

PSEG

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

Hope Creek Generating Station

December 17, 1990

Chief George Corporale
Bureau of Information Systems
P. O. Box CN-029
Trenton, N. J. 08625

RE: NEW JERSEY POLLUTANT DISCHARGE
ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT
HOPE CREEK GENERATING STATION
NJPDES PERMIT NJ0025411

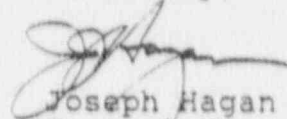
Dear Sir:

Attached is the Discharge Monitoring Report for the Hope Creek Generating Station for the month of November 1990.

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 analysis required to be performed by the above agencies. The choice of the measurement devices and analytical methods are controlled by the EPA and the 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 that any reading analytical result represents the true value with absolute accuracy, nor is it an endorsement of the suitability of any analytical or measurement procedure.

If you have any questions concerning this report, please feel free to contact Mr. C. E. White.

Sincerely,



Joseph Hagan
General Manager -
Hope Creek Operations

JEH
11

NJPDES

2

12/17/90

3 CW:eaj
Attachments

C Executive Director, DRBC
USEPA - Dr. Richard Baker
USNRC

NJPDES
Explanation of Exceedances
November 1990

12/17/90

The following explanations are included to clarify possible deviation 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.

Analytical values performed by the following NJDEP certified laboratories:

NET Atlantic, Inc. (08153)
Hope Creek Generating Station (17451)
Talbot Laboratory, Inc. (77535)
South Jersey Testing, Inc. (06431)

Deviations from required sampling, analysis monitoring and reporting methods and periodicities are noted on the respective DMR.

Frequency for discharge point 461A, the Cooling Tower Blowdown, and the River were done at approximately 5 hour intervals to provide for the cycles of concentration in the system.

Final approval of limit change from COD to TOC has been received. Analytical results for TOC are included.

As per the Administrative Consent Order the TSS limit for discharge points 462A, 463A and 464 have been lifted and the interim thermal limits for discharge point 461A have been changed to 443 MBTU/hr (June - September) and 731 MBTU/hr (October - May).

NJPDES
Explanation of Exceedances
November 1990

12/17/90

The following exceedances are included in the attached report and explained below. Exclusions have not endangered nor significantly impacted public health or the environment.

DSN No.

EXPLANATION

No Exceedances

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER RESOURCES

MONITORING REPORT - TRANSMITTAL SHEET

NJPOES NO.

REPORTING PERIOD

MO. YR. MO. YR.

010121514111

11190 THRU 11190

PERMITTEE: Name Public Service Electric & Gas Company

Address P. O. Box 236

Hancocks Bridge, N. J. 08038

FACILITY: Name Hope Creek Generating Station

Address P.O. Box 236

Hancocks Bridge, N. J. (County) Salem

Telephone (609) 339-3463

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) VWX-016 VWX-017

NJPOES DISCHARGE MONITORING REPORT

EPA FORM 3320-1

OPERATING EXCEPTIONS

	YES	NO
DYE TESTING	<input type="checkbox"/>	<input checked="" type="checkbox"/>
TEMPORARY BYPASSING	<input type="checkbox"/>	<input checked="" type="checkbox"/>
DISINFECTION INTERRUPTION	<input type="checkbox"/>	<input checked="" type="checkbox"/>
MONITORING MALFUNCTIONS	<input type="checkbox"/>	<input checked="" type="checkbox"/>
UNITS OUT OF OPERATION	<input type="checkbox"/>	<input checked="" type="checkbox"/>
OTHER	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

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

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

LICENSED OPERATOR

Name (Printed) John M. Hoffman II

Grade & Registry No. N0396

Signature [Signature]

Date 12/17/90

PRINCIPAL EXECUTIVE OFFICER or
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) Joseph Hagan

Title (Printed) General Manager

Title (Printed) Hope Creek - Operations

Signature [Signature]

Date 12/17/90

MONITORING REPORT - TRANSMITTAL SHEET

NPDES NO.

REPORTING PERIOD

MO. YR.

MO. YR.

