## NOV 2 5 2013



#### HCH-2013-064

CERTIFIED MAIL RETURN RECEIPT REQUESTED ARTICLE NUMBER: 7011 3500 0000 5084 6246

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 October 2013.

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,

Paul J. Danison

Paul J. Davison Site Vice President – Hope Creek

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#### HCH-2013-064 NJPDES DMR

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### Attachments

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

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#### HCH-2013-064 NJPDES DMR

#### EXPLANATION OF CONDITIONS

#### October 2013

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 indicated on the respective transmittal sheet with explanations below.

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 requirements and to obtain additional operational data.

HCH-2013-064 NJPDES DMR

EXPLANATION OF EXCEEDANCES

October 2013

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

DSN No.

# EXPLANATION

# No Exceedances

HCH-2013-064 NJPDES DMR

COUNTY OF SALEM STATE OF NEW JERSEY

I, Paul J. Davison, 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.

Paul J. Davison Site Vice President – Hope Creek

Sworn and subscribed before me this  $25^{++}$  day of November, 2013.

JENNIFER M. TURNER ID # 2332067 NOTARY PUBLIC OF NEW JERSEY My Commission Expires 8/8/2015

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

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NJPDES PERMIT		MONITORING	G PERIO	D		MONITO	RED LOCATION:
NJ0025411	MonthDay101	<b>Year</b> 2013 To	Month 10	Day 31	Year 2013	461A – DSN 461A	A – DSW
<b>PERMITTEE:</b> PSE&G NUCLEAR LLC PO BOX 236 – ALLOWAY CRI HANCOCKS BRIDGE, NJ 0803		LOCATION HOPE CREEK ARTIFICIAL I FOOT OF BUT LOWER ALLO	GENERAT SLAND TONWOO	TING ST. D RD	ATION	<b>REPORT REC</b> PSE&G TRAVIS ZIGO PO BOX 236 / H1 HANCOCKS BRI	5
	REGI	ON / COUNTY: S	outhern / S	alem Co	unty		
CHECK IF APPLICABLE	No Disch	arge this Monitori	ng Period		Ionitoring	g Report Comments Attac	hed
WHO MUST SIGN The high the certification or, in his absen the certification. Where the hig responsibility or person designa another entity to operate the tre I certify under penalty of law the that, based on my inquiry of the complete. I am aware that then to N.J.A.C. 7:14A-6.9(B). The	ce a person desig thest ranking oper- ted by that person atment works, the pat I have personation ose individuals in the are significant	nated by that perso rator does not have a shall also sign the highest-ranking o lly examined and a mediately respons penalties for subm	on. For a lo the ability e second ce fficial of the m familiar bible for ob- itting false	ical agen to autho ertification e contra- with the taining th informa	cy, the hig rize capita on at the be cted entity informatione information, inclu	whest ranking operator of the all expenditures and hire per- option of this page. If the h shall sign the certification ion submitted in this docum- tion, I believe that the info- iding the possibility of and	he treatment works shall sign rsonnel, a person having that local agency has contracted with n. nent and all attachments, and prmation is true, accurate and d/or imprisonment, pursuant
Paul J. Davison, Site	Vice President-H	ope Creek			<u></u>	N/A	
NAME AND TITLE OF PRINCIPAL Paul J. Da	EXECUTIVE OFFIC	ER, AUTHORIZED A	GENT, OR 🕈	LICENSE	D OPERAT	OR GRADE AND REG $///25/13$	ISTRY NUMBER (IF APPLICABLE) 856-339-1555 .
SIGNATURE OF PRINCIPAL EXEC	UTIVE OFFICER, A	UTHORIZED AGENT	, OR *LICE	NSED OPP	ERATOR	DATE	AREA CODE/PHONE NUMBER
*For a local agency where the high person designated by that person a I certify under penalty of law and i	shall sign the follow	ving certification:			-	-	a person having that responsibility of
N/A			N/A	e reviewe	a me utilor	N/A	N/A .
NAME AND TITLE		SIGNATURE	<u> </u>			DATE	AREA CODE/PHONE NUMBER

