



Public Service Electric and Gas Company P.O. Box 236 Hancocks Bridge, New Jersey 08038-0236

Nuclear Business Unit

March <sup>23</sup>~~21~~, 2000

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED  
ARTICLE NUMBER: P 882 402 052

Department of Environmental Protection  
Division of Water Quality  
Bureau of Permit Management  
P.O. Box 029  
Trenton, N.J. 08625-0029

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 2000.

This report is required by and prepared specifically for the Environmental Protection Agency (EPA) and the New Jersey Department of Environmental Protection (NJDEP). 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 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 analytical result represents the true value with absolute accuracy, nor is it an endorsement of the suitability of any analytical or measurement procedure.

If you have any questions concerning this report, please feel free to contact Christopher White at (856) 339-3301.

Sincerely,

Mark B. Bezilla  
Vice President  
Operations

NJPDES DMR

2

<sup>23</sup>  
3/21/00

Attachments

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

Attachments

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

BC Vice President - Operations  
Manager - Licensing and Regulation - Nuclear  
Maureen Vaskis, Esq.  
P. R. La Sala  
D. K. Hurka  
C. E. White  
J. Buchanan  
A. Nurk  
Chem File HCH 2000-016  
Env Lic File 2.1.6 HC Book

NJPDES DMR

03/<sup>23</sup>~~21~~/00

Explanation of Conditions

February 2000

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 NJDEP certified laboratories:

Hope Creek Generating Station (17451)  
Raytheon Env. Services Laboratory (77343)  
South Jersey Testing, Inc. (06431)

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

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

The industrial license holder's (N-2) signature is signifying the review for DSN's 461A and 461C. The S-4 license holder's signature signifies review for DSN-462B.

NJPDES DMR

03/<sup>23</sup>~~21~~/00

Explanation of Exceedances

February 2000

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

DSN No.

EXPLANATION

**No Exceedances**

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF WATER QUALITY

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.  
0|0|2|5|4|1|1

REPORTING PERIOD  
Mo. Yr. Mo. Yr.  
02|10| 02|10|

PERMITTEE: Name: Public Service Electric & Gas  
Address: P.O. Box 236  
Hancocks Bridge, N.J. 08038

FACILITY: Name: Hope Creek Generating Station  
Address: P.O. Box 236  
Hancocks Bridge, N.J. 08038  
Telephone: (856) 339-3463

FORMS ATTACHED (Indicate Quantity of Each)

Operating Exceptions

SLUDGE REPORT - SANITARY  
    T-VWX-007     T-VWX-008     T-VWX-009  
    EPA Form 3320-1

DYE TESTING

YES NO  
   

SLUDGE REPORT - INDUSTRIAL  
    T-VWX-010A     T-VWX-010B

TEMPORARY BYPASSING

WASTEWATER REPORTS  
    T-VWX-011     T-VWX-012     T-VWX-013

DISINFECTION INTERRUPTION

GROUNDWATER REPORTS  
    VWX-015(A,B)     VWX-016     VWX-017  
    ELECTRONIC SUBMISSION

MONITORING MALFUNCTIONS

UNITS OUT OF OPERATION

OTHER

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

NJPDES DISCHARGE MONITORING  
    5 EPA FORM 3320-1

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

AUTHENTICATION I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

LICENSED OPERATOR

PRINCIPAL EXECUTIVE OFFICER OR  
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) Andres Nurk  
Grade & Registry No. S-4 (0006979)  
Signature *Andres Nurk*  
Date 3/7/00

Name (Printed) Mark B. Bezilla  
Title (Printed) Vice President, Operations  
Signature *M. B. Bezilla*  
Date 3/23/00

OPERATING EXCEPTIONS DETAILED

#2 filter out of operation  
 "A" Classifier off line, low sludge blankets

HOURS ATTENDED AT PLANT

Month 02 Year 00

Day of Month  
 Licensed Operator  
 Others  
 Day of Month  
 Licensed Operator  
 Others

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

T-VWX-014

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF WATER QUALITY

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.  
0025411

REPORTING PERIOD  
Mo. Yr. Mo. Yr.  
0200 0200

PERMITTEE: Name: Public Service Electric & Gas  
Address: P.O. Box 236  
Hancocks Bridge, N.J. 08038

FACILITY: Name: Hope Creek Generating Station  
Address: P.O. Box 236  
Hancocks Bridge, N.J. 08038  
Telephone: (856) 339-3463

