



PSEG

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

May 19, 1994

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 April 1994.

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,

Joseph J. Hagan
Vice President -
Nuclear Operations/
General Manager -
Salem Operations

RFQ:pc
Attachments

The Energy People

9405310163 940430
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
M. Vaskis
D. Hurka
Central Record Facility
File
RPC94-104

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 Atlantic, Inc. (NJDEPE certification 08153). Bioassay results are provided by AnalytiKEM Inc. (NJDEPE certification 82888).

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 effect 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. 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 are explained below. Excursions have not endangered nor significantly impacted public health or the environment.

<u>DMR NO.</u>	<u>EXPLANATION</u>
DSN-48CA	See attached report. Case No. 94-4-14-1052-17

HANDLED BY _____
DATE COPIED _____
DATE SENT _____
OTHER _____

PJM

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
ARTICLE NUMBER: Z 691 525 088

APR 18 1994

NLR-E94074

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
DISCHARGE OF HYDRAZINE
CASE NO. 94-4-14-1052-17

On April 14, 1994 Public Service Electric and Gas (PSE&G) Company reported a discharge of hydrazine from the Non-Radiological Liquid Waste Disposal System (NRLWDS) at the Salem Generating Station. The NRLWDS is an internal monitoring point, DSN 48C, which ultimately discharges to the Delaware River through the circulating water system outfalls under NJPDES Permit No. NJ0005622. The discharge was reported to the NJDEPE Hotline and was assigned Case No. 94-4-14-1052-17 by Operator 24.

The NRLWDS provides treatment through clarification, metals precipitation and utilizes break-point chlorination for ammonia and hydrazine removal. The system is currently operated in a batch mode with influent samples analyzed for ammonia and hydrazine to determine treatment requirements. In order to discharge, there may be no detectable hydrazine in the effluent.

The NRLWDS receives waste from various sources including the steam generator blowdown tanks. During normal plant operations, the waste from the blowdown tanks normally contains a small amount of hydrazine which is easily removed by maintaining a chlorine residual in the equalization basin. However, during plant outages chemistry specifications require additional hydrazine to be added to the steam generators.

APR 18 1994

Steve Mathis
NLR-E94074

2

On April 13, while in an outage condition, a steam generator from Salem Unit 1 was drained to the NRLWDS. The concentration of hydrazine in this generator was approximately 7500 ppb. This waste was treated with sodium hypochlorite to remove the hydrazine. The equalization basin was satisfactorily sampled and the NRLWDS was placed into discharge at 2215 hours.

On April 14, at approximately 0100 hours, Chemistry personnel noticed that a hydrazine monitor in the influent equalization basin indicated the presence of hydrazine. The discharge from the NRLWDS was immediately secured. Confirmatory samples indicated that approximately 150,000 gallons of water containing a concentration of approximately 50 ppb hydrazine had been discharged. The total volume of hydrazine discharged was approximately one ounce. The total weight of hydrazine discharged was less than one (1) pound and as such was not reportable under the CERCLA Regulations.

The hydrazine that was discharged resulted from a residual amount of the steam generator waste that remained in the waste line being added to the equalization basin. The residual chlorine in the equalization basin was not enough to completely react with the concentration of hydrazine present resulting in a small amount of hydrazine being carried through the system and eventually discharged.

In order to prevent reoccurrence of this incident, Chemistry is expanding system operator oversight to include additional monitoring of plant evolutions that contain high concentrations of hydrazine. This discharge has not endangered nor significantly impacted public health or the environment.