PI 46815

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Surface Water	Discharg		ing Keport								PI 46815
PERMIT NUMBER:	MON	ITORED LOCA	TION: <u>N</u>	IONITORING PERIOD: FACILITY NAME:							
NJ0025411	461A	DSN 461A - DS	SW 1	0/1/2013	TO 10/31/2013	HOPE CREE	G STAT	ON			
PARAMETER	$\mathbf{>}$	QUANTITY (	DR LOADING	UNITS	QUALI	TY OR CONCENTR	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, In Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	48.751	69.149		*****	*****	*****	· · · · · · · · · · · · · · · · · · ·	ø	Continuous	Meter
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		· 清晰的:************************************			STUTIES	We want to the second sec	Will of the second states in the				
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50050 7 Intake From Stream		REPORT 01MOAV	REPORT 01DAMX	MGD			1941 - 1945 1946 - 1945 - 1946 1946 - 1946 - 1946 1946 - 1946 - 1946 - 1946	*****		Continuous	METER
		AND			North States			<u> </u>			
pH	SAMPLE MEASUREMENT	*****	*****		7.5	*****	8.6		ø	/week	Grab
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TAN3E 1 Effluent Gross Value	PERMIT			******	REPORT 01RPMN			%EFFL		1/Year	COMPOS
	QL		William Statistics	l	A THE MANAGEMENT	Marces	WARK			Males I. S. and	
IC25 Statre 7day Chr Mysid Bahia	SAMPLE MEASUREMENT	******	*****		Code = N	*****	*****		¢	Code=N	Code = N
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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.

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PERMIT NUMBER:		ITORED LOCA			RING PERIOD:	FACILITY N		<u>.</u>			
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PARAMETER		QUANTITY (	DR LOADING	UNITS	QUALI		ATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
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00010  1 Effluent Gross Value	PERMIT			*****		REPORT 01MOAV	-36.2. 01DAMX	DEG.C		Continuous	METER
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Temperature, oC	SAMPLE MEASUREMENT	*****	****		*****	21.1	24.8		ø	CONTINUOUS	Meter
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<u> </u>	R QL	######################################	A Bay and Bay	ļ	******	Anna anna					
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Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	*****	****		****	3.0	3.0		ø	YMONTH	GRab
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Sulfate, Total (as SO4)	SAMPLE MEASUREMENT	*****	*****		*****	Code=N	Code=N		¢	Code=N	Code=N
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	iii QL 👷	12.00	**************************************		······································				國		

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PERMIT NUMBER:	MON	ITORED LOCA	TION:	MONITOR	NG PERIOD:	FACILITY N	FACILITY NAME:					
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	AL C	*****	And Manager State	Ķ.								
Heat (winter) (per Hr.)	SAMPLE MEASUREMENT	103	312		*****	*****	****		$\phi$	1/Day	Calctd	
81387  1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	662 01DAMX	MBTU/HR				*****		1/Day	CALCTD	
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Copper, Total Recoverable	SAMPLE MEASUREMENT	***	*****		*****	Code=N	Code=N		¢	Code=N.	Code=N	
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	QL	****	·******	di	A CARLEN AND A CARLEN				新華			

