

SCH11-007

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
ARTICLE NUMBER: 7008 1830 0004 1876 1563

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 January 2011.

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 Mark Pyle (856) 339-2331.

Carl J Fricker

Sincerek

Site Vice President - Salem

IEAS

# Attachment (12 DMR's)

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

#### **EXPLANATION OF CONDITIONS**

#### January 2011

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.

#### **EXPLANATION OF EXCEEDANCES**

January .	20	1	1
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The following	exceedance(s)	are included	I in the	attached	report and	explained
below.						

DSN No.

**EXPLANATION** 

None.

BC Site Vice President – Salem
Director – Regulatory Affairs
John Valeri Jr., Esq.
Nuclear Environmental Affairs - Manager
Helen Gregory
Chem File SCH11-007

#### COUNTY OF SALEM STATE OF NEW JERSEY

- I, Carl J. Fricker of full age, being duly sworn according to law, upon my oath depose and say:
- 1. I am the 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.

Carl J. Fricker

Site Vice President - Salem

Sworn and subscribed before me this ことっ day of February 2011

SHERIL KEYES

Commission # 2051967

tary Public, State of New Jersey

My Commission Expires

January 15, 2014

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

MONITORED LOCATION:

MONITORING PERIOD

NJPDES PERMIT

NJI DESTERMITI	Month of the control	101011111	
NJ0005622	Month         Day         Year           1         1         2011           To         1         31         2011	FACA – SW O	outfall FACA
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 BRII	LLC
CHECK IF APPLICABLE:	REGION / COUNTY: Southern / Salem C	ounty Report Comments Atta	
	est ranking official having day-to-day managerial and operational r ce a person designated by that person. For a local agency, the high	est ranking operator of	f the treatment works shall sign
the certification. Where the hig responsibility or person designa	hest ranking operator does not have the ability to authorize capital ted by that person shall also sign the second certification at the bot atment works, the highest-ranking official of the contracted entity s	tom of this page. If the	e local agency has contracted with
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 ther	hest ranking operator does not have the ability to authorize capital ted by that person shall also sign the second certification at the bot	tom of this page. If the hall sign the certification submitted in this docton, I believe that the integration of a	e local agency has contracted with ion.  cument and all attachments, and information is true, accurate and and/or imprisonment, pursuant
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 ther to N.J.A.C. 7:14A-6.9(B). The	hest ranking operator does not have the ability to authorize capital ated by that person shall also sign the second certification at the bot atment works, the highest-ranking official of the contracted entity shat I have personally examined and am familiar with the information se individuals immediately responsible for obtaining the informatic are significant penalties for submitting false information, including	tom of this page. If the hall sign the certification submitted in this docton, I believe that the integration of a	e local agency has contracted with ion.  cument and all attachments, and aformation is true, accurate and and/or imprisonment, pursuant
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MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

**FACA SW Outfall FACA** 

1/1/2011 TO 1/31/2011

**PSEG NUCLEAR LLC SALEM GENERATIN** 

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PARAMETER	X	QUANTITY	OR LOADING	UNITS	QUALITY OR CONCENTRATION				NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature, oC	SAMPLE MEASUREMENT	****	****		****	0.1	2.1		0	CONTINUOS	CONTIN
00010 G Raw Sew/influent	PERMIT REQUIREMENT	******	******	*****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.C		Continuous	CONTIN
Temperature,	QL		******		******	*****			7.3		
oC	SAMPLE MEASUREMENT	*****	*****		****	40.4	12.5		0	Continuous	CONTIN
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	43.3 01DAMX	DEG.C	ingelija in di	Continuous	CONTIN
	.∜ QL∜ ∜	~******/ <sub>1</sub> // // // // // // // // // // // // //	******		*****	*****	2				
Temperature, oC	SAMPLE MEASUREMENT	*****	*****		*****	9.3	12.1		0	1/004	CALCTO
00010 2 Effluent Net Value	PERMIT REQUIREMENT		******	*****	****	REPORT 01MOAV	15.3 01DAMX	DEG.C		1/Day	CALCTD
	<b>QL</b>	3 7 *****	*****		*******	******	*****				
Lab Certification #	SAMPLE MEASUREMENT	17327	17481		PA 166						
99999 .99 Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT	REPORT Lab #			Not Applic	NOT AP
	, QL	******	*****		******	*****	******		44,52 47,00		

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**

**MONITORED LOCATION:** 

MONITORING PERIOD

NJPDES PERMIT

NJ0005622	Month Day	Year 2011	То	Month 1	Day 31	Year 2011	FACB – SW O	utfall FACB	
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101		REPORT REC PSEG NUCLEAR PO BOX 236/N21 HANCOCKS BRII	LLC						
REGION / COUNTY: Southern / Salem County									
CHECK IF APPLICABLE:	No Discha	rge this M	onitorii	ng Period		□ мо	onitoring Report Comm	ents Attached	
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Carl J. Fricker, Si	e Vice President -	Salem						<u>N/A</u>	
NAME AND TITLE OF PRINCIPAL	EXECUTIVE OFFICE	R, AUTHORI	ZED AG	ENT, OR *	LICENSE	D OPERATO	OR GRADE AND RI  02/22/2011	EGISTRY NUMBER (IF APPLICABLE)  856-339-1102	
SIGNATURE OF PRINCEPAL EXECU	UTIVE OFFICER, AUT	THORIZED A	GENT, O	OR *LICEN	SED OPE	RATOR	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	n accordance with N.	J.S.A. 58:10	A-6F(5)	) that I have	reviewe	d the attach	ed discharge monitoring re	eports.	
<u>N/A</u>				N/A			N/A	<u>N/A</u>	
NAME AND TITLE		SIGNATU	RE				DATE	AREA CODE/PHONE NUMBER	

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

FACB SW Outfall FACB

1/1/2011 TO 1/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

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PARAMETER	X	QUANTITY	OR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE	
Temperature, oC	SAMPLE MEASUREMENT	*****	*****		****	1.0	2.1		0	CONTINUOUS	CONTIN	
00010 G Raw Sew/influent	PERMIT REQUIREMENT	******	***	*****	******	REPORT 01MOAV	REPORT 01DAMX	DEG.C		Continuous	CONTIN	
Temperature, oC	SAMPLE MEASUREMENT	****	****		****	10.9	12.5		0	CONTINUOS		
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	43.3 01DAMX	DEG.C		Continuous	CONTIN	
Temperature,	SAMPLE MEASUREMENT	****	*****		*****	9.9	10.9		0	Youy	CUCLO	
00010 2 Effluent Net Value	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	15.3 01DAMX	DEG.C		1/Day	CALCTD	
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99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab #			REPORT Lab #	REPORT Lab #	REPORT Lab#			Not Applic	NOT AP	
	, QL	******	******		******	*****	******		8/4			

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

MONITORED LOCATION:

