

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

**Nuclear Business Unit** 

February 23, 2000

New Jersey Department of Environmental Protection Division of Water Quality Bureau of Permit Management P.O. Box 029 Trenton, NJ 08625-0029 Certified Mail Number Z 449 228 453

NEW JERSEY POLLUTANT DISCHARGE ELIMINATION SYSTEM DISCHARGE MONITORING REPORTS SALEM GENERATING STATION PERMIT NO. NJ0005622

Attached is the Discharge Monitoring Report for Salem Generating Station containing the information as required in Permit No. NJ0005622, for the month of January 2000.

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

Sincerely.

Mark B. Bezilla

Vice President Operations

**Attachments** 

IE25

С Executive Director - DRBC USNRC - Document Control Desk Unit#1-50-272 Unit#2-50-311 Vice President Operations Licensing Manager M. Vaskis

D. Hurka

J. Schloss

Central Record Facility

E. Keating

NJPDES Report Explanation of Deviations January 2000

The following explanations are included to clarify possible deviations 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.

All reported concentrations are based on daily discharge values.

Total residual chlorine is performed three times per week during chlorination unless otherwise indicated.

Analytical values which are less than detectable are reported as zero unless otherwise indicated.

Analytical results for all parameters other than pH, temperature, TSS, TRC and Bioassay results are provided by Raytheon Environmental Services Laboratory. (NJDEP certification 77343) or South Jersey Testing Laboratory (NJDEP certification 06431). Bioassay results are provided by New England Bioassay, Inc. (NJDEP certification 46405).

Net negative discharge values are reported as negative.

489C-

Flow through outfall 489 is calculated based on Oil Water Separator Lift Pump run times.

481-486 -

Chlorination of the circulation water system normally does not occur except as otherwise noted. Service water system chlorination is normally continuous and is monitored on the circulating water system outfall.

Chlorination of both systems will be indicated by results reported for both and represents their combined effect upon the circulating water outfall.

NJPDES Report Explanation of Deviations January 2000

48C

Non-Radioactive Liquid Waste - This system continues to be operated in a batch mode to treat for hydrazine and ammonia by the addition of sodium hypochlorite. No hydrazine has been discharged from this outfall during the reporting period. Residual chlorine is monitored at the outfalls of DSN's 481, 482, 484, and 485, and has not exceeded the permit limits at these outfalls.

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

DSN NO.

**EXPLANATION** 

None

## 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 Salem'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 have reviewed the attached Discharge Monitoring Reports. Pursuant to N.J. A. C. 7:14A-2.4, 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 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 31 day of Feb 2000

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

## NEW JERSEY DEPARTMENT OF ENVIROMENTAL PROTECTION DIVISION OF WATER QUALITY

## MONITORING REPORT - TRANSMITTAL SHEET

		DES NO.  0 5 6 2 2	REPORTING PERIOD Mo. Yr. Mo. Yr.		
PERMITTEE:	Name :	Public Service Electric and G	0 <u> 1 0 0</u>		
		P.O. Box 236			<del></del>
FACILITY:	Name :	Salem Nuclear Generating S			<u>.</u>
	Address:	Alloway Creek Neck Road			<u>.</u>
		Hancock's Bridge			<u>.</u>
	Telephone	e:_(856) 935-6000			_ <u>:</u>
FORMS ATTA	ACHED (In	dicate Quantity of Each)	Operating Exceptions		
SLUDGE REP <u>0</u> T-VWX-007 0 EPA FORM	7 <u>0</u> T-VW	ITARY 'X-008 <u>0</u> T-VWX-009	DYE TESTING	Yes	No <u>X</u>
SLUDGE REP		ISTRIAI	TEMPORARY BYPASSING	_	<u>X</u>
<u>0</u> T-VWX-010			DISINFECTION INTERUPTION	_	<u>X</u>
WASTEWATE		TS X-012 0 T-VWX-013	MONITORING MALFUNCTIONS		<u>X</u>
GROUNDWA'	_		UNITS OF OPERATION		<u>X</u>
	,B) <u>0</u> VW	/X-016 <u>0</u> VWX-017	OTHER		<u>X</u>
		ONITORING REPORT	(Detail any "Yes" on reverse side in app	propriate s	space)
12 EPA FORM		SINTORING REFORT	NOTE: The "Hours Attended at Plant" of this sheet must also be completed.	on the rev	erse
of supervision in those persons dir belief, true, accui	accordance ectly respon rate, and con	with a system designed to assur sible for gathering the information	is document and all attachments were prepared use my inquiry of the person or persons who man on, the information submitted is, to the best of man significant penalties for submitting false informat	age the sys	stem or
LICENSED OF	PERATOR		PRINCIPAL EXECUTIVE OFFICER or DULY AUTHORIZED REPRESENTATION	VE	
Name (Printed) Grade & Regist		2 0016955 .	Name (Printed) Mark B. Bezilla Title (Printed) Vice President Operation	S	<del>:</del>
Signature W Date <b>2/23</b>	richael 100	J. Kuluil	Signature Mals But 1		
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	<b>OPERATING</b>	<b>EXCEPTIONS</b>	DETAILED
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PAGE 2

