



Public Service Electric and Gas Company P.O. Box 236 Hancocks Bridge, New Jersey 08038-0236
Nuclear Business Unit

April 23, 1997

New Jersey Department of
Environmental Protection
Bureau of Permit Management
CN-029
Trenton, NJ 08625

Dear Chief Caporale:

**NEW JERSEY POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORTS
SALEM GENERATING STATION
PERMIT NO. NJ0005622**

Attached is the Discharge Monitoring Report for Salem Generating Station containing the information as required in Permit No. NJ0005622 for the month of March, 1997.

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.

Sincerely,

David F. Garchow
General Manager -
Salem Operations

050115

Attachments

9705060133 970331
PDR ADOCK 05000272
R PDR



IED 5%

The power is in your hands.

NJPDES Report
Explanation of Deviations
March, 1997

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 results are provided by Raytheon Environmental Services Laboratory. (NJDEP certification 77373) or South Jersey Testing Laboratory (NJDEP certification 06431). Bioassay results are provided by ENSR Environmental Toxicology Laboratory (NJDEP certification 82888).

Net negative discharge values are reported as negative.

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.

NJPDES Report
Explanation of Deviations
March, 1997

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.

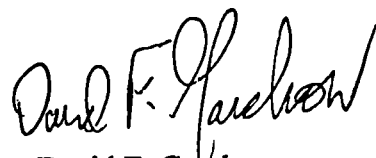
DSN NO.	EXPLANATION
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NONE	
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COUNTY OF SALEM
STATE OF NEW JERSEY

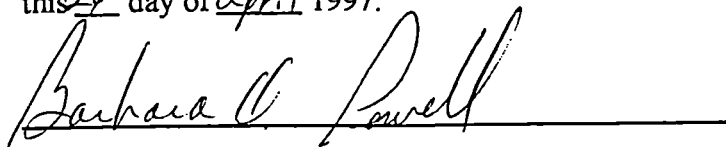
I, David F. Garchow, of full age, being duly sworn according to law, upon my oath depose and say:

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 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.



David F. Garchow
General Manager -
Salem Operations

Sworn and subscribed before me
this 24 day of April 1997.



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

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.

REPORTING PERIOD

MO. YR.

MO. YR.

0 | 0 | 0 | 5 | 6 | 2 | 2

0 | 3 | 9 | 7 | THRU

0 | 3 | 9 | 7

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

TEMPORARY BYPASSING

DISINFECTION INTERRUPTION

MONITORING MALFUNCTIONS

UNITS OUT OF OPERATION

OTHER

(Detail any "Yes" on reverse side in appropriate space.)

NOTE: The "Hours Attended at Plant" on the reverse of this sheet must also be completed.

AUTHENTICATION - I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

LICENSED OPERATOR

PRINCIPAL EXECUTIVE OFFICER or DULY AUTHORIZED REPRESENTATIVE

Name (Printed) JOHN F. LEOPARDI

Name (Printed) David F. Garchow

Grade & Registry No. N-2 0013703

Title (Printed) Gen. Mgr. Salem Operations

Signature [Signature]

Signature [Signature]

Date 04/22/97

Date 04/23/97

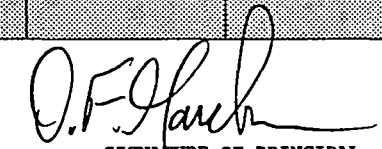
NAME PSE&G
ADDRESS P.O. BOX 236/N21
HANCOCKS BRIDGE, NJ 08038

NJ0005622			FACA				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	03	01		97	03	31
(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 FACA 031997

Thermal Dschg for DSN 481-483
Southern Region / Salem

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	*****	8.4	11.3			0	CONTINCONTIN UOUS
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	46.1	DEG. C		0	CONTINCONTIN UOUS
TEMPERATURE, WATER DEG. CENTIGRADE 00010 2 0	SAMPLE MEASUREMENT	*****	*****	UNITS	*****	1.3	4.6			0	CONTINCONTIN UOUS
EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	15.3	DEG. C		0	CONTINCONTIN UOUS
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 0	SAMPLE MEASUREMENT	*****	*****	UNITS	*****	7.1	9.9			0	CONTINCONTIN UOUS
INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT	DEG. C		0	CONTINCONTIN UOUS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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 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			
DAVID F. GARCHOW GEN.MGR.SALEM OPERATIONS			609 935-6000	97 04 23			
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.