FORMS ATTACHED (Indicate Quantity of Each)

Operating Exceptions

SLUDGE REPORT - SANITARY  
   T-VWX-007    T-VWX-008    T-VWX-009  
   EPA Form 3320-1

DYE TESTING

YES NO  
      X

SLUDGE REPORT - INDUSTRIAL  
   T-VWX-010A    T-VWX-010B

TEMPORARY BYPASSING

      X

WASTEWATER REPORTS  
   T-VWX-011    T-VWX-012    T-VWX-013

DISINFECTION INTERRUPTION

      X

GROUNDWATER REPORTS  
   VWX-015(A,B)    VWX-016    VWX-017  
   ELECTRONIC SUBMISSION

MONITORING MALFUNCTIONS

      X

UNITS OUT OF OPERATION

      X

OTHER

      X

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

NJPDES DISCHARGE MONITORING  
  5 EPA FORM 3320-1

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

AUTHENTICATION I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

LICENSED OPERATOR

PRINCIPAL EXECUTIVE OFFICER OR  
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) Peter R. La Sala

Name (Printed) Mark B. Bezilla

Grade & Registry No. N-2 (0005928)

Title (Printed) Vice President, Operations

Signature [Signature]

Signature [Signature]

Date 17 March 2000

Date March 23, 2000

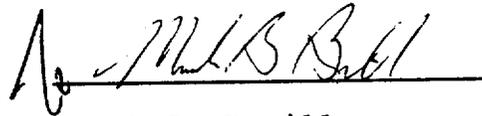




COUNTY OF SALEM  
STATE OF NEW JERSEY

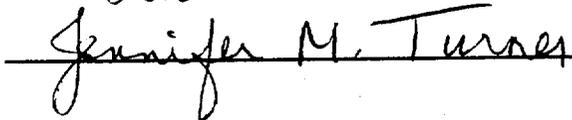
I, Mark B. Bezilla, of full age, being duly sworn according to law, upon my oath depose and say:

1. I am the Vice President, Operations 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.



Mark B. Bezilla  
Vice President  
Operations

Sworn and subscribed before me  
this 23<sup>rd</sup> day of Mar 200 .



JENNIFER M. TURNER  
NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires July 25, 2000

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME PSE&G  
 ADDRESS P.O. BOX 236/N21  
 HANCOCKS BRIDGE, NJ 08038

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-18) NJ0025411	(17-19) 461A
PERMIT NUMBER	DISCHARGE NUMBER

Form Approved  
 OMR No. 2040-0004  
 Approval expires 05-31-08

MAJOR

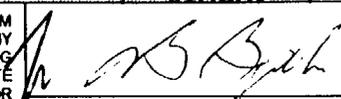
FACILITY LOCATION PSE&G HOPE CREEK GENERATING ST  
 LOWER ALLOWAYS CREE, NJ 08038

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	02	01		00	02	29
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

SOUTHERN REGION / SALEM

DMR NUMBER : NJ0025411 461A 012000

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
PH		*****	*****		8.5	*****	8.7	0	WEEKLY	GRAB	
00400 1 0 EFFLUENT GROSS VALUE		*****	*****	****	6.0000X 01RPMN	*****	9.0000X 01RPMX	SU	WEEKLY	GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		39.177	44.402	*****	*****	*****		UOUS	0	CONTIN METER	
50050 1 0 EFFLUENT GROSS VALUE		REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	****	CONTIN UOUS	METER	
LC50 STATRE 96HR ACU MYSID. BAHIA		*****	*****		CODE=N	*****	*****	0	CODE=N	CODE=N	
TAN3E 1 0 EFFLUENT GROSS VALUE		*****	*****	****	REPORT 01MOAVMN	*****	*****	PERCENT	QTRLY	CK REQ	
IC25 STATRE 7DAY CHR MYSID. BAHIA		*****	*****		CODE=N	*****	*****	0	CODE=N	CODE=N	
TBP3E 1 0 EFFLUENT GROSS VALUE		*****	*****	****	REPORT 01MOAVMN	*****	*****	PERCENT	QRTLY	CK REQ	
IC25 STATRE 7DAY CHR CYPRINODON		*****	*****		CODE=N	*****	*****	0	CODE=N	CODE=N	
TBP6A 1 0 EFFLUENT GROSS VALUE		*****	*****	****	REPORT 01MOAVMN	*****	*****	PERCENT	QRTLY	CK REQ	
CHLORINE PRODUCED OXIDANTS		*****	*****		*****	<0.1	<0.1	0	THREE/ WEEK	GRAB	
*CPOX 1 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	0.2000X 01MOAV	0.5000X 01DAMX	MG/L	THREE/ WEEK	GRAB	
TEMPERATURE, WATER DEG. CENTIGRADE		*****	*****		*****	19.4	25.2	0	CONTIN UOUS	CK REQ	
00010 1 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	REPORT 01MOAV	36.2000X 01DAMX	DEG.C	CONTIN UOUS	CK REQ	
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 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)						TELEPHONE		DATE		
Mark B. Bezilla Vice President Operations							856 339-3463		00	03	23
TYPED OR PRINTED							SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR

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

\*\* Please refer to attached Transmittal Sheet Addenda.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME PSE&G  
 ADDRESS P.O. BOX 236/N21  
 HANCOCKS BRIDGE, NJ 08038

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-10) NJ0025411	(17-19) 461A
PERMIT NUMBER	DISCHARGE NUMBER

Form Approved  
 OMR No. 2040-0004  
 Annual expires 05 31 08

MAJOR

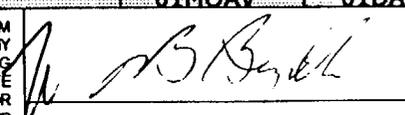
FACILITY LOCATION PSE&G HOPE CREEK GENERATING ST  
 LOWER ALLOWAYS CREE, NJ 08038

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	02	01		00	02	29

SOUTHERN REGION / SALEM

DMR NUMBER : NJ0025411 461A 012000

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	3.5	6.7		0	CONTIN UOUS	CK REQ	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.C		CONTIN UOUS	CK REQ	
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	67.0	77.3		0	CONTIN UOUS	CK REQ	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	97.1000X 01DAMX	DEG.F		CONTIN UOUS	CK REQ	
TEMPERATURE, WATER DEG. FAHRENHEIT 0011 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	38.3	44.1		0	CONTIN UOUS	CK REQ	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.F		CONTIN UOUS	CK REQ	
PHOSPHORUS, TOTAL (AS P) 00665 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		0	NODI	NODI	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		ONCE/ MONTH	GRAB	
CARBON, TOT ORGANIC (TOC) 00680 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	12.1	12.1		0	ONCE/ MONTH	GRAB	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		ONCE/ MONTH	GRAB	
CARBON, TOT ORGANIC (TOC) 00680 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****		*****	3	3	**	0	ONCE/ MONTH	CALCTD	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	20.000X 01DAMX	MG/L		ONCE/ MONTH	GRAB	
CARBON, TOT ORGANIC (TOC) 00680 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	7.4	7.4		0	ONCE/ MONTH	GRAB	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		ONCE/ MONTH	GRAB	
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 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)							TELEPHONE		DATE		
Mark B. Bezilla Vice President Operations								856 339-3463		00	03	23
TYPED OR PRINTED								SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR

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

\*\* Please refer to the attached Transmittal Sheet Addenda.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
 NAME PSE&G  
 ADDRESS P.O. BOX 236/N21  
 HANCOCKS BRIDGE, NJ 08038

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 (2-10) (17-19)  
 NJ0025411 461A  
 PERMIT NUMBER DISCHARGE NUMBER

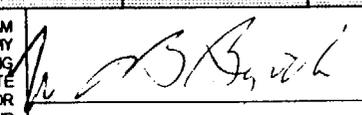
Form Approved  
 OMB No. 2040-0004  
 Approval expires 05 31 98  
 MAJOR

FACILITY LOCATION PSE&G HOPE CREEK GENERATING ST  
 LOWER ALLOWAYS CREE, NJ 08038  
 DMR NUMBER : NJ0025411 461A 012000

MONITORING PERIOD  
 FROM YEAR MO DAY TO YEAR MO DAY  
 00 02 01 00 02 29  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

SOUTHERN REGION / SALEM

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
HEAT (WINTER) (PER HOUR) 81387 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	388	482	MBTU/HR	*****	*****	*****	**** ***	0	DAILY	CALCTD	
	PERMIT REQUIREMENT	REPORT 01MOAV	662.00000X 01DAMX		*****	*****	*****				DAILY	CALCTD
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	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 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)							TELEPHONE		DATE		
Mark B. Bezilla Vice President Operations								856 339-3463		00	03	25
TYPED OR PRINTED								SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME PSE&G  
 ADDRESS P.O. BOX 236/N21  
 HANCOCKS BRIDGE, NJ 08038

