

JUN 17 2015



HCH-2015-020

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
ARTICLE NUMBER: 7013 1710 0000 6324 5127

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 May 2015, also attached are the semi annual Consolidated Waste Characterization Reports for DSN 461C and DSN 462B.

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.

Sincerely,

A handwritten signature in cursive script that reads "Paul J. Davison".

Paul J. Davison
Site Vice President – Hope Creek

JE25
NRK

JUN 17 2015

HCH-2015-020
NJPDES DMR

2

Attachments

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

EXPLANATION OF CONDITIONS

May 2015

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.

For DSN 462B CWCR, the initial sample was obtained on 4/8/15 and a second sample was obtained on 5/8/15 for an analyte not analyzed for in the initial sample. All samples were obtained within the required sampling time frame.

JUN 17 2015

HCH-2015-020
NJPDES DMR

4

EXPLANATION OF EXCEEDANCES

May 2015

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

DSN No.

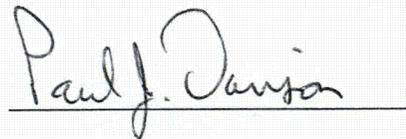
EXPLANATION

No Exceedances

COUNTY OF SALEM
STATE OF NEW JERSEY

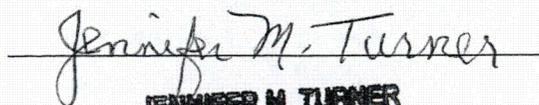
I, Paul J. Davison, of full age, being duly sworn according to law, upon my oath depose and say:

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 17 day of June, 2015.



JENNIFER M. TURNER
ID # 2332867
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires 8/31/2015

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 | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><th>Month</th><th>Day</th><th>Year</th></tr> <tr><td style="text-align: center;">5</td><td style="text-align: center;">1</td><td style="text-align: center;">2015</td></tr> </table> | Month | Day | Year | 5 | 1 | 2015 | To | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><th>Month</th><th>Day</th><th>Year</th></tr> <tr><td style="text-align: center;">5</td><td style="text-align: center;">31</td><td style="text-align: center;">2015</td></tr> </table> | Month | Day | Year | 5 | 31 | 2015 | | 461A – DSN 461A – DSW |
| Month | Day | Year | | | | | | | | | | | | | | | |
| 5 | 1 | 2015 | | | | | | | | | | | | | | | |
| Month | Day | Year | | | | | | | | | | | | | | | |
| 5 | 31 | 2015 | | | | | | | | | | | | | | | |

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

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.

| | |
|--|---|
| 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) |
| | 6/17/15 |
| SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR | DATE |
| | 856-339-1555 |
| | 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

461A DSN 461A - DSW

5/1/2015 TO 5/31/2015

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 | 52.399 | 61.229 | MGD | ***** | ***** | ***** | ***** | Ø | Continuous | Meter |
| | PERMIT REQUIREMENT | REPORT 01MOAV | REPORT 01DAMX | | ***** | ***** | ***** | | | | |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| Flow, In Conduit or Thru Treatment Plant 50050 7 Intake From Stream | SAMPLE MEASUREMENT | 56.385 | 73.795 | MGD | ***** | ***** | ***** | ***** | Ø | Continuous | Meter |
| | PERMIT REQUIREMENT | REPORT 01MOAV | REPORT 01DAMX | | ***** | ***** | ***** | | | | |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| pH 00400 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | 7.5 | ***** | 8.6 | SU | Ø | 1/week | Grab |
| | PERMIT REQUIREMENT | ***** | ***** | | 6.0 01DAMN | ***** | 9.0 01DAMX | | | | |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| LC50 Statre 96hr Acu Mysid Bahia TAN3E 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | Code=N | ***** | ***** | %EFFL | Ø | Code=N | Code=N |
| | PERMIT REQUIREMENT | ***** | ***** | | REPORT 01RPMN | ***** | ***** | | | | |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| IC25 Statre 7day Chr Mysid Bahia TBP3E 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | Code=N | ***** | ***** | %EFFL | Ø | Code=N | Code=N |
| | PERMIT REQUIREMENT | ***** | ***** | | REPORT 01RPMN | ***** | ***** | | | | |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| Chlorine Produced Oxidants *CPOX 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | <0.1 | <0.1 | MG/L | Ø | 3/week | Grab |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | 0.2 01MOAV | 0.5 01DAMX | | | | |
| | 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.

Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER:

MONITORED LOCATION:

MONITORING PERIOD:

FACILITY NAME:

NJ0025411

461A DSN 461A - DSW

5/1/2015 TO 5/31/2015

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 | ***** | ***** | ***** | ***** | 25.4 | 32.6 | | Ø | CONTINUOUS | Meter |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | REPORT 01MOAV | 36.2 01DAMX | DEG.C | | Continuous | METER |
| | QL | ***** | ***** | ***** | ***** | ***** | ***** | | | | |
| Temperature, oC 00010 7 Intake From Stream | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 22.1 | 26.5 | | Ø | CONTINUOUS | Meter |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | REPORT 01MOAV | REPORT 01DAMX | DEG.C | | Continuous | METER |
| | QL | ***** | ***** | ***** | ***** | ***** | ***** | | | | |
| Carbon, Tot Organic (TOC) 00680 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 1.92 | 1.92 | | Ø | 1/month | Grab |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | REPORT 01MOAV | REPORT 01DAMX | MG/L | | 1/Month | GRAB |
| | QL | ***** | ***** | ***** | ***** | ***** | ***** | | | | |
| Carbon, Tot Organic (TOC) 00680 2 Effluent Net Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 0.47 | 0.47 | | Ø | 1/month | Calctd |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | REPORT 01MOAV | REPORT 01DAMX | MG/L | | 1/Month | CALCTD |
| | QL | ***** | ***** | ***** | ***** | ***** | ***** | | | | |
| Carbon, Tot Organic (TOC) 00680 7 Intake From Stream | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 1.57 | 1.57 | | Ø | 1/month | Grab |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | REPORT 01MOAV | REPORT 01DAMX | MG/L | | 1/Month | GRAB |
| | QL | ***** | ***** | ***** | ***** | ***** | ***** | | | | |
| Sulfate, Total (as SO4) 00945 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | Code=N | Code=N | | Ø | Code=N | Code=N |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | REPORT 01MOAV | REPORT 01DAMX | UG/L | | 1/6 Months | COMP24 |
| | 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

461A DSN 461A - DSW

5/1/2015 TO 5/31/2015

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 | φ | 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 | 103 | 281 | MBTU/HR | ***** | ***** | ***** | ***** | φ | 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 | φ | 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 | | 03036 | | | | | | |
| | 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
Surface Water Discharge Monitoring Report Submittal Form

PI 46815

| NJPDES PERMIT | MONITORING PERIOD | | | | MONITORED LOCATION: |
|------------------|-------------------|------|------|------------|---------------------------------------|
| NJ0025411 | Month | Day | Year | To | 461C - DSN 461C - DSW internal |
| 5 | 1 | 2015 | 5 | 31 2015 | |

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

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.

| | |
|--|---|
| 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) |
| | 6/17/15 |
| SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR | DATE |
| | 856-339-1555 |
| | 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

