PSE&G

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

Nuclear Department

June 22, 1989

George Caporale - Chief
Bureau of Permits Admin.
Division of Water Resources
CN-029
Trenton, NJ 08625

Dear Mr. Caporale

NEW JERSEY POLLUTANT DISCHARGE
ELIMINATION SYSTEM
DISCHARGE MONITORING REPORTS
SALEM GENERATING STATION
PERMIT NO. NJ0005622

Attached is the Discharge Monitoring Report for Salem Generating Station containing the information as required in Permit No. NJ0005622 for the month of May, 1989.

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 analyses required to be performed by the above agencies. The choice of the measurement devices and analytical methods is controlled by EPA and 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 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.

Exclusion explanations are included on additional pages.

Very truly yours,

J. K. Miller for D. Lewis

Radiation Protection/
Chemistry Manager -
Salem Operations

PDB:slg
Attachments

C Executive Director, DRBC
Director, USNRC Office of Nuclear Reactor Regulation
Vice President - Nuclear
USEPA - Dr. Richard Baker

NPDES.RPT

8906300155

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

DMR NO.	EXPLANATION
	No violations

The following explanations are included to clarify possible deviations 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.

All reported concentrations are based on daily discharge values.

Total residual chlorine is performed twice per week during chlorination unless otherwise indicated.

Analytical values which are less than detectable are reported as zero unless otherwise indicated.

Analytical results for all parameters other than pH, temperature, TSS and TRC are provided by Century Laboratories (NJDEP certification 08153).

Net negative discharge values are reported as negative.

487,489 - Direct flow measurement is impossible at these locations. Reported values are based upon National Weather Service Data in accordance with the agreement reached with NJDEP on 2/10/88.

481-486 - Chlorination of the circulation water system normally does not occur except as otherwise noted. Service water system chlorination is normally continuous and is monitored on the circulating water system outfall.

Chlorination of both systems will be indicated by results reported for both and represents their combined affect upon the circulating water outfall.

50-272/311

TO: General Manager - Salem Operations

FROM: David K. Hurka

SUBJECT: **1989 NJPDES COMPLIANCE**

DATE: June 22, 1989

In May, no violations of the NJPDES permit were observed. Attached is your 1989 NJPDES Permit Exceedance Matrix which has been updated to include the most recent information. Should you have any questions regarding any NJPDES issues please call me at 4349.

PDB:slg
Attachment

CH6289.EXT

IE25
0/1

NJPDES PERMIT EXCEEDANCE MATRIX - 1989

	481	482	483	481-483	484	485	486	484-486	FAC	48C	487	487A	489	489A	489B	TOTAL VIOLATIONS
J		1-COD		2- T				5- T					1-pH			9
F					1-COD	1-TRC										2
M										$1-NH_3$						1
A																0
M																0
J																
J																
A																
S																
O																
N																
D																
YTD 12		1		2	1	1		5		1			1			12

Admin Violations -
1. January late thermal data submittal due to change in calculational method and system modifications.

MATRIX.FRM

Form T-VWX-014
5/83

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER RESOURCES

MONITORING REPORT – TRANSMITTAL SHEET

NJPDES NO.	REPORTING PERIOD MO. YR.		MO. YR.
0 0 0 5 6 2 2	0 5 8 9	THRU	0 5 8 9

PERMITTEE:

Name: Public Service Electric & Gas Co.

Address: PO Box 236

Hancock's Bridge, NJ 08038

FACILITY:

Name: Salem Generating Station

Address: Buttonwood Road

Hancock's Bridge (County) Salem

Telephone: (609) 935-6000

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

18 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)*: Paul Behrens

Grade & Registry No.: N-2, N-0176 S-3, S-5235

Signature: Paul Behrens

Date: 6/16/89

PRINCIPAL EXECUTIVE OFFICER or DULY AUTHORIZED REPRESENTATIVE

Name *(Printed)*: Dave Mohler

Title *(Printed)*: Radiation Prot/Chem Mgr

Signature: T. K. Wells

Date: 6/22/89

OPERATING EXCEPTIONS DETAILED

HOURS ATTENDED AT PLANT

Month 0 5 Year 8 9

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
Others	4	4	4	4	4			4	4	4	4	4			4	4
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			H	8	8	
Others	4	4	4			4	4	4	4	4				4	4	

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PSE&G-SALEM GENERATING STATION
ADDRESS PO BOX 266/N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
NJ0005622	481 A

FINAL
NON-CONTACT COOLING WATER

Form Approved
OMB No. 2040-0004
Expires 3-31-88

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(5 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	517.40	532.80	MGD	* * *	* * *	* * *		*	CONT	CONTINUOUS
	PERMIT REQUIREMENT	REPORT 30 DA AVG	REPORT DAILY MX							CONTIN UOUS	CONTIN U
CHLORINE, TOTAL RESIDUAL, SWS 50060 S 0 0 SWS DISCHARGE - NORMAL COND	SAMPLE MEASUREMENT	* * *	* * *		<0.01	<0.01	0.02		0	21/WK	GRAB
	PERMIT REQUIREMENT				REPORT	REPORT 30 DA AVG	0.2 DAILY MX	MG/L		3/WEEK	GRAB
CHLORINE, TOTAL RESIDUAL, SWS 50060 N 0 0 SWS DISCHARGE - NO CWS FLOW	SAMPLE MEASUREMENT	* * *	* * *		<0.01	<0.01	0.02		0	21/WK	GRAB
	PERMIT REQUIREMENT				REPORT	0.3 30 DA AVG	0.5 DAILY MX	MG/L		3/WEEK	GRAB
CHLORINE, TOTAL RESIDUAL, CWS 50060 T 0 0 CWS DISCHARGE	SAMPLE MEASUREMENT	* * *	* * *		N/A	N/A	N/A				GRAB
	PERMIT REQUIREMENT				REPORT	REPORT 30 DA AVG	0.2 DAILY MX	MG/l		3/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		6.80	* * *	7.10		0	2/W	GRAB
	PERMIT REQUIREMENT				6.0 MINIMUM		9.0 MAXIMUM	S.U.		WEEKLY	GRAB
PH 00400 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	* * *	* * *		6.80	* * *	7.00		0	2/WKLY	GRAB
	PERMIT REQUIREMENT				REPORT MINIMUM		REPORT MAXIMUM	S.U.		WEEKLY	GRAB
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*		GRAB
	PERMIT REQUIREMENT										GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
D. Mohler
Radiation Protection/
Chemistry Manager
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 USC § 1001 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.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 609 | NUMBER 339-4399

DATE: YEAR 89 | MO 06 | DAY 22

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PSE&G-SALEM GENERATING STATION
ADDRESS PO BOX 266/N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
NJ0005622	482 A

FINAL
NON-CONTACT COOLING WATER

Form Approved
OMB No. 2040-0004
Expires 3-31-88

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(5 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	517.00	532.80	MGD	* * *	* * *	* * *		*	CONT	CONTINUOUS
	PERMIT REQUIREMENT	REPORT 30 DA AVG	REPORT DAILY MX							CONTIN	CONTIN
CHLORINE, TOTAL RESIDUAL, SWS 50060 S 0 0 SWS DISCHARGE - NORMAL COND	SAMPLE MEASUREMENT	* * *	* * *		<0.01	<0.01	<0.01		0	21/WK	GRAB
	PERMIT REQUIREMENT				REPORT	REPORT 30 DA AVG	0.2 DAILY MX	MG/L		3/WEEK	GRAB
CHLORINE, TOTAL RESIDUAL, SWS 50060 N 0 0 SWS DISCHARGE - NO CWS FLOW	SAMPLE MEASUREMENT	* * *	* * *		<0.01	<0.01	<0.01		0	21/WK	GRAB
	PERMIT REQUIREMENT				REPORT	0.3 30 DA AVG	0.5 DAILY MX	MG/L		3/WEEK	GRAB
CHLORINE, TOTAL RESIDUAL, CWS 50060 T 0 0 CWS DISCHARGE	SAMPLE MEASUREMENT	* * *	* * *		N/A	N/A	N/A				GRAB
	PERMIT REQUIREMENT				REPORT	REPORT 30 DA AVG	0.2 DAILY MX	MG/1		3/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		6.70	* * *	7.10		0	2/W	GRAB
	PERMIT REQUIREMENT				6.0 MINIMUM		9.0 MAXIMUM	S.U.		WEEKLY	GRAB
PH 00400 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	* * *	* * *		6.80	* * *	7.00		*	2/WKLY	GRAB
	PERMIT REQUIREMENT				REPORT MINIMUM		REPORT MAXIMUM	S.U.		WEEKLY	GRAB
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*		GRAB
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
D. Mohler
Radiation Protection/
Chemistry Manager
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 USC § 1001 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.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 609 | NUMBER 339-4399

DATE: YEAR 89 | MO 06 | DAY 22

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PSE&G-SALEM GENERATING STATION
ADDRESS PO BOX 266/N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

Form Approved
OMB No. 2040-0004
Expires 3-31-88

(2-16) NJ0005622 — PERMIT NUMBER
(17-19) 483 A — DISCHARGE NUMBER

FINAL
NON-CONTACT COOLING WATER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.00	0.00	MGD	* * *	* * *	* * *		*	CONT	CONTINUOUS
	PERMIT REQUIREMENT	REPORT 30 DA AVG	REPORT DAILY MX							CONTIN UOUS	CONTIN US
CHLORINE, TOTAL RESIDUAL, SWS 50060 S 0 0 SWS DISCHARGE - NORMAL COND	SAMPLE MEASUREMENT	* * *	* * *	MG/L	N/A	N/A	N/A				GRAB
	PERMIT REQUIREMENT				REPORT	REPORT 30 DA AVG	0.2 DAILY MX			3/WEEK	GRAB
CHLORINE, TOTAL RESIDUAL, SWS 50060 N 0 0 SWS DISCHARGE - NO CWS FLOW	SAMPLE MEASUREMENT	* * *	* * *	MG/L	<0.01	<0.01	0.04		0	21/WK	GRAB
	PERMIT REQUIREMENT				REPORT	0.3 30 DA AVG	0.5 DAILY MX			3/WEEK	GRAB
CHLORINE, TOTAL RESIDUAL, CWS 50060 T 0 0 CWS DISCHARGE	SAMPLE MEASUREMENT	* * *	* * *	MG/L	N/A	N/A	N/A				GRAB
	PERMIT REQUIREMENT				REPORT	REPORT 30 DA AVG	0.2 DAILY MX			3/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *	S.U.	6.90	* * *	7.20		0	2/W	GRAB
	PERMIT REQUIREMENT				6.0 MINIMUM		9.0 MAXIMUM			WEEKLY	GRAB
PH 00400 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	* * *	* * *	S.U.	6.80	* * *	7.00		*	2/WK	GRAB
	PERMIT REQUIREMENT				REPORT MINIMUM		REPORT MAXIMUM			WEEKLY	GRAB
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*		GRAB
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
D. Mohler
Radiation Protection/
Chemistry Manager
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 USC § 1001 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.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 609 | NUMBER 339-4399

DATE: YEAR 89 | MO 06 | DAY 22

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PSE&G-SALEM GENERATING STATION
ADDRESS PO BOX 266/N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

(2-16) NJ0005622 — PERMIT NUMBER
(17-19) 484 A — DISCHARGE NUMBER

FINAL
NON-CONTACT COOLING WATER

Form Approved
OMB No. 2040-0004
Expires 3-31-88

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	416.80	532.80		* * *	* * *	* * *		*	CONT	CONTINUOUS
	PERMIT REQUIREMENT	REPORT 30 DA AVG	REPORT DAILY MX	MGD						CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL, SWS 50060 S 0 0 SWS DISCHARGE - NORMAL COND	SAMPLE MEASUREMENT	* * *	* * *		<0.01	<0.01	<0.01		0	21/WK	GRAB
	PERMIT REQUIREMENT				REPORT	REPORT 30 DA AVG	0.2 DAILY MX	MG/L		3/WEEK	GRAB
CHLORINE, TOTAL RESIDUAL, SWS 50060 N 0 0 SWS DISCHARGE - NO CWS FLOW	SAMPLE MEASUREMENT	* * *	* * *		<0.01	<0.01	<0.01		0	21/WK	GRAB
	PERMIT REQUIREMENT				REPORT	0.3 30 DA AVG	0.5 DAILY MX	MG/L		3/WEEK	GRAB
CHLORINE, TOTAL RESIDUAL, CWS 50060 T 0 0 CWS DISCHARGE	SAMPLE MEASUREMENT	* * *	* * *		N/A	N/A	N/A				GRAB
	PERMIT REQUIREMENT				REPORT	REPORT 30 DA AVG	0.2 DAILY MX	MG/l		3/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		6.80	* * *	7.10		0	2/WK	GRAB
	PERMIT REQUIREMENT				6.0 MINIMUM		9.0 MAXIMUM	S.U.		WEEKLY	GRAB
PH 00400 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	* * *	* * *		6.80	* * *	7.00		*	2/WK	GRAB
	PERMIT REQUIREMENT				REPORT MINIMUM		REPORT MAXIMUM	S.U.		WEEKLY	GRAB
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*		GRAB
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
D. Mohler
Radiation Protection/
Chemistry Manager
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 USC § 1001 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.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 609 | NUMBER 339-4399

DATE: YEAR 89 | MO 06 | DAY 22

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

PREVIOUS EDITION IS OBSOLETE

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PSE&G-SALEM GENERATING STATION
ADDRESS PO BOX 266/N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

Form Approved
OMB No. 2040-0004
Expires 3-31-88

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)	
NJ0005622	485 A	FINAL
		NON-CONTACT COOLING WATER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	456.20	532.80		* * *	* * *	* * *		*	CONT	CONTINUOUS
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AVG	REPORT DAILY MX	MGD						CONTINUOUS	CONTINUOUS
CHLORINE, TOTAL RESIDUAL, SWS	SAMPLE MEASUREMENT	* * *	* * *		<0.01	<0.01	<0.01		0	21/WK	GRAB
50060 S 0 0 SWS DISCHARGE - NORMAL COND	PERMIT REQUIREMENT				REPORT	REPORT 30 DA AVG	0.2 DAILY MX	MG/L		3/WEEK	GRAB
CHLORINE, TOTAL RESIDUAL, SWS	SAMPLE MEASUREMENT	* * *	* * *		<0.01	<0.01	<0.01		0	21/WK	GRAB
50060 N 0 0 SWS DISCHARGE - NO CWS FLOW	PERMIT REQUIREMENT				REPORT	0.3 30 DA AVG	0.5 DAILY MX	MG/L		3/WEEK	GRAB
CHLORINE, TOTAL RESIDUAL, CWS	SAMPLE MEASUREMENT	* * *	* * *		N/A	N/A	N/A				GRAB
50060 T 0 0 CWS DISCHARGE	PERMIT REQUIREMENT				REPORT	REPORT 30 DA AVG	0.2 DAILY MX	MG/1		3/WEEK	GRAB
PH	SAMPLE MEASUREMENT	* * *	* * *		6.90	* * *	7.20		0	2/W	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT				6.0 MINIMUM		9.0 MAXIMUM	S.U.		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	* * *	* * *		6.80	* * *	7.00		*	2/WK	GRAB
00400 7 0 0 INTAKE FROM STREAM	PERMIT REQUIREMENT				REPORT MINIMUM		REPORT MAXIMUM	S.U.		WEEKLY	GRAB
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*		GRAB
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
D. Mohler
Radiation Protection/
Chemistry Manager
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 USC § 1001 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.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 609 | NUMBER 339-4399

