

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

Nuclear Business Unit

July 23, 1997

New Jersey Department of Environmental Protection Division of Water Quality Bureau of Permit Management CN029 Trenton, NJ 08625-0029 Certified Mail Number P 462 770 311

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 June, 1997.

This report is required by and prepared specifically for the Environmental Protection Agency (EPA) and the New Jersey Department of Environmental Protection (NJPDEP). 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

Attachments

9707300037 970630 PDR ADOCK 05000272 PDR



DENS /1

C Mr. Gerald M. Hansler - Executive Director
USNRC - Document Control Desk Unit#1-50-272 Unit#2-50-311
General Manager - Salem Operations
Manager-Licensing & Regulation

M. Vaskis

D. Hurka

D. Dowiak

R. Quinn

Central Record Facility

NJPDES Report Explanation of Deviations June, 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 June, 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

489

An excursion in the form of a small, 10 to 20 square foot oil sheen from the discharge of the Number 1 Oil Water Separator. See attached five day report.

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 <u>43</u> day of <u>Ju/u</u> 1997.

DELORIS D. HADDEN
Notary Public of New Jersey
My Commission Expires
03-29-2000



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

Nuclear Business Unit

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
ARTICLE NUMBER P 462 769 556

JUN 1 2 1997

LR-E970383

Assistant Director of Enforcement Division of Water Resources New Jersey Department of Environmental Protection 401 East State Street CN 029 Trenton, NJ 08625-0029

SALEM GENERATING STATION
NJPDES PERMIT NUMBER NJ0005622
DISCHARGE OF OIL - 5 DAY REPORT
CASE NUMBER 97-06-11-0554-53

Dear Sir:

In accordance with N.J.A.C. 7:14A-3.10, Public Service Electric and Gas Company (PSE&G) has prepared this report concerning the discharge of less than one (1) ounce of oil. The discharge occurred through the oil water separator outfall (DSN 489) to the Delaware River from the Salem Generating Station on June 11, 1997.

The discharge was discovered at 5:45 AM on June 11, 1997. A sheen of approximately 10 to 20 square feet was observed at DSN 489 in the Delaware River. The oil water separator system treats stormwater runoff from areas within the Salem Generating Station, including yard drains, driveways and parking areas. An estimate of less than one (1) ounce of oil passed through the oil water separator. Previous to the discharge, maintenance activities were being conducted on both oil water separators. Booms had been placed as a preventative measure at outlet of the oil water separator, manholes leading to the discharge point, and in the river at the discharge point.

JUN 1 2 1997

Assistant Director of Enforcement 2 LR-E970383

Inlet valves to the oil water separators were closed to facilitate the cleaning of the effluent chamber. The water level in the inlet chamber reached four (4) feet above the inlet to the oil water separator. Station operating procedures require the inlet valves be opened to prevent the backup of water in the storm and building drains when the water level in the inlet chamber reaches four (4) feet above the oil water separator. The rapid opening of the inlet valves caused the water to flow into one of the oil water separators at a rate above the design capabilities of the oil water separator, thereby causing the oil to pass through the oil water separator and eventually to the river. specific operating procedure has been modified to prevent this situation from happening again. The operating procedure has been modified to allow the discharge of water from the inlet through the oil water separator at a rate well below the design capability of the oil water separator.

The discharge of oil is allowed through DSN 489 to a daily maximum of 15 mg/l. No analyses were conducted since the sheen was contained and removed very quickly. PSE&G notified the National Response Center, report number 390705 was assigned to the event. The New Jersey Department of Environmental Protection Southern Regional Enforcement Officer and the United States Coast Guard were notified as a courtesy. In addition, PSE&G notified the Nuclear Regulatory Commission pursuant to 10 CFR 50.72, Significant Events.

PSE&G is confident that this situation will not be repeated with the described modification of the station operating procedure. If you have any additional questions or requirements, please contact Mr. Daniel J. Dowiak at 609-339-1055.

