PSEG Nuclear LLC P.O. Box 236, Hancocks Bridge, NJ 08038-0236

JAN 2 5 2010

HCH-2010-011



CERTIFIED MAIL RETURN RECEIPT REQUESTED ARTICLE NUMBER: 7006 0100 0004 0657 5005

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

NEW JERSEY POLLUTANT DISCHARGE ELIMINATION SYSTEM DISCHARGE MONITORING REPORT HOPE CREEK GENERATING STATION NJPDES PERMIT NJ0025411

Dear Sir:

Attached is the Discharge Monitoring Report for the Hope Creek Generating Station for the month of December 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 Christopher. White at (856) 339-3301.

Sincerely,

John F. Perry Site Vice President – Hope Creek

JAN 25 2010

HCH-2010-011 NJPDES DMR

Attachments

C Executive Director, DRBC USNRC - Docket number 50-354

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HCH-2010-011 NJPDES DMR

EXPLANATION OF CONDITIONS

December 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.

JAN 2 5 2010

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 Monitoring Report Form Reference Manual and specific guidance from DEP personnel.

HCH-2010-011 NJPDES DMR

EXPLANATION OF EXCEEDANCES

December 2009

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

DSN No.

EXPLANATION

No Exceedances

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JAN 2 5 2010

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HCH-2010-011 NJPDES DMR

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2.

3.

COUNTY OF SALEM STATE OF NEW JERSEY

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

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I am the Site Vice President-Hope Creek for PSEG Nuclear, and as such am authorized to sign Hope Creek's Discharge Monitoring Reports submitted to the New Jersey Department of Environmental Protection pursuant to the Station's New Jersey Pollutant Discharge Elimination System permit.

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.

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.

John F. Perry Site Vice President – Hope Creek

Sworn and subscribed before me this 25^{+/h} day of January 2010.

DELORIS D. HADDEN Notary Public of New Jersey My Commission Expires 03/29/2010 ID # 2073649

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

NJPDES PERMIT	MONITORING PERIOD	MONITORED LOCATION:
NJ0025411	Month Day Year Month Day Year 12 1 2009 To 12 31 2009	161A - DSN 461A - dsw
PERMITTEE: PSE&G NUCLEAR LLC PO BOX 236-N21 - ALLOWA RD HANCOCKS BRIDGE, NJ 08	FOOT OF BUTTONWOOD RD	REPORT RECIPIENT: PSE&G THFANT BABAR (MRYAN) MAMGUA P.O. BOX 2367 H15 HANCOCKS BRIDGE, NJ 08038
	REGION / COUNTY: Southern / Salem County	
CHECK IF APPLICABLE:	No Discharge this Monitoring Period Monitoring I	Report Comments Attached
the certification or, in his absence the certification. Where the higher reponsibility or person designated another entity to operate the treat I certify under penalty of law that that, based on my inquiry of those complete. I am aware that there	t ranking official having day-to-day managerial and operational respo e a person designated by that person. For a local agency, the highest re- est ranking operator does not have the ability to authorize capital expe- d by that person shall also sign the second certification at the bottom of ment works, the highest-ranking official of the contracted entity shall at I have personally examined and am familiar with the information as se individuals immediately responsible for obtaining the information are significant penalties for submitting false information, including t lew Jersey Water Pollution Control Act provides for penalties up to \$	inking operator of the treatment works shall sign nditures and hire personnel, a person having that if this page. If the local agency has contracted with sign the certification. submitted in this document and all attachments, and , I believe that the information is true, accurate and he possibility of fine and/or imprisonment, pursuant
John F. Perry, Site	Vice President – Hope Creek	N/A
NAME AND TITLE OF PRINCIPAL I	EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	R GRADE AND REGISTRY NUMBER (IF APPLICABLE)
SIGNATURE OF PRINCIPAL EXEC	UTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	DATE AREA CODE/PHONE NUMBER
person designated by that person sha	· 경험에 가장	
	accordance with N.J.S.A. 58:10A-6F(5) that I have received and reviewed the	attached discharge monitoring reports.
<u> </u>	N/A	N/AN/A
NAME AND TITLE	SIGNATURE	AREA CODE/PHONE NUMBER

