

JUN 2 0 2011 SCH11-020

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
ARTICLE NUMBER: 7007 2560 0002 0170 4670

401-02B Division of Water Quality Office of Permit Management P.O. Box 420 Trenton, N.J. 08625-0420

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 May 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

Sincere

Site Vice President - Salem

IE25 MRR Attachment (12 DMR's)

The Arms of the Control

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

Section 1

EXPLANATION OF CONDITIONS

May 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

May :	2011
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The following of	exceedance(s)	are included	I in the a	attached	report and	explained
helow						

DSN No.

EXPLANATION

None.

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 20 day of June 2011

SHERIL KEYES
Commission # 2051967
Notary Public, State of New Ja
My Commission Expires
January 15, 2014

BC Site Vice President – Salem
Director – Regulatory Affairs
Nuclear Environmental Affairs - Manager
Helen Gregory
Chem File SCH11-020

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

	MONITORING PERIO	ONITORING PERIOD MONITORED LOCAT							
NJ0005622	Month Day Year 05 1 2011 To 05	Day Year 31 2011	FACA – SW Outfall FACA						
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101	LOCATION OF ACT PSEG NUCLEAR LLC SA GENERATING STATION ALLOWAY CREEK NEC HANCOCKS BRIDGE, N.	REPORT RECIPIENT: PSEG NUCLEAR LLC PO BOX 236/N21 HANCOCKS BRIDGE, NJ 08038							
	REGION / COUNTY	∕: Southern / Salem C	County						
CHECK IF APPLICABLE	: No Discharge this Monitoring Period	Monitoring l	Report Comments Atta	ched					
another entity to operate the tre	ated by that person shall also sign the second of satment works, the highest-ranking official of sattle have personally examined and am familia	the contracted entity s	shall sign the certification						
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MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

FACA SW Outfall FACA

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

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

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

MONITORING PERIOD

NJPDES PERMIT

NJ0005622	Month Day 05 1	Year 2011	To Montl	Day 31	Year 2011	FACB – SW O	utfall FACB
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101		PSEG NUCL GENERATIN ALLOWAY	ON OF AC LEAR LLC S. NG STATION CREEK NEC S BRIDGE, N.	ALEM K RD	<u>:</u>	REPORT REC PSEG NUCLEAR I PO BOX 236/N21 HANCOCKS BRID	LLC
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MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

FACB SW Outfall FACB

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

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Temperature,	SAMPLE MEASUREMENT	*****	****		*****	8.2	12.3		0	1/0ay	CALCTO
00010 2 Effluent Net Value	PERMIT. REQUIREMENT	*****		*****	***	REPORT 01MOAV	15.3 01DAMX	DEG.C		1/Day	CALCTD
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PA 166	*****	*****		<u> </u>	California (Carlos Carlos Carl	
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Comments: If there are any questions in regards to the monitoring report form, please contact Susan Rosenwinkel of the BPSP - Region 2 at (609)292-4860 or via email at "srosenwi@dep.state.nj.us".

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

MONITORING PERIOD

NJ0005622	Month Day 05 1	Year 2011	Month 05	Day 31	Year 2011	FACC – SW O	outfall FACC
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101	CIPIENT: LLC DGE, NJ 08038						
		REGION	/ COUNTY:	Souther	n / Salem	County	·
CHECK IF APPLICABLE:	No Disch	arge this Moni	toring Period	!		Monitoring Report Com	ments Attached
the certification. Where the high responsibility or person designation another entity to operate the treat. I certify under penalty of law that that, based on my inquiry of the complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The Carl J. Fricker, Sit	ed by that person setment works, the least I have personally se individuals immediate significant personal pers	shall also sign nighest-ranking y examined and ediately respondities for sub Pollution Conti	the second ce official of the d am familiar nsible for obt mitting false	rtification e contraction with the aining the informa	on at the bected entity information including including inclusion	ottom of this page. If the shall sign the certification submitted in this doction, I believe that the idding the possibility of a	te local agency has contracted with ion. cument and all attachments, and information is true, accurate and and/or imprisonment, pursuant
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*For a local agency where the high person designated by that person s I certify under penalty of law and in	est-ranking operator hall sign the followin	r does not have ing certification:	the ability to an	uthorize c	apital expe	-	AREA CODE/PHONE NUMBER el, a person having that responsibility or reports.
N/A			N/A			N/A	N/A
NAME AND TITLE		SIGNATURE	19/71			DATE	AREA CODE/PHONE NUMBER

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

FACC SW Outfall FACC

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

1400003022	IAC	C Sw Outlan 17	100 3	/ 1/2011	10 3/3 1/2011	F3EG NOCL	LEAN LLC SAL	LW GEN	IENA	1 11	
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	2139	2626		****	*****	*****		Ò	1/004	CALCTO
50050 G Raw Sew/influent	PERMIT REQUIREMENT	3024 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	*****		1/Day	CALCTD
Thermal Discharge Million BTUs per Hr	SAMPLE MEASUREMENT	12815	16621		****	****	*****	<u> </u>	0	Your	CALCTO
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99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT		REPORT Lab#	REPORT Lab #	RÉPORT Lab #			Not Applic	NOT AP
	QL	******	****	<u> </u>	2*************************************	*****	**********				

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

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

MONITORING PERIOD

NJ0005622	Month Day Year 05 1 2011	— T_ ——————————————————————————————————	048C - SW O	utfall 48C						
PERMITTEE: PSE&G NUCLEAR LLC PSE&G NUCLEAR LLC SO PARK PLAZA PSEG NUCLEAR LLC SO PARK PLAZA SO PARK, NJ 07101 ALLOWAY CREEK NECK RD HANCOCKS BRIDGE, NJ 08038 REPORT RECIPIENT: PSEG NUCLEAR LLC PSEG NUCLEAR LLC PO BOX 236/N21 HANCOCKS BRIDGE, NJ 08038										
	REC	GION / COUNTY: Southern /	Salem County							
CHECK IF APPLICABLE	E: No Discharge this Mo	onitoring Period Mon	itoring Report Comments At	tached						
responsibility or person desig another entity to operate the t I certify under penalty of law that, based on my inquiry of t complete. I am aware that th	nated by that person shall also reatment works, the highest-ran that I have personally examine hose individuals immediately i	sign the second certification and anking official of the contracted and am familiar with the intresponsible for obtaining the intresponsible for obtaining the intresponsible for submitting false information	the bottom of this page. If the entity shall sign the certifical cormation submitted in this donormation, I believe that the possibility of	ocument and all attachments, and information is true, accurate and and/or imprisonment, pursuant						
Carl J. Fricker,	Site Vice President - Salem			N/A						
	L EXECUTIVE OFFICER, AUTHOR	RIZED AGENT, OR *LICENSED O	PERATOR GRADE AND I 06/20/201	REGISTRY NUMBER (IF APPLICABLE)						
SIGNATURE OF PRINCIPAL EXE	CUTIVE OFFICER, AUTHORIZED	AGENT, OR *LICENSED OPERA	TOR DATE	AREA CODE/PHONE NUMBER						
	ighest-ranking operator does not in the shall sign the following certification.		al expenditures and hire person.	nel, a person having that responsibility o						
I certify under penalty of law and	d in accordance with N.J.S.A. 58:	10A-6F(5) that I have reviewed th	e attached discharge monitoring	reports.						
<u>N/A</u>		<u>N/A</u>	N/A	<u>N/A</u>						
NAME AND TITLE	SIGNAT	URE	DATE	AREA CODE/PHONE NUMBER						

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

048C SW Outfall 48C

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

1400005622	0480	SW Outlan 40	5	1/2011 1	0 5/3 1/2011	PSEG NUCL	LEAR LLC SAL	EW GEN	ICNA	ID	
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.\$380	0.7876		*****	*****	*****		0	1/0ay	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	****	****	*****		1/Day	CALCTD
Solids, Total Suspended	SAMPLE MEASUREMENT	*****	*****		*****	7	8		0	2/month	Compos
00530 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	****	*****	*****	30 01MOAV	100 01DAMX	MG/L		2/Month	COMPOS
Nitrogen, Ammonia	QL. SAMPLE MEASUREMENT	****	*****		*****	4	U	<u> </u>		2/montu	compos
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Petroleum Hydrocarbons	SAMPLE MEASUREMENT	****	*****		****	⟨5	۷5		٥	2/month	GRAB
00551 1 Effluent Gross Value	PERMIT REQUIREMENT	******	*****	*****	*****	10 01MOAV	15 01DAMX	MG/L		2/Month	GRAB
Carbon, Tot Organic	SAMPLE MEASUREMENT	****	*****		*****	3	3		0	2/month	compos
00680 1 Effluent Gross Value	PERMIT REGUIREMENT	******	******	*****	*****	REPORT 01MOAV	50 01DAMX	MG/L		2/Month	COMPOS
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PA 166				1		
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab#	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab#			Not Applic	NOT AP
	" QL	*****	*****	<u></u>	*****	*****	*****		# 1 F		

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".

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

MONITORING PERIOD

NJ0005622	Month Day Year To Month Day Year 4	81A – SW Out	fall 481A
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 Cou	unty	
CHECK IF APPLICABLE	: No Discharge this Monitoring Period Monitoring Re	eport Comments Attac	ched
responsibility or person design	ghest ranking operator does not have the ability to authorize capital exacted by that person shall also sign the second certification at the botto pattern works, the highest-ranking official of the contracted entity sha	om of this page. If the	local agency has contracted with
responsibility or person design another entity to operate the tre I certify under penalty of law to that, based on my inquiry of th complete. I am aware that the		om of this page. If the all sign the certification submitted in this docum, I believe that the infig the possibility of an	local agency has contracted with on. ment and all attachments, and formation is true, accurate and d/or imprisonment, pursuant
responsibility or person design 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	ated by that person shall also sign the second certification at the botto satment works, the highest-ranking official of the contracted entity shant I have personally examined and am familiar with the information sose 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 all sign the certification submitted in this docum, I believe that the infig the possibility of an	local agency has contracted with on. ment and all attachments, and formation is true, accurate and d/or imprisonment, pursuant
responsibility or person design another entity to operate the tree I certify under penalty of law to that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Carl J. Fricker, S.	ated by that person shall also sign the second certification at the botto eatment works, the highest-ranking official of the contracted entity shanat I have personally examined and am familiar with the information sose individuals immediately responsible for obtaining the information are are significant penalties for submitting false information, including	om of this page. If the all sign the certification submitted in this docum, I believe that the infig the possibility of an \$50,000 per violation.	local agency has contracted with on. ment and all attachments, and formation is true, accurate and d/or imprisonment, pursuant N/A GISTRY NUMBER (IF APPLICABLE)
responsibility or person design another entity to operate the tree. I certify under penalty of law to that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Carl J. Fricker, S. NAME AND TITLE OF PRINCIPAL	ated by that person shall also sign the second certification at the botto eatment works, the highest-ranking official of the contracted entity shanat I have personally examined and am familiar with the information cose 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 the Vice President - Salem EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	om of this page. If the all sign the certification submitted in this docum, I believe that the infig the possibility of an \$50,000 per violation.	local agency has contracted with on. ment and all attachments, and formation is true, accurate and d/or imprisonment, pursuant N/A
responsibility or person design another entity to operate the tree. I certify under penalty of law to that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Carl J. Fricker, S. NAME AND TITLE OF PRINCIPAL EXECT *For a local agency where the high	atted by that person shall also sign the second certification at the botto eatment works, the highest-ranking official of the contracted entity shanat I have personally examined and am familiar with the information cose individuals immediately responsible for obtaining the information are are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to the Vice President - Salem	om of this page. If the all sign the certification submitted in this docum, I believe that the infigure the possibility of an \$50,000 per violation. GRADE AND RECOMPAND AND AND AND AND AND AND AND AND AND	local agency has contracted with on. Imment and all attachments, and formation is true, accurate and id/or imprisonment, pursuant N/A GISTRY NUMBER (IF APPLICABLE) 856-339-1102 AREA CODE/PHONE NUMBER
responsibility or person design another entity to operate the tree I certify under penalty of law to that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Carl J. Fricker, S NAME AND TITLE OF PRINCIPAL EXECT *For 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 shant I have personally examined and am familiar with the information cose 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 expenditures.	om of this page. If the all sign the certification submitted in this docum, I believe that the infigure that possibility of an \$50,000 per violation. GRADE AND RECOMPAND TECOMPAND TECOM	local agency has contracted with on. Imment and all attachments, and formation is true, accurate and id/or imprisonment, pursuant N/A GISTRY NUMBER (IF APPLICABLE) 856-339-1102 AREA CODE/PHONE NUMBER a person having that responsibility or
responsibility or person design another entity to operate the tree I certify under penalty of law to that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The 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 shant I have personally examined and am familiar with the information cose 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 expenditusial sign the following certification:	om of this page. If the all sign the certification submitted in this docum, I believe that the infigure that possibility of an \$50,000 per violation. GRADE AND RECOMPAND TECOMPAND TECOM	local agency has contracted with on. Imment and all attachments, and formation is true, accurate and id/or imprisonment, pursuant N/A GISTRY NUMBER (IF APPLICABLE) 856-339-1102 AREA CODE/PHONE NUMBER a person having that responsibility or

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

481A SW Outfall 481A

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

NJ0005622	4014	SW Outlan 46	IA 3/	1/2011	0 3/3 1/2011	F3LG NOCE	LEAN LLC SAL	LIVI GLIV	ILNA) III	
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	455	498		*****	*****	*****		0	11004	CALCTD
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	******	*****	******	*****	2000 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	1/Day	CALCTD
pH	SAMPLE	南南金布省	****	<u></u>	*****					1	ANATO AND S
	MEASUREMENT	****	*****		6.9	****	7.9		0	, meak	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	******	6:0 01DAMN	*****	9.0 01DAMX	SU		1/Week	GRAB
	QL ****	*****	*****		*****	*****	*****			- 100 m	
pH	SAMPLE MEASUREMENT	*****	*****		7.0	****	7.8		٥	\\week	GRAB
00400 7 Intake From Stream	PERMIT REQUIREMENT	******	**************************************	*****	REPORT 01DAMN	******	REPORT 01DAMX	su	10300210 134	1/Week	GRAB
	QL*	*****	***		***	****	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$; `.		
LC50 Statre 96hr Acu Cyprinodon	SAMPLE MEASUREMENT	*****	*****		CODE = N	****	*****		0	CODE:H	CODE=N
TAN6A 1 Effluent Gross Value	PERMIT REQUIREMENT		*****	*****	50 01DAMN	*****	****	%EFFL		2/Year	COMPOS
	, QL	******	*****		******	*****	*****		· · · · · · · · · · · · · · · · · · ·		1 100 TOURS
Chlorine Produced	SAMPLE MEASUREMENT	*****	****		*****	CODE: H	CODEIN		0	CODE=N	CODE = N
Oxidants *CPOX 1						0.3	0.5		17,73	3/Week	GRAB
Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	******	*****	01MOAV	01DAMX	MG/L			. matter
Option 1	QL	****	*****		*****	*****	*****		0.79		
Chlorine Produced	SAMPLE MEASUREMENT	*****	****		*****	20.1	Lo.1		0	31 week	GAAB
Oxidants				_		<u> </u>			10000	IWER	
*CPOX 1	PERMIT REQUIREMENT	*****	trick de de	*****	*****	REPORT 01MOAV	0.2 01DAMX	MG/L		3/Week	GRAB
Effluent Gross Value Option 2	QL .	*****	**************************************		******	*****	******				
Opiloli z	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<u> 1-27-1-32第二十美元年代</u>	1	<u> 1 488 - 247 - 4688 </u>			<u>L.</u>	M0.44	1 48, 438,000	11 18 18 18 18 18 18 18 18 18 18 18 18 1

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

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

481A SW Outfall 481A

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

PARAMETER		QUANTITY (OR LOADING	UNITS	QUALI	TY OR CONCENTR	IATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature,	SAMPLE MEASUREMENT	*****	*****		*****	28.6	37.1		٥	Your	CONTIN
00010 1 Effluent Gross Value	PERMIT REQUIREMENT.	*****	*****	*****	****	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	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.

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

MONITORING PERIOD

NJ0005622	Month Day 05 1	Y Year To 2011	Month Day 05 31	2011	482A – SW Out	tfall 482A
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101		LOCATION OF PSEG NUCLEAR GENERATING SELLOWAY CREHANCOCKS BR	TATION EK NECK RD	•	REPORT REC PSEG NUCLEAR I PO BOX 236/N21 HANCOCKS BRID	LC
		REGION / C	COUNTY: Souther	rn / Salem C	County	
CHECK IF APPLICABLE:	No Disch	arge this Monitorin	g Period	Monitoring (Report Comments Atta	ched
who must sign The high the certification or, in his absend the certification. Where the high responsibility or person designal another entity to operate the treat I certify under penalty of law that, based on my inquiry of the complete. I am aware that there to N.J.A.C. 7:14A-6.9(B). The	ce a person designest ranking operated by that personatment works, the at I have personate individuals in a re significant	gnated by that person rator does not have in shall also sign the e highest-ranking of ally examined and an inmediately responsi penalties for submi	n. For a local ager the ability to author second certification ficial of the contra m familiar with the ble for obtaining t tting false informa	cy, the high orize capital on at the bo cted entity: e information he information, include	hest ranking operator of expenditures and hire pattom of this page. If the shall sign the certification submitted in this doction, I believe that the inding the possibility of an	the treatment works shall sign bersonnel, a person having that a local agency has contracted with on. The treatment works shall sign bersonnel, a person having that a local agency has contracted with on. The treatment works shall sign bersonnel, and shall sign bersonnels, pursuant
Carl J. Fricker, Si	te Vice President	- Salem				<u>N/A</u>
NAME AND TITLE OF PRINCIPAL	EXECUTIVE OFFICE	CER, AUTHORIZED AC	GENT, OR *LICENSI	ED OPERATO	OR GRADE AND RE	GISTRY NUMBER (IF APPLICABLE)
	<u>//</u>				06/20/2011	856-339-1102
SIGNATURE OF PRINCIPAL EXEC	UTIVE OFFICER, A	UTHORIZED AGENT,	OR *LICENSED OP	ERATOR	DATE	AREA CODE/PHONE NUMBER
person designated by that person s	shall sign the follow	wing certification:			•	, 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		ed the attach		
N/A	.,,-,,-	CIONATURE	<u>N/A</u>		N/A	N/A AREA CORE/BHONE NUMBER
NAME AND TITLE		SIGNATURE			DATE	AREA CODE/PHONE NUMBER

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

482A SW Outfall 482A

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

1400003022	70ZA	JW Outlan 402	LA 3/	1/2011 1	0 3/01/2011	F SEG NOCE	LAN LLO SAL	LIVI GEI	, L I I A	111	
PARAMETER		QUANTITY (OR LOADING	UNITS	QUALI	TY OR CONCENTR	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	398	447		*****	*****	*****		0	Youy	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	******	*****	*****		1/Day	CALCTD
рН	SAMPLE MEASUREMENT	****	****	····	6.9	****	7.8		0	/week	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	****	*****	******	6.0 01DÁMN	*****	9.0 01DAMX	su		1/Week	GRAB
рН	SAMPLE MEASUREMENT	****	****		7.0	****	7.8		٥	/week	Grab
00400 7 Intake From Stream	PERMIT TO REQUIREMENT	*****	*****	*****	REPORT 01DAMN	******	REPORT 01DAMX	SU		1/Week	GRAB
LC50 Statre 96hr Acu	SAMPLE	***************************************	*****			*****	*****			CARCAN	CODE=M
Cyprinodon TAN6A 1 Effluent Gross Value	MEASUREMENT PERMIT REQUIREMENT	*****	******	*****	COOE = N 01DAMN	*****	*****	%EFFL	0	CODE=N 2/Year	COMPOS
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****	<u> </u>	*****	CODE = N	CODE = M		0	CODE=H	CONE = M
*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	*****	*****		****	Z0.1	40.1		0	3/week	CRAB
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	*****	*****	REPORT 01MOAV	0.2 01DAMX	MG/L		3/Week	GRAB
Option 2	@ QL ()	# 1 / 10 TAN 1 A BUT 1 1	Res. & F. 100 114.		接受了推議 一、 · · · · · · · · · · · · · · · · · ·	1		<u> </u>	18	<u> 1881 - 18</u>	

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

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

PARAMETER		QUANTITY (OR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature,	SAMPLE MEASUREMENT	****	****		*****	28.6	35.4		0	Your	CONTIN
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	****	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			Not Applic	NOT AP
	(åL)	*****	*****		******	*****	******		498C		

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. .

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

MONITORING PERIOD

NJ0005622	Month Day 05 1	Year 2011	То	Month 05	Day 31	Year 2011	483A – SW (Outfall 483A
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101		LOCAT PSEG NUC GENERAT ALLOWA HANCOCI	CLEAR I I'ING ST Y CREE	LLC SAI ATION K NECK	LEM RD	<u>:</u>	PSEG NUCLE PO BOX 236/N	
		REGI	ON / CO	OUNTY:	Souther	n / Salem	County	
CHECK IF APPLICABLE	: No Discha	arge this Mo	onitoring	g Period		L M	onitoring Report Co	mments Attached
responsibility or person designate another entity to operate the tree I certify under penalty of law that, based on my inquiry of the	ated by that person eatment works, the hat I have personall ose individuals imm	shall also shighest-rank y examined nediately re	ign the so king office and am sponsibl	econd ce cial of th familiar	rtification e contra	on at the bected entity	ottom of this page. It is shall sign the certificant on submitted in this	document and all attachments, and
complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The				ing false	informa	tion, inclu	ding the possibility	of and/or imprisonment, pursuant
to N.J.A.C. 7:14A-6.9(B). The		Pollution C		ing false	informa	tion, inclu	ding the possibility	of and/or imprisonment, pursuant
to N.J.A.C. 7:14A-6.9(B). The	New Jersey water ite Vice President -	Pollution C Salem	ontrol A	ing false .ct provid	informa	tion, incluenalties up	oto \$50,000 per viole OR GRADE AN	of and/or imprisonment, pursuant ation. N/A D REGISTRY NUMBER (IF APPLICABLE)
to N.J.A.C. 7:14A-6.9(B). The Carl J. Fricker, S	New Jersey water ite Vice President -	Pollution C Salem R, AUTHORI	ontrol A	ing false out provid	informa les for po	tion, incluenalties up	ding the possibility to \$50,000 per viole	of and/or imprisonment, pursuant ation. N/A D REGISTRY NUMBER (IF APPLICABLE)
Carl J. Fricker, S Carl J. Fricker, S NAME AND TITLE OF PRINCIPAL SIGNATURE OF PRINCIPAL EXECT *For a local agency where the hig person designated by that person	New Jersey water ite Vice President - EXECUTIVE OFFICE CUTIVE OFFICER, AU thest-ranking operato shall sign the followi	Pollution C Salem R, AUTHORI THORIZED A r does not he ng certificati	Ontrol Adverse AGENT, O	ing false act provide ENT, OR * OR *LICEN bility to an	informa les for po	tion, incluenalties up ED OPERAT ERATOR apital expe	or GRADE AN 06/20/2 DATE nditures and hire person	of and/or imprisonment, pursuant ation. N/A D REGISTRY NUMBER (IF APPLICABLE) 2011 856-339-1102 AREA CODE/PHONE NUMBER onnel, a person having that responsibility or
Carl J. Fricker, S Carl J. Fricker, S NAME AND TITLE OF PRINCIPAL EXECT *For a local agency where the high	New Jersey water ite Vice President - EXECUTIVE OFFICE CUTIVE OFFICER, AU thest-ranking operato shall sign the followi	Pollution C Salem R, AUTHORI THORIZED A r does not he ng certificati	Ontrol Adaptive the above 10A-6F(5)	ing false act provide ENT, OR * OR *LICEN bility to an	informa les for po	tion, incluenalties up ED OPERAT ERATOR apital expe	or GRADE AN 06/20/2 DATE nditures and hire person	of and/or imprisonment, pursuant ation. N/A D REGISTRY NUMBER (IF APPLICABLE) 2011 856-339-1102 AREA CODE/PHONE NUMBER onnel, a person having that responsibility or

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

483A SW Outfall 483A

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

14700026	403A	SW Outtail 48	DA DA	/1/2011 1	0 5/31/2011	PSEG NUCL	LEAR LLC SAL	EW GEN	IEKA	HIP	
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	408	430		*****	*****	*****		0	100H	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	******	*****	######################################	*****		1/Day	CALCTD
рН	SAMPLE MEASUREMENT	*****	*****		7.0	*****	7.8		0	\/week	GRAB
00400 1 Effluent Gross Value	PERMIT	******	1804)	*****	6.0 01DAMN	*****	9.0 01DAMX	SU		1/Week	GRAB
рН	SAMPLE MEASUREMENT	****	*****	<u> </u>	7.0	*****	7.8		0	\week	GRAB
00400 7 Intake From Stream	PERMIT REQUIREMENT	10 A A A A A A A A A A A A A A A A A A A			REPORT 01DAMN	****	REPORT 01DAMX	su	74.52 24.53 24.53	1/Week	GRAB
Chlorine Produced	SAMPLE MEASUREMENT	*****	*****		*****	CODE:N	C0DE = M		0	Co20≈ = H	CODE = N
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	****	******	0.3 01MOAV	0.5 01DAMX	MG/L	500 S	3/Week	GRAB
Option 1 Chlorine Produced	SAMPLE MEASUREMENT	*****	*****	<u> </u>	*****	******	*****			3/mek	
Oxidants *CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	*****	∠ O . \ REPORT 01MOAV	40.1 0.2 01DAMX	MG/L	0	3/Week	G-RAB GRAB
Option 2 Temperature,	QL	*****	*****		*****	200 5	35.1				
oC 00010-1 Effluent Gross Value	MEASUREMENT PERMIT REQUIREMENT	*****	**************************************	*****	*****	28.5 REPORT 01MOAV	REPORT 01DAMX	DEG.C	0	1/Day	CONTIN
	> QL	N. S.	****	<u> </u>	1947年 1948年 1947年 1948年		1	<u> </u>	174 - 40% 174 - 40%	\$ -75 July 54	and the same

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

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

483A SW Outfall 483A

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

PARAMETER		QUANTITY (OR LOADING	UNITS	QUALI	TY OR CONCENTR	IATION	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.

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

MONITORING PERIOD

NJ0005622	Month 05	Day Yea 1 201		Month 05	Day 31	Year 2011	484A	– SW Ou	ıtfall 484A
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101		PSEG GENE ALLO	NUCLEA RATING WAY CR	OF ACT AR LLC SA STATION EEK NECT RIDGE, N.	ALEM K RD	<u>:</u>	PSE PO I	PORT REC G NUCLEAR BOX 236/N21 NCOCKS BRI	
		R	EGION /	COUNTY	: Southe	rn / Salem	1 County		
CHECK IF APPLICABLE	: No 1	Discharge this	Monitori	ing Period		Monitorin	g Report C	omments Att	ached
responsibility or person designation another entity to operate the tree			so sign th	ie second c	ertificati	on at the h	ottom of t	nis page. If th	e local agency has contracted with
I certify under penalty of law the	nat I have pe ose individu re are signifi	ersonally exam als immediatel icant penalties	ned and a y respons	official of t am familia sible for ol nitting fals	he contra r with the staining to informa	e informat he informat he information, incl	y shall sigr tion submit ation, I bel uding the p	the certificat ted in this doc ieve that the i	ion. cument and all attachments, and nformation is true, accurate and and/or imprisonment, pursuant
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	nat I have pe ose individu re are signifi New Jersey	ersonally examals immediatelicant penalties water Pollution	ned and a y respons	official of t am familia sible for ol nitting fals	he contra r with the staining to informa	e informat he informat he information, incl	y shall sigr tion submit ation, I bel uding the p	the certificat ted in this doc ieve that the i	ion. cument and all attachments, and nformation is true, accurate and and/or imprisonment, pursuant on.
I certify under penalty of law that, based on my inquiry of the complete. I am aware that the	nat I have pe ose individu re are signifi New Jersey ite Vice Pres	ersonally exam als immediatel icant penalties water Pollutionsident - Salem	ned and y respons for subm n Contro	official of t am familia sible for ol nitting false l Act prov	he contra r with the otaining to information for p	e informat he informat he information, incli enalties u	y shall sigr tion submit ation, I bel uding the p p to \$50,00	the certificated in this docieve that the isossibility of a per violation GRADE AND R	ion. 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 the 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	nat I have pe ose individu re are signifi New Jersey ite Vice Pres	ersonally examals immediatelicant penalties water Pollutionident - Salemofficer, AUTH	ned and y respons for subm n Contro	official of the am familiant sible for ola nitting false and Act provential Act p	he contrart with the otaining to informatides for particens.	e informat he information, included enalties u	y shall sign tion submit ation, I bel uding the p p to \$50,00	ted in this doc ieve that the i cossibility of a 00 per violatio	ion. cument and all attachments, and nformation is true, accurate and and/or imprisonment, pursuant in. N/A EGISTRY NUMBER (IF APPLICABLE) 1 856-339-1102
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 EXECUTED IN THE CONTRACT OF PRINCIPAL EXECUTED I	nat I have pe ose individu re are signifi New Jersey ite Vice Pres EXPOUTIVE	ersonally examals immediatelicant penalties water Pollutionident - Salem OFFICER, AUTHORIZ operator does n	ned and ay respons for subman Contrological AGENT	official of the am familia sible for ola nitting falso lact provential ACT provential ACT, OR *LICI	r with the otaining to information for particens.	e informat he information, inch enalties u	y shall sign tion submit ation, I bel uding the p p to \$50,00	ted in this doc ieve that the i possibility of a 00 per violation GRADE AND R	ion. 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 the 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 high	nat I have pe ose individu re are signifi New Jersey ite Vice Pres EXYCUTIVE CUTIVE OFFICE thest-ranking shall sign the	ersonally examals immediatelicant penalties water Pollution ident - Salem OFFICER, AUTHORIZ operator does in following certificant and solutions of the sale of th	ned and ay respons for subman Control	official of the am familia sible for ola sib	r with the otaining to information for particles for particles. *LICENSI	e information, included in the information, included enalties under the control of the control o	y shall sign tion submit ation, I bel uding the p p to \$50,00 TOR	ted in this doc ieve that the i possibility of a 00 per violation GRADE AND R 06/20/201 ATE	cument and all attachments, and information is true, accurate and and/or imprisonment, pursuant in. N/A EEGISTRY NUMBER (IF APPLICABLE) 1 856-339-1102 AREA CODE/PHONE NUMBER el, 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 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	nat I have pe ose individu re are signifi New Jersey ite Vice Pres EXYCUTIVE CUTIVE OFFICE thest-ranking shall sign the	ersonally examals immediatelicant penalties water Pollution ident - Salem OFFICER, AUTHORIZ operator does in following certificant and solutions of the sale of th	ned and ay respons for subman Control	official of the am familia sible for ola sib	r with the otaining to information for particles for particles. *LICENSI	e information, included in the information, included enalties under the control of the control o	y shall sign tion submit ation, I bel uding the p p to \$50,00 TOR	ted in this doc ieve that the i possibility of a 00 per violation GRADE AND R 06/20/201 ATE	ion. cument and all attachments, and nformation is true, accurate and and/or imprisonment, pursuant on. N/A EEGISTRY NUMBER (IF APPLICABLE) AREA CODE/PHONE NUMBER el, a person having that responsibility or

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

484A SW Outfall 484A

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

NJUU05622	4044	SW Outrail 48	4A 5/		10 5/31/2011	PSEG NUC	LEAR LLC SAL	EW GEN	IEKA	i ir	
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	327	5 62		*****	*****	*****		0	YDay	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT:	REPORTS 01 MOAV	REPORT 01DAMX	MGD	*****	*****	*****	*****		1/Day	CALCTD
pH	SAMPLE MEASUREMENT	*****	*****		7.1	*****	7.8		0	Yweek	CRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	******	******	*****	6.0 01DAMN	*****	9.0 01DAMX	SU		1/Week	GRÅB
pH	SAMPLE MEASUREMENT	*****	######################################		7.0	*****	7.8	l	0	\/week	CRAB
00400 7 Intake From Stream	PERMIT REGUIREMENT	ARRANA	******	*****	REPORT 01DAMN	*****	REPORT 01DAMX	su		1/Week	GRAB
LC50 Statre 96hr Acu	SAMPLE MEASUREMENT	*****	7. ###### 2,00 2,002.00.00.00.00.00.00.00.00.00.00.00.00.		CODE=H	*****	*****		8	CODE=N	C00E=14
Cyprinodon TAN6A 1 Effluent Gross Value	PERMIT REQUIREMENT	**************************************	*****	******	50 01DAMN	\$3 (************************************	*****	%EFFL		2/Year	COMPOS
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****		*****	(0.1	⟨०.।		0	3/week	GRAB
*CPOX 1 Effluent Gross Value	PERMIT	*****	*****	*****	****	0.3 01MOAV	0.5 01DAMX	MG/L		3/Week	GRAB
Option 1 Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****		*****	₹0.1	401		0	3 week	SAA2
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01MOAV	0.2 01DAMX	MG/L		3/Week	GRAB
Option 2	, QL	11.50 ************************************	7.5.5 ***** 780/S	<u></u>	**************************************			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.

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

484A SW Outfall 484A

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

1100000022	4047	OW Outlan 40	, , , , , , , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0 0/01/2011	i ola iiooi	LEAN ELO GAL	LIVI OLIV		• • •	
PARAMETER		QUANTITY (OR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature,	SAMPLE MEASUREMENT	*****	****		*****	28.2	35.2		0	1/Day	CONTIN
00010 1 Effluent Gross Value	PERMIT REQUIREMENT QL	******	*****	******	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.C		1/Day	CONTIN
Lab Certification #	SAMPLE MEASUREMENT	17327	17451		PA 166	*4 ' !**					
99999 99 Lab	PERMIT REQUIREMENT.	REPORT Lab #	RÉPORT Lab#		REPORT	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.

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

	<u> </u>	MONITORING PERIOD	Month Day Year 14074 CXXI O 16 X 1074					
NJ0005622	Month Day 05 1		Year 2011 48	5A – SW Out	fall 485A			
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101		LOCATION OF ACTIVITY: PSEG NUCLEAR LLC SALEM GENERATING STATION ALLOWAY CREEK NECK RD HANCOCKS BRIDGE, NJ 08038		REPORT REC PSEG NUCLEAR I PO BOX 236/N21 HANCOCKS BRID	LC			
		REGION / COUNTY: Southern	/ Salem Cour	nty				
CHECK IF APPLICABLE	No Discha	arge this Monitoring Period 🔲 Mo	nitoring Rep	ort Comments Atta	ched			
		shall also sign the second certification	at the Done					
I certify under penalty of law that, based on my inquiry of the complete. I am aware that the	at I have personal ose individuals im- e are significant p	highest-ranking official of the contracted ly examined and am familiar with the irmediately responsible for obtaining the benalties for submitting false information. Pollution Control Act provides for penaltics.	ed entity shal nformation su information, on, including	I sign the certification is sign the certification in this document. I believe that the interpossibility of an	on. Imment and all attachments, and formation is true, accurate and ind/or imprisonment, pursuant			
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	at I have personal ose individuals im- e are significant p	Ily examined and am familiar with the ir mediately responsible for obtaining the penalties for submitting false information. Pollution Control Act provides for penal	ed entity shal nformation su information, on, including	I sign the certification is sign the certification in this document. I believe that the interpossibility of an	on. Imment and all attachments, and formation is true, accurate and ind/or imprisonment, pursuant			
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 Carl J. Fricker, Si NAME AND TITLE OF PRINTPAL	nat I have personal ose individuals imperent of a read of a read of the second of the	Ily examined and am familiar with the ir mediately responsible for obtaining the penalties for submitting false information. Pollution Control Act provides for penalty. - Salem ER, AUTHORIZED AGENT, OR *LICENSED OF THE PROPERTY OF THE P	ed entity shall information surinformation, on, including alties up to \$3	I sign the certification believe that the inthe possibility of ar 50,000 per violation	on. Imment and all attachments, and formation is true, accurate and ad/or imprisonment, pursuant .			
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 Carl J. Fricker, Si NAME AND TITLE OF PRINTED.	nat I have personal ose individuals imperented are significant possible. New Jersey water the Vice President -	lly examined and am familiar with the ir mediately responsible for obtaining the penalties for submitting false information. Pollution Control Act provides for penals.	ed entity shall information surinformation, on, including alties up to \$3	I sign the certification I believe that the interpretation the possibility of are solution GRADE AND RE	on. Imment and all attachments, and formation is true, accurate and ad/or imprisonment, pursuant N/A GISTRY NUMBER (IF APPLICABLE)			
I certify under penalty of law that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Carl J. Fricker, Si NAME AND TITLE OF PRINTPAL SIGNATURE OF PRINCIPAL EXEC	nat I have personal ose individuals implemented are significant power of the Vice President - EXECUTIVE OFFICE OFFICER, AUTIVE OFFICER, AUTICLE OFFICER, AUTIVE OFFICER, AUTICLE OFFICER, AUT	Ily examined and am familiar with the ir mediately responsible for obtaining the benalties for submitting false information. Pollution Control Act provides for penalty and the provides for penalty. Salem ER, AUTHORIZED AGENT, OR *LICENSED OPERALTHORIZED OPERALTHORIZED AGENT, OR *LICENSED OPERAL	ed entity shall nformation suinformation, on, including alties up to \$100 OPERATOR	I sign the certification I believe that the interpretation The possibility of articles of the possibility of articles of the possibility of the possibility of articles of the possibility of the possibi	on. Iment and all attachments, and formation is true, accurate and ad/or imprisonment, pursuant N/A GISTRY NUMBER (IF APPLICABLE) 856-339-1102 AREA CODE/PHONE NUMBER			
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, Si NAME AND TITLE OF PRINTIPAL SIGNATURE OF PRINCIPAL EXECT *For a local agency where the hig person designated by that person	nat I have personal ose individuals impose individuals impose are significant power of the Vice President EVECUTIVE OFFICE UTIVE OFFICER, AU The st-ranking operate is the sign the follow	Ily examined and am familiar with the ir mediately responsible for obtaining the benalties for submitting false information. Pollution Control Act provides for penalty and the provides for penalty. Salem ER, AUTHORIZED AGENT, OR *LICENSED OPERALTHORIZED OPERALTHORIZED AGENT, OR *LICENSED OPERAL	ed entity shall afformation surinformation, on, including alties up to \$300 OPERATOR ATOR ital expenditure	I sign the certification I believe that the interpretation The possibility of ar source of the possibility of architecture of the possibility of the	on. Imment and all attachments, and formation is true, accurate and ad/or imprisonment, pursuant N/A GISTRY NUMBER (IF APPLICABLE) 856-339-1102 AREA CODE/PHONE NUMBER a person having that responsibility of			
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, Si NAME AND TITLE OF PRINTIPAL SIGNATURE OF PRINCIPAL EXECT *For a local agency where the hig person designated by that person	nat I have personal ose individuals impose individuals impose are significant power of the Vice President EVECUTIVE OFFICE UTIVE OFFICER, AU The st-ranking operate is the sign the follow	Ily examined and am familiar with the ir mediately responsible for obtaining the benalties for submitting false information. Pollution Control Act provides for penalty and the provides for penalty. Salem ER, AUTHORIZED AGENT, OR *LICENSED OPERALTY CONTROL OF THE PROPERTY CONTROL OF THE PROPER	ed entity shall afformation surinformation, on, including alties up to \$300 OPERATOR ATOR ital expenditure	I sign the certification I believe that the interpretation The possibility of ar source of the possibility of architecture of the possibility of the	on. Imment and all attachments, and formation is true, accurate and ad/or imprisonment, pursuant N/A GISTRY NUMBER (IF APPLICABLE) 856-339-1102 AREA CODE/PHONE NUMBER a person having that responsibility of			

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

485A SW Outfall 485A

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

1430003022	4007	SW Outlan 40	JA 0,	1/2011	0 3/3 1/2011	r old Nooi	EAN LLC SAL	LIVI GLI	LIIA	· 11	
PARAMETER	X	QUANTITY (OR LOADING	UNITS	QUALI	TY OR CONCENTR	IATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	342	447		*****	*****	*****		0	100r	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	******	******	*****	*****		1/Day	CALCTD
pH	QL 💥					***				<u>₩₩</u>	<u> </u>
	SAMPLE MEASUREMENT	****	****		7.1	*****	7.8		0	\week	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	**************************************	*****	6.0 01DAMN	*****	9.0 01DAMX	SU	** ** ***	1/Week	GRAB
Emuent Gross value	QL	*****	***		****	*****	*****				
рН	SAMPLE MEASUREMENT	*****	****		7.0	*****	7.8		0	/week	GRAB
00400 7 Intake From Stream	PERMIT	******	******	*****	REPORT 01DAMN	******	REPORT 01DAMX	รบ		1/Week	GRAB
	QL	*****	*****		*****	****	*****				
LC50 Statre 96hr Acu Cyprinodon	SAMPLE MEASUREMENT	****	由力电力力		> 100	****	****		0	2/year	compos
TAN6A 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	****	*****	50 01DAMN	*****	******	%EFFL		2/Year	COMPOS
	() QL	*****	****		*****	*****	*****				
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****		*****	۲٥ <i>٠</i> ١	۷٥.١		0	3/week	GRAB
*CPOX 1	364 XX					0.3	0.5		800	3/Week	GRAB
Effluent Gross Value	PERMIT. REQUIREMENT	*****	*****	*****	*****	01MOAV	01DAMX	MG/L		MONRO MARIO DE LA TIMBO	
Option 1	» QL	2 *****	*****		*****	*****	*****				
Chlorine Produced	SAMPLE MEASUREMENT	****	*****		****	40.1	40.1		0	3/week	GRAB
Oxidants +CPOX 1						REPORT *	0.2			3/Week	GRAB*
Effluent Gross Value	PERMIT REQUIREMENT	******	*****	*****	*****	01MOAV	01DAMX	MG/L		J/Week	The state of the state of
Option 2	* QL	*****	*****		*****	*****	*****		\$2.000 (s)		

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.

Januara tracer bioonarge monitoring richort

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

485A SW Outfall 485A

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

PARAMETER		QUANTITY OR LOADING		ANTITY OR LOADING UNITS QUALITY OR CONCENTRATION		UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE		
Temperature,	SAMPLE MEASUREMENT	*****	*****		*****	28.2	39.3		0	1100g	CONTIN
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	******	****	*****	*****	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.

486A – SW Outfall 486A

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

Day

31

Month

05

Year 2011

MONITORING PERIOD

To

Year

2011

NJPDES PERMIT

NJ0005622

Month

05

Day

1

<u> </u>	03 1 2011		
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 Cou	unty	
CHECK IF APPLICABLE	: No Discharge this Monitoring Period Monitoring Re	eport Comments Attac	hed
the certification or, in his abser the certification. Where the hig responsibility or person designs another entity to operate the tre I certify under penalty of law that, based on my inquiry of the complete. I am aware that the	hest ranking official having day-to-day managerial and operational respect a person designated by that person. For a local agency, the highest ghest ranking operator does not have the ability to authorize capital exacted 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 as individuals immediately responsible for obtaining the information re are significant penalties for submitting false information, including the New Jersey water Pollution Control Act provides for penalties up to	st ranking operator of the properties of the properties and hire properties of the possibility of an extension of the possibility of an expension of the possibility of an expension of the properties of the prop	the treatment works shall sign 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∕\$	ite Vice/President - Salem		N/A
	EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	GRADE AND REG	GISTRY NUMBER (IF APPLICABLE)
/6(/		06/20/2011	856-339-1102
SIGNATURE OF PRINCIPAL EXEC	CUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	DATE	AREA CODE/PHONE NUMBER
person designated by that person	thest-ranking operator does not have the ability to authorize capital expenditual sign the following certification: in accordance with N.J.S.A. 58:10A-6F(5) that I have reviewed the attached		
	•	N/A	N/A
NAME AND TITLE	N/A SIGNATURE	DATE	AREA CODE/PHONE NUMBER
THE PARTY OF THE P	3.0		

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

486A SW Outfall 486A

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERAWN

NJUUU5622	400A	SW Outfail 480	DA S	5/1/2011 TO 5/31/2011 PSEG NUCLEAR LLC SALEW GENERA (IF							
PARAMETER	X	QUANTITY (OR LOADING	UNITS	QUALI	TY OR CONCENTA	ATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	298	428		*****	*****	*****		0	Youn	CALCTO
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	清秀大学会	*****	*****	*****	\$ 55 E	1/Day	CALCTD
рН	QL SAMPLE	有有有失者	******		D	東京の大学 (1995)	- C			Viscor	
	MEASUREMENT	*****	*****		7.2	*****	7.8		0	/meek	GRAB
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	*****		*****	6.0 01DAMN	*****	9.0 01DAMX	su		1/Week	GRAB
	QL*;	*****	*****		*****	**************************************	*****				
pH ®	SAMPLE MEASUREMENT	*****	*****		7.0	****	7.8		0	\week	GRAB
00400 .7 Intake From Stream	PERMIT REQUIREMENT	Attant	*****	*****	REPORT 01DAMN	*****	REPORT 01DAMX	su		1/Week	GRAB
	o QL	*****	*****	1	******	*****	###### # 20 # #####		Š.		*
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	****	*****		***	20.1	١.٥٧		0	3/week	GRAB
*CPOX 1 Effluent Gross Value	PÉRMIT REQUIREMENT	****	******	*****	*****	0.3 01MOAV	0.5 01DAMX	MG/L		3/Week	GRAB
Option 1	QL	**************************************	*****		3 141 ********* ***************************	****	******				
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	*****	*****		*****	20.1	١٠٥٧		0	3/week	GRAB
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	*****	*****		REPORT 01MOAV	0.2 01DAMX	MG/L		3/Week	GRAB
Option 2	S QL	*****	*****		*****	****	*****				
Temperature,	SAMPLE MEASUREMENT	****	****		****	28.1	39.9		0	1 Day	CONTIN
00010 1 Effluent Gross Value	PERMIT	*****	*****	******	******	REPORT 01MOAV	REPORT 01DAMX	DEG.C		1/Day	CONTIN
	QL 🌯	*****	*****		******	*****	*****		8 84,		

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

5/1/2011 TO 5/31/2011

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	ומצרו	IZYFI		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.

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

NJPDES PERMIT	MONITORING PERIOD	MONITORED LOCATION:
NJ0005622	Month Day Year 05 1 2011 To 05 31 2011	487B – SW Outfall 487B
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101	LOCATION OF ACTIVITY: PSEG NUCLEAR LLC SALEM GENERATING STATION ALLOWAY CREEK NECK RD HANCOCKS BRIDGE, NJ 08038	REPORT RECIPIENT: PSEG NUCLEAR LLC PO BOX 236/N21 HANCOCKS BRIDGE, NJ 08038
	REGION / COUNTY: Southern / Salem C	County
CHECK IF APPLICABLE:	No Discharge this Monitoring Period Monitoring	g Report Comments Attached
the certification. Where the hig responsibility or person designa another entity to operate the treat I certify under penalty of law the that, based on my inquiry of the complete. I am aware that there	ce a person designated by that person. For a local agency, the high 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 start 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 to	expenditures and hire personnel, a person having that ttom of this page. If the local agency has contracted with shall sign the certification. on submitted in this document and all attachments, and ion, I believe that the information is true, accurate and ling the possibility of and/or imprisonment, pursuant
Carl J. Fricker, Si	e Vice President - Salem	N/A
NAME AND TITLE OF POINTIPAL	EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATO	OR GRADE AND REGISTRY NUMBER (IF APPLICABLE) 06/20/2011 856-339-1102
SIGNATURE OF PRINCIPAL EXECU	UTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	DATE AREA CODE/PHONE NUMBER
	nest-ranking operator does not have the ability to authorize capital expend Thall sign the following certification:	ditures and hire personnel, a person having that responsibility or
I certify under penalty of law and i	n accordance with N.J.S.A. 58:10A-6F(5) that I have reviewed the attached	ed discharge monitoring reports.
<u>N/A</u>	<u>N/A</u>	<u>N/A</u> <u>N/A</u>
NAME AND TITLE	SIGNATURE	DATE AREA CODE/PHONE NUMBER

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

MONITORING PERIOD

NJ0005622	Month Day Year 05 1 2011 To Month Day Year 05 31 2011	189A – SW Ou	ıtfall 489A
PERMITTEE: PSE&G NUCLEAR LLC 80 PARK PLAZA NEWARK, NJ 07101	LOCATION OF ACTIVITY: PSEG NUCLEAR LLC SALEM GENERATING STATION ALLOWAY CREEK NECK RD HANCOCKS BRIDGE, NJ 08038	REPORT REC PSEG NUCLEAR PO BOX 236/N21 HANCOCKS BRI	LLC
CHECK IF APPLICABLE	REGION / COUNTY: Southern / Salem Co No Discharge this Monitoring Period Monitoring	ounty Report Comments A	.ttached
the certification or, in his abserthe certification. Where the high	est ranking official having day-to-day managerial and operational rece a person designated by that person. For a local agency, the highest ranking operator does not have the ability to authorize capital exted by that person shall also sign the second certification at the bottom.	st ranking operator o expenditures and hire	f the treatment works shall sign personnel, a person having that
another entity to operate the tre	atment works, the highest-ranking official of the contracted entity sh	nall sign the certificat	ion.
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	atment works, the highest-ranking official of the contracted entity shat I have personally examined and am familiar with the information ose individuals immediately responsible for obtaining the information are are significant penalties for submitting false information, including New Jersey water Pollution Control Act provides for penalties up to	submitted in this do on, I believe that the ing the possibility of a	cument and all attachments, and information is true, accurate and and/or imprisonment, pursuant
another entity to operate the tree I certify under penalty of law that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The	atment works, the highest-ranking official of the contracted entity shat I have personally examined and am familiar with the information ose individuals immediately responsible for obtaining the information of a re significant penalties for submitting false information, including	submitted in this do on, I believe that the ing the possibility of a	cument and all attachments, and information is true, accurate and and/or imprisonment, pursuant
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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'S NAME AND TITLE OF PRINCIPAL EXECT *For a local agency where the high	atment works, the highest-ranking official of the contracted entity shat I have personally examined and am familiar with the information ose individuals immediately responsible for obtaining the information is a reasonable are significant penalties for submitting false information, includin New Jersey water Pollution Control Act provides for penalties up to the Vice President - Salem EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR	submitted in this doesn, I believe that the ing the possibility of a \$50,000 per violation GRADE AND R 06/20/201 DATE	cument and all attachments, and information is true, accurate and and/or imprisonment, pursuant on. N/A DEGISTRY NUMBER (IF APPLICABLE) 1 856-339-1102 AREA CODE/PHONE NUMBER
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MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0005622

489A SW Outfall 489A

5/1/2011 TO 5/31/2011

PSEG NUCLEAR LLC SALEM GENERATIN

1100003022	10071	Off Outlan 40.	J., 0,			. 02000.	,,		,	• • •	
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	0.0286	0.0286		*****	*****	*****		0	MONTH	CALCTD
50050 1 Effluent Gross Value	PERMIT. REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	*****		1/Month	CALCTD
pH	SAMPLE MEASUREMENT	****	*****		7.6	*****	7.6		0	YMONTH	GRAB
00400 1 Effluent Gross Value	PERMIT	*****	******	*****	6:0 01DAMN	*****	9.0 01DAMX	ຮບ		1/Month	GRAB
Solids, Total Suspended	SAMPLE MEASUREMENT	*****	*****		12	12	*****		0) / man TH	GRAB
00530 1 Effluent Gross Value	PERMIT REQUIREMENT	· · · · · · · · · · · · · · · · · · ·	****	******	100 01DAMX	30 01MOAV	######################################	MG/L		1/Month	GRAB
Petroleum Hydrocarbons	SAMPLE MEASUREMENT	*****	*****		****	4 5	4 5		O	MONTH	GRAB
00551 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******		*****	10 01MOAV	15 01DAMX	MG/L		1/Month	GRAB
Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	*****	*****		*****	24	24		0	WONTH.	GRAB
00680 1 Effluent Gross Value	PERMIT	******	******	*****	******	REPORT 01MOAV	50 01DAMX	MG/L		1/Month	GRAB
Lab Certification #	SAMPLE MEASUREMENT	17327	17451	 	PALL				13 120	1	
99999 99 Lab	PERMIT. REQUIREMENT	REPORT Lab#	REPORT Lab.#		REPORT	REPORT Lab#	REPORT Lab #		700 74 13 74 13	Not Applic	NOT AP

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