



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

September 24, 1992

Chief George Caporale  
Bureau of Information Systems  
CN-029  
Trenton, NJ 08625

**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 August 1992.

This report is required by and prepared specifically for the Environmental Protection Agency (EPA) and the New Jersey Department of Environmental Protection and Energy (NJDEPE). It presents only the observed results of measurements and analyses required to be performed by the above agencies. The choice of the measurement devices and analytical methods is controlled by EPA and NJDEPE, not by the company, and there are limitations on the accuracy of such measurement devices and analytical techniques even when used and maintained as required. Accordingly, this report is not intended as an assertion that any instrument has measured, or 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.

Very truly yours,

C. A. Vondra  
General Manager -  
Salem Operations

RFQ:jap  
Attachments

280102  
9210020292 920831  
PDR ADDCK 05000272  
R PDR

C EPA-Region II  
Mr. Gerald M. Hansler - Executive Director  
USNRC - Document Control Desk  
Vice President - Nuclear Operations  
General Manager - Salem Operations  
RP/Chemistry Manager - Salem Operations  
Manager-Licensing & Regulations  
E. Keating  
M. Vaskis  
D. Hurka  
Central Record Facility  
File  
RPC92-134

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 Century 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 and ammonia by the addition of sodium hypochlorite. No hydrazine has been discharged from this outfall during the reporting period. Residual chlorine is monitored at the outfalls of DSN's 481, 482, 484, and 485, and has not exceeded the permit limits at these outfalls.

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

<u>DMR NO.</u>	<u>EXPLANATION</u>
DSN 489	See attached Report Case No. 92-8-13-1218-48 and 92-8-13-1603-42
DSN 488	See attached Report Case No. 92-8-17-0133-18
DSN 489A	See attached Report Case No. 92-8-28-1501-36
DSN 489B	See attached Report Case No. 92-9-02-1357-35



AUG 18 1992

Steve Mathis  
NLR-E92247

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Based on this information the spill was reported to the NJDEPE Hotline (Operator No.18) as being of unknown origin and was assigned case No. 92-8-13-1218-48. The discharge was also reported to the National Response Center at this time and was assigned Case Number 131-701. The U.S. Coast Guard (USCG) dispatched Phillip Beverly and Steven Garcia to investigate the discharge.

The USCG personnel arrived on site at approximately 1500 hours and were escorted by Licensing personnel to the scene of the discharge. At this time, the tide had receded to the point where DSN 489 was now completely visible and oil was observed discharging from the outfall. Site Protection and the Salem Generating Station Senior Shift Supervisor were notified and immediate action was taken to place absorbent boom around the outfall and in the final manhole prior to discharge (Manhole No. 15). The Senior Shift Supervisor called the NJDEPE Hotline (Operator No. 23) to report the new information which was assigned case No.92-08-13-1603-42. The National Response Center was also called with the updated information. Approximately ten (10) gallons of lubricating oil was estimated to be discharged.

USCG personnel requested that based upon the impending precipitation event that an additional "skirted" boom be placed outside the "sausage" boom in order to contain any oil that the "sausage" boom might not be able to absorb. This request was immediately carried out by Site Protection personnel and the discharge was effectively contained by 1700 hours. USCG personnel were satisfied that these containment and cleanup measures were sufficient and left the scene of the discharge.

An investigation is underway to determine the cause and source of this discharge. It is suspected that the discharge originated from the No. 1 Oil/Water Skim Tank but this has not yet been confirmed.

If you have any additional comments or questions regarding this matter, please contact Mr. David K. Hurka at (609) 339-1275.

Sincerely,

  
F. X. Thomson, Jr.

Manager -  
Licensing and Regulation

C Assistant Director of Enforcement - NJDEPE  
Mr. William Johnson - U.S. Army Corps of Engineers

AUG 18 1992

Mr. S. Mathis  
NLR-E92247

3

*DKH/KIA* *sh*

BC. General Manager - Salem Operations (S05)  
General Manager - Nuclear Services (N35)  
General Manager - Environmental Affairs (Newark 17G)  
Rad Prot/Chemistry Manager - Salem (S04)  
Principal Engineer - Environmental Licensing (N21)  
M. F. Vaskis (Newark 5C)  
J. F. Doherty (Newark 5E)  
E. J. Keating (N21)  
P. J. McCabe (N21)  
Microfilm  
Records Management  
File 2.1.1 S

ATS REF: DEP PM NJ0005622-06 TASK 0016

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DATE COPIED	8/21
DATE SENT	8/21
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CERTIFIED MAIL  
RETURN RECEIPT REQUESTED  
ARTICLE NUMBER: P 063 762 210

AUG 21 1992

NLR-E92251

Mr. Steve Mathis  
NJ Department of Environmental Protection and Energy  
Office of Enforcement Policy  
Southern Bureau of Water and Hazardous Waste Enforcement  
20 E. Clementon Rd.  
Gibbsboro, NJ 08026

Dear Mr. Mathis

SALEM GENERATING STATION  
NJPDES PERMIT NO. NJ0005622  
DISCHARGE OF SODIUM HYPOCHLORITE - 5 DAY REPORT  
CASE NO. 92-8-17-0133-18

In accordance with NJAC 7:14A-2.5, PSE&G has prepared this report concerning an apparent discharge to the Delaware River of approximately forty (40) gallons of water containing a concentration of 560 mg/l of Sodium Hypochlorite, (CAS # 768-15-029). The discharge was due to a flange leak downstream of the 22SW416 isolation valve located in the No. 4 Service Water Bay. A portion of this leak collected in the Service Water Bay sump and may have been subsequently discharged through a stormwater outfall, DSN 488. Because these sumps operate automatically based on level, it has not been possible to determine if a discharge did occur.

