



Public Service Electric and Gas Company P.O. Box 236 Hancocks Bridge, New Jersey 08038

Hope Creek Generating Station

March 23, 1994

Chief George Corporale  
Bureau of Information Systems  
P. O. Box CN-029  
Trenton, N. J. 08625

RE: 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 February 1994.

This report is required by and prepared specifically for the Environmental Protection Agency (EPA) and the New Jersey Department of Environmental Protection and Energy (NJDEPE). It presents only the observed results of measurements and analysis required to be performed by the above agencies. The choice of the measurement devices and analytical methods are controlled by the EPA and the NJDEPE, 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 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 Mr. C. E. White.

Sincerely,

A handwritten signature in black ink, appearing to read "RJH".

Robert J. Hovey  
General Manager -  
Hope Creek Operations

9404060126 940228  
PDR ADOCK 05000354  
R PDR

The Energy People

NJPDES

2

3/23/94

✓ GMS  
CW:eaj  
Attachments

C Executive Director, DRBC  
USEPA - Dr. Richard Baker  
USNRC

NJPDES  
Explanation of conditions  
February 1994

3/23/94

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.

Analytical values performed by the following NJDEPE certified laboratories:

NET Atlantic, Inc. (08153)  
Hope Creek Generating Station (17451)  
Talbot Laboratory, Inc. (77535)  
South Jersey Testing, Inc. (06431)  
Princeton Testing Laboratory, Inc. (11118)

Deviations from required sampling, analysis monitoring and reporting methods and periodicities are noted on the respective transmittal sheet.

Frequency for discharge point 461A, the Cooling Tower Blowdown, and the River were done at approximately 5 hour intervals to provide for the cycles of concentration in the system.

As per the Administrative Consent Order the TSS limit for discharge points 462A, 463A and 464 have been lifted and the interim thermal limits for discharge point 461A have been changed to 443 MBTU/hr (June - September) and 7<sup>21</sup> MBTU/hr (October - May).

Results reported on the Discharge Monitoring Report forms are consistent with permit limits, data supplied from contract laboratories, the December 1993 revision of the NJDEPE DMR Instruction manual and specific guidance from DEP personnel.

NJPDES  
Explanation of Exceedances  
February 1994

3/23/94

The following exceedances are included in the attached report and explained below. Exclusions have not endangered nor significantly impacted public health or the environment.

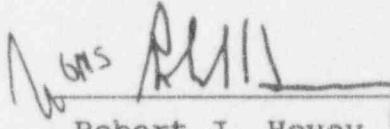
DSN No.	EXPLANATION
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	No Exceedances
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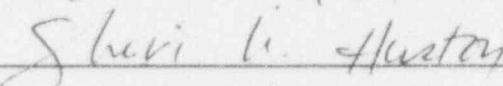
COUNTY OF SALEM  
STATE OF NEW JERSEY

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

1. I am the General Manager of the Hope Creek Generating Station, and as such am authorized to sign 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.

  
Robert J. Hovey  
General Manager -  
Hope Creek Operations

Sworn and subscribed before me  
this 23 day of March 1994.



SHERI L. HUSTON  
NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires Dec. 30, 1997

ADDENDA TO MONITORING REPORT - TRANSMITTAL SHEET

DISCHARGE NUMBER

PAGE	PARAMETER	COMMENTS
<u>461A</u>	NOTES	
2	00665 2 1	*
2	00680 2 1	Net values calculated from grab samples.
<u>461C</u>		
6	00530 1 0	*
		Sample frequency was three/month. Additional sample was obtained for lab QC/split analysis.
6	00680 1 1	*
		Samples obtained were composites in accordance with permit requirements.
<u>462A</u>		
8	00551 1 0	*
		Unable to meet sampling criteria due to discharge event occurring prior to and continuing into normal working hours. A single grab sample was obtained for information only.
<u>463A</u>		
11	00551 1 0	*
		Unable to meet sampling criteria due to discharge event occurring prior to and continuing into normal working hours. A single grab sample was obtained for information only.
<u>464</u>		
12	00551 1 0	*
		Unable to meet sampling criteria due to discharge event occurring prior to and continuing into normal working hours. A single grab sample was obtained for information only.

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF WATER RESOURCESMONITORING REPORT - TRANSMITTAL SHEET

NPDES NO.

REPORTING PERIOD

MO. YR.

MO. YR.

