PSE&G

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

Salem Generating Station

July 12, 1990
(Our Ref.: RPC90-160)

George Caporale - Chief
Bureau of Permits Administration
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 June, 1990.

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, not is it an endorsement of the suitability of any analytical or measurement procedures.

Exclusion explanations are included on additional pages.

Very truly yours,

L.K. Miller
General Manager
Salem Operations

DH:jr
Attachments

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

9007310015 900630
PDR ADOCK 05000272
R PDC

IE25
1/1

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 of permit occurred during the report period."

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 three times 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, TRC and Bioassay are provided by Net Mid-Atlantic Laboratories (NJDEP Certification 08153). Bioassay results are provided by Princeton Testing Laboratories Inc. (NJDEP Certification 11118). Net negative discharge values are reported as negative.

487, 487B-Flow calculated as per permit based on Wilmington NWS
489, 489A Data
489B

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.

48C - Non-Radioactive Liquid Waste - This system continues to be operated in a batch mode to treat for hydrazine which was detected in the system. No hydrazine has been discharged from this outfall during the reporting period. This was orally communicated to the NJDEP and a written explanation is in preparation. The 24 hour composite is representative of the discharge period.

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 1 0 0 1 5 1 6 2 1 2	0 1 6 9 1 0	THRU	0 1 6 9 1 0

PERMITTEE:
Name: Public Service Electric & Gas Co.
Address: P.O. 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
☒ 17 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)* Robert J. Dolan
Grade & Registry No. NN, S4412, S3, S5241
Signature Robert J. Dolan
Date 16 July 90

PRINCIPAL EXECUTIVE OFFICER or DULY AUTHORIZED REPRESENTATIVE
Name *(Printed)* L. K. Miller
Title *(Printed)* GM Salem Operations
Signature L. K. Miller
Date 7/12/90

OPERATING EXCEPTIONS DETAILED

HOURS ATTENDED AT PLANT

Month 06 Year 10

Day of Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Licensed Operator	8			8	8	8	8	8			8	8	8	8	8	
Others	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	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
ADDRESS P.O. BOX 236/N21
HANCOCKS BRIDGE NJ 08038

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

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

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

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	30
	(20-21)	*(22-23)*	*(24-25)*		*(26-27)*	*(28-29)*	*(30-31)*

F - FINAL
NON-CONTACT COOLING WATER

MAJOR (SUBR S) SALEM

NOTE: Read instructions before completing this form.

Form Approved
OMB No. 2040-0086
Approval expires 6-

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)*	SAMPL TYPE *(69 70)*
PH	SAMPLE MEASUREMENT	******	******		6.65	******	7.43		0	1/wk	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	6 MINIMUM	******	9 MAXIMUM	SU		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	******	******		6.85	******	7.33		*	1/wk	Grab
00400 7 0 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	426.60	532.80		******	******	******		*	Cont	
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTIN UOUS	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******		NODI	NODI	NODI				
50060 R 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	REPORT	0.3 30DA AVG	0.5 DAILY MX	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******		<0.01	<0.01	<0.01		0	5/wk	Grab
50060 S 0 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	0.2 DAILY MX	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******		NODI	NODI	NODI				
50060 T 0 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	0.2 DAILY MX	MG/L		THREE/ WEEK	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
L.K. Miller General Manager-Salem	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.)*	L.K. Miller	609	935-6000	90	07	12
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)*

PARAMETER 50060 LOCATIONS: "R" = SWS DSCHG (NO CWS FLOW) MSM

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

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

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

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

MONITORING PERIOD

	YEAR *(20-21)*	MO *(22-23)*	DAY *(24 25)*	TO	YEAR *(26-27)*	MO *(28-29)*	DAY *(30-31)*
FROM	90	06	01	TO	90	06	30

F - FINAL
NON-CONTACT COOLING WATER
MAJOR (SUBR S) SALEM
NOTE: Read instructions before completing this form.