Surface Water Discharge Monitoring Report

PERMIT NUMBER: NJ0025411	<u>MONI</u> 461A	- <u></u>			ING PERIOD: TO 12/31/2009	FACILITY N HOPE CRE	EK GENERATI				
PARAMETER	QUANTITY OR LOADING			UNITS	QUALI	QUALITY OR CONCENTRATION			NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
low, in Conduit or hru Treatment Plant	SAMPLE MEASUREMENT	37.611	41,319		****	*****	*****	 And Annual (1997) Annual Annual (1997) Annual Annual (1997) Annual (1997)<th>0</th><th>Contrinuous</th><th>METER</th>	0	Contrinuous	METER
0050 1 ffluent Gross Value		REPORT 01MOAV	REPORT 01DAMX	MGD	******	++++++ ++++++	******	******		Continuous	METER
l <mark>ow, In Conduit</mark> or hru Treatment Plant	SAMPLE MEASUREMENT	52.798	53,778		*****	1973 - 1979 - ******	*****		0	Continuous	METER
0050 7 Itake From Stream	PERMIT. REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	******	******	******	******		Continuous	METER
H	SAMPLE MEASUREMENT	*****	*****		8.6	*****	8,7		0	I/WEEK	GRAB
0400 1 ffluent Gross Value	PERMIT REQUIREMENT	******	****** ******	******	6:0 01DAMN	.+++++++ 	9.0 01DAMX	SU		1/Week	GRAB
hlorine Produced xidants	SAMPLE	**************************************	*****		*****	20,1	20.1		0	CONTINUOUS	GRAB
CPOX 1 Ifluent Gross Value	PERMIT REQUIREMENT	*****		******	******	0.2 01MOAV 0.1	0.5 01DAMX 0.1	MG/L		Continuous	GRAB
emperature, C	SAMPLE MEASUREMENT	*****	*****		****	20.9	28,3		0	CONSTINUOUS	METER
0010 1 ffluent Gross Value		******	******	*****	*****	REPORT 01MOAV	36.2 01DAMX	DEG.C	18.6	Continuous	METER
emperature, C	SAMPLE MEASUREMENT	*****	*****			7.4	12,2		0	Contrictuous	METER
010 7 ake From Stream	PERMIT	*****	*****	*****		REPORT 01MOAV	REPORT 01DAMX	DEG.C		Continuous	METER

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

PERMIT NUMBER: NJ0025411		MONITORED LOCATION: 461A DSN 461A - dsw			ING PERIOD: TO 12/31/2009	FACILITY NAME: HOPE CREEK GENERATING STATION							
PARAMETER	\sum	QUANTITY	OR LOADING	UNITS	QUALI	TY OR CONCENT	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE		
Carbon, Tot Organic TOC)	SAMPLE MEASUREMENT	*****	****		*****	5,9	5,9		0	1/MONTH	GPAB		
0680 1 ffluent Gross Value			*******	******	******	REPORT 01MOAV	REPORT 01DAMX	MG/L		1/Mönth	GRAB		
carbon, Tot Organic	SAMPLE MEASUREMENT	*****	*****		*****	-0,1	-0,1		0	1/40074	CALCTD		
0680 2 ffluent Net Value	PERMIT REQUIREMENT	******	******	******	******	REPORT- 01MOAV	REPORT 01DAMX	MG/L		1/Month	CALCTD		
Carbon, Tot Organic	SAMPLE MEASUREMENT	******	*****		*****	4.2	4.2		0	1/HONTH	GRAB		
0680 7 ntake From Stream		******	******* *******	******	******	REPORT 01MOAV	REPORT 01DAMX	MG/L		1/Month	GRAB		
leat (winter) per Hr.)	SAMPLE MEASUREMENT	316	535		*****	*****	*****		0	1/DAY	CALCID		
1387 1 ffluent Gross Value		REPORT 01MOAV	662 01DAMX	MBTU/HR	. ******	****** ***	******	******		1/Day.	CALCTD		
ab Certification #	SAMPLE MEASUREMENT	17451	PA166		04653								
9999 99 ab	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 - Regin 2 at (609) 292-4860 or via email at "susan rosenwinkel@dep.state.nj.us".