The leak was discovered during a routine walkdown at 0115 hours on August 17, 1992 and was terminated at 0115 hours when operations personnel opened the breaker on the sump pump. This leak and the potential discharge was a result of the failure of the gasket material in the flange. The leak has been isolated pending replacement of the defective gasket.

The discharge of Sodium Hypochlorite is regulated under 40 CFR 302.4 with a reportable quantity of one hundred (100) pounds. Since the discharge did not exceed the reportable quantity, no notification of the release was reported to any agency other than the New Jersey Department of Environmental Protection and Energy (NJDEPE) and the Nuclear Regulatory Commission (NRC), as required under 10 CFR 50.72, Significant Events.



AUG 21 1992

S. Mathis  
NLR-E92251

2

If you have any additional comments or questions regarding this matter, please contact David K. Hurka at (609) 339-1275.

Sincerely,

*FXT/MLC*

F. X. Thomson, Jr.  
Manager -  
Licensing and Regulation

C Assistant Director of Enforcement - NJDEPE

AUG 21 1992

S. Mathis  
NLR-E92251

3

~~DRH~~ ~~MB~~

BC General Manager - Salem Operations (S05)  
General Manager - Environmental Affairs (Newark 17G)  
Rad Prot/Chemistry Manager - Salem (S04)  
Principal Engineer - Environmental Licensing (N21)  
M. F. Vaskis (Newark T5C)  
E. J. Keating (N21)  
R. F. Quinn (S07)  
R. M. Allen (S07)  
P. J. McCabe (N21)  
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Records Management  
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ATS CLOS: DEP PM NJ0005622-06 TASK 0017

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SEP 02 1992

NLR-E92261

Mr. Steve Mathis  
NJ Department of Environmental Protection and Energy  
Office of Enforcement Policy  
Southern Bureau of Water and Hazardous Waste Enforcement  
20 E. Clementon Road  
Gibbsboro, NJ 08026

Dear Mr. Mathis

SALEM GENERATING STATION  
NJPDES PERMIT NO. NJ0005622  
CONFIRMATION OF PETROLEUM HYDROCARBON EXCEEDANCE - 5 DAY REPORT  
CASE NO. 92-8-28-1501-36

In accordance with NJAC 7:14A-3.10, PSE&G is reporting a discharge in exceedance of the daily maximum permit limit for petroleum hydrocarbons from Salem Generating Station on August 26, 1992. The discharge occurred through outfall DSN 489A, the effluent of No. 1 oil/water skim tank, to the Delaware River.

PSE&G became aware of this exceedance on August 28 when the sample results were reported to PSE&G by it's contract lab, NET Atlantic. The reported value of petroleum hydrocarbons at that time was 83.1 mg/l. The permitted limit for petroleum hydrocarbons at DSN 489A is 15 mg/l. Upon receipt of this information PSE&G reported the exceedance to the NJDEPE Hotline and was assigned case No. 92-08-28-1501-36 by operator No. 6. The potential for continuing violations was reduced by eliminating influent sources to the skim tank. All skim tank influents were terminated by September 1 when a temporary hose was installed to route all influents to the No. 2 oil/water skim tank, DSN 489B.

The cause of this exceedance is believed to be related to a leaking seal around the effluent weir which resulted in an abnormally low level in the system making it susceptible to hydraulic overload. The oil/water skim tank will remain out of service until the gasket is repaired and the interior is cleaned and inspected. This exceedance has not endangered nor significantly impacted public health or the environment.

SEP 02 1992

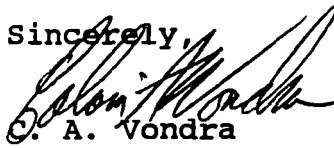
S. Mathis - NJDEPE  
NLR-E92261

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As this exceedance places PSE&G in the Significant Non-Complier category, we are requesting a meeting with Mr. Edward Post and yourself to discuss the details of this exceedance and the corrective actions that are being undertaken. Mr. David Hurka will be in touch with your office in order to determine a mutually acceptable date for this meeting.

If you have any additional comments or questions regarding this matter, please contact Mr. David Hurka at (609) 339-1275.

Sincerely,



C. A. Vondra  
General Manager  
Salem Operations

C Assistant Director of Enforcement

SEP 02 1992

S. Mathis - NJDEPE  
NLR-E92261

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~~DKH~~ ~~WJb~~

BC General Manager - Salem Operations (S05)  
General Manager - Environmental Affairs (Newark 17G)  
Rad Prot/Chemistry Manager - Salem (S04)  
Principal Engineer - Environmental Licensing (N21)  
M. F. Vaskis (Newark T5C)  
R. F. Quinn (S07)  
P. J. McCabe (N21)  
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SEP 04 1992

NLR-E92266

Mr. Steve Mathis  
NJ Department of Environmental Protection and Energy  
Office of Enforcement Policy  
Southern Bureau of Water and Hazardous Waste Enforcement  
20 E. Clementon Road  
Gibbsboro, NJ 08026

Dear Mr. Mathis

SALEM GENERATING STATION  
NJPDES PERMIT NO. NJ0005622  
EXCEEDANCE OF DAILY MAXIMUM LIMIT FOR COD  
CASE NO. 92-09-02-1357-35

In accordance with NJAC 7:14A-3.10, PSE&G reported a discharge in exceedance of the daily maximum permit limit for Chemical Oxygen Demand (COD) from Salem Generating Station on August 26, 1992. The reported discharge occurred through outfall DSN 489B, the effluent of No. 2 oil/water skim tank, to the Delaware River.

PSE&G became aware of this exceedance on September 2, 1992 when the analytical results were reported to PSE&G by it's contract lab, NET Atlantic. The reported value of COD at that time was 270 mg/l. The permit limit for COD at DSN 489B is 100 mg/l. Upon receipt of this information PSE&G requested that NET Atlantic reanalyze the sample. The replicate analysis of this sample yielded results of 178 mg/l and 189 mg/l, respectively. NET has reported to PSE&G (see Attachment No. 1) that there was evidence of a strong matrix interference and that valid numbers could not be achieved.

