

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF WATER QUALITY

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.  
0025411

REPORTING PERIOD  
Mo. Yr. Mo. Yr.  
1098 1098

PERMITTEE: Name: Public Service Electric & Gas  
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. 08038  
Telephone: (609) 339-3463

FORMS ATTACHED (Indicate Quantity of Each)

Operating Exceptions

SLUDGE REPORT - SANITARY  
 T-VWX-007  T-VWX-008  T-VWX-009  
 EPA Form 3320-1

DYE TESTING

YES NO

SLUDGE REPORT - INDUSTRIAL  
 T-VWX-010A  T-VWX-010B

TEMPORARY BYPASSING

WASTEWATER REPORTS  
 T-VWX-011  T-VWX-012  T-VWX-013

DISINFECTION INTERRUPTION

GROUNDWATER REPORTS  
 VWX-015(A,B)  VWX-016  VWX-017  
 ELECTRONIC SUBMISSION

MONITORING MALFUNCTIONS

UNITS OUT OF OPERATION

OTHER

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

NJPDES DISCHARGE MONITORING  
5 EPA FORM 3320-1

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

AUTHENTICATION I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

LICENSED OPERATOR

PRINCIPAL EXECUTIVE OFFICER OR  
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) Peter R. La Sala  
Grade & Registry No. N-2 (0005928)  
Signature *Peter R. La Sala*  
Date November 18, 1998

Name (Printed) Mark B. Bezilla  
Title (Printed) Gen. Mgr. Hope Creek Ops.  
Signature *Mark B. Bezilla*  
Date November 23, 1998

9812080082 981123  
PDR ADOCK 05000354  
R PDR

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF WATER QUALITY

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.  
0|0|2|5|4|1|1

REPORTING PERIOD  
Mo. Yr. Mo. Yr.  
1|0|9|8 1|0|9|8

PERMITTEE: Name: Public Service Electric & Gas

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. 08038

Telephone: (609) 339-3463

FORMS ATTACHED (Indicate Quantity of Each)

Operating Exceptions

SLUDGE REPORT - SANITARY  
\_\_\_ T-VWX-007 \_\_\_ T-VWX-008 \_\_\_ T-VWX-009  
\_\_\_ EPA Form 3320-1

DYE TESTING YES NO  
\_\_\_ X

SLUDGE REPORT - INDUSTRIAL  
\_\_\_ T-VWX-010A \_\_\_ T-VWX-010B

TEMPORARY BYPASSING \_\_\_ X

WASTEWATER REPORTS  
\_\_\_ T-VWX-011 \_\_\_ T-VWX-012 \_\_\_ T-VWX-013

DISINFECTION INTERRUPTION \_\_\_ X

GROUNDWATER REPORTS  
\_\_\_ VWX-015(A,B) \_\_\_ VWX-016 \_\_\_ VWX-017  
\_\_\_ ELECTRONIC SUBMISSION

MONITORING MALFUNCTIONS \_\_\_ X

UNITS OF OPERATION X \_\_\_

OTHER X \_\_\_

NJPDES DISCHARGE MONITORING  
5 EPA FORM 3320-1

(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 this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

LICENSED OPERATOR

PRINCIPAL EXECUTIVE OFFICER OR  
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) Andres Nurk

Name (Printed) Mark B. Bezilla

Grade & Registry No. S-4 (0006979)

Title (Printed) Gen. Mgr. Hope Creek Ops.

Signature Andres Nurk

Signature Mark B. Bezilla

Date 11/10/98

Date November 23, 1998

OPERATING EXCEPTIONS DETAILED

#2 filter off line, influent valve needs to be replaced.

"A" clarifier off line due to good settling sludge

HOURS ATTENDED AT PLANT

Month V 10 Year 1981

Day of Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Licensed Operator	8	8		4	8	8	8	8	8		4		8	8	8	8
Others			4							4		8				
Day of Month	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Licensed Operator		4	8	8	8	8	8		4	8	8	8	8	8		
Others	4							4							4	

ADDENDA TO MONITORING REPORT - TRANSMITTAL SHEET

October 1998

11/23/98

DISCHARGE NUMBER

PAGE	PARAMETER CODE	COMMENTS
<u>461A</u>		
2 of 3	00680 2 0 **	NET Values re calculated utilizing results from grab samples.
<u>462B</u>		
1 of 1	00530 1 0 **	Sample frequency was increased to greater than once/month providing additional operating data.