Form Approved
OMB No. 2040-0004
Approval expires 6-30-9

PARAMETER *(32-37)*		QUANTITY OR LOADING *(3 Card Only) (46-53)* AVERAGE	QUANTITY OR LOADING *(54-61)* MAXIMUM	UNITS	QUALITY OR CONCENTRATION *(4 Card Only) (38-45)* MINIMUM	QUALITY OR CONCENTRATION *(46-53)* AVERAGE	QUALITY OR CONCENTRATION *(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69 70)*
PH	SAMPLE MEASUREMENT	******	******		6.77	******	7.53		0	1/wk	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	6 MINIMUM	******	9 MAXIMUM	SU		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	******	******		6.85	******	7.33		*	1/wk	Grab
00400 7 0 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	469.50	532.80		******	******	******		*	Cont	
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTIN UOUS	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******		NODI	NODI	NODI				
50060 R 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	REPORT	0.3 30DA AVG	0.5 DAILY MX	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******		<0.01	<0.01	0.07		0	5/wk	Grab
50060 S 0 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	0.2 DAILY MX	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******		NODI	NODI	NODI				
50060 T 0 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	0.2 DAILY MX	MG/L		THREE/ WEEK	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
L.K. Miller General Manager-Salem	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.)*	L.K. Miller	609	935-6000	90	07	12
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)*

PARAMETER 50060 LOCATIONS: "R" = SWS DSCHG (NO CWS FLOW) "S" = SWS DSCHG (NORMAL COND) "T" = CWS DSCHG
ENTER "NODI" FOR LOCATIONS THAT DO NOT APPLY

ADDRESS P.O. BOX 236/N21
HANCOCKS BRIDGE NJ 08038

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

NJ0005622 — PERMIT NUMBER
483 A — DISCHARGE NUMBER

NON-CONTACT COOLING WATER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	30
	(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)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******		6.55	******	7.81		0	1/wk	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	6 MINIMUM	******	9 MAXIMUM	SU		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	******	******		6.85	******	7.33		*	1/wk	Grab
00400 7 0 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	358.90	532.80		******	******	******		**	Cont	
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTIN UOUS	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******		<0.01	<0.01	<0.01		0	5/wk	Grab
50060 R 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	REPORT	0.3 30DA AVG	0.5 DAILY MX	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******		<0.01	<0.01	<0.01		0	5/wk	Grab
50060 S 0 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	0.2 DAILY MX	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******		NODI	NODI	NODI				
50060 T 0 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	0.2 DAILY MX	MG/L		THREE/ WEEK	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
L.K. Miller General Manager-Salem	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.)*	L.K. Miller SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	609 AREA CODE	935-6000 NUMBER	90 YEAR	07 MO	12 DAY
TYPED OR PRINTED						

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

PARAMETER 50060 LOCATIONS: "R" = SWS DSCHG (NO CWS FLOW) "S" = SWS DSCHG (NORMAL COND) "T" = CWS DSCHG
ENTER "NODI" FOR LOCATIONS THAT DO NOT APPLY.
~~WHEN MAIN CONDENSERS ARE CHLORINATED, MONITOR TRC 3 TIMES PER WEEK DURING 2-HR PERIODS OF CHLORINATION.~~

PARAMETER 50060 LOCATIONS: "R" = SWS DSCHG (NO CWS FLOW) "S" = SWS DSCHG (NORMAL COND) "T" = CWS DSCHG
ENTER "NODI" FOR LOCATIONS THAT DO NOT APPLY.

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

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

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

NJ0005622	485 A
PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

F - FINAL
NON-CONTACT COOLING WATER

Form Approved.
OMB No. 2040-0004
Approval Expires 6-30-

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)
PH	SAMPLE MEASUREMENT	******	******			******					
					7.00		7.41		0	1/wk	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	6 MINIMUM	******	9 MAXIMUM	SU		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	******	******			******					
					6.85		7.33		*	1/wk	Grab
00400 7 0 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	239.70	310.80		******	******	******		*	Cont	
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******								
					<0.01	<0.01	0.08		0	5/wk	Grab
50060 R 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	REPORT	0.3 30DA AVG	0.5 DAILY MX	MG/L		THREE/WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******								
					<0.01	<0.01	<0.01				
50060 S 0 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	0.2 DAILY MX	MG/L		THREE/WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******								
					NODI	NODI	NODI				
50060 T 0 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	0.2 DAILY MX	MG/L		THREE/WEEK	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
L.K. Miller General Manager-Salem	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.)*	L.K. Miller SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	609 (AREA CODE)	935-6000 (NUMBER)	90 (YEAR)	07 (MO)	12 (DAY)
TYPED OR PRINTED							