Sincerely,

David R. Powell

Manager -

Licensing and Regulation

DJD/

BC GM - Salem Operations (S05)
Manager - Salem Operations (S01)
Chemistry Superintendent (S07)
Nuclear Licensing Manager - Environmental (N21)
M. F. Vaskis (T5C)
Environmental Station Licensing Engineer (N21)
D. F. Bowman (N21)
Environmental File 2.1.1 SGS

MAJOR

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

FACILITY PSE&G SALEM GENERATING STATION

NJ0005622 FACA PERMIT NUMBER DISCHARGE NUMBER MONITORING PERIOD YEAR DAY YEAR DAY FROM 97 01 97 06 30 06

THERMAL DSCHG FOR DSN 481-483 SOUTHERN REGION / SALEM

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

MAJOR

 NAME
 PSE&G
 PSE&G
 PSE&G
 PSE&G
 NJ0005622

 ADDRESS
 P.O. BOX 236/N21
 NJ0005622
 NJ0005622

 HANCOCKS BRIDGE, NJ 08038
 PERMIT NUMBER

FACILITY PSE&G SALEM GENERATING STATION

LOCATION LOWER ALLOWAYS CREEK, NJ 08038

FACB
DISCHARGE NUMBER

FROM YEAR MO DAY TO YEAR MO DAY 97 06 01 97 06 30

THERMAL DSCHG FOR DSN 484-486 SOUTHERN REGION / SALEM

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EPA Form 3320-1 (Rev. 9-88) Previous editions may be used.

LABS: 17327 06431 82888 77343

PAGE 1 OF 1

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NAME

MA.TOR

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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 IS BELIEVE THE SUBMITTED INFORMATION OF THOSE 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.) TELEPHONE DATE 07 23 609, 935-6000 97 NUMBER YEAR MO DAY

PSE&G

NAME

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

MAJOR

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

NJ0005622 481A DISCHARGE NUMBER PERMIT NUMBER MONITORING PERIOD YEAR YEAR DAY DAY FROM 97 06 30

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

97 06 01 SOUTHERN REGION /

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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. PAGE 1 OF LABS: 17327 06431 82888 77343