DATE: YEAR 89 | MO 06 | DAY 22

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PSE&G-SALEM GENERATING STATION
ADDRESS PO BOX 266/N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

(2-16)	(17-19)
NJ0005622	486 A
PERMIT NUMBER	DISCHARGE NUMBER

FINAL
NON-CONTACT COOLING WATER

Form Approved
OMB No. 2040-0004
Expires 3-31-88

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	452.60	532.80	MGD	* * *	* * *	* * *		*	CONT	CONTINUOUS
	PERMIT REQUIREMENT	REPORT 30 DA AVG	REPORT DAILY MX							CONTIN UOUS	CONTIN UOUS
CHLORINE, TOTAL RESIDUAL, SWS 50060 S 0 0 SWS DISCHARGE - NORMAL COND	SAMPLE MEASUREMENT	* * *	* * *		<0.01	<0.01	<0.01		0	21/WK	GRAB
	PERMIT REQUIREMENT				REPORT	REPORT 30 DA AVG	0.2 DAILY MX	MG/L		3/WEEK	GRAB
CHLORINE, TOTAL RESIDUAL, SWS 50060 N 0 0 SWS DISCHARGE - NO CWS FLOW	SAMPLE MEASUREMENT	* * *	* * *		<0.01	<0.01	<0.01		0	21/WK	GRAB
	PERMIT REQUIREMENT				REPORT	0.3 30 DA AVG	0.5 DAILY MX	MG/L		3/WEEK	GRAB
CHLORINE, TOTAL RESIDUAL, CWS 50060 T 0 0 CWS DISCHARGE	SAMPLE MEASUREMENT	* * *	* * *		N/A	N/A	N/A				GRAB
	PERMIT REQUIREMENT				REPORT	REPORT 30 DA AVG	0.2 DAILY MX	MG/1		3/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		6.90	* * *	7.20		0	2/W	GRAB
	PERMIT REQUIREMENT				6.0 MINIMUM		9.0 MAXIMUM	S.U.		WEEKLY	GRAB
PH 00400 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	* * *	* * *		6.80	* * *	7.00		*	2/WK	GRAB
	PERMIT REQUIREMENT				REPORT MINIMUM		REPORT MAXIMUM	S.U.		WEEKLY	GRAB
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*		GRAB
	PERMIT REQUIREMENT										GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
D. Mohler Radiation Protection/ Chemistry Manager	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 § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)	K. Miller	609 339-4399	89	06	22
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PSE&G - SALEM GENERATING STATION
ADDRESS PO BOX 236 / N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

NJ0005622 (2-16)	FAC A (17-19)
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved
OMB No. 2040-0004
Expires 3-31-88

THERMAL DISCHARGE FOR DSN 481 - 483
AND FACILITY HEAT RELEASE

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. C 00011 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	* * *	* * *		* * *	15.60	17.40		*	CONT	CONTIN UOUS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	DEG. C		CONTIN UOUS	CONTIN UOUS
TEMPERATURE, WATER DEG. C 00011 1 0 0 EFFLUENT GROSS - SUMMER	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A				CONTIN UOUS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	46.1 DAILY MX	DEG C		CONTIN UOUS	CONTIN UOUS
TEMPERATURE, WATER DEG. C 00011 1 0 0 EFFLUENT GROSS - WINTER	SAMPLE MEASUREMENT	* * *	* * *		* * *	19.70	23.20		0	CONT	CONTIN UOUS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	43.3 DAILY MX	DEG C		CONTIN UOUS	CONTIN UOUS
TEMPERATURE, WATER DEG. C 00011 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	3.80	5.00		0	CONT	CONTIN UOUS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	15.3 DAILY MX	DEG. C		CONTIN UOUS	CONTIN UOUS
THERMAL DISCHARGE MILLION BTUS PER HR 00015 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	12631.90	19349.00		* * *	* * *	* * *		0	CALC	CALC
	PERMIT REQUIREMENT	REPORT 30 DA AVG	30600 DAILY MX	MBTU/ HOUR						CALC	CALC
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*	*	*
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*	*	*
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
D. Mohler Radiation Protection/ Chemistry Manager 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 USC § 1001 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.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	609 AREA CODE	339-4399 NUMBER	89 YEAR	06 MO	22 DAY

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

THERMAL DISCHARGE 00015 IS COMBINED AVERAGE LOADING FOR DSN 481 THROUGH 486

SUMMER - JUNE 1 THROUGH SEPTEMBER 30; WINTER - OCTOBER 1 THROUGH MAY 31.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PSE&G - SALEM GENERATING STATION
ADDRESS PO BOX 236 / N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

NJ0005622 (2-16)	FAC B (17-19)
PERMIT NUMBER	DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004
Expires 3-31-88

THERMAL DISCHARGE FOR DSN 484 - 486

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89 (20-21)	05 (22-23)	01 (24-25)	TO	89 (26-27)	05 (28-29)	31 (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69 70)
TEMPERATURE, WATER DEG. C 00011 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	* * *	* * *		* * *	16.20	17.10		*	CONT	CONTINUOUS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	DEG C		CONTINUOUS	CONTINUOUS
TEMPERATURE, WATER DEG. C 00011 1 0 0 EFFLUENT GROSS - SUMMER	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A				CONTINUOUS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	46.1 DAILY MX	DEG C		CONTINUOUS	CONTINUOUS
TEMPERATURE, WATER DEG. C 00011 1 0 0 EFFLUENT GROSS - WINTER	SAMPLE MEASUREMENT	* * *	* * *		* * *	27.80	31.50		0	CONT	CONTINUOUS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	43.3 DAILY MX	DEG C		CONTINUOUS	CONTINUOUS
TEMPERATURE, WATER DEG. C 00011 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	11.60	15.30		0	CONT	CONTINUOUS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	15.3 DAILY MX	DEG. C		CONTINUOUS	CONTINUOUS
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*	*	*
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*	*	*
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*	*	*
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
D. Mohler
Radiation Protection/
Chemistry Manager
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 USC § 1001 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.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 609 | NUMBER 339-4399

DATE: YEAR 89 | MO 06 | DAY 22

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

SUMMER - JUNE 1 THROUGH SEPTEMBER 30; WINTER - OCTOBER 1 THROUGH MAY 31.

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

NAME: PSE&G- SALEM GENERATING STATION

ADDRESS: PO BOX 236 / N21
HANCOCKS BRIDGE, NJ 08038

FACILITY: SALEM GENERATING STATION

LOCATION: LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

Form Approved
OMB No 2040-0004
Expires 3-31-88

(2-16) PERMIT NUMBER: NJ0005622

(17-19) DISCHARGE NUMBER: 48C A

LOW VOLUME WASTE TREATMENT SYSTEM

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW, IN CONDUIT OR THROUGH TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.245	0.657	MGD	* * *	* * *	* * *		*	CONT	CONTINUOUS
	PERMIT REQUIREMENT	REPORT 30 DA AVG	REPORT DAILY MX							CONTINUOUS	CONTINUOUS
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		21.47	* * *	58.00		0	3/M	COMPOS
	PERMIT REQUIREMENT				30 30 DA AVG		100 DAILY MX	MG/L		TWICE/MONTH	COMPOS
HYDROCARBONS, IN H2O IR, CC14,EXT. CHROMAT 00551 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	<0.10	<0.10		0	2/M	GRAB
	PERMIT REQUIREMENT					10 30 DA AVG	15 DAILY MX	MG/l		TWICE/MONTH	GRAB
CHEM. OXYGEN DEMAND (HIGH LEVEL) (COD) 00340 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	16.50	23.00		0	2/M	COMPOS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	100 DAILY MX	MG/L		TWICE/MONTH	COMPOS
TOTAL ORGANIC CARBON 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	6.10	10.00		*	2/M	COMPOS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	(50)REPORT DAILY MX	MG/l		TWICE/MONTH	COMPOS
NITROGEN, AMMONIA TOTAL (AS NH4) 71845 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	7.75	15.00		0	2/M	GRAB
	PERMIT REQUIREMENT					35 30 DA AVG	70 DAILY MX	MG/L		TWICE/MONTH	GRAB
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*	*	*
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

D. Mohler
Radiation Protection/
Chemistry Manager

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 USC § 1001 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)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 609 | NUMBER 339-4399

DATE: YEAR 89 | MO 06 | DAY 22

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

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if different)*

NAME PSE&G- SALEM GENERATING STATION
ADDRESS PO BOX 236 / N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

(2-16) NJ0005622 PERMIT NUMBER

(17-19) 48C V DISCHARGE NUMBER

Form Approved
OMB No. 2040-0004
Expires 3-31-88

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	*(22-23)*	*(24-25)*		*(26-27)*	*(28-29)*	*(30-31)*

NOTE: Read instructions before completing this form.

PARAMETER *(32-37)*		*(3 Card Only)* QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	*(4 Card Only)* QUALITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
BIOASSAY,(96 HR)	SAMPLE MEASUREMENT	* * *	* * *		N/A	* * *	* * *				QTRLY
61402 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT				50 MONTH MN			PER CENT		QTRLY	QTRLY
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*	*	*
	PERMIT REQUIREMENT										
	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

D. Mohler
Radiation Production/
Chemistry Manager

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 USC § 1001 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.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
609	339-4399	89	06	22
AREA CODE	NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PSE&G- SALEM GENERATING STATION
ADDRESS PO BOX 236 / N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER	
NJ0005622	487 Y	NORTH STORM WATER DISCHARGE

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved
OMB No. 2040-0004
Expires 3-31-88

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW, IN CONDUIT OR THROUGH TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	N/A	N/A		* * *	* * *	* * *		*		CALCU-LATE
	PERMIT REQUIREMENT	REPORT 30 DA AVG	REPORT DAILY MX	MGD						ONCE/ YEAR	CALCU-L
SOLIDS, TOTAL SUSPENDED (TSS) 00530 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		COMPOS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	MG/L		ONCE/ YEAR	COMPOS
SOLIDS, TOTAL SUSPENDED (TSS) 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		COMPOS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	MG/L		ONCE/ YEAR	COMPOS
SOLID, TOTAL SUSPENDED (TSS) 00530 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A				CALC
	PERMIT REQUIREMENT					30 30 DA AVG	100 DAILY MX	MG/L		ONCE/ YEAR	CALC
HYDROCARBONS, IN H2O IR, CC14, EXT. CHROMAT 00551 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		GRAB
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	MG/L		ONCE/ YEAR	GRAB
HYDROCARBONS, IN H2O IR, CC14, EXT. CHROMAT 00551 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		GRAB
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	MG/L		ONCE/ YEAR	GRAB
HYDROCARBONS, IN H2O IR, CC14, EXT. CHROMAT 00551 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A				CALC
	PERMIT REQUIREMENT					30 30 DA AVG	100 DAILY MX	MG/L		ONCE/ YEAR	CALC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
D. Mohler Radiation Protection/ Chemistry Manager 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 USC § 1001 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)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE 609	NUMBER 339-4399	YEAR 89	MO 06	DAY 22

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

EPA Form 3320-1 (Rev. 10-79) PREVIOUS EDITION TO BE USED [illegible] FORM T-40 WHICH MAY NOT BE USED

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PSE&G- SALEM GENERATING STATION
ADDRESS PO BOX 236 / N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

(2-16) NJ0005622 — PERMIT NUMBER
(17-19) 487 Y — DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
89	05	01	89	05	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

Form Approved
OMB No. 2040-0004
Expires 3-31-88

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
CHEM. OXYGEN DEMAND (HIGH RANGE) (COD) 00340 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		COMPOS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	DAILY MX	MG/L		ONCE/ YEAR	COMPOS
CHEM. OXYGEN DEMAND (HIGH RANGE) (COD) 00340 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		COMPOS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	MG/L		ONCE/ YEAR	COMPOS
CHEM. OXYGEN DEMAND (HIGH RANGE) (COD) 00340 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A				CALC
	PERMIT REQUIREMENT					REPORT 30 DA AVG	100 DAILY MX	MG/L		ONCE/ YEAR	CALC
TOTAL ORGANIC CARBON (TOC) 7 0 0. INTAKE FROM STREAM	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		COMPOS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	MG/L		ONCE/ YEAR	COMPOS
TOTAL ORGANIC CARBON (TOC) 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		COMPOS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	MG/L		ONCE/ YEAR	COMPOS
TOTAL ORGANIC CARBON (TOC) 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A				CALC
	PERMIT REQUIREMENT					REPORT 90 DA AVG	50 DAILY MX	MG/L		ONCE/ YEAR	CALC
pH 0400 700 Effluent Gross Value	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*	*	*
	PERMIT REQUIREMENT				6.0 MINIMUM		9.0 MAXIMUM			ONCE/ YEAR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
D. Mohler
Radiation Protection/
Chemistry Manager
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 USC § 1001 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)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 609 | NUMBER 339-4399

DATE: YEAR 89 | MO 06 | DAY 22

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PSE&G- SALEM GENERATING STATION
ADDRESS PO BOX 236 / N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

Form Approved
OMB No. 2040-0004
Expires 3-31-88

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER	
NJ0005622	487B A	STORM WATER DISCHARGE

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW, IN CONDUIT OR THROUGH TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0019	0.0019	MGD	* * *	* * *	* * *		*	ONCE/MTH	CALCULATE *
	PERMIT REQUIREMENT	REPORT 30 DA AVG	REPORT DAILY MX							ONCE/MONTH	CALCU-LATE
HYDROCARBONS, IN H2O IR, CC14, EXT. CHROMAT 00551 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	0.39	0.39		0	1/M	GRAB
	PERMIT REQUIREMENT					10 30 DA AVG	15 DAILY MX	MG/L		ONCE/MONTH	GRAB
CHEM. OXYGEN DEMAND (HIGH LEVEL) (COD) 00340 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	<10.00	<10.00		0	1/M	GRAB
	PERMIT REQUIREMENT					REPORT 30 DA AVG	100 DAILY MX	MG/L		ONCE/MONTH	GRAB
TOTAL ORGANIC CARBON (TOC) EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	1.60	1.60		*	1/M	GRAB
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT (50) DAILY MX	MG/L		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED (TSS) 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	1.50	1.50		0	1/M	GRAB
	PERMIT REQUIREMENT					30 30 DA AVG	100 DAILY MX	MG/L		ONCE/MONTH	GRAB
pH 00400 7 0 0 Effluent Gross Value	SAMPLE MEASUREMENT	* * *	* * *		6.9		6.9		0	*	*
	PERMIT REQUIREMENT				6.0 MINIMUM		9.0 MAXIMUM			ONCE/MONTH	GRAB
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*	*	*
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
D. Mohler Radiation Protection/ Chemistry Manager	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 § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)	V. K. Mills SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	609 (AREA CODE)	339-4399 (NUMBER)	89 (YEAR)	06 (MO)	22 (DAY)
TYPED OR PRINTED						