00125411

1190 THRU 1190

PERMITTEE: Name Public Service Electric & Gas Company
 Address P.O. Box 236
Hancocks Bridge, NJ 08038

FACILITY: Name Hope Creek Generating Station
 Address P.O. Box 236
Hancocks Bridge, NJ County Salem
 Telephone (609) 339-5098

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-016(A,B) VWX-016 VWX-017
- NPDES DISCHARGE MONITORING REPORT
 EPA FORM 3020-1

OPERATING EXCEPTIONS

	YES	NO
DYE TESTING	<input type="checkbox"/>	<input checked="" type="checkbox"/>
TEMPORARY BYPASSING	<input type="checkbox"/>	<input checked="" type="checkbox"/>
DISINFECTION INTERRUPTION	<input type="checkbox"/>	<input checked="" type="checkbox"/>
MONITORING MALFUNCTIONS	<input type="checkbox"/>	<input checked="" type="checkbox"/>
UNITS OUT OF OPERATION	<input type="checkbox"/>	<input checked="" type="checkbox"/>
OTHER	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

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

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

LICENSED OPERATOR
 Name (Printed) Andres Nurk
 Grade & Registry No. S-4 (4542)
 Signature [Signature]
 Date 12/31/90

PRINCIPAL EXECUTIVE OFFICER or DULY AUTHORIZED REPRESENTATIVE
 Name (Printed) Joseph Hagan
 Title (Printed) Gen. Mgr. Hope Creek One
 Signature [Signature]
 Date 12/31/90

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME PSEEG
 ADDRESS P.O. BOX 235/N21
HANCOCKS BRIDGE, NJ 08038

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2.16) NJ0025911 (17.19) 461A
 PERMIT NUMBER DISCHARGE NUMBER

Form Approved.
 OMB No. 2040-0004.
 Approval expires 6-30-91.

FACILITY PSEEG HOPE CREEK GENERATING ST
 LOCATION LOWER ALLOWAYS CREE, NJ 08038
 DMR NUMBER: 90110375

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
90	11	01		90	11	30
(20.23)	(22.23)	(24.23)		(26.23)	(28.23)	(30.31)

COOLING TOWER BLOWDOWN

MAJOR SALEM

SOUTHERN REGION

NOTE: Read instructions before completing this form.

PARAMETER (32.37)	X	(1 Card Only) QUANTITY OR LOADING (46.51)			(4 Card Only) QUALITY OR CONCENTRATION (46.51)			NO. EX (52.61)	FREQUENCY OF ANALYSIS (64.65)	SAMPLE TYPE (69.70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 1 EFFLUENT GROSS VALUE		000000	000000		000000	000000	000000	19.10000	31.40000	DEG.C	CONTINUOUS
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 1 INTAKE FROM STREAM		000000	000000		000000	000000	000000	11.80000	16.90000	DEG.C	CONTINUOUS
PH 00400 1 0 EFFLUENT GROSS VALUE		000000	000000		7.60000			6.00000	9.00000	SU	TWICE/GRAB WEEK
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE		000000	000000		000000	000000	000000	443.50000	731.00000	MG/L	TWICE/GRAB MONTH
SOLIDS, TOTAL SUSPENDED 00530 2 0 EFFLUENT NET VALUE		000000	000000		000000	000000	000000	326.75000	603.50000	MG/L	TWICE/CALC MONTH
SOLIDS, TOTAL SUSPENDED 00530 7 0 INTAKE FROM STREAM		000000	000000		000000	000000	000000	116.75000	127.50000	MG/L	TWICE/GRAB MONTH
HYDROCARBONS, IN H2O, IR, CCl4 EXT. CHLORINATED 00551 1 0 EFFLUENT GROSS VALUE		000000	000000		000000	000000	000000	0.40000	0.50000	MG/L	TWICE/GRAB MONTH

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph Hagan
General Manager
Hope Creek - Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY KNOWLEDGE OF THOSE INDIVIDUALS ASSOCIATED WITH THE FACILITY, THE INFORMATION CONTAINED HEREIN IS TRUE, ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I AM NOT PROVIDING ANY INFORMATION THAT IS UNLAWFUL, UNREASONABLY PRIVACY INFRINGING, OR UNETHICAL. I AM NOT PROVIDING ANY INFORMATION THAT IS UNLAWFUL, UNREASONABLY PRIVACY INFRINGING, OR UNETHICAL.

J. Hagan
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE
 609 339-3463 90 12 17
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (INCLUDE ALL APPROPRIATE SAMPLING FOR CU, ZN, & CR IS REQUIRED ONLY IF MAINTENANCE CHEMICALS CONTAINING THESE METALS ARE USED. IF NOT USED, ENTER "NONE" FOR THESE METALS.)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

NJ0025411
 PERMIT NUMBER

461A
 DISCHARGE NUMBER

Form Approved
 OMB No. 2040-0004
 Approval expires 6-30-91.

FACILITY PSE&G HOPE CREEK GENERATING ST
 LOCATION LOWER ALLOWAYS CREE, NJ 08038
 DMR NUMBER: 90110376

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	90	11	01		90	11	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN
 MAJOR SALEM
 SOUTHERN REGION

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
HYDROCARBONS, IN H2O, IR, CCl4 EXT. CHROMAT 00551 2 0		000000	000000		000000	-0.02500	-0.05000	0	2/mo	calc
EFFLUENT NET VALUE	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30DA AVG	10.00000 DAILY MX		TWICE/MONTH	CALC TO MONTH
HYDROCARBONS, IN H2O, IR, CCl4 EXT. CHROMAT 00551 7 0		000000	000000		000000	0.42500	<0.50000	-	2/mo	grab
INTAKE FROM STREAM	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30DA AVG	REPORT DAILY MX		TWICE/MONTH	GRAB
PHOSPHORUS, TOTAL (AS P) 00665 1 1		000000	000000		000000	0.31350	0.34000	-	2/mo	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30 day avg	REPORT daily max		TWICE/MONTH	GRAB
PHOSPHORUS, TOTAL (AS P) 00665 2 1		000000	000000		000000	0.06500	0.06500	-	2/mo	calc
EFFLUENT NET VALUE	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30 day avg	REPORT daily max		TWICE/MONTH	GRAB
PHOSPHORUS, TOTAL (AS P) 00665 7 1		000000	000000		000000	0.24850	0.27500	-	2/mo	grab
INTAKE FROM STREAM	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30 day avg	REPORT daily max		TWICE/MONTH	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 1		000000	000000		000000	3.350000	3.80000	-	2/mo	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30DA AVG	REPORT DAILY MX		TWICE/MONTH	GRAB
CARBON, TOT ORGANIC (TOC) 00680 2 1		000000	000000		000000	0.60000	1.20000	0	2/mo	calc
EFFLUENT NET VALUE	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30DA AVG	20.00000 DAILY MX		TWICE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph Hagan
General Manager
Hope Creek - Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE NO AGENT PENALTIES FOR SUBMITTING FALSE OR MISLEADING INFORMATION TO THE AGENCY FOR THE PROTECTION OF THE PUBLIC HEALTH AND SAFETY.
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

J. Hagan
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE	DATE			
AREA CODE	NUMBER	YEAR	MO	DAY
609	339-3463	90	12	17

COMMENT AND EXPLANATION OF ANY VIOLATIONS OR DISCREPANCIES: SAMPLING AND ANALYSIS OF ANY POLLUTANTS IS REQUIRED ONLY IF PRINTED IN CHEMICALS CONTAINED. THESE METALS ARE USED. IF NOT USED, ENTER "NONE" FOR THESE METALS.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

(2-16) NJ0025411 (17-19) 461A
 PERMIT NUMBER DISCHARGE NUMBER

Form Approved.
 OMB No. 2040-0004.
 Approval expires 6-30-91.

FACILITY PSEG HOPE CREEK GENERATING ST
 LOCATION LOWER ALLOWAYS CREE, NJ 08038

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
90	11	01		90	11	30
(10/31)	(12/31)	(12/31)		(10/31)	(12/31)	(12/31)

COOLING TOWER BLOWDOWN

MAJOR SALEM

SOUTHERN REGION

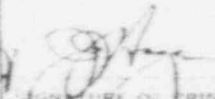
NOTE: Read instructions before completing this form.