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

NJ0005622 482A DISCHARGE NUMBER PERMIT NUMBER MONITORING PERIOD

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

YEAR DAY YEAR DAY FROM 97 06 01 97 06 30

SOUTHERN REGION /

CYPRINODON ANGA 1 0 PRESIDENT ANGA 1 0 PRESIDENT H CARRES VALUE SCRIEDENT H CARRES VALUE SCRIE	OMR NUMBER: NJ0005622		061997		22-23)(24		8-29)(30-31)	OUTHERN REC				
CODE STATE 96HR ACU CYPRINODON ANGA 1 0 FFLUENT GROSS VALUE MEASUREENT MEANURE	PARAMETER	••••	(3 Card Only) (46-53)	QUANTITY OR LOAD IN	NG	(4 Card Oply) (38-45)	QUALITY OR CONCE	NTRATION (54-61)	_	NO. FRE	a.	SÄMPLE
CYPRINODON ANGA 1 0 PFILIENT GROSS VALUE REDIREMENT HEASTREENT HEATTREENT HEA	(32-37)				UNITS				UNITS	835 ANALY	8) ((69-70)
FFIUENT GROSS VALUE RESUREMENT ***** ***** ***** ***** ***** ***** ****	CC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	****	****		CODE=N	*****	*****		0CODE	=NC	ODE=
0400 1 0 PERMIT ***** ***** ***** ***** ***** ***** ****		PERMIT REQUIREMENT	****	*****	****		1	*****		QTRI	Y.	
FFLUENT GROSS VALUE REDIREMENT H REASTREMENT O400 7 0 NTAKE FROM STREAM LOW, IN CONDUIT OR HRU TREATMENT PLANT COSO 1 0 FFLUENT GROSS VALUE REBORT REBORT REBORT REBORT REPORT REPO	PH	SAMPLE MEASUREMENT	*****	*****		7.4	****	7.5		OWEER	(LYG	RAB
0400 7 0 NTAKE FROM STREAM LOW, IN CONDUIT OR HRY TREATMENT PLANT 0050 1 0 FFLUENT GROSS VALUE ESIDUAL 0060 R 0 EE COMMENTS BELOW HLORINE, TOTAL ESIDUAL 0060 R 0 EE COMMENTS BELOW HASSUREMENT 0400 R 0 EE COMMENTS BELOW MEASUREMENT MEASU	00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****			.	8ប			
NTAKE FROM STREAM LOW, IN CONDUIT OR HRU TREATMENT PLANT 0050 1 0 FFLUENT GROSS VALUE FFLUENT GROSS VALUE HLORINE, TOTAL ESIDUAL 0060 R 0 EE COMMENTS BELOW HLORINE, TOTAL ESIDUAL 0060 S 0 EE COMMENTS BELOW MAXIMUM **** ***** ***** ***** ***** ****	? H .	SAMPLE MEASUREMENT	****	*****						OWEER	(LYG)	RAB
HRU TREATMENT PLANT 0050 1 0 FFLUENT GROSS VALUE SAPPLE HEASUREMENT MITH AVG DLY MAX MGD ***** **** **** **** **** **** ****	INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	P0000000000000000000000000000000000000	4		នប			
FFLUENT GROSS VALUE SEGNRÉMENT MNTH AVG DLY MAX MGD HLORINE, TOTAL ESIDUAL 0060 R 0 EE COMMENTS BELOW HLORINE, TOTAL ESIDUAL 0060 S 0 EE COMMENTS BELOW DERMIT MEASUREMENT DERMIT MEASUREMENT MATH AVG DLY MAX MATH AVG DLY	FLOW, IN CONDUIT OR PHRU TREATMENT PLANT	SAMPLE MEASUREMENT				****	****	****				
ESIDUAL OCOO R O EE COMMENTS BELOW HLORINE, TOTAL ESIDUAL OCOO S O EE COMMENTS BELOW MEASUREMENT MEAS	EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		DLY MAX	MGD	*****	*****	*****	***			
EE COMMENTS BELOW REGULARIES **** MNTH AVG DLY MAX WEEK HLORINE, TOTAL ESIDUAL 0060 S 0 PERMIT REGULARIES ***** ***** REPORT .2 MG/L THREE/GRAB EE COMMENTS BELOW SAMPLE MEASUREMENT **** MNTH AVG DLY MAX WEEK SAMPLE MEASUREMENT ***** MNTH AVG DLY MAX WEEK SAMPLE MEASUREMENT ***** MNTH AVG DLY MAX WEEK	CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****				WEEF	ζ	
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PERMIT REQUIREMENT	SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	****	1	•	MG/L			KAB
	1	SAMPLE MEASUREMENT			,							
AVID F. GARCHOW EN.MGR.SALEM OPERATIONS TRUE, ACCURATE AND INPRISONMENT. SEE 18 USC \$ 1001 AND INFRIENT FINE AND INPRISONMENT. SEE 18 USC \$ 1001 AND INPRISONMENT. SEE 18 USC							$\Delta \Delta$	$h \cap A$				
AVID F. GARCHOW ON MY INQUIRTY OF THOSE INDIVIDUALS THE SUBMITTED INFORMATION I BELIEVE THE SUBMITTED INFORMATION	NAME/TITLE PRINCIPAL EXECUTIVE OFF	ICER I CERTIF	Y UNDER PENALTY (AMILIAR WITH THE	OF LAW THAT I HAVE INFORMATION SUBMI	E PERSONA	LLY EXAMINED	10 11	/	TELEPH	IONE	D	ATE
TYPED OR PRINTED \$10,000 and/or maximum imprisonment of between 6 months and 5 years.) AUTHORIZED AGENT CODE NUMBER YEAR MO DA	DAVID F. GARCHOW SEN.MGR.SALEM OPERAT:	ON MY INC OBTAINING IONS TRUE NIFICANT	QUIRY OF THOSE IN G THE INFORMATION ACCURATE AND CON PENALTIES FOR SU TRIVITY OF FOR SU	NDIVIDUALS IMMEDIA N. I BELIEVE THE S MPLETE. I AM AWARE JBMITTING FALSE IN AND IMPRISONMENT	ATELY RES SUBMITTED E THAT TH NEORMATIO	PONSIBLE FOR INFORMATION ERE ARE SIG- N. INCLUDING SC \$ 1001 AND	SIGNATURE		9 935	-6000	97	07 2
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PARAMETER 50060 LOCATIONS: "R" = 8WS DSCHG (NO CWS FLOW) "S" = 8WS 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.

