Form T-VWX-014
5/83

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER RESOURCES

MONITORING REPORT – TRANSMITTAL SHEET

NJPDES NO.	REPORTING PERIOD MO. YR.		MO. YR.
0 0 2 5 4 1 1 1	1 0 9 7	THRU	1 0 9 7

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. (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

NPDES DISCHARGE MONITORING REPORT

6 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

Name *(Printed)* Peter R. La Sala

Grade & Registry No. N-2 (0005928)

Signature [signature]

Date 11/19/97

PRINCIPAL EXECUTIVE OFFICER or DULY AUTHORIZED REPRESENTATIVE

Name *(Printed)* Mark B. Bezilla

Title *(Printed)* General Manager
Hope Creek Operations

Signature [signature]

Date 11/21/97

OPERATING EXCEPTIONS DETAILED

** Please refer to the attached Transmittal Sheet Addenda.

HOURS ATTENDED AT PLANT

Month 10 Year 97

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

Form T-VWX-014
5/83

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER RESOURCES

MONITORING REPORT – TRANSMITTAL SHEET

NJPDES NO.	REPORTING PERIOD MO. YR.		MO. YR.
0 0 2 5 4 1 1 1	1 0 9 7	THRU	1 0 9 7

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. (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

NPDES DISCHARGE MONITORING REPORT

[6] 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

Name *(Printed)*: Andres Nurk

Grade & Registry No.: S-4 (0006979)

Signature: Andres Nurk

Date: 11/3/97

PRINCIPAL EXECUTIVE OFFICER or DULY AUTHORIZED REPRESENTATIVE

Name *(Printed)*: Mark B. Bezilla

Title *(Printed)*: General Manager Hope Creek Operations

Signature:

Date: 11/21/97

OPERATING EXCEPTIONS DETAILED

Influent valve to #2 filter frozen in shut position

"A" clarifier off line due to poor settling rate

HOURS ATTENDED AT PLANT

Month 10 Year 87

Day of Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Licensed Operator	8	8	8			8	8	8	8	8		4	8	8	8	8
Others				4	4						4					
Day of Month	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Licensed Operator	8			8	8	8	8	8	4		8	8	4½	8	8	
Others		4	4							4						

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

NAME PSE&G

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

FACILITY PSE&G HOPE CREEK GENERATING ST

LOCATION LOWER ALLOWAYS CREE, NJ 08038

DMR NUMBER: NJ0025411 461A 1997

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

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

CREATED: 10/02/97

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

MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	10	01	TO	97	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)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	******	******		6.9	******	7.7		0	WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	6.0 MINIMUM	******	9.0 MAXIMUM	SU		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	42.300	57.263		******	******	******		0	CONTINUOUS	METER
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTH AVG	REPORT DLY MAX	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 MONAVMIN	******	******	PERCENT		QTRLY	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 MONAVMIN	******	******	PERCENT		QTRLY	CK REQ
IC25 STATRE 7DAY CHR CYPRINODON	SAMPLE MEASUREMENT	******	******		CODE=N	******	******		0	CODE=N	CODE=N
TBP6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ** *	REPORT MONAVMIN	******	******	PERCENT		QTRLY	CK REQ
CHLORINE PRODUCED OXIDANTS	SAMPLE MEASUREMENT	******	******		******	<0.1	<0.1		0	THREE/WEEK **	GRAB
TRPOX 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	.20000 MNTH AVG	.50000 DLY MAX	MG/L		THREE/WEEK	GRAB
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	******	******		******	20.6	23.1		0	CONTINUOUS	- -
00010 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MNTH AVG	36.20000 DLY MAX	DEG.C		CONTINUOUS	CK REQ

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
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	609 339-3463 AREA CODE NUMBER	97 YEAR	11 MO	21 DAY

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

** Please refer to the attached transmittal sheet addenda.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME PSE&G
ADDRESS P.O. BOX 236/N21
HANCOCKS BRIDGE,NJ 08038

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

DMR NUMBER: NJ0025411 461A 101997

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

NJ0025411 PERMIT NUMBER
461A DISCHARGE NUMBER

CREATED: 10/02/97 MAJOR

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

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	10	01	TO	97	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)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	******	******		******	18.9	21.4		0	CONTIN UOUS	- -
	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MNTH AVG	REPORT DLY MAX	DEG.C		CONTINUOUS	NCK REQ
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	69.1	73.6		0	CONTIN UOUS	- -
	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MNTH AVG	97.10000 DLY MAX	DEG.F		CONTINUOUS	NCK REQ
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	******	******		******	66.0	70.6		0	CONTIN UOUS	- -
	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MNTH AVG	REPORT DLY MAX	DEG.F		CONTINUOUS	NCK REQ
PHOSPHORUS, TOTAL (AS P) 00665 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	NODI	NODI		0	NODI	NODI
	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MNTH AVG	REPORT DLY MAX	MG/L		ONCE/ MONTH	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	4.2	4.2		0	ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MNTH AVG	REPORT DLY MAX	MG/L		ONCE/ MONTH	GRAB
CARBON, TOT ORGANIC (TOC) 00680 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	******	******		******	-2	-2		0	ONCE/ MONTH	CALCTD **
	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MNTH AVG	20.00000 DLY MAX	MG/L		ONCE/ MONTH	GRAB
CARBON, TOT ORGANIC (TOC) 00680 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	******	******		******	5.8	5.8		0	ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MNTH AVG	REPORT DLY MAX	MG/L		ONCE/ MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE			DATE		
Mark B. Bezilla General Manager Hope Creek 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 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	AREA CODE 609	NUMBER 339-3463	YEAR 97	MO 11	DAY 21
TYPED OR PRINTED							