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

Sincerely,



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

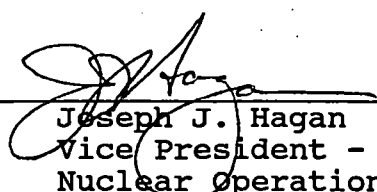
C Assistant Director of Enforcement
NJ Department of Environmental Protection and Energy
401 East State Street
Trenton, NJ 08625-0029

U. S. Nuclear Regulatory Commission
Document Control Desk
Washington, D.C. 20555

COUNTY OF SALEM
STATE OF NEW JERSEY

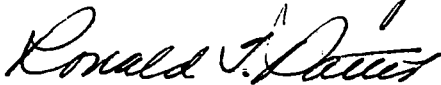
I, Joseph J. Hagan, of full age, being duly sworn according to law, upon my oath depose and say:

1. I am Vice President of Nuclear Operations and General Manager of 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.



Joseph J. Hagan
Vice President -
Nuclear Operations/
General Manager -
Salem Operations

Sworn and subscribed before me
this 20TH day of May 1994.



Ronald J. Davis

My commission expires 6-23-98

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.

REPORTING PERIOD

MO. YR.

MO. YR.

010; 015161212

0494 THRU 0494

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

FACILITY: Name Salem Nuclear Generating Station
Address Allow 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 Plans" 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) Richard F. Quinn
Grade & Registry No N-2 N-944
Signature *Richard F. Quinn*
Date May 18, 1994

PRINCIPAL EXECUTIVE OFFICER or DULY AUTHORIZED REPRESENTATIVE

Name (Printed) Joseph J. Hagan
Vice President - Nuclear Operations
Title (Printed) General Manager - Salem Operations
Signature *J. Hagan*
Date 5/20/94

OPERATING EXCEPTIONS DETAILED

DSN-87BA - There were no discharges from this monitoring point to DSN-487A during
the reporting period. Effluent from DSN-87BA has been permanently
redirected to DSN-48CA.

HOURS ATTENDED AT PLANT

Month **04** Year **94**

Day of Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Licensed Operator	H			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

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			FACA				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	04	01		94	04	30
	(20-21)(22-23)(24-25)				(26-27)(28-29)(30-31)		

THERMAL DSCHG FOR DSN 481-483
MAJOR SALEM
SOUTHERN REGION

FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622**

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		*****	*****	UNITS	*****	*****	UNITS				
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 1	SAMPLE MEASUREMENT	*****	*****	UNITS	*****	17.3	24.0			0	CONTINUOUS
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	43.3 Dly Max	DEG.C			CONTINUOUS
TEMPERATURE, WATER DEG. CENTIGRADE 00010 2 1	SAMPLE MEASUREMENT	*****	*****	UNITS	*****	5.1	13.5			0	CONTINUOUS
EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	15.3 Dly Max	DEG.C			CONTINUOUS
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 1	SAMPLE MEASUREMENT	*****	*****	UNITS	*****	12.2	16.4			0	CONTINUOUS
INTAKE FROM STREAM	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 JOSEPH J. HAGAN G.M. - Salem Operations	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 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	94 05 18	AREA CODE	NUMBER	YEAR
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 					

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 AVE EFFLUENT TEMP OF 481-483.

PERMITTEE NAME/ADDRESS

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

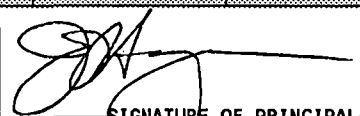
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

NJ0005622			FACB				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	04	01		94	04	30
	(20-21)		(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

THERMAL DSCHG FOR DSN 484-486
MAJOR SALEM
SOUTHERN REGION

FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622**

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. OF ANALYSIS (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		UNITS	UNITS	UNITS	UNITS	UNITS	UNITS			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 1	SAMPLE MEASUREMENT	*****	*****	UNITS	*****	19.4	23.9		CONTINUOUS	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	43.3 DLY MAX	DEG.C	CONTINUOUS	
TEMPERATURE, WATER DEG. CENTIGRADE 00010 2 1	SAMPLE MEASUREMENT	*****	*****	UNITS	*****	7.2	12.0		CONTINUOUS	
EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	15.3 DLY MAX	DEG.C	CONTINUOUS	
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 1	SAMPLE MEASUREMENT	*****	*****	UNITS	8.7	12.2	16.4		CONTINUOUS	
INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	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 JOSEPH J. HAGAN G.M. - Salem Operations	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 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	94	05	18	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