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

NJ0005622 483A PERMIT NUMBER DISCHARGE NUMBER MONITORING PERIOD YEAR DAY YEAR DAY FROM

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

97 06 01 97 06 30 SOUTHERN REGION / SALEM

DMR NUMBER: NJ000562		061997	(20-21)(8-29)(30-31)	OUTHERN RE		BALLM	•
DADAMETED		(3 Card Only) (QUANTITY OR LOADII	NG	(4 Card Oply) (38-45)	QUALITY OR CONCE	NTRATION (54-61)		NO. FREQ.	SAMDLE
PARAMETER (32-37)				UNITS			·	UNITS	NO. FREQ. OF (62 ANALYSIS 63) (64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****		CODE=N	****	*****		OCODE=	CODE=1
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 DAILY MN	.	*****	PERCE NT	QTRLY	
PH	SAMPLE MEASUREMENT	****	****		7.4	****	7.6		OWEEKL	YGRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*	9.0 MUMIXAM	1 - 1	WEEKL	
PH	SAMPLE MEASUREMENT	*****	****		7.6	****	7.8		OWEEKL	
00400 7 0 / INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	<u> </u>	REPORT MAXIMUM	នប	WEEKL	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	14.8	20.3		****	****	*****		ODAILY	
50050 1 Q EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTH AVG		MGD	****	****	*****	***		CALCTI
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	0.1	0.2		OTHREE, WEEK	
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 MNTH AVG	DLY MAX	MG/L	THREE WEEK	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		****	NODI	NODI		ONODI	NODI
50060 8 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG		MG/L	THREE WEEK	GRAB
[SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT					1 . 1	Λ			
NAME/TITLE PRINCIPAL EXECUTIVE OFF DAVID F. GARCHOW GEN.MGR.SALEM OPERAT: TYPED OR PRINTED	ICER I CERTIF AND AM F/ ON MY INC OBTAINING ONS TRUE NIFICANT IHE POSSI	Y UNDER PENALTY C AMILIAR WITH THE BUIRY OF THOSE IN G THE INFORMATION ACCURATE AND COM- ACCURATE AND COM- PILITY OF FINE A	OF LAW THAT I HAVE INFORMATION SUBMI INFORMATION SUBMI INFORMATION SUBMI INFORMATION INFORMATION INFORMATION INFORMATION INFORMATION INFORMATION INFOR	PERSONA ITTED HER TELY RES SUBMITTED THAT TH FORMATIO SEE 18 U	LLY EXAMINED EIN: AND BASED PONSIBLE FOR INFORMATION ERE ARE SIG- NCLUDING SC \$ 1001 AND	SIGNATURE		TELEPH 09 935		7 07 2:
TYPED OR PRINTED	\$10,000 \$	nd/or maximum in	s under these stat morisonment of bet BCHG (NO CI	utes may			OF PRINCIPAL OFFICER OR AGENT (NORMAL COI		MBER YEA	R MO DAY

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. EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. PAGE 1 OF LABS: 17327 06431 82888 77343

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

DAY

MAJOR

NAME PSE&G ADDRESS P.O. BOX 236/N21 484A NJ0005622 PERMIT NUMBER DISCHARGE NUMBER HANCOCKS BRIDGE, NJ 08038 MONITORING PERIOD FACILITY PSE&G SALEM GENERATING STATION YEAR MO DAY YEAR 10 97 06 30 FROM LOCATION LOWED ALLOWAVE CREEK NIT 09039 07

