



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

May 17, 1995

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 1995.

This report is required by and prepared specifically for the Environmental Protection Agency (EPA) and the New Jersey Department of Environmental Protection (NJDEP). It presents only the observed results of measurements and analyses required to be performed by the above agencies. The choice of the measurement devices and analytical methods is controlled by EPA and NJDEP, not by the company, and there are limitations on the accuracy of such measurement devices and analytical techniques even when used and maintained as required. Accordingly, this report is not intended as an assertion that any instrument has measured, or any reading or analytical result represents, the true value with absolute accuracy, nor is it an endorsement of the suitability of any analytical or measurement procedure.

Very truly yours,

John C. Summers
General Manager -
Salem Operations

SRT:pc
Attachments

9506010036 950430
PDR ADCK 05000272
R PDR

IE25
||

C Mr. Gerald M. Hansler - Executive Director
USNRC - Document Control Desk
Manager-Licensing & Regulations
M. Vaskis
D. Hurka
Central Record Facility
File
RPC95-106

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. (NJDEP certification 08153). Bioassay results are provided by AnalytiKEM Inc. (NJDEP certification 82888).

Net negative discharge values are reported as negative.

487B Flow calculated as per permit based on Wilmington NWS Data

489C Flow thru outfall 489 is calculated based on Oil Water Separator Lift Pump run times.

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

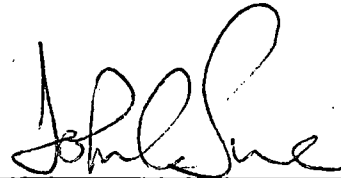
<u>DMR NO.</u>	<u>EXPLANATION</u>
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NONE	
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COUNTY OF SALEM
STATE OF NEW JERSEY

I, John C. Summers, of full age, being duly sworn according to law, upon my oath depose and say:

1. I am 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.



John C. Summers
General Manager -
Salem Operations

Sworn and subscribed before me
this 22 day of May 1995.



BARBARA A. POWELL
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires Dec. 2, 1998
ID # 2160323

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO. 0005622 REPORTING PERIOD
 MO. YR. 0495 THRU MO. YR. 0495

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

FACILITY: Name Salem Nuclear 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) VMX-016 VMX-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) Robert M. Allen

Grade & Registry No. N-2 N-0965

Signature *Robert M. Allen*

Date 05/17/95

PRINCIPAL EXECUTIVE OFFICER or
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) John C. Summers

Title (Printed) G.M. Salem Operations

Signature *John C. Summers*

Date 05/17/95

DSN-487B - There were no discharges from this monitoring point during
the reporting period.

Multiple horizontal lines for reporting details.

HOURS ATTENDED AT PLANT

Month 04 Year 95

Day of Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Licensed Operator	0	0	8	8	8	8	8	0	0	8	8	8	8	0	0	0
Others	0	0	4	4	4	4	4	0	0	4	4	4	4	0	0	0
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	0	0	8	8	8	8	8	0	0		
Others	4	4	4	4	4	0	0	4	4	4	4	4	0	0		

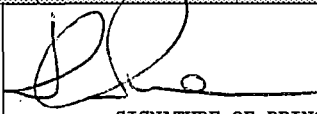
NAME PSE&G
ADDRESS P.O. BOX 236/N21
HANCOCKS BRIDGE, NJ 08038

NJ0005622			FACA				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	04	01		95	04	30
	(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

THERMAL DSCHG FOR DSN 481-483
SOUTHERN REGION / SALEM

FACILITY PSE&G SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK, NJ 08038
DMR NUMBER: NJ0005622 FACA 041995

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	*****	*****	*****				
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0	SAMPLE MEASUREMENT	*****	*****	UNITS	*****	19.3	22.7	DEG.C	0	CONTIN	CONTIN
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	46.1	DEG.C		CONTIN	CONTIN
TEMPERATURE, WATER DEG. CENTIGRADE 00010 2 0	SAMPLE MEASUREMENT	*****	*****	UNITS	*****	6.8	8.3	DEG.C	0	CONTIN	CALCTD
EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	15.3	DEG.C		CONTIN	CALC
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 0	SAMPLE MEASUREMENT	*****	*****	UNITS	*****	12.4	15.8	DEG.C	0	CONTIN	CONTIN
INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT	DEG.C		CONTIN	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOHN C. SUMMERS 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			
			509 935-6000	95 05 16			
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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.

