

DEC 22 2011

HCH-2011-067



CERTIFIED MAIL
RETURN RECEIPT REQUESTED
ARTICLE NUMBER: 7006 0100 0004 0656 9028

Department of Environmental Protection
Office of Permit Management
Division of Water Quality
PO Box 420
Trenton, N.J. 08625-0420

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

Dear Sir:

Attached is the Discharge Monitoring Report for the Hope Creek Generating Station for the month of November 2011, and the Consolidated Waste Characterization Report for DSN 462B located at Hope Creek.

This report is required by and prepared specifically for the New Jersey Department of Environmental Protection (NJDEP). It presents only the observed results of measurements and analyses required to be performed by the above agencies. The choice of the measurement devices and analytical methods are controlled by the EPA and the NJDEP, not by the company, and there are limitations on the accuracy of such measurement devices and analytical techniques even when used and maintained as required. Accordingly, this report is not intended as an assertion that any instrument has measured, or that any reading or analytical result represents the true value with absolute accuracy, nor is it an endorsement of the suitability of any analytical or measurement procedure.

If you have any questions concerning this report, please feel free to contact Christopher White at (856) 339-3301.

Sincerely,

A handwritten signature in black ink that reads "John F. Perry".

John F. Perry
Site Vice President – Hope Creek

JEAS
MRL

HCH-2011-067
NJPDES DMR

2

Attachments

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

HCH-2011-067
NJPDES DMR

3

EXPLANATION OF CONDITIONS

November 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.

Results reported on the Discharge Monitoring Report forms are consistent with permit limits, data supplied from contract laboratories, the December 2007 revision of the NJDEP Monitoring Report Form Reference Manual and specific guidance from DEP personnel.

Sampling frequency was increased for DSN-461A to support the DRBC nutrient monitoring study.

Attached is the Consolidated Waste Characterization Report for DSN-462B.

DEC 22 2011

HCH-2011-067
NJPDES DMR

4

EXPLANATION OF EXCEEDANCES

November 2011

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

DSN No.

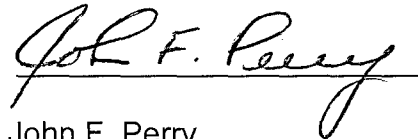
EXPLANATION

No Exceedances

COUNTY OF SALEM
STATE OF NEW JERSEY

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

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



John F. Perry
Site Vice President – Hope Creek

Sworn and subscribed before me
this 22nd day of December, 2011.



Deloris D. Hadden
Notary Public of New Jersey
My Commission Expires 3/29/2015
ID # 2073649