DMR NUMBER: 90110376

PARAMETER (32-37)	X	(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX. (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
CARBON, TOT ORGANIC (TOC) 00680 7 1 INTAKE FROM STREAM		000000	000000	0000	000000	2.75000	2.90000	MG/L	2/mo	grab
		000000	000000	0000	000000	REPORT 30DA AVG	REPORT DAILY MX	MG/L	TWICE/MONTH	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 EFFLUENT GROSS VALUE		000000	000000	0000	000000	NODI	NODI	MG/L	-	-
		000000	000000	0000	000000	REPORT 30DA AVG	REPORT DAILY MX	MG/L	TWICE/MONTH	GRAB
CHROMIUM, TOTAL (AS CR) 01034 2 0 EFFLUENT NET VALUE		000000	000000	0000	000000	NODI	NODI	MG/L	-	-
		000000	000000	0000	000000	REPORT 30DA AVG	REPORT DAILY MX	MG/L	TWICE/MONTH	CALCTD
CHROMIUM, TOTAL (AS CR) 01034 7 0 INTAKE FROM STREAM		000000	000000	0000	000000	NODI	NODI	MG/L	-	-
		000000	000000	0000	000000	REPORT 30DA AVG	REPORT DAILY MX	MG/L	TWICE/MONTH	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 EFFLUENT GROSS VALUE		000000	000000	0000	000000	NODI	NODI	MG/L	-	-
		000000	000000	0000	000000	REPORT 30DA AVG	REPORT DAILY MX	MG/L	TWICE/MONTH	GRAB
COPPER, TOTAL (AS CU) 01042 2 0 EFFLUENT NET VALUE		000000	000000	0000	000000	NODI	NODI	MG/L	-	-
		000000	000000	0000	000000	REPORT 30DA AVG	REPORT DAILY MX	MG/L	TWICE/MONTH	CALCTD
COPPER, TOTAL (AS CU) 01042 7 0 INTAKE FROM STREAM		000000	000000	0000	000000	NODI	NODI	MG/L	-	-
		000000	000000	0000	000000	REPORT 30DA AVG	REPORT DAILY MX	MG/L	TWICE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph Hagan
General Manager
Hope Creek - Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY KNOWLEDGE OF THESE MATTERS I HEREBY CERTIFY THAT I AM OBTAINING THE INFORMATION I HAVE USED TO COMPLETE THIS REPORT IN YOUR ALTERNATE AND COMPLETE FORMS THAT HAVE BEEN PREVIOUSLY RECEIVED FROM YOUR FACILITY AND TO THE BEST OF MY KNOWLEDGE AND BELIEF THE INFORMATION IS TRUE AND CORRECT.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT


TELEPHONE NUMBER 339-3463
 DATE 90 12 17
 609 AREA CODE

COMMENT AND EXPLANATION OF ANY VARIATIONS FROM THE MONITORING PROGRAM REQUIRED ONLY IF MONITORING PROCEDURES OBTAINED THESE METALS ARE USED. IF NOT USED, ENTER "NODI" FOR THESE METALS.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

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) NJ0025411 PERMIT NUMBER
 (17-19) 451A DISCHARGE NUMBER

Form Approved
 OMB No. 2040-0004
 Approval expires 6-30-91.

FACILITY PSE&G HOPE CREEK GENERATING ST
 LOCATION LOWER ALLOWAYS CREE, NJ 08038

MONITORING PERIOD
 FROM YEAR 90 MO 11 DAY 01 TO YEAR 90 MO 11 DAY 30
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN
 MAJOR SOUTHERN REGION
 SALEM

NOTE: Read instructions before completing this form.

DMP NUMBER: 90110376

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (34-37)			QUALITY OR CONCENTRATION (34-37)			NO. EX (42-43)	FREQUENCY OF ANALYSIS (44-45)	SAMPLE TYPE (46-47)
		AVERAGE (46-51)	MAXIMUM (52-53)	UNITS (54-55)	MINIMUM (56-57)	AVERAGE (58-59)	MAXIMUM (60-61)			
ZINC, TOTAL (AS ZN) D1092 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	000000	000000	0000	000000	NODI	NODI	-	-	-
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30DA AVG	REPORT DAILY MX	-	-	TWICE/GRAB MONTH
ZINC, TOTAL (AS ZN) D1092 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	000000	000000	0000	000000	NODI	NODI	-	-	-
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30DA AVG	REPORT DAILY MX	-	-	TWICE/CALCTD MONTH
ZINC, TOTAL (AS ZN) D1092 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	000000	000000	0000	000000	NODI	NODI	-	-	-
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30DA AVG	REPORT DAILY MX	-	-	TWICE/GRAB MONTH
ASBESTOS (FIBROUS) 34225 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	000000	000000	0000	000000	0.04601	0.09200	-	2/mo	grab
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30DA AVG	REPORT DAILY MX	-	-	TWICE/GRAB MONTH
ASBESTOS (FIBROUS) 34225 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	000000	000000	0000	000000	0.02986	0.05973	-	2/mo	calc
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30DA AVG	REPORT DAILY MX	-	-	TWICE/CALCTD MONTH
ASBESTOS (FIBROUS) 34225 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	000000	000000	0000	000000	0.01615	0.03228	-	2/mo	grab
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30DA AVG	REPORT DAILY MX	-	-	TWICE/GRAB MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	37.00000	51.70000	0000	000000	000000	000000	-	-	cont
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MSD	000000	000000	000000	-	-	CONTINUOUS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph Hagan
General Manager
Hope Creek - Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BELIEVE THE SAME ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I HAVE ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I HAVE ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

