****	*****		31		
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PA 166						er de la companya de
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab#	REPORT Lab#		REPORT Lab #	REPORT Lab#	REPORT Lab#	The same is a		Not Applic	NOT AP
	. QL	*****	****		*****	*****	*****		7 (

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.

NJPDES PERMIT	MONITORING PERIOD	MONITO	ORED LOCATION:
NJ0005622	Month Day Year 9 1 2009 To Month Day Year 9 30 2009	486A – SW Ou	tfall 486A
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 REC PSEG NUCLEAR PO BOX 236/N21 HANCOCKS BRID	LLC
	REGION / COUNTY: Southern / Salem	County	
CHECK IF APPLICABLE:	No Discharge this Monitoring Period Monitoring	Report Comments Atta	ched
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 highest ranking operator does not have the ability to authorize capitated by that person shall also sign the second certification at the batter 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, including Mew Jersey water Pollution Control Act provides for penalties up	al expenditures and hire pottom of this page. If the shall sign the certification submitted in this doction, I believe that the inding the possibility of a	personnel, a person having that to local agency has contracted with on. The local agency has contracted with one of the local agency has contracted with one of the local agency has been 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 I	EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERAT	OR GRADE AND RE 10/20/2009	GISTRY NUMBER (IF APPLICABLE) 856-339-1998
SIGNATURE OF PRINCIPAL EXECU	UTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	DATE	AREA CODE/PHONE NUMBER
*For a local agency where the high person designated by that person s	nest-ranking operator does not have the ability to authorize capital expenhall sign the following certification:	nditures and hire personne	, a person having that responsibility or
I certify under penalty of law and in	n accordance with N.J.S.A. 58:10A-6F(5) that I have reviewed the attack	ned discharge monitoring re	ports.
<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

Dallade Hater Biodilarge mornioring hoport

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

486A SW Outfall 486A

9/1/2009 TO 9/30/2009

PSEG NUCLEAR LLC SALEM GENERATIN

		OW Outlan 40			0 9/30/2009	1 024 11001	LEAR LLC SAL	EW GEN		(111)	<u> </u>
PARAMETER		QUANTITY	OR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NÖ. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	430	434		*****	*****	*****		0	11004	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	*****		1/Day	CALCTD
рН	SAMPLE MEASUREMENT	*****	*****		7,5	*****	7.6		0	Yweek	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	Alexandra (grant.	*****	6.0 01DAMN	ing and the	9.0 01DAMX	SU		1/Week	GRAB
pH · ··································	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.8		d	1/week	GRAB
00400 7 Intake From Stream	PERMIT'S REQUIREMENT	estras Secreta	*****	*****	REPORT 01DAMN: ;	******	REPORT 01DAMX	ຣບ		1/Week	GRAB
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****		2001,7308;	CODE=N	CODE=N	Editors or de	0	CODE : N	CODE = N
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	Attitus (1996)	*****		*****	0.3 01MOAV	0.5 01DAMX	MG/L		3/Week	GRAB
Option 1 Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****		*****	₹ O.1	₹0'./		0	3/week	GRAB
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	in the second	C CONTRACT	*****	******	REPORT 01MOAV	0.2 01DAMX	MG/L	7	3/Week	GRAB
Option 2 Temperature,	QL SAMPLE	*****	*****		*****	******	**************************************			1/2	1 1
oC 00010 1	PERMIT: REQUIREMENT	*****	Treat.	*****	*****	31.8 REPORT	34.8 REPORT	DEG.C	Ø	1/Day	CONTIN
Effluent Gross Value	QL	******	*****		Address	arrana arrana	TO ATTACK OF THE			400	

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.

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.

NJPDES PERMIT	MONITORING PERIOD MONITORED LOCATION:
NJ0005622	Month Day Year To Month Day Year 487B - SW Outfall 487B
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 APPLICABLE	
another entity to operate the tr	ted by that person shall also sign the second certification at the bottom of this page. If the local agency has contracted with atment works, the highest-ranking official of the contracted entity shall sign the certification.
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Surface Water Discharge Monitoring Report Submittal Form

NJPDES PERMIT		MONITORING P		MONITORED LOCATION:				
NJ0005622	Month Day 9 1	Year 70 To	Month Day Year 9 30 2009		SW Ou	tfall 48	39A	
PERMITTEE:		LOCATION O	F ACTIVITY:	DEDO	RT REC	IDIENT		1 _e
PSE&G NUCLEAR LLC		PSEG NUCLEAR I			UCLEAR		-	
80 PARK PLAZA		GENERATING ST.			236/N21	DDC i	:	
NEWARK, NJ 07101	•	ALLOWAY CREE HANCOCKS BRID		HANCO	CKS BRI	OGE, NJ 0	8038	
	·		•	4 4 ³ 4 ,		f I		
		REGION / CO	OUNTY: Southern / Sale	em County	p .			
CHECK IF APPLICABLE:	No Discha	rge this Monitoring	Period Monit	oring Report Co	mments A	ttached		·
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es demand Nove

Surface water Discharge Monitoring neport

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

489A SW Outfall 489A

9/1/2009 TO 9/30/2009

PSEG NUCLEAR LLC SALEM GENERATIN

							LAITLEY OAL	T'''			1. 数集 十
PARAMETER		QUANTITY	OR LOADING	UNITS	. QUALI	TY OR CONCENTR	ATION	UNITS	NÓ. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	0.0360	0.0360	-	*****	*****	*****		0	Month	CAKTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	eritor kerita	*****	Teatre	*****		1/Month	CALCTD
pH	SAMPLE MEASUREMENT	****	****		7.5	****	7.5		0	Ymonth	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	******	6.0 01 DAMN	******	9.0 01DAMX	ຮບ		1/Month	GRAB
Solids, Total Suspended	SAMPLE MEASUREMENT	*****	*****		7	7	****		0	1/Month	GRAB
00530 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	100 01DAMX	30 01MOAV	*****	MG/L		1/Month	GRAB
Petroleum Hydrocarbons	SAMPLE MEASUREMENT	*****	****		11 C.	15	45		0	Ymonth	GRAB!
00551 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	*****	10 01MOAV	15 01DAMX	MG/L		1/Month	GRAB
Carbon, Tot Organic	SAMPLE MEASUREMENT	*****	*****		*****	8	8		0	Monne	GRAB
00680 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	******	REPORT 01MOAV	50 01DAMX	MG/L		1/Month	GRAB
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PAIGG	· · · · · · · · · · · · · · · · · · ·		- 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab#	REPORT Lab #		REPORT Lab#	REPORT Lab#	REPORT Lab#			Not Applic	NOT AP
	QL	*****	*****		*****	*****	****** ******	<u> </u>			Tablesanty 1991

Comments: If there are any questions in regards to the monitoring report form, please contact Susan Rosenwinkel of the the BPSP - Region 2 at (609)292-4860 or via email at "srosenwi@dep.state.nj.us"