Surface Water Discharge Monitoring Report

PI 46315

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - DSW

11/1/2011 TO 11/30/2011

HOPE CREEK GENERATING STATION

| PARAMETER | | QUANTITY OR LOADING | | UNITS | QUALITY OR CONCENTRATION | | | UNITS | NO. EX. | FREQ. OF ANALYSIS | SAMPLE TYPE | |
|---|--------------------|---------------------|---------------|-------|--------------------------|---------------|---------------|-------|---------|-------------------|-------------|--------|
| Flow, In Conduit or Thru Treatment Plant 50050 1 Effluent Gross Value | SAMPLE MEASUREMENT | 35.172 | 39.009 | MGD | ***** | ***** | ***** | ***** | 0 | Continuous | METER | |
| | PERMIT REQUIREMENT | REPORT 01MOAV | REPORT 01DAMX | | ***** | ***** | ***** | | ***** | | Continuous | METER |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | | |
| Flow, In Conduit or Thru Treatment Plant 50050 7 Intake From Stream | SAMPLE MEASUREMENT | 52.130 | 55.848 | MGD | ***** | ***** | ***** | ***** | 0 | Continuous | METER | |
| | PERMIT REQUIREMENT | REPORT 01MOAV | REPORT 01DAMX | | ***** | ***** | ***** | | ***** | | Continuous | METER |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | | |
| pH 00400 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | 8.6 | ***** | 8.9 | SU | 0 | 1/WEEK* | GRAB | |
| | PERMIT REQUIREMENT | ***** | ***** | | 6.0 01DAMN | ***** | 9.0 01DAMX | | ***** | | 1/Week | GRAB |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | | |
| LC50 Statre 96hr Acu Mysid Bahia TAN3E 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | CODE=N | ***** | ***** | %EFFL | 0 | CODE=N | CODE=N | |
| | PERMIT REQUIREMENT | ***** | ***** | | REPORT 01RPMN | ***** | ***** | | ***** | | 1/Year | COMPOS |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | | |
| IC25 Statre 7day Chr Mysid Bahia TBP3E 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | CODE=N | ***** | ***** | %EFFL | 0 | CODE=N | CODE=N | |
| | PERMIT REQUIREMENT | ***** | ***** | | REPORT 01RPMN | ***** | ***** | | ***** | | 1/Year | COMPOS |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | | |
| Chlorine Produced Oxidants *CPOX 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | <0.1 | <0.1 | MGL | 0 | 3/WEEK* | GRAB | |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | 0.2 01MOAV | 0.5 01DAMX | | ***** | | 3/Week | GRAB |
| | RQL | ***** | ***** | | ***** | 0.1 | 0.1 | | ***** | | | |

Comments: If there are any questions regarding the monitoring report form, please contact Heather Genievich of the Bureau of Surface Water Permitting at (609) 292-4860.

* SEE EPLANATION OF CONDITIONS

Surface Water Discharge Monitoring Report

PI 46315

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - DSW

11/1/2011 TO 11/30/2011

HOPE CREEK GENERATING STATION

| PARAMETER | | QUANTITY OR LOADING | | UNITS | QUALITY OR CONCENTRATION | | | UNITS | NO. EX. | FREQ. OF ANALYSIS | SAMPLE TYPE |
|---|--------------------|---------------------|-------|-------|--------------------------|---------------|---------------|-------|---------|-------------------|-------------|
| Temperature, oC 00010 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 24.8 | 29.2 | DEG.C | 0 | Continuous | METER |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | REPORT 01MOAV | 36.2 01DAMX | | | | |
| | QL | ***** | ***** | ***** | ***** | ***** | ***** | | | | |
| Temperature, oC 00010 7 Intake From Stream | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 14.8 | 16.0 | DEG.C | 0 | Continuous | METER |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | REPORT 01MOAV | REPORT 01DAMX | | | | |
| | QL | ***** | ***** | ***** | ***** | ***** | ***** | | | | |
| Carbon, Tot Organic (TOC) 00680 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 5.9 | 5.9 | MG/L | 0 | 1/MONTH | GRAB |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | REPORT 01MOAV | REPORT 01DAMX | | | | |
| | QL | ***** | ***** | ***** | ***** | ***** | ***** | | | | |
| Carbon, Tot Organic (TOC) 00680 2 Effluent Net Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 0.3 | 0.3 | MG/L | 0 | 1/MONTH | CALCTD |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | REPORT 01MOAV | REPORT 01DAMX | | | | |
| | QL | ***** | ***** | ***** | ***** | ***** | ***** | | | | |
| Carbon, Tot Organic (TOC) 00680 7 Intake From Stream | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 3.9 | 3.9 | MG/L | 0 | 1/MONTH | GRAB |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | REPORT 01MOAV | REPORT 01DAMX | | | | |
| | QL | ***** | ***** | ***** | ***** | ***** | ***** | | | | |
| Sulfate, Total (as SO4) 00945 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | CODE=N | CODE=N | UG/L | 0 | CODE=N | CODE=N |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | REPORT 01MOAV | REPORT 01DAMX | | | | |
| | QL | ***** | ***** | ***** | ***** | ***** | ***** | | | | |

Comments: If there are any questions regarding the monitoring report form, please contact Heather Genievich of the Bureau of Surface Water Permitting at (609) 292-4860.

Surface Water Discharge Monitoring Report

PI 46315

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:


FACILITY NAME:

NJ0025411

461A DSN 461A - DSW

11/1/2011 TO 11/30/2011

HOPE CREEK GENERATING STATION

| PARAMETER |  | QUANTITY OR LOADING | | UNITS | QUALITY OR CONCENTRATION | | | UNITS | NO. EX. | FREQ. OF ANALYSIS | SAMPLE TYPE |
|---|---|---------------------|--------------|---------|--------------------------|---------------|---------------|-------|------------|-------------------|-------------|
| Boron, Total (as B) 01022 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | CODE=N | CODE=N | UG/L | 0 | CODE=N | CODE=N |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | REPORT 01MOAV | REPORT 01DAMX | | 1/6 Months | COMPOS | |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | |
| Heat (winter) (per Hr.) 81387 1 Effluent Gross Value | SAMPLE MEASUREMENT | 220 | 294 | MBTU/HR | ***** | ***** | ***** | ***** | 0 | 1/DAY | CALCTD |
| | PERMIT REQUIREMENT | REPORT 01MOAV | 662 01DAMX | | ***** | ***** | ***** | | 1/Day | CALCTD | |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | |
| Copper, Total Recoverable 01119 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | CODE=N | CODE=N | UG/L | 0 | CODE=N | CODE=N |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | REPORT 01MOAV | REPORT 01DAMX | | 1/6 Months | COMPOS | |
| | RQL | ***** | ***** | | ***** | 2 | 2 | | | | |
| Lab Certification # 99999 99 Lab | SAMPLE MEASUREMENT | 17451 | PA166 | | 04653 | PA010 | | | | | |
| | PERMIT REQUIREMENT | REPORT Lab # | REPORT Lab # | | REPORT Lab # | REPORT Lab # | REPORT Lab # | | Not Applic | NOT AP | |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | |

Comments: If there are any questions regarding the monitoring report form, please contact Heather Genievich of the Bureau of Surface Water Permitting at (609) 292-4860.

New Jersey Department of Environmental Protection
Division of Water Quality

PI 46815

Surface Water Discharge Monitoring Report Submittal Form

| | | | | | | | |
|---------------------------------------|-------------------|----------|--------------|----|-------------|-----------|--|
| NJPDES PERMIT NJ0025411 | MONITORING PERIOD | | | | | | MONITORED LOCATION: 461C - DSN 461C - DSW internal |
| | Month 11 | Day 1 | Year 2011 | To | Month 11 | Day 30 | |

PERMITTEE:
PSE&G NUCLEAR LLC
PO BOX 236 – ALLOWAY CREEK NECK RD
HANCOCKS BRIDGE, NJ 08038

LOCATION OF ACTIVITY:
HOPE CREEK GENERATING STATION
ARTIFICIAL ISLAND
FOOT OF BUTTONWOOD RD
LOWER ALLOWAYS CREEK, NJ 08038

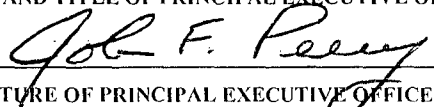
REPORT RECIPIENT:
PSE&G
MARYANN MCLAUGHLIN
PO BOX 236 / H15
HANCOCKS BRIDGE, NJ 08038

REGION / COUNTY: Southern / Salem County

CHECK IF APPLICABLE: No Discharge this Monitoring Period Monitoring Report Comments Attached

WHO MUST SIGN The highest ranking official having day-to-day managerial and operational responsibilities for the discharging facility shall sign the certification or, in his absence a person designated by that person. For a local agency, the highest ranking operator of the treatment works shall sign the certification. Where the highest ranking operator does not have the ability to authorize capital expenditures and hire personnel, a person having that responsibility or person designated by that person shall also sign the second certification at the bottom of this page. If the local agency has contracted with another entity to operate the treatment works, the highest-ranking official of the contracted entity shall sign the certification.

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments, and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of and/or imprisonment, pursuant to N.J.A.C. 7:14A-6.9(B). The New Jersey water Pollution Control Act provides for penalties up to \$50,000 per violation.

| | |
|--|---|
| John F. Perry, Site Vice President – Hope Creek | N/A |
| NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR | GRADE AND REGISTRY NUMBER (IF APPLICABLE) |
|  | 12-22-11 856-339-3463 |
| SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR | DATE AREA CODE/PHONE NUMBER |

**For a local agency where the highest-ranking operator does not have the ability to authorize capital expenditures and hire personnel, a person having that responsibility or person designated by that person shall sign the following certification:*


I certify under penalty of law and in accordance with N.J.S.A. 58:10A-6F(5) that I have reviewed the attached discharge monitoring reports.

| | | | |
|----------------|-----------|------|------------------------|
| N/A | N/A | N/A | N/A |
| NAME AND TITLE | SIGNATURE | DATE | AREA CODE/PHONE NUMBER |

Surface Water Discharge Monitoring Report

PI 46L15

PERMIT NUMBER: NJ0025411 MONITORED LOCATION: 461C DSN 461C - DSW intern MONITORING PERIOD: 11/1/2011 TO 11/30/2011 FACILITY NAME: HOPE CREEK GENERATING STATION

| PARAMETER |  | QUANTITY OR LOADING | | UNITS | QUALITY OR CONCENTRATION | | | UNITS | NO. EX. | FREQ. OF ANALYSIS | SAMPLE TYPE | |
|---|---|---------------------|---------------|-------|--------------------------|--------------|---------------|-------|--------------|-------------------|-------------|--------|
| Flow, In Conduit or Thru Treatment Plant 50050 1 Effluent Gross Value | SAMPLE MEASUREMENT | 0.022 | 0.100 | MGD | ***** | ***** | ***** | ***** | 0 | Continuous | METER | |
| | PERMIT REQUIREMENT | REPORT 01MOAV | REPORT 01DAMX | | ***** | ***** | ***** | | ***** | Continuous | METER | |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | | |
| Solids, Total Suspended 00530 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 2 | 2 | MG/L | 0 | 1/MONTH | COMPOS | |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | ***** | 30 01MOAV | | 100 01DAMX | ***** | 1/Month | COMPOS |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | ***** | | |
| Petrol Hydrocarbons, Total Recoverable 45501 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | < 5 | < 5 | MG/L | 0 | 2/MONTH | GRAB | |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | ***** | 10 01MOAV | | 15 01DAMX | ***** | 2/Month | GRAB |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | ***** | | |
| Carbon, Tot Organic (TOC) 00680 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 3 | 3 | MG/L | 0 | 1/MONTH | COMPOS | |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | ***** | REPORT 01MOAV | | 50 01DAMX | ***** | 1/Month | COMPOS |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | ***** | | |
| Lab Certification # 99999 99 Lab | SAMPLE MEASUREMENT | 17451 | PA166 | | 04653 | PA010 | | | | | | |
| | PERMIT REQUIREMENT | REPORT Lab.# | REPORT Lab.# | | REPORT Lab.# | REPORT Lab.# | REPORT Lab.# | | REPORT Lab.# | ***** | Not Applic | NOT AP |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | ***** | | |

Comments: If there are any questions regarding the monitoring report form, please contact Heather Genievich of the Bureau of Surface Water Permitting at (609) 292-4860.

New Jersey Department of Environmental Protection
 Division of Water Quality
Surface Water Discharge Monitoring Report Submittal Form

PI 46815

| NJPDES PERMIT | MONITORING PERIOD | | | | | | MONITORED LOCATION: | |
|------------------|-------------------|-----|------|----|-------|-----|---------------------|---------------------------------------|
| NJ0025411 | Month | Day | Year | To | Month | Day | Year | 462B - DSN 462B - DSW Internal |
| | 11 | 1 | 2011 | | 11 | 30 | 2011 | |

PERMITTEE:

PSE&G NUCLEAR LLC
 PO BOX 236 – ALLOWAY CREEK NECK RD
 HANCOCKS BRIDGE, NJ 08038

LOCATION OF ACTIVITY:

HOPE CREEK GENERATING STATION
 ARTIFICIAL ISLAND
 FOOT OF BUTTONWOOD RD
 LOWER ALLOWAYS CREEK, NJ 08038

REPORT RECIPIENT:

PSE&G
 MARYANN MCLAUGHLIN
 PO BOX 236 / H15
 HANCOCKS BRIDGE, NJ 08038

REGION / COUNTY: Southern / Salem County

CHECK IF APPLICABLE: No Discharge this Monitoring Period Monitoring Report Comments Attached

WHO MUST SIGN The highest ranking official having day-to-day managerial and operational responsibilities for the discharging facility shall sign the certification or, in his absence a person designated by that person. For a local agency, the highest ranking operator of the treatment works shall sign the certification. Where the highest ranking operator does not have the ability to authorize capital expenditures and hire personnel, a person having that responsibility or person designated by that person shall also sign the second certification at the bottom of this page. If the local agency has contracted with another entity to operate the treatment works, the highest-ranking official of the contracted entity shall sign the certification.

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments, and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of and/or imprisonment, pursuant to N.J.A.C. 7:14A-6.9(B). The New Jersey water Pollution Control Act provides for penalties up to \$50,000 per violation.

| | |
|--|---|
| John F. Perry, Site Vice President – Hope Creek | N/A |
| NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR | GRADE AND REGISTRY NUMBER (IF APPLICABLE) |
| | 12-22-11 856-339-3463 |
| SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR | DATE AREA CODE/PHONE NUMBER |

**For a local agency where the highest-ranking operator does not have the ability to authorize capital expenditures and hire personnel, a person having that responsibility or person designated by that person shall sign the following certification:*

I certify under penalty of law and in accordance with N.J.S.A. 58:10A-6F(5) that I have reviewed the attached discharge monitoring reports.

| | | | |
|----------------|-----------|------|------------------------|
| N/A | N/A | N/A | N/A |
| NAME AND TITLE | SIGNATURE | DATE | AREA CODE/PHONE NUMBER |

Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

462B DSN 462B - DSW Intern:

11/1/2011 TO 11/30/2011

HOPE CREEK GENERATING STATION

| PARAMETER | | QUANTITY OR LOADING | | UNITS | QUALITY OR CONCENTRATION | | | UNITS | NO. EX. | FREQ. OF ANALYSIS | SAMPLE TYPE | |
|---|--------------------|---------------------|---------------|--------|--------------------------|---------------|---------------|---------|---------|-------------------|-------------|--------|
| Flow, In Conduit or Thru Treatment Plant 50050 1 Effluent Gross Value | SAMPLE MEASUREMENT | 0.015 | 0.024 | MGD | ***** | ***** | ***** | ***** | 0 | Continuous | METER | |
| | PERMIT REQUIREMENT | REPORT 01MOAV | REPORT 01DAMX | | ***** | ***** | ***** | | ***** | | Continuous | METER |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | | |
| BOD, 5-Day (20 oC) 00310 G Raw Sew/influent | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 496 | 496 | MG/L | 0 | 1/MONTH | COMPOS | |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | REPORT 01MOAV | REPORT 01DAMX | | ***** | | 1/Month | COMPOS |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | | |
| BOD, 5-Day (20 oC) 00310 1 Effluent Gross Value | SAMPLE MEASUREMENT | 1 | 1 | KG/DAY | ***** | 10 | 10 | MG/L | 0 | 1/MONTH | COMPOS | |
| | PERMIT REQUIREMENT | 8 01MOAV | REPORT 01WKAV | | ***** | 30 01MOAV | 45 01WKAV | | ***** | | 1/Month | COMPOS |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | | |
| BOD, 5-Day (20 oC) 00310 K Percent Removal | SAMPLE MEASUREMENT | ***** | ***** | ***** | 98.0 | ***** | ***** | PERCENT | 0 | 1/MONTH | CALCTD | |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | 87.5 01MOAVMN | ***** | | ***** | | 1/Month | CALCTD |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | | |
| Solids, Total Suspended 00530 G Raw Sew/influent | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 496 | 496 | MG/L | 0 | 1/MONTH | COMPOS | |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | REPORT 01MOAV | REPORT 01DAMX | | ***** | | 1/Month | COMPOS |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | | |
| Solids, Total Suspended 00530 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 9 | 9 | MG/L | 0 | 1/MONTH | COMPOS | |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | 30 01MOAV | 45 01WKAV | | ***** | | 1/Month | COMPOS |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | | |

Comments: If there are any questions regarding the monitoring report form, please contact Heather Genievich of the Bureau of Surface Water Permitting at (609) 292-4860.

Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

462B DSN 462B - DSW Intern

11/1/2011 TO 11/30/2011

HOPE CREEK GENERATING STATION

| PARAMETER | | QUANTITY OR LOADING | | UNITS | QUALITY OR CONCENTRATION | | | UNITS | NO. EX. | FREQ. OF ANALYSIS | SAMPLE TYPE |
|--|--------------------|---------------------|-----------------|-------|--------------------------|------------------|------------------|---------|---------|-------------------|-------------|
| Solids, Total Suspended 00530 K Percent Removal | SAMPLE MEASUREMENT | ***** | ***** | | 98 | 98 | ***** | | 0 | 1/MONTH | CALCTD |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | 85 01MOAVMN | REPORT 01MOAV | ***** | PERCENT | | 1/Month | CALCTD |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| Oil and Grease 00556 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | | ***** | <5 | <5 | | 0 | 1/MONTH | GRAB |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | 10 01MOAV | 15 01DAMX | MG/L | | 1/Month | GRAB |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| Nitrogen, Ammonia Total (as N) 00610 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | | ***** | 22 | 22 | | 0 | 1/MONTH | COMPOS |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | 35 01MOAV | REPORT 01DAMX | MG/L | | 1/Month | COMPOS |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| Enterococci 61211 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | | ***** | <10 | <10 | | 0 | 1/MONTH | GRAB |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | REPORT 01MOGE | REPORT 01WKGE | #/100ML | | 1/Month | GRAB |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| Coliform, Fecal General 74055 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | | ***** | <10 | <10 | | 0 | 1/MONTH | GRAB |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | 200 01MOGE | 400 01WKGE | #/100ML | | 1/Month | GRAB |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| Lab Certification # 99999 99 Lab | SAMPLE MEASUREMENT | 17451 | PD166 | | 06005 | | | | | | |
| | PERMIT REQUIREMENT | REPORT Lab # | REPORT Lab # | | REPORT Lab # | REPORT Lab # | REPORT Lab # | | | Not Applic | NOT AP |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |

Comments: If there are any questions regarding the monitoring report form, please contact Heather Genievich of the Bureau of Surface Water Permitting at (609) 292-4860.

New Jersey Department of Environmental Protection
Division of Water Quality

PI 46815

Consolidated Waste Characterization Report Submittal Form

| | | | | | | | |
|--------------------------------|-------------------|----------|--------------|----|-------------|-----------|--|
| NJPDES PERMIT NJ0025411 | MONITORING PERIOD | | | | | | MONITORED LOCATION: 462B - DSN 462B - DSW I |
| | Month 7 | Day 1 | Year 2011 | To | Month 12 | Day 31 | |

PERMITTEE:

PSE&G NUCLEAR LLC
PO BOX 236 - ALLOWAY CREEK NE
HANCOCKS BRIDGE, NJ 08038

LOCATION OF ACTIVITY:

HOPE CREEK GENERATING
STATION
ARTIFICIAL ISLAND
FOOT OF BUTTONWOOD RD
LOWER ALLOWAYS CREEK, NJ
08038

REPORT RECIPIENT:

PSE&G
MARYANN MCLAUGHLIN
P.O. BOX 236 / H15
HANCOCKS BRIDGE, NJ 08038

REGION / COUNTY: Southern / Salem County

CHECK IF APPLICABLE: No Discharge this Monitoring Period Monitoring Report Comments Attached

WHO MUST SIGN The highest ranking official having day-to-day managerial and operational responsibilities for the discharging facility shall sign the certification or, in his absence a person designated by that person. For a local agency, the highest ranking operator of the treatment works shall sign the certification. Where the highest ranking operator does not have the ability to authorize capital expenditures and hire personnel, a person having that responsibility or person designated by that person shall also sign the second certification at the bottom of this page. If the local agency has contracted with another entity to operate the treatment works, the highest-ranking official of the contracted entity shall sign the certification.

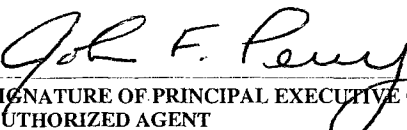
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments, and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment, pursuant to N.J.A.C. 7:14A-6.9(B). The New Jersey Water Pollution Control Act provides for penalties up to \$50,000 per violation.

John F. Perry, Site Vice President-Hope Creek

N/A

NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

GRADE AND REGISTRY NUMBER (IF APPLICABLE)


SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

12-22-11
DATE (MONTH/DAY / YEAR)

856-339-3463
AREA CODE / TELEPHONE NUMBER

**For a local agency where the highest ranking operator does not have the ability to authorize capital expenditures and hire personnel, a person having that responsibility or person designated by that person shall sign the following certification:*

I certify under penalty of law and in accordance with N.J.S.A. 58:10A-6F(5) that I have received and reviewed the attached discharge monitoring reports.

N/A

N/A

NAME AND TITLE
N/A

SIGNATURE
N/A

DATE

AREA CODE/PHONE NUMBER

Consolidated Waste Characterization Report

PI 46815

PERMIT NUMBER: NJ0025411 MONITORED LOCATION: 462B DSN 462B - DSW Intern MONITORING PERIOD: 7/1/2011 TO 12/31/2011 FACILITY NAME: HOPE CREEK GENERATING STATION

SAMPLE DATE OF REPORT: 11-16-2011

| PARAMETER | QL | REPORTED VALUE | UNITS | REMARK CODE | SAMPLE TYPE |
|--|----------|----------------|-------|-------------|-------------|
| Cyanide, Total (as CN) 00720 Effluent Gross Value | RQL = 40 | < 20 | UG/L | | GRAB |
| Nickel, Total Recoverable 01074 Effluent Gross Value | RQL = 10 | 2.8 | UG/L | | GRAB |
| Zinc, Total Recoverable 01094 Effluent Gross Value | RQL = 10 | 128 | UG/L | | GRAB |
| Cadmium, Total Recoverable 01113 Effluent Gross Value | RQL = 4 | 0.2 | UG/L | | GRAB |
| Chromium, Total Recoverable 01118 Effluent Gross Value | RQL = 10 | 2.1 | UG/L | | GRAB |
| Copper, Total Recoverable 01119 Effluent Gross Value | RQL = 2 | 82.6 | UG/L | | GRAB |
| Lab Certification # 99999 Lab | PA166 | | | | NOT AP |
| Lab Certification # 99999 Lab | | | | | NOT AP |
| Lab Certification # 99999 Lab | | | | | NOT AP |
| Lab Certification # 99999 Lab | | | | | NOT AP |
| Lab Certification # 99999 Lab | | | | | NOT AP |

Comments: If there are any questions regarding the monitoring report form, please contact Heather Genievich of the Bureau of Surface Water Permitting at (609) 292-4860.