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) (17-19)

17451

77343

06413

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98

CREATED: 10/02/98

NJ0025411  
 PERMIT NUMBER

461A  
 DISCHARGE NUMBER

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

MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
98	10	01	98	10	31	
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)	

SOUTHERN REGION / SALEM

NOTE: Read Instructions before completing this form.

DMR NUMBER: NJ0025411 461A 101998

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****		8.5	*****	8.6		0	WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	5.0000 DIRPMN	*****	9.0000 DIRPMX	SU		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	59.567	77.700		*****	*****	*****		0	CONTINUOUS	METER
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DIRPMN	REPORT DIRPMX	MGD	*****	*****	*****	*****		CONTINUOUS	METER
LC50 STATRE 96HR ACU MYSID. BAHIA	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****		0	CODE=N	Code=N
TAN3E 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	REPORT DIRPMN	*****	*****	PERCENT		QUARTLY	CK REQ
IC25 STATRE 7DAY CHR MYSID. BAHIA	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****		0	CODE=N	CODE=N
TBP3E 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	REPORT DIRPMN	*****	*****	PERCENT		QUARTLY	CK REQ
IC25 STATRE 7DAY CHR CYPRINDON	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****		0	CODE=N	CODE=N
TBP6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	REPORT DIRPMN	*****	*****	PERCENT		QUARTLY	CK REQ
CHLORINE PRODUCED OXIDANTS	SAMPLE MEASUREMENT	*****	*****		*****	<0.1	<0.1		0	THREE/ WEEK	GRAB
SCPOX 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	20000 DIRPMN	50000 DIRPMX	MG/L		THREE/ WEEK	GRAB
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****		*****	26.6	30.7		0	CONTINUOUS	CK REQ
00010 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT DIRPMN	36.20000 DIRPMX	DEG.C		CONTINUOUS	CK REQ

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Mark B. Bezilla  
 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 SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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 609 339-3463  
 DATE 98 11 23  
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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)

17451 77434 06413 Form Approved  
 OMB No. 2040-0004  
 Approval expires 05-31-98  
 CREATED: 10/02/98

NJ0025411 461A  
 PERMIT NUMBER DISCHARGE NUMBER

FACILITY LOCATION PSEEG HOPE CREEK GENERATING ST  
 LOWER ALLOWAYS CREE, NJ 08038  
 DMR NUMBER: NJ0025411 461A 101998

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
98	10	01	98	10	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

SOUTHERN REGION / SALEM  
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	20.5	24.8	0	CONTINUOUS	CK REQ
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT			CK REQ
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	79.9	87.3	0	CONTINUOUS	CK REQ
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	97.10000 01DAMX		DEG.F	CK REQ
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	68.8	76.6	0	CONTINUOUS	CK REQ
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT		DEG.F	CK REQ
PHOSPHORUS, TOTAL (AS P) 00665 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI	0	NODI	NODI
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT		MG/L	ONCE/MONTH GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	11.2	11.2	0	ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT		MG/L	ONCE/MONTH GRAB
CARBON, TOT ORGANIC (TOC) 00680 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****		*****	3	3	0	ONCE/MONTH	CALCTD
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	20.00000 01DAMX		MG/L	ONCE/MONTH GRAB
CARBON, TOT ORGANIC (TOC) 00680 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	8.2	8.2	0	ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	REPORT		MG/L	ONCE/MONTH GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Mark B. Bezilla  
 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 SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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  
 609 339-3463 98 11 23  
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\*\* Please refer to the attached Transmittal Sheet Addenda.

LABS:

17451

77434

06413

Form Approved. OMB No. 2040-0004 Approval Expires 05-31-98

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

NAME PSEEG  
ADDRESS P.O. BOX 236/N21  
HANCOCKS BRIDGE, NJ 08033

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

NJ0025411  
PERMIT NUMBER

461A  
DISCHARGE NUMBER

CREATED: 10/02/98

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

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
98	10	01		98	10	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

SOUTHERN REGION / SALEM

NOTE: Read Instructions before completing this form.