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 **FACB**
 PERMIT NUMBER DISCHARGE NUMBER

FACILITY PSE&G SALEM GENERATING STATION
 LOCATION LOWER ALLOWAYS CREEK, NJ 08038
 DMR NUMBER: NJ0005622 FACB 031997

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	03	01		97	03	31
	(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

THERMAL DSCHG FOR DSN 484-486
 SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			(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	*****	*****	*****	*****	6.9	9.8	DEG.C	0	CONTIN	CONTIN	UOUS	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	46.1	DEG.C	0	CONTIN	CONTIN	UOUS	
TEMPERATURE, WATER DEG. CENTIGRADE 00010 2 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	-0.2	0.9	DEG.C	0	CONTIN	CONTIN	UOUS	
EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	15.3	DEG.C	0	CONTIN	CONTIN	UOUS	
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	7.1	9.9	DEG.C	0	CONTIN	CONTIN	UOUS	
INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT	DEG.C	0	CONTIN	CONTIN	UOUS	
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
DAVID F. GARCHOW
 GEN.MGR.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.)

D.F. Garchow

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE **609 935-6000** DATE **97 04 23**

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 484-486.
 NET TEMP DIF IS THE DIFFERENCE BETWEEN THE AMBIENT RIVER WATER TEMP AND THE AVE EFFLUENT TEMP OF 484-486.

PERMITTEE NAME/ADDRESS

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)

THERMAL DSCHG FOR DSN 481-486

NJ0005622		FACC	
PERMIT NUMBER		DISCHARGE NUMBER	
MONITORING PERIOD			
FROM	YEAR	MO	DAY
	97	03	01
TO	YEAR	MO	DAY
	97	03	31
(20-21) (22-23) (24-25)		(26-27) (28-29) (30-31)	


MAJOR
SOUTHERN REGION

SALEM

FACILITY PSE&G SALEM GENERATING STATION
 LOCATION LOWER ALLOWAYS CREEK, NJ 08038
 DMR NUMBER: NJ0005622 FACC 031997

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)
		REPORT Mnth Avg	DLY MAX		*****	*****	*****				
THERMAL DISCHARGE MILLION BTUS PER HR.		-63	53		*****	*****	*****		0	CONTINUAL	CTD
00015 2 0											
EFFLUENT NET VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	DLY MAX	MBTU/HR	*****	*****	*****	****		CONTINUAL	CTD
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		390	481		*****	*****	*****	***	0	DAILY	CALCTD
50050 7 0											
INTAKE FROM STREAM	PERMIT REQUIREMENT	REPORT Mnth Avg	DLY MAX	MGD	*****	*****	*****	****		DAILY	CALCTD

	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 DAVID F. GARCHOW GEN.MGR.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	97	04	23	
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
	97	03	01		97	03	31
	(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 031997

SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		UNITS	UNITS	UNITS	UNITS	UNITS	UNITS			
SOLIDS, TOTAL SUSPENDED	*****	*****	*****	*****	3	4			0 TWICE/MONTH	COMPOS
00530 1 0	PERMIT REQUIREMENT	*****	*****	****	30	100			0 TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE					MNTH AVG	DLY MAX	MG/L			
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT	*****	*****	*****	*****	< 0.5	< 0.5			0 TWICE/MONTH	GRAB
00551 1 0	PERMIT REQUIREMENT	*****	*****	****	10	15			0 TWICE/MONTH	GRAB
EFFLUENT GROSS VALUE					MNTH AVG	DLY MAX	MG/L			
NITROGEN, AMMONIA TOTAL (AS N)	*****	*****	*****	*****	0	0			0 TWICE/MONTH	COMPOS
00610 1 0	PERMIT REQUIREMENT	*****	*****	****	35	70			0 TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE					MNTH AVG	DLY MAX	MG/L			
CARBON, TOT ORGANIC (TOC)	*****	*****	*****	*****	2	4			0 TWICE/MONTH	COMPOS
00680 1 0	PERMIT REQUIREMENT	*****	*****	****	REPORT	50			0 TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE					MNTH AVG	DLY MAX	MG/L			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	0.046	0.348		*****	*****	*****			0 DAILY	CALCTD
50050 1 0	PERMIT REQUIREMENT	REPORT	REPORT	*****	*****	*****	****		0 DAILY	CALCTD
EFFLUENT GROSS VALUE		MNTH AVG	DLY MAX	MGD			***			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER DAVID F. GARCHOW GEN.MGR.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 <i>D.F. Garchow</i>	TELEPHONE	DATE			
			609 935-6000	97 04 23			
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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
	97	03	01		97	03	31
	(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 481A 031997