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

PARAMETER 50060 LOCATIONS: "R" = SWS DSCHG (NO CWS FLOW) "S" = SWS DSCHG (NORMAL COND) "T" = CWS DSCHG

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

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

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

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

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

F - FINAL
NON-CONTACT COOLING WATER

MAJOR (SUBR S) SALEM

NOTE: Read instructions before completing this form.

Form Approved
OMB No. 2040-0004
Approval expires 6-30

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)
PH	SAMPLE MEASUREMENT	******	******			******					
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	6 MINIMUM	******	9 MAXIMUM	SU		WEEKLY	GRAB
	SAMPLE MEASUREMENT	6.98	7.40						0	1/wk	Grab
PH	SAMPLE MEASUREMENT	******	******			******					
00400 7 0 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		WEEKLY	GRAB
	SAMPLE MEASUREMENT	6.85	7.33						*	1/wk	Grab
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT				******	******	******				
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	******	**** ****		CONTINUOUS	
	SAMPLE MEASUREMENT	185.40	532.80						*	Cont	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******			******					
50060 R 0 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	REPORT	0.3 30DA AVG	0.5 DAILY MX	MG/L		THREE/WEEK	GRAB
	SAMPLE MEASUREMENT	******	******		<0.01	<0.01	.0.06		0	5/wk	Grab
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******			******					
50060 S 0 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	0.2 DAILY MX	MG/L		THREE/WEEK	GRAB
	SAMPLE MEASUREMENT	******	******		<0.01	<0.01	<0.01		0	5/wk	Grab
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	******	******			******					
50060 T 0 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	0.2 DAILY MX	MG/L		THREE/WEEK	GRAB
	SAMPLE MEASUREMENT	NODI	NODI		NODI						
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
L.K. Miller General Manager-Salem	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	609 (AREA CODE)	935-6000 (NUMBER)	90 (YEAR)	07 (MO)	12 (DAY)
TYPED OR PRINTED							

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

PARAMETER 50060 LOCATIONS: "R" = SWS DSCHG (NO CWS FLOW) "S" = SWS DSCHG (NORMAL COND) "T" = CWS DSCHG
ENTER "NODI" FOR LOCATIONS THAT DO NOT APPLY

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

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

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

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

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

F - FINAL
THERMAL DSCHG FOR DSN 481-483

Form Approved
OMB No. 2040-0004
Approval expires 6-30-

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)
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 S 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		18.00	30.20	36.80		0	Cont	
	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	46.1 DAILY MX	DEG.C		CONTIN UOUS	
TEMPERATURE, WATER DEG. CENTIGRADE 00010 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	******	******		0.20	7.80	12.10		0	Cont	
	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	15.3 DAILY MX	DEG.C		CONTIN UOUS	
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	******	******		21.30	22.00	23.00		*	Cont	
	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	REPORT DAILY MX	DEG.C		CONTIN UOUS	
Temperature, Water Deg.Fahrenheit 00011 1 W 0 Effluent Gross Value	SAMPLE MEASUREMENT	*******	*******		*******	86.30	98.20		0	Cont	Cont
	PERMIT REQUIREMENT	*******	*******	****	*******	Report	110	Deg.F		Cont	Cont
	SAMPLE MEASUREMENT					30 Da Avg	Daily MX				
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
L.K. Miller General Manager-Salem	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.)*	L.K. Miller SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	609 AREA CODE	935-6000 NUMBER	90 YEAR	07 MO	12 DAY
TYPED OR PRINTED							

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

EFFLUENT TEMP IS TO BE CALCULATED AS THE COMBINED AVERAGE OF EACH OF THE SEPARATE DISCHARGES 481-483.
NET TEMP DIF IS THE DIFFERENCE BETWEEN THE AMBIENT RIVER WATER TEMP AND THE AVG EFFLUENT TEMP OF

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

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

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

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

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

F - FINAL
THERMAL DSCHG FOR DSN 484-486

Form Approved.
OMB No. 2040-0004
Approval expires 6-30-9

MAJOR (SUBR S) SALEM

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. CENTIGRADE 00010 1 S 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		20.10	24.90	31.40		0	COnt	
	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	46.1 DAILY MX	DEG.C		CONTIN UOUS	
TEMPERATURE, WATER DEG. CENTIGRADE 00010 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	******	******		0.50	3.00	7.00		0	Cont	
	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	15.3 DAILY MX	DEG.C		CONTIN UOUS	
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	******	******		21.30	21.90	22.80		*	Cont	
	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	REPORT DAILY MX	DEG.C		CONTIN UOUS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
L.K. Miller General Manager-Salem	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.)*	L.K. Miller SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	609 (AREA CODE)	935-6000 (NUMBER)	90 (YEAR)	07 (MO)	12 (DAY)
TYPED OR PRINTED							

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

EFFLUENT TEMP IS TO BE CALCULATED AS THE COMBINED AVERAGE OF EACH OF THE SEPARATE DISCHARGES 484-486.
NET TEMP DIF IS THE DIFFERENCE

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

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

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

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

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	30
	(20-21)	(22-23)	(24-25)		(26 27)	(28-29)	(30-31)

F - FINAL
THERMAL DSCHG FOR DSN 481-486

MAJOR (SUBR S) SALEM

NOTE: Read instructions before completing this form.

Form Approved.
OMB No. 2040-0004
Approval expires 6-30

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
THERMAL DISCHARGE MILLION BTUS PER HR. 00015 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	8090.70	19,229.00		******	******	******		0	Cont	Calc
	PERMIT REQUIREMENT	REPORT 30DA AVG	30600 MBTU/ DAILY MX	HR	******	******	******	**** ****		CONTINUOUS	
	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
L.K. Miller
General Manager-Salem
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.)*

L.K. Miller
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
609	935-6000	90	07	12
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
ADDRESS P.O. BOX 236/N21
HANCOCKS BRIDGE NJ 08038

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

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

(2-16)	(17-19)
NJ0005622	48C A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

F - FINAL
NON-RADIOLOGICAL WASTE TREAT.

MAJOR (SUBR S) SALEM

NOTE: Read instructions before completing this form.

Form Approved
OMB No. 2040-0004
Approval expires 6-30-8

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD)	SAMPLE MEASUREMENT	******	******		******	11.50	13.00		0	2/mth	Comp
00340 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	100 DAILY MX	MG/L		TWICE/ MONTH	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	13.62	35.00		0	2/mth	Comp
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	30 30DA AVG	100 DAILY MX	MG/L		TWICE/ MONTH	
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT	SAMPLE MEASUREMENT	******	******		******	0.14	0.18		0	2/mth	Grab
00551 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	10 30DA AVG	15 DAILY MX	MG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.2472	0.4913		******	******	******		*	Cont	
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTIN UOUS	
BIOASSAY (96 HR.)	SAMPLE MEASUREMENT	******	******		>100.00	******	******		0	Qtrly	
61402 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	50 MINIMUM	******	******	PER-CENT		QTRLY	
NITROGEN, AMMONIA TOTAL (AS NH4)	SAMPLE MEASUREMENT	******	******		******	3.70	4.90		0	2/mth	Grab
71845 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	35 30DA AVG	70 DAILY MX	MG/L		TWICE/ MONTH	GRAB
Total Organic Carbon (TOC) Effluent Gross Value	SAMPLE MEASUREMENT	*******	*******		*******	5.35	9.15		*	2/mth	Comp
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
L.K. Miller General Manager-Salem	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.)*	L.K. Miller	609	935-6000	90	07	12
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)*

PARAMETER 00400 (PH) "0" IS FOR REPORTING PH AFTER MIXING WITH CIRCULATING WATER
SINCE ONLY QUARTERLY REPORTING IS REQUIRED FOR PARAMETER

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

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

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

(2-16)	(17-19)
NJ0005622	89A A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

F - FINAL
#1 SKIM TANK-DSN489A IN PERMIT
MAJOR (SUBR S) SALEM
NOTE: Read instructions before completing this form.