MONITORING PERIOD

NJPDES PERMIT

NJ0005622	Month Day 1 1	Year 2011 T	o Month 1	Day 31	Year 2011	FACC - S	W Outfall FACC			
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101		LOCATION PSEG NUCLE GENERATING ALLOWAY C HANCOCKS I	AR LLC SAG STATION REEK NECK	LEM RD		PSEG NUC PO BOX 23				
REGION / COUNTY: Southern / Salem County										
CHECK IF APPLICABLE	: No Discha	urge this Monit	oring Period		$\square$ N	Aonitoring Repor	t Comments Attached			
responsibility or person designary another entity to operate the tree I certify under penalty of law that, based on my inquiry of the	ated by that person a eatment works, the hat I have personally ose individuals imm	shall also sign t nighest-ranking y examined and	the second ce official of th I am familiar	rtificatio e contrac with the	n at the bote ted entity information	ottom of this page shall sign the cer on submitted in the	nis document and all attachments, and			
		enalties for sub-	mitting false	informat	ion, inclu	ding the possibili	ty of and/or imprisonment, pursuant			
to N.J.A.C. 7:14A-6.9(B). The		enalties for sub- Pollution Contr	mitting false	informat	ion, inclu	ding the possibili	ty of and/or imprisonment, pursuant			
to N.J.A.C. 7:14A-6.9(B). The  Carl J. Fricker, Si	New Jersey water l	enalties for sub Pollution Contr <u>Salem</u>	mitting false ol Act provid	informat les for pe	ion, includinalties up	to \$50,000 per vi	ty of and/or imprisonment, pursuant iolation.			
to N.J.A.C. 7:14A-6.9(B). The  Carl J. Fricker, Si  NAME AND TITLE OF PRINCIPAL	New Jersey water lite Vice President -	enalties for subs Pollution Contr Salem R, AUTHORIZED	mitting false ol Act provid AGENT, OR *	informat les for pe LICENSE	ion, incluenalties up  OPERATO	to \$50,000 per vi	ty of and/or imprisonment, pursuant iolation.  N/A  AND REGISTRY NUMBER (IF APPLICABLE)			
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Carl J. Fricker, Si NAME AND TITLE OF PRINCIPAL SIGNATURE OF PRINCIPAL EXEC *For a local agency where the hig.	New Jersey water lite Vice President - EXECUTIVE OFFICE CUTIVE OFFICER, AUT Thest-ranking operator shall sign the following	enalties for subspectation Control Salem  R, AUTHORIZED  THORIZED AGEN  Thorized agent have the secretification:	mitting false ol Act provide AGENT, OR *	informatiles for pe	ion, incluentalities up OPERATO RATOR	to \$50,000 per vi  OR GRADE  02/2  DATE  additures and hire per	ty of and/or imprisonment, pursuant iolation.  N/A  AND REGISTRY NUMBER (IF APPLICABLE)  2/2011  856-339-1102  AREA CODE/PHONE NUMBER  ersonnel, a person having that responsibility of the content of th			

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

**FACC SW Outfall FACC** 

1/1/2011 TO 1/31/2011

**PSEG NUCLEAR LLC SALEM GENERATIN** 

PARAMETER		QUANTITY	OR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	2411	2652		****	****	*****		0	Your	CALCTO
50050 G Raw Sew/influent	PERMIT REQUIREMENT	3024 01MOAV	REPORT 01DAMX	MGD	*****	******	****	*****		1/Day	CALCTD
Thermal Discharge Million BTUs per Hr	SAMPLE MEASUREMENT	זרראו	15665		****	****	*****		0	1004	CALCTIO
00015 2 Effluent Net Value	PERMIT REQUIREMENT	REPORT 01MOAV	30600 01DAMX	MBTU/HR	******	*****		*****		1/Day	CALCTD
	QL⊾				*****	*****	******			<b>*</b>	
Lab Certification #	SAMPLE MEASUREMENT	רבצרו	17451		PA 166						
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab#		REPORT Lab #	REPORT	REPORT & Lab #			Not Applic	NOT AP
	QL	*****	******		*****	*****	*****		50000		**************************************

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

**MONITORED LOCATION:** 

MONITORING PERIOD

NJPDES PERMIT

NJ0005622	Month         Day         Year           1         1         2011         To         Month         Day           1         31	Year     048C - SW Ot	ıtfall 48C
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 NUCLEAR PO BOX 236/N21 HANCOCKS BRI	LLC
	REGION / COUNTY: Southe	rn / Salem County	
CHECK IF APPLICABLES	No Discharge this Monitoring Period	Monitoring Report Comm	nents Attached
the certification. Where the hig responsibility or person designa 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	ce a person designated by that person. For a local ager thest ranking operator does not have the ability to author ted by that person shall also sign the second certification atment works, the highest-ranking official of the contra- tant I have personally examined and am familiar with the ose individuals immediately responsible for obtaining to the are significant penalties for submitting false informa- New Jersey water Pollution Control Act provides for p	orize capital expenditures and hire on at the bottom of this page. If the cted entity shall sign the certificate information submitted in this do the information, I believe that the intion, including the possibility of a	personnel, a person having that he local agency has contracted with hion.  cument and all attachments, and hinformation is true, accurate and hind/or imprisonment, pursuant
Carl J. Fricker, Si	te Vice President - Salem		<u>N/A</u>
NAME AND TITLE OF PRINCIPAL	EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSI -	ED OPERATOR GRADE AND R 02/22/201	EGISTRY NUMBER (IF APPLICABLE)  1 856-339-1102
SIGNATURE OF PRINCIPAL EXEC	UTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OP	ERATOR DATE	AREA CODE/PHONE NUMBER
	hest-ranking operator does not have the ability to authorize a shall sign the following certification:	apital expenditures and hire personne	el, 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 attached discharge monitoring r	reports.
N/A	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
NAME AND TITLE	SIGNATURE	DATE	AREA CODE/PHONE NUMBER

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

048C SW Outfall 48C

1/1/2011 TO 1/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

NJ0005622	0400	SW Outtail 48		11/2011	10 1/31/2011	F3EG NOCI	LEAR LLC SAL	EN GEN	IENA	111.	
PARAMETER	X	QUANTITY (	OR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	0.3059	0.6286		****	*****	*****		0	1004	CALCTO
50050 1 Effluent Gross Value	PERMIT	REPORT 01MOAV	REPORT 01 DAMX	MGD	*****	******		*****		1/Day	CALCTD
Solids, Total	QL SAMPLE	<b>会会有关的</b>	****		******	******				2/montu	
Suspended	MEASUREMENT	****	***		****	11	15		0	Manta	COMPOS
00530 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	*****	30 01MOAV	100 01DAMX	MG/L		2/Month	COMPOS
	QL *		1944 ( *****		*****		******		100 P. S. C.		
Nitrogen, Ammonia Total (as N)	SAMPLE MEASUREMENT	****	*****		*****	6	11		0	MONTH	COMPOS
00610 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	*****	35 01MOAV	70 01DAMX	MG/L		2/Month	COMPOS
<u>.</u>	∛ QL 💨	<b>*****</b>	*****		******		*****		\$7. 4.7.		
Petroleum Hydrocarbons	SAMPLE MEASUREMENT	****	***		****	45	72		0	2/Month	Grab
00551 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	*****	10 01MOAV	15 01DAMX	MG/L		2/Month	GRAB
	∵. QL	******	*****		*****	*****			2.80		
Carbon, Tot Organic (TOC)	SAMPLÉ MEASUREMENT	*****	*****		****	11	16		0	2/month	compos
00680 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	******	REPORT 01MOAV	50 01DAMX	MG/L		2/Month	COMPOS
Lab Certification #	SAMPLE MEASUREMENT	√ """ ∛ \⊓327	\745\		00 111	******	******		1 100		
	MEASUREMENT	1134 (	11730		by 1PP						
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT. Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic	NOT AP
	QL.	*****	*****		*****	*****	*****		3000		100