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PSE&G- SALEM GENERATING STATION
ADDRESS PO BOX 236 / N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

Form Approved
OMB No. 2040-0004
Expires 3-31-88

(2-16) NJ0005622 — PERMIT NUMBER
(17-19) 489 Y — DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
CHEM. OXYGEN DEMAND (HIGH RANGE) (COD) 00340 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		COMPOS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	DAILY MX	MG/L		ONCE/ YEAR	COMPOS
CHEM. OXYGEN DEMAND (HIGH RANGE) (COD) 00340 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		COMPOS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	MG/L		ONCE/ YEAR	COMPOS
CHEM. OXYGEN DEMAND (HIGH RANGE) (COD) 00340 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A				CALC
	PERMIT REQUIREMENT					REPORT 30 DA AVG	100 DAILY MX	MG/L		ONCE/ YEAR	CALC
TOTAL ORGANIC CARBON (TOC) 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		COMPOS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	MG/L		ONCE/ YEAR	COMPOS
TOTAL ORGANIC CARBON (TOC) 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		COMPOS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	MG/L		ONCE/ YEAR	COMPOS
TOTAL ORGANIC CARBON (TOC) 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A				CALC
	PERMIT REQUIREMENT					REPORT 30 DA AVG	50 DAILY MX	MG/L		ONCE/ YEAR	CALC
pH 0400 7 0 0 Effluent Gross Value	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*	*	*
	PERMIT REQUIREMENT				6.0 MINIMUM		9.0 MAXIMUM			ONCE/ YEAR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
D. Mohler
Radiation Protection/
Chemistry Manager
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 USC § 1001 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.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 609 | NUMBER 339-4399

DATE: YEAR 89 | MO 06 | DAY 22

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PSE&G- SALEM GENERATING STATION
ADDRESS PO BOX 236 / N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

Form Approved
OMB No. 2040-0004
Expires 3-31-88

(2-16) NJ0005622 — PERMIT NUMBER
(17-19) 489 Y — DISCHARGE NUMBER
SOUTH STORM WATER DISCHARGE

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW, IN CONDUIT OR THROUGH TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	N/A	N/A		* * *	* * *	* * *		*		CALCU-LATE
	PERMIT REQUIREMENT	REPORT 30 DA AVG	REPORT DAILY MX	MGD						ONCE/ YEAR	CALCU-LA
SOLIDS, TOTAL SUSPENDED (TSS) 00530 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		COMPOS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	MG/L		ONCE/ YEAR	COMPOS
SOLIDS, TOTAL SUSPENDED (TSS) 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		COMPOS
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	MG/L		ONCE/ YEAR	COMPOS
SOLID, TOTAL SUSPENDED (TSS) 00530 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A				CALC
	PERMIT REQUIREMENT					30 30 DA AVG	100 DAILY MX	MG/L		ONCE/ YEAR	CALC
HYDROCARBONS, IN H2O IR, CC14, EXT. CHROMAT 00551 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		GRAB
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	MG/L		ONCE/ YEAR	GRAB
HYDROCARBONS, IN H2O IR, CC14, EXT. CHROMAT 00551 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A		*		GRAB
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT DAILY MX	MG/L		ONCE/ YEAR	GRAB
HYDROCARBONS, IN H2O IR, CC14, EXT. CHROMAT 00551 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	N/A	N/A				CALC
	PERMIT REQUIREMENT					30 30 DA AVG	100 DAILY MX	MG/L		ONCE/ YEAR	CALC

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
D. Mohler Radiation Protection/ Chemistry Manager	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 § 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	609 (AREA CODE)	339-4399 (NUMBER)	89 (YEAR)	06 (MO)	22 (DAY)
TYPED OR PRINTED							

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME PSE&G- SALEM GENERATING STATION
ADDRESS PO BOX 236 / N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

Form Approved
OMB No. 2040-0004
Expires 3-31-88

(2-16) NJ0005622 — PERMIT NUMBER
(17-19) 489 A A — DISCHARGE NUMBER
STORM WATER DISCHARGE

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW, IN CONDUIT OR THROUGH TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0029	0.0029	MGD	* * *	* * *	* * *		*	ONCE/ MONTH	CALCU-LATE
	PERMIT REQUIREMENT	REPORT 30 DA AVG	REPORT DAILY MX							ONCE/ MONTH	CALCU-L
HYDROCARBONS, IN H2O IR, CC14, EXT. CHROMAT 00551 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	0.41	0.41		0	1/MTH	GRAB
	PERMIT REQUIREMENT					10 30 DA AVG	15 DAILY MX	MG/L		ONCE/ MONTH	GRAB
CHEM. OXYGEN DEMAND (HIGH LEVEL) (COD) 00340 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	27.00	27.00		0	1/MTH	GRAB
	PERMIT REQUIREMENT					REPORT 30 DA AVG	100 DAILY MX	MG/L		ONCE/ MONTH	GRAB
TOTAL ORGANIC CARBON (TOC) EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	3.40	3.40		*	1/MTH	GRAB
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT (50) DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED (TSS) 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	4.60	4.60		0	1/MTH	GRAB
	PERMIT REQUIREMENT					30 30 DA AVG	100 DAILY MX	MG/L		ONCE/ MONTH	GRAB
pH 00400 7 0 0 Effluent Gross Value	SAMPLE MEASUREMENT	* * *	* * *		6.80		6.80		0	1/MTH	*
	PERMIT REQUIREMENT				6.0 MINIMUM		9.0 MAXIMUM			ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*	*	*
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
D. Mohler
Radiation Protection/
Chemistry Manager
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 USC § 1001 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.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 609 | NUMBER 339-4399