DMR NUMBER: NJ0025411 461A 101998

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
HEAT (WINTER) (PER HOUR) 81387 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	221	365		*****	*****	*****		0	DAILY	CALCD
	PERMIT REQUIREMENT	REPORT D1MOAV	662.00000 01DAMX	MBTU/H R	*****	*****	*****	**** ***		DAILY	CALCD
	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  
Mark B. Bezilla  
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 SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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 609 339-3463  
DATE 98 11 23  
AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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) (17-19)

17451 77434 06413 Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98  
 CREATED: 10/02/98

NJ0025411 461C  
 PERMIT NUMBER DISCHARGE NUMBER

FACILITY LOCATION PSE&G HOPE CREEK GENERATING ST  
 LOWER ALLOWAYS CREE, NJ 08038  
 DMR NUMBER: NJG025411 461C 101998

MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
98	10	01	98	10	31	
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)	

SOUTHERN REGION / SALEM  
 NOTE: Read Instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OR ANALYS. (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	***** *****	***** *****	***** *****	***** *****	3 01MOAV	3 01DAMX	MG/L	0	ONCE/ MONTH	COMPOS
PETROL HYDROCARBONS, TOTAL RECOVERABLE 45501 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	***** *****	***** *****	***** *****	***** *****	0 01MOAV	0 01DAMX	MG/L	0	TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	0.021 REPORT 01MOAV	0.040 REPORT 01DAMX	MGD	***** *****	***** *****	***** *****	***** *****	0	CONTIN UOUS	METER
CARBON, TOT ORGANIC (TOC) 00680 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	***** *****	***** *****	***** *****	***** *****	21 REPORT 01MOAV	21 50.00000 01DAMX	MG/L	0	ONCE/ MONTH	COMPOS
	SAMPLE MEASUREMENT PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Mark B. Dezilla  
 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 SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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  
 509 339-3463 98 11 23  
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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) (17-19)

NJ0025411  
 PERMIT NUMBER

462B  
 DISCHARGE NUMBER

CREATED: 10/02/98

17451 77434 06413

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98

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

MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
98	10	01	98	10	31	
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)	

SOUTHERN REGION / SALEM

NOTE: Read Instructions before completing this form.

DMR NUMBER: NJ0025411 462B 101998

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (52-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 1 0	REPORT 01MOAV	1	1	KG/DAY	*****	*****	*****	****	0	ONCE/MONTH	COMPOS
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	01MOAV	01DAMX		*****	*****	*****	***		ONCE/MONTH	COMPOS
SOLIDS, TOTAL SUSPENDED 00530 1 0	REPORT 01MOAV	*****	*****	MG/L	*****	28	32	**	0	ONCE/MONTH	COMPOS
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30.00000	REPORT 01DAMX	*****		ONCE/MONTH	COMPOS
OIL AND GREASE FREDN EXTR-GRAV METH 00556 1 0	REPORT 01MOAV	*****	*****	MG/L	*****	2	2		0	ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	10.00000	15.00000 01DAMX	*****		ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	REPORT 01MOAV	0.016	0.029	MGD	*****	*****	*****	*****	0	DAILY	METER
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****	*****		DAILY	METER
COLIFORM, FECAL GENERAL 74055 1 0	REPORT 01MOGE	*****	*****	CF/100 ML	*****	<1	<1		0	ONCE/MONTH	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	200.00000	400.00000 01DAGE	*****		ONCE/MONTH	GRAB
BOD, 5-DAY PERCENT REMOVAL 81010 K 0	REPORT 01MOAV	*****	*****	PERCENT	*****	94.8	*****		0	ONCE/MONTH	CALCTD
PERCENTREMOVAL	PERMIT REQUIREMENT	*****	*****	*****	*****	87.50000X 01MOAV	*****	*****		ONCE/MONTH	CALCTD
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0	REPORT 01MOAV	*****	*****	PERCENT	*****	92	*****		0	ONCE/MONTH	CALCTD
PERCENTREMOVAL	PERMIT REQUIREMENT	*****	*****	*****	*****	85.00000X 01MOAV	*****	*****		ONCE/MONTH	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Mark B. Bezilla  
 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 SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 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 609 339-3463  
 DATE 98 11 23  
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\*\* Please refer to the attached Transmittal Sheet Addenda.