[Signature]
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE 609 NUMBER 339-3463 DATE YEAR 90 MO 12 DAY 17

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference to applicable laws)
 SAMPLING FOR CU, ZN, & CR IS REQUIRED ONLY TO DETERMINE CHROMIUMS CONTAINED THERE TOTALS ARE USED. IF NOT USED, ENTER "NODI" FOR THESE METALS.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME P-5656
 ADDRESS P.O. BOX 435/N21
 HANCOCKS BRIDGE NJ 08038

FACILITY PSEG HOPE CREEK GENERATING ST
 LOCATION LOWER ALLOWAYS CREEK NJ 08033
 DMR NUMBER 90110375

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (1-1-79)
 451A
 DISCHARGE NUMBER

Form Approved
 OMB No. 2040-0004
 Approval expires 6-30-91

COOLING TOWER BLOWDOWN
 MAJOR SOUTHERN REGION
 NOTE: Read instructions before completing this form.

MONITORING PERIOD
 YEAR MO DAY YEAR MO DAY
 FROM 90 11 01 TO 90 11 30
 (20-31) (22-28) (24-26) (28-29) (30-31)

PARAMETER (32-37)	QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (54-67)			NO. OF ANALYSES (64-68)	FREQUENCY OF ANALYSES (64-68)	SAMPLE TYPE (69-70)
	AVERAGE (46-53)	MAXIMUM (46-53)	UNITS (46-53)	AVERAGE (54-61)	MINIMUM (54-61)	MAXIMUM (54-61)			
CHLORINE TOTAL RESIDUAL	0.0000	0.0000		<0.05000	<0.05000	<0.05000		cont	
EFFLUENT GROSS VALUE	0.0000	0.0000		REPORT	REPORT	50000 DAILY MX		CONTIN UOUS	
HEAT (WINTER) (PER HOUR)	149.20000	256.30000		0.0000	0.0000	0.0000		cont	calc
EFFLUENT NET VALUE	REPORT 30DA AVG	REPORT 30DA AVG	MBTU/HR	0.0000	0.0000	0.0000		CONTIN UOUS	
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
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
 Joseph Hagan
 General Manager
 Hope Creek - Operations
 TYPED OR PRINTED

TELEPHONE 339-3463
 AREA NUMBER 609
 CODE 339-3463

DATE 90 12 17
 YEAR MO DAY

OFFICIALS CONTAINED IN THESE DETAILS ARE USED IF SAMPLING FOR CU, ZN, & CR IS REQUIRED ONLY IN A LIMITED NUMBER OF SITUATIONS. THESE DETAILS ARE USED IF NOT USED, ENTER "N/A" FOR THESE METALS.

REPLACES EPA FORM 140 WHICH MAY BE USED 08/85
 17451 77535 06431
 PAGE 5 OF 12

PERMITTEE NAME/ ADDRESS (Include Facility Name/Location if different)
 NAME P-5666
 ADDRESS P.O. BOX 236/N21
 HAWCOCKS BRIDGE, NJ 03038

FACILITY P-5666 HOPE CREEK GENERATING ST
 LOCATION LOWER ALLOWAYS CREEK, NJ 08033
 DMR NUMBER: 90110376

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)
 (17.19)
 451C
 DISCHARGE NUMBER

Form Approved.
 OMB No. 2040-0004
 Approval expires 6-30-91.