PERMITTEE NAME/ADDRESS

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 **FACC**
 PERMIT NUMBER DISCHARGE NUMBER

FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622**

THERMAL DSCHG FOR DSN 481-485
MAJOR SALEM
SOUTHERN REGION

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
94	04	01		94	04	30
(20-21)(22-23)(24-25)				(26-27)(28-29)(30-31)		

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		9948	20238	UNITS	*****	*****	*****				
THERMAL DISCHARGE											CONTINCALCTD
MILLION BTUS PER HR.											UOUS
00015 2 0											CONTINCALCTD
EFFLUENT NET VALUE											UOUS
	PERMIT REQUIREMENT	REPORT Mnth Avg	30600	MBTU/HR	*****	*****	*****	****			
	PERMIT REQUIREMENT		DLY MAX		***						
	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 JOSEPH J. HAGAN G.M. - Salem Operations	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 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	94	05	18
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

PERMITTEE NAME/ADDRESS

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 **48CA**
 PERMIT NUMBER DISCHARGE NUMBER

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

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	04	01		94	04	30
	(20-21)(22-23)(24-25)				(26-27)(28-29)(30-31)		

NON-RADIOLOGICAL WASTE TREAT.
MAJOR SALEM
SOUTHERN REGION

DMR NUMBER: **NJ0005622**

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		MEASUREMENT	UNITS	UNITS	UNITS	UNITS	UNITS				
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 10	< 10			TWICE/MONTH	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	100 DLY MAX	MG/L		TWICE/MONTH	COMPOS
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	16	23			TWICE/MONTH	COMPO
	PERMIT REQUIREMENT	*****	*****	****	*****	30 Mnth Avg	100 DLY MAX	MG/L		TWICE/MONTH	COMPOS
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.1	< 0.1			TWICE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	10 Mnth Avg	15 DLY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.147	0.440		*****	*****	*****			CONTINUOUS	
	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT DLY MAX	MGD	*****	*****	*****	****		CONTINUOUS	
BIOASSAY (96 HR.) 61402 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****			CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****	****	50 MINIMUM	*****	*****	PERCENT		QUARTERLY	
NITROGEN, AMMONIA TOTAL (AS NH4) 71845 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	32	50			TWICE/MONTH	GRAB*
	PERMIT REQUIREMENT	*****	*****	****	*****	35 Mnth Avg	70 DLY MAX	MG/L		TWICE/MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
JOSEPH J. HAGAN
G.M. - Salem Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN. AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 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 **94 05 18**
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
 AREA CODE NUMBER YEAR MO DAY

SINCE ONLY QUARTERLY REPORTING IS REQUIRED FOR BIOASSAY, ENTER "NODI" FOR MONTHS WHEN BIOASSAY NOT TAKE.
 * PARAMETER NITROGEN, AMMONIA TOTAL (AS NH4), THREE SAMPLES WERE OBTAINED DURING THE REPORTING PERIOD

PERMITTEE NAME/ADDRESS

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 **481A**
 PERMIT NUMBER DISCHARGE NUMBER

FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622**

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
94 04 01 **94 04 30**
 (20-21)(22-23)(24-25) (26-27)(28-29)(30-31)

NON-CONTACT COOLING WATER
MAJOR SALEM
SOUTHERN REGION

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)		UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)			UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		QUANTITY OR LOADING	QUANTITY OR LOADING		MINIMUM	MAXIMUM	MINIMUM				
PH	SAMPLE MEASUREMENT	*****	*****		6.5	*****	7.9			0	WEEKLY GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU			WEEKLY GRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.0	*****	8.1			0	WEEKLY GRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	*****	REPORT MAXIMUM	SU			WEEKLY GRAB
50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	452.4	547.9		*****	*****	*****			0	CONTINUOUS
CHLORINE, TOTAL RESIDUAL	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		0	CONTINUOUS
50060 R 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1			0	THREE/GRAB WEEK
CHLORINE, TOTAL RESIDUAL	PERMIT REQUIREMENT	*****	*****	****	*****	.3	.5	MG/L		0	THREE/GRAB WEEK
50060 S 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1			0	THREE/GRAB WEEK
CHLORINE, TOTAL RESIDUAL	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	.2	MG/L		0	THREE/GRAB WEEK
50060 T 1 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			0	NODI NODI
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	.2	MG/L		0	THREE/GRAB WEEK
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
JOSEPH J. HAGAN
G.M. - Salem Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN. AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 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 **94 05 18**
 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

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 **482A**
 PERMIT NUMBER DISCHARGE NUMBER

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

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
94	04	01	94	04	30

(20-21)(22-23)(24-25) (26-27)(28-29)(30-31)

NON-CONTACT COOLING WATER
MAJOR SALEM
SOUTHERN REGION

DMR NUMBER: **NJ0005622**

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. OF ANALYSIS (62-63) (64-68)	SAMPLE TYPE (69-70)
		UNITS	UNITS	UNITS	UNITS	UNITS	UNITS		
PH	SAMPLE MEASUREMENT	*****	*****		6.8	*****	7.8		0WEEKLYGRAB
00400 1 0	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU	WEEKLYGRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	MINIMUM	*****	MAXIMUM		
PH	SAMPLE MEASUREMENT	*****	*****		7.0	*****	8.1		0WEEKLYGRAB
00400 7 0	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	*****	REPORT MAXIMUM	SU	WEEKLYGRAB
INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	*****	REPORT MAXIMUM		
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	284.0	536.3		*****	*****	*****		0CONTINUOUS
50050 1 0	PERMIT REQUIREMENT	REPORT MNTH AVG	REPORT DLY MAX	MGD	*****	*****	*****	****	CONTINUOUS
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	*****	***	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		0NODI NODI
50060 R 1	PERMIT REQUIREMENT	*****	*****	****	*****	.3	.5	MG/L	THREE/GRAB WEEK
SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	MNTH AVG	DLY MAX		
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	0.1	0.2		0THREE/GRAB WEEK
50060 S 1	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	.2	MG/L	THREE/GRAB WEEK
SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	DLY MAX		
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		0NODI NODI
50060 T 1	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	.2	MG/L	THREE/GRAB WEEK
SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	DLY MAX		
	SAMPLE MEASUREMENT								
	PERMIT REQUIREMENT								

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
JOSEPH J. HAGAN
G.M. - Salem Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 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 **94 05 18**
 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

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 **483A**
 PERMIT NUMBER DISCHARGE NUMBER

FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622**

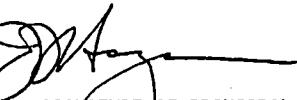
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
94	04	01		94	04	30
(20-21)(22-23)(24-25)				(26-27)(28-29)(30-31)		

NON-CONTACT COOLING WATER
MAJOR SALEM
SOUTHERN REGION

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)		UNITS	(4 Card Only) QUALITY OR CONCENTRATION (54-61)			UNITS	NO. EX-192 (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		QUANTITY OR LOADING	UNITS		QUALITY OR CONCENTRATION	UNITS					
PH	SAMPLE MEASUREMENT	*****	*****		7.3	*****	7.9			0	WEEKLY GRAB
00400 1 0	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU			WEEKLY GRAB
EFFLUENT GROSS VALUE				****	MINIMUM		MAXIMUM				
PH	SAMPLE MEASUREMENT	*****	*****		7.0	*****	8.1			0	WEEKLY GRAB
00400 7 0	PERMIT REQUIREMENT	*****	*****	****	REPORT	*****	REPORT	SU			WEEKLY GRAB
INTAKE FROM STREAM				****	MINIMUM		MAXIMUM				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	500.6	553.5		*****	*****	*****			0	CONTINUOUS
50050 1 0	PERMIT REQUIREMENT	REPORT	REPORT	****	*****	*****	*****	****			CONTINUOUS
EFFLUENT GROSS VALUE		MNTH AVG	DLY MAX	MGD				***			
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1			0	THREE/GRAB WEEK
50060 R 1	PERMIT REQUIREMENT	*****	*****	****	*****	.3	.5	MG/L			THREE/GRAB WEEK
SEE COMMENTS BELOW				****		MNTH AVG	DLY MAX				
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1			0	THREE/GRAB WEEK
50060 S 1	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	.2	MG/L			THREE/GRAB WEEK
SEE COMMENTS BELOW				****		MNTH AVG	DLY MAX				
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			0	NODI NODI
50060 T 1	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	.2	MG/L			THREE/GRAB WEEK
SEE COMMENTS BELOW				****		MNTH AVG	DLY MAX				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
JOSEPH J. HAGAN
G.M. - Salem Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 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: **609 935-6000**
 DATE: **94 05 18**
 AREA CODE NUMBER YEAR MO DAY

PARAMETER 50060 LOCATIONS: "R" = SWS DSCHG (NO CWS FLOW) "S" = SWS DSCHG (NORMAL COND) "T" = CWS DSCHG
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WHEN MAIN CONDENSERS ARE CHLORINATED, MONITOR TRC 3 TIMES PER WEEK DURING 2-HR PERIODS OF CHLORINATION.

PERMITTEE NAME/ADDRESS

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

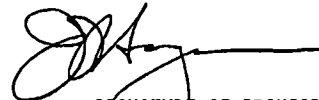
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

NJ0005622			484A				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	04	01		94	04	30
(20-21)(22-23)(24-25)			(26-27)(28-29)(30-31)				

NON-CONTACT COOLING WATER
MAJOR SALEM
SOUTHERN REGION

FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622**

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)		UNITS	(4 Card Only) QUALITY OR CONCENTRATION (46-53)		UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		REPORT Mnth Avg	REPORT Dly Max		MINIMUM	MAXIMUM				
PH	SAMPLE MEASUREMENT	*****	*****		6.4	*****	7.7			0WEEKLYGRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU		WEEKLYGRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.0	*****	8.1			0WEEKLYGRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	*****	REPORT MAXIMUM	SU		WEEKLYGRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	477.2	547.9		*****	*****	*****			0CONTINUOUS
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		CONTINUOUS
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			0NODI NODI
50060 R 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 Mnth Avg	.5 Dly Max	MG/L		THREE/GRAB WEEK
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1			0THREE/GRAB WEEK
50060 S 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	.2 Dly Max	MG/L		THREE/GRAB WEEK
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			0NODI NODI
50060 T 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	.2 Dly Max	MG/L		THREE/GRAB WEEK
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH J. HAGAN G.M. - Salem Operations	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN- AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 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	94	05	18	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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 EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. LABS: 17327 08153 82888 PAGE 8 OF 17

PERMITTEE NAME/ADDRESS

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			485A				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	04	01		94	04	30
(20-21)(22-23)(24-25)			(26-27)(28-29)(30-31)				

NON-CONTACT COOLING WATER
MAJOR SALEM
SOUTHERN REGION

FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622**

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (48-53)		UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. OF ANALYSIS (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		QUANTITY	LOADING		MINIMUM	MAXIMUM	CONCENTRATION				
PH	SAMPLE MEASUREMENT	*****	*****		6.5	*****	7.7		0	WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.0	*****	8.1		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	476.0	536.3		*****	*****	*****		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		0	NODI	NODI
50060 R 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 Mnth Avg	.5 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	.2 Dly Max	MG/L		THREE/WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		0	NODI	NODI
50060 T 1 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	.2 Dly Max	MG/L		THREE/WEEK	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOSEPH J. HAGAN G.M. - Salem Operations	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 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		
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TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-18) (17-19)

NJ0005622 **486A**
 PERMIT NUMBER DISCHARGE NUMBER

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

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	04	01		94	04	30
	(20-21)(22-23)(24-25)			(26-27)(28-29)(30-31)			

NON-CONTACT COOLING WATER
MAJOR SALEM
SOUTHERN REGION

DMR NUMBER: **NJ0005622**

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)			UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		*****	*****	UNITS	*****	*****	*****				
PH	SAMPLE MEASUREMENT	*****	*****		6.9	*****	7.7			0	WEEKLYGRAB
00400 1 0	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU			WEEKLYGRAB
EFFLUENT GROSS VALUE				****	MINIMUM		MAXIMUM				
PH	SAMPLE MEASUREMENT	*****	*****		7.0	*****	8.1			0	WEEKLYGRAB
00400 7 0	PERMIT REQUIREMENT	*****	*****	****	REPORT	*****	REPORT	SU			WEEKLYGRAB
INTAKE FROM STREAM				****	MINIMUM		MAXIMUM				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	513.2	553.5		*****	*****	*****			0	CONTINUOUS
50050 1 0	PERMIT REQUIREMENT	REPORT	REPORT	****	*****	*****	*****	****		0	CONTINUOUS
EFFLUENT GROSS VALUE		MNTH AVG	DLY MAX	MGD				***			
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			0	NODI NODI
50060 R 1	PERMIT REQUIREMENT	*****	*****	****	*****	.3	.5	MG/L		3	THREE/GRAB WEEK
SEE COMMENTS BELOW				****		MNTH AVG	DLY MAX				
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1			0	THREE/GRAB WEEK
50060 S 1	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	.2	MG/L		3	THREE/GRAB WEEK
SEE COMMENTS BELOW				****		MNTH AVG	DLY MAX				
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		NODI	NODI	NODI			0	NODI NODI
50060 T 1	PERMIT REQUIREMENT	*****	*****	****	REPORT	REPORT	.2	MG/L		3	THREE/GRAB WEEK
SEE COMMENTS BELOW				****	MINIMUM	MNTH AVG	DLY MAX				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
JOSEPH J. HAGAN
G.M. - Salem Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 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.)

Joseph J. Hagan
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE **609 935-6000** DATE **94 05 18**
 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

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

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

DMR NUMBER: **NJ0005622**

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

NJ0005622 **487A**
 PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
94	04	01		94	04	30

(20-21)(22-23)(24-25) (26-27)(28-29)(30-31)

STORM H20 DSCHG. DSN487
MAJOR SALEM
SOUTHERN REGION

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		*****	*****	UNITS	*****	*****	*****				
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	CODE=N	CODE=N	MG/L	0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	REPORT Dly Max			ANNUAL	COMPOS
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 2 1 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	CODE=N	CODE=N	MG/L	0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	100 Dly Max			ANNUAL	CALCTD
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 7 1 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****	****	*****	CODE=N	CODE=N	MG/L	0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	REPORT Dly Max			ANNUAL	COMPOS
PH 00400 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	6.0	*****	9.0	SU	0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****	****	MINIMUM	*****	MAXIMUM			ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	CODE=N	CODE=N	MG/L	0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	REPORT Dly Max			ANNUAL	COMPOS
SOLIDS, TOTAL SUSPENDED 00530 2 1 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	CODE=N	CODE=N	MG/L	0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****	****	*****	30 Mnth Avg	100 Dly Max			ANNUAL	CALCTD
SOLIDS, TOTAL SUSPENDED 00530 7 1 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****	****	*****	CODE=N	CODE=N	MG/L	0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	REPORT Dly Max			ANNUAL	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
JOSEPH J. HAGAN
G.M. - Salem Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 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.)

