AUG 17 2016

HCH-2016-031

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
ARTICLE NUMBER: 7015 0640 0006 7354 7324

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 or Madam:

Attached is the Discharge Monitoring Report for the Hope Creek Generating Station for the month of July 2016.

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,

Paul J. Davison

Paul J. Davison
Site Vice President – Hope Creek

IE25
NRR

AUG 17 2016

Attachments

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

EXPLANATION OF CONDITIONS

July 2016

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.

EXPLANATION OF EXCEEDANCES

July 2016

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

Paul J. Davison
Site Vice President – Hope Creek

Sworn and subscribed before me
this 17th day of August, 2016.

Jennifer M. Turner

JENNIFER M. TURNER
NOTARY PUBLIC OF NEW JERSEY
ID # 2332557
My Commission Expires 8/8/2020

PI 46815

New Jersey Department of Environmental Protection
Division of Water Quality

Surface Water Discharge Monitoring Report Submittal Form

NJPDES PERMIT	MONITORING PERIOD							MONITORED LOCATION:
	Month	Day	Year		Month	Day	Year	
NJ0025411	7	1	2016	To	7	31	2016	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

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)

Paul J. Davison — 8/17/16 — 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 — 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	7/1/2016 TO 7/31/2016	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	59.382	72.284	MGD	******	******	******	******	ϕ	Continuous	Meter
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		******	******	******			Continuous	METER
	QL	******	******		******	******	******				
Flow, In Conduit or Thru Treatment Plant 50050 7 Intake From Stream	SAMPLE MEASUREMENT	74.670	77.329	MGD	******	******	******	******	ϕ	Continuous	Meter
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		******	******	******			Continuous	METER
	QL	******	******		******	******	******				
pH 00400 1 Effluent Gross Value	SAMPLE MEASUREMENT	******	******	******	8.5	******	8.5	SU	ϕ	1/week	Grab
	PERMIT REQUIREMENT	******	******		6.0 01DAMN	******	9.0 01DAMX			1/Week	GRAB
	QL	******	******		******	******	******				
LC50 Statre 96hr Acu Mysid Bahia TAN3E 1 Effluent Gross Value	SAMPLE MEASUREMENT	******	******	******	Code=N	******	******	%EFFL	ϕ	Code=N	Code=N
	PERMIT REQUIREMENT	******	******		REPORT 01RPMN	******	******			1/Year	COMPOS
	QL	******	******		******	******	******				
IC25 Statre 7day Chr Mysid Bahia TBP3E 1 Effluent Gross Value	SAMPLE MEASUREMENT	******	******	******	Code=N	******	******	%EFFL	ϕ	Code=N	Code=N
	PERMIT REQUIREMENT	******	******		REPORT 01RPMN	******	******			1/Year	COMPOS
	QL	******	******		******	******	******				
Chlorine Produced Oxidants *CPOX 1 Effluent Gross Value	SAMPLE MEASUREMENT	******	******	******	******	<0.1	<0.1	MG/L	ϕ	3/week	Grab
	PERMIT REQUIREMENT	******	******		******	0.2 01MOAV	0.5 01DAMX			3/Week	GRAB
	RQL	******	******		******	0.1	0.1				