LOW VOLUME WW SYSTEM
 MAJOR REGION SOUTHERN REGION
 SALEM

MONITORING PERIOD
 YEAR 90 TO 90
 MONTH 01 TO 11
 DAY 01 TO 30
 (12.21) (12.23) (12.25) (12.27) (12.29) (12.31)

PARAMETER (32-37)	QUANTITY OR LOADING (34-61)			QUALITY OR CONCENTRATION (34-61)			NO. EX. ANALYSIS (64-68)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (68-70)
	AVERAGE (46-53)	MAXIMUM (46-53)	UNITS (46-53)	MINIMUM (48-45)	AVERAGE (46-53)	MAXIMUM (46-61)			
TEMPERATURE, WATER	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	1	weekly	grab
DEG. CENTIGRADE	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	1	WEEKLY	GRAB
0010 1 1	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	weekly	grab
EFLUENT GROSS VALUE	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	WEEKLY	GRAB
PH	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	weekly	grab
0040 1 0	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	WEEKLY	GRAB
EFLUENT GROSS VALUE	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	2/mo	comp
SOLIDS, TOTAL	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	TWICE/MONTH	COMPOS
SUSPENDED	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	2/mo	grab
0053 1 0	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	TWICE/MONTH	GRAB
EFLUENT GROSS VALUE	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	2/mo	comp
HYDROCARBONS, IN H2O	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	TWICE/MONTH	COMPOS
IR, CCL4 EXT. CHROMAT	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	2/mo	grab
0051 1 0	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	TWICE/MONTH	GRAB
EFLUENT GROSS VALUE	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	2/mo	comp
NITROGEN, AMMONIA	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	TWICE/MONTH	COMPOS
TOTAL (AS N)	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	2/mo	comp
0061 1 0	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	TWICE/MONTH	GRAB
EFLUENT GROSS VALUE	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	2/mo	comp
CARBON, TOT ORGANIC (TOC)	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	TWICE/MONTH	COMPOS
0060 1 1	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	2/mo	grab
EFLUENT GROSS VALUE	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	TWICE/MONTH	GRAB
COPPER, TOTAL (AS CU)	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	2/mo	grab
0104 1 0	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	TWICE/MONTH	GRAB
EFLUENT GROSS VALUE	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	○○○○○○	0	TWICE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Joseph Hagan
 General Manager
 Hope Creek - Operations

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
[Signature]

TELEPHONE NUMBER 339-3463
 AREA CODE 609
 YEAR 90
 MONTH 12
 DAY 17

COMMENT AND EXPLANATION OF ANY VIOLATIONS, REVISIONS, OR OTHERS

*Permit requires samples to be composites.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME PSEEG
 ADDRESS P.O. BOX 235/N21
HANCOCKS BRIDGE, NJ 08038

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

NJ0025411 PERMIT NUMBER
4511 DISCHARGE NUMBER

Form Approved.
 OMB No. 2040-0004.
 Approval expires 6-30-91.

FACILITY PSEEG HOPE CREEK GENERATING ST
 LOCATION LOWER ALLOWAYS CREE, NJ 08038
 DMR NUMBER: 90110376

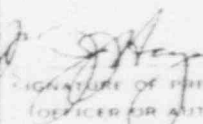
MONITORING PERIOD
 FROM YEAR 90 MO 11 DAY 01 TO YEAR 90 MO 11 DAY 30
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

LOW VOLUME WW SYSTEM
 MAJOR REGION SALEM
 SOUTHERN REGION
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (46-51) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
IRON, TOTAL (AS FE) D1045 1 0 EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.04036	0.17266			0.92500	1.07000		2/mo	grab
	PERMIT REQUIREMENT	REPORT 30DA AVG	45000 DAILY MX	MGD		REPORT	REPORT DAILY MX	MG/L		TWICE/MONTH
	SAMPLE MEASUREMENT							0	cont	
	PERMIT REQUIREMENT									CONTINUOUS
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph Hagan
General Manager
Hope Creek - Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND I DECIDE BY MY SIGNING THE ABOVE INFORMATION I AM FULLY RESPONSIBLE FOR DEFENDING THE INFORMATION I AM SUBMITTING TO THE STATE OF NEW JERSEY. I HAVE READ AND UNDERSTAND THE STATE OF NEW JERSEY'S POLLUTION CONTROL ACT AND I AM AWARE OF THE PENALTY FOR PROVIDING FALSE INFORMATION TO THE STATE OF NEW JERSEY. I HAVE READ AND UNDERSTAND THE STATE OF NEW JERSEY'S POLLUTION CONTROL ACT AND I AM AWARE OF THE PENALTY FOR PROVIDING FALSE INFORMATION TO THE STATE OF NEW JERSEY.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT


TELEPHONE NUMBER 609 339-3463
 DATE YEAR 90 MO 12 DAY 17

COMMENT AND EXPLANATION OF ANY VIOLATIONS (If any, fill in)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004.
Approval expires 6-30-91.