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

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NJ0025411 Month Day Year 461C - DSN 461C - DSW internal PERMITTEE: To LOCATION OF ACTIVITY: Hore Hore PERMITTEE: PSEAG NUCLEAR LLC POB 00X 236-N21 - ALLOWAY CREEK NECK HORE CREEK GENERATING STATION ARTIFICIAL ISLAND REPORT RECIPIENT: POB 00X 236-N21 - ALLOWAY CREEK NECK HORE CREEK GENERATING STATION ARTIFICIAL ISLAND POB 00X 236-N145 POB 00X 236-N21 - ALLOWAY CREEK NECK HANCOCKS BRIDGE, NJ 08038 COUNTY: Softhern / Salem County HONE CREEK KIN 08038 HANCOCKS BRIDGE NJ 08038 CHECK IF APPLICABLE: No Discharge this Monitoring Period Monitoring Report Comments Attached PO. BOX 236-N145 WHO MUST SIGN The highest ranking official having day-to-day managerial and operational responsibilities for the discharging facility shall sign the certification. Where the highest ranking operator does not have the ability to authorize capial expenditures and hire personnel, a person having that responsibility of person designated by that persons not a local agency, the highest ranking operator does not have the ability to authorize capial expenditures and the local agency has contracted with another entity to operate the treatment works, the highest ranking official to the contracted entity shall sign the certification. Hole to capial expenditures and all attachments, and to compared the treatment works, the highest ranking official to the contracted entity shall sign the cartification. Hole to capial expenditone and/or imprisonment, pursuant to NJ A_C	NUMBER	MONITORING PERIOD	MONITORI	ED LOCATION:
12 1 2009 To 12 31 2009 PERMITTEE: PSE&Q NUCLEAR LLC PO BOX 236-N21 - ALLOWAY CREEK NECK RD DO BUTTONWOOD RD HANCOCKS BRIDGE, NJ 08038 RECONTOF OF BUTTONWOOD RD FOOT OF BUTTONWOOD RD HOWER ALLOWAYS CREEK, NJ 08038 RECONTOF OF BUTTONWOOD RD FOOT OF BUTTONWOOD RD HOWER ALLOWAYS CREEK, NJ 08038 RECONTOF COUNTY: Southern / Salem County HANCOCKS BRIDGE, NJ 08038 CHECK IF APPLICABLE: NHO 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 official having day-to-day managerial and operational responsibilities for the discharging facility shall sign the certification. Where 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 official having day-to-day managerial and operational 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 to the contracted entity shall sign the certification. N/A N/A I certify under penalty of law that I have personally examined and am familiar with the information. I believe that the information is true, accurate and complete. I an aware that there are significant penaltices for submititing fase i	NJPDES PERMIT			
PERMITTEE: LOCATION OF ACTIVITY: REPORT RECIPIENT: PSEAG NUCLEAR LLC HOPE CREEK GENERATING STATION PSEAG	NJ0025411	ivionen service and a service	461C - DSN 461C	- DSW internal
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PO BOX 236-N11 - ALLOWAT CKERK NEXK FOOT OF BUTTONWOOD RD PO BOX 236-N11 - ALLOWAT CKERK NEXK FOOT OF BUTTONWOOD RD HANCOCKS BRIDGE, NJ 08038 REGION / COUNTY: Southern / Salem County CHECK IF APPLICABLE: No Discharge this Monitoring Period Monitoring Report Comments Attached WHO MUST SIGN The highest ranking official having day-to-day managerial and operational responsibilities for the discharging facility shall sign the certification or, in his absence a person designated by that person. For a local agency, the highest ranking operator does not have the ability to authorize capital expenditures and hire personnel, a person having that reponsibility 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. I believe that the information is true, accurate and complete. I am aware that there are significant penaltizef or submiting false information, including the possibility of fine and/or imprisonment, pursuant to NJ.A.C. 7:14A-6.9(B). The New JEREY Water Pollution Control Act provides for penalties up to \$50,000 per violation: John F. Perry. Site Vice President – Hope Creek NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR "For a local agency where the lighest ranking operator does not have the ability to authorize capital expenditures and hire personel, a person having that responsibility or person designated by that person shall sign the following certification: I certify under penalty of law and in accordance with NJ.S.A. \$8:10A-6F(5) that I have received and reviewed the attached discharge monitoring reports: N/A N/A N/A N/A			PSE&G	MARIAN Induceral
HANCOCKS BRIDGE, NJ 08038 LOWER ALLOWAYS CREEK, NJ 08038 HANCOCKS BRIDGE, NJ 08038 INACCOCKS BRIDGE, NJ 08038 INACCOCKS BRIDGE, NJ 08038 INACCOCKS BRIDGE, NJ 08038 IND 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 personneli, a person having that responsibility of 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 1 have personally examined and an familiar with the information, including the possibility of finds and/or imprisonment, pursuant to N.J.A.C. 7:14A-6.9(B). The New Jersey Water Pollution Control Act provides for penalties up to \$50,0000 per violation: N/A John F. Perry, Site Vice President – Hope Creek N/A MAE A ODE/FINE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR AREA CODE/FINE NUMBER (IF APPLICABLE) John F. Perry, Site Vice President – Hope Creek N/A SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR DATE			P.O. BOX 236 / H	15
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the certification. Where the highest ranking operator does not have the ability to authorize capital experiments and interpretent of the person designated by that person shall also sign the second certification at the bottom of this page. If the local agency has contracted with another entity to operate the treatment works, the highest-ranking official of the contracted entity shall sign the certification. I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments, and that, based on my inquiry of those individuals immediately responsible for obtaining the information, including the possibility of fine and/or imprisonment, pursuant to N.J.A.C. 7:14A-6.9(B). The New Jersey Water Pollution Control Act provides for penalties up to \$50,000 per violation. John F. Perry, Site Vice President – Hope Creek NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR *For a local agency where the lighest ranking operator does not have the ability to authorize capital expenditures and hire personnel, a person having that responsibility or person designated by that person shall sign the following certification: I certify under penalty of law and in accordance with N.J.S.A: 58:10A-6F(5) that I have received and reviewed the attached discharge monitoring reports. N/A		a second design at a day that person Hor 2 10021 20200V IDE 11911581	Talking operator of the tree	
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I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments, and that, based on my inquiry of those individuals immediately responsible for obtaining the information. I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment, pursuant to N.J.A.C. 7:14A-6.9(B). The New Jersey Water Pollution Control Act provides for penalties up to \$50,000 per violation: John F. Perry, Site Vice President – Hope Creek N/A NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR N/A GRADE AND REGISTRY NUMBER (IF APPLICABLE). I = 25 - 10 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR DATE *For a local agency where the bit hest ranking operator does not have the ability to authorize capital expenditures and hire personnel, a person having that responsibility or person designated by that person shall sign the following certification: I certify under penalty of law and in accordance with NJ.S.A: 58:10A-6F(5) that I have received and reviewed the attached discharge monitoring reports. N/A N/A	reponsibility or person designated	by that person shall also sign the second certification at the botton	all sign the certification.	
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J25-10 856=339=3463 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR DATE AREA CODE/PHONE NUMBER *For a local agency where the highest ranking operator does not have the ability to authorize capital expenditures and hire personnel, a person having that responsibility or person designated by that person shall sign the following certification: I certify under penalty of law and in accordance with N.J.S.A. 58:10A-6F(5) that I have received and reviewed the attached discharge monitoring reports. N/A	NAME AND TITLE OF PRINCIPAL	EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERAT	OR GRADE AND REGIS	FRY NUMBER (IF APPLICABLE).
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NAME AND TITLE	NAME AND TITLE	SIGNATURE	ματώ	