0 0 2 5 4 1 1

0 1 2 9 14 THRU 0 1 2 9 14

PERMITTEE: Name Public Service Electric & Gas CompanyAddress P.O. Box 236Hancocks Bridge, NJ 08038FACILITY: Name Hope Creek Generating StationAddress P.O. Box 236Hancocks Bridge, NJ (County) SalemTelephone (609) 339-3463FORMS ATTACHED (Indicate Quantity of Each)SLUDGE REPORTS - SANITARY T-VWX-007    T-VWX-008    T-VWX-009SLUDGE REPORTS - INDUSTRIAL T-VWX-010A    T-VWX-010BWASTEWATER REPORTS T-VWX-011    T-VWX-012    T-VWX-013GROUNDWATER REPORTS VWX-015(A,B)    VWX-016    VWX-017NPDES DISCHARGE MONITORING REPORT EPA FORM 3320-1OPERATING-EXCEPTIONS

YES   NO

DYE TESTING    TEMPORARY BYPASSING    DISINFECTION INTERRUPTION    MONITORING MALFUNCTIONS    UNITS OUT OF OPERATION    OTHER    *(Detail any "Yes" on reverse side  
in appropriate space.)*NOTE: The "Hours Attended at Plant" on the  
reverse of this sheet must also be completed.AUTHENTICATION - 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.LICENSED OPERATORName (Printed) Peter R. LaSalaGrade & Registry No. (N-2) N-0939Signature Peter R. LaSalaDate 3/23/94PRINCIPAL EXECUTIVE OFFICER or  
DULY AUTHORIZED REPRESENTATIVEName (Printed) Robert J. HoveyGeneral Manager  
Hope Creek OperationsTitle (Printed) Signature GMS RWHDate 3/23/94

OPERATING EXCEPTIONS DETAILED

Please refer to the attached Transmittal Addenda.

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HOURS ATTENDED AT PLANT

Month [0 2] Year [91 4]

Day of Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Licensed Operator	8	8	8	8	-	-	8	8	8	8	-	-	-	8	8	8
Others	10	10	10	10	3	3	10	10	10	10	3	3	3	10	10	10
Day of Month	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Licensed Operator	8	8	-	-	-	8	8	8	8	-	-	8				
Others	10	10	3	3	3	10	10	10	10	3	3	10				

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF WATER RESOURCES

MONITORING REPORT - TRANSMITTAL SHEET

NPDES NO.

REPORTING PERIOD

MO. YR.

MO. YR.

0 0 2 5 4 1 1

0 2 1 9 4 THRU 0 2 1 9 4

PERMITTER: Name Public Service Electric & Gas

Address P.O. Box 236  
Hancock's Bridge, N.J. 08038

FACILITY: Name Hope Creek Generating Station

Address P.O. Box 236  
Hancock's Bridge (County) Salem

Telephone (609) 339-3463

FORMS ATTACHED (Indicate Quantity of Each)

SLUDGE REPORTS - SANITARY

T-VWX-007  T-VWX-008  T-VWX-009

SLUDGE REPORTS - INDUSTRIAL

T-VWX-010A  T-VWX-010B

WASTEWATER REPORTS

T-VWX-011  T-VWX-012  T-VWX-013

GROUNDWATER REPORTS

VWX-015(A,B)  VWX-016  VWX-017

NPDES DISCHARGE MONITORING REPORT

EPA FORM 3320-1

OPERATING EXCEPTIONS

YES NO

DYE TESTING

TEMPORARY BYPASSING

DISINFECTION INTERRUPTION

MONITORING MALFUNCTIONS

UNITS OUT OF OPERATION

OTHER

(Detail any "Yes" on reverse side  
in appropriate space.)

NOTE: The "Hours Attended at Plant" on the  
reverse of this sheet must also be completed.

AUTHENTICATION - 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.

LICENSED OPERATOR

Name (Printed) Andres Nurk

Grade & Registry No. S-4 (S4542)

Signature Andres Nurk

Date 3/7/94

PRINCIPAL EXECUTIVE OFFICER or  
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) Robert J. Hovey

Title (Printed) General Manager  
Hope Creek Operations

Signature RJH

Date 3/23/94

OPERATING EXCEPTIONS DETAILED

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HOURS ATTENDED AT PLANT

Month 12 Year 91

Day of Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Licensed Operator	8	8	8	8			8	8	8	8	8	8	8	8	8	
Others				8	8						8					
Day of Month	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Licensed Operator	8	8	8		8	8	8	8			8	8	8	8		
Others				8					8	8						











NAME PSEGG

ADDRESS P.O. BOX 236/N21

HANCOCKS BRIDGE, NJ 08038

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

NJ0025411

PERMIT NUMBER

461C

DISCHARGE NUMBER

Form Approved.

