

PERMITTEE NAME/ADDRESS

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		FACA					
PERMIT NUMBER		DISCHARGE NUMBER					
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	98	02	01		98	02	28
	(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 021998**

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) (46-53) (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	*****	*****	UNITS	*****	5.4	6.9				CONTINCONTIN UOUS
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	46.1 01DAMX	DEG. C			CONTINCONTIN UOUS
TEMPERATURE, WATER DEG. CENTIGRADE 00010 2 0	SAMPLE MEASUREMENT	*****	*****	UNITS	*****	0.0	0.4				CONTINCONTIN UOUS
EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	15.3 01DAMX	DEG. C			CONTINCONTIN UOUS
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 0	SAMPLE MEASUREMENT	*****	*****	UNITS	*****	5.5	6.9				CONTINCONTIN UOUS
INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG. C			CONTINCONTIN UOUS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER A. CHRISTOPHER BAKKEN I 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	98	03	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.

9804020387 980323
PDR ADOCK 05000272
R PDR

LABS: 17327 06431 82888 77343

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

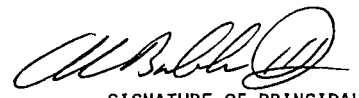
NJ0005622 **FACB**
 PERMIT NUMBER DISCHARGE NUMBER

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

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
98 02 01 98 02 28
 (20-21)(22-23)(24-25) (26-27)(28-29)(30-31)

THERMAL DSCHG FOR DSN 484-486
SOUTHERN REGION / SALEM

DMR NUMBER: **NJ0005622 FACB 021998**

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (46-53)	QUANTITY OR LOADING (54-61)	UNITS	QUALITY OR CONCENTRATION (38-45)	QUALITY OR CONCENTRATION (46-53)	UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)		
											(3 Card Only)	(4 Card Only)
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0	SAMPLE MEASUREMENT	*****	*****		*****	8.8	15.2			CONTINCONTIN		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	46.1 01DAMX	DEG.C		CONTINCONTIN		
TEMPERATURE, WATER DEG. CENTIGRADE 00010 2 0	SAMPLE MEASUREMENT	*****	*****		*****	3.3	9.9			CONTINCONTIN		
EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	15.3 01DAMX	DEG.C		CONTINCONTIN		
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 0	SAMPLE MEASUREMENT	*****	*****		*****	5.5	6.9			CONTINCONTIN		
INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.C		CONTINCONTIN		
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER A. CHRISTOPHER BAKKEN I 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.)							TELEPHONE 609 935-6000	DATE 98 03 23			
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 							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	TO	YEAR	MO	DAY
	98	02	01		98	02	28
(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 FACC 021998**

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)		UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		REPORT	PERMIT		*****	*****	*****				
THERMAL DISCHARGE MILLION BTUS PER HR.		2966	7885								0 CONTINUALCTD
00015 2 0 EFFLUENT NET VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT		REPORT 01MOAV	30600 01DAMX	MBTU/HR				****			CONTINUALCTD
50050 7 0 INTAKE FROM STREAM		1572	1961								0 DAILY CALCTD
		REPORT 01MOAV	3024 01DAMX	MGD				****			DAILY CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER A. CHRISTOPHER BAKKEN I 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.)	TELEPHONE		DATE		
		609 935-6000	98 03 23			
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	AREA CODE	NUMBER	YEAR	MO	DAY

PERMITTEE NAME/ADDRESS

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

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

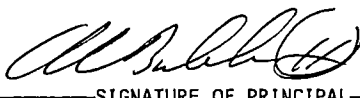
MAJOR

NJ0005622	048C
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
FROM YEAR MO DAY	TO YEAR MO DAY
98 02 01	98 02 28
(20-21)(22-23)(24-25)	(26-27)(28-29)(30-31)