PERMIT NUMBER:	MONI	ITORED LOCA	TION:	NONITOR	RING PERIOD:	FACILITY NA		<u>.</u>			
NJ0025411	461C	DSN 461C - D	DSW interna 1	12/1/2009	TO 12/31/2009	HOPE CREF	EK GENERATIN	NG STAT	ION		
PARAMETER	\mathbf{X}	QUANTITY	OR LOADING	UNITS	QUALI	TY OR CONCENTR	łATION	UNITS	NÖ. EX.	FREQ: OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	0.073	0.140		*****	**************************************	*****	$\begin{array}{c} \frac{1}{2} \left\{ \frac{1}{2} - \frac{1}{2} \left\{ \frac{1}{2} - \frac{1}{2} \left\{ \frac{1}{2} - \frac{1}{2} \left\{ \frac{1}{2} - \frac{1}{2} + \frac{1}{2} \right\} \right\} \right\} \\ \frac{1}{2} \left\{ \frac{1}{2} \left\{ \frac{1}{2} - \frac{1}{2} + \frac{1}$	0	CONTINUOUS	METER
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	******	*****	******			Continuous	METER
Solids, Total Suspended	SAMPLE	*****	*****		******	2	2		0	1/MONTH	COMPOS
00530 1 Effluent Gross Value		******		******	******	30 01MOAV	100 01DAMX	MG/L		1/Month	COMPOS
Petrol Hydrocarbons, Total Recoverable	SAMPLE MEASUREMENT	*****	******		*****	45	< 5		Ó		GRAB
45501 1 Effluent Gross Value		******	esterat (1/2): Externs	******	******	10 01MOAV	15 01DAMX ******	MG/L		2/Month	GRAB
Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 	********		*****	4	4		0	1/монтн	COMPOS
00680 1 Effluent Gross Value		*****	*****	*****	******	REPORT 01MOAV	50 01DAMX	MG/L		1/Month	COMPOS
Lab Certification #	SAMPLE MEASUREMENT	17451	PA166		04653						
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 - Regin 2 at (609) 292-4860 or via email at "susan rosenwinkel@dep.state.nj.us".