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

MAJOR


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

NJ0005622		FACB					
PERMIT NUMBER		DISCHARGE NUMBER					
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	04	01		95	04	30
	(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

THERMAL DSCHG FOR DSN 484-486
SOUTHERN REGION / SALEM

FACILITY PSE&G SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK, NJ 08038
DMR NUMBER: NJ0005622 FACB 041995

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. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		UNITS	UNITS	UNITS	UNITS	UNITS	UNITS	UNITS			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0	SAMPLE MEASUREMENT	*****	*****	UNITS	*****	20.7	24.6	UNITS	0	CONTIN	CONTIN
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	46.1	DEG. C	0	CONTIN	CONTIN
TEMPERATURE, WATER DEG. CENTIGRADE 00010 2 0	SAMPLE MEASUREMENT	*****	*****	UNITS	*****	8.3	9.0	UNITS	0	CONTIN	CALCTD
EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	15.3	DEG. C	0	CONTIN	CALC
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 0	SAMPLE MEASUREMENT	*****	*****	UNITS	*****	12.4	15.8	UNITS	0	CONTIN	CONTIN
INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT	DEG. C	0	CONTIN	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOHN C. SUMMERS 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	95 05 16	AREA CODE	NUMBER	YEAR
TYPED OR PRINTED							

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

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 FACC 041995

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

NJ0005622
 PERMIT NUMBER

FACC
 DISCHARGE NUMBER

MONITORING PERIOD

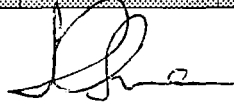
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	04	01		95	04	30

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

THERMAL DSCHG FOR DSN 481-486

MAJOR SALEM
 SOUTHERN REGION

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)		UNITS	(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)
		REPORT Mnth Avg	30600 Dly Max		*****	*****	*****				
THERMAL DISCHARGE MILLION BTUS PER HR.	SAMPLE MEASUREMENT	12456	14273		*****	*****	*****			0	CONTINUAL
00015 2 0	PERMIT REQUIREMENT	REPORT Mnth Avg	30600 Dly Max	MBTU/HR	*****	*****	*****	****			CONTINUAL
EFFLUENT NET VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	2585	2759		*****	*****	*****			0	DAILY
50050 7 0	PERMIT REQUIREMENT	3024 Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****			DAILY
INTAKE FROM STREAM	SAMPLE MEASUREMENT				*****	*****	*****	***			CALC
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOHN C. SUMMERS 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	95 05 16			
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

NJ0005622 048C
PERMIT NUMBER DISCHARGE NUMBER
MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
95 04 01 95 04 30
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

FACILITY PSE&G SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK, NJ 08038
DMR NUMBER: NJ0005622 048C 041995

SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)		UNITS	(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)
		MEASUREMENT	PERMIT REQUIREMENT		MEASUREMENT	PERMIT REQUIREMENT	MEASUREMENT				
SOLIDS, TOTAL SUSPENDED 00530 1 0	*****	*****	*****		*****	10	17		0	TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE	*****	*****	*****	****	*****	30	100	MG/L		TWICE/MONTH	COMPOS
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 0	*****	*****	*****		*****	< 0.5	< 0.5		0	TWICE/MONTH	GRAB
EFFLUENT GROSS VALUE	*****	*****	*****	****	*****	10	15	MG/L		TWICE/MONTH	GRAB
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0	*****	*****	*****		*****	23	35		0	TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE	*****	*****	*****	****	*****	35	70	MG/L		TWICE/MONTH	COMPOS
CARBON, TOT ORGANIC (TOC) 00680 1 0	*****	*****	*****		*****	3	3		0	TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE	*****	*****	*****	****	*****	REPORT	50	MG/L		TWICE/MONTH	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	0.189	0.421			*****	*****	*****		0	DAILY	CALCTD
EFFLUENT GROSS VALUE	REPORT	REPORT		MGD	*****	*****	*****	****		DAILY	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
JOHN C. SUMMERS
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: 609 935-6000
DATE: 95 05 16

TYPED OR PRINTED

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

MAJOR

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

NJ0005622			481A				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	04	01		95	04	30
	(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

SOUTHERN REGION / SALEM

FACILITY PSE&G SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK, NJ 08038
DMR NUMBER: NJ0005622 481A 041995

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			(46-53)			NO. EX (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		UNITS	UNITS	UNITS	UNITS	UNITS	UNITS						
LC50 STATRE 96HR ACU CYPRINODON TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.0	*****	*****	8.3	*****	*****	*****	*****	*****
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	*****	9.0	*****	*****	*****	*****	*****
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.6	*****	*****	8.3	*****	*****	*****	*****	*****
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	*****	REPORT MINIMUM	*****	*****	REPORT MAXIMUM	*****	*****	*****	*****	*****
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	481.5000	482.1000	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	*****	*****	*****	*****	*****	*****
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	*****	NODI	*****	*****	*****	*****	*****
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	.3 Mnth Avg	*****	.5 Dly Max	*****	*****	*****	*****	*****
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.1	*****	< 0.1	*****	*****	*****	*****	*****
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT Mnth Avg	*****	.2 Dly Max	*****	*****	*****	*****	*****

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 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
JOHN C. SUMMERS G.M. - SALEM OPERATIONS		609 935-6000	95 05 16
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE

PARAMETER 50060 LOCATIONS: "R" = SWS DSCHG (NO CWS FLOW) "S" = SWS DSCHG (NORMAL COND)
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.
EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. LABS: 17327 08153 82888 PAGE 1 OF 1

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

MAJOR

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

NJ0005622		482A					
PERMIT NUMBER		DISCHARGE NUMBER					
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	04	01		95	04	30
	(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

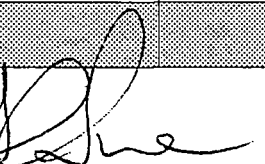
FACILITY PSE&G SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK, NJ 08038
DMR NUMBER: NJ0005622 482A 041995

SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		UNITS	UNITS	UNITS	UNITS	UNITS	UNITS			
LC50 STATRE 96HR ACU CYPRINODON TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	CODE=N	*****	*****		0	CODE=N
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.6	*****	8.2		0	WEEKLY GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0	SU		WEEKLY GRAB
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.6	*****	8.3		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	473.1000	473.2000		*****	*****	*****		0	DAILY CALCTD
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		DAILY CALCTD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI		0	NODI NODI
50060 R 0 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		0	THREE/GRAB WEEK
50060 S 0 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
JOHN C. SUMMERS
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
509 935-6000
DATE
95 05 16
AREA CODE NUMBER YEAR MO DAY

PARAMETER 50060 LOCATIONS: "R" = SWS DSCHG (NO CWS FLOW) "S" = SWS DSCHG (NORMAL COND)
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.
EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. LABS: 17327 08153 82888 PAGE 1 OF 1

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)

MAJOR


NJ0005622 483A
 PERMIT NUMBER DISCHARGE NUMBER

FACILITY PSE&G SALEM GENERATING STATION
 LOCATION LOWER ALLOWAYS CREEK, NJ 08038
 DMR NUMBER: NJ0005622 483A 041995

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	04	01		95	04	30
	(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

SOUTHERN REGION / SALEM

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)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		QUANTITY	LOADING	UNITS	UNITS	UNITS	UNITS			
LC50 STATRE 96HR ACU CYPRINODON TAN6A 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	CODE=N	*****	*****	0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****	****	50	*****	*****		QTRLY	
PH	SAMPLE MEASUREMENT	*****	*****		7.3	*****	8.2		WEEKLY	GRAB
	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0		WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	MINIMUM	*****	MAXIMUM		WEEKLY	GRAB
	PERMIT REQUIREMENT	*****	*****	****	7.6	*****	8.3		WEEKLY	GRAB
00400 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****	****	REPORT	*****	REPORT		WEEKLY	GRAB
	PERMIT REQUIREMENT	*****	*****	****	MINIMUM	*****	MAXIMUM		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	461.3000	472.7000		*****	*****	*****		DAILY	CALCTD
	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****	DAILY	CALCTD
50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		WEEKLY	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	.3	.5		THREE/	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	****	*****	MNTH AVG	DLY MAX		WEEK	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	< 0.1	< 0.1		THREE/	GRAB
50060 R 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	****	*****	REPORT	.2		THREE/	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	MNTH AVG	DLY MAX		WEEK	GRAB
50060 S 0 SEE COMMENTS BELOW	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 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			
JOHN C. SUMMERS G.M. - SALEM OPERATIONS			609 935-6000	95 05 16			
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

PARAMETER 50060 LOCATIONS: "R" = SWS DSCHG (NO CWS FLOW) "S" = SWS DSCHG (NORMAL COND)
 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.
 EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. LABS: 17327 08153 82888 PAGE 1 OF 1

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

NJ0005622			484A		
PERMIT NUMBER			DISCHARGE NUMBER		
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
95	04	01	95	04	30
(20-21) (22-23) (24-25)		(26-27) (28-29) (30-31)			

FACILITY PSE&G SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK, NJ 08038
DMR NUMBER: NJ0005622 484A 041995

FROM

TO

SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT	(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)
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****	*****		CODE=N	*****	*****			0	CODE=N
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	****	50 DAILY MN	*****	*****	PERCENT		QTRLY	
PH	SAMPLE MEASUREMENT	*****	*****	*****		7.0	*****	8.3			0	WEEKLY GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		0	WEEKLY GRAB
PH	SAMPLE MEASUREMENT	*****	*****	*****		7.6	*****	8.3			0	WEEKLY GRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	*****	****	REPORT MINIMUM	*****	REPORT MAXIMUM	SU		0	WEEKLY GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	429.9000	494.7000	*****		*****	*****	*****			0	DAILY CALCTD
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT DLY MAX	*****	MGD	*****	*****	*****	****		0	DAILY CALCTD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****		*****	NODI	NODI			0	NODI NODI
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	****	*****	.3 Mnth Avg	.5 DLY MAX	MG/L		0	THREE/GRAB WEEK
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****		*****	< 0.1	< 0.1			0	THREE/GRAB WEEK
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	****	*****	REPORT Mnth Avg	.2 DLY MAX	MG/L		0	THREE/GRAB WEEK
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
JOHN C. SUMMERS
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	95	05	16
AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NJ0005622		485A					
PERMIT NUMBER		DISCHARGE NUMBER					
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	04	01		95	04	30
	(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

FACILITY **PSE&G SALEM GENERATING STATION**
LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
DMR NUMBER: **NJ0005622 485A 041995**

SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT	(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)
		PERMIT REQUIREMENT	PERMIT REQUIREMENT		PERMIT REQUIREMENT	PERMIT REQUIREMENT	PERMIT REQUIREMENT				
LC50 STATRE 96HR ACU CYPRINODON TAN6A 1 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	CODE=N	*****	*****	PERCENT	0	CODE=N	CODE=N
PH	*****	*****	*****	*****	6.9	*****	8.2	WEEKLY	0	WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	6.0	*****	9.0	SU	0	WEEKLY	GRAB
PH	*****	*****	*****	*****	7.6	*****	8.3	WEEKLY	0	WEEKLY	GRAB
00400 7 0 INTAKE FROM STREAM	*****	*****	*****	*****	REPORT	*****	REPORT	SU	0	WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	*****	409.1000	447.8000	*****	*****	*****	*****	0	DAILY	CALCTD	
50050 1 0 EFFLUENT GROSS VALUE	*****	REPORT	REPORT	MGD	*****	*****	*****	*****	DAILY	CALCTD	
CHLORINE, TOTAL RESIDUAL	*****	*****	*****	*****	*****	NODI	NODI	0	NODI	NODI	
50060 R 0 SEE COMMENTS BELOW	*****	*****	*****	*****	*****	.3	.5	MG/L	THREE/	GRAB	
CHLORINE, TOTAL RESIDUAL	*****	*****	*****	*****	*****	< 0.1	< 0.1	0	THREE/	GRAB	
50060 S 0 SEE COMMENTS BELOW	*****	*****	*****	*****	*****	REPORT	.2	MG/L	THREE/	GRAB	
	*****	*****	*****	*****	*****	MNTH AVG	DLY MAX		WEEK		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
JOHN C. SUMMERS
G.M. - SALEM OPERATIONS

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE	
609	935-6000	95	05 16
AREA CODE	NUMBER	YEAR	MO DAY

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


MAJOR

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

NJ0005622		486A					
PERMIT NUMBER		DISCHARGE NUMBER					
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	04	01		95	04	30
	(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

SOUTHERN REGION / SALEM

FACILITY **PSE&G SALEM GENERATING STATION**
LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
DMR NUMBER: **NJ0005622 486A 041995**

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53)			NO. EX (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)		
		UNITS	UNITS	UNITS	UNITS	UNITS	UNITS					
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****	UNITS	CODE=N	*****	*****		0	CODE=N		
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 DAILY MN	*****	*****	PERCE NT	0	TRLY		
PH	SAMPLE MEASUREMENT	*****	*****		7.0	*****	8.2		0	WEEKLY GRAB		
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY GRAB		
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	8.3		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	401.7000	468.7000		*****	*****	*****		0	DAILY CALCTD		
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTN AVG	REPORT DLY MAX	MGD	*****	*****	*****	****		DAILY CALCTD		
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		0	NODI NODI		
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 MNTN AVG	.5 DLY MAX	MG/L		THREE/GRAB WEEK		
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1		0	THREE/GRAB WEEK		
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTN AVG	.2 DLY MAX	MG/L		THREE/GRAB WEEK		
	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 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		
JOHN C. SUMMERS G.M. - SALEM OPERATIONS								609 935-6000		95	05	16
TYPED OR PRINTED								SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR

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

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

#3 OIL SKIM TANK DSN-487B


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

NJ0005622		487B					
PERMIT NUMBER		DISCHARGE NUMBER					
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	04	01		95	04	30
	(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

MAJOR SALEM
SOUTHERN REGION

FACILITY **PSE&G SALEM GENERATING STATION**
LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
DMR NUMBER: **NJ0005622 487B 041995**

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	*****	*****	*****				
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI	DEG.C	0	NODI	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTN AVG	43.3 DLY MAX			ONCE/ DISCHG	GRAB
PH	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI			0	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		ONCE/ DISCHG	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI			0	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTN AVG	100 DLY MAX	MG/L		ONCE/ DISCHG	GRAB
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI			0	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTN AVG	15 DLY MAX	MG/L		ONCE/ DISCHG	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI			0	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTN AVG	50 DLY MAX	MG/L		ONCE/ DISCHG	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	SAMPLE MEASUREMENT	NODI	NODI	*****	*****	*****	*****			0	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTN AVG	REPORT DLY MAX	MGD	*****	*****	*****	****		ONCE/ DISCHG	CALC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER JOHN C. SUMMERS 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		
			AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED			609	935-6000	95	05	16

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

NJ0005622		489C					
PERMIT NUMBER		DISCHARGE NUMBER					
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	95	04	01		95	04	30
	(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

SOUTHERN REGION / SALEM

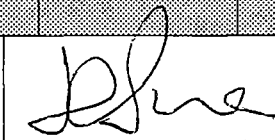
FACILITY PSE&G SALEM GENERATING STATION
LOCATION LOWER ALLOWAYS CREEK, NJ 08038
DMR NUMBER: NJ0005622 489C 041995

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 (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		UNITS	UNITS	UNITS	UNITS	UNITS	UNITS				
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.6		0	ONCE/MONTH	GRAB
00400 1 0	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0		0	ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE		*****	*****	****	MINIMUM	*****	MAXIMUM				
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****		7		0	ONCE/MONTH	GRAB
00530 1 0	PERMIT REQUIREMENT	*****	*****	****	*****		30		0	ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE		*****	*****	****	*****		MNTH AVG		0	ONCE/MONTH	GRAB
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT	SAMPLE MEASUREMENT	*****	*****		*****		0		0	ONCE/MONTH	GRAB
00551 1 0	PERMIT REQUIREMENT	*****	*****	****	*****		10		0	ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE		*****	*****	****	*****		MNTH AVG		0	ONCE/MONTH	GRAB
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	*****	*****		*****		4		0	ONCE/MONTH	GRAB
00680 1 0	PERMIT REQUIREMENT	*****	*****	****	*****		REPORT		0	ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE		*****	*****	****	*****		MNTH AVG		0	ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0546	0.0546		*****		*****		0	ONCE/MONTH	CALCTD
50050 1 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****		*****		0	ONCE/MONTH	CALCTD
EFFLUENT GROSS VALUE		MNTH AVG	DLY MAX		*****		*****		0	ONCE/MONTH	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
JOHN C. SUMMERS
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		DATE	
609.935-6000	95 05 16		
AREA CODE	NUMBER	YEAR	MO DAY

TOTAL SUSPENDED SOLIDS SHALL NOT EXCEED A 7-DAY AVERAGE OF 45 MG/L. THIS DISCHARGE IS DESIGNATED AS DSN 489 IN PERMIT