SOUTHERN REGION / SALEM

FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622 048C 021998**

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX. (62-65)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		UNITS	UNITS	UNITS	UNITS	UNITS	UNITS			
SOLIDS, TOTAL SUSPENDED		*****	*****		*****	4	5		TWICE/MONTH	COMPOS
00530 1 0		*****	*****	****	*****	30	100		TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	01MOAV	01DAMX	MG/L	TWICE/MONTH	COMPOS
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT		*****	*****		*****	< 0.5	< 0.5		TWICE/MONTH	GRAB
00551 1 0		*****	*****	****	*****	10	15		TWICE/MONTH	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	01MOAV	01DAMX	MG/L	TWICE/MONTH	GRAB
NITROGEN, AMMONIA TOTAL (AS N)		*****	*****		*****	12	22		TWICE/MONTH	COMPOS
00610 1 0		*****	*****	****	*****	35	70		TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	01MOAV	01DAMX	MG/L	TWICE/MONTH	COMPOS
CARBON, TOT ORGANIC (TOC)		*****	*****		*****	2	3		TWICE/MONTH	COMPOS
00680 1 0		*****	*****	****	*****	REPORT	50		TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	01MOAV	01DAMX	MG/L	TWICE/MONTH	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.125	0.451		*****	*****	*****		DAILY	CALCTD
50050 1 0		REPORT	REPORT		*****	*****	*****	****	DAILY	CALCTD
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	01MOAV	01DAMX	MGD	*****	*****	*****	***	DAILY	CALCTD
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER A. CHRISTOPHER BAKKEN IOWA 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.)	TELEPHONE	DATE			
		609 935-6000	98	03	23	
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	AREA CODE	NUMBER	YEAR	MO	DAY

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

MAJOR

PERMITTEE NAME/ADDRESS

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

NJ0005622
PERMIT NUMBER

481A
DISCHARGE NUMBER

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

MONITORING PERIOD


FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	98	02	01		98	02	28

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

SOUTHERN REGION / SALEM

DMR NUMBER: **NJ0005622 481A 021998**

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		QUANTITY OR LOADING	UNITS	UNITS	UNITS	UNITS					
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50	*****	*****	PERCE	*****	QTRLY	*****
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.7	*****	7.8	*****	*****	*****	OWEELYGRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU	*****	*****	WEEKLYGRAB
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.6	*****	7.8	*****	*****	*****	OWEELYGRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT	*****	REPORT	SU	*****	*****	WEEKLYGRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	235.0	382.9	*****	*****	*****	*****	*****	*****	*****	ODAILY CALCTD
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	MGD	01MOAV	01DAMX	*****	****	*****	*****	DAILY CALCTD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI	*****	*****	*****	ONODI NODI
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3	.5	MG/L	*****	*****	THREE/GRAB WEEK
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.1	< 0.1	*****	*****	*****	THREE/GRAB WEEK
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	.2	MG/L	*****	*****	THREE/GRAB WEEK
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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A. CHRISTOPHER BAKKEN GEN.MGR.SALEM OPERATIONS			609 935-6000
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	482A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
FROM	TO
YEAR MO DAY	YEAR MO DAY
98 02 01	98 02 28
(20-21)(22-23)(24-25)	(26-27)(28-29)(30-31)

FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622 482A 021998**

SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)		UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		*****	*****		*****	*****	*****				
LC50 STATRE 96HR ACU CYPRINODON TAN6A 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****		0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****	****	50	*****	*****	PERCE		OTRLY	
PH	SAMPLE MEASUREMENT	*****	*****		7.3	*****	7.9		0	WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.8		0	WEEKLY	GRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT	*****	REPORT	SU		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	197.0	236.6		*****	*****	*****		0	DAILY	CALCTD
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****		DAILY	CALCTD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1		0	THREE/	GRAB
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3	.5	MG/L		THREE/	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1		0	THREE/	GRAB
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	.2	MG/L		THREE/	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 HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE	DATE
A. CHRISTOPHER BAKKEN GEN.MGR.SALEM OPERATIONS			609 935-6000
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER
			YEAR MO DAY

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

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

NJ0005622 **483A**
PERMIT NUMBER DISCHARGE NUMBER
MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
98 02 01 98 02 28
(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 021998**

SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)		UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)			UNITS	NO. OF ANALYSIS (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		*****	*****		*****	*****	*****				
LC50 STATRE 96HR ACU CYPRINODON TAN6A 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	CODE=N	*****	*****	*****	0	CODE=N	CODE=N
PH	SAMPLE MEASUREMENT	*****	*****	*****	6.9	*****	7.8	*****	0	WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	6.0	*****	9.0	SU	0	WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	*****	*****	*****	7.6	*****	7.8	*****	0	WEEKLY	GRAB
00400 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****	*****	REPORT	*****	REPORT	SU	0	WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	115.8	247.2	*****	*****	*****	*****	*****	0	DAILY	CALCTD
50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	REPORT	REPORT	MGD	*****	*****	*****	*****	0	DAILY	CALCTD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.2	*****	0	THREE/	GRAB
50060 R 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	.3	.5	MG/L	0	THREE/	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.1	< 0.1	*****	0	THREE/	GRAB
50060 S 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	REPORT	.2	MG/L	0	THREE/	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER **A. CHRISTOPHER BAKKEN**
GEN.MGR.SALEM OPERATIONS
TELEPHONE **609 935-6000** DATE **98 03 23**
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT *[Signature]*
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 **484A**
 PERMIT NUMBER DISCHARGE NUMBER

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

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
98 02 01 98 02 28
 (20-21)(22-23)(24-25) (26-27)(28-29)(30-31)

SOUTHERN REGION / SALEM

DMR NUMBER: **NJ0005622 484A 021998**

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) (54-61)			UNITS	NO. EX (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		QUANTITY OR LOADING	UNITS	QUALITY OR CONCENTRATION	UNITS						
LC50 STATRE 96HR ACU CYPRINODON TAN6A 1 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	CODE=N	*****	*****	PERCENT	0	OTRLY	CODE=N
PH	*****	*****	*****	*****	6.8	*****	7.8	WEEKLYGRAB	0	WEEKLYGRAB	WEEKLYGRAB
00400 1 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	6.0	*****	9.0	SU	0	WEEKLYGRAB	WEEKLYGRAB
PH	*****	*****	*****	*****	7.6	*****	7.8	WEEKLYGRAB	0	WEEKLYGRAB	WEEKLYGRAB
00400 7 0 INTAKE FROM STREAM	*****	*****	*****	*****	REPORT	*****	REPORT	SU	0	WEEKLYGRAB	WEEKLYGRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	*****	379.5	525.2	*****	*****	*****	*****	*****	0	DAILY	CALCTD
CHLORINE, TOTAL RESIDUAL 50060 R 0 SEE COMMENTS BELOW	*****	*****	*****	*****	*****	NODI	NODI	MG/L	0	NODI	NODI
CHLORINE, TOTAL RESIDUAL 50060 S 0 SEE COMMENTS BELOW	*****	*****	*****	*****	*****	.3	.5	MG/L	0	THREE/ WEEK	GRAB
	*****	*****	*****	*****	*****	< 0.1	< 0.1	MG/L	0	THREE/ WEEK	GRAB
	*****	*****	*****	*****	*****	REPORT	.2	MG/L	0	THREE/ WEEK	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: **A. CHRISTOPHER BAKKEN I 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.)
 TELEPHONE: **609 935-6000** DATE: **98 03 23**
 TYPED OR PRINTED: _____ SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: *A. Christopher Bakken* 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			485A				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	98	02	01		98	02	28
	(20-21)(22-23)(24-25)				(26-27)(28-29)(30-31)		

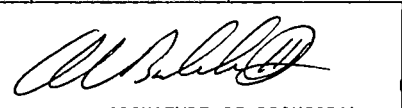
FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622 485A 021998**

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	LOADING	UNITS	QUALITY	CONCENTRATION	UNITS				
LC50 STATRE 96HR ACU CYPRINODON TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	CODE=N	*****	*****	PERCENT		QTRLY	
PH	SAMPLE MEASUREMENT	*****	*****		7.2	*****	7.7			OWEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.8			OWEEKLY	GRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT	*****	REPORT	SU		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	346.4	476.2		*****	*****	*****			ODAILY	CALCTD
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****		DAILY	CALCTD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			ONODI	NODI
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3	.5	MG/L		THREE/	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1			OTHREE/	GRAB
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	.2	MG/L		THREE/	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
A. CHRISTOPHER BAKKEN I
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	98	03	23
AREA CODE	NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS

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 **486A**
PERMIT NUMBER DISCHARGE NUMBER

FACILITY **PSE&G SALEM GENERATING STATION**
LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
DMR NUMBER: **NJ0005622 486A 021998**

MONITORING PERIOD
FROM YEAR MO DAY TO YEAR MO DAY
98 02 01 98 02 28
(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)		UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)		UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		QUANTITY	LOADING		QUALITY	CONCENTRATION				
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****			OCODE=N
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 01DAMN	*****	*****			PERCENT
PH	SAMPLE MEASUREMENT	*****	*****		7.0	*****	7.7			OWEEKLYGRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 01RPMN	*****	9.0 01RPMX			SU WEEKLYGRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.8			OWEEKLYGRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT 01RPMN	*****	REPORT 01RPMX			SU WEEKLYGRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	361.7	521.3		*****	*****	*****			ODAILY CALCTD
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	****	***	DAILY CALCTD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			ONODI NODI
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 01MOAV	.5 01DAMX			MG/L THREE/GRAB WEEK
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1			OTHREE/GRAB WEEK
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	.2 01DAMX			MG/L THREE/GRAB WEEK
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER **A. CHRISTOPHER BAKKEN I 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.)

TELEPHONE **609 935-6000** DATE **98 03 23**

TYPED OR PRINTED _____ SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT *A. Bakken* AREA CODE NUMBER YEAR MO DAY

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

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
	98	02	01		98	02	28
	(20-21)(22-23)(24-25)				(26-27)(28-29)(30-31)		

MAJOR REGION **SALEM**
 SOUTHERN REGION

FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622 487B 021998**

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (58-65)			UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		*****	*****	UNITS	*****	*****	*****				
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI	DEG. C	0	ONCE/	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	43.3 01DAMX	DEG. C	0	ONCE/	GRAB DISCHG
PH	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI		0	ONCE/	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 01RPMN	*****	9.0 01RPMX	SU	0	ONCE/	GRAB DISCHG
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI		0	ONCE/	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	100 01DAMX	MG/L	0	ONCE/	GRAB DISCHG
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI		0	ONCE/	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	15 01DAMX	MG/L	0	ONCE/	GRAB DISCHG
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	*****	*****	*****	*****	NODI	NODI		0	ONCE/	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	50 01DAMX	MG/L	0	ONCE/	GRAB DISCHG
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	NODI	NODI	*****	*****	*****	*****		0	ONCE/	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	****	0	ONCE/	CALCTD DISCHG
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER A. CHRISTOPHER BAKKEN 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.)	TELEPHONE		DATE		
		609 935-6000		98	03	23
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	AREA CODE	NUMBER	YEAR	MO	DAY

PERMITTEE NAME/ADDRESS

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

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

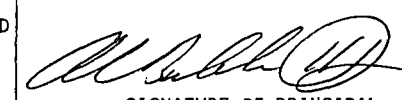
MAJOR

NJ0005622			489C				
PERMIT NUMBER			DISCHARGE NUMBER				
MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	09	01		97	09	30
(20-21)(22-23)(24-25)			(26-27)(28-29)(30-31)				

FACILITY **PSE&G SALEM GENERATING STATION**
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**
 DMR NUMBER: **NJ0005622 489C 091997**

SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(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)
		QUANTITY	LOADING	UNITS	QUALITY	CONCENTRATION	UNITS				
PH	SAMPLE MEASUREMENT	*****	*****		7.9	*****	7.9			0ONCE/ MONTH	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU		0ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****		5			0ONCE/ MONTH	GRAB
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30	100	MG/L		0ONCE/ MONTH	GRAB
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT	SAMPLE MEASUREMENT	*****	*****		*****	10.5	10.5			0ONCE/ MONTH	GRAB
00551 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	10	15	MG/L		0ONCE/ MONTH	GRAB
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	*****	*****		*****		5			0ONCE/ MONTH	GRAB
00680 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	50	MG/L		0ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0356	0.0356		*****	*****	*****			0ONCE/ MONTH	CALCTD
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	****		0ONCE/ MONTH	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE	
A. CHRISTOPHER BAKKEN GEN.MGR.SALEM OPERATIONS			609	935-6000	98
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	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

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.

REPORTING PERIOD

MO. YR.

MO. YR.

0 0 0 5 6 2 2

0 2 9 8 THRU

0 2 9 8

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) MICHAEL J. KUBIAK

Name (Printed) A. Christopher Bakken III

Grade & Registry No. N-2 0016955

Title (Printed) Gen. Mgr. Salem Operations

Signature Michael J. Kubiak

Signature A. Christopher Bakken III

Date 03/19/98

Date 03/23/98