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

NJPDES PERMIT	MONITORING PERIOD	MONITORED LOCATION:
NJ0025411	Month Day Year 12 1 2009 To 12 31 2009	462B - dsn 462B - dsw outfall
PERMITTEE: PSE&G NUCLEAR LLC PO BOX 236-N21 - ALLOWA RD HANCOCKS BRIDGE, NJ 080	FOOT OF BUTTONWOOD RD	REPORT RECIPIENT: PSE&G THE ANY DADATE MARYAW UCLAUCHAU P.O. BOX 236 / H15 HANCOCKS BRIDGE, NJ 08038.
CHECK IF APPLICABLE:	No Discharge this Monitoring Period Monitoring	Report Comments Attached
the certification or, in his absence the certification. Where the higher reponsibility or person designated another entity to operate the treater I certify under penalty of law that that, based on my inquiry of thos complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The N	ranking official having day-to-day managerial and operational resp a person designated by that person. For a local agency, the highest is st ranking operator does not have the ability to authorize capital exp by that person shall also sign the second certification at the bottom nent works, the highest-ranking official of the contracted entity shal t I have personally examined and am familiar with the information is individuals immediately responsible for obtaining the information are significant penalties for submitting false information, including ew Jersey Water Pollution Control Act provides for penalties up to S ice President – Hope Creek	ranking operator of the treatment works shall sign enditures and hire personnel, a person having that of this page. If the local agency has contracted with I sign the certification. submitted in this document and all attachments, and n, I believe that the information is true, accurate and the possibility of fine and/or imprisonment, pursuant
	XECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATO	
Joh F. Pen	Y	<u>ا - ک - ا ک 856-339-3463</u>
*For a local agency where the wighe person designated by that person sha	TIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR st ranking operator does not have the ability to authorize capital expendit I sign the following certification: ccordance with N.J.S.A. 58:10A-6F(5) that I have received and reviewed th N/A	
NAME AND TITLE	SIGNATURE	DATE AREA CODE/PHONE NUMBER