This is the second time (see Attachment No. 2) during the monitoring period that the vendor lab has not been able to produce valid analytical results for this parameter at this outfall due to matrix interference. NET Atlantic uses Method 410.4 from EPA's Methods of Chemical Analysis of Water and Wastes for analysis of COD. According to Method 410.4 and similar analytical methods in Standard Methods for the Examination of Water and Wastewater (16th Edition), there are several interferences to the test method utilized, including chlorides, iron, sulfide and manganous manganese. PSE&G with the assistance of NET is attempting to determine the identity and source of any interfering agents.

S. Mathis  
NLR-E92266

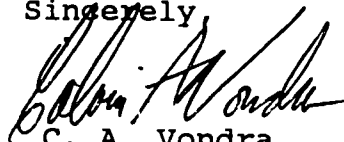
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Other measures of organic pollutants monitored at this outfall, specifically Total Organic Carbon and Petroleum Hydrocarbons, were found at levels of 4 mg/l and 2.3 mg/l, respectively. These results are consistent with historical data and indicate that the high COD results are not the result of organic pollutants.

Based on these observations PSE&G believes that no violation of the permit occurred. The August DMR will reflect this by reporting "Code=E" for the COD results for DSN 489B with an explanation on the transmittal sheet as specified in the Discharge Monitoring Report Instruction Manual. This explanation will include the results of PSE&G's investigation and any actions to prevent similar incidents in the future.

If you have any additional comments or questions regarding this matter, please contact David K. Hurka at (609) 339-1275.

Sincerely,



C. A. Vondra  
General Manager -  
Salem Operations

Attachments (2)

C Assistant Director of Enforcement, NJDEPE

SEP 04 1992

S. Mathis  
NLR-E92266

3

*DKH/kjb*

BC General Manager - Salem Operations (S05)  
General Manager - Nuclear Services (N35)  
General Manager - Environmental Affairs (Newark 17G)  
Manager - Licensing and Regulation (N21)  
Rad Prot/Chemistry Manager - Salem (S04)  
Chemistry Engineer - Salem (S07)  
Principal Engineer - Environmental Licensing (N21)  
M. F. Vaskis (Newark T5C)  
M. F. Strickland (Newark T17G)  
R. F. Quinn (S07)  
R. M. Allen (S07)  
M. Pollack (S05)  
P. J. McCabe (N21)  
Microfilm  
Records Management  
File 2.1.1 S, 11.1

ATS CLOS: DEP PM NJ0005622-06 TASK 19

Concurrence: For approval of position/response relative to  
your department's responsibilities

*[Signature]*  
Rad Pro/Chemistry Manager - Salem

*9/4/92*  
Date



REPORT OF ANALYSIS

Client: PSE & G  
Job No: 92.2373

Sample No: 97113  
Client Sample ID: OW-6

<u>Parameter</u>	<u>Results</u>	<u>Units</u>
Chloride	232	mg/L

Sample No: 97114  
Client Sample ID: OW-G

<u>Parameter</u>	<u>Results</u>	<u>Units</u>
Chloride	1204	mg/L

Sample No: 97115  
Client Sample ID: OW-I

<u>Parameter</u>	<u>Results</u>	<u>Units</u>
Chloride	39	mg/L

Sample No: 97116  
Client Sample ID: OW-J

<u>Parameter</u>	<u>Results</u>	<u>Units</u>
Chloride	5	mg/L

Sample No: 97117  
Client Sample ID: 489B-2

<u>Parameter</u>	<u>Results</u>	<u>Units</u>
Chemical Oxygen Demand	270*	mg/L
Chemical Oxygen Demand(re-run)	178*	mg/l
Chemical Oxygen Demand(re-run)	189*	mg/l
Total Organic Carbon	4	mg/L

\*Evidence of strong matrix interference, cannot achieve valid numbers-suggest resampling.

< - LESS THAN  
dw - DRY WEIGHT

NATIONAL ENVIRONMENTAL TESTING, INC.  
Therofare Division

REPORT OF ANALYSIS

Client: PSE & G  
Job No: 92.2261

Sample No: 96205  
Client Sample ID: 489B-2

<u>Parameter</u>	<u>Results</u>	<u>Units</u>
* Chemical Oxygen Demand	109	mg/L
* Chemical Oxygen Demand (Rerun1)	213	mg/L
* Chemical Oxygen Demand (Rerun2)	175	mg/L
* Chemical Oxygen Demand (Rerun3)	118	mg/L
Total Organic Carbon	4	mg/L

Sample No: 96206  
Client Sample ID: 489B-3

<u>Parameter</u>	<u>Results</u>	<u>Units</u>
Petroleum Hydrocarbons A	2.3	mg/L

Sample No: 96207  
Client Sample ID: 489B-3B

<u>Parameter</u>	<u>Results</u>	<u>Units</u>
Petroleum Hydrocarbons A	<.10	mg/L

Sample No: 96208  
Client Sample ID: 487B-1

<u>Parameter</u>	<u>Results</u>	<u>Units</u>
Solids, suspended (TSS)	4	mg/L

Sample No: 96209  
Client Sample ID: 487B-2

<u>Parameter</u>	<u>Results</u>	<u>Units</u>
Chemical Oxygen Demand	18	mg/L
Total Organic Carbon	2	mg/L

\* Evidence of strong matrix interference, cannot achieve valid numbers-suggest resampling.