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

** Please refer to attached transmittal sheet addenda.

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

NAME PSE&G

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

FACILITY PSE&G HOPE CREEK GENERATING ST

LOCATION LOWER ALLOWAYS CREE,NJ 08038

DMR NUMBER: NJ0025411 461A 101997

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

(2-16) NJ0025411 PERMIT NUMBER

(17-19) 461A DISCHARGE NUMBER

	MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	10	01	TO	97	10	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

CREATED: 10/02/97 MAJOR

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

SOUTHERN REGION / SALEM

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
HEAT (WINTER) (PER HOUR)	SAMPLE MEASUREMENT	43	60		******	******	******		0	DAILY	CALCTD
81387 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTH AVG	662.00000 DLY MAX	MBTU/HR	******	******	******	*******		DAILY	CALCTD
	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

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	97	11	21
AREA CODE	NUMBER	YEAR	MO	DAY

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

LABS: 17451 77343 06431

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

NAME PSE&G

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

FACILITY PSE&G HOPE CREEK GENERATING ST

LOCATION LOWER ALLOWAYS CREE, NJ 08038

DMR NUMBER: NJ0025411 461C 101997

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

NJ0025411 — PERMIT NUMBER

461C — DISCHARGE NUMBER

CREATED: 10/02/97

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

MAJOR

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	10	01	TO	97	10	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

SOUTHERN REGION / SALEM

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	2	2		0	ONCE/ MONTH	COMPOS
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	30.[illegible] MNTH AVG	100.[illegible] DLY MAX	MG/L		ONCE/ MONTH	COMPOS
PETROL HYDROCARBONS, TOTAL RECOVERABLE	SAMPLE MEASUREMENT	******	******		******	<0.5	<0.5		0	TWICE/ MONTH	GRAB
45501 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	10.[illegible] MNTH AVG	15.[illegible] DLY MAX	MG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.020	0.060		******	******	******		0	CONTIN UOUS	METER
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTH AVG	REPORT DLY MAX	MGD	******	******	******	**** ***		CONTINUOUS	METER
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	******	******		******	10	10		0	ONCE/ MONTH	COMPOS
00680 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MNTH AVG	50.[illegible] DLY MAX	MG/L		ONCE/ MONTH	COMPOS
	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

AREA CODE: 609 | NUMBER: 339-3463

DATE

YEAR	MO	DAY
97	11	21

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

EPA Form 3320-1 (0[illegible]-95) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

LABS: 17451 77343 06431

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

NAME PSE&G

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

FACILITY PSE&G HOPE CREEK GENERATING ST

LOCATION LOWER ALLOWAYS CREE,NJ 08038

DMR NUMBER: NJ0025411 462B 101997

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

NJ0025411 — PERMIT NUMBER

462B — DISCHARGE NUMBER

CREATED: 10/02/97 MAJOR

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

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	10	01	TO	97	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)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	4	4		*****	*****	*****		0	ONCE/ MONTH	COMPOS
00310 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	8.00000 MNTH AVG	REPORT DLY MAX	KG/DAY	*****	*****	*****	*****		ONCE/ MONTH	COMPOS
PH	SAMPLE MEASUREMENT	*****	*****		7.5	*****	7.5		0	ONCE/ MONTH	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.00000 MINIMUM	*****	9.00000 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	10	10		0	ONCE/ MONTH	COMPOS
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	30.00000 MNTH AVG	REPORT DLY MAX	MG/L		ONCE/ MONTH	COMPOS
OIL AND GREASE FREON EXTR--GRAV METH	SAMPLE MEASUREMENT	*****	*****		*****	<1	<1		0	ONCE/ MONTH	GRAB
00556 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	10.00000 MNTH AVG	15.00000 DLY MAX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.026	0.038		*****	*****	*****		0	DAILY	METER
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTH AVG	REPORT DLY MAX	MGD	*****	*****	*****	*****		DAILY	METER
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****		*****	<1	<1		0	ONCE/ MONTH	GRAB
74055 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	200.00000 MONTHGEO	400.00000 DAILYGEO	#/100 ML		ONCE/ MONTH	GRAB
BOD, 5-DAY PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****		92.8	*****	*****		0	ONCE/ MONTH	CALCTD
81010 K 0 PERCENTREMOVAL	PERMIT REQUIREMENT	*****	*****	*****	87.50000 MONAVMIN	*****	*****	PERCENT		ONCE/ MONTH	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE			DATE		
Mark B. Bezilla General Manager Hope Creek 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 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	609	339-3463	97	11	21
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

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

LABS: 17451 77343 06431

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

NAME PSE&G

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

FACILITY PSE&G HOPE CREEK GENERATING ST

LOCATION LOWER ALLOWAYS CREE,NJ 08038

DMR NUMBER: NJ0025411 462B 101997

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

NJ0025411	462B
PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)

CREATED: 10/02/97 MAJOR

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

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	10	01	TO	97	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)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
SOLIDS, SUSPENDED PERCENT REMOVAL	SAMPLE MEASUREMENT	******	******		97	******	******		0	ONCE/ MONTH	CALCTD
81011 K 0 PERCENTREMOVAL	PERMIT REQUIREMENT	******	******	**** ****	85.00000 MONAVMIN	******	******	PERCENT		ONCE/ MONTH	CALCTD
CHLORINE PRODUCED OXIDANTS	SAMPLE MEASUREMENT	******	******		******	0.2	0.2		0	ONCE/ MONTH	GRAB
*CPOX 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MNTH AVG	REPORT DLY MAX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMI REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE			DATE		
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TYPED OR PRINTED		AREA CODE	NUMBER		YEAR	MO	DAY

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