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) NJ0025411 (17-19) 461C  
 PERMIT NUMBER DISCHARGE NUMBER

Form Approved  
 OMB No 2040-0004  
 Approval expires 05-31-08

MAJOR

FACILITY LOCATION PSE&G HOPE CREEK GENERATING ST  
 LOWER ALLOWAYS CREE, NJ 08038

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	02	01	TO	00	02	29
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

SOUTHERN REGION / SALEM

DMR NUMBER : NJ0025411 461C 012000

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****	****	*****	2	2	MG/L	0	ONCE/MONTH	COMPOS	
PETROL HYDROCARBONS, TOTAL RECOVERABLE 45501 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****	****	*****	<1	<1	MG/L	0	TWICE/MONTH	GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	.069	.200	MGD	*****	*****	*****	****	0	CONTINUOUS	METER	
CARBON, TOT ORGANIC (TOC) 00680 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****	****	*****	5	5	MG/L	0	ONCE/MONTH	COMPOS	
	SAMPLE MEASUREMENT PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT PERMIT REQUIREMENT											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Mark B. Bezilla VicePresident Operations	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 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)							TELEPHONE 856 339-3463	DATE 00 03 21			
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT							AREA CODE	NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME PSE&G  
 ADDRESS P.O. BOX 236/N21  
 HANCOCKS BRIDGE, NJ 08038

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-18) NJ0025411 (17-19) 462B  
 PERMIT NUMBER DISCHARGE NUMBER

Form Approved  
 OMR No. 2040-0004  
 Annual revision 05-31-88

MAJOR

FACILITY LOCATION PSE&G HOPE CREEK GENERATING ST  
 LOWER ALLOWAYS CREE, NJ 08038

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	02	01	TO	00	02	29
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

SOUTHERN REGION / SALEM

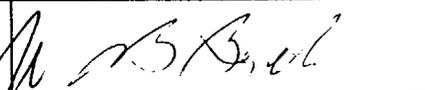
DMR NUMBER : NJ0025411 462B 012000

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (54-61)	MAXIMUM	UNITS	MINIMUM (46-53)	AVERAGE (54-61)	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE	MEASUREMENT	.5	.5	KG/DAY	*****	*****	*****	0	ONCE/MONTH	COMPOS	
PERMIT REQUIREMENT	01MOAV	01DAMX	*****		*****	*****	****				
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	MEASUREMENT	*****	*****	MG/L	*****	18	18	0	ONCE/MONTH	COMPOS	
PERMIT REQUIREMENT	*****	*****	*****		30.0000X 01MOAV	REPORT 01DAMX	****				
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 EFFLUENT GROSS VALUE	MEASUREMENT	*****	*****	MG/L	*****	<1	<1	0	ONCE/MONTH	GRAB	
PERMIT REQUIREMENT	*****	*****	*****		10.0000X 01MOAV	15.0000X 01DAMX	****				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	MEASUREMENT	.010	.013	MGD	*****	*****	*****	0	DAILY	METER	
PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	*****		*****	*****	****				
COLIFORM, FECAL GENERAL 74055 1 0 EFFLUENT GROSS VALUE	MEASUREMENT	*****	*****	#/100	*****	<1	<1	0	ONCE/MONTH	GRAB	
PERMIT REQUIREMENT	*****	*****	*****		200.0000X 01MOGE	400.0000X 01DAGE	****				
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 PERCENTREMOVAL	MEASUREMENT	*****	*****	PERCENT	96.9	*****	*****	0	ONCE/MONTH	CALCTD	
PERMIT REQUIREMENT	*****	*****	*****		87.5000X 01MOAVMN	*****	*****				
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 1 0 PERCENTREMOVAL	MEASUREMENT	*****	*****	PERCENT	96	*****	*****	0	ONCE/MONTH	CALCTD	
PERMIT REQUIREMENT	*****	*****	*****		85.0000X 01MOAVMN	*****	*****				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Mark B. Bezilla  
 Vice President  
 Operations

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  


TELEPHONE DATE  
 856 339-3463 00 03 25  
 AREA CODE NUMBER YEAR MO DAY

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