



50-354

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

Nuclear Business Unit

July 24, 2000

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
ARTICLE NUMBER: 7099 3400 0002 4172 2846

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

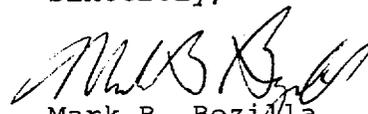
Dear Sir:

Attached is the Discharge Monitoring Report for the Hope Creek
Generating Station for the month of June 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

The power is in your hands.

IE25

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
W. E. White
J. Buchanan
A. Nurk
Chem File HCH 2000-047
Env Lic File 2.1.6 HC Book

Explanation of Conditions

June 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

07/24/00

Explanation of Exceedances

June 2000

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

DSN No.

EXPLANATION

No Exceedances

COUNTY OF SALEM
STATE OF NEW JERSEY

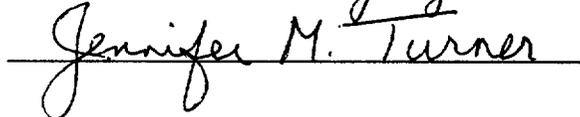
I, Mark B. Bezilla, of full age, being duly sworn according to law, upon my oath depose and say:

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 24th day of July 2000.



JENNIFER M. TURNER
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires July 25, 2005

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.
0600 0600

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 7-20-00

Date 7/24/00

ADDENDA TO MONITORING REPORT - TRANSMITTAL SHEET

June 2000

07/24/2000

DISCHARGE NUMBER

PAGE PARAMETER CODE COMMENTS

461A

1 of 3 *CPOX 1 0 ** Sampling frequency increased to 4/week to
obtain additional operational data.

2 of 3 00680 2 0 ** NET Values are calculated utilizing results
from grab samples.

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.
10|6|0|0 10|6|0|0

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)

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

SLUDGE REPORT - 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
___ ELECTRONIC SUBMISSION

NJPDES DISCHARGE MONITORING
___ 5 EPA FORM 3320-1

Operating Exceptions

	YES	NO
DYE TESTING	___	<u>X</u>
TEMPORARY BYPASSING	___	<u>X</u>
DISINFECTION INTERRUPTION	___	<u>X</u>
MONITORING MALFUNCTIONS	___	<u>X</u>
UNITS OUT OF OPERATION	<u>X</u>	___
OTHER	<u>X</u>	___

(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 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

Name (Printed) Andres Nurk
Grade & Registry No. S-4 (0006979)
Signature *Andres Nurk*
Date 7/18/00

PRINCIPAL EXECUTIVE OFFICER OR
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) Mark B. Bezilla
Title (Printed) Vice President, Operations
Signature *M.B. Bezilla*
Date 7/24/00

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) (17-19)

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

NJ0025411
 PERMIT NUMBER

461A
 DISCHARGE NUMBER

MAJOR

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

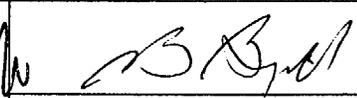
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	06	01	00	06	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

SOUTHERN REGION / SALEM

DMR NUMBER : NJ0025411 461A 012000

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(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			
PH		*****	*****		7.6	*****	8.6	0	WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**** ****	6.0 0000 01RPMN	*****	9.0 0000 01RPMX	SU	WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	60.833	94.170	*****	*****	*****	*****	0	CONTINUOUS	METER
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	**** ***	CONTINUOUS	METER
LC50 STATRE 96HR ACU MYSID. BAHIA	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****	0	CODE=N	CODE=N
TAN3E 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**** ****	REPORT 01MOAVMN	*****	*****	PERCENT	QTRLY	CK REQ
IC25 STATRE 7DAY CHR MYSID. BAHIA	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****	0	CODE=N	CODE=N
TBP3E 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**** ****	REPORT 01MOAVMN	*****	*****	PERCENT	QTRLY	CK REQ
IC25 STATRE 7DAY CHR CYPRINODON	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****	0	CODE=N	CODE=N
TBP6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**** ****	REPORT 01MOAVMN	*****	*****	PERCENT	QTRLY	CK REQ
CHLORINE PRODUCED OXIDANTS	SAMPLE MEASUREMENT	*****	*****		*****	<0.1	<0.1	**	THREE/WEEK	GRAB
*CPOX 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**** ****	*****	0.2 0000 01MOAV	0.5 0000 01DAMX	MG/L	THREE/WEEK	GRAB
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****		*****	26.5	33.1	0	CONTINUOUS	CK REQ
00010 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**** ****	*****	REPORT 01MOAV	36.2 0000 01DAMX	DEG.C	CONTINUOUS	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.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
Mark B. Bezilla Vice President Operations			756	339-3463	00	07	24
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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)

NJ0025411
 PERMIT NUMBER

461A
 DISCHARGE NUMBER

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

MAJOR

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

MONITORING PERIOD							
YEAR	MO	DAY	TO	YEAR	MO	DAY	
00	06	01	TO	00	06	30	
(20-21)		(22-23)		(24-25)		(26-27)	
				(28-29)		(30-31)	

SOUTHERN REGION / SALEM

NOTE: Read instructions before completing this form.

DMR NUMBER : NJ0025411 461A 012000

PARAMETER (32-37)	X	(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			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	24.4	27.9		0	CONTINUOUS	CK REQ
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.C		CONTINUOUS	CK REQ
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	79.7	91.6		0	CONTINUOUS	CK REQ
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 97.10000 01DAMX	DEG.F		CONTINUOUS	CK REQ
TEMPERATURE, WATER DEG. FAHRENHEIT 0011 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	75.8	82.3		0	CONTINUOUS	CK REQ
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.F		CONTINUOUS	CK REQ
PHOSPHORUS, TOTAL (AS P) 00665 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	CODE=N	CODE=N		0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		ONCE/MONTH	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	7.2	7.2		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	*****	*****		*****	1	1	**	0	ONCE/MONTH	CALCTD
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 20.0000 01DAMX	MG/L		ONCE/MONTH	GRAB
CARBON, TOT ORGANIC (TOC) 00680 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	6.9	6.9		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						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			856	339-3463	
TYPED OR PRINTED						AREA CODE	NUMBER	YEAR	MO	DAY	

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

*Please refer to the attached Transmittal Sheet Addenda.

LABS: 17451 77343 06431

2 3

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) (17-19)

NJ0025411	462B
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

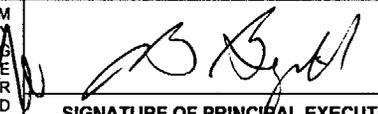
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	06	01	00	06	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

SOUTHERN REGION / SALEM

NOTE: Read instructions before completing this form.

DMR NUMBER : NJ0025411 462B 012000

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	AVERAGE	MAXIMUM			
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2	2	KG/DAY	*****	*****	*****	0	ONCE/ MONTH	COMPOS
	PERMIT REQUIREMENT	8.0000X 01MOAV	REPORT 01DAMX		*****	*****	*****			
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**** ****	*****	8	8	0	ONCE/ MONTH	COMPOS
	PERMIT REQUIREMENT	*****	*****		*****	30.0000X 01MOAV	REPORT 01DAMX			
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**** ****	*****	2	2	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	SAMPLE MEASUREMENT	.021	.037	MGD	*****	*****	*****	0	DAILY	METER
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****			
COLIFORM, FECAL GENERAL 74055 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**** ****	*****	<1	<1	0	ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	200.0000X 01MOGE	400.0000X 01DAGE			
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 PERCENTREMOVAL	SAMPLE MEASUREMENT	*****	*****	**** ****	91.6	*****	*****	0	ONCE/ MONTH	CALCTD
	PERMIT REQUIREMENT	*****	*****		87.5000X 01MOAVMN	*****	*****			
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 1 0 PERCENTREMOVAL	SAMPLE MEASUREMENT	*****	*****	**** ****	98	*****	*****	0	ONCE/ MONTH	CALCTD
	PERMIT REQUIREMENT	*****	*****		85.0000X 01MOAVMN	*****	*****			

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.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
Mark B. Bezilla Vice President Operations			856	339-3463	00	07
TYPED OR PRINTED	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)

NJ0025411
 PERMIT NUMBER

461C
 DISCHARGE NUMBER

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

MAJOR

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

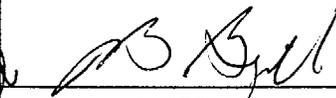
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	06	01	00	06	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

SOUTHERN REGION / SALEM

NOTE: Read instructions before completing this form.

DMR NUMBER : NJ0025411 461C 012000

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			
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	7	7	0	ONCE/MONTH	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0000 01MOAV	100.0000 01DAMX		ONCE/MONTH	COMPOS
PETROL HYDROCARBONS, TOTAL RECOVERABLE 45501 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	6	8	0	TWICE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	10.0000 01MOAV	15.0000 01DAMX		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.020	.040		*****	*****	*****	0	CONTINUOUS	METER
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	****	CONTINUOUS	METER
CARBON, TOT ORGANIC (TOC) 00680 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	12	12	0	ONCE/MONTH	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	50.0000 01DAMX		ONCE/MONTH	COMPOS
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Mark B. Bezilla VicePresident Operations TYPED OR PRINTED	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.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE		DATE		
			856 AREA CODE	339-3463 NUMBER	00 YEAR	07 MO	24 DAY

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