



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

Nuclear Business Unit

December 21, 1999

Department of Environmental Protection
Division of Water Quality
Bureau of Permit Management
P.O. Box 029
Trenton, N.J. 08625-0029

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 1999.

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,

Mark B. Bezilla
Vice President
Operations

The Power of Commitment

JE25

Attachments

- C Executive Director, DRBC
USNRC - Docket number 50-354**

Explanation of Conditions

November 1999

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:

Hope Creek Generating Station (17451)
Raytheon Env. Services Laboratory (77343)
South Jersey Testing, Inc. (06431)

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

Results reported on the Discharge Monitoring Report forms are consistent with permit limits, data supplied from contract laboratories, the December 1993 revision of the NJDEP DMR Instruction manual and specific guidance from DEP personnel.

The industrial license holder's (N-2) signature is signifying the review for DSN's 461A and 461C. The S-4 license holder's signature signifies review for DSN-462B.

NJPDES DMR

12/21/99

Explanation of Exceedances

November 1999

The following exceedances are included in the attached report and explained below.

DSN No.

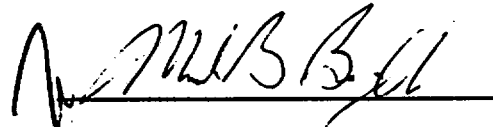
EXPLANATION

No Exceedances

COUNTY OF SALEM
STATE OF NEW JERSEY

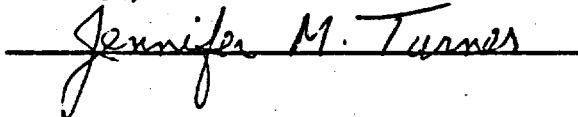
I, Mark B. Bezilla, of full age, being duly sworn according to law, upon my oath depose and say:

1. I am the Vice President, Operations for PSEG Nuclear, and as such am authorized to sign Hope Creek's Discharge Monitoring Reports submitted to the New Jersey Department of Environmental Protection pursuant to the Station's New Jersey Pollutant Discharge Elimination System permit.
2. I 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.
3. The signature on the attached Discharge Monitoring Reports is my signature and I am submitting this affidavit in satisfaction of the requirement that my signature be notarized.



Mark B. Bezilla
Vice President
Operations

Sworn and subscribed before me
this 21st day of Dec 1999.



JENNIFER M. TURNER
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires July 25, 2000

ADDENDA TO MONITORING REPORT - TRANSMITTAL SHEET

November 1999

12/21/99

DISCHARGE NUMBER

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

T-VWX-014

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER QUALITY

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.
0025411

REPORTING PERIOD
Mo. Yr. Mo. Yr.
1199 1199

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

SLUDGE REPORT - 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
 ELECTRONIC SUBMISSION

NJPDES DISCHARGE MONITORING
 5 EPA FORM 3320-1

	YES	NO
DYE TESTING	<u> </u>	<u> x</u>
TEMPORARY BYPASSING	<u> </u>	<u> x</u>
DISINFECTION INTERRUPTION	<u> </u>	<u> x</u>
MONITORING MALFUNCTIONS	<u> </u>	<u> x</u>
UNITS OUT OF OPERATION	<u> </u>	<u> x</u>
OTHER	<u> </u>	<u> x</u>

(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) Peter R. La Sala

Name (Printed) Mark B. Bezilla

Grade & Registry No. N-2 (0005928)

Title (Printed) Vice President, Operations

Signature [Signature]

Signature [Signature]

Date 12/20/99

Date December 21, 1999

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.
12|19|99 12|19|99

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: (856) 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

SLUDGE REPORT - 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
___ ELECTRONIC SUBMISSION

NJPDES DISCHARGE MONITORING
5 EPA FORM 3320-1

	YES	NO
DYE TESTING	___	<input checked="" type="checkbox"/>
TEMPORARY BYPASSING	___	<input checked="" type="checkbox"/>
DISINFECTION INTERRUPTION	___	<input checked="" type="checkbox"/>
MONITORING MALFUNCTIONS	___	<input checked="" type="checkbox"/>
UNITS OUT OF OPERATION	<input checked="" type="checkbox"/>	___
OTHER	<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 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
Grade & Registry No. S-4 (0006979)
Signature *Andres Nurk*
Date 12/1/99