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

NJ0025411
PERMIT NUMBER

462A
DISCHARGE NUMBER

FACILITY PSE&G HOPE CREEK GENERATING ST
LOCATION LOWER ALLOWAYS CREE, NJ 08038

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	90	11	01		90	11	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NORTH STORM DRAIN
MAJOR SALEM

SOUTHERN REGION

NOTE: Read instructions before completing this form.

DMR NUMBER: 90110376

PARAMETER (32-37)	X	(1 Card Only) QUANTITY OR LOADING (46-53)			(1 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (54-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	000000	000000		7.40000	000000	7.40000		0	1/mo	grab
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000	6.00000 MINIMUM	000000	9.00000 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	000000	000000		000000	28.00000	28.00000		0	1/mo	grab
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000	000000	30.00000 30DA AVG	100.00000 DAILY MX	MG/L		ONCE/ MONTH	GRAB
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT	SAMPLE MEASUREMENT	000000	000000		000000	0.20000	0.20000	*	0	1/mo	grab
00551 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30DA AVG	15.00000 DAILY MX	MG/L		ONCE/ MONTH	GRAB-3
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	000000	000000		000000	7.50000	7.50000		0	1/mo	grab
00630 1 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30DA AVG	50.00000 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.07643	0.07643		000000	000000	000000		-	1/mo	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	000000	000000	000000	0000		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph Hagan
General Manager -
Hope Creek - Operations
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION CONTAINED HEREIN AND BELIEVE ON MY INSPECTION OF THE RECORDS SUBMITTED WITH THIS REPORT AND OTHERWISE THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT AND COMPLETE AND ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT I AM AWARE THAT THIS IS A FEDERAL REQUIREMENT AND THAT I AM SUBJECT TO PENALTY FOR PROVIDING FALSE INFORMATION.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 609 339-3463
DATE 90 12 17
AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS OF PERMIT CONDITIONS OR OTHER APPLICABLE REQUIREMENTS:
SAMPLES TO BE TAKEN DURING A DISCHARGE EVENT, EXCEPT FOR PET HC FOR WHICH SAMPLES SHALL BE TAKEN DURING THE 1ST PRECIPITATION EVENT OF MONTH WHICH CAUSES DISCHARGE DURING WORKING HOURS. IS PRECEDED BY MINIMUM DRY PERIOD OF 72 HRS. hours.
Unable to meet sampling criteria due to discharge event commencing prior to continuing into working hours.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER NJ0025411
 DISCHARGE NUMBER 4528

Form Approved.
 OMB No. 2040-0004.
 Approval expires 6-30-91.

FACILITY PSEEG HOPE CREEK GENERATING ST
 LOCATION LOWER ALLOWAYS CREE, NJ 08038

MONITORING PERIOD
 FROM YEAR 90 MO 11 DAY 01 TO YEAR 90 MO 11 DAY 30
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

SEWAGE W.W.
 MAJOR SOUTHERN REGION

SALEM

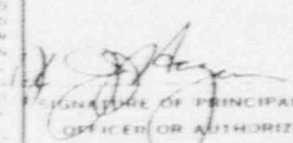
DMR NUMBER: 90110375

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(1 Card Only) QUANTITY OR LOADING (34-61)			(4 Card Only) QUALITY OR CONCENTRATION (34-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
COLIFORM, FECAL GENERAL 74055 I O EFFLUENT GROSS VALUE		*****	*****	****	*****	<20.00000	<20.00000	g/100 ML	0	1/mo	grab
BOD, 5-DAY PERCENT REMOVAL B1010 K O PERCENT REMOVAL		*****	*****	****	96.34146	*****	*****	PERCENT	0	1/mo	calc
SOLIDS, SUSPENDED PERCENT REMOVAL B1011 K J PERCENT REMOVAL		*****	*****	****	87.50000 MONTH MN	*****	*****	PERCENT	0	1/mo	calc
OXYGEN DEMAND FIRST STAGE B2210 I O EFFLUENT GROSS VALUE		1.08331	1.70276	KG/DAY	*****	14.40000	14.40000	MG/L	0	1/mo	calc
		3.20000 30DA AVG	REPORT DAILY MX	KG/DAY	*****	REPORT 30DA AVG	REPORT DAILY MX			ONCE/ MONTH	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph Hagan
General Manager
Hope Creek - Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY KNOWLEDGE OF THESE INDUSTRIES, I BELIEVE THE INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THE INFORMATION IS SUBJECT TO PENALTY FOR FALSIFICATION AND I AM AWARE THAT THE INFORMATION IS SUBJECT TO PENALTY FOR FALSIFICATION AND I AM AWARE THAT THE INFORMATION IS SUBJECT TO PENALTY FOR FALSIFICATION.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT


TELEPHONE NUMBER 339-3463 DATE YEAR 90 MO 12 DAY 17

EPA AREA CODE

COMMENT AND EXPLANATION OF ANY VIOLATIONS (If known, fill in this space)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)

(2/16) (17/19)
 NJ0025411
 PERMIT NUMBER
 464A
 DISCHARGE NUMBER

Form Approved.
 OMB No. 2040-0004.
 Approval expires 6-30-91.

FACILITY PSEEG HOPE CREEK GENERATING ST
 LOCATION LOWER ALLOWAYS CREE, NJ 08033

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 90 11 01 TO 90 11 30
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

PERIM STORM DRAIN
 MAJOR SALEM
 SOUTHERN REGION

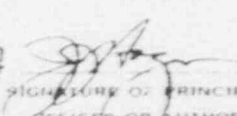
NOTE: Read instructions before completing this form.

DMR NUMBER: 90110376

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	000000	000000		7.60000	000000	7.60000		0	1/mo	grab
00400 1 0 EFFLUENT GROSS VALUE SOLIDS, TOTAL SUSPENDED	PERMIT REQUIREMENT	000000	000000	0000	6.00000 MINIMUM	000000	9.00000 MAXIMUM	SU		ONCE/ MONTH	GRAB
00530 1 0 EFFLUENT GROSS VALUE HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT	SAMPLE MEASUREMENT	000000	000000		000000	46.00000	46.00000		0	1/mo	grab
00530 1 0 EFFLUENT GROSS VALUE HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT	PERMIT REQUIREMENT	000000	000000	0000	000000	30.00000 30DA AVG	100.00000 DAILY MX	MG/L		ONCE/ MONTH	GRAB
00551 1 0 EFFLUENT GROSS VALUE CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	000000	000000		000000	0.20000	0.20000	*	0	1/mo	grab
00551 1 0 EFFLUENT GROSS VALUE CARBON, TOT ORGANIC (TOC)	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30DA AVG	15.00000 DAILY MX	MG/L		ONCE/ MONTH	GRAB-3
00690 1 1 EFFLUENT GROSS VALUE FLOW, IN CONDUIT UP THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.10784	0.10784		000000	7.50000	7.50000		0	1/mo	grab
00690 1 1 EFFLUENT GROSS VALUE FLOW, IN CONDUIT UP THRU TREATMENT PLANT	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT 30DA AVG	50.00000 DAILY MX	MG/L		ONCE/ MONTH	GRAB
50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				000000	000000	000000		-	1/mo	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	000000	000000	000000			ONCE/ MONTH	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Joseph Hagan
 General Manager
 Hope Creek - Operations
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY KNOWLEDGE 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 NO OTHER REPORTING REQUIREMENTS FOR THIS INFORMATION INCLUDING THE REQUIREMENTS FOR SIGNATURE AND DATE. I HAVE REVIEWED THE INFORMATION FOR SIGNATURE AND DATE. I HAVE REVIEWED THE INFORMATION FOR SIGNATURE AND DATE.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT


TELEPHONE NUMBER 609 339-3463
 DATE 90 12 17
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (If there are any violations, list them and explain why. SAMPLES TO BE TAKEN DURING A DISCHARGE EVENT, EXCEPT FOR PET HC FOR WHICH SAMPLES SHALL BE TAKEN DURING THE 1ST PRECIPITATION EVENT OF MONTH WHICH CAUSES DISCHARGE DURING WORKING HRS. IS PRECEDED BY MINIMUM DRY PERIOD OF 72 HRS. *Unable to meet sampling criteria due to discharge event commencing prior to & continuing into working hrs.