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 63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		UNITS	UNITS	UNITS	UNITS	UNITS	UNITS			
LC50 STATRE 96HR ACU CYPRINODON		*****	*****		CODE=N	*****	*****		Q	CODE=N
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 DAILY MN	*****	*****		QTRLY	
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.8		WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.9		WEEKLY	GRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	*****	REPORT MAXIMUM		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	117.8	247.7		*****	*****	*****		DAILY	CALCTD
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth AVG	REPORT DLY MAX	MGD	*****	*****	*****	****	DAILY	CALCTD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	0.2		THREE/ WEEK	GRAB
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 Mnth AVG	.5 DLY MAX		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1		THREE/ WEEK	GRAB
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth AVG	.2 DLY MAX		THREE/ WEEK	GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
DAVID F. GARCHOW
GEN.MGR.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 5 1001 AND 33 USC 5 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

O.F. Paul

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
609 935-6000		97	04	23
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.

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	482A
PERMIT NUMBER	DISCHARGE NUMBER

FACILITY PSE&G SALEM GENERATING STATION
 LOCATION LOWER ALLOWAYS CREEK, NJ 08038
 DMR NUMBER: NJ0005622 482A 031997

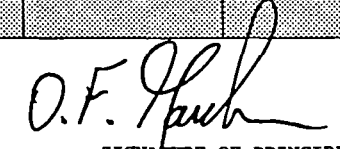
MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	03	01		97	03	31

(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) (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	SAMPLE MEASUREMENT	*****	*****	UNITS	CODE=N	*****	*****			0
	PERMIT REQUIREMENT	*****	*****	****	50 DAILY MN	*****	*****	PERCE	QTRLY	
PH	SAMPLE MEASUREMENT	*****	*****		7.5	*****	7.8			0
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.9			0
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	*****	REPORT MAXIMUM	SU	WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	5.6	15.8		*****	*****	*****			0
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT DLY MAX	MGD	*****	*****	*****	****	DAILY	CALCTD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	0.2			0
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 Mnth Avg	.5 DLY MAX	MG/L	THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			0
50060 S 0 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	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREBIN, 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 5 1001 AND 33 USC 5 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			
DAVID F. GARCHOW GEN.MGR.SALEM OPERATIONS			609 935-6000	97	04	23	
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 06431 82888 77343 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				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	03	01		97	03	31
(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 483A 031997

SOUTHERN REGION / SALEM

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)	SAMPLR TYPE (69-70)
LC50 STATRE 96HR ACU CYPRINODON		*****	*****		CODE=N	*****	*****		0	CODE=N	CODE=N
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 DAILY MN	*****	*****	PERCENT		QTRLY	
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.8		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	*****	7.9		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	4.8	13.4		*****	*****	*****		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	*****	*****		*****	< 0.1	0.2		0	THREE/ WEEK	GRAB
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 Mnth AVG	.5 DLY MAX	MG/L		THREE/ WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		0	NODI	NODI
50060 S 0 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
 DAVID F. GARCHOW
 GEN.MGR.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.)

D.F. Garchow

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
609	935-6000	97	04	23
AREA CODE	NUMBER	YEAR	MO	DAY

TYPED OR PRINTED

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.

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			484A				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	03	01		97	03	31
	(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 031997

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) (46-53)			UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU CYPRINODON		*****	*****		CODE=N	*****	*****		0	CODE=N	CODE=N
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 DAILY MN	*****	*****	PERCENT		QTRLY	
PH	SAMPLE MEASUREMENT	*****	*****		7.5	*****	7.7		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	*****	7.9		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	32.2	241.6		*****	*****	*****		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	*****	*****		*****	< 0.1	0.1		0	THREE/ WEEK	GRAB
50060 R 0 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 0 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
 DAVID F. GARCHOW
 GEN.MGR.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.)

D.F. Garchow

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
609 935-6000		97	04	23
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.

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 **485A**
 PERMIT NUMBER DISCHARGE NUMBER

FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622 485A 031997**

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	03	01		97	03	31
	(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 (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	*****	*****	*****	*****	CODE=N	*****	*****		0	CODE=N CODE=N
PH	*****	*****	*****	*****	7.4	*****	7.8		0	WEEKLY GRAB
00400 1 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY GRAB
PH	*****	*****	*****	*****	7.6	*****	7.9		0	WEEKLY GRAB
00400 7 0 INTAKE FROM STREAM FLOW, IN CONDUIT OR THRU TREATMENT PLANT	*****	*****	*****	*****	210.9	*****	224.2		0	DAILY CALCTD
50050 1 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	REPORT Mnth Avg	*****	REPORT DLY MAX	MGD	***	DAILY CALCTD
CHLORINE, TOTAL RESIDUAL	*****	*****	*****	*****	*****	< 0.1	< 0.1		0	THREE/GRAB WEEK
50060 R 0 SEE COMMENTS BELOW	*****	*****	*****	*****	*****	.3 Mnth Avg	.5 DLY MAX	MG/L		THREE/GRAB WEEK
CHLORINE, TOTAL RESIDUAL	*****	*****	*****	*****	*****	< 0.1	< 0.1		0	THREE/GRAB WEEK
50060 S 0 SEE COMMENTS BELOW	*****	*****	*****	*****	*****	REPORT Mnth Avg	.2 DLY MAX	MG/L		THREE/GRAB WEEK
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
DAVID F. GARCHOW
GEN.MGR.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.)