Name (Printed) Mark B. Bezilla
Title (Printed) Vice President Operations
Signature *M.B. Bezilla*
Date December 21, 1999

OPERATING EXCEPTIONS DETAILED

#2 filter out of operation
 "A" Clarifier off line due to rapid sludge settling rate

HOURS ATTENDED AT PLANT

Month 11 Year 219

Day of Month
 Licensed Operator
 Others

Day of Month
 Licensed Operator
 Others

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

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

461A
 DISCHARGE NUMBER

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

MAJOR

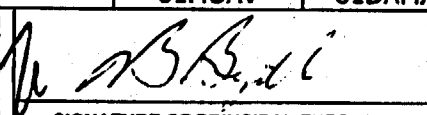
FACILITY LOCATION PSE&G HOPE CREEK GENERATING ST
 LOWER ALLOWAYS CREE, NJ 08038

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
99	11	01	99	11	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

SOUTHERN REGION / SALEM

DMR NUMBER : NJ0025411 461A 111999

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				UNITS
PH	SAMPLE MEASUREMENT	*****	*****		8.6	*****	8.7	0	WEEKLY	GRAB	
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0000X 01RPMN	*****	9.0000X 01RPMX		WEEKLY	GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	38.367	43.099		*****	*****	*****	0	CONTINUOUS	METER	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	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 01MOAVMN	*****	*****	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 01MOAVMN	*****	*****	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 01MOAVMN	*****	*****	PERCENT	QTRLY	CK REQ	
CHLORINE PRODUCED OXIDANTS	SAMPLE MEASUREMENT	*****	*****		*****	<0.1	<0.1	0	THREE/ WEEK	GRAB	
*CPOX 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	0.2000X 01MOAV	0.5000X 01DAMX	MG/L	THREE/ WEEK	GRAB	
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	*****		*****	24.1	29.7	0	CONTINUOUS	CK REQ	
00010 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	36.2000X 01DAMX	DEG.C	CONTINUOUS	CK REQ	
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 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.)						TELEPHONE		DATE		
Mark B. Bezilla Vice President Operations							856	339-3463	99	12	21
TYPED OR PRINTED							SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR

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 461A
 PERMIT NUMBER DISCHARGE NUMBER

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

MAJOR

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

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
99	11	01	TO	99	11	30

SOUTHERN REGION / SALEM

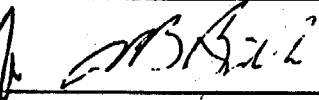
DMR NUMBER : NJ0025411 461A 111999

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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		*****	*****	****	*****	14.2	17.2	0	CONTINUOUS	CK REQ
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX		CONTINUOUS	CK REQ
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	75.5	85.4	0	CONTINUOUS	CK REQ
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	97.1000X 01DAMX		CONTINUOUS	CK REQ
TEMPERATURE, WATER DEG. FAHRENHEIT 0011 7 0 INTAKE FROM STREAM		*****	*****	****	*****	57.6	62.9	0	CONTINUOUS	CK REQ
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX		CONTINUOUS	CK REQ
PHOSPHORUS, TOTAL (AS P) 00665 1 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	NODI	NODI	0	NODI	NODI
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX		ONCE/MONTH	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 EFFLUENT GROSS VALUE		*****	*****	****	*****	8.7	8.7	0	ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX		ONCE/MONTH	GRAB
CARBON, TOT ORGANIC (TOC) 00680 2 0 EFFLUENT NET VALUE		*****	*****	****	*****	-3	-3	**	ONCE/MONTH	CALCTD
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	20.8800X 01DAMX		ONCE/MONTH	GRAB
CARBON, TOT ORGANIC (TOC) 00680 7 0 INTAKE FROM STREAM		*****	*****	****	*****	8.2	8.2	0	ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX		ONCE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Mark B. Bezilla
 Vice President
 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. (Fines 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
 856 339-3463 99 12 21
 AREA CODE NUMBER YEAR MO 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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

NJ0025411
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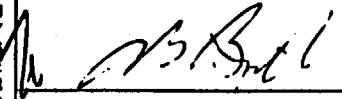
FACILITY LOCATION PSE&G HOPE CREEK GENERATING ST
 LOWER ALLOWAYS CREE, NJ 08038

