MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.

REPORTING PERIOD

MO. YR.

MO. YR.

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0 | 5 | 9 | 5 |

PERMITTEE:	Name _	Public Service Electric	and Gas Company							
	Address	P.O. Box 236								
		Hancock's Bridge, NJ C	08038							
FACILITY:	Name _	Salem Nuclear Generati	ing Station							
	Address	Allaman Onale Nach Da								
	Address	Alloway Creek Neck Ro	oau							
		Hancock's Bridge	(County) Salem							
	Telepho	ne (609) 935-6000								
FORMS ATTAC	HED (Indica	te <u>Quantity</u> of Each)	OPERATING EXCEPTIONS							
SLUDGE REPORTS				YES	NO					
T-VWX-007	T-∨	WX-008 T-VWX-009	DYE TESTING		\boxtimes					
SLUDGE REPORTS -	- Industrial		TEMPORARY BYPASSING		\boxtimes					
T-VWX-010	A T-V	WX-010B	DISINFECTION INTERRUPTION		\boxtimes					
WASTEWATER REP	ORTS		MONITORING MALFUNCTIONS		\boxtimes					
T-VWX-011		WX-012 T-VWX-013	UNITS OUT OF OPERATION		\boxtimes					
GROUNDWATER RE		_	OTHER		\boxtimes					
☐ VWX-015(A		X-016	(Detail any "Yes" on reverse side	;						
NPDES DISCHARGE	MONITORING	S REPORT	in appropriate space.)							
12 EPA FORM 3	3320-1		NOTE: The "Hours Attended at a reverse of this sheet must also b							
AUTHENTICAT	inform of thos submit	ation submitted in this docu se individuals immediately re tted information is true, acc	I have personally examined and am fami ument and all attachments and that, base esponsible for obtaining the information, urate and complete. I am aware that their mation including the possibility of fine an	d on my I believe re are s	y inquiry e the ignifican					
LICENSED OPER	RATOR		PRINCIPAL EXECUTIVE OFFICER or DULY AUTHORIZED REPRESENTATION	VE						
Name (Printed)	Robert M. A	llen	Name (Printed) John C. Summers							
Grade & Registr	Registry No. N-2 N-0965 Title (Printed) G.M. Salem Operation									
Signature	Phin	1 all /	Signature GMS							
Data 06/16	/95	,	Date denomination of holos							

DSN-487B	- The	re w	ere 1	no	discharge	s fro	m this	monito	ring	point	during
	the	rep	orti	ng	period.						
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		-									

HOURS ATTENDED AT PLANT

Month 0 5 Year 9 5

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

NAME	_PSE&G
ADDRESS	P.O. BOX 236/N21
	HANCOCKS BRIDGE, NJ 08038
FACILITY	PSE&G SALEM GENERATING STATION

THERMAL DSCHG FOR DSN 481-483 SOUTHERN REGION / SALEM

LOCATION LOWER ALLOWAYS	CREEK, NJ	08038	_				OUTHERN REC	SION /	SALE	M	
DMR NUMBER: NJ0005622	2 FACA	051995		22-23)(24		8-29)(30-31)				<u>. </u>	
PARAMEIER (32-37)	• • • • •	(3 Card Only) (QUANTITY OR LOADIN	IG	(4 Card Only) (38-45)	QUALITY OR CONCEN	ITRATION (54-61)		NO. FREQ	. SA	MPLE
(32-37)				UNITS				UNITS	(62 ANALYS (64-68		MPLE YPE -70)
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	****		****	19.7	24.8		OCONT:	INCO	MITK
00010 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	*****	****	****	REPORT MNTH AVG		DEG.C	CONT	INCO	NTIN
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	****	****		****	***************************************	8.7		0 CONT	INCA	rc
00010 2 0 EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	15.3 DLY MAX	DEG.C	CONT	INCA	LCTD
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	****	****	l	****	 	21.3		OCONT UOUS	INCO	NTIN
00010 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	****	****	**** ****	*****	REPORT MNTH AVG	REPORT DLY MAX	DEG.C	CONT	INCO	NTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT	-									
MANE (TITLE ODING)	PERMIT REQUIREMENT										
JOHN C. SUMMERS	AND AM FA	Y UNDER PENALTY (MILIAR WITH THE UIRY OF THOSE IN	OF LAW THAT I HAVI INFORMATION SUBMI VDIVIDUAĻS IMMEDIA	E PERSONAI ITTED HERI ITELY RESI	LLY EXAMINED EIN: AND BASED PONSIBLE FOR	1000	-	TELEPH	IONE	DAT	E
NAME/TITLE PRINCIPAL EXECUTIVE OFF JOHN C. SUMMERS G.M SALEM OPERATION TYPED OR PRINTED	ONS IS TRUE NIFICANT JHE POSSI	ACCURATE AND CON PENALTIES FOR SU IBILITY OF FINE A	PLETE I AM AWARE JBMITTING FALSE II AND IMPRISONMENT.	SEE 18 US	ERE ARE SIG- N INCLUDING SC § 1001 AND	SIGNATURE (OF PRINCIPAL		-6000	95 0	5 20
TYPED OR PRINTED	\$10,0008	and/or maximum in	s under these star mprisonment of be	tutes may tween 6 m	include fines up onths and 5 years	AUTHORIZED	AGEN1 C			EAR MC	