None		
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## HOURS ATTENDED AT PLANT

Month 0 1 Year 0 0

Day of Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Licensed			8	8	8	8	8			8	8	8	8	8	-	10
Operator										İ						
Others	4	4	4	4	4	4	4	4	4	4	4	4	4	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	8	8	8	8			8	
Others	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	

NAME PSE&G

ADDRESS P.O. BOX 236/N21

HANCOCKS BRIDGE, NJ 08038

NJ0005622 PERMIT NUMBER

FACA DISCHARGE NUMBER

FACILITY PSE&G SALEM GENERATING STATION LOCATION LOWER ALLOWAYS CREEK, N.J. 08038

MONITORING PERIOD YEAR MO DAY YEAR MO DAY TO 0.0 01 0.1 0.0 01 31

THERMAL DSCHG FOR DSN 481-483 COUTTEDN DECTON /

PARAMETER	"	(3 Card Only) (46-53)	QUANTITY OR LOADIN (54-61)	(G	(4 Card Only) (38-45)	QUALITY OR CONCENT (46-53)	FRATION (54-61)		NO.		SAMPLE
(32-37)		Í'		UNITS				UNITS		ANALYSIS (64-68)	SAMPLE TYPE (69-70
MPERATURE, WATER G. CENTRIGADE	SAMPLE MEASUREMENT	*****	*****		*****	9.3	14.9		0	CONTI	
010 1 0 FLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	46.1 01DAMX	DEG.C	; (	CONTIN	CONT
MPERATURE, WATER G. CENTRIGADE	SAMPLE MEASUREMENT	*****	*****		*****	5.9	9.4		0.0	CONTIN	CALC
010 2 0 FLUENT NET VALUE	PERMIT REQUIREMENT	*****	****	****	*****	REPORT 01MOAV	15.3 01DAMX	DEG.C	; (	CONTIN	CALC'
MPERATURE, WATER G. CENTRIGADE	SAMPLE MEASUREMENT	*****	*****		*****	3.4	7.0		00	CONTIN	CONT
010 7 0 FAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX		: 0	CONTIN UOUS	CONT
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33 USC \$ 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

EXECUTIVE OFFICER OR AUTHORIZED AGENT

EFFLUENT TEMP IS TO BE CALCULATED AS THE COMBINED AVERAGE OF EACH OF THE SEPARATE DISCHARGES 481-483. NET TEMP IS THE DIFFERENCE BETWEEN THE AMBIENT RIVER WATER TEMP AND THE AVE EFFLUENT TEMP OF 481-483. NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

MAJOR

NAME PSE&G

ADDRESS P.O. BOX 236/N21

HANCOCKS BRIDGE, NJ 08038

NJ0005622 PERMIT NUMBER

FACB DISCHARGE NUMBER

FACILITY PSE&G SALEM GENERATING STATION

LOCATION LOWER ALLOWAYS CREEK, NJ 08038

DMR NUMBER: NJ0005622 FACE 012000 (20-21) (22-23) (24-25)

MONITORING PERIOD

YEAR MO DAY TO 00 01 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

THERMAL DSCHG FOR DSN 484-486 SOUTHERN REGION / SALEM

DMR NUMBER: NJ0005622	FACB	012000	(20-21)	22-23) (24	-25) (26-27) (28	8-29) (30-31)		GION ,		ADBM	
PARAMETER	* *	(3 Card Only) (46-53)	QUANTITY OR LOADIN (54-61)	īG	(4 Card Only) (38-45)	QUALITY OR CONCEN	TRATION (54-61)	•	NO.	FREQ.	
(32-37)				UNITS		i		UNITS	EX. (62 A 63)	OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. CENTRIGADE	SAMPLE MEASUREMENT	*****	*****		*****	12.7	16.8		0 C		CONTIN
00010 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	46.1 01DAMX	DEG.C	: c		CONTIN
TEMPERATURE, WATER DEG. CENTRIGADE	SAMPLE MEASUREMENT	*****	*****		*****	9.3	10.8			ONTIN OUS	CALCTD
00010 2 0 EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	15.3 01DAMX	DEG.C	c c		CALCTD
TEMPERATURE, WATER DEG. CENTRIGADE	SAMPLE MEASUREMENT	****	*****		*****	3.4	7.0			ONTIN OUS	CONTIN
00010 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	****	****	****	REPORT 01MOAV	REPORT 01DAMX	DEG.C	C		CONTIN
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MARK B. BEZILLA VICE PRESIDENT OPERATIONS TYPED OR PRINTED			F LAW THAT I HAVE INFORMATION SUBMIT TO INVIDUALS IMMEDIAT, I BELEIVE THE SUPLETE. I AM AWARE BMITTING FALSE INFORM IMPRISONMENT. SIS under these stationistical comment of between the station of the submitted in the submitted i			SIGNATURE OF EXECUTIVE OF AUTHORIZED A	F PRINCIPAL FICER OR AR	TELEPI 56 935 LEA NO			02 24 MO DAY

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LABS: 17327 06431 46405 77343

PSE&G

P.O. BOX 236/N21

NAME

ADDRESS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

NJ0005622

DISCHARGE MONITORING REPORT (DMR)

(2-16)(17-19)

FACC DISCHARGE NUMBER THERMAL DSCHG FOR DSN 481-486 MAJOR SALEM

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

HANCOCKS BRIDGE, NJ 08038

PERMIT NUMBER MONITORING PERIOD YEAR MO DAY YEAR MO DAY 01 0.0 00 01 01 31

SOUTHERN REGION

	, = _ = '	(3 Card Only) (46-53)	QUANTITY OR LOADIN (54-61)	€G	(4 Card Only) (38-45)	QUALITY OR CONCENT (46-53)	TRATION (54-61)		NO.	. FREO.	
PARAMETER (32-37)				UNITS		1	(34 04)	UNITS	EX. (62 63)	OF	SAMPLE S TYPE ) (69-70
THERMAL DISCHARGE	SAMPLE MEASUREMENT	13489	16244		*****	*****	*****		00	CONTI	<del></del>
0015 2 0 FFLUENT NET VALUE	PERMIT REQUIREMENT	REPORT 01MOAV		MBTU/ HR	*****	*****	*****	****	* (	CONTIL	MCALC'
LOW, IN CONDUIT OR HRU TREATMENT PLANT	SAMPLE MEASUREMENT	2632			*****	*****	*****			DAILY	CALC
0050 7 0 NTAKE FROM STREAM	PERMIT REQUIREMENT	3024 01MOAV			*****	*****	*****	****		DAILY	CALC'
	SAMPLE MEASUREMENT							<del></del>			
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NAME PSE&G

ADDRESS

P.O. BOX 236/N21

HANCOCKS BRIDGE, NJ 08038

FACILITY PSE&G SALEM GENERATING STATION

NJ0005622 048C PERMIT NUMBER DISCHARGE NUMBER

MONITORING PERIOD YEAR DAY

00 Λ1 Λī YEAR DAY 00 Λ1 21

PARAMETER	* • . • *	(3 Card Only) ( (46-53)	QUANTITY OR LOADIN (54-61)	₹G	(4 Card Only) Q1 (38-45)	UALITY OR CONCENT (46-53)	RATION (54-61)		NO. FREQ. EX. OF	SAMPLE
(32-37)				UNITS				UNITS	(62 ANALYSI 63) (64-68)	S TYPE (69-70)
SOLIDS, TOTAL SUSPENDED	Sample MEASUREMENT	*****	*****		*****	13	18		0TWICE MONTH	COMPO
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30 01MOAV	100 01DAMX	MG/L	TWICE MONTH	COMPOS
HYDROCARBONS, IN H20 IR, CC14 EXT. CHROMA	Sample MEASUREMENT	*****	*****		*****	< 0.5	< 0.5		0TWICE MONTH	
00551 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	****	****	*****	10 01MOAV	15 01DAMX	MG/L	TWICE MONTH	
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	*****	****		*****	9	14		0 TWICE MONTH	COMPOS
00610 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	****	35 01MOAV	70 01DAMX	MG/L	TWICE MONTH	/COMPOS
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	*****	*****		*****	21	21		0TWICE MONTH	/COMPOS
00680 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	****	****	*****	REPORT 01MOAV	50 01DAMX	MG/L	TWICE MONTH	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.1468	0.3146		*****	*****	*****		0DAILY	CALCTI
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	**** ****	DAILY	CALCTI
	SAMPLE MEASUREMENT		<b></b>							
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT		: •••							
	PERMIT REQUIREMENT									

VICE PRESIDENT **OPERATIONS** 

TYPED OR PRINTED

OBTAINING THE INFORMATION, I BELEIVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIG-NIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC \$ 1001 AND 33 USC \$ 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

856 935-6000 00 02 24 AREA CODE NUMBER YEAR MO DAY

NAME PSE&G

**ADDRESS** 

P.O. BOX 236/N21

HANCOCKS BRIDGE, NJ 08038

481A NJ0005622 PERMIT NUMBER DISCHARGE NUMBER MONITORING PERIOD YEAR MO DAY YEAR MO DAY

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

TO 00 01 01 00 01 31 126-27 128-29 130-31

SOUTHERN REGION SALEM

DMR NUMBER: NJ0005622	2 481A	012000	(20-21) (2	22-23) (24-	-25) (26-27) (28	8-29) (30-31)					
		(3 Card Only) (46-53)	QUANTITY OR LOADIN (54-61)	1G	(4 Card Only) (38-45)	QUALITY OR CONCENT (46-53)	RATION (54-61)		NO.	FREQ.	0.1.07.7
PARAMETER (32-37)				UNITS				UNITS	EX. (62 63)	OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****		0	CODE=1	CODE=1
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 01DAMN	g	*****	PERCE NT	1000	QTRLY	
PH	SAMPLE MEASUREMENT	*****	*****		7.7	*****	7.8		01	WEEKL	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	****	****	6.0 01RPMN		9.0 01RPMX	ຮບ		WEEKL	GRAB
РН	SAMPLE MEASUREMENT	*****	*****		7.6	*****	8.0		01	WEEKL	GRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*********	****	REPORT 01RPMN	1	REPORT 01RPMX	នប	1	WEEKL	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	462	520		*****	****	*****		01	PAILY	CALCTI
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV		MGD	*****	*****	*****	****	1	DAILY	CALCTI
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	****	*****		*****	NODI	NODI		01	NODI	NODI
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 01MOAV	.5 01DAMX	MG/L		THREE, WEEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1			THREE,	GRAB
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	.2 01DAMX	MG/L		THREE, NEEK	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

TYPED OR PRINTED

MARK B. BEZILLA VICE PRESIDENT **OPERATIONS** 

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 BELEIVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIG-NIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE 856 935-6000 00 02 AREA CODE NUMBER YEAR MO DAY

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

NJ0005622

PERMIT NUMBER

MAJOR

NAME PSE&G

ADDRESS P.O. BOX 236/N21

HANCOCKS BRIDGE, NJ 08038

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

MONITORING PERIOD YEAR MO DAY YEAR MO DAY 01 0.0 01 00 01 31 (20-21)(22-23)(24-25)(26-27) (28-29) (30-31)

482A

DISCHARGE NUMBER

SOUTHERN REGION SALEM

PARAMETER		(3 Card Only) (46-53)	QUANTITY OR LOADIN (54-61)	1G	(4 Card Only) (38-45)	QUALITY OR CONCENTS (46-53)	RATION (54-61)		NO.	FREQ.	SAMPLE
(32-37)	* "			UNITS				UNITS		NALYSIS 64-68)	TYPE (69-70)
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****		000	)DE=1	CODE=1
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	****	****	50 01DAMN	1 - 1	****	PERCE NT		rly	
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.8		OWE	EEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	***	*****	****	6.0 01RPMN	*****	9.0 01RPMX	នប	WE	EEKLY	GRAB
PH	SAMPLE MEASUREMENT	****	*****		7.6	*****	8.0		OWE	EEKLY	GRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT 01RPMN	*****	REPORT 01RPMX	នប	WE	EKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	444	492		*****	*****	*****		ODA	ILY	CALCTI
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	****	DA	ILY	CALCTI
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		0110	DDI	NODI
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 01MOAV	.5 01DAMX			IREE/ EEK	GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1			IREE/ EEK	GRAB
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	.2 01DAMX	MG/L	TH	IREE/ EEK	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT				·						

MARK B. BEZILLA VICE PRESIDENT OPERATIONS

TYPED OR PRINTED

AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELEIVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIG-NIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC S 1319. (Penalties under these statutes may include fines up to

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

856,935-6000 00 02 CODE NUMBER YEAR MO DAY

\$10,000 and/or maximum imprisonment of between 6 months and 5 years.) PARAMETER 50060 LOCATIONS: "R" = SWS DSCHG (NO CWS FLOW) "S" = SWS DSCHG (NORMAL COND) ENTER "NODI" FOR LOCATIONS THAT DO NOT APPLY.

NAME PSE&G

ADDRESS

P.O. BOX 236/N21

HANCOCKS BRIDGE, NJ 08038

FACILITY PSE&G SALEM GENERATING STATION

LOCATION LOWER ALLOWAYS CREEK, NJ 08038

NJ0005622 483A PERMIT NUMBER DISCHARGE NUMBER MONITORING PERIOD YEAR DAY YEAR DAY TO 00 01 01 00 01 31

SOUTHERN REGION / SALEM

PARAMETER		(3 Card Only) ( (46-53)	QUANTITY OR LOADIN (54-61)	IG	(4 Card Only) Q (38-45)	QUALITY OR CONCEN (46-53)	ITRATION (54-61)		NO. FREQ.	400 min
(32-37)				UNITS				UNITS	EX. OF (62 ANALYSIS (63) (64-68)	SAMPLE S TYPE (69-70)
CC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****		0CODE=	CODE=
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 01DAMN	*****	****	PERCE		
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.8		0WEEKL	YGRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 01RPMN	*****	9.0 01RPMX	នប	WEEKL	YGRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	8.0		0WEEKL	YGRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT 01RPMN	*****	REPORT 01RPMX	នប	WEEKL	YGRAB
LOW, IN CONDUIT OR CHRU TREATMENT PLANT	SAMPLE MEASUREMENT	383	463		*****	*****	*****	-	0DAILY	CALCT
0050 1 0 FFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****	****	DAILY	CALCT
HLORINE, TOTAL ESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1		OTHREE, WEEK	GRAB
0060 R 0 EE COMMENTS BELOW	PERMIT REQUIREMENT	*****		****	*****	.3 01MOAV	.5 01DAMX	MG/L	THREE, WEEK	GRAB
HLORINE, TOTAL ESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1		OTHREE, WEEK	GRAB
0060 S 0 EE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	.2 01DAMX	MG/L	THREE, WEEK	GRAB
	SAMPLE MEASUREMENT PERMIT REQUIREMENT					<del></del>			WELLX	

VICE PRESIDENT

TYPED OR PRINTED .

**OPERATIONS** 

IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIG-NIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC \$ 1001 AND 33 USC \$ 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

1 DE VINGE SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

856 935-6000 00 02 24 AREA CODE NUMBER YEAR MO DAY

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

NAME PSE&G

ADDRESS P.O. BOX 236/N21

HANCOCKS BRIDGE, NJ 08038

NJ0005622 484A PERMIT NUMBER DISCHARGE NUMBER MONITORING PERIOD

FACILITY PSE&G SALEM GENERATING STATION LOCATION LOWER ALLOWAYS CREEK, NJ 08038 YEAR MO DAY YEAR DAY МО TO 00 01 01 00 01 31

SOUTHERN REGION / SALEM

PARAMETER	" = _ = "	(3 Card Only) ( (46-53)	QUANTITY OR LOADIN (54-61)	AG.	(4 Card Only) (38-45)	QUALITY OR CONCENT (46-53)	TRATION (54-61)		NO.	FREQ.	2NWY P
(32-37)				UNITS				UNITS	EX. (62 63)	ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****		> 100	*****	*****		00	OTRLY	
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	* * * * *	50 01DAMN	*****	****	PERCE NT	1	QTRLY	
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.9	+	1	WEEKL	YGRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	******	****	6.0 01RPMN		9.0 01RPMX		Ţ	VEEKL	GRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	8.0		OV	WEEKLY	GRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT 01RPMN		REPORT 01RPMX		¥	VEEKL)	GRAB
LOW, IN CONDUIT OR HRU TREATMENT PLANT	SAMPLE MEASUREMENT	532	535		*****	*****	****		01	DAILY	CALC
0050 1 0 FFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV			*****	*****	*****	****	į	DAILY	CALC'
HLORINE, TOTAL ESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		10	MODI	NODI
00060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 01MOAV	.5 01DAMX	MG/L	I I	CHREE/ VEEK	GRAB
CHLORINE, TOTAL .	SAMPLE MEASUREMENT	*****	*****	<u> </u>	*****	< 0.1	< 0.1		07	THREE/ VEEK	/GRAB
50060 s 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	.2 01DAMX	MG/L	1	VEEK VEEK	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT			1						. :	
NAME/TITLE PRINCIPAL EXECUTIVE OFFI MARK B. BEZILLA VICE PRESIDENT OPERATIONS	ON MY INQUOENT OBTAINING IS TRUE,	AMILIAR WITH THE I QUIRY OF THOSE INC G THE INFORMATION, ACCURATE AND COME	F LAW THAT I HAVE INFORMATION SUBMIT IDIVIDUALS IMMEDIAT I, I BELEIVE THE SU IPLETE. I AM AWARE IBMITTING FALSE INF	TTED HEREI TELY RESPO UBMITTED I E THAT THE	IN; AND BASED ONSIBLE FOR INFORMATION ERE ARE SIG-	SIGNATURE OF		TELEPI		100 00	DATE 0 02 2

OPERATIONS TYPED OR PRINTED

THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC \$ 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

AREA CODE NUMBER YEAR MO DAY

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

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

(17-19)

MAJOR

NAME PSE&G

ADDRESS P.O. BOX 236/N21

HANCOCKS BRIDGE, NJ 08038

NJ0005622 PERMIT NUMBER

485A DISCHARGE NUMBER

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

MONITORING PERIOD YEAR MO DAY YEAR MO DAY TO 00 01 01 00 31 01

SOUTHERN REGION / SALEM

PARAMETER	* *	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)			NO.	FREQ.	SAMPLE
(32-37)				UNITS				UNITS	(62 AN 63) (6	ALYSIS 64-68)	TYPE (69-70)
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****		> 100	*****	****		100	RLY	
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 01DAMN	*****	*****	PERCE		RLY	
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.8			EKL	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 01RPMN	*****	9.0 01RPMX	នប	WE	EKL	GRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	8.0		0WE	EKLY	GRAB
0400 7 0 NTAKE FROM STREAM	PERMIT REQUIREMENT	******	*****	****	REPORT 01RPMN	*****	REPORT 01RPMX	នប	WE	EKLY	GRAB
LOW, IN CONDUIT OR HRU TREATMENT PLANT	SAMPLE MEASUREMENT	439	493		****	*****	****		0DA	ILