DEC 23 2014



HCH-2014-050

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
ARTICLE NUMBER: 7013 1710 0000 6324 5059

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 2014 and the Consolidated Waste Characterization Report for DSN 461C.

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 Travis Zigo at (856) 339-2493.

 \mathcal{O}

Paul J. Davison

Site Vice President - Hope Creek

HCH-2014-050 NJPDES DMR

Attachments

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

HCH-2014-050 NJPDES DMR

EXPLANATION OF CONDITIONS

November 2014

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.

3

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 moved one day sooner this month for DSN-461A TOC samples and for DSN-461C TOC, TSS and PHC samples to align and utilize available resources to a normal working day.

EXPLANATION OF EXCEEDANCES

November 2014

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, 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 22nd day of December, 2014.

JENNIFER M. TURNER ID # 2332657 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

NJPDES PERMIT	I I	MONITOR	ING PE	RIOD)		MONITOR	ED LOCATION:			
NJ0025411	Month Day	Year 2014	To N	Ionth 11	Day 30	Year 2014	461A – DSN 461A	- DSW			
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 TRAVIS ZIGO PO BOX 236 / H15 HANCOCKS BRIDGE, NJ 08038				
	REGIO	N / COUNT	Y: South	ern / Saļ	lem Con	nty					
CHECK IF APPLICABLE:	No Discha	rge this Moni	itoring Pe	eriod ;	М	onitoring	Report Comments Attach	ed			
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.								sonnel, a person having that scal agency has contracted with ent and all attachments, and rmation is true, accurate and			
Paul J. Davison, Site	Vice President-Ho	pe Creek					N/A				
NAME AND TITLE OF PRINCIPAL	ME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR Paul J. Danjan					OR GRADE AND REGI	STRY NUMBER (IF APPLICABLE) 856-339-1555				
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR DATE AREA CODE/PHONE NUMBER							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 accordance with N	.J.S.A. 58;10A	, .		reviewed	the attach					
NAME AND TITLE		CICNATUR	N	/A	 ,		N/A	N/A .			
NAME AND THEE		SIGNATUR	II.	•			DATE	AREA CODE/PHONE NUMBER			

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - DSW

11/1/2014 TO 11/30/2014

HOPE CREEK GENERATING STATION

PARAMETER		QUANTITY (OR LOADING	UNITS	QUALI	TY OR CONCENTR	ATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Flow, in Conduit or Thru Treatment Plant	SAMPLE MEASUREMENT	36.387	38.097		我实实有政治	****	****		ϕ	Continuous	Meter
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	******	The Course	ennen Ennen	*****		Continuous	METER
Flow, In Conduit or	SAMPLE MEASUREMENT	51.943	53.713		*****	*****	*****		Ø	Continuous	meter
Thru Treatment Plant 50050 7 Intake From Stream	PERMIT REQUIREMENT/	REPORT 01MOAV	REPORT 01DAMX	MGD	***************************************	(manufacture)	-	*****		Continuous	- METER
pH	SAMPLE MEASUREMENT	*****	*****		8.4	*****	8.6			1/week	GRab
00400 1 Effluent Gross Value	PERMIT REQUIREMENT	******	Manners of	*****	6.0 01DAMN	Account to the second s	9:0 01DAMX	SU		/Week/	GRAB
LC50 Statre 96hr Acu Mysid Bahia	SAMPLE MEASUREMENT	*****	*****		Code=N	****	*****		ø	Code=N	Code=N
TAN3E 1 Effluent Gross Value	(4 PERMIT REQUIREMENT)	anne.	anni)	*****	REPORT : 01RPMN2 /	ACTION STATES	instanti material	%EFFL		1/Year	COMPOS
IC25 Statre 7day Chr Mysid Bahia	SAMPLE MEASUREMENT	****	表示方式	_	Code=N	****	****		Ø	Code=N	Code=N
TBP3E 1 Effluent Gross Value	PERMIT REQUIREMENT	*******	anning (Constitution of Constitution of Consti	*****	REPORT 01RPMN	anther true	**************************************	%EFFL	11	1/Year	COMPOS
Chlorine Produced Oxidants	SAMPLE MEASUREMENT	****	*****		*****	40.1	<0.1		Ø	3/week	GRab
*CPOX 1 Effluent Gross Value	PERMIT REQUIREMENT	******	*******	*****	min H	0:2 01MOAV	0.5 01DAMX	MG/L		3/Week	GRAB
	RQL	*****	*****		*****	0:1	V****** 0:1 ****				

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - DSW

11/1/2014 TO 11/30/2014

HOPE CREEK GENERATING STATION

770025411		DON TOTAL		., .,			.N OLNLINAIII				
PARAMETER		QUANTITY (OR LOADING	UNITS	QUALI	TY OR CONCENTR	ATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Temperature, oC	SAMPLE MEASUREMENT	****	****		};; ######	22.5	30.1		ø	Continuous	meter.
00010 1 Effluent Gross Value	PERMIT REQUIREMENT	******	awawa	*****		REPORT 01MOAV	36;2 01DAMX	DEG.C		Continuous	METER
Temperature,	QL SAMPLE	*****	****		**************************************	ATTACE	******		<u> </u>		,
oC	MEASUREMENT	****	****		· *****	12.2	16.8		Ø	Continuous	Meter
00010 7 Intake From Stream	PERMIT REQUIREMENT	*****	******	*****	******	REPORT 01MOAV	REPORT 01DAMX	DEG.C		Continuous	METER
	QL	******		·	# \$20 1987:	776 37 2 **********************************	******			ne din	
Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	****	****		****	5.6	5.6		Ø	Ymowth	GRab
00680 1 Effluent Gross Value	PERMIT REQUIREMENT	******	******	*****		REPORT 01MOAV\$	REPORT 01DAMX	MG/L	**	1/Month	GRAB.
	QL.	****	*****		****	****	*****				
Carbon, Tot Organic	SAMPLE MEASUREMENT	****	****		***	0.47	0.47		Ø	Ymosth	Calc+d
00680 2 Effluent Net Value	PERMIT REQUIREMENT	Adaman V. S	* 	*****	******	REPORT 01MOAV	REPORT:	MG/L		1/Month	CALCTD
	.‴ QL	# 2********	*****		4 ***** C. FAR	To accept	*****				Astronomy State
Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	****	*****		*****	3.5	3.5		ø	1/month	GRab
00680 7 Intake From Stream	PERMIT REQUIREMENT	eración Canadana	******	*****	******	REPORTA :	REPORT 01DAMX	MG/L		1/Month)	r GRAB
	QL./₺%	*****	*******		*****	*****	*****			* * * * * * * * * * * * * * * * * * *	
Sulfate, Total (as SO4)	SAMPLE MEASUREMENT	*****	****		****	Code=N	Code=N		Ø	Code=N	Code=N
00945 1 Effluent Gross Value	PERMIT REQUIREMENT,		£	*****		REPORT 01MOAV	REPORT 01DAMX	UG/L		1/6 Months	COMP24
L	C QL	****	*****		******	*****	****				

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - DSW

11/1/2014 TO 11/30/2014

HOPE CREEK GENERATING STATION

1430025411	4017	DON HOIA - DO	,,,,	17 1720 14	10 11/30/2014	HOI E OILE	IN GENERALIN	OULL	014		
PARAMETER	X	QUANTITY	OR LOADING	UNITS	QUALI	TY OR CONCENTE	RATION	UNITS	NO. EX.	FREQ. OF ANALYSIS	SAMPLE TYPE
Boron, Total (as B)	SAMPLE MEASUREMENT	*****	****		****	Code=N	Code N		ø	Code=N	Code=N
01022 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	******	****	*****	REPORT 01MOAV	REPORT 01DAMX	UG/L		1/6 Months	o COMPOS
·	∌ QL	* 3 *****	* ******		*****		2.45 ***********		4, 4		
Heat (winter) (per Hr.)	SAMPLE MEASUREMENT	232	442		*****	****	****		Ø	1/say	Calctd
81387 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	662 01DAMX	MBTU/HR	*****	******	*****	****		1/Day	CALCTD
	* QL	31.00E[: assaulte: 5]	******		2 * * * * * * * * * * * * * * * * * * *	Latera Spirit	*****		210		
Copper, Total Recoverable	SAMPLE MEASUREMENT	表示大大大	****		****	Code=N	Code=N	-	Ø	Code=N	Code=N
01119 1 Effluent Gross Value	PERMIT REQUIREMENT	Account .	inne	*****	Anna Carlo	REPORT 01MOAV	REPORT 01DAMX	UG/L		1/6 Months	COMPOS
	, RQL	******	esakti "		*****	2	2 2				182
Lab Certification #	SAMPLE MEASUREMENT	17451	PA166		03036						
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab#	REPORT Lab#		REPORT	REPORT Lab#	REPORT Lab#			Not Applic	NOT AP
	. • QL		******		******	*****	******				

New Jersey Department of Environmental Protection Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

SIGNATURE

NAME AND TITLE

NJPDES PERMIT	MON	NITORING	PERIOD			MONITOR	ED LOCATION:
NJ0025411	 	Year 70	Month Day 11 30	Year 2014	461C	- DSN 4610	C - DSW internal
PERMITTEE: PSE&G NUCLEAR LLC PO BOX 236 – ALLOWAY CRI HANCOCKS BRIDGE, NJ 0803	EEK NECK RD AI 8 FO	OPE CREEK O RTIFICIAL ISI OOT OF BUTT	OF ACTIVITY GENERATING ST LAND CONWOOD RD WAYS CREEK, N.	ATION	PS TR PO	EPORT REC E&G AVIS ZIGO BOX 236 / H15 ANCOCKS BRIE	
	REGION /	COUNTY: Soi	uthern / Salem Co	unty			
CHECK IF APPLICABLE:	No Discharge t	his Monitoring	g Period 🔲 N	I onitoring	Report Co	omments Attach	ed
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.							
Paul J. Davison, Site Vi	ce President- Hope Cr	reek				N/A_	_
NAME AND TITLE OF PRINCIPAL	EXECUTIVE OFFICER, A	UTHORIZED AG	ENT, OR *LICENSI	D OPERATO	OR (GRADE AND REGI	STRY NUMBER (IF APPLICABLE)
Paul J.	Danion					12/22/14	856-339-1555 .
SIGNATURE OF PRINCIPAL EXEC	UTIVE OFFICER, AUTHO	RIZED AGENT,	OR *LICENSED OP	ERATOR	_ 	DATE	AREA CODE/PHONE NUMBER
*For a local agency where the hig person designated by that person .			ibility to authorize o	apital exper	nditures and	l hire personnel, a	person having that responsibility or
	shall sign the following ce	ertification:				·	person having that responsibility or orts.

DATE

AREA CODE/PHONE NUMBER

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461C DSN 461C - DSW interna

11/1/2014 TO 11/30/2014

HOPE CREEK GENERATING STATION

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	0.035	0.078		*****	****	****		Ø	Continuous	meter
50050 1 Effluent Gross Value	PERMIT REQUIREMENT QL	REPORT 01MOAV	REPORT 01DAMX	MGD	AAAAAA (********	*****	****		Continuous	METER
Solids, Total Suspended	SAMPLE MEASUREMENT	****	****		*****	G	6		Ø	Ynowth	Compas
00530 1 Effluent Gross Value	PERMIT S REQUIREMENT	*******	# # # # # # # # # # # # # # # # # # #	*****	- Annana - A	01MOAV	100 101DAMX	MG/L		1/Month	COMPOS
Petrol Hydrocarbons, Total Recoverable	SAMPLE MEASUREMENT	****	****		****	4 2	4 2		ø	2/morth	GRab
45501 1 Effluent Gross Value	PERMIT REQUIREMENT	****	****	*****	*****	10 01MOAV	15 01DAMX	MG/L		2/Month	GRAB
Carbon, Tot Organic	SAMPLE MEASUREMENT	****	****		*****	6	6		ø	1/month	Compos
00680 1 Effluent Gross Value	PERMIT REQUIREMENT	*******	1 218.45 5 ***********************************	****	anna laga di	REPORT 01MOAV	= 50) () () () () () () () () () (MG/L		1/Month	COMPOS
Lab Certification #	SAMPLE MEASUREMENT	17451	PA166		03036	PA010					
99999 99 Lab	PERMIT REQUIREMENT	REPORT	REPORT		REPORT Lab #	**REPORT Lab#	REPORT Lab #			Not Applic,	NOT AP
	QL*-/	*****	*****		*****	*****	************	<u> </u>			27.546.775.455.0

MONITORED LOCATION:

New Jersey Department of Environmental Protection Division of Water Quality

MONITORING PERIOD

NJPDES PERMIT

Surface Water Discharge Monitoring Report Submittal Form

NJ0025411	Month Day 11 1	Year 2014 To	Month 11	30	Year 2014	462B - DSN 462	2B - DSW Internal
PERMITTEE: PSE&G NUCLEAR LLC PO BOX 236 – ALLOWAY CR HANCOCKS BRIDGE, NJ 0801		REPORT REAPSE&G TRAVIS ZIGO PO BOX 236 / HI HANCOCKS BR	15				
		N / COUNTY: S			•		
CHECK IF APPLICABLE	No Dischar	ge this Monitor	ing Period	M	onitoring	g Report Comments Attac	cnea
responsibility or person designanother entity to operate the treat I certify under penalty of law that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The	ated by that person satment works, the hat I have personally ose individuals immer are significant personally New Jersey water I	shall also sign the sighest-ranking of the standing of the sta	ne second ce official of th am familiar sible for obto nitting false	ertification the contract with the taining the information	ited entity informati e informa ion, inclu	y shall sign the certification submitted in this docu nation, I believe that the in- nating the possibility of ar to to \$50,000 per violation	local agency has contracted with on. Imment and all attachments, and formation is true, accurate and ad/or imprisonment, pursuant
responsibility or person designanother entity to operate the treat I certify under penalty of law that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Paul J. Davison, Sit	ated by that person satment works, the hat I have personally ose individuals immere are significant personally water I be Vice President- I	shall also sign the sighest-ranking of the second of the s	ne second ce official of the am familiar sible for obte nitting false of Act providen	ertification be contract with the taining the information des for per	informati e informa ion, inclu nalties up	v shall sign the certification submitted in this documention, I believe that the integration of the possibility of an to \$50,000 per violation N/A	local agency has contracted with on. Iment and all attachments, and formation is true, accurate and ad/or imprisonment, pursuant.
responsibility or person designanother entity to operate the treat of law to the 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 Paul J. Davison, Sit	ated by that person satment works, the hat I have personally ose individuals immere are significant personally water I be Vice President- I	shall also sign the sighest-ranking of the second of the s	ne second ce official of the am familiar sible for obte nitting false of Act providen	ertification be contract with the taining the information des for per	informati e informa ion, inclu nalties up	v shall sign the certification submitted in this documention, I believe that the integration of the possibility of an to \$50,000 per violation N/A	local agency has contracted with on. Imment and all attachments, and formation is true, accurate and ad/or imprisonment, pursuant
responsibility or person designanother entity to operate the treat in a 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 Paul J. Davison, Sit NAME AND TITLE OF PRINCIPAL	ated by that person satment works, the hat I have personally use individuals immere are significant personally water I have personally water I have Jersey water I have Vice President-HEXECUTIVE OFFICE	shall also sign the signest-ranking of the standard and nediately respondenties for submarties for Submarties Controloge Creek	ne second ce official of th am familiar sible for obt nitting false ol Act provid	ertification ne contrac with the taining the informati des for per	informati e informa ion, inclu nalties up	v shall sign the certification submitted in this documention, I believe that the integration of the possibility of an to \$50,000 per violation N/A	local agency has contracted with on. Imment and all attachments, and formation is true, accurate and ad/or imprisonment, pursuant . GISTRY NUMBER (IF APPLICABLE)
responsibility or person designanother entity to operate the treat I certify under penalty of law that, based on my inquiry of the complete. I am aware that the to N.J.A.C. 7:14A-6.9(B). The Paul J. Davison, Sit NAME AND TITLE OF PRINCIPAL SIGNATURE OF PRINCIPAL EXECT *For a local agency where the hig person designated by that person	atted by that person satment works, the hat I have personally ose individuals immere are significant personally of the Vice President-HEXECUTIVE OFFICES UTIVE OFFICER, AUT thest-ranking operator shall sign the following	shall also sign the sign examined and pediately respondenties for submitted Pollution Control Hope Creek R, AUTHORIZED AGENTY along certification:	ne second ce official of the am familiar sible for obteiniting false of Act provide AGENT, OR *	ertification are contract with the taining the information of the info	informati e informa ion, inclu nalties up OPERATOR apital expen	y shall sign the certification of the submitted in this document of the possibility of are to \$50,000 per violation. N/A OR GRADE AND RE 12 22 14 DATE Inditures and hire personnel	local agency has contracted with on. Imment and all attachments, and formation is true, accurate and ad/or imprisonment, pursuant GISTRY NUMBER (IF APPLICABLE) 856-339-1555 AREA CODE/PHONE NUMBER A person having that responsibility
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 Paul J. Davison, Silvame and TITLE OF PRINCIPAL SIGNATURE OF PRINCIPAL EXECT *For a local agency where the highest penalty of the street	atted by that person satment works, the hat I have personally ose individuals immere are significant personally of the Vice President-HEXECUTIVE OFFICES UTIVE OFFICER, AUT thest-ranking operator shall sign the following	shall also sign the sign examined and pediately respondenties for submitted Pollution Control Hope Creek R, AUTHORIZED AGENTY along certification:	ne second ce official of the am familiar sible for obteiniting false of Act provide AGENT, OR *	ertification are contract with the taining the information of the info	informati e informa ion, inclu nalties up OPERATOR apital expen	y shall sign the certification of the submitted in this document of the possibility of are to \$50,000 per violation. N/A OR GRADE AND RE 12 22 14 DATE Inditures and hire personnel	local agency has contracted with on. Imment and all attachments, and formation is true, accurate and ad/or imprisonment, pursuant GISTRY NUMBER (IF APPLICABLE) 856-339-1555 AREA CODE/PHONE NUMBER To a person having that responsibility

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

462B DSN 462B - DSW Interna

11/1/2014 TO 11/30/2014

HOPE CREEK GENERATING STATION

								-			
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	0.023	0.034		****	****	*****		Ø	Continuous	Meter
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOÁV	REPORT 01DAMX	MGD	******	Account 2	ADARBA TANABA	*****		Continuous	METER
BOD, 5-Day (20 oC)	SAMPLE MEASUREMENT	*****	*****		*****	382	382		Ø	Ynonth	Compos
00310 G Raw Sew/influent	PERMIT REQUIREMENT	Angelan	ATTACKET ATT	*****	entro.	REPORT 8	REPORT 01DAMX	MG/L	- 10	1/Month	COMPOS
BOD, 5-Day (20 oC)	QL	*******	* * ****** *		Section 1	Annand Series	*****			1/ 14	0.005
00310 1 Effluent Gross Value	MEASUREMENT PERMIT REQUIREMENT	2 8 01MOAV	REPORT 01WKAV	KG/DAY	*****	13 30 01MQAV	13 45 01WKAV	MG/L	Ø	/mosth	COMPOS
BOD, 5-Day (20 oC)	SAMPLE MEASUREMENT	*****	****		96.6	*****	****	-	ø	Ymowth	Calctd
00310 K Percent Removal	PERMIT 2 REQUIREMENT	Congress And the Constant Office of the Constant of the Cons		*****	87.5 101MOAVMN		Species Canada	PERCENT		1/Month	CALCID
Solids, Total Suspended	SAMPLE MEASUREMENT	****	****		****	532	532		ø	Ynowth	Compos
00530 G Raw Sew/influent	PERMIT REQUIREMENT	negent a	Annual Control of the	*****	Annana (mg)	REPORTA 01MOAV	REPORT.	MG/L		1/Month	COMPOS
Solids, Total Suspended	SAMPLE MEASUREMENT	****	****		****	21	21		Ø	Ymowth	Compos
00530 1 Effluent Gross Value	PERMIT REQUIREMENT	*****	ANNARA ANNARA	*****	*****	30 01MOAV	45 01WKAV	MG/L		1/Month	COMPOS

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

462B DSN 462B - DSW Interna

11/1/2014 TO 11/30/2014

HOPE CREEK GENERATING STATION

									NO.	FREQ. OF	SAMPLE
. PARAMETER		QUANTITY (OR LOADING	UNITS	QUALI	TY OR CONCENTR	RATION	UNITS	EX.	ANALYSIS	TYPE
Solids, Total Suspended	SAMPLE MEASUREMENT	***	杂杂杂杂杂杂		96	96	****		ϕ	Ymowth	Calete
00530 K Percent Removal	PERMIT REQUIREMENT	Annan.	**************************************	*****	85 01MOAVMN	REPORT 01MOAV	######################################	PERCENT		1/Month	CALCTD
Oil and Grease	QL	*****	*****		******	Attack	*****				
Oil and Grease	SAMPLE MEASUREMENT	*****	*****		*****	42	12		ϕ	1/month	GRab
00556 1 Effluent Gross Value	PERMIT REQUIREMENT	ASSAM	*****	****	*****	10 01MOAV	15 01DAMX	MG/L		1/Month	GRAB
	* QL	*****	****		*******	******	******				
Nitrogen, Ammonia Total (as N)	SAMPLE MEASUREMENT	****	会长安安 由		****	25	25		ø	1/most	COMPOS
00610 1 Effluent Gross Value	PERMIT REQUIREMENT	Acceptance of the Control of the Con	A service of the serv	*****	******	35 01MOAV	REPORT 01DAMX	MG/L		1/Month	COMPOS
	QL 🔭	失效的条件	*****		*****	******	*****			***	
Enterococci	SAMPLE MEASUREMENT	*****	****		****	۷10	۷ 10		ϕ	Ymonth	GRas
61211 1 Effluent Gross Value	PERMIT. REQUIREMENT	Antonia Antonia Antonia	; ;	****	arran P	REPORT 01MOGE	REPORT 01WKGE	#/100ML		1/Month	GRAB
C-18 F1	QL	ARRIANA	Address		******		*****	<u> </u>		,	
Coliform, Fecal General	SAMPLE MEASUREMENT	***	*****		***	110	410		Ø	month	GRab
74055 1 Effluent Gross Value	PERMIT REQUIREMENT	nemen.	******	*****	******	200 // 01MOGE	400 01WKGE	#/100ML	4	1/Month	GRAB .
:	QL. [®]	A. Janean	* 4****		\$ ****** (\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	annan.	*****				
Lab Certification #	SAMPLE MEASUREMENT	17451	PA166		06005		:				
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab#	REPORT Lab#		REPORT Lab#	REPORT. Lab#	REPORT. Lab#			Not Applic	NOT AP
	QL	*****	*****		*****	ARTORE	*****				Office St.

New Jersey Department of Environmental Protection Division of Water Quality

Consolidated Waste Characterization Report Submittal Form

NJPDES PERMIT		M	IONIT	ORIN	MONITORED LOCATION:			
NJ0025411	Month	Day	Year		Month	Day	Year	461C - DSN 461C - DSW i
110025411	7	1	2014	То	12	31	2014	

PERMITTEE:

NAME AND TITLE

DATE

N/A

ROSES DE LA CONTRACTOR

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 TRAVIS ZIGO PO BOX 236 / H15 HANCOCKS BRIDGE, NJ 08038

REGION / COUNTY:	Southern /	Salem	County
------------------	------------	-------	--------

Teroffon / Coon 11. Southern / Salem	County							
CHECK IF APPLICABLE: No Discharge this Monitoria	ng Period M	onitoring Report Comments Attached						
WHO MUST SIGN The highest ranking official having data discharging facility shall sign the certification or, in his abset the highest ranking operator of the treatment works shall sign have the ability to authorize capital expenditures and hire per by that person shall also sign the second certification at the banother entity to operate the treatment works, the highest-ranking official having data discharging facility shall sign the certification or, in his abset the highest ranking official having data discharging facility shall sign the certification or, in his abset the highest ranking official having data discharging facility shall sign the certification or, in his abset the highest ranking official having data discharging facility shall sign the certification or, in his abset the highest ranking official having data discharging facility shall sign the certification or, in his abset the highest ranking operator of the treatment works shall sign have the ability to authorize capital expenditures and hire per by that person shall also sign the second certification at the bands of the highest ranking of the	nce a person desi in the certification rsonnel, a person pottom of this pag	gnated by that person. For a local agency, . Where the highest ranking operator does not having that responsibility or person designated e. If the local agency has contracted with						
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.								
De Li De la contra Nico Davida de Lica dos la		N1/A						
Paul J. Davison, Site Vice President – Hope Creek NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, OR AUTHORIZED AGENT	GRADE AND REC	N/A GISTRY NUMBER (IF APPLICABLE)						
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	DATE(MONTH/E/YEAR)	856-339-1555 AY AREA CODE/TELEPHONE NUMBER						
*For a local agency where the highest-ranking operator does not having that responsibility or person designated by that person designated by that person designated by the								
I certify under penalty of law and in accordance with N.J.S.A. 58:1 monitoring reports.								
N/A		N/A						

SIGNATURE

AREA CODE/PHONE NUMBER

Consolidated Waste Characterization Report

PI 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461C DSN 461C - DSW intern 7/1/2014 TO 12/31/2014

HOPE CREEK GENERATING STATION

SAMPLE DATE OF REPORT:

11/3/14

PARAMETER	QL	REPORTED VALUE	UNITS	REMARK CODE	SAMPLE TYPE
Nitrogen, Ammonia Total (as N) 00610 Effluent Gross Value		<i>85</i> 0	UG/L		GRAB
Zinc, Total Recoverable 01094 Effluent Gross Value	RQL = 10	24.6	UG/L		GRAB
Cadmium, Total Recoverable 01113 Effluent Gross Value	RQL = 4	< 0.100	UG/L		GRAB
Copper, Total Recoverable 01119 Effluent Gross Value	RQL = 2	31.9	UG/L		GRAB
Dichlorobromomethane 32101 Effluent Gross Value	RQL = 6	42.4	UG/L		GRAB
Chloroform 32106 Effluent Gross Value	RQL = 5	74.2	UG/L		GRAB
Lab Certification # 99999 Lab		PA 166			NOT AP
Lab Certification # 99999 Lab					NOT AP
Lab Certification # 99999 Lab					NOT AP
Lab Certification # 99999 Lab					NOT AP
Lab Certification # 99999 Lab				10 7 - 11 70-	NOT AP