Joseph J. Hagan
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE **609 935-6000** DATE **94 05 18**
 AREA CODE NUMBER YEAR MO DAY

PERMITTEE NAME/ADDRESS

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

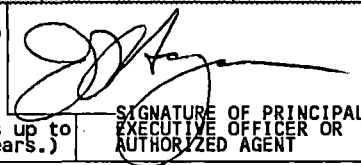
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

NJ0005622			487A				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	04	01		94	04	30
	(20-21)(22-23)(24-25)				(26-27)(28-29)(30-31)		

STORM H2O DSCHG. DSN487
MAJOR SALEM
SOUTHERN REGION

FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622**

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. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		*****	*****		*****	*****	*****				
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	CODE=N	CODE=N	MG/L	0	CODE=N	CODE=N
	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	*****	*****	*****	*****	CODE=N	CODE=N	MG/L	0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****	****	*****	10 Mnth Avg	15 Dly Max	MG/L		ANNUAL	CALCTD
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 7 1 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****	*****	*****	CODE=N	CODE=N	MG/L	0	CODE=N	CODE=N
	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	CODE=N	CODE=N	*****	*****	*****	*****	MGD	0	CODE=N	CODE=N
	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 JOSEPH J. HAGAN G.M. - Salem Operations	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 18 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	94 05 18	AREA CODE	NUMBER	YEAR
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					

PERMITTEE NAME/ADDRESS

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 **489A**
 PERMIT NUMBER DISCHARGE NUMBER

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

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
94 04 01 94 04 30
 (20-21)(22-23)(24-25) (26-27)(28-29)(30-31)

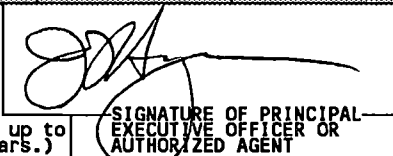
STORMWATER
MAJOR SALEM
SOUTHERN REGION

DMR NUMBER: **NJ0005622**

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		*****	*****	UNITS	*****	*****	UNITS				
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX	MG/L	*****	ANNUAL	COMPOS
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 2 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	100 DLY MAX	MG/L	*****	ANNUAL	CALCTD
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 7 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX	MG/L	*****	ANNUAL	COMPOS
PH 00400 1 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	*****	ANNUAL	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX	MG/L	*****	ANNUAL	COMPOS
SOLIDS, TOTAL SUSPENDED 00530 2 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 MNTH AVG	100 DLY MAX	MG/L	*****	ANNUAL	CALCTD
SOLIDS, TOTAL SUSPENDED 00530 7 1	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX	MG/L	*****	ANNUAL	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
JOSEPH J. HAGAN
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TELEPHONE **609 935-6000** DATE **94 05 18**
 AREA CODE NUMBER YEAR MO DAY

PERMITTEE NAME/ADDRESS

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 **489A**
 PERMIT NUMBER DISCHARGE NUMBER

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

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
94 04 01 **94 04 30**
 (20-21)(22-23)(24-25) (26-27)(28-29)(30-31)


STORMWATER
MAJOR SALEM
SOUTHERN REGION

DMR NUMBER: **NJ0005622**

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)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		UNITS	UNITS	UNITS	UNITS	UNITS	UNITS			
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	CODE=N	CODE=N	0	CODE=N	CODE=N
	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	*****	*****	*****	*****	CODE=N	CODE=N	0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****	****	*****	10 Mnth Avg	15 Dly Max	MG/L	ANNUAL	CALCTD
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 7 1 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****	*****	*****	CODE=N	CODE=N	0	CODE=N	CODE=N
	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	CODE=N	CODE=N	*****	*****	*****	*****	0	CODE=N	CODE=N
	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
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 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE **609 935-6000** DATE **94 05 18**
 AREA CODE NUMBER YEAR MO DAY

PERMITTEE NAME/ADDRESS

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			87BA				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	04	01		94	04	30
	(20-21)(22-23)(24-25)				(26-27)(28-29)(30-31)		