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

NJ0025411 Month Day Year To Month Day Year Month Day Year   PERMITTEE: PSEAG NUCLEAR LLC PO BOX 236 - ALLOWAY CREEK NECK RD HOPE CREEK GENERATING STATION ARAVIS ZIGO PSEAG PSEAG PSEAG PO BOX 236 - ALLOWAY CREEK NECK RD ACTIFICIAL ISLAND FOOT OF BUTTONWOOD RD TAVIS ZIGO PO BOX 236 - HIS HANCOCKS BRIDGE, NJ 08038 HEGION / 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 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 strip shall sign the certification. If the local agency has contracted with another entity shall sign the certification.   Icertify under penalty of law that 1 have personally examined and am familiar with the information, including the possibility of and/or imprisonment, pursuant to NJ.A.C. 7:14A.6.9(B). The New Jersey water Pollution Control Act provides for penalties up to \$50,000 per violation. MA   Paul J. Davison. Sile Vice President-Hope Creek N/A N/A <	NJPDES PERMIT	Ν	IONITORI	NG PERIO	D		MONITO	RED LOCATION:
PSE&G NUCLEAR LLC HOPE CREEK GENERATING STATION PSE&G   PO BOX 236 - ALLOWAY CREEK NECK RD ARTIFICIAL ISLAND TRAVIS ZIGO   PO DO OF BUTTONWOOD RD PO BOX 236 / H15   LOWER ALLOWAYS CREEK, NJ 08038 HANCOCKS BRIDGE, NJ 08038   REGION / COUNTY: Southern / Salem County PO BOX 236 / H15   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 adocument and all attachments, and that, based on my inquiry of those individuals immediately responsible for obtaining the 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.   Paul J. Davison, Site Vice President-Hope Creek N/A   NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR GRAPE AND REGISTRY NUMBER (IF APPLICABLE)   *For a local agency where the highest-ranking operator does not have the ability to authorize	NJ0025411		· ·				461C - DSN 461	C - DSW internal
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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, 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.   Paul J. Davison, 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)   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 personal a person having that responsibility or person designated by that person shall sign the following certification:   I certify under pen		REGIC	ON / COUNTY:	: Southern / S	alem Co	unty	1	
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NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR GRADE AND REGISTRY NUMBER (IF APPLICABLE)   SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR $l(l/25/l3)$ 856-339-1555   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	the certification. Where the hig responsibility or person designs another entity to operate the tree I certify under penalty of law th that, based on my inquiry of the complete. I am aware that the	whest ranking opera atted by that person atment works, the mat I have personall ose individuals impresent re are significant p	tor does not ha shall also sign highest-ranking ly examined an nediately respo enalties for sub	ve the ability the second ce g official of the d am familiar onsible for obto omitting false	to autho rtificatio e contra with the aining th informa	rize capita on at the b cted entity informatione information, inclu	al expenditures and hire pe ottom of this page. If the l v shall sign the certification ion submitted in this docum ation, I believe that the info uding the possibility of and	rsonnel, a person having that local agency has contracted with n. ment and all attachments, and prmation is true, accurate and
Paul J. Davison II[25[13] 856-339-1555   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	Paul J. Davison, Site V	ce President- Hop	e Creek				N/A	<u>.</u>
*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 of 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 OF PRINCIPAL Poul J. Dan	EXECUTIVE OFFICE	CR, AUTHORIZEI	) AGENT, OR *	LICENSE	D OPERAT		
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<u>N/A</u> <u>N/A</u> <u>N/A</u>	person designated by that person	shall sign the followi	ng certification:	-		-		
		in accordance with N	.J.S.A. 58:10A-0		e reviewe	d the attac		
			SIGNATURE	N/A	<u> </u>		• • • • • • • • • • • • • • • • • • • •	

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PERMIT NUMBER:	MON	ITORED LOCA	TION: N	IONITOR	NG PERIOD:	FACILITY N	AME:				<u> </u>
NJ0025411	461C	: DSN 461C - D	SW interna 1	0/1/2013	TO 10/31/2013	HOPE CREE	EK GENERATIN	G STAT	ION		
PARAMETER	$\searrow$	QUANTITY (	DR LOADING	UNITS	QUALI	TY OR CONCENTR	ATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, in Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	0.014	0.060		*****	*****	*****		ø	CONTINOOUS	Meter
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Petrol Hydrocarbons, Total Recoverable	SAMPLE MEASUREMENT	*****	*****		*****	1	1		ø	2/month	GRab
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Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	*****	*****		*****	9	9		ø	Ymonth	Gompos
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	QL	The states and the		[		NOTES - COMPANY					
Lab Certification #	SAMPLE MEASUREMENT	17451	PA166		06005	03036	PAO IO				
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT : Lab # p		REPORT Lab #	REPORT	REPORT		州市	Not Applic	NOTAP
	₩ <b>₩</b> QL¥₩	14.5 × * * * * * * * * *	With the second design of the		······································				新疆		

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.