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

Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER:	MONITORED LOCATION:	MONITORING PERIOD:	FACILITY NAME:
NJ0025411	461A DSN 461A - DSW	7/1/2016 TO 7/31/2016	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	******	******	******	******	33.1	34.9	DEG.C	ϕ	Continuous	Meter
	PERMIT REQUIREMENT	******	******		******	REPORT 01MOAV	36.2 01DAMX			Continuous	METER
	QL	******	******		******	******	******				
Temperature, oC 00010 7 Intake From Stream	SAMPLE MEASUREMENT	******	******	******	******	28.0	30.0	DEG.C	ϕ	Continuous	Meter
	PERMIT REQUIREMENT	******	******		******	REPORT 01MOAV	REPORT 01DAMX			Continuous	METER
	QL	******	******		******	******	******				
Carbon, Tot Organic (TOC) 00680 1 Effluent Gross Value	SAMPLE MEASUREMENT	******	******	******	******	3.16	3.16	MG/L	ϕ	1/month	Grab
	PERMIT REQUIREMENT	******	******		******	REPORT 01MOAV	REPORT 01DAMX			1/Month	GRAB
	QL	******	******		******	******	******				
Carbon, Tot Organic (TOC) 00680 2 Effluent Net Value	SAMPLE MEASUREMENT	******	******	******	******	1.58	1.58	MG/L	ϕ	1/month	Calctd
	PERMIT REQUIREMENT	******	******		******	REPORT 01MOAV	REPORT 01DAMX			1/Month	CALCTD
	QL	******	******		******	******	******				
Carbon, Tot Organic (TOC) 00680 7 Intake From Stream	SAMPLE MEASUREMENT	******	******	******	******	1.22	1.22	MG/L	ϕ	1/month	Grab
	PERMIT REQUIREMENT	******	******		******	REPORT 01MOAV	REPORT 01DAMX			1/Month	GRAB
	QL	******	******		******	******	******				
Sulfate, Total (as SO4) 00945 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	COMP24
	QL	******	******		******	******	******				

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Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER:	MONITORED LOCATION:	MONITORING PERIOD:	FACILITY NAME:
NJ0025411	461A DSN 461A - DSW	7/1/2016 TO 7/31/2016	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 (summer) (per Hr.) 81386 1 Effluent Gross Value	SAMPLE MEASUREMENT	190	281	MBTU/HR	******	******	******	******	ϕ	1/Day	calctd
	PERMIT REQUIREMENT	REPORT 01MOAV	534 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	17457	PA166		PA011	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

PI 46815

Surface Water Discharge Monitoring Report Submittal Form

NJPDES PERMIT	MONITORING PERIOD							MONITORED LOCATION:
	Month	Day	Year		Month	Day	Year	
NJ0025411	7	1	2016	To	7	31	2016	461C - DSN 461C - 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
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.

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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)**

Paul J. Davison — 8/17/16 — 856-339-1555

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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.

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

Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER:	MONITORED LOCATION:	MONITORING PERIOD:	FACILITY NAME:
NJ0025411	461C DSN 461C - DSW interna	7/1/2016 TO 7/31/2016	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	SAMPLE MEASUREMENT	0.046	0.170		******	******	******		Ø	Continuous	Meter
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	******	******	******	******		Continuous	METER
	QL	******	******		******	******	******				
Solids, Total Suspended	SAMPLE MEASUREMENT	******	******		******	4	4		Ø	1/month	Compos
00530 1 Effluent Gross Value	PERMIT REQUIREMENT	******	******	******	******	30 01MOAV	100 01DAMX	MG/L		1/Month	COMPOS
	QL	******	******		******	******	******				
Petrol Hydrocarbons, Total Recoverable	SAMPLE MEASUREMENT	******	******		******	<2	<2		Ø	2/month	Grab
45501 1 Effluent Gross Value	PERMIT REQUIREMENT	******	******	******	******	10 01MOAV	15 01DAMX	MG/L		2/Month	GRAB
	QL	******	******		******	******	******				
Carbon, Tot Organic (TOC)	SAMPLE MEASUREMENT	******	******		******	7	7		Ø	1/month	Compos
00680 1 Effluent Gross Value	PERMIT REQUIREMENT	******	******	******	******	REPORT 01MOAV	50 01DAMX	MG/L		1/Month	COMPOS
	QL	******	******		******	******	******				
Lab Certification #	SAMPLE MEASUREMENT	17451	PA166		PA011	03036					
99999 99 Lab	PERMIT REQUIREMENT	REPORT Lab #	REPORT Lab #		REPORT Lab #	REPORT Lab #	REPORT Lab #			Not Applic	NOT AP
	QL	******	******		******	******	******				

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New Jersey Department of Environmental Protection
Division of Water Quality

PI 46815

Surface Water Discharge Monitoring Report Submittal Form

NJPDES PERMIT	MONITORING PERIOD							MONITORED LOCATION:
	Month	Day	Year		Month	Day	Year	
NJ0025411	7	1	2016	To	7	31	2016	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
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**

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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)**

Paul J Davison — 8/17/16 — 856-339-1555

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER, AUTHORIZED AGENT, OR *LICENSED OPERATOR — **DATE** — **AREA CODE/PHONE NUMBER**

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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.

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

Surface Water Discharge Monitoring Report

PI 46815

PERMIT NUMBER:	MONITORED LOCATION:	MONITORING PERIOD:	FACILITY NAME:
NJ0025411	462B DSN 462B - DSW Interna	7/1/2016 TO 7/31/2016	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	SAMPLE MEASUREMENT	0.024	0.051		******	******	******		Ø	Continuous	Meter
50050 1 Effluent Gross Value	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	******	******	******	******		Continuous	METER
	QL	******	******		******	******	******				
BOD, 5-Day (20 oC)	SAMPLE MEASUREMENT	******	******		******	420	420		Ø	1/month	Compos
00310 G Raw Sew/influent	PERMIT REQUIREMENT	******	******	******	******	REPORT 01MOAV	REPORT 01DAMX	MG/L		1/Month	COMPOS
	QL	******	******		******	******	******				
BOD, 5-Day (20 oC)	SAMPLE MEASUREMENT	1	1		******	9	9		Ø	1/month	Compos
00310 1 Effluent Gross Value	PERMIT REQUIREMENT	8 01MOAV	REPORT 01WKAV	KG/DAY	******	30 01MOAV	45 01WKAV	MG/L		1/Month	COMPOS
	QL	******	******		******	******	******				
BOD, 5-Day (20 oC)	SAMPLE MEASUREMENT	******	******		97.9	******	******		Ø	1/month	Calctd
00310 K Percent Removal	PERMIT REQUIREMENT	******	******	******	87.5 01MOAVMN	******	******	PERCENT		1/Month	CALCTD
	QL	******	******		******	******	******				
Solids, Total Suspended	SAMPLE MEASUREMENT	******	******		******	291	291		Ø	1/month	Compos
00530 G Raw Sew/influent	PERMIT REQUIREMENT	******	******	******	******	REPORT 01MOAV	REPORT 01DAMX	MG/L		1/Month	COMPOS
	QL	******	******		******	******	******				
Solids, Total Suspended	SAMPLE MEASUREMENT	******	******		******	8	8		Ø	1/month	Compos
00530 1 Effluent Gross Value	PERMIT REQUIREMENT	******	******	******	******	30 01MOAV	45 01WKAV	MG/L		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 Interna	7/1/2016 TO 7/31/2016	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	******	PERCENT	Ø	1/month	Calctd
	PERMIT REQUIREMENT	******	******		85 01MOAVMN	REPORT 01MOAV	******			1/Month	CALCTD
	QL	******	******		******	******	******				
Oil and Grease 00556 1 Effluent Gross Value	SAMPLE MEASUREMENT	******	******	******	******	<1	<1	MG/L	Ø	1/month	Grab
	PERMIT REQUIREMENT	******	******		******	10 01MOAV	15 01DAMX			1/Month	GRAB
	QL	******	******		******	******	******				
Nitrogen, Ammonia Total (as N) 00610 1 Effluent Gross Value	SAMPLE MEASUREMENT	******	******	******	******	2	2	MG/L	Ø	1/month	Compos
	PERMIT REQUIREMENT	******	******		******	35 01MOAV	REPORT 01DAMX			1/Month	COMPOS
	QL	******	******		******	******	******				
Enterococci 61211 1 Effluent Gross Value	SAMPLE MEASUREMENT	******	******	******	******	<4	<4	#/100ML	Ø	1/month	Grab
	PERMIT REQUIREMENT	******	******		******	REPORT 01MOGE	REPORT 01WKGE			1/Month	GRAB
	QL	******	******		******	******	******				
Coliform, Fecal General 74055 1 Effluent Gross Value	SAMPLE MEASUREMENT	******	******	******	******	8	8	#/100ML	Ø	1/month	Grab
	PERMIT REQUIREMENT	******	******		******	200 01MOGE	400 01WKGE			1/Month	GRAB
	QL	******	******		******	******	******				
Lab Certification # 99999 99 Lab	SAMPLE MEASUREMENT	17451	PA166		PA011	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.