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.

DEDMI	TTEE	NAME	/ANDRESS	

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

MAJOR

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

FACILITY PSE&G SALEM GENERATING STATION

NJ0005622 **FACB** PERMIT NUMBER

DISCHARGE NUMBER MONITORING PERIOD YEAR DAY YEAR MO

THERMAL DSCHG FOR DSN 484-486

LOCATION LOWER ALLOWAYS			FROM 95	05 0	1 TO 95	05 31 8	OUTHERN RE	GION /	SALE	M	
DMR NUMBER: NJ000562:		051995	(20-21)(2			28-29)(30-31)			, , ,	,	
PARAMETER (32-37)	· · ·	(3 Card Only) (QUANTITY OR LOADIN		(4 Card Only) (38-45)	QUALITY OR CONCE	NTRATION (54-61)	1	NO. FRE). s	AMPLE
(32-37)				UNITS	•			UNITS	(64-6)		TYPE 9-70)
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	****	****	·	****	* 25.9	30.3		0 CONT		NTIN
00010 1 0	PERMIT REQUIREMENT	*****	*****	***	****		,, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	St -	CONT	INCO	NTIN
EFFLUENT GROSS VALUE	REQUIREMENT	****	111111	***		MNTH AVO		-	pous		
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	****		****	* 8.0	10.2		0 CONT	t	.T.D.
00010 2 0	PERMIT REQUIREMENT	*****	*****	***	****			(A)	10000000000000000000000000000000000000	*******	LCTD
EFFLUENT NET VALUE	REQUIREMENT	****	****	***	****	MNTH AVO		~	OCONT		NIMTNI
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	****	****		****	* 17.9	21.3		DOUS		NIIN
00010 7 0	PERMIT REQUIREMENT	*****	*****	***	****			XI .	100000000000000000000000000000000000000		NTIN
INTAKE FROM STREAM	REQUIREMENT			***		MNTH AVO	DLY MAX		vous		
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OF	ICER I CERTIF	(UNDER PENALTY C	F LAW THAT I HAVE	PERSONAL	LY EXAMINED	10-0	1	TELEP	HONE	DA	TE
NAME/TITLE PRINCIPAL EXECUTIVE OFF JOHN C. SUMMERS G.M SALEM OPERATION TYPED OR PRINTED	ON MY INCORTAINING	DUIRY OF THOSE IN THE INFORMATION ACCURATE AND CON PENALTIES FOR SU	DIVIDUALS IMMEDIA I I BELIEVE THE PLETE I AM AWARE BMITTING FALSE IN	TELY RESI SUBMITTED THAT THI FORMATION	INT AND BASED ONSIBLE FOR INFORMATION ERE ARE SIG- INCLUDING	Shelje		09 935	5-6000	95 0	6 20
TYPED OR PRINTED	33 USC \$ \$10,000 8	1319. (Penalties and/or maximum in	under these statement of bet	utes may	include fines upon the and 5 year	p to EXECUTIVE s.) AUTHORIZED	OF PRINCIPAL OFFICER OR AGENT	REA ODE N	UMBER	EAR M	O DAY

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

TYPED OR PRINTED

YEAR MO DAY

NUMBER

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

NJ0005622 048C PERMIT NUMBER DISCHARGE NUMBER MONITORING PERIOD

YEAR MO DAY YEAR MO DAY

ACILITY PSE&G SALEM GEN	ERATING S	TATTON	_	YEAR	MO D	AY	YEAR	MO DAY	-				•	
OCATION LOWER ALLOWAYS			→ FROM	95		1	'0├───	05 31	sc	OUTHERN RE	GION	/ 8	SALEM	
DMR NUMBER: NJ000562	<u> </u>	051995	-		22-23)(24	لست	(26-27)(28	8-29)(30-31)	_		•		•	1
PARAMETER	• • • •	(3 Card Only) ((46-53)	QUANTITY (54-	OR LOADI 61)	NG	(4 Car	d Only) 8-45)	QUALITY OR (46-53)	CONCEN	ITRATION (54-61)		NO.	FREQ. OF	SAMPLE
PARAMEIER (32-37)					UNITS						UNITS	(62)	ANALÝSIS (64-68)	(69-70)
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	**	****			****		7	10		1 1	TWICE/ MONTH	СОМРО
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*:	****	**** ****		****	MNTH	30 AVG	100 DLY MAX	MG/L	000000000	rwice/ Month	COMPO
HYDROCARBONS, IN H20, IR, CC14 EXT. CHROMAT	SAMPLE MEASUREMENT	****	* *	****			****	<	0.5	< 0.5			TWICE/ MONTH	GRAP
00551 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	**	****	***		*****	MNTH	10 AVG	15 DLY MAX	3	199999993	rwice/	GRAB
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	****	* *	****			****		29	32			TWICE/ MONTH	СОМРО
00610 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*:	****	**** ****		*****	MNTH	35 AVG	70 DLY MAX		1000000000	rwice/ Month	COMPO
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	*****	* *	****			****		3	4		1 1	TWICE/ MONTH	СОМРО
00680 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*:	****	****		*****	REP MNTH	ORT AVG	50 DLY MAX	3		rwice/	COMPO
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.180	(0.346			****	***	***	****			DAILY	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTH AVG	100000000000000000000000000000000000000	EPORT Y MAX	(i)		*****	***	***	****	****		DAILY	CALCT
	SAMPLE MEASUREMENT													
	PERMIT REQUIREMENT													
	SAMPLE MEASUREMENT				3	35555355555								
MAME / TITLE DDINGLDAL EVECUTIVE OF	PERMIT REQUIREMENT	V INDER DENALTY		AT T De	/F DEFO									
NAME/TITLE PRINCIPAL EXECUTIVE OFF JOHN C. SUMMERS G.M SALEM OPERATION TYPED OR PRINTED	AND AM FA	T UNDER PENALTY (AMILIAR WITH THE QUIRY OF THOSE II G THE INFORMATION ACCURATE AND CON PENALTIES FOR SI	JE LAW IH. INFORMAT NDIVIDUAL N. I BELI MPLETE. I JBMITTING	IN I HAV ION SUBM S IMMEDI EVE THE AM AWAR FALSE I	TE PERSONA NITTED HER ATELY RES SUBMITTED E THAT TH NFORMATIO	LLY EXA EIN: AN PONSIBL INFORM ERE ARE	MINED ID BASED E FOR MATION SIG- UDING	phile	$\mathcal{S}_{\mathcal{L}}$		TELEF 09 93		000 95	DATE 2
TYPED OR PRINTED	33 USC \$ \$10,000	IBILITY OF FINE A 1319. (Penaltie and/or maximum in	AND IMPRI s under t mprisonme	SONMENT. hese sta nt of be	SEE 18 U tutes may tween 6 m	sc § 10 include onths a	001 AND L de fines up and 5 years.	to EXECU	TURE C ITIVE C ORIZED	OF PRINCIPAL AGENT C	REA ODE	UMBER	R YEAF	MO DA