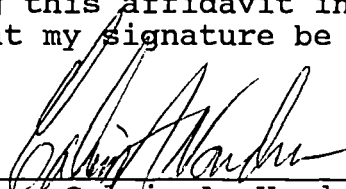
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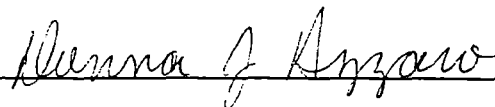
COUNTY OF SALEM  
STATE OF NEW JERSEY

I, Calvin A. Vondra, of full age, being duly sworn according to law, upon my oath depose and say:

1. I am the General Manager of the Salem Generating Station, and as such am authorized to sign Discharge Monitoring Reports submitted to the New Jersey Department of Environmental Protection and Energy pursuant to the Station's New Jersey Pollutant Discharge Elimination System permit.
2. I have reviewed the attached Discharge Monitoring Reports. Pursuant to N.J.A.C. 7:14A-2.4, 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 responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.
3. The signature on the attached Discharge Monitoring Reports is my signature and I am submitting this affidavit in satisfaction of the requirement that my signature be notarized.

  
\_\_\_\_\_  
Calvin A. Vondra  
General Manager -  
Salem Operations

Sworn and subscribed before me  
this 24 day of September 1992.

  
\_\_\_\_\_

My commission expires June 1995

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.

REPORTING PERIOD

MO. YR. MO. YR.

00 10 15 16 1 2 2

0 8 | 9 | 2 THRU 0 | 8 | 9 | 2

**PERMITTEE:** Name Public Service Electric and Gas Company  
Address P. O. Box 236  
Hancock's Bridge, New Jersey 08038

**FACILITY:** Name Salem Generating Station  
Address Alloway Creek Neck 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

EPA FORM 3320-1

**OPERATING EXCEPTIONS**

	YES	NO
DYE TESTING	<input type="checkbox"/>	<input checked="" type="checkbox"/>
TEMPORARY BYPASSING	<input type="checkbox"/>	<input checked="" type="checkbox"/>
DISINFECTION INTERRUPTION	<input type="checkbox"/>	<input checked="" type="checkbox"/>
MONITORING MALFUNCTIONS	<input type="checkbox"/>	<input checked="" type="checkbox"/>
UNITS OUT OF OPERATION	<input type="checkbox"/>	<input checked="" type="checkbox"/>
OTHER	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*(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*) David K. Hurka  
Grade & Registry No. N-2 N-0684  
Signature *David K. Hurka*  
Date September 24, 1993

PRINCIPAL EXECUTIVE OFFICER or DULY AUTHORIZED REPRESENTATIVE

Name (*Printed*) C. A. Vondra  
Title (*Printed*) General Manager - Salem Operations  
Signature *C. A. Vondra*  
Date 9/24/93

OPERATING EXCEPTIONS DETAIL

DSN 489B - Two (2) samples were obtained during the reporting period for COD. Valid results could not be obtained. (See attached information concerning Case No 92-09-02-1357-35)  
Subsequent sampling from this discharge point and its associated input sources shows chlorid levels in excess of 1000 ppm in the sample matrix. Chloride interference at this level will prevent the laboratory from obtaining accurate and repeatable analytical results.

DSN 484 and 486 - Thermal RTD's out of service for part of the reporting period.  
Data used was taken from operations hourly logs.

DSN 485 - Thermal RTD out of service for entire reporting period. Data used was taken from operations hourly logs.

HOURS ATTENDED AT PLANT

Month 018

Year 912

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		
Others			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			8	
Others	4	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**

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

(2-16) **NJ0005622**  
 PERMIT NUMBER

(17-19) **FACA**  
 DISCHARGE NUMBER

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

**THERMAL DSCHG FOR DSN 481-483**  
**MAJOR SALEM**  
**SOUTHERN REGION**

FACILITY **PSE&G SALEM GENERATING STATION**  
 LOCATION **LOWER ALLOWAYS CREE, NJ 08038**  
 DMR NUMBER: **92080269**

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	08	01		92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (66-70)
		XXX AVERAGE XXX (46-53)	XXX MAXIMUM XXX (54-61)	UNITS	XXX MINIMUM XXX (38-45)	XXX AVERAGE XXX (46-53)	XXX MAXIMUM XXX (54-61)	UNITS			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	28.3	36.0		0	CONTINUOUS	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	46.10000 Dly Max	DEG-C		CONTINUOUS	
TEMPERATURE, WATER DEG. CENTIGRADE 00010 2 1 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****		*****	3.8	11.2		0	CONTINUOUS	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	15.30000 Dly Max	DEG-C		CONTINUOUS	
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 1 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	24.5	25.6		0	CONTINUOUS	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	REPORT Dly Max	DEG-C		CONTINUOUS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
**C. Vondra**  
**G.M.- Salem Ops.**  
 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]*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 609 935-6000  
 DATE: 92 09 21  
 AREA CODE NUMBER YEAR MO DAY

EFFLUENT TEMPERATURES 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 AVE EFFLUENT TEMP OF 481-483.

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

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

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

(2-16) **NJ0005622**  
 PERMIT NUMBER

(17-19) **FACB**  
 DISCHARGE NUMBER

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

**THERMAL DSCHE FOR DSN 484-486**  
**MAJOR SALEM**  
**SOUTHERN REGION**

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREE, NJ 08038  
 DMR NUMBER: 92080269

MONITORING PERIOD  
 FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 08 DAY 31  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	AVERAGE	MINIMUM	REPORT MONTHLY AVG	REPORT DAILY MAX			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****		34.4	36.4	0	CONTINUOUS	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MONTHLY AVG	46.10000	46.10000	DEG-C	CONTINUOUS	
TEMPERATURE, WATER DEG. CENTIGRADE 00010 2 1 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****		*****		9.9	11.0	0	CONTINUOUS	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MONTHLY AVG	15.30000	15.30000	DEG-C	CONTINUOUS	
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 1 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		23.2	24.5	25.6		0	CONTINUOUS	
	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	REPORT MONTHLY AVG	REPORT DAILY MAX		DEG-C	CONTINUOUS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  C. Vondra G.M. - Salem Ops. 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 31 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  <i>C. Vondra</i>	TELEPHONE	DATE				
			609 935-6000	92	07	24		

EFFLUENT TEMP IS TO BE CALCULATED AS THE COMBINED AVERAGE OF EACH OF THE SEPARATE DISCHARGES 484-486.  
 NET TEMP DIF IS THE DIFFERENCE BETWEEN THE AMBIENT RIVER WATER TEMP AND THE AVE EFFLUENT TEMP OF 484-486.

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

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

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

**NJ0005622**  
 PERMIT NUMBER

**FACC**  
 DISCHARGE NUMBER

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

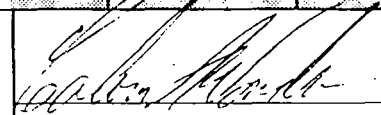
**THERMAL DSCHG FOR DSN 481-486**  
**MAJOR SALEM**  
**SOUTHERN REGION**

FACILITY **PSE&G SALEM GENERATING STATION**  
 LOCATION **LOWER ALLOWAYS CREE, NJ 08038**  
 DMR NUMBER: **92080269**

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	08	01		92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX	UNITS			
THERMAL DISCHARGE MILLION BTUS PER HR. 00015 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	9308	20267		*****	*****	*****		0	CONTINUALCTD	
	PERMIT REQUIREMENT	REPORT MONTH AVG	30600.000 DLY MAX	MBTU/HR	*****	*****	*****	****		CONTINUALCTD	
	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  C. Vondra G.M. - Salem Ops.  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			
			609 935-6000	92	09	24	
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)			AREA CODE	NUMBER	YEAR	MO	DAY



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

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 (2-16) (17-19)

**NJ0005622**  
 PERMIT NUMBER

**48CA**  
 DISCHARGE NUMBER

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

FACILITY **PSE&G SALEM GENERATING STATION**  
 LOCATION **LOWER ALLOWAYS CREE, NJ 08038**  
 DMR NUMBER: **92080269**

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	08	01		92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

**NON-RADIOLOGICAL WASTE TREAT.**  
**MAJOR SALEM**  
**SOUTHERN REGION**

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	18	20		0	TWICE/MONTH	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	100.00000 Dly Max	MG/L		TWICE/MONTH	COMPOS
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	17	21		0	TWICE/MONTH	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	30.00000 Mnth Avg	100.00000 Dly Max	MG/L		TWICE/MONTH	COMPOS
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	0	0		0	TWICE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	10.00000 Mnth Avg	15.00000 Dly Max	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.179	0.448		*****	*****	*****		0	CONTINUOUS	
	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****	***	CONTINUOUS	
BIOASSAY (96 HR.) 61402 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		> 100	*****	*****		0	QTRLY	
	PERMIT REQUIREMENT	*****	*****	****	50.00000 MINIMUM	*****	*****	PERCENT		QTRLY	
NITROGEN, AMMONIA TOTAL (AS NH4) 71845 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	35	43		0	TWICE/MONTH	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	35.00000 Mnth Avg	70.00000 Dly Max	MG/L		TWICE/MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
**C. Vondra**  
**G.M. - Salem Ops.**  
 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 31 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]*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE  
**609 935-6000**  
 AREA CODE NUMBER  
 DATE  
**92 07 24**  
 YEAR MO DAY

SINCE ONLY QUARTERLY REPORTING IS REQUIRED FOR BIOASSAY, ENTER "NODI" FOR MONTHS WHEN BIOASSAY NOT TAKEN.

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

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

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

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

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

NON-CONTACT COOLING WATER  
 MAJOR SALEM  
 SOUTHERN REGION

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREE, NJ 08038  
 DMR NUMBER: 92080269

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
92	08	01		92	08	31
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-64)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	AVERAGE	MINIMUM	MAXIMUM	UNITS			
PH		*****	*****		7.1	*****	7.6		0	WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**** MINIMUM	6.00000	*****	9.00000	SU		WEEKLY	GRAB
PH		*****	*****		7.1	*****	7.8		0	WEEKLY	GRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	**** MINIMUM	REPORT	*****	REPORT	SU		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	386.9	547.9		*****	*****	*****		0	CONTINUOUS	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	**** ***		CONTINUOUS	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	<0.1	0.1		0	THREE/ WEEK	GRAB
50060 R 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	**** ***	*****	30000 Mnth Avg	50000 Dly Max	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	<0.1	<0.1		0	THREE/ WEEK	GRAB
50060 S 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	**** ***	*****	REPORT Mnth Avg	20000 Dly Max	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
50060 T 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	**** ***	*****	REPORT Mnth Avg	20000 Dly Max	MG/L		THREE/ WEEK	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  C. Vondra G.M.- Salem Ops.  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)	TELEPHONE	DATE			
		609 935-6000	92	08	24	
	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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.

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

NAME **PSEEG**  
 ADDRESS **P.O. BOX 236/N21**  
**HANCOCKS BRIDGE, NJ 08038**

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

**NJ0005622**  
 PERMIT NUMBER

**482A**  
 DISCHARGE NUMBER

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

**NON-CONTACT COOLING WATER**  
**MAJOR SALEM**  
**SOUTHERN REGION**

FACILITY **PSEEG SALEM GENERATING STATION**  
 LOCATION **LOWER ALLOWAYS CREE, NJ 08038**

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	08	01		92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

DMR NUMBER: 92080269

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX (62-64)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		XXXXXX AVERAGE	XXXXXX MAXIMUM	UNITS	XXXXXX AVERAGE	XXXXXX MAXIMUM	UNITS				
PH		*****	*****		7.1	*****	7.6		0	WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE		*****	*****	**** MINIMUM	6.08000	*****	9.08000 MAXIMUM	SU		WEEKLY	GRAB
PH		*****	*****		7.1	*****	7.8		0	WEEKLY	GRAB
00400 7 0 INTAKE FROM STREAM		*****	*****	**** MINIMUM	REPORT	*****	REPORT MAXIMUM	SU		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		473.0	536.3		*****	*****	*****		0	CONTIN UOUS	
50050 1 0 EFFLUENT GROSS VALUE		REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	**** ***		CONTIN UOUS	
CHLORINE, TOTAL RESIDUAL		*****	*****		*****	NODI	NODI				
50060 R 1 SEE COMMENTS BELOW		*****	*****	**** ***	*****	30000 Mnth Avg	50000 Dly Max	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL		*****	*****		*****	<0.1	<0.1		0	THREE/ WEEK	GRAB
50060 S 1 SEE COMMENTS BELOW		*****	*****	**** ***	*****	REPORT Mnth Avg	20000 Dly Max	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL		*****	*****		*****	NODI	NODI				
50060 T 1 SEE COMMENTS BELOW		*****	*****	**** ***	*****	REPORT Mnth Avg	20000 Dly Max	MG/L		THREE/ WEEK	GRAB
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
**C. Vondra**  
**G.M. - Salem Ops.**  
 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 3 years)

*[Signature]*  
 SIGNATURE OF PRINCIPAL EXECUTIVE  
 OFFICER OR AUTHORIZED AGENT

TELEPHONE **609 935-6000**  
 DATE **92 07 24**  
 AREA CODE NUMBER YEAR MO DAY

PARAMETER 50080 LOCATIONS: \*R\* = SWS DSCHG (NO CMS FLOW) \*S\* = SWS DSCHG (NORMAL COND) \*T\* = CMS 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.

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

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

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

**NJ0005622** **483A**  
 PERMIT NUMBER DISCHARGE NUMBER

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

FACILITY **PSE&G SALEM GENERATING STATION**  
 LOCATION **LOWER ALLOWAYS CREE, NJ 08038**  
 DMR NUMBER: **92080269**

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	08	01		92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

**NON-CONTACT COOLING WATER**  
**MAJOR SALEM**  
**SOUTHERN REGION**

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (34-61)			(4 Card Only) QUALITY OR CONCENTRATION (34-61)				NO. EX (62-64)	FREQUENCY OF ANALYSIS (64-69)	SAMPLE TYPE (69-70)
		MINIMUM	MAXIMUM	UNITS	MINIMUM	MAXIMUM	UNITS	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****		7.2	*****	7.7		0	WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.00000 MINIMUM	*****	9.00000 MAXIMUM	SU		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.1	*****	7.8		0	WEEKLY	GRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	*****	REPORT MAXIMUM	SU		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	379.2	553.5		*****	*****	*****		0	CONTINUOUS	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		CONTINUOUS	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
50060 R 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	30000 Mnth Avg	50000 Dly Max	MG/L		THREE/	GRAB WEEK
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	<0.1	<0.1		0	THREE/	GRAB WEEK
50060 S 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	20000 Dly Max	MG/L		THREE/	GRAB WEEK
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
50060 T 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	20000 Dly Max	MG/L		THREE/	GRAB WEEK
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
**C. Vondra**  
**G.M. - Salem Ops.**  
 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]*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE **609 935-6000**  
 DATE **92 09 24**  
 AREA CODE NUMBER YEAR MO DAY

PARAMETER 50080 LOCATIONS: 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.

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

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

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

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

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREE, NJ 08038  
 DMR NUMBER: 92080269

NON-CONTACT COOLING WATER  
 MAJOR SALEM  
 SOUTHERN REGION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	08	01		92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (34-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-64)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX	UNITS			
PH		*****	*****		7.1	*****	7.6		0	WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE		*****	*****	****	6.00000 MINIMUM	*****	9.00000 MAXIMUM	SU		WEEKLY	GRAB
PH		*****	*****		7.1	*****	7.8		0	WEEKLY	GRAB
00400 7 0 INTAKE FROM STREAM		*****	*****	****	REPORT MINIMUM	*****	REPORT MAXIMUM	SU		WEEKLY	GRAB
50050 1 0 EFFLUENT GROSS VALUE		537.9	547.9		*****	*****	*****		0	CONTIN UOUS	CONTIN UOUS
CHLORINE, TOTAL RESIDUAL		*****	*****		*****	NODI	NODI			THREE/ WEEK	GRAB
50060 R 1 SEE COMMENTS BELOW		*****	*****	****	*****	30000 MNTN AVG	50000 DLY MAX	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL		*****	*****		*****	<0.1	<0.1		0	THREE/ WEEK	GRAB
50060 S 1 SEE COMMENTS BELOW		*****	*****	****	*****	REPORT MNTN AVG	20000 DLY MAX	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL		*****	*****		*****	NODI	NODI			THREE/ WEEK	GRAB
50060 T 1 SEE COMMENTS BELOW		*****	*****	****	*****	REPORT MNTN AVG	20000 DLY MAX	MG/L		THREE/ WEEK	GRAB
		*****	*****		*****						
		*****	*****		*****						

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 C. Vondra  
 G.M. - Salem Ops.  
 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]*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 609 935-6000  
 DATE: 12 09 24  
 AREA CODE NUMBER YEAR MO DAY

PARAMETER EXPANSION 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.

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

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

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

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

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREE, NJ 08038  
 DMR NUMBER: 92080269

NON-CONTACT COOLING WATER  
 MAJOR SALEM  
 SOUTHERN REGION

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	08	01		92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)				NO. EX (62-64)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****		7.1	*****	8.4		0	WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.00000 MINIMUM	*****	9.00000 MAXIMUM	SU		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.1	*****	7.8		0	WEEKLY	GRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	*****	REPORT MAXIMUM	SU		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	524.1	536.3		*****	*****	*****		0	CONTIN UOUS	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		CONTIN UOUS	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
50060 R 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	30000 Mnth Avg	50000 Dly Max	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	<0.1	<0.1		0	WEEK	GRAB
50060 S 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	20000 Dly Max	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
50060 T 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	20000 Dly Max	MG/L		THREE/ WEEK	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 C. Vondra  
 G.M.- Salem Ops.  
 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 3 years.