D.F. Garchow

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE **609 935-6000** DATE **97 04 23**

TYPED OR PRINTED

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.

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			486A				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	03	01		97	03	31
	(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 486A 031997

SOUTHERN REGION / SALEM

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)
		*****	*****		CODE=N	*****	*****				
LC50 STATRE 96HR ACU CYPRINODON TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50	*****	*****	PERCENT		QTRLY	
PH	SAMPLE MEASUREMENT	*****	*****		7.5	*****	7.8			WEEKLY GRAB	
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU		WEEKLY GRAB	
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.9			WEEKLY GRAB	
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	*****	REPORT MAXIMUM	SU		WEEKLY GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	56.0	214.4		*****	*****	*****			DAILY CALCTD	
	PERMIT REQUIREMENT	REPORT Mnth AVG	REPORT DLY MAX	MGD	*****	*****	*****	****		DAILY CALCTD	
CHLORINE, TOTAL RESIDUAL 50060 R 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	0.2			THREE/WEEK GRAB	
	PERMIT REQUIREMENT	*****	*****	****	*****	.3	.5	MG/L		THREE/WEEK GRAB	
CHLORINE, TOTAL RESIDUAL 50060 S 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1			THREE/WEEK GRAB	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth AVG	.2	MG/L		THREE/WEEK GRAB	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 DAVID F. GARCHOW
 GEN.MGR.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.)

D.F. Garchow

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE	DATE
609 935-6000	97 04 23
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.

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)

#3 OIL SKIM TANK DSN-487B

NJ0005622			487B				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	03	01		97	03	31
(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 031997

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)
		*****	*****	UNITS	*****	*****	*****				
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI	DEG.C	ONODI	NODI	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	43.3 DLY MAX		ONCE/DISCHG	GRAB	
PH	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI		ONODI	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	MG/L	ONCE/DISCHG	NODI	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	100 DLY MAX		ONCE/DISCHG	GRAB	
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI	MG/L	ONCE/DISCHG	NODI	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	15 DLY MAX		ONCE/DISCHG	GRAB	
CARBON, TOT ORGANIC (TOC) 00680 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI	MG/L	ONCE/DISCHG	NODI	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	50 DLY MAX		ONCE/DISCHG	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/DISCHG	CALC	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 DAVID F. GARCHOW
 GEN.MGR.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.)

D.F. Garchow

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
609	935-6000	97	04	23
AREA CODE	NUMBER	YEAR	MO	DAY

TYPED OR PRINTED

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		489C					
PERMIT NUMBER		DISCHARGE NUMBER					
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	03	01		97	03	31
(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 489C 031997

SOUTHERN REGION / SALEM

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)	
		QUANTITY OR LOADING (54-61)	UNITS	QUALITY OR CONCENTRATION (46-53)	QUALITY OR CONCENTRATION (54-61)							
PH	SAMPLE MEASUREMENT	*****	*****			7.7	*****	7.7		0 ONCE/MONTH	GRAB	
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	0 ONCE/MONTH	GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****			*****		7		0 ONCE/MONTH	GRAB	
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	****	*****		30 Mnth Avg	100 Dly Max	MG/L	0 ONCE/MONTH	
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT	SAMPLE MEASUREMENT	*****	*****			*****		< 0.5	< 0.5		0 ONCE/MONTH	GRAB
00551 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	****	*****		10 Mnth Avg	15 Dly Max	MG/L	0 ONCE/MONTH	GRAB
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	*****	*****			*****		3	3		0 ONCE/MONTH	GRAB
00680 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	****	*****		REPORT Mnth Avg	50 Dly Max	MG/L	0 ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.1383	0.1383			*****		*****	*****		0 ONCE/MONTH	CALCTD
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD		*****		*****	*****	****	0 ONCE/MONTH	CALCTD
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER DAVID F. GARCHOW GEN.MGR.SALEM OPERATION	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	97	04	23	
TYPED OR PRINTED			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