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

NJPDES PERMIT	N	<b>IONITORING</b>	PERIOD		MONITO	RED LOCATION:
NJ0025411	MonthDay101	<b>Year</b> <b>2013</b> To	MonthDay1031	Year 2013	462B - DSN 462	B - DSW Internal
<b>PERMITTEE:</b> PSE&G NUCLEAR LLC PO BOX 236 – ALLOWAY CR HANCOCKS BRIDGE, NJ 0803		LOCATION HOPE CREEK ( ARTIFICIAL IS FOOT OF BUTT LOWER ALLOW	GENERATING S LAND TONWOOD RD	ΓΑΤΙΟΝ Γ	<b>REPORT REC</b> PSE&G TRAVIS ZIGO PO BOX 236 / H1: HANCOCKS BRI	5
	REGIC	ON / COUNTY: So	uthern / Salem C	ounty		
CHECK IF APPLICABLE	: 🗌 No Dischar	rge this Monitoring	g Period	Monitoring	g Report Comments Attac	hed
WHO MUST SIGN The high the certification or, in his abser the certification. Where the high responsibility or person designs another entity to operate the tree 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	ace a person design ghest ranking opera ated by that person catment works, the pat I have personall ose individuals import re are significant port	ated by that person tor does not have t shall also sign the highest-ranking off ly examined and ar nediately responsil enalties for submit	b. For a local age he ability to auth second certificat ficial of the control n familiar with the ple for obtaining ting false inforn	ncy, the hig orize capita ion at the b acted entity he informat the informat ation, inclu	ghest ranking operator of the al expenditures and hire pe- ottom of this page. If the lay shall sign the certification ion submitted in this docur ation, I believe that the info- uding the possibility of and	ne treatment works shall sign rsonnel, a person having that ocal agency has contracted with nent and all attachments, and prmation is true, accurate and
Paul J. Davison, Sit	e Vice President-	Hope Creek		<u></u>	N/A	
NAME AND TITLE OF PRINCIPAL		R, AUTHORIZED AG	ENT, OR *LICEN	ED OPERAT	OR GRADE AND REG	ISTRY NUMBER (IF APPLICABLE) 856-339-1555
SIGNATURE OF PRINCIPAL EXEC		THORIZED AGENT,	OR *LICENSED O	PERATOR	DATE	AREA CODE/PHONE NUMBER
*For a local agency where the hig person designated by that person			ibility to authorize	capital expe	enditures and hire personnel,	a person having that responsibility or
I certify under penalty of law and i	in accordance with N	.J.S.A. 58:10A-6F(5)	) that I have review	ed the attac	hed discharge monitoring rep	orts.
N/A			N/A		N/A	N/A
NAME AND TITLE		SIGNATURE			DATE	AREA CODE/PHONE NUMBER