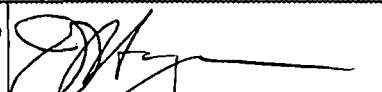
#3 SKIM TANK-DSN487B IN PERMIT MAJOR SALEM SOUTHERN REGION

FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622**

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)		UNITS	(4 Card Only) QUALITY OR CONCENTRATION (46-53)		UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		*****	*****		*****	*****				
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		ONODI	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	43.3 DLY MAX	DEG.C	ONCE/MONTH	GRAB
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 0	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		ONODI	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	100 DLY MAX	MG/L	ONCE/MONTH	GRAB
PH 00400 1 0	SAMPLE MEASUREMENT	*****	*****		NODI	*****	NODI		ONODI	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		ONODI	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 Mnth Avg	100 DLY MAX	MG/L	ONCE/MONTH	GRAB
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 0	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		ONODI	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	10 Mnth Avg	15 DLY MAX	MG/L	ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	SAMPLE MEASUREMENT	NODI	NODI		*****	*****	*****		ONODI	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT DLY MAX	MGD	*****	*****	*****	****	ONCE/MONTH	CALCTD
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
JOSEPH J. HAGAN
G.M. - Salem Operations
 TYPED OR PRINTED

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 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
609 935-6000		94	05	18
AREA CODE	NUMBER	YEAR	MO	DAY

PERMITTEE NAME/ADDRESS

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

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

DMR NUMBER: **NJ0005622**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-18) (17-19)

NJ0005622 **89AA**
 PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
94	04	01	94	04	30

(20-21)(22-23)(24-25) (26-27)(28-29)(30-31)

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
				UNITS			UNITS			
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	11	11		ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	100 DLY MAX	MG/L	ONCE/MONTH	GRAB
PH 00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		7.2	*****	7.2		ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	8	8		ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	30 Mnth Avg	100 DLY MAX	MG/L	ONCE/MONTH	GRAB
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	0	0		ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	10 Mnth Avg	15 DLY MAX	MG/L	ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0027	0.0027		*****	*****	*****		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
JOSEPH J. HAGAN
G.M. - Salem Operations
 TYPED OR PRINTED

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[Signature]
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE **609 935-6000** DATE **94 05 18**
 AREA CODE NUMBER YEAR MO DAY

PERMITTEE NAME/ADDRESS

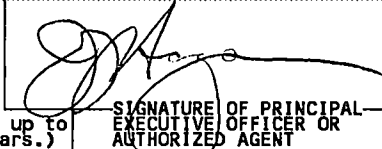
NAME **PSE&G**
 ADDRESS **P.O. BOX 236/N21**
HANCOCKS BRIDGE, NJ 08038

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

NJ0005622			89BA				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	04	01		94	04	30
	(20-21)(22-23)(24-25)				(26-27)(28-29)(30-31)		

#2 SKIM TANK-DSN489B IN PERMIT MAJOR SALEM SOUTHERN REGION

FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622**

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		QUANTITY OR LOADING	UNITS	UNITS	UNITS	UNITS						
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD) 00340 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 10	< 10	MG/L	0	ONCE/MONTH	GRAB	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	100 DLY Max	MG/L		ONCE/MONTH	GRAB	
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.0	*****	7.0	BU	0	ONCE/MONTH	GRAB	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	BU		ONCE/MONTH	GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	22	22	MG/L	0	ONCE/MONTH	GRAB	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 Mnth Avg	100 DLY Max	MG/L		ONCE/MONTH	GRAB	
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT	SAMPLE MEASUREMENT	*****	*****	*****	*****	1	1	MG/L	0	ONCE/MONTH	GRAB	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	10 Mnth Avg	15 DLY Max	MG/L		ONCE/MONTH	GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0028	0.0028	*****	*****	*****	*****	MGD	0	ONCE/MONTH	CALCTD	
EFFLUENT GROSS VALUE	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	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HERETIN- 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 § 1310. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)							TELEPHONE	DATE			
JOSEPH J. HAGAN G.M. - Salem Operations								609 935-6000	94	05	18	
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT							AREA CODE	NUMBER	YEAR	MO	DAY