Form Approved
OMB No. 2040-0004
Approval expires 6-30

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)
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD)	SAMPLE MEASUREMENT	******	******		******	34.00	34.00		0	1/mth	Grab
00340 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	100 DAILY MX	MG/L		ONCE/ MONTH	GRAB
PH	SAMPLE MEASUREMENT	******	******			******	7.38		0	1/mth	Grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	6.0 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	5.30	5.30		0	1/mth	Grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	30 30DA AVG	100 DAILY MX	MG/L		ONCE/ MONTH	GRAB
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT	SAMPLE MEASUREMENT	******	******		******	0.43	0.43		0	1/mth	Grab
00551 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	10 30DA AVG	15 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0028	0.0028		******	******	******		*	1/mth	Calc
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	******	******	******	**** ****		ONCE/ MONTH	CALCTI
Total Organic Carbon (TOC) Effluent Gross Value	SAMPLE MEASUREMENT	*******	*******		*******	2.3	2.3		*	1/mth	Grab
	PERMIT REQUIREMENT	*******	*******		*******	Report 30 Day Avg.	Report (50) Daily MX			Once Month	Grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
L.K. Miller General Managaer-Salem	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.)*	L.K. Miller SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	609 AREA CODE	935-6000 NUMBER	90 YEAR	07 MO	12 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
ADDRESS P.O. BOX 236/N21
HANCOCKS BRIDGE NJ 08038

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

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

NJ0005622 (2-16)	89B A (17-19)
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

F - FINAL
#2 SKIN TANK-DSN489B IN PERMIT
MAJOR (SUBX S) SALEM
NOTE: Read instructions before completing this form.

Form Approved
OMB No. 2040-0004
Approval expires 6-30-

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	51.00	51.00		0	1/mth	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	100 DAILY MX	MG/L		ONCE/ MONTH	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		7.49	******	7.49		0	1/mth	Grab
	PERMIT REQUIREMENT	******	******	**** ****	6.0 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	2.60	2.60		0	1/mth	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	30 30DA AVG	100 DAILY MX	MG/L		ONCE/ MONTH	GRAB
HYDROCARBONS,IN H2O, IR,CC14 EXT. CHROMAT 00551 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	2.10	2.10		0	1/mth	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	10 30DA AVG	15 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0028	0.0028		******	******	******		*	1/mth	Calc
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	******	******	******	**** ****		ONCE/ MONTH	CONTD
Total Organic Carbon (TOC) Effluent Gross Value	SAMPLE MEASUREMENT	*******	*******		*******	7.50	7.50		0	1/mth	Grab
	PERMIT REQUIREMENT	*******	*******		*******	Report 30 Day Avg.	Report (50) Daily MAX	MG/L		1/mth	Grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
L.K. Miller General Manager-Salem	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	609 AREA CODE	935-6000 NUMBER	90 YEAR	07 MO	12 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
ADDRESS P.O. BOX 236/N21
HANCOCKS BRIDGE NJ 08038