OMB No. 2040-0004

FACILITY PSEG HOPE CREEK GENERATING ST  
LOCATION LOWER ALLOWAYS CREEK, NJ 08038

DMR NUMBER: 94020425

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
(20-21)	94	02	01	(22-23)	94	02	28
(24-25)				(26-27)			
				(28-29)			
				(30-31)			

LOW VOLUME ~~WATER~~ SYSTEM APPROVED 10-31-94

SALEM

MAJOR  
SOUTHERN REGION

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	(3 Card Only) (46-53)		QUANTITY OR LOADING (54-61)		(4 Card Only) (38-45)		QUALITY OR CONCENTRATION (46-53)		NO. EX (62-67)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	SAMPLE MEASUREMENT	PERMIT REQUIREMENT	XXXXXXXX	XXXXXXXXXX	UNITS	XMINIMUMXXX	AVERAGEXXX	XMAXIMUMXXX			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	13.2	15.3		0	WEEKLY GRAB	
PH 00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT MNTH AVG	REPORT DLY MAX				DEG-C
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		8	*****	8		0	WEEKLY GRAB	
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.00000 MINIMUM	*****	9.00000 MAXIMUM				SU
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	12	20		0	TWICE/ MONTH * COMPOS	
CARBON, TOT ORGANIC (TOC) 00680 1 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30.00000 MNTH AVG	100.00000 DLY MAX	MG/L			
COPPER, TOTAL (AS CU) 01042 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	<0.10	<0.10		0	TWICE/GRAB MONTH	
	PERMIT REQUIREMENT	*****	*****	*****	*****	10.00000 MNTH AVG	15.00000 DLY MAX	MG/L			
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND 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. SEE 18 USC § 1001 AND 33 USC § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)						Signature of Principal Executive Officer or Authorized Agent		TELEPHONE	DATE	
Robert J. Hovey General Manager Hope Creek Operations	<i>RGMS RLL</i>						609	339-3463	94	03	23
TYPED OR PRINTED							AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Refer to attached Transmittal Sheet Addenda.







NAME PSEG

ADDRESS P.O. BOX 236/N21

HANCOCKS BRIDGE, NJ 08038

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

NJ0025411  
PERMIT NUMBER4628  
DISCHARGE NUMBER

Form Approved.

OMB No. 2040-0004

SEWAGE W.W. Approval expires 10-31-94

MAJOR

SALEM

SOUTHERN REGION

NOTE: Read instructions before completing this form.

FACILITY PSEG HOPE CREEK GENERATING ST  
LOCATION LOWER ALLOWAYS CREE, NJ 08038

DMR NUMBER: 94020425

MONITORING PERIOD							
FROM	YEAR 04	MO 02	DAY 01	TO	YEAR 98	MO 02	DAY 28
(20-21)		(22-23)	(24-25)	(26-27)	(28-29)	(30-31)	

PARAMETER (32-37)	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
	SAMPLE MEASUREMENT	PERMIT REQUIREMENT	UNITS	SAMPLE MEASUREMENT	PERMIT REQUIREMENT	UNITS				
COLIFORM, FECAL GENERAL 74055 1 0	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	<del>XXXXXXXXXX</del>	0	ONCE/MONTH	GRAB	
EFFLUENT GROSS VALUE	<del>#####</del>	<del>#####</del>	<del>#####</del>	<del>#####</del>	<del>#####</del>	<del>#####</del>	2/100 ML	ONCE/MONTH	GRAB	
BOD, 5-DAY PERCENT REMOVAL 81010 K 0	SAMPLE MEASUREMENT	<del>#####</del>	<del>#####</del>	94.9	94.9	<del>#####</del>	0	ONCE/MONTH	CALCTD	
PERCENTREMOVAL	PERMIT REQUIREMENT	<del>#####</del>	<del>#####</del>	87.50000 MONAVMIN	REPORT AVERAGE	<del>#####</del>	PERCENT	ONCE/MONTH	CALCTD	
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0	SAMPLE MEASUREMENT	<del>#####</del>	<del>#####</del>	92	92	<del>#####</del>	0	ONCE/MONTH	CALCTD	
PERCENTREMOVAL	PERMIT REQUIREMENT	<del>#####</del>	<del>#####</del>	85.00000 MONAVMIN	REPORT AVERAGE	<del>#####</del>	PERCENT	ONCE/MONTH	CALCTD	
OXYGEN DEMAND FIRST STAGE 82210 1 0	SAMPLE MEASUREMENT	2.4	2.4	<del>#####</del>	28.5	28.5	0	ONCE/MONTH	CALCTD	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	8.20000 MNTH AVG	REPORT DLY MAX	KG/DAY	<del>#####</del>	REPORT MNTH AVG	REPORT DLY MAX	MG/L	ONCE/MONTH	
SAMPLE MEASUREMENT										
PERMIT REQUIREMENT										
SAMPLE MEASUREMENT										
PERMIT REQUIREMENT										
SAMPLE MEASUREMENT										
PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND 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. SEE 16 USC § 1061 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				N 615 	TELEPHONE		DATE	
Robert J. Hovey General Manager Hope Creek Operations TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORITY AGENT				609	339-3463	94	03	23
				AREA CODE	NUMBER	YEAR	MO	DAY		
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)										