PERMIT NUMBER:	MON	IITORED LOCA	TION:	IONITOR	RING PERIOD:	FACILITY N	AME:				
NJ0025411	4628	B DSN 462B - D	SW Interna 1	0/1/2013	TO 10/31/2013	HOPE CREEK GENERATING STATION					
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	0.030	0.046		****	*****	****		Ø	GNTINOCUS	Meter
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD				*****		Continuous	METER
BOD, 5-Day (20 oC)	SAMPLE MEASUREMENT	*****	*****		*****	316	316		$\phi$	1/mowth	Compos
00310 G Raw Şew/influent	PERMIT			*****			REPORT 01DAMX	MG/L		1/Month	COMPOS
BOD, 5-Day (20 oC)	SAMPLE	······································		-	**************************************						
00310 1 Effluent Gross Value		لم 8 01MOAV	L REPORT 01WKAV	KG/DAY		30 + 01MOAV 2	16 45 01WKAVI <b>3</b>	MG/L	Ø	/Mcwth 1/Month	COMPOS
BOD, 5-Day (20 oC)	SAMPLE MEASUREMENT	*****	*****	·	95.0		*****		¢	1/month	Calctd
00310 K Percent Removal		ининининининининининининининининининин		******	87.5 01MOAVMN			PERCENT		1/Month	CALCTD E
Solids, Total Suspended	SAMPLE MEASUREMENT	****	*****		****	415	415		¢	1/month	Compos
00530 G Raw Sew/influent				* * * *	1	REPORT/F		MG/L		1/Month	COMPOS
Solids, Total Suspended	SAMPLE MEASUREMENT	[274] 这个句话的10~1 不过的的引动的10 ******			*****	9	9		Ø	Ymowth	Compes
00530 1 Effluent Gross Value	PERMIT REQUIREMENTS	ing and a second of the second se		*****		30 01MOAV	45 01WKAV	MG/L		1/Month	COMPOS
		Silah ******	S - S - C - C - C - C - C - C - C - C -			A	30 41 × 10 × 10 × 10	L			

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Surface water	Dischar	je wonitor	ing Report								PI 46815
PERMIT NUMBER:	MON	ITORED LOCA									
NJ0025411	462B	DSN 462B - DS	SW Interna 1	0/1/2013	TO 10/31/2013	HOPE CREE	EK GENERATIN	G STATI	ON		
PARAMETER	$\mathbf{\mathbf{X}}$	QUANTITY (	DR LOADING	UNITS	QUALI	TY OR CONCENTR	ATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Solids, Total Suspended	SAMPLE MEASUREMENT	*****	*****		98	98	*****		ø	1/month	Caletd
00530 K Percent Removal	PERMIT REQUIREMENT		Annen Strates Konstificietat		85 01MOAVMN	REPORT 01MOAV		PERCENT		1/Mönth	CALCTD:
Oil and Grease	SAMPLE	*****	*****	 	*****	25	< 5		ø	1/month	GRab
00556  1 Effluent Gross Value				******		10 F01MOAV 22	15 01DAMX	MG/L		•1/Month	GRAB
Nitrogen, Ammonia Total (as N)	SAMPLE	- <u>新聞時間</u> 2211月4日1日1日1日1日1日1日1日1日1日1日1日1日1日1日1日1日1日1	****		*****	44 FEB 7 882 KONTENEN ALL 1998 KA 1998	1) 1999 1999 1999 1999 1999 1999 1999 1		Ø	1/month	Compos
00610 1 Effluent Gross Value			Contraction of the second seco	******		35 01MOAV	REPORT 01DAMX	MG/L		1/Month	COMPOS
Enterococci	SAMPLE MEASUREMENT	*****	*****		*****	< 10	۲۰۰۰۰۰۰ ۲۰۰۰ ۲ ( O	<u> </u>	Ø	1/month	GRab
61211 1 Effluent Gross Value	PERMIT			*****		REPORT 01MOGE	REPORT 01WKGE	#/100ML		d/Month	GRAB
Coliform, Fecal General	SAMPLE MEASUREMENT	*****	*****		*****	210	210		ø	Ymonth	GRab
74055 1 Effluent Gross Value			1	******		200 01MOGE	400. 01WKGE	#/100ML		4/Month -	GRAB
Lab Certification #	SAMPLE MEASUREMENT	1745	PA166	L	06005	03036	PAOID		<u>. 7942855</u>		
99999 99 Lab	PERMIT REQUIREMENT	REPORT 201	REPORT Lab #		REPORT &	REPORT	REPORT			Not Applic:	NOT/AP
	<b>QL</b> XSS	10914***********************************	the man and the second s		A COMPANY AND A COMPANY	Constant State	California and a second				

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