COMPUEDN DECTON /

CATION LOWER ALLOWAYS			97				OUTHERN REC	SION /	/ SALEM	
DMR NUMBER: NJ000562		061997		22-23)(24		8-29)(30-31)				т
PARAMETER (32-37)	••••	(3 Card Only) (QUANTITY OR LOADII	1G	(4 Card Oply) (38-45)	QUALITY OR CONCE	NTRATION (54-61)	Γ-	NO. FREQ.	SAMPLE
(32-37)		1		UNITS	1			UNITS	(62 ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****		OCODE=1	CODE=1
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 DAILY MN		*****	PERCI NT	OTRLY	
PH	SAMPLE MEASUREMENT	*****	*****		7.4	****	7.6		OWEEKL	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM		9.0 MUMIXAM	នប	WEEKL	
PH	SAMPLE MEASUREMENT	****	****		7.6	*****	7.8		OWEEKL	GRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM		REPORT MAXIMUM	នប	WEEKL'	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	205.6	249.9		****	*****	*****		ODAILY	ļ
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTH AVG	REPORT DLY MAX	MGD	*****	*****	****	***		CALCTI
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	****		****	< 0.1	< 0.1		OTHREE, WEEK	GRAB
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	****	*****	****	****	.3 BVA HTMM	.	MG/L	THREE. WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	*****		****	< 0.1	< 0.1		OTHREE, WEEK	GRAB
50060 8 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	DLY MAX	MG/L	THREE WEEK	GRAB
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT					$\Omega_{\lambda} \wedge$	σΛ			
NAME/TITLE PRINCIPAL EXECUTIVE OFF	ICER I CERTIF	Y UNDER PENALTY O	OF LAW THAT I HAVE	PERSONA	LLY EXAMINED /			TELEP	HONE	DATE
NAME/TITLE PRINCIPAL EXECUTIVE OFF DAVID F. GARCHOW GEN.MGR.SALEM OPERAT: TYPED OR PRINTED	ÖN MY IN OBTAININ OBTAININ THE POSS THE POSS	QUIRÝ ÔF THOSE IN G THE INFORMATION ACCURATE AND COM PENALTIES FOR SU IBILITY OF FINE	NDÎVÎDÛALÎ ÎMMEDÎ N. I BELÎEVÊ THE MPLETE. Î AM AWARÎ JBMÎTTÎNG FALSE ÎI AND ÎMPRÎSONMENT	ĀŢĖĻŸ KĒŠ SUBMITTED E THAT TH NFORMATIO SEE 18 U	PONSIBLE FOR STAND	OLI ST GNATURE			5-6000 9	7 07 23
TYPED OR PRINTED	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1319. (Penalties and/or maximum in	under these star oprisonment of be	tutės may tween 6 m	include fines up onths and 5 years.	to ĒXĒCŪTĪVĒ (OF PRINCIPAL AI OFFICER OR AI AGENT CO	REA DOE N	IUMBER YEA	R MO DAY
DADAWETED FOOSO LOCAL	TOYO . HI	NI - 0770 D		"O TI C	WI Hell -	OMO DOOM	(NOPMAT. COL	TD		

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. EPA Form 3320-1 (Rev. 9-88) Previous editions may be used.

MAJOR

AME PSE&G		((2-16)				(17-	19)
DDRESS P.O. BOX 236/N21		NJOO	0562	2]		485A	
HANCOCKS BRIDGE, NJ 08038		PERMI	T NUMBE	ER		D	ISCHARGE	NUMBER
				MONITO	ORING	PERI	OD	
ACILITY PSE&G SALEM GENERATING STATION	FROM	YEAR	МО	DAY	TO	YEAR	МО	DAY
					1 101			

OCATION LOWER ALLOWAYS	CREEK, N	<u> </u>	97	06 0	97	06 30 80	OUTHERN RE	GION /	/ Sal	em ·	•
DMR NUMBER: NJ000562:		061997		22-23)(24		8-29)(30-31)					
PARAMETER (32-37)	••••	(3 Card Only) (QUANTITY OR LOADII	NG	(4 Card Oply) (38-45)	QUALITY OR CONCE	ITRATION (54-61)	1	NO. FR	Q.	AMPLE
(32-37)				UNITS				UNITS	(84-	(8) (6)	AMPLE TYPE 9-70)
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****		CODE=N	****	****		0COD	e=nco	DE=1
TANGA 1 0	PERMIT REQUIREMENT	*****	*****	****	50	*****	*****	PERCI	QTR	LY	
EFFLUENT GROSS VALUE		****		****	DAILY MN		7 (MI	AMER	ZT VCD	**************************************
PH	SAMPLE MEASUREMENT	*****			7.5	*****	7.6			KLYGR	
00400 1 0	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	BU	WEE	KLYGR	AC -
EFFLUENT GROSS VALUE	REQUIREMENT			****	MINIMUM	 	MAXIMUM				
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.8		OWEE	KLYGR	AB
00400 7 0	DEPRIT	*****	*****	****	REPORT	*****	REPORT	ខប	WEE	KLYGR	AB
INTAKE FROM STREAM	PERMIT REQUIREMENT			****	MINIMUM		MUNIKAN				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	√23.0	224.1		*****	*****	****			LY CA	1911-1
50050 1 0	PERMIT	REPORT	REPORT		*****	*****	*****	****	DAI	LY CA	LCT)
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MNTH AVG	DLY MAX	MGD				***			
CHLORINE, TOTAL	SAMPLE MEASUREMENT	****	*****		*****	< 0.1	0.1			EE/GR	AB
RESIDUAL	MEASUREMENT		_			_			WEE	 	********
50060 R 0	PERMIT REQUIREMENT	*****	*****	****	****	.3		MG/L	*****************	ee/gr	AB
SEE COMMENTS BELOW	KEGOTKEMENT	*****		****	****	MNTH AVG	DLY MAX		WEE	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	3 D
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	****		*****	< 0.1	< 0.1		WEE	EE/GR	AD ~~
	MEASUREMENT					REPORT	•	MG/L		EE/GR	78 6
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT			****		MNTH AVG	DLY MAX	MG/ II	WEE		
DEE COMMENTO BELOW						FLIX LIL MVG			1		
•	SAMPLE MEASUREMENT									j	
	PERMIT REQUIREMENT				(\	/				
NAME/TITLE PRINCIPAL EXECUTIVE OF		Y UNDER PENALTY C	P. LAW THAT I HAV	PERSONA	LLY EXAMINED		// / T	TELEP	HONE	DAT	Æ
NAME/TITLE PRINCIPAL EXECUTIVE OFF DAVID F. GARCHOW GEN.MGR.SALEM OPERAT: TYPED OR PRINTED	ON MY INCOME IN THE PROPERTY OF THE PROPERTY O	AMILIAK WIIH THE QUIRY OF THOSE IN G THE INFORMATION ACCURATE AND COM	INFURMATION SUBM DIVIDUALS IMMEDIA I I BELIEVE THE PLETE I AM AWARI	ATELY RES SUBMITTED E THAT TH	PONSIBLE FOR INFORMATION ERE ARE SIG-	hus Face	show 5	09, 935	5-6000	97 0	7 2
	THE POSS	PENALTIES FOR SL IBILITY OF FINE A	JBMITTING FALSE II ND IMPRISONMENT.	NFORMATIO SEE 18 U	N INCLUDING	SIGNATURE					+
TYPED OR PRINTED	33 USC 0808	Penalties). (Penalties and/or maximum in	s under these stam mprisonment of be	tutes may tween 6 m	include fines up onths and 5 years.	.) EXECUTIVE (OF PRINCIPAL A DFFICER OR A AGENT C	REA ODE N	UMBER	YEAR MO	DAY
PARAMETER SOUCH LOCA	TONG. III	II - GWG D	PORC /NO OI	TO TOT	W\ Hell -	SWS DSCHG	INODWAT. CO	MTD \			

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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

DAY

MAJOR

NAME PSE&G ADDRESS P.O. BOX 236/N21 NJ0005622 486A PERMIT NUMBER DISCHARGE NUMBER HANCOCKS BRIDGE, NJ 08038 MONITORING PERIOD FACILITY PSE&G SALEM GENERATING STATION YEAR YEAR MO FROM