461C DSN 461C - DSW interna

5/1/2015 TO 5/31/2015

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 | 0.024 | 0.060 | MGD | ***** | ***** | ***** | ***** | Ø | Continuous | Meter |
| | PERMIT REQUIREMENT | REPORT 01MOAV | REPORT 01DAMX | | ***** | ***** | ***** | | | | |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| Solids, Total Suspended 00530 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 4 | 4 | MG/L | Ø | 1/Month | Compos |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | 30 01MOAV | 100 01DAMX | | | | |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| Petrol Hydrocarbons, Total Recoverable 45501 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | <2 | <2 | MG/L | Ø | 2/Month | Grab |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | 10 01MOAV | 15 01DAMX | | | | |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| Carbon, Tot Organic (TOC) 00680 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 3 | 3 | MG/L | Ø | 1/Month | Compos |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | REPORT 01MOAV | 50 01DAMX | | | | |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| Lab Certification # 99999 99 Lab | SAMPLE MEASUREMENT | 17451 | PA166 | | 03036 | | | | | | |
| | PERMIT REQUIREMENT | REPORT Lab # | REPORT Lab # | | REPORT Lab # | REPORT Lab # | REPORT Lab # | | | | |
| | 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 |
| | 5 | 1 | 2015 | | 5 | 31 | 2015 |
| | | | | | | | 462B - DSN 462B - DSW Internal |

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
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 TRAVIS ZIGO
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 HANCOCKS BRIDGE, NJ 08038

REGION / COUNTY: Southern / Salem County

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| | |
|--|---|
| 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) |
| | 6/17/15 |
| SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR | DATE |
| | 856-339-1555 |
| | 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: NJ0025411 MONITORED LOCATION: 462B DSN 462B - DSW Interna MONITORING PERIOD: 5/1/2015 TO 5/31/2015 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 | 0.021 | 0.032 | MGD | ***** | ***** | ***** | ***** | Ø | Continuous | Meter | |
| | PERMIT REQUIREMENT | REPORT 01MOAV | REPORT 01DAMX | | ***** | ***** | ***** | | ***** | | Continuous | METER |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | | |
| BOD, 5-Day (20 oC) 00310 G Raw Sew/influent | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 329 | 329 | MG/L | Ø | 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 | ***** | 14 | 14 | MG/L | Ø | 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 | ***** | ***** | ***** | 95.7 | ***** | ***** | PERCENT | Ø | 1/month | Calctd | |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | 87.5 01MOAVMN | ***** | | ***** | | 1/Month | CALCTD |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | | |
| Solids, Total Suspended 00530 G Raw Sew/influent | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 610 | 610 | MG/L | Ø | 1/month | Compos | |
| | PERMIT REQUIREMENT | ***** | ***** | | ***** | REPORT 01MOAV | REPORT 01DAMX | | ***** | | 1/Month | COMPOS |
| | QL | ***** | ***** | | ***** | ***** | ***** | | ***** | | | |
| Solids, Total Suspended 00530 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | ***** | ***** | 19 | 19 | MG/L | Ø | 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

5/1/2015 TO 5/31/2015

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 | ***** | ***** | | 97 | 97 | ***** | | φ | 1/Month | Calctd |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | 85 01MOAVMN | REPORT 01MOAV | ***** | PERCENT | | 1/Month | CALCTD |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| Oil and Grease 00556 1 Effluent Gross Value | SAMPLE MEASUREMENT | ***** | ***** | | ***** | <2 | <2 | | φ | 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 | ***** | ***** | | ***** | 12 | 12 | | φ | 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 | | φ | 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 | | φ | 1/Month | GRAB |
| | PERMIT REQUIREMENT | ***** | ***** | ***** | ***** | 200 01MOGE | 400 01WKGE | #/100ML | | 1/Month | GRAB |
| | QL | ***** | ***** | | ***** | ***** | ***** | | | | |
| Lab Certification # 99999 99 Lab | SAMPLE MEASUREMENT | 17451 | PA166 | | 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 | MONITORING PERIOD | | | | | | MONITORED LOCATION: | |
|---------------|-------------------|-----|------|----|-------|-----|---------------------|-------------------------|
| | Month | Day | Year | To | Month | Day | | Year |
| NJ0025411 | 1 | 1 | 2015 | | 6 | 30 | 2015 | 461C - DSN 461C - DSW i |

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
TRAVIS ZIGO
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.

Paul J. Davison, Site Vice President – Hope Creek
NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, OR
AUTHORIZED AGENT

Paul J. Davison
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR
AUTHORIZED AGENT

N/A
GRADE AND REGISTRY NUMBER (IF APPLICABLE)

6/17/15
DATE(MONTH/DAY /YEAR)
856-339-1555
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 reviewed the attached discharge monitoring reports.