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

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

NJ0005622	37B A
PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

F - FINAL
#3 SKIM TANK-DSN487B IN PERMIT

Form Approved
OMB No. 2040-0004
Approval expires 6-30-

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)
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		37.00	37.00	37.00		0	1/mth	Grab
	PERMIT REQUIREMENT	******	******	**** ****	REPORT	REPORT 30DA AVG	43.3 DAILY MX	DEG.C		ONCE/ MONTH	
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	13.00	13.00		0	1/mth	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	100 DAILY MX	MG/L		ONCE/ MONTH	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		7.97	******	7.97		0	1/mth	Grab
	PERMIT REQUIREMENT	******	******	**** ****	6.0 MINIMUM	******	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	1.70	1.70		0	1/mth	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	30 30DA AVG	100 DAILY MX	MG/L		ONCE/ MONTH	GRAB
HYDROCARBONS,IN H2O, IR,CC14 EXT. CHROMAT 00551 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	0.68	0.68		0	1/mth	Grab
	PERMIT REQUIREMENT	******	******	**** ****	******	10 30DA AVG	15 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0019	0.0019		******	******	******		*	1/mth	Calc
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	******	******	******	**** ****		ONCE/ MONTH	CALCTD
Total Organic Carbon (TOC) Effluent Gross Value	SAMPLE MEASUREMENT	*******	*******		*******	<1.0	<0.10		0	1/mth	Grab
	PERMIT REQUIREMENT	*******	*******		*******	Report 30 Day Avg.	Report (50) Daily MX	MG/L		1/mth	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
L.K. Miller General Manager-Salem	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	609 (AREA CODE)	935-6000 (NUMBER)	90 (YEAR)	07 (MO)	12 (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
ADDRESS P.O. BOX 236/N21
HANCOCKS BRIDGE NJ 08038

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

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

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

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

F - FINAL
STORM H2O DSCHG. DSN487

MAJOR (SUBR S) SALEM

NOTE: Read instructions before completing this form.

Form Approved
OMB No. 2040-0004
Approval expires 6-30-

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)
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD)	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
00340 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	REPORT DAILY MX	MG/L		ANNUAL	GRAB
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD)	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
00340 2 0 0 EFFLUENT NET VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	100 DAILY MX	MG/L		ANNUAL	CALCTD
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD)	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
00340 7 0 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	REPORT DAILY MX	MG/L		ANNUAL	COMPOS
PH	SAMPLE MEASUREMENT	******	******		NODI	******	NODI				
00400 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	6.0 MINIMUM	******	9.0 MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
00530 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	REPORT DAILY MX	MG/L		ANNUAL	COMPOS
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
00530 2 0 0 EFFLUENT NET VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	30 30DA AVG	100 DAILY MX	MG/L		ANNUAL	CALCTD
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
00530 7 0 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	REPORT DAILY MX	MG/L		ANNUAL	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
L.K. Miller General Manager-Salem	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.)*	L.K. Miller	609	935-6000	90	07	12
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
ADDRESS P.O. BOX 236/N21
HANCOCKS BRIDGE NJ 08038

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

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

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

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30 31)

F - FINAL
STORM H20 DSCHG. DSN487

Form Approved
OMB No. 2040-0004
Approval expires 6-30

MAJOR (SUBR 5) 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)
HYDROCARBONS,IN H20, IR,CC14 EXT. CHROMAT 00551 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	REPORT DAILY MX	MG/L		ANNUAL	GRAB
HYDROCARBONS,IN H20, IR,CC14 EXT. CHROMAT 00551 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
	PERMIT REQUIREMENT	******	******	**** ****	******	10 30DA AVG	15 DAILY MX	MG/L		ANNUAL	CALCTD
HYDROCARBONS,IN H20, IR,CC14 EXT. CHROMAT 00551 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	REPORT DAILY MX	MG/L		ANNUAL	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	NODI	NODI		******	******	******				
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	******	******	******	**** ****		ANNUAL	CALCTD
Total Organic Carbon (TOC) Intake From Stream	SAMPLE MEASUREMENT	*******	*******		*******	NODI	NODI				
	PERMIT REQUIREMENT	*******	*******		*******	Report 30 Day Avg.	Report Daily MX	MG/L			
Total Organic Carbon (TOC) Effluent Gross Value	SAMPLE MEASUREMENT	*******	*******		*******	NODI	NODI				
	PERMIT REQUIREMENT	*******	*******		*******	Report 30 Day Avg.	Report Daily MAX	MG/L			
Total Organic Carbon (TOC) Effluent Net Value	SAMPLE MEASUREMENT	*******	*******		*******	NODI	NODI				
	PERMIT REQUIREMENT	*******	*******		*******	Report 30 Day Avg.	Report (50) Daily MX	MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
L.K. Miller General Manager-Salem	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.)*	L.K. Miller SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	609 AREA CODE	935-6000 NUMBER	90 YEAR	07 MO	12 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
ADDRESS P.O. BOX 236/N21
HANCOCKS BRIDGE NJ 08038