NAME	PSE&G	 						
ADDRESS	P.O.	BOX	236/N21					
	HANCO	CKS	BRIDGE,	ŊJ	0803	8	 	

FACILITY PSE&G SALEM GENERATING STATION

481A NJ0005622 DISCHARGE NUMBER PERMIT NUMBER MONITORING PERIOD YEAR YEAR DAY DAY FROM 95 05 01 95 05 31

OCATION LOWER ALLOWAYS	CREEK, NJ	08038	- FROM	95 05	0	10		05		SOUTHERN	REG	ION /	′	SALEM	,	
DMR NUMBER: NJ000562	2 481A	051995		-21)(22-23	5)(24	,	5-27)(28			FUTDATION			Ι-	1		
PARAMETER		(3 Card Only) (QUANTITY OR (54-61)	LOADING		(4 Card 01 (38-4	5)"	40AL (4	6-53)	CENTRATION (54-61)	т		NO.	FREQ. OF	SAME	ŁE.
PARAMEIER (32-37)				UNI	TS		٠					UNITS	835	ANALÝSIS (64-68)	(69-7	' (0)
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	***	***		CO	DE=N		****	* ****	**		0	CODE=1	CODI	E=1
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	***	*** **		DAIL	50 Y MN		****	* ****	00000.3	PERCE NT_	3	QTRLY		
РН	SAMPLE MEASUREMENT	****	***	***			7.1		****	* 7	.6		0	WEEKLY	GRAI	Ē
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	***	*** ** **		MIN	6.0 IMUM		****	* 9 MAXIM	3.775.00	នប		WEEKLY	GRAI	3
РН	SAMPLE MEASUREMENT	****	***	***			7.7		****	* 7	. 9		0	WEEKLY	GRAI	3
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	****	***	0.0000000000000000000000000000000000000	* * * *	000000000000000000000000000000000000000	PORT		****	* REPO	30040 kg/3	SU		WEEKL)	GRAI	3
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	486.3	518	8.0		**	***		****	* ***	**		0	DAILY	CAL	ĈТ
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTH AVG	REPO DLY 1	ORT MAX MG	D	**	****		****	* ***	**	**** ***		DAILY	CAL	ZT C
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	***	***		**	***		NOD	I NO	DI		0	NODI	NOD:	ב
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	***	8030.00000	* *	**	****	MN	TH AV		OD 30.00	MG/L	1,60000000	THREE/ WEEK	GRAI	3
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	***	***		**	***		< 0.	1 < 0	1			THREE/ WEEK	GRA	B (
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	***	*** ** **		**	****		REPOR			MG/L		THREE/ WEEK	GRA	3 ∴
	SAMPLE MEASUREMENT	-														
	PERMIT REQUIREMENT								- (
NAME/TITLE PRINCIPAL EXECUTIVE OF	FICER I CERTIF	Y UNDER PENALTY O	OF LAW THAT	I HAVE PER	RSONAI	LLY EXAMINI	ED ASED	17	\mathcal{K})		TELEP	HONE		DATE	
JOHN C. SUMMERS G.M SALEM OPERATION	ONS IS TRUE NIFICANT IHE POSS	Y UNDER PENALTY OF AMILIAR WITH THE SULTY OF THOSE IT OF THE SECOND TO SECOND THE SECOND	NĎÍVĬĎŮALŚŤI N I BELIEVÉ MPLETE I AM UBMITTÍNG FA AND IMPRISON	MMEDIATELY THE SUBMI AWARE THA LSE INFORM MENT. SEE	RESI TTED TTED THI MATION 18 U	PONSIBLE FO INFORMATION ERE ARE SION INCLUDIT SC § 1001	OR ON G- NG AND	the	-SIGNATURF	OF PRINCIPAL	60	935	5-6	000 95	06	2
TYPED OR PRINTED	\$10,000 s	1319. (Penaltie and/or maximum i	s under thes	e statutes of betweer	may n 6 m	inčlude f onths and	ines up 5 years.		AUTHOR I ZE	OF PRINCIPAL- OFFICER OR D AGENT	AR CC	DE N	UMBE	R YEA	R MO	DAY

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

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

MAJOR

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

FACILITY PSE&G SALEM GENERATING STATION

482A NJ0005622 DISCHARGE NUMBER PERMIT NUMBER MONITORING PERIOD YEAR DAY YEAR MO FROM ΛE 0.5 21

OCATION LOWER ALLOWAYS			FROM 95		01 10 95	05 31 S	SOUTHERN REG	GION /	SALEM	
DMR NUMBER: NJ0005622		051995		1)(22-23)(24		8-29)(30-31)			•	,
			QUANTITY OR LOA (54-61)	ADING	(4 Card Only) (38-45)	QUALITY OR CONCE	ENTRATION (54-61)		NO. FREQ.	SAMPLE
PARAMETER (32-37)	• • • • '			UNITS				UNITS	(62 ANALYSIS (64-68)	(69-70)
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	****	r *	CODE=N	*****	* ****		0 CODE=1	CODE=
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	****	** **** ****	50 DAILY MN		* *****	PERCE NT	QTRLY	
PH	SAMPLE MEASUREMENT	****	****	c *	7.4		* 7.7		OWEEKLY	GRA
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	****	** ***	6.0 MINIMUM		9.0 MAXIMUM	31 — - N	WEEKLY	
РН	SAMPLE MEASUREMENT	****	****	: *	7.7				OWEEKLY	
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	****	****	** **** ****	REPORT MINIMUM	.	MUMIKAM	84 I	WEEKLY	
FLOW, IN CONDUIT OR IHRU TREATMENT PLANT	SAMPLE MEASUREMENT	474.3			****				ODAILY	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTH AVG		30300000	*****	* *****	* ****	***	DAILY	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	****	: *	****	NODI			ONODI	NODI
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	****	** ****	*****	MNTH AVO		ା '	THREE/ WEEK	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	****	: *	****				OTHREE/ WEEK	
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	****	** ***	*****	REPORT MNTH AVO		MG/L	THREE, WEEK	GRAB
	SAMPLE MEASUREMENT.	-]		
	PERMIT REQUIREMENT									
NAME/TITLE PRINCIPAL EXECUTIVE OFF	FICER I CERTIF'	Y UNDER PENALTY (OF LAW THAT I	HAVE PERSONA UBMITTED HEF	ALLY EXAMINED REIN: AND BASED	$1 \mathcal{N}()$	-	TELEPH	HONE	DATE
JOHN C. SUMMERS G.M SALEM OPERATIO	ONS ONS ON MY INCOME ON MY INCOME ON MY INCOME OF THE POSS	QUIRY OF THOSE IN G THE INFORMATION ACCURATE AND COI PENALTIES FOR S' SIBILITY OF FINE	NDIVIDUALS IMM N. I BELIEVE T MPLETE. I AM A UBMITTING FALS AND IMPRISONME	EDIATELY RES HE SUBMITTED WARE THAT TH E INFORMATION. NT. SEE 18 I	ALLY EXAMINED REIN: AND BASED SPONSIBLE FOR D INFORMATION HERE ARE SIG- ON INCLUDING USC \$ 1001 AND Y Include fines up months and 5 years	SIGNATURE		09 935	5-6000 95	5 06 2
TYPED OR PRINTED						S.) EXECUTIVE	D AGENT C		UMBER YEA	R MO D

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

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

FROM YEAR MO DAY 95 05 01

TO YEAR MO DAY
95 05 31

SOUTHERN REGION / SALEM

DMR NUMBER: NJ000562		051995	(20-21)(2	22-23)(24	-25) (26-27)(28	8-29)(30-31)	OUTHERN RE		PALLEM .	,
DADAMETED	• • •	(3 Card Only) (QUANTITY OR LOADII	NG	(4 Card Oply) (38-45)	QUALITY OR CONCE	NTRATION (54-61)		NO. FREQ.	SAMPLE
PARAMEIER (32-37)				UNITS				UNITS	(62 ANALÝSI 63) (64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU	SAMPLE MEASUREMENT	****	****		CODE=N	****	****		OCODE=	NCODE=
CYPRINODON TAN6A 1 0	MEASUREMENT	*****	****	****	50	****	*****	PERCE	OTRLY	<u> </u>
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***	DAILY MN			NT		
PH	SAMPLE MEASUREMENT	****	*****		7.0	****	7.6		OWEEKL	YGRAE
00400 1 0	DEDMIT	*****	*****	****	6.0	****	9.0	នប	WEEKI	YGRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***	MINIMUM		MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	****		7.7	****	7.9		OWEEKL	YGRAB
00400 7 0	PERMIT REQUIREMENT	*****	*****		REPORT			នប	WEEKI	YGRAB
INTAKE FROM STREAM	REQUIREMENT			****	MINIMUM		MAXIMUM			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	333.4	495.4		****	****	****		ODAILY	CALCI
50050 1 0	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	****	***	DAILY	CALCI
EFFLUENT GROSS VALUE	REQUIREMENT	MNTH AVG	DLY MAX	MGD				***		
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	****		****	NODI	NODI		ONODI	NODI
50060 R 0	PERMIT	*****	*****	***	*****		.	MG/L		GRAB
SEE COMMENTS BELOW	REQUIREMENT			***		MNTH AVG			WEEK	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		****	, , ,			OTHREE WEEK	
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	****	****	*****			MG/L	2000000 Ar 30.07.00000	GRAB
SEE COMMENTS BELOW	SAMPLE MEASUREMENT			****		MNTH AVO	DLY MAX		WEEK	
	MEASUREMENT	-								500 USSOSIO PIONATANA
	PERMIT REQUIREMENT									
NAME/TITLE PRINCIPAL EXECUTIVE OF	FICER I CERTIF	Y UNDER PENALTY C	F LAW THAT I HAVI	PERSONA	LLY EXAMINED	1000		TELEP	HONE	DATE
NAME/TITLE PRINCIPAL EXECUTIVE OF JOHN C. SUMMERS G.M SALEM OPERATION TYPED OR PRINTED	ONS IS TRUE NIFICANT	AMILIAK WIIH IHE QUIRY OF THOSE IN S THE INFORMATION ACCURATE AND COM PENALTIES FOR SU	INFORMALION SUBM IDIVIDUALS IMMEDIA I I BELIEVE THE IPLETE. I AM AWARI IBMITTING FALSE II	IIIEU HER ATELY RES SUBMITTED E THAT TH NEORMATIO	EIN: AND BASED PONSIBLE FOR INFORMATION ERE ARE SIG- N. INCLUDING	the Sin		09 935	5-6000 9	5 06 2
TYPED OR PRINTED PARAMETER 50060 LOCA	1HE POSS 33 USC \$ \$10,000	IBILITY OF FINE A 1319. (Penalties and/or maximum in	IND IMPRISONMENT. s under these sta aprisonment of be	SEE 18 U tutes may tween 6 m	SC § 1001 AND include fines up onths and 5 years		OF PRINCIPAL A OFFICER OR A O AGENT C		UMBER YE	AR MO DA

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

1

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

FACILITY PSE&G SALEM GENERATING STATION

NJ0005622 484A PERMIT NUMBER DISCHARGE NUMBER MONITORING PERIOD DAY YEAR MO YEAR MO DAY

ACTUAL PRESS SALEM GENT			- FROM 95	ļ <u> </u>	1 70 95	05 31 S	OUTHERN REC	TON /	SALEM	
OCATION LOWER ALLOWAYS				(22-23)(24		3-29)(30-31)	OUTHERN KE	JION /	DALLIN	•
DMR NUMBER: NJ0005622	2 484A	051995					NTRATION			
DADAMETER		(3 Card Only) (QUANTITY OR LOAD (54-61)		(4 Card Oply) (38-45)	QUALITY OR CONCE	(54-61)		NO. FREQ.	SAMPLE
PARAMETER (32-37)	• • • •			UNITS				UNITS	(62 ANALYSIS (64-68)	(69-70)
LC50 STATRE 96HR ACU	24451.5	*****	*****	,	CODE=N	****	****		OCODE=1	CODE=N
CYPRINODON	SAMPLE MEASUREMENT							}		
TAN6A 1 0	CEDALLY.	*****	*****	***	50	*****	****	PERCE	QTRLY	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***	DAILY MN			NT		
РН	CANDIE	****	****		7.2	****	7.6		OWEEKL	GRAF
	SAMPLE MEASUREMENT						ļ <u>.</u>] '		
00400 1 0	PERMIT	*****	*****	****	6.0	*****	9.0	su	WEEKLY	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT			***	MINIMUM		MAXIMUM			
PH	SAMPLE MEASUREMENT	****	****		7.7	****	7.9		OWEEKLY	GRAB
00400 7 0		****	****	****	REPORT	****	REPORT	នប	WEEKLY	GRAB
INTAKE FROM STREAM	PERMIT REQUIREMENT			***	MINIMUM		MAXIMUM			
FLOW, IN CONDUIT OR		451.0	497.1	800	****			 	ODAILY	CALCTI
THRU TREATMENT PLANT	SAMPLÉ MEASUREMENT	10200		-						
50050 1 0		REPORT	REPORT	7	*****	*****	*****	***	DAILY	CALCTI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MNTH AVG		200				***		
CHLORINE, TOTAL		****	***		****	NODI	NODI		ONODI	NODI
RESIDUAL	SAMPLE MEASUREMENT									
50060 R 0		****	*****	****	*****	.3	.5	MG/L	THREE	GRAB
SEE COMMENTS BELOW	PERMIT REQUIREMENT			****		MNTH AVG	DLY MAX		WEEK	
CHLORINE, TOTAL	CAMPLE	****	****	:	*****	< 0.1	< 0.1		OTHREE	GRAB _
RESIDUAL	SAMPLE MEASUREMENT								WEEK	
50060 S 0	DEGMIT	****	****	****	*****	REPORT	.2	MG/L	THREE	GRAB
SEE COMMENTS BELOW	PERMIT REQUIREMENT			****		MNTH AVG	DLY MAX		WEEK	
	SAMDLE									
	SAMPLE MEASUREMENT	-					į	j	l	
	DEDMIT									
	PERMIT REQUIREMENT					\wedge				
NAME/TITLE PRINCIPAL EXECUTIVE OF	FICER I CERTIF	Y UNDER PENALTY	OF LAW THAT I HA	VE PERSONA	LLY EXAMINED	1007		TELEP	HONE	DATE
JOHN C. SUMMERS	ON MY IN	QUIRY OF THOSE I	NOTVIDUALS IMMED	IATELY RES	PONSIBLE FOR				1	
G.M SALEM OPERATION	ONS IS TRUE	ACCURATE AND CO	MPLĖTĖ I AM AWA	RE THAT TH	ERE ARE SIG- \	DIMEDI	1	09,935	6000 9!	06 20
NAME/TITLE PRINCIPAL EXECUTIVE OF JOHN C. SUMMERS G.M SALEM OPERATION TYPED OR PRINTED	33 USC &	IBILITY OF FINE 1	ĂŇĎ ÍMPRÍSONMĚŇT s under these st	. SEE 18 U	S¢ §"1001 AND └─ Tinclude fines un	to SIGNATURE	OF PRINCIPAL OFFICER OR A AGENT	REA		
TYPED OR PRINTED	\$10,000	and/or maximum i	mprisonment of b	etween 6 m	onths and 5 years	.) ĀÚŤHŎŔĨŽĒC	AGENT C	REA ODE N	UMBER YEA	R MO DAY