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**

	N	IONITORING I	PERIOD		MONITO	ORED LOCATION:			
NJ0005622	Month Day	Year         To	Month         Day         Yea           1         31         201	/ X / / X	481A – SW Outfall 481A				
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101		LOCATION O PSEG NUCLEAR I GENERATING ST ALLOWAY CREE HANCOCKS BRID	LLC SALEM ATION K NECK RD	PSI PO	EPORT REC EG NUCLEAR BOX 236/N21 NCOCKS BRII				
		REGION / CO	DUNTY: Southern / Sa	lem County					
CHECK IF APPLICABLE:	No Dischar	ge this Monitoring	Period Monito	ring Report (	Comments Atta	nched			
the certification. Where the hig responsibility or person designa another entity to operate the treat	ted by that person:	shall also sign the se				personnel, a person having that e local agency has contracted with			
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	at I have personall se individuals imn e are significant pe	y examined and am nediately responsible enalties for submitti	familiar with the infor le for obtaining the info ing false information, i	ntity shall sig mation submi ormation, I be ncluding the	n the certificati tted in this doc lieve that the in possibility of a	cument and all attachments, and afformation is true, accurate and and/or imprisonment, pursuant			
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	at I have personallyse individuals imne are significant pe New Jersey water let Vice President -	y examined and am nediately responsibl enalties for submitti Pollution Control Ad Salem	familiar with the infor le for obtaining the info ing false information, i ct provides for penaltie	mation submination, I be neluding the sup to \$50,0	n the certificati tted in this doc lieve that the in possibility of a	cument and all attachments, and afformation is true, accurate and and/or imprisonment, pursuant			
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	at I have personallyse individuals imne are significant pe New Jersey water let Vice President -	y examined and am nediately responsibl enalties for submitti Pollution Control Ad Salem	familiar with the infor le for obtaining the info ing false information, i ct provides for penaltie	mation submination, I be neluding the sup to \$50,0	n the certificati tted in this doc lieve that the in possibility of a 00 per violation	cument and all attachments, and information is true, accurate and and/or imprisonment, pursuant in.  N/A  EGISTRY NUMBER (IF APPLICABLE)			
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	at I have personally see individuals imme are significant per New Jersey water let Vice President -	y examined and am nediately responsible chalties for submitti Pollution Control Ad Salem R, AUTHORIZED AGE	familiar with the inforder for obtaining the information, in the information, in the provides for penaltic entry or *LICENSED OPE	mation submination, I be necluding the sup to \$50,0	n the certification the certification that the interest that the interest possibility of a company of the certification of the certific	ion.  cument and all attachments, and information is true, accurate and ind/or imprisonment, pursuant in.  N/A  EGISTRY NUMBER (IF APPLICABLE)			
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  Carl J. Fricker, Siname and TITLE OF PRINCIPAL EXECUTION.	at I have personally see individuals imme are significant personally water later Vice President - EXECUTIVE OFFICE UTIVE OFFICE UTIVE OFFICE was a sign the following the following sign the sign that sign the sign the sign that s	y examined and am nediately responsible nalties for submitti Pollution Control Ad Salem  R, AUTHORIZED AGE  THORIZED AGENT, Our does not have the about certification:	familiar with the information of the for obtaining the information, in the following false information, in the provides for penaltic entry of the following the familiary to authorize capital	mation submination, I be necluding the sup to \$50,0  RATOR  RATOR  Description of the superior	n the certification the certification the certification that the inpossibility of a compossibility of a compossibility of a composition of the composition of the composition of the certification of	ion.  Sument and all attachments, and information is true, accurate and ind/or imprisonment, pursuant in.  N/A  EGISTRY NUMBER (IF APPLICABLE)  856-339-1102  AREA CODE/PHONE NUMBER  If, a person having that responsibility or			
I certify under penalty of law the that, based on my inquiry of the complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The  Carl J. Fricker, Sinname and Title of Principal Signature of Principal Executive Signature of Principal Executive For a local agency where the high person designated by that person signated by that person signated in the signature of the person signated by that person signature of the signature of t	at I have personally see individuals imme are significant personally water later Vice President - EXECUTIVE OFFICE UTIVE OFFICE UTIVE OFFICE was a sign the following the following sign the sign that sign the sign the sign that s	y examined and am nediately responsible the polities for submitting pollution Control Adsolution Control Adsolution Control Adsolution Control Adsolution Control Adsolution Adsolution Advertification:  J.S.A. 58:10A-6F(5) to the political control of the politication and the politic	familiar with the information of the for obtaining the information, in the following false information, in the provides for penaltic entry of the following the familiary to authorize capital	mation submination, I be necluding the sup to \$50,0  RATOR  RATOR  Description of the superior	n the certification the certification the certification that the inpossibility of a compossibility of a compossibility of a composition of the composition of the composition of the certification of	ion.  Sument and all attachments, and information is true, accurate and ind/or imprisonment, pursuant in.  N/A  EGISTRY NUMBER (IF APPLICABLE)  856-339-1102  AREA CODE/PHONE NUMBER  If, a person having that responsibility or			

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

481A SW Outfall 481A

1/1/2011 TO 1/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

1400003022	7017	SW Outlan 40	·	, 1,2011	0 1/31/2011	r SEG NOO!	LEAN LLC SAL	EW GEN	ILNA	111.	
PARAMETER	X	QUANTITY (	OR LOADING	UNITS	QUALI	ITY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, in Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	471	490		****	*****	*****		0	10m	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	******	*****		1/Day	CALCTD
pH	SAMPLE MEASUREMENT	***	****	,	7.6	*****	8.0		Ò	\\week	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	6.0 01DAMN	*****	9.0 01DAMX	SU		1/Week	GRAB
pH	SAMPLE MEASUREMENT	*****	*****		7.8	*****	8.0		0	1/week	Crns
00400 7 Intake From Stream	PERMIT REQUIREMENT	*****	*****	*****	REPORT 01DAMN	*****	REPORT 01DAMX	SU		1/Week	GRAB
	· · · QL	******	*****		*****	******	*****			774 6 9 yearspy 4 1	00/20
LC50 Statre 96hr Acu Cyprinodon	SAMPLE MEASUREMENT	****	*****		(00E : M	*****	*****		0	(00E=11	C005 = N
TAN6A 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	50 01 DAMN	*****	*****	%EFFL		2/Year	COMPOS
	© QL	****	*****		**************************************	*****	(1) ( <b>株本学会表</b> ( 1) ( 1993) ( 1) ( 1) ( 1) ( 1) ( 1) ( 1) ( 1) ( 1			412984	
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	****	*****		****	CODE=H	COOE:H		٥	CODE = N	CODE = N
*CPOX_1 Effluent Gross Value	PERMIT REQUIREMENT	******	******	*****	******	0.3 01MOAV	0.5 01DAMX	MG/L		3/Week	GRAB
Option 1	QL 🐘	*****	*****		A A A A A A A A A A A A A A A A A A A	*****	*****				
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	****	*****		*****	2011	١.٥٧		٥	3/week	CRAB
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	*****	REPORT 01MOAV	0.2 01DAMX	MG/L		3/Week	GRAB
Option 2	'QL	*****	****		7.12 ************************************	*****	*****				