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

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

Form Approved*
OMB No. 2040-0004
Approval expires 6-30-8

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

F - FINAL
STORMWATER

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	90	06	01	TO	90	06	30

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)
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD)	SAMPLE MEASUREMENT	**	**		******	**	**			**	**
00340 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT KG/ DAILY MX DAY		******	REPORT 30DA AVG	100 DAILY MX	MG/L		ONCE/ MONTH	GRAB
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD)	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
00340 2 0 0 EFFLUENT NET VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	100 DAILY MX	MG/L		ANNUAL	CALCTD
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD)	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
00340 7 0 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	REPORT DAILY MX	MG/L		ANNUAL	COMPOS
PH	SAMPLE MEASUREMENT	******	******		NODI	******	NODI				
00400 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	6.0 MINIMUM	******	9.0 MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
00530 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	REPORT DAILY MX	MG/L		ANNUAL	COMPOS
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
00530 2 0 0 EFFLUENT NET VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	30 30DA AVG	100 DAILY MX	MG/L		ANNUAL	CALCTD
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
00530 7 0 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	REPORT DAILY MX	MG/L		ANNUAL	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

L.K. Miller
General Manager-Salem

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: AREA CODE 609 | NUMBER 935-6000

DATE: YEAR 90 | MO 07 | DAY 12

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

*Preprinted form is incorrect. This is also an annual requirement.

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

FACILITY PSE&G SALEM GENERATING STATION
LOCATION HANCOCKS BRIDGE NJ 08038
ATTN: MANAGER LICENSING & REGULATION

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

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

F - FINAL
STORMWATER

Form Approved
OMB No. 2040-0004
Approval expires 6-30-8

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	90	06	01	TO	90	06	30
	(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) (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)
HYDROCARBONS,IN H2O, IR,CC14 EXT. CHROMAT 00551 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	**	***		******	**	**		*	*	*
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	KG/ DAY	******	10 30DA AVG	15 DAILY MX	MG/L		ONCE/ MONTH	G-3
HYDROCARBONS,IN H2O, IR,CC14 EXT. CHROMAT 00551 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
	PERMIT REQUIREMENT	******	******	**** ****	******	10 30DA AVG	15 DAILY MX	MG/L		ANNUAL	CALCTI
HYDROCARBONS,IN H2O, IR,CC14 EXT. CHROMAT 00551 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	******	******		******	NODI	NODI				
	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT 30DA AVG	REPORT DAILY MX	MG/L		ANNUAL	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	NODI	NODI		******	******	******				
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	******	******	******	**** ****		ANNUAL	CALCTI
Total Organic Carbon (TOC) Intake From Stream	SAMPLE MEASUREMENT	*******	*******		*******	NODI	NODI				
	PERMIT REQUIREMENT	*******	*******		*******	Report 30 Day Avg.	Report Daily MX	MG/L		Annual	Comp
Total Organic Carbon (TOC) Effluent Gross Value	SAMPLE MEASUREMENT	*******	*******		*******	NODI	NODI				
	PERMIT REQUIREMENT	*******	*******		*******	Report 30 Day Avg.	Report Daily MX	MG/L		Annual	Comp
Total Organic Carbon (TOC) Effluent NET Value	SAMPLE MEASUREMENT	*******	*******		*******	NODI	NODI				
	PERMIT REQUIREMENT	*******	*******		*******	Report 30 Day Avg.	REPORT Daily MX			Annual	Calc

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
L.K. Miller General Manager-Salem	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.)*	L.K. Miller SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	609 (AREA CODE)	935-6000 (NUMBER)	90 (YEAR)	07 (MO)	12 (DAY)
TYPED OR PRINTED						

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

Preprinted form is incorrect. This is also an annual requirement