OCATION LOWER ALLOWAYS	CREEK, NJ	08038	. <u> </u>			 _	OUTHERN REG	FION /	SALEM	• .
DMR NUMBER: NJ000562		061997		22-23)(24	,	3-29)(30-31)	······································		•	_
PARAMETER (32-37)	••••	(3 Card Only) 0 (46-53)	UANTITY OR LOADII	NG	(4 Card Oply) (38-45)	QUALITY OR CONCEN	TRATION (54-61)		NO. FREQ.	SAMPLE
(32-37)				UNITS				UNITS	(64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****		OCODE=1	CODE=1
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 DAILY MN		*****	PERCE NT	OTRLY	
PH	SAMPLE MEASUREMENT	*****	*****		7.4	*****	7.6		OWEEKL	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MUMIKAN	BU	WEEKL	GRAB
РН	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.8		OWEEKL!	
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	*****	REPORT MAXIMUM	su	WEEKL:	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	160.2	456.6		*****	*****	*****		ODAILY	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTH AVG	REPORT DLY MAX	MGD	*****	*****	*****	***		CALCTI
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	0.1	0.2		OTHREE, WEEK	
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 MNTH AVG	DLY MAX	MG/L	THREE. WEEK	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1		OTHREE, WEEK	
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	DLY MAX	MG/L	THREE WEEK	GRAE
,	SAMPLE MEASUREMENT									
``	PERMIT REQUIREMENT									
NAME/TITLE PRINCIPAL EXECUTIVE OF	ICER I CERTIF	Y UNDER PENALTY C MILIAR WITH THE	F LAW THAT I HAVE INFORMATION SUBM	E PERSONAL ITTED HERI	LLY EXAMINED /	' /n ()//	'	TELEP	HONE	DATE
NAME/TITLE PRINCIPAL EXECUTIVE OFF DAVID F. GARCHOW GEN.MGR.SALEM OPERAT: TYPED OR PRINTED	ON MY INC OBTAINING IONS TRUE NIFICANT	QUIRY OF THOSE IN THE INFORMATION ACCURATE AND COM PENALTIES FOR SL	DIVIDUALS IMMEDIA I BELIEVE THE PLETE I AM AWAR IBMITTING FALSE II	ATĖLY RESI SUBMITTED E THAT THI NEORMATIO	PONSIBLE FOR INFORMATION ERE ARE SIG-	and far	, -	935	-6000 9	7 07 23
TYPED OR PRINTED	\$10,000 s	1319. (Penalties and/or maximum in	under these star prisonment of be	tutes may	include fines up onths and 5 years.	to EXECUTIVE C	AFFICER OR		UMBER YEA	R MO DAY

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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 STATE AND COMPLETE: 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.)

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER I

GEN.MGR.SALEM OPERATIONS

TYPED OR PRINTED

DAVID F. GARCHOW

PERMIT REQUIREMENT

97

YEAR

DATE

07

MO DAY

23

TELEPHONE

609, 935-6000

NUMBER

NAME PSE&G ADDRESS P.O. BOX 236/N21 NJ0005622 489C HANCOCKS BRIDGE, NJ 08038 DISCHARGE NUMBER PERMIT NUMBER MONITORING PERIOD FACILITY PSE&G SALEM GENERATING STATION YEAR YEAR DAY FROM LOCATION LOWER ALLOWAVE CREEK, N.T. 08038 06 30