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

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

FACILITY PSE&G SALEM GENERATING STATION

485A NJ0005622 DISCHARGE NUMBER PERMIT NUMBER MONITORING PERIOD YEAR MO DAY YEAR DAY FROM OF OF 21

DOCATION LOWER ALLOWAYS			FROM 95	05 0		05 31	SOUTHERN RE	GION /	/ {	SALEM	
DMR NUMBER: NJ000562	2 485A	051995		22-23)(24		8-29)(30-31)			, 		;
DADAMETER	• • •	(3 Card Only) QUANTITY OR LOADIN (46-53) (54-61)		ING (4 Card Only) (38-45)		QUALITY OR CONCENTRATION (54-61)			NO.	FREQ.	SAMDLI
PARAMETER (32-37)			,	UNITS				UNITS	(62 63)	ANALÝSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	****		CODE=N	***	** ****		0	CODE=N	CODE=
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****	****	****	50 DAILY MN		** *****	PERCI NT	E (QTRLY	
PH	SAMPLE MEASUREMENT	****	*****		6.6	***************************************	*** 7.6	4	01	WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	6.0 MINIMUM		** 9.0 MAXIMUM	នប		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	****	*****		7.7	***	** 7.9		01	WEEKLY	GRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	****	***	REPORT MINIMUM		** REPORT	93 1	Ţ	WEEKLY	GRAB
LOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	411.5	448.4		****	***	***		01	DAILY	CALC
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTH AVG	REPORT DLY MAX	MGD	****	***	******	***	j	DAILY	CALC!
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	****		****	NO	DDI NODI		01	NODI	NODI
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	****	**** ***	*****	MNTH A		MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	****		****	< 0	< 0.1			THREE/ WEEK	GRAB
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	****	****	**** ****	*****	REPO MNTH A		MG/L	1000000000	THREE/ WEEK	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
AME/TITLE PRINCIPAL EXECUTIVE OFF	FICER I CERTIF	Y UNDER PENALTY C AMILIAR WITH THE	OF LAW THAT I HAV	E PERSONA ITTED HER	LLY EXAMINED EIN: AND BASED	100		TELEP	HONE		DATE
AME/TITLE PRINCIPAL EXECUTIVE OFF OHN C. SUMMERS I.M SALEM OPERATION TYPED OR PRINTED	ON MY INC OBTAINING IS TRUE, NIFICANT THE POSS	QUIRY OF THOSE IN G THE INFORMATION ACCURATE AND COM PENALTIES FOR SU IRILITY OF FINE A	IDIVIDUALS IMMEDI I I BELIEVE THE IPLETE. I AM AWAR IBMITTING FALSE I IND IMPRISONMENT	ATELY RĒŠI SUBMITTĒD E THAT THI NFORMATIO	PONSIBLE FOR INFORMATION ERE ARE SIG-	A COUNTY		09 939	5-6	000 95	06
TYPED OR PRINTED PARAMETER 50060 LOCA	\$10,000 \$	1319. (Penalties	under these sta	tutes may tween 6 m	include fines up onths and 5 years	to EXECUT AUTHOR	URE OF PRINCIPAL IVE OFFICER OR IZED AGENT		NUMBER	R YEAR	R MO D