DATE: YEAR 89 | MO 06 | DAY 22

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

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

NAME PSE&G- SALEM GENERATING STATION

ADDRESS PO BOX 236 / N21
HANCOCKS BRIDGE, NJ 08038

FACILITY SALEM GENERATING STATION

LOCATION LOWER ALLOWAYS CREEK
ATTN: MANAGER - LICENSING AND REGULATION

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

Form Approved
OMB No. 2040-0004
Expires 3-31-88

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER	
NJ0005622	489 B A	STORM WATER DISCHARGE

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
FLOW, IN CONDUIT OR THROUGH TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0030	0.0030	MGD	* * *	* * *	* * *		*	ONCE/ MONTH	CALCU-LATE
	PERMIT REQUIREMENT	REPORT 30 DA AVG	REPORT DAILY MX							ONCE/ MONTH	CALCU-L
HYDROCARBONS, IN H20 IR, CC14, EXT. CHROMAT 00551 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	0.20	0.20		0	1/MTH	GRAB
	PERMIT REQUIREMENT					10 30 DA AVG	15 DAILY MX	MG/L		ONCE/ MONTH	GRAB
CHEM. OXYGEN DEMAND (HIGH LEVEL) (COD) 00340 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	<10.00	<10.00		0	1/MTH	GRAB
	PERMIT REQUIREMENT					REPORT 30 DA AVG	100 DAILY MX	MG/L		ONCE/ MONTH	GRAB
TOTAL ORGANIC CARBON (TOC) EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	3.10	3.10		*	1/MTH	GRAB
	PERMIT REQUIREMENT					REPORT 30 DA AVG	REPORT (50) DAILY MX	MG/L		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED (TSS) 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	* * *	* * *		* * *	7.40	7.40		0	1/MTH	GRAB
	PERMIT REQUIREMENT					30 30 DA AVG	100 DAILY MX	MG/L		ONCE/ MONTH	GRAB
pH 00400 7 0 0 Effluent Gross Value	SAMPLE MEASUREMENT	* * *	* * *		7.10	* * *	7.10		0	1/MTH	*
	PERMIT REQUIREMENT				6.0 MINIMUM		9.0 MAXIMUM			ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT	* * *	* * *		* * *	* * *	* * *		*	*	*
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
D. Mohler
Radiation Protection/
Chemistry Manager
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 USC § 1001 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.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
609	339-4399	89	06	22
AREA CODE	NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)

NAME PSE&G-SALEM GENERATING STATION

ADDRESS 80 PARK PLAZA

NEWARK NJ 07101

FACILITY PSE&G - SALEM GENERATING STN

LOCATION Hancocks Bridge, NJ 08038

ATTN: GEN MGR-ENV AFF

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (*NPDES*)

DISCHARGE MONITORING REPORT (*DMR*)

Form Approved
OMB No. 2040-0004
Approval expires 12-31-87

(2-16) NJ0005622 PERMIT NUMBER

(17-19) 87A A DISCHARGE NUMBER

F - FINAL

SEWAGE TREATMENT DSN487A

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	89	05	01	TO	89	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MAJOR (SUBR S) SALEM

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT				******	******	******				
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.97 30DA AVG	REPORT DAILY MX	KG/ DAY	******	******	******	**** ****		ONCE/ MONTH	GRAB
PH	SAMPLE MEASUREMENT	******	******			******					
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	6 MINIMUM	******	9 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	N/A	N/A								
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DA AV	REPORT DLY MAX	KG/ DAY	30 30 DA AV	45 07 DA AV	100 DLY MAX	MG/L		ONCE/ MONTH	COMPOS
OIL AND GREASE FREON EXTR-GRAV METH	SAMPLE MEASUREMENT	N/A	N/A		******						
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	KG/ DAY	******	REPORT 30DA AVG	10 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT				******	******	******				
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.2 30DA AVG	REPORT DAILY MX	MGD	******	******	******	**** ****		DAILY	GRAB
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	******	******		******						
74055 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	200 30DA GEO	400 7DA GEO	#/ 100ML		ONCE/ MONTH	GRAB
BOD, 5-DAY PERCENT REMOVAL	SAMPLE MEASUREMENT	******	******			******	******				
81010 K 0 0 PERCENTREMOVAL	PERMIT REQUIREMENT	******	******	**** ****	87.5 MONTH MN	******	******	PER-CENT		ONCE/ MONTH	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

D. Mohler
Radiation Protection/
Chemistry Manager

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 USC § 1001 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*)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 609 | NUMBER 339-4399

DATE: YEAR 89 | MO 06 | DAY 22

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

SEWAGE TREATMENT PLANT WASTE WATER - DSN487A

The sewage treatment plant has been taken out of service and will not be returned to service.