*[Signature]*  
 SIGNATURE OF PRINCIPAL EXECUTIVE  
 OFFICER OR AUTHORIZED AGENT

TELEPHONE 609 935-6000  
 DATE 92 07 24  
 AREA CODE NUMBER YEAR MO DAY

PARAMETER 50080 COOLING WATER CONDENSERS = SWS DSCNG (NO CWS FLOW) \*S\* = SWS DSCNG (NORMAL COND) \*T\* = CWS DSCNG  
 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.

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

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

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

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

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREE, NJ 08038  
 DMR NUMBER: 92080269

NON-CONTACT COOLING WATER  
 MAJOR SALEM  
 SOUTHERN REGION

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	08	01		92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		XXXXXXX	XXXXXXXX	UNITS	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****		7.2	*****	7.8		0	WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**** MINIMUM	6.00000	*****	9.00000	SU		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.1	*****	7.8		0	WEEKLY	GRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	**** MINIMUM	REPORT	*****	REPORT	SU		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	546.8	553.3		*****	*****	*****		0	CONTIN	UOUS
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	**** ***		CONTIN	UOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
50060 R 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	**** ****	*****	30000 Mnth Avg	50000 Dly Max	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	<0.1	<0.1		0	THREE/ WEEK	GRAB
50060 S 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	**** ****	*****	REPORT Mnth Avg	20000 Dly Max	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****			NODI	NODI				
50060 T 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	**** ****	REPORT MINIMUM	REPORT Mnth Avg	20000 Dly Max	MG/L		THREE/ WEEK	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 C. Vondra  
 G.M. - Salem Ops.  
 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]*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 609 935-6000  
 DATE 92 07 24  
 AREA CODE NUMBER YEAR MO DAY

PARAMETER EXPLANATION OF 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.

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

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

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

**NJ0005622**  
 PERMIT NUMBER

**487A**  
 DISCHARGE NUMBER

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

FACILITY **PSE&G SALEM GENERATING STATION**  
 LOCATION **LOWER ALLOWAYS CREE, NJ 08038**

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	08	01		92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

**STORM H2O DSCHG. DSN487**  
**MAJOR SALEM**  
**SOUTHERN REGION**

DMR NUMBER: **92080269**

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX	UNITS			
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	REPORT Dly Max	MG/L		ANNUAL	COMPOS
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 2 1 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	100.00000 Dly Max	MG/L		ANNUAL	CALCTD
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 7 1 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	REPORT Dly Max	MG/L		ANNUAL	COMPOS
PH 00400 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		NODI		NODI				
	PERMIT REQUIREMENT	*****	*****	****	6.00000 MINIMUM	*****	9.00000 MAXIMUM	SU		ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	REPORT Dly Max	MG/L		ANNUAL	COMPOS
SOLIDS, TOTAL SUSPENDED 00530 2 1 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
	PERMIT REQUIREMENT	*****	*****	****	*****	30.00000 Mnth Avg	100.00000 Dly Max	MG/L		ANNUAL	CALCTD
SOLIDS, TOTAL SUSPENDED 00530 7 1 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	REPORT Dly Max	MG/L		ANNUAL	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
**C. Vondra**  
**G.M. - Salem Ops.**  
 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]*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE **609 935-6000**  
 DATE **92 09 24**  
 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 PSEEG  
 ADDRESS P.O. BOX 236/N21  
HANCOCKS BRIDGE, NJ 08038

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

**NJ0005622**  
 PERMIT NUMBER

**487A**  
 DISCHARGE NUMBER

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

FACILITY PSEEG SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREE, NJ 08038

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	08	01		92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

STORM H2O D5CHG. D5N487  
 MAJOR SALEM  
 SOUTHERN REGION

NOTE: Read instructions before completing this form.

DMR NUMBER: 92080269

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)		UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX (62-64)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		XXXXXX	XXXXXX		XXXXXX	XXXXXX	XXXXXX				
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	REPORT Dly Max	MG/L		ANNUAL	GRAB
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 2 1 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
	PERMIT REQUIREMENT	*****	*****	****	*****	10.00000 Mnth Avg	15.00000 Dly Max	MG/L		ANNUAL	CALCTD
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 7 1 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	REPORT Dly Max	MG/L		ANNUAL	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	NODI	NODI		*****	*****	*****				
	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		ANNUAL	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 C. Vondra  
 G.M. - Salem Ops.  
 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]*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 609 935-6000  
 DATE: 92 07 24  
 AREA CODE: 609 NUMBER: 935-6000 YEAR: 92 MO: 07 DAY: 24

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

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

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

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREE, NJ 08038  
 DMR NUMBER: 92080269

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	08	01		92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

STORMWATER  
 MAJOR SALEM  
 SOUTHERN REGION

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)				NO. EX (62-64)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX	UNITS			
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI	MG/L		ANNUAL	COMPOS
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT Mnth Avg	REPORT Dly Max	MG/L			
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 2 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI	MG/L		ANNUAL	CALCTD
EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT Mnth Avg	100-00000 Dly Max	MG/L			
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 7 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI	MG/L		ANNUAL	COMPOS
INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT Mnth Avg	REPORT Dly Max	MG/L			
PH 00400 1 1	SAMPLE MEASUREMENT	*****	*****	*****	NODI		NODI	SU		ANNUAL	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.00000 MINIMUM	*****	9.00000 MAXIMUM	SU			
SOLIDS, TOTAL SUSPENDED 00530 1 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI	MG/L		ANNUAL	COMPOS
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT Mnth Avg	REPORT Dly Max	MG/L			
SOLIDS, TOTAL SUSPENDED 00530 2 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI	MG/L		ANNUAL	CALCTD
EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30-00000 Mnth Avg	100-00000 Dly Max	MG/L			
SOLIDS, TOTAL SUSPENDED 00530 7 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI	MG/L		ANNUAL	COMPOS
INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT Mnth Avg	REPORT Dly Max	MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  C. Vondra G.M.- Salem Ops. 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			
			609 935-6000	92	07	24	
			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

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

NJ0005622  
 PERMIT NUMBER

489A  
 DISCHARGE NUMBER

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREE, NJ 08038  
 DMR NUMBER: 92080269

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	08	01		92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

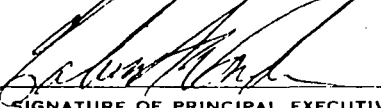
STORMWATER  
 MAJOR SALEM  
 SOUTHERN REGION

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-64)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX	UNITS			
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX	MG/L		ANNUAL	GRAB
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 2 1 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
	PERMIT REQUIREMENT	*****	*****	****	*****	10.00000 MNTH AVG	15.00000 DLY MAX	MG/L		ANNUAL	CALCTD
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 7 1 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI				
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX	MG/L		ANNUAL	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	NODI	NODI		*****	*****	*****				
	PERMIT REQUIREMENT	REPORT MNTH AVG	REPORT DLY MAX	MGD	*****	*****	*****	****		ANNUAL	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
C. Vondra  
G.M. - Salem Ops.  
 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 3 years.

  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 609 935-6000  
 DATE: 92 09 24  
 AREA CODE: 609 NUMBER: 935-6000 YEAR: 92 MO: 09 DAY: 24

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**

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

(2-16) **NJ0005622** (17-19) **87BA**  
 PERMIT NUMBER DISCHARGE NUMBER

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

FACILITY **PSE&G SALEM GENERATING STATION**  
 LOCATION **LOWER ALLOWAYS CREE, NJ 08038**  
 DMR NUMBER: **92080269**

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	08	01		92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

**#3 SKIM TANK-DSN487B IN PERMIT MAJOR SALEM SOUTHERN REGION**

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	AVERAGE	MAXIMUM	UNITS	UNITS			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0	SAMPLE MEASUREMENT	*****	*****		*****	26.0	26.0		0	ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 0	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	43.30000 Dly Max	DEG.C		ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE PH 00400 1 0	SAMPLE MEASUREMENT	*****	*****		*****	18	18		0	ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE SOLIDS, TOTAL SUSPENDED 00530 1 0	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	100.00000 Dly Max	MG/L		ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 0	SAMPLE MEASUREMENT	*****	*****		*****	7.4	7.4		0	ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	PERMIT REQUIREMENT	*****	*****	****	*****	6.00000 MINIMUM	9.00000 MAXIMUM	SU		ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	4	4		0	TWICE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	30.00000 Mnth Avg	100.00000 Dly Max	MG/L		ONCE/MONTH	GRAB
	SAMPLE MEASUREMENT	*****	*****		*****	0	0		0	ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	10.00000 Mnth Avg	15.00000 Dly Max	MG/L		ONCE/MONTH	GRAB
	SAMPLE MEASUREMENT	0.0017	0.0017		*****	*****	*****		0	ONCE/MONTH	CALC'D
	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		ONCE/MONTH	CALC'D

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  C. Vondra G.M. - Salem Ops.  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.)	TELEPHONE  609 935-6000	DATE			
			92 08 24			
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  <i>C. Vondra</i>		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

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

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

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREEK, NJ 08038  
 DMR NUMBER: 92080269

#1 SKIM TANK-DSN489A IN PERMIT MAJOR SALEM SOUTHERN REGION

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	08	01		92	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	34	34		0	ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	100.00000 DLY MAX	MG/L		ONCE/MONTH	GRAB
PH 00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		6.8		6.8		0	ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	6.00000 MINIMUM	*****	9.00000 MAXIMUM	SU		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	3	3		0	ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	30.00000 Mnth Avg	100.00000 DLY MAX	MG/L		ONCE/MONTH	GRAB
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	47	83		2	TWICE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	10.00000 Mnth Avg	15.00000 DLY MAX	MG/L		ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0026	0.0026		*****	*****	*****		0	ONCE/MONTH	CALCTD
	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT DLY MAX	MGD	*****	*****	*****	****		ONCE/MONTH	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 C. Vondra  
 G.M.- Salem Ops.  
 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]*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 609 935-6000  
 DATE 92 09 24  
 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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
**DISCHARGE MONITORING REPORT (DMR)**  
 (2-16) (17-19)  
**NJ0005622** (PERMIT NUMBER)  
**89BA** (DISCHARGE NUMBER)

Form Approved.  
 OMB No. 2040-0004.  
 Approval expires 6-30-91.

**FACILITY** PSE&G SALEM GENERATING STATION  
**LOCATION** LOWER ALLOWAYS CREE, NJ 08038  
**DMR NUMBER:** 92080269

**MONITORING PERIOD**  
 FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 08 DAY 31  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

#2 SKIM TANK-DSN489B IN PERMIT MAJOR SALEM SOUTHERN REGION  
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX	UNITS			
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	CODE=E	CODE=E				
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	100.00000 Dly Max	MG/L		ONCE/MONTH	GRAB
PH 00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		6.8		6.8		0	ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	6.00000 MINIMUM	*****	9.00000 MAXIMUM	SU		ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****			28	32		0	TWICE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	30.00000 Mnth Avg	100.00000 Dly Max	MG/L		ONCE/MONTH	GRAB
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****			2.3	2.3		0	ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	10.00000 Mnth Avg	15.00000 Dly Max	MG/L		ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0026	0.0026		*****	*****	*****		0	ONCE/MONTH	CALCTD
	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		ONCE/MONTH	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 C. Vondra  
 G.M.- Salem Ops.  
 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]*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 609 935-6000  
 DATE 92 09 24  
 AREA CODE NUMBER YEAR MO DAY

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