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
99	11	01	99	11	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

SOUTHERN REGION / SALEM

DMR NUMBER : NJ0025411 461A 111999

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (39-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE (54-61)	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
HEAT (WINTER) (PER HOUR) 81387 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	237	333	MBTU/HR	*****	*****	*****	**** ***	0	DAILY	CALCTD	
	PERMIT REQUIREMENT	REPORT 01MOAV	662.00000X 01DAMX		*****	*****	*****				DAILY	CALCTD
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
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	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 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		
Mark B. Bezilla Vice President Operations TYPED OR PRINTED								856	339-3463	99	12	21
		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

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

DMR NUMBER : NJ0025411 461C 111999

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

NJ0025411
 PERMIT NUMBER

461C
 DISCHARGE NUMBER

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

MAJOR

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	99	11	01		99	11	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

SOUTHERN REGION / SALEM

NOTE: Read instructions before completing this form.

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	MEASUREMENT	*****	*****		*****	5	5		0	ONCE/MONTH	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	30.0000X 01MOAV	100.0000X 01DAMX	MG/L		ONCE/MONTH	COMPOS
PETROL HYDROCARBONS, TOTAL RECOVERABLE 45501 1 0 EFFLUENT GROSS VALUE	MEASUREMENT	*****	*****		*****	0	1		0	TWICE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	10.0000X 01MOAV	15.0000X 01DAMX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	MEASUREMENT	0.066	0.151		*****	*****	*****		0	CONTINUOUS	METER
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	****		CONTINUOUS	METER
CARBON, TOT ORGANIC (TOC) 00680 1 0 EFFLUENT GROSS VALUE	MEASUREMENT	*****	*****		*****	3	3		0	ONCE/MONTH	COMPOS
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	50.0000X 01DAMX	MG/L		ONCE/MONTH	COMPOS
	MEASUREMENT										
	PERMIT REQUIREMENT										
	MEASUREMENT										
	PERMIT REQUIREMENT										
	MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Mark B. Bezilla
 VicePresident
 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.)

Mark B. Bezilla
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
856	339-3463	99	12	21
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 462B
 PERMIT NUMBER DISCHARGE NUMBER

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

MAJOR

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

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
99	11	01	TO	99	11	30
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

SOUTHERN REGION / SALEM

DMR NUMBER : NJ0025411 462B 111999

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (48-53)			(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			
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2	2	KG/DAY	*****	*****	*****	**** ***	0	ONCE/MONTH	COMPOS
	PERMIT REQUIREMENT	8.00000X 01MOAV	REPORT 01DAMX		*****	*****	*****				ONCE/MONTH
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**** ****	*****	29	60	**	0	ONCE/MONTH	COMPOS
	PERMIT REQUIREMENT	*****	*****		*****	30.0000X 01MOAV	REPORT 01DAMX		MG/L		ONCE/MONTH
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**** ****	*****	2	2	MG/L	0	ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	10.0000X 01MOAV	15.0000X 01DAMX				ONCE/MONTH
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.012	0.022	MGD	*****	*****	*****	**** ***	0	DAILY	METER
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****				DAILY
COLIFORM, FECAL GENERAL 74055 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**** ****	*****	<1	<1	#/100	0	ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	200.0000X 01MOGE	400.0000X 01DAGE				ONCE/MONTH
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 PERCENTREMOVAL	SAMPLE MEASUREMENT	*****	*****	**** ****	90.1	*****	*****	PERCENT	0	ONCE/MONTH	CALCTD
	PERMIT REQUIREMENT	*****	*****		*****	87.5000X 01MOAVMN	*****		*****		ONCE/MONTH
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 1 0 PERCENTREMOVAL	SAMPLE MEASUREMENT	*****	*****	**** ****	92	*****	*****	PERCENT	0	ONCE/MONTH	CALCTD
	PERMIT REQUIREMENT	*****	*****		*****	85.0000X 01MOAVMN	*****		*****		ONCE/MONTH

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 U.S.C. § 1001 AND 33 U.S.C. § 1319 (Penalties under these statutes may include fines up to \$70,000 and or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE			
Mark B. Bezilla Vice President Operations			856 339-3463	99 12 21			
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

** Please refer to the attached Transmittal Sheet Addenda.