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

481A SW Outfall 481A

1/1/2011 TO 1/31/2011

**PSEG NUCLEAR LLC SALEM GENERATIN** 

PARAMETER		QUANTITY (	OR LOADING	UNITS	UNITS QUALITY OR CONCENTRATION			UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature,	SAMPLE MEASUREMENT	****	*****		*****	10.5	16.6		٥	1004	CONTIN
00010 1 Effluent Gross Value	PERMIT *REQUIREMENT	<b>非常的</b>	*****	*****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.C		1/Day	CONTIN
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PA 166	almidalmining p. g					
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT		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 1 1	To 1482A - SW Unital 482A									
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101	PS GI A1	OCATION C SEG NUCLEAR ENERATING S' LLOWAY CREI ANCOCKS BRI	LLC SALEM FATION EK NECK RD	<u>Y:</u>	REPORT RECI PSEG NUCLEAR L PO BOX 236/N21 HANCOCKS BRIDG	LC					
CHECK IF APPLICABLE	: No Discharge	REGION / Co	OUNTY: South		County Report Comments Attac	hed					
WHO MUST SIGN The high the certification or, in his absent the certification. Where the high responsibility or 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 there to N.J.A.C. 7:14A-6.9(B). The	nce a person designated ghest ranking operator ated by that person shat atment works, the high nat I have personally ex- ose individuals immed- re are significant penal	d by that person. does not have the all also sign the shest-ranking offixamined and amitately responsibilities for submitted.	For a local age ne ability to author second certificaticial of the control familiar with the for obtaining ing false inform	ncy, the hig orize capita ion at the bo acted entity he information, included	hest ranking operator of the lexpenditures and hire position of this page. If the shall sign the certification on submitted in this docution, I believe that the infining the possibility of and	he treatment works shall sign ersonnel, a person having that local agency has contracted with n.  ment and all attachments, and ormation is true, accurate and					
. ,	ite Vic#President - Sal		ter provides for	penuities up	to \$50,000 per violation.						
	7/					N/A					
NAME AND TITLE OF PRINGIPAL	EXECUTIVE OFFICER, A	AUTHORIZED AG	ENT, OR *LICENS	SED OPERATO		N/A GISTRY NUMBER (IF APPLICABLE)					
NAME AND TITLE OF PRINCIPAL EXEC	le				OR GRADE AND REG  02/22/2011  DATE						
SIGNATURE OF PRINCIPAL EXEC	UTIVE OFFICER, AUTHO	ORIZED AGENT, O	OR *LICENSED O	PERATOR	02/22/2011 DATE	856-339-1102 AREA CODE/PHONE NUMBER					
SIGNATURE OF PRINCIPAL EXECT *For a local agency where the high	UTIVE OFFICER, AUTHO hest-ranking operator do shall sign the following c	ORIZED AGENT, Ones not have the acceptification:	OR *LICENSED O	PERATOR  capital exper	02/22/2011 <b>DATE</b> Inditures and hire personnel,	856-339-1102  AREA CODE/PHONE NUMBER a person having that responsibility or					
*For a local agency where the hig person designated by that person	UTIVE OFFICER, AUTHO hest-ranking operator do shall sign the following c	ORIZED AGENT, Ones not have the acceptification:	OR *LICENSED O	PERATOR  capital exper	02/22/2011 <b>DATE</b> Inditures and hire personnel,	856-339-1102  AREA CODE/PHONE NUMBER a person having that responsibility or					

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

482A SW Outfall 482A

1/1/2011 TO 1/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

1430003622	4027	SW Outlan 40	2.A I	/1/2011	10 1/31/2011	F3EG NOCI	LEAR LLC SAL	EW GEN	IENA	i ir	
PARAMETER	X	QUANTITY (	OR LOADING	UNITS	QUALI	ITY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	417	446		****	*****	*****		٥	110in	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	******	*****	******	*****		1/Day	CALCTD
pH	SAMPLE MEASUREMENT	*****	*****		היר	*****	8.0		0	\week	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT.	******	******	*****	6.0 01DAMN	*****	9.0 01DAMX	su		1/Week	GRAB
pH ·	SAMPLE MEASUREMENT	*****	*****		7.8	*****	8.0		0	/week	GRAB
00400 7 Intake From Stream	PERMIT	*****	******	*****	REPORT 01DAMN	*****	REPORT 01DAMX	SU		1/Week	GRAB
LC50 Statre 96hr Acu	QL			<u> </u>					<u>*</u>	. Marin	
Cyprinodon	MEASUREMENT	****	****		CODE : H	*****	*****		0	CODE = M	CODE = N
TAN6A 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	50 01DAMN	*****	******	%EFFL		2/Year	COMPOS
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	****	****		****	C00E=H	CODE=N		0	CDJ€ = N	CODE = N
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	******	******	*****	*****	0.3 01MOAV	0.5 01DAMX	MG/L		3/Week	<b>GRAB</b>
Option 1 Chlorine Produced	QL					******					
Oxidants	SAMPLE MEASUREMENT	****	*****		*****	701	⟨०.1		٥	3/week	GRAB
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	******	******	*****	******	REPORT 01MOAV	0.2 01DAMX	MG/L	1.00	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

482A SW Outfall 482A

1/1/2011 TO 1/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

		On Gatian 10		,_0	NO. FREQ. OF SAMPLE									
PARAMETER	X	QUANTITY OR LOADING U			UNITS QUALITY OR CONCENTRATION					FREQ. OF ANALYSIS	SAMPLE TYPE			
Temperature,	SAMPLE MEASUREMENT	****	****		*****	10.1	14.8		0	1/Day	CONTIN			
00010 1 Effluent Gross Value	PERMIT REQUIREMENT:	*****	· · · · · · · · · · · · · · · · · · ·	*****	******	REPORT 01MOAV	REPORT 01DAMX	DEG.C		1/Day	CONTIN			
Lab Certification #	SAMPLE MEASUREMENT	17327	เวนรเ		PA ILG									
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #	-	REPORT Lab #	REPORT Lab #	REPORT.			Not Applic	NOT AP			
	<b>₩</b> ∳ QL	******	*****		****			L						

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           1         1         2011   To           Month         Day         Year           1         31         2011	483A – SW Ou	tfall 483A						
PERMITTEE:	LOCATION OF ACTIVITY:	REPORT REC	IPIENT:						
PSE&G NUCLEAR LLC	PSEG NUCLEAR LLC SALEM	PSEG NUCLEAR I							
80 PARK PLAZA	GENERATING STATION	PO BOX 236/N21							
NEWARK, NJ 07101	, NJ 07101 ALLOWAY CREEK NECK RD HANCOCKS BRIDGE, NJ 08038 HANCOCKS BRIDGE, NJ 08038								
	REGION / COUNTY: Southern / Salem C	County							
CHECK IF APPLICABLE:	No Discharge this Monitoring Period Mon	nitoring Report Commo	ents Attached						
	and the control of th	41.	the treatment works shall sign						
he certification. Where the hig esponsibility or person designa another entity to operate the treatestify under penalty of law that, based on my inquiry of the complete. I am aware that ther	hest ranking operator does not have the ability to authorize capital ted by that person shall also sign the second certification at the bot atment works, the highest-ranking official of the contracted entity stat I have personally examined and am familiar with the information se individuals immediately responsible for obtaining the information are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to	ttom of this page. If the shall sign the certification submitted in this doction, I believe that the inling the possibility of an	personnel, a person having that be local agency has contracted with on.  ument and all attachments, and aformation is true, accurate and and/or imprisonment, pursuant						
the certification. Where the highesponsibility or person designal 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	hest ranking operator does not have the ability to authorize capital ted by that person shall also sign the second certification at the bot atment works, the highest-ranking official of the contracted entity stat 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 New Jersey water Pollution Control Act provides for penalties up the Vice President - Salem	ttom of this page. If the shall sign the certification submitted in this doction, I believe that the ining the possibility of auto \$50,000 per violation	personnel, a person having that the local agency has contracted with on.  ument and all attachments, and afformation is true, accurate and and/or imprisonment, pursuant						
the certification. Where the highesponsibility or person designal 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	hest ranking operator does not have the ability to authorize capital ted by that person shall also sign the second certification at the bot atment works, the highest-ranking official of the contracted entity stat I have personally examined and am familiar with the information se individuals immediately responsible for obtaining the information are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to	ttom of this page. If the shall sign the certification submitted in this doction, I believe that the ining the possibility of auto \$50,000 per violation	personnel, a person having that to local agency has contracted with on.  ument and all attachments, and afformation is true, accurate and and/or imprisonment, pursuant in.						
the certification. Where the hig responsibility or person designal another entity to operate the treatment of law the chat, based on my inquiry of the complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The Carl J. Fricker, Signame and Title of Princer A.	hest ranking operator does not have the ability to authorize capital ted by that person shall also sign the second certification at the bot attment works, the highest-ranking official of the contracted entity stat I have personally examined and am familiar with the information se individuals immediately responsible for obtaining the information are significant penalties for submitting false information, include New Jersey water Pollution Control Act provides for penalties up to the Vice President - Salem  EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATO	ttom of this page. If the shall sign the certification submitted in this doction, I believe that the ining the possibility of auto \$50,000 per violation	personnel, a person having that be local agency has contracted with on.  ument and all attachments, and afformation is true, accurate and and/or imprisonment, pursuant and all agency because the management of t						
the certification. Where the hig responsibility or person designal another entity to operate the treatment of law the chat, based on my inquiry of the complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The Carl J. Fricker, Signame and Title of Princer A.	hest ranking operator does not have the ability to authorize capital ted by that person shall also sign the second certification at the bot atment works, the highest-ranking official of the contracted entity stat 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 New Jersey water Pollution Control Act provides for penalties up the Vice President - Salem	ttom of this page. If the shall sign the certification submitted in this doction, I believe that the inting the possibility of auto \$50,000 per violation.  GRADE AND RE	personnel, a person having that be local agency has contracted with on.  ument and all attachments, and afformation is true, accurate and and/or imprisonment, pursuant and all agency NUMBER (IF APPLICABLE)						
the certification. Where the highesponsibility or person designal another entity to operate the treatment of certify under penalty of law the that, based on my inquiry of the complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The Carl J. Fricker, Signame and Title of Principal SIGNATURE of Principal Executives.	hest ranking operator does not have the ability to authorize capital ted by that person shall also sign the second certification at the bot attment works, the highest-ranking official of the contracted entity stat I have personally examined and am familiar with the information se individuals immediately responsible for obtaining the information are significant penalties for submitting false information, include New Jersey water Pollution Control Act provides for penalties up to the Vice President - Salem  EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATO	ttom of this page. If the shall sign the certification submitted in this doction, I believe that the inting the possibility of an to \$50,000 per violation GRADE AND RE  02/22/2011 DATE	personnel, a person having that be local agency has contracted with on.  ument and all attachments, and offormation is true, accurate and ond/or imprisonment, pursuant in.  N/A  EGISTRY NUMBER (IF APPLICABLE)  856-339-1102  AREA CODE/PHONE NUMBER						
the certification. Where the high responsibility or person designal another entity to operate the treatment of law the chat, based on my inquiry of the complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The Carl J. Fricker, Signame and Title of Principal Signature of Principal Executive To a local agency where the high person designated by that person series of the signature of the	hest ranking operator does not have the ability to authorize capital ted by that person shall also sign the second certification at the bot attment works, the highest-ranking official of the contracted entity shall have personally examined and am familiar with the information see individuals immediately responsible for obtaining the information are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to the Vice President - Salem  EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR OPERATOR PROFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR OP	ttom of this page. If the shall sign the certification submitted in this doction, I believe that the inting the possibility of art to \$50,000 per violation or GRADE AND RE  O2/22/2011  DATE  ditures and hire personner	personnel, a person having that be local agency has contracted with on.  ument and all attachments, and iformation is true, accurate and ind/or imprisonment, pursuant in.  N/A  EGISTRY NUMBER (IF APPLICABLE)  856-339-1102  AREA CODE/PHONE NUMBER If, a person having that responsibility						
the certification. Where the high responsibility or person designal another entity to operate the treat operate the treat operate that the that, based on my inquiry of the complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The Carl J. Fricker, Signame and Title of Principal Signature of Principal executions of the complete of the person designated by that person signated by that person signated in the person designated in the person desig	hest ranking operator does not have the ability to authorize capital ted by that person shall also sign the second certification at the bot attment works, the highest-ranking official of the contracted entity shall have personally examined and am familiar with the information see individuals immediately responsible for obtaining the information are significant penalties for submitting false information, include New Jersey water Pollution Control Act provides for penalties up to the Vice President - Salem  EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR of the sign the following certification:	ttom of this page. If the shall sign the certification submitted in this doction, I believe that the inting the possibility of art to \$50,000 per violation or GRADE AND RE  O2/22/2011  DATE  ditures and hire personner	personnel, a person having that be local agency has contracted with on.  ument and all attachments, and afformation is true, accurate and and/or imprisonment, pursuant in.  N/A  EGISTRY NUMBER (IF APPLICABLE)  856-339-1102  AREA CODE/PHONE NUMBER If, a person having that responsibility						

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

483A SW Outfall 483A

1/1/2011 TO 1/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

1430003622	4034	SW Outlan 40	SA I	11/2011	10 1/31/2011	FSEG NUCI	LEAR LLC SAL	EIVI GEN	NENA	Hr	
PARAMETER	X	QUANTITY (	OR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	354	422		*****	****	*****		0	1/Day	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	******	***		1/Day	CALCTD
pH	SAMPLE MEASUREMENT	Aprilia Magazi makasa Mina *****	****		7.7	****	7.9		0	\/week	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	6.0 01DAMN	*****	9.0 01DAMX	su		1/Week	GRAB
pH	SAMPLE MEASUREMENT	*****	*****		7.8	*****	8.0		0	\meek	G-RAB
00400 7 Intake From Stream	PERMIT REQUIREMENT	******	******	. *****	REPORT 01DAMN	******	REPORT 01DAMX	SU		1/Week	GRAB
Chlorine Produced	SAMPLE	*****	*****		*****	******	******				
Oxidants	MEASUREMENT	******	No segui proper de la com		20. do 20. d	CODE=N	CODE = H		0	CODE = M	CODE = VI
*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	***	****		****	4011	<b>40.1</b>		0	3/week	GRAB
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*******	*****	*****	REPORT 01MOAV	0.2 01DAMX	MG/L		3/Week	GRAB
Option 2 Temperature,	QL	The Residence of the Control					*****				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
oC	SAMPLE MEASUREMENT	*****	*****		****	11.4	เรเา		٥	YDay	CONTIN
00010 1 Effluent Gross Value	PERMIT REQUIREMENT QL	*****	*******	*****	******	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.