PERMIT NUMBER: NJ0025411		ITORED LOCA dsn 462B - dsv			DNITORING PERIOD: FACILITY NAM			RATING STATION					
PARAMETER		QUANTITY C	JR LOADING	UNITS	QUALI	Y OR CONCENTR	Y OR CONCENTRATION		NO. EX,	FREQ. OF ANALYSIS	SAMPLE TYPÊ		
low, lin Conduit or hru Treatment Plant	SAMPLE MEASUREMENT	0.010	0.022		*****	*****			Ô	I/DAY	METER		
0050 1 ffluent Gross Value		REPORT 01MOAV	REPORT 01DAMX	MGD	****** ******	ittint attint	******	******		1/Day	METER		
OD, 5-Day (20 oC)	SAMPLE MEASUREMENT	*****	*****		*****	280	377		0	I/MONTH *	COMPOS		
0310 G law Sew/influent		******	******	*****	******	REPORT 01MOAV	REPORT 01DAMX	MG/L		1/Month	COMPOS		
OD, 5-Day (20 oC)	SAMPLE		3		*****	17	31		0	1/MONTH *	COMPOS		
0310 1 ffluent Gross Value	PERMIT REQUIREMENT	8 01MOAV	REPORT 01WKAV	KG/DAY	******	30 01MOAV	45 01WKAV	MG/L		1/Month	COMPOS		
OD, 5-Day (20 oC)	SAMPLE	144-14-14-14-14-14-14-14-14-14-14-14-14-	******		93,2	*****	*****		0	1/MONTH *	CALCTD		
0310 K ercent Removal	PERMIT REQUIREMENT	*****		******	87:5 01MOAVMN	******	******	PERCENT		1/Month	CALCTD		
olids, Total uspended	SAMPLE MEASUREMENT	*****	*****		*****	254	314		0	1/MONTH *	compos		
0530 G aw Sew/influent	PERMIT REOUIREMENT		******	******	****** (j******	REPORT 01MOAV	REPORT 01DAMX	MG/L		1/Month	COMPOS		
olids, Total uspended	SAMPLE MEASUREMENT	*****	100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 +******		*****	23	42		0	(/monith *	COMPOS		
0530 1 Ifluent Gross Value	PERMIT REQUIREMENT	· · · · · · · · · · · · · · · · · · ·	*****	•••••	******	30 01MOAV	45 01WKAV	MG/L		1/Month	COMPOS		

Comments: If there are any questions in regards to the monitoring report form, please contact Susan Rosenwinkel of the BPSP-Regin 2 at (609) 292-4860 or via email at "susan.rosenwinkel@dep.state.nj.us". * SAMPUNG FREQUERY INCREASED TO GREATER THAN I/MONTH TO OBTAIN ADDITIONAL OPERATING DATA NEEDED TO DETERMINE EXTROME COLD WEATHER IMPACT ON PLANT OPERATION.

J0025411	462B	dsn 462B - ds	w outfall	2/1/2009 -	TO 12/31/2009	HOPE CRE	EK GENERATIN	IG STAT	IÓN		
PARAMETER	\ge	QUANTITY	or Loading	UNITS	QUALI		RATION	UNITS	NO. EX:	FREQ. OF ANALYSIS	SAMPLÉ TYPE
lids, Total spended	SAMPLE MEASUREMENT	***	******		85	91	*****		0	1/1101574*	CAUCTO
20 K	PERMIT REQUIREMENT	******		******	85 01MOAVMN	REPORT 01MOAV		PERCENT		. 1/ <u>Month</u>	CALCTD
and Grease	SAMPLE MEASUREMENT	*****	*****		*****	<5	٤5		0	1/MONTH	GRAB
556 1 luent Gross Value	PERMIT REQUIREMENT					10 01MOAV	15 01DAMX	MG/L		1/Month	GRAB
liform, Fecal neral	SAMPLE MEASUREMENT	******	******		• • • • • • • • • • • • • • • • • • •	210	< 10		0	I/MONTH	GEAB
055 1 Iuent Gross Value		******	******	*****	******	200 01MOGE	400 01WKGE	#/100ML		1/Month	GRAB
o Certification #	SAMPLE MEASUREMENT	17451	PA 166		06005						
999 99 b	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT	REPORT Lab #			Not Applic	NOT AP
	oneran er								<u>}.d//www.subset</u>		
	·										
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