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

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

MAJOR

NAME	PSE&G
ADDRESS	P.O. BOX 236/N21
	HANCOCKS BRIDGE, NJ 08038
FACILITY	PSEAG SALEM GENERATING STATION

SOUTHERN REGION / SALE

OCATION LOWER ALLOWAYS	CREEK, NJ	08038	95				OUTHERN RE	GION /	SALE	1	
DMR NUMBER: NJ0005622	2 486A	051995	·	22-23)(24		3-29)(30-31)				* *	
PARAMEIER (32-37)	• • • •	(3 Card Only) (46-53)	OUANTITY OR LOADII	NG	(4 Card Oply) (38-45)	QUALITY OR CONCER	NTRATION (54-61)		NO. FREQ.	SAM	PLE
(32-37)				UNITS				UNITS	(64-68)	S SAM IY (69-	PE 70)
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	****		CODE=N	****	***		0CODE=	NCOD	E=N
TAN6A 1 0	PERMIT	****	****	***	50		*****	:I	QTRL	7	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			****	DAILY MN			NT			
PH	SAMPLE MEASUREMENT	****	****		7.0	****	7.6		OWEEKI	YGRA	B
00400 1 0	PERMIT REQUIREMENT	*****	****	****	6.0	*****	9.0	SU	WEEKI	YGRA	B
EFFLUENT GROSS VALUE	REQUIREMENT			****	MINIMUM		MAXIMUM				
PH	SAMPLE MEASUREMENT	*****	****		7.7	****	7.9		OWEEKI		
00400 7 0	PERMIT REQUIREMENT	*****	*****		REPORT		REPORT	SU	WEEKI	JYGRA	B
INTAKE FROM STREAM	REQUIREMENT			****	MINIMUM		MUMIXAM				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	386.1	470.8		****		****		ODAIL		
50050 1 0	PERMIT REQUIREMENT	REPORT	REPORT		****	*****	****		DAIL	CAL	CTD
EFFLUENT GROSS VALUE	KEGUIKEMENI	MNTH AVG	DLY MAX	MGD				***			
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	****		*****	NODI	NODI		ONODI	NOD	,
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	****	***	****	****			MG/L	THRE	I/GRA	В
CHLORINE, TOTAL	REGUIRENI	*****	****	****	****	MNTH AVG	DLY MAX		WEEK	I (dna	D 4
RESIDUAL	SAMPLE MEASUREMENT					< 0.1	< 0.1		OTHREI WEEK		J
50060 S 0	PERMIT REQUIREMENT	****	****		****			MG/L	THRE	/GRA	В
SEE COMMENTS BELOW	REQUIREMENT			***		MNTH AVG	DLY MAX		WEEK		
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT					. ^					
NAME/TITLE PRINCIPAL EXECUTIVE OFF	ICER I CERTIFY	Y UNDER PENALTY C	F LAW THAT I HAV	E PERSONA	LLY EXAMINED	TOOO		TELEP	HONE	DATE	
JOHN C. SUMMERS	ON MY INC	QUIRY OF THOSE IN	DIVIDUALS IMMEDIA	ATELY RES	PONSIBLE FOR	HUX	_				
NAME/TITLE PRINCIPAL EXECUTIVE OFF JOHN C. SUMMERS G.M SALEM OPERATION TYPED OR PRINTED	NIFICANT	ACCURATE AND COMPENALTIES FOR SLIBILITY OF FINE	PLETE. I AM AWARI BMITTING FALSE II ND IMPRISONMENT.	THAT THE NEORMATION SEE 18 U	ERE ARE SIG- N INCLUDING SC § 1001 AND	SIGNATURE	OF PRINCIPAL		5-6000	5 06	20
TYPED OR PRINTED	\$10,000\$	ואוץ. (Penalties) and/or maximum in	s under these sta aprisonment of be	tutes may tween 6 m	include fines up onths and 5 years	to EXECUTIVE (OFFICER OR A	REAL ODE N	UMBER Y	AR MO	DAY
DADAMEMED FOOCO TOCAL	TONG . III	- GITG D	7.077.0			aria paswa	(3103)/7 7				

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

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 PRINTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBLITY 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.)

PERMIT REQUIREMENT

SAMPLE MEASUREMENT

PERMIT REQUIREMENT

TELEPHONE DATE

609 935-6000 95 06 20

SIGNATURE OF PRINCIPAL AREA NUMBER YEAR MO DAY

TO EXECUTIVE OFFICER OR 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