#### Surrace water Discharge Wonitoring Report

PI 46814

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

483A SW Outfall 483A

1/1/2011 TO 1/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

PARAMETER		QUANTITY (	OR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PA 166	;					
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           1         1         2011           To         Month         Day         Year           1         31         2011	484A – SW Out	fall 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 RECI PSEG NUCLEAR L PO BOX 236/N21 HANCOCKS BRIDG	LC		
	REGION / COUNTY: Southern / Salem Co	ounty			
CHECK IF APPLICABLE:	No Discharge this Monitoring Period Monitoring R	Report Comments Attac	hed		
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 ther	the a person designated by that person. For a local agency, the higher tranking operator does not have the ability to authorize capital extended by that person shall also sign the second certification at the bott timent works, the highest-ranking official of the contracted entity shall have personally examined and am familiar with the information se individuals immediately responsible for obtaining the information are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to	expenditures and hire petom of this page. If the hall sign the certification submitted in this docuron, I believe that the infing the possibility of and	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		
Carl J. Fricket, Sit	e Vio€ President - Salem	_	N/A		
NAME AND TITLE OF PRINCIPAL I	EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	QRADE AND REC	856-339-1102		
SIGNATURE OF PRINCIPAL EXECU	TIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	DATE	AREA CODE/PHONE NUMBER		
	est-ranking operator does not have the ability to authorize capital expendentally in the following certification:	litures and hire personnel,	a person having that responsibility or		
I certify under penalty of law and in	accordance with N.J.S.A. 58:10A-6F(5) that I have reviewed the attached	d discharge monitoring rep	orts.		
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>		
NAME AND TITLE	SIGNATURE	DATE AREA CODE/PHONE NU			

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

484A SW Outfall 484A

1/1/2011 TO 1/31/2011

**PSEG NUCLEAR LLC SALEM GENERATIN** 

		. • • • • • • • • • • • • • • • • •		•						•••	
PARAMETER	X	QUANTITY	OR LOADING	UNITS	QUAL	ITY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	480	491		***	****	****		0	1 Day	CALCTIO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	anna.	*****		1/Day	CALCTD
рН	SAMPLE MEASUREMENT	****	****		7.7	*****	7.9		0	\week	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	*****		*****	6.0 01DAMN	*****	9.0 01DAMX	SU		1/Week	GRAB
рН	SAMPLE MEASUREMENT	*****	*****		7.8	*****	8.0		0	/week	GRA13
00400 7 Intake From Stream	PERMIT REQUIREMENT	*****	*****	*****	REPORT 01DAMN	*****	REPORT 01DAMX	SU		1/Week	GRAB
LC50 Statre 96hr Acu	QL SAMPLE	*****	*****			*****	*****			C- 001	COD€ = N
Cyprinodon TAN6A 1	MEASUREMENT				CODE = N				0	(ODE=N	COMPOS
Effluent Gross Value	REQUIREMENT	**************************************	*****	*****	01DAMN	*****	******	%EFFL	7.		
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	****		****	CODE = H	CO0E=14		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	*****	*****		*****	<b>₹ 0.1</b>	₹ 0.1		0	3/meek	Grab
Oxidants *CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	ALL PARTS	••••	*****	******	REPORT 01MOAV	0:2 01DAMX	MG/L		3/Week	GRAB
Option 2	<b>©QL</b> '⊹€	*****	******		******	/ D	*****				

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

1/1/2011 TO 1/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

1100000022		On Junian 10									
PARAMETER	X	QUANTITY OR LOADING			UNITS QUALITY OR CONCENTRATION					FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature,	SAMPLE MEASUREMENT	*****	*****		*****	8.01	8.21		0	Youn	CONTIN
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	And the state of t	######################################	*****	AAATAA	REPORT 01MOAV	REPORT 01DAMX	DEG.C		1/Day	CONTIN
Lab Certification #	SAMPLE MEASUREMENT	17327	17481		PA 166						
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT. Lab#		REPORT ** **Lab #	REPORT	REPORT Lab #			Not Applic	NOT AP
•	QL	****	*****		*****	*****	ARRAN CONTRACTOR				

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         Year           1         1         2011           To         1         31         2011	185A – SW Out	fall 485A
PERMITTEE:	LOCATION OF ACTIVITY:	REPORT RECI	PIENT:
PSE&G NUCLEAR LLC	PSEG NUCLEAR LLC SALEM	PSEG NUCLEAR L	
80 PARK PLAZA	GENERATING STATION	PO BOX 236/N21	
NEWARK, NJ 07101	ALLOWAY CREEK NECK RD	HANCOCKS BRIDG	GE, NJ 08038
	HANCOCKS BRIDGE, NJ 08038		
	REGION / COUNTY: Southern / Salem Co	ninty	
CHECK IF APPLICABLE		eport Comments Attac	hed
responsibility or 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 e ated by that person shall also sign the second certification at the botto 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 re are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to	om of this page. If the hall sign the certification submitted in this document, I believe that the infing the possibility of and	local agency has contracted with n. nent and all attachments, and ormation is true, accurate and
responsibility or person designation another entity to operate the treat 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	ated by that person shall also sign the second certification at the botto eatment works, the highest-ranking official of the contracted entity shall have personally examined and am familiar with the information ose 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	om of this page. If the hall sign the certification submitted in this document, I believe that the infing the possibility of and	local agency has contracted with n.  ment and all attachments, and ormation is true, accurate and d/or imprisonment, pursuant
responsibility or 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 to N.J.A.C. 7:14A-6.9(B). The Carl J. Fricker, St.	ated by that person shall also sign the second certification at the botto 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 re are significant penalties for submitting false information, including	om of this page. If the hall sign the certification submitted in this document, I believe that the infing the possibility of and \$50,000 per violation.	local agency has contracted with  n.  ment and all attachments, and  primation is true, accurate and
responsibility or 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 to N.J.A.C. 7:14A-6.9(B). The Carl J. Fricker, St.	ated by that person shall also sign the second certification at the botto 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 re are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to ite Vice President - Salem	om of this page. If the hall sign the certification submitted in this document, I believe that the infing the possibility of and \$50,000 per violation.	local agency has contracted with n.  ment and all attachments, and ormation is true, accurate and dor imprisonment, pursuant  N/A
responsibility or person designanother entity to operate the treat 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  Carl J. Fricker, S. NAME AND TITLE OF PROYCIPLE.	ated by that person shall also sign the second certification at the botto 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 re are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to ite Vice President - Salem	om of this page. If the hall sign the certification submitted in this document, I believe that the infing the possibility of and \$50,000 per violation.	local agency has contracted with n.  ment and all attachments, and ormation is true, accurate and d/or imprisonment, pursuant  N/A  SISTRY NUMBER (IF APPLICABLE)
responsibility or person designanother entity to operate the treat 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  Carl J. Fricker, S.  NAME AND TITLE OF PRINCIPAL  SIGNATURE OF PRINCIPAL EXECT  *For a local agency where the high	ated by that person shall also sign the second certification at the botto 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 re are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to ite Vice President - Salem  EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	om of this page. If the hall sign the certification submitted in this documen, I believe that the inferior of the possibility of and \$50,000 per violation.  GRADE AND RECOUNTY OF THE DATE	local agency has contracted with n.  ment and all attachments, and ormation is true, accurate and d/or imprisonment, pursuant  N/A  SISTRY NUMBER (IF APPLICABLE)  856-339-1102  AREA CODE/PHONE NUMBER
responsibility or person designanother entity to operate the treat another entity to operate the treat 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 Carl J. Fricker, S. NAME AND TITLE OF PRINCIPAL EXECT SIGNATURE OF PRINCIPAL EXECT As a local agency where the hig person designated by that person	ated by that person shall also sign the second certification at the botto 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 re are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to ite Vice President - Salem  EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR  EVECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR  CHEST-ranking operator does not have the ability to authorize capital expenditure.	om of this page. If the hall sign the certification submitted in this documen, I believe that the information of the possibility of and \$50,000 per violation.  GRADE AND RECURSIVE THE BATE  GRADE and hire personnel,	local agency has contracted with n.  ment and all attachments, and ormation is true, accurate and allor imprisonment, pursuant  N/A  SISTRY NUMBER (IF APPLICABLE)  856-339-1102  AREA CODE/PHONE NUMBER a person having that responsibility
responsibility or person designanother entity to operate the treat 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 Carl J. Fricker, S. NAME AND TITLE OF PRINCIPAL EXECT *For a local agency where the hig person designated by that person	atted by that person shall also sign the second certification at the botto 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 re are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to ite Vice President - Salem  EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR  CUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR  Chest-ranking operator does not have the ability to authorize capital expendituses shall sign the following certification:	om of this page. If the hall sign the certification submitted in this documen, I believe that the information of the possibility of and \$50,000 per violation.  GRADE AND RECURSIVE THE BATE  GRADE and hire personnel,	local agency has contracted with n.  ment and all attachments, and ormation is true, accurate and allor imprisonment, pursuant  N/A  SISTRY NUMBER (IF APPLICABLE)  856-339-1102  AREA CODE/PHONE NUMBER a person having that responsibility

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

485A SW Outfall 485A

1/1/2011 TO 1/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

	7037	Cow Outlan 40	JA 1.	7172011	10 1/31/2011	rola Noc	LEAN LLC SAL	.EW GEN	ILNA	ir	
PARAMETER	X	QUANTITY	OR LOADING	UNITS	QUAL	ITY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	430	446		*****	****	*****		0	YDay	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	******	*****	*****	*****		1/Day	CALCTD
pH	SAMPLE MEASUREMENT	*****	*****		7.7	*****	7.9		0	Yweek	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	**************************************	*****	*****	6.0 01DAMN	*****	9.0 01DAMX	su	5 13.4°	1/Week	GRAB
pH	SAMPLE MEASUREMENT	*****	*****	<u> </u>	7.8	****	8.0		0	Yweek	GRAB
00400 7 Intake From Stream	PERMIT REQUIREMENT	******	******	*****	REPORT 01DAMN	*****	REPORT 01DAMX	su		1/Week	GRAB
LC50 Statre 96hr Acu	SAMPLE MEASUREMENT	*****	*****		(DDE=H	*****	*****		0	CoD€ =N	CODE=N
Cyprinodon TAN6A 1 Effluent Gross Value	PERMIT. REQUIREMENT	******	*****	*****	50 01DAMN	ATTANT	******	%EFFL		2/Year	COMPOS
Chlorine Produced	SAMPLE MEASUREMENT	*****	*****		*****	CODE = N	COD& = VI		0	CODE>H	CODE = N
Oxidants  *CPOX 1  Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	******	0.3 01MOAV	0.5 01DAMX	MG/L		3/Week	GRAB
Option 1 Chlorine Produced	SAMPLE MEASUREMENT	· · · · · · · · · · · · · · · · · · ·	****		*****	ζο. <b>ι</b>	₹0.1	_	0	3/week	CRAB
Oxidants *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

1/1/2011 TO 1/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

PARAMETER		QUANTITY (	OR LOADING	UNITS	UNITS QUALITY OR CONCENTRATION				NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature, oC	SAMPLE MEASUREMENT	****	****		****	10.5	12.0		٥	1004	CONTIN
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	******	******	***	AAAAAA AAAAAA	REPORT 01MOAV	REPORT 01DAMX	DEG.C		1/Day	CONTIN
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PA 166						
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		M	ONITO	RING	PERIO	D			MONITO	RED LOCATION:
NJ0005622	Month 1	Day 1	Year 2011	То	Month 1	Day 31	Year 2011	486A -	- SW Out	fall 486A
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101			LOCAT PSEG NU GENERA' ALLOWA HANCOC	CLEAR TING S Y CRE	LLC SA TATION EK NECK	LEM RD	į	PSEG PO BO	ORT RECI NUCLEAR L DX 236/N21 COCKS BRID	LC
			REG	ION / C	COUNTY:	Souther	n / Salem	County		
CHECK IF APPLICABLE:	No No	Dischar	ge this Mo	nitorin	g Period	$\square$ N	Ionitoring	Report Co	mments Attac	hed
the certification or, in his absent the certification. Where the hig responsibility or person designa another entity to operate the treat I certify under penalty of law that, based on my inquiry of the complete. I am aware that ther to N.J.A.C. 7:14A-6.9(B). The	hest rankin ted by that atment wor at I have po se individu e are signif	g operate person seeks, the heersonally talk immages	or does no shall also s ighest-rand examined ediately renalties for	t have t ign the king off I and ar esponsil submit	he ability second ce ficial of the familiar ole for obtaing false	to autho rtification to contract with the caining the information.	rize capita n at the bo eted entity informati e informa tion, inclu	I expenditude the shall sign to submitte tion, I belied the po	res and hire possible page. If the he certification d in this docuve that the infessibility of an	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
Carl J. Fricker, Sit	e Vice Pre	sident - S	Salem							N/A
NAME AND TITLE OF PRINCIPAL I	XEQUTIVE	OFFICEI	R, AUTHORI	ZED AG	ENT, OR *	LICENSE	D OPERAT	OR G	02/22/2011	SISTRY NUMBER (IF APPLICABLE)  856-339-1102
SIGNATURE OF PRINCIPAL EXECU	TIVE OFFI	CER, AUT	HORIZED A	GENT,	OR *LICE!	NSED OPE	RATOR	DAT	E	AREA CODE/PHONE NUMBER
person designated by that person s	hall sign the	followin	g certificati	on:						a person having that responsibility or
I certify under penalty of law and in	accordance	with N	J.S.A. 58:10	)A-6F(5)	) that I hav	e reviewe	d the attacl	ed discharge	monitoring rep	ports.
<u>N/A</u>					N/A	. <u> </u>			<u>N/A</u>	<u>N/A</u>
NAME AND TITLE			SIGNATU	RE				DATE		AREA CODE/PHONE NUMBER

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

486A SW Outfall 486A

1/1/2011 TO 1/31/2011

**PSEG NUCLEAR LLC SALEM GENERATIN** 

	4007	SW Outlan 40	<b>7</b> 1,	,,,_0	0 1/01/2011	. 024 .100.	TELM GENERALII				
PARAMETER		QUANTITY (	OR LOADING	UNITS	QUALI	QUALITY OR CONCENTRATION				FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	323	422		****	****	***		0	You	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	******	*****	*****		1/Day	CALCTD
рН	SAMPLE MEASUREMENT	*****	*****		7.7	*****	7.9		0	/meck	BAAJ
00400 1 Effluent Gross Value	PERMIT	******	*****	*****	6.0 01DAMN	****	9.0 01DAMX	SU		1/Week	GRAB
pH	SAMPLE MEASUREMENT	*****	****		7.8	*****	8.0		0	Yweek	GRAB
00400 7 Intake From Stream	PERMIT REQUIREMENT	*****	******	*****	REPORT 01DAMN	*****	REPORT 01DAMX	SU	24,0 -880 2 - 2 - 280 2 - 2 - 280	1/Week	GRAB
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	****		*****	CODE=H	CODE = N		0	COPE-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	*****	****		*****	<b>ζο.</b> (	40.1		0	3/week	GRAB
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	••••	*****	*****		REPORT 01MOAV	0.2 01DAMX	MG/L	257	3/Week	GRAB
Option 2 Temperature,	QL	******	******		******	******	******			I .	
oC	SAMPLE MEASUREMENT	*****	****		*****	12.7	17.6		0	Noat	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

1/1/2011 TO 1/31/2011

**PSEG NUCLEAR LLC SALEM GENERATIN** 

PARAMETER	X	QUANTITY (	OR LOADING	UNITS	QUALI	TY OR CONCENTR	ATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PA 166						<u>,</u>
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		N	IONITO	RING	PERIO	D			MONITO	ORED LOCATION:				
NJ0005622	Month 1	Day 1	Year 2011	То	Month 1	Day 31	Year 2011	487B -	B – 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  PREPORT RECIPIENT: PSEG NUCLEAR LLC PO BOX 236/N21 HANCOCKS BRIDGE, NJ 08038													
			REG	ION / C	COUNTY:	Souther	n / Salem	County						
CHECK IF APPLICABLE:	$\bigsqcup_{N_0}$	Dischar	ge this Mo	nitorin	g Period		Monitori	ing Report	Comments A	ttached				
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	hest ranking ted by that the the that the the the the the the the the the th	ng operate person so when the hersonally uals immediate ficant personally water F	for does not shall also shall also shall also shall also shall be	ot have the sign the king of dand and ane esponsitions.	the ability second ce ficial of the familiar ble for obtaining false	to authortification to contract with the aining the informa	rize capita on at the b cted entity informati ne information, inclu	al expendituottom of the value	tres and hire page. If the the certification of this document that the irossibility of a	personnel, a person having that e local agency has contracted with on.  ument and all attachments, and aformation is true, accurate and and/or imprisonment, pursuant of the contraction is true.				
Carl J. Fricker, Si										<u>N/A</u>				
NAME AND TITLE OF PRINCIPAL	EXECUTIVE	OFFICEI	R, AUTHOR	IZED AC	GENT, OR *	LICENSE	D OPERAT	OR (	02/22/2011	EGISTRY NUMBER (IF APPLICABLE)  856-339-1102				
SIGNATURE OF PRINCIPAL EXEC	JTIVE OFFI	CER, AUT	THORIZED A	AGENT,	OR *LICE	ISED OPI	ERATOR	DAT	re	AREA CODE/PHONE NUMBER				
*For a local agency where the high person designated by that person s					ability to au	thorize c	apital expe	nditures and	hire personne	l, a person having that responsibility or				
I certify under penalty of law and in	n accordanc	e with N	J.S.A. 58:10	OA-6F(5	) that I have	e reviewe	d the attacl	hed discharge	e monitoring re	eports.				
I certify under penalty of law and in N/A	accordanc	e with N.	J.S.A. 58:10	OA-6F(5	) that I have <u>N/A</u>	e reviewe	d the attacl	hed discharg	e monitoring re	eports. <u>N/A</u>				

PERMIT NUMBER: MONITORED LOCATION: MONITORING PERIOD: FACILITY NAME:

PSEG NUCLEAR LLC SALEM GENERATIN NJ0005622 487B SW Outfall 487B 1/1/2011 TO 1/31/2011 FREQ. OF SAMPLE QUANTITY OR LOADING QUALITY OR CONCENTRATION PARAMETER UNITS UNITS EX. ANALYSIS TYPE Flow, in Conduit or SAMPLE MEASUREMENT 0.0000 0000.0 CALCTO Thru Treatment Plant 50050 1 MGD Effluent Gross Value Hq Parch 7.7 GAAB 00400 1 Effluent Gross Value Solids, Total Beach SAMPLE MEASUREMEN GRAB 42 Suspended 00530 1 MG/L Effluent Gross Value Temperature, 16.9 16.9 GRAB oc 00010 1 DEGLC Effluent Gross Value Petroleum 12 BOTCH GRAB Hydrocarbons 00551 1 MG/L Effluent Gross Value Carbon, Tot Organic SAMPLE GRAB BATCH (TOC) 00680 1 MG/L Effluent Gross Value

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".

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

487B SW Outfall 487B

1/1/2011 TO 1/31/2011

**PSEG NUCLEAR LLC SALEM GENERATIN** 

PARAMETER	X	QUANTITY (	OR LOADING	UNITS	QUALI	TY OR CONCENTR	ATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		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".

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

NJPDES PERMIT	N	<b>10NITOR</b>	ING P	PERIO	D			MONIT	ORED LOCATION:		
NJ0005622	Month Day	Year 2011	То	Month 1	Day 31	Year 2011	489A	- SW Ou	ıtfall 489A		
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101	G NUCLEAR LLC PSEG NUCLEAR LLC SALEM PSEG NUCLEAR LLC RK PLAZA GENERATING STATION PO BOX 236/N21										
		REGIO	ON / CO	UNTY:	Souther	n / Salem	County				
CHECK IF APPLICABLE:	No Discha	rge this Moni	itoring l	Period		Monitori	ng Repoi	t Comments A	ttached		
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	hest ranking operated by that person atment works, the at I have personall use individuals imple are significant power of the serious personal pers	tor does not leshall also signighest-ranking examined anediately responding for sealties for sea	have the gn the se ng offic and am t ponsible ubmittir	e ability to econd certical of the familiar e for obtaing false	to authoratification to contract the contract with the contract the co	rize capita n at the bo ted entity informati e informa ion, inclu-	of expend of shall sign on submittion, I be ding the	itures and hire this page. If the number of the certificat tted in this docalieve that the inpossibility of a	personnel, a person having that e local agency has contracted with ion.  cument and all attachments, and afformation is true, accurate and and/or imprisonment, pursuant n.		
	te Vice President -								<u>N/A</u>		
NAME AND TITLE OF PRINCIPAL	EXPCUTIVE OFFICE	R, AUTHORIZ	ED AGEN	NT, OR *I	LICENSE	D OPERATO	OR 	GRADE AND R 02/22/2011	EGISTRY NUMBER (IF APPLICABLE)  856-339-1102		
SIGNATURE OF PRINCIPAL EXECU	FIVE OFFICER, AU	THORIZED AC	GENT, OF	R *LICEN	SED OPE	RATOR	D	ATE	AREA CODE/PHONE NUMBER		
person designated by that person s	hall sign the followi	ng certification	n:	·				•	el, a person having that responsibility or		
I certify under penalty of law and in	n accordance with N	.J.S.A. 58:10A	x-6F(5) th	hat I have	reviewe	d the attach	ned discha	rge monitoring r	eports.		
<u>N/A</u>			<u>N</u>	√A				<u>N/A</u>	N/A		
NAME AND TITLE		SIGNATUR	E				DAT	Ē	AREA CODE/PHONE NUMBER		

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

489A SW Outfall 489A

1/1/2011 TO 1/31/2011

**PSEG NUCLEAR LLC SALEM GENERATIN** 

PARAMETER	X	QUANTITY	OR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	0.0209	0.0209		****	*****	*****		0	Month	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	******	*****	******	*****		1/Month	CALCTD
pH	SAMPLE MEASUREMENT	****	*****		7.5	*****	7.5		٥	Month	GAAB
00400 1 Effluent Gross Value	PERMIT	*****		*****	6.0 01DAMN	*****	9.0 01DAMX	SU		1/Month	GRAB
Solids, Total	SAMPLE MEASUREMENT	*****	*****		6	6	*****	-	0	1/month	Grab
00530 1 Effluent Gross Value	PERMIT	******	******	*****	100 01DAMX	30 01MOAV	* <b>****</b>	MG/L		1/Month	GRAB
Petroleum Hydrocarbons	SAMPLE MEASUREMENT	*****	*****	<u> </u>	*****	45	45		0	Month	GRAB
00551 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	****	10 01MOAV	15 01DAMX	MG/L		1/Month	GRAB
Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	*****	*****		*****	۷	4		٥	1/WORLH	GRAS
00680 1 Effluent Gross Value	PERMIT REQUIREMENT	******	*****	*****	*****	REPORT 01MOAV	50 01DAMX	MG/L		1/Month	GRAB
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
	QL *	*****	*****		*****	*****	*****		á Š		

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".