N/A
NAME AND TITLE
N/A
DATE

N/A
SIGNATURE
N/A
AREA CODE/PHONE NUMBER

Consolidated Waste Characterization Report

PI 46815

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

NJ0025411 461C DSN 461C - DSW intern 1/1/2015 TO 6/30/2015 HOPE CREEK GENERATING STATION

SAMPLE DATE OF REPORT: 5/5/15

| PARAMETER | QL | REPORTED VALUE | UNITS | REMARK CODE | SAMPLE TYPE |
|--|----------|----------------|-------|-------------|-------------|
| Nitrogen, Ammonia Total (as N) 00610 Effluent Gross Value | | 1730 | UG/L | | GRAB |
| Zinc, Total Recoverable 01094 Effluent Gross Value | RQL = 10 | 30.1 | UG/L | | GRAB |
| Cadmium, Total Recoverable 01113 Effluent Gross Value | RQL = 4 | 0.276 | UG/L | | GRAB |
| Copper, Total Recoverable 01119 Effluent Gross Value | RQL = 2 | 20.6 | UG/L | | GRAB |
| Dichlorobromomethane 32101 Effluent Gross Value | RQL = 6 | <0.120 | UG/L | | GRAB |
| Chloroform 32106 Effluent Gross Value | RQL = 5 | <0.250 | 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.

New Jersey Department of Environmental Protection
 Division of Water Quality

PI 46815

Consolidated Waste Characterization Report Submittal Form

| NJPDES PERMIT | MONITORING PERIOD | | | | | | MONITORED LOCATION: | |
|---------------|-------------------|-----|------|----|-------|-----|---------------------|-------------------------|
| | Month | Day | Year | To | Month | Day | | Year |
| NJ0025411 | 1 | 1 | 2015 | | 6 | 30 | 2015 | 462B - DSN 462B - DSW I |

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

REGION / COUNTY: Southern / Salem County

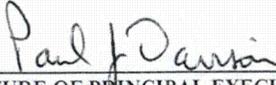
CHECK IF APPLICABLE: No Discharge this Monitoring Period Monitoring Report Comments Attached

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.

Paul J. Davison, Site Vice President - Hope Creek
 NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER, OR
 AUTHORIZED AGENT

N/A
 GRADE AND REGISTRY NUMBER (IF APPLICABLE)


 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR
 AUTHORIZED AGENT

6/17/15
 DATE(MONTH/DAY
 /YEAR) 856-339-1555
 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 reviewed the attached discharge monitoring reports.

N/A
 NAME AND TITLE

N/A
 SIGNATURE

N/A
 DATE

N/A
 AREA CODE/PHONE NUMBER

Consolidated Waste Characterization Report

PI 46815

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

NJ0025411 462B DSN 462B - DSW Intern 1/1/2015 TO 6/30/2015 HOPE CREEK GENERATING STATION

SAMPLE DATE OF REPORT: 4/8/15 *

| PARAMETER | QL | REPORTED VALUE | UNITS | REMARK CODE | SAMPLE TYPE |
|---|----------|----------------|-------|-------------|-------------|
| Cyanide, Total (as CN) 00720 Effluent Gross Value | RQL = 40 | < 3.70 | UG/L | | GRAB |
| Nickel, Total Recoverable 01074 Effluent Gross Value | RQL = 10 | 3.10 | UG/L | | GRAB |
| Zinc, Total Recoverable 01094 Effluent Gross Value | RQL = 10 | 98.4 | UG/L | | GRAB |
| Cadmium, Total Recoverable 01113 Effluent Gross Value | RQL = 4 | < 0.180 | UG/L | | GRAB |
| Chromium, Total Recoverable 01118 Effluent Gross Value | RQL = 10 | < 0.210 | UG/L | | GRAB |
| Copper, Total Recoverable 01119 Effluent Gross Value | RQL = 2 | 20.8 | 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.
* See Explanation of Conditions