COUTTEDN DECTON /

CATION LOWER ALLOWAYS	CREEK, N.	<u> </u>	97	06 0	97	06 30 S	OUTHERN RE	GION /	/ Sale	4	
DMR NUMBER: NJ000562:		061997	(20-21)(8-29)(30-31)			,		
PARAMETER (32-37)	••••	(3 Card Only) (46-53)	QUANTITY OR LOADII	NG	(4 Card Oply) (38-45)	QUALITY OR CONCE	NTRATION (54-61)	T	NO. FREQ OF (62 ANALYS (64-68	SAMP	ĽΕ
(32-37)				UNITS				UNITS	(62 ANALYS (64-68	SAMP (S) (69-7	ō)
РН	SAMPLE MEASUREMENT	*****	*****		7.8	****	7.8		OONCE MONT	/ GRAI	}
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	ł	9.0 MUMIXAM	បឧ	ONCE MONT	/ GRAI	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	****	·	****	6	6		OONCE MONT	I I	
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 MNTH AVG	DLY MAX	MG/L	MONT		
HYDROCARBONS, IN H20, IR, CC14 EXT. CHROMAT	SAMPLE MEASUREMENT	****	****		****	2.1			OONCE, MONT	I	
00551 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	****	10 MNTH AVG	DLY MAX	MG/L	MONT		
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	*****	*****		****	5			MONT	1	
00680 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	DLY MAX	MG/L	MONT	~~~~~~~	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0502	0.0502		****	*****	*****		OONCE MONT	1	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTH AVG	REPORT DLY MAX	MGD	****	****	*****	****	ONCE MONT	CALC	'T
	SAMPLE MEASUREMENT	,						3			
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT							3			
	PERMIT REQUIREMENT)				
NAME/TITLE PRINCIPAL EXECUTIVE OF	FICER I CERTIF	Y UNDER PENALTY (OF LAW THAT I HAVE INFORMATION SUBM	E PERSONA	LLY EXAMINED .			TELER	HONE	DATE	
NAME/TITLE PRINCIPAL EXECUTIVE OF DAVID F. GARCHOW GEN.MGR.SALEM OPERAT	ON MY IN OBTAININ IONSIS TRUE NIFICANT	QUIRY OF THOSE IN G THE INFORMATION ACCURATE AND CON PENALTIES FOR SU	NDIVIDUALS IMMEDIA N. I BELIEVE THE S MPLETE. I AM AWARI JBMITTING FALSE I	ATELY RES SUBMITTED E THAT TH NEORMAJIO	PONSIBLE FOR \ INFORMATION \ LERE ARE SIG-	and fare		09 93!	5-6000	07	2
						to EXECUTIVE) AUTHORIZED				AR MO	DA'
TOTAL SUSPENDED SOLT	DR RHAT.T.	NOT EXCER	D A 7-DAY 7	AVERA	IR OR 45 MG	IT. THIS	DISCHARGE	TS DE	STGNATE) AS	

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

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.

REPORTING PERIOD

MO. YR.

MO. YR.

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0 | 6 | 9 | 7 | THRU

0 6 9 7

PERMITTEE:	Name Public Service Electric	and Gas Company									
`	Address P.O. Box 236										
	Hancock's Bridge, NJ	08038									
FACILITY:	Name Salem Nuclear Genera	ting Station									
	Address Alloway Creek Neck F	oad									
	Hancock's Bridge	(County) Salem									
	Telephone (609) 935-6000	· :									
FORMS ATTACH	ED (Indicate <u>Quantity</u> of Each)	OPERATING EXCEPTIONS									
SLUDGE REPORTS - T-VWX-007 SLUDGE REPORTS - I T-VWX-010A WASTEWATER REPO T-VWX-011 GROUNDWATER REF VWX-015(A,I NPDES DISCHARGE 12 EPA FORM 33	Sanitary T-VWX-008 T-VWX-009 Industrial T-VWX-010B PRTS T-VWX-012 T-VWX-013 PORTS B) VMX-016 VMX-017 MONITORING REPORT 320-1 ON- I certify under penalty of law the information submitted in this doc	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 here were a side in appropriate space.) at I have personally examined and am familicument and all attachments and that, based responsible for obtaining the information, I	Plant" on the e completed. iar with the d on my inquiry								
HOENCED ODED	submitted information is true, ac penalties for submitting false inf	curate and complete. I am aware that ther ormation including the possibility of fine an	e are significan								
LICENSED OPER		PRINCIPAL EXECUTIVE OFFICER or DULY AUTHORIZED REPRESENTATIVE									
Name (Printed)	OHN F. LEOPARDI	Name (Printed) David F. Garchow	. *II.								
Grade & Registry Signature	No: N-2 0013703	Title (Printed) Gen. Mgr. Salem Opera	tions								
Date 07/22/	97	Date 07/23/97									

OPERATING E	XCEPTIONS DETAILED		•		,	Page 2
"none"	c .		-			
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HOURS ATTENDED AT PLANT

Month 0 6 Year 9 7

Day of Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Licensed Operator	0	8	8	8	8	8	0	0	8	8	8	8	8	0	0	8
Others	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
Day of Month		18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Licensed Operator	8	8	8	8	0	0	8	8	8	8	8	0	0	8		
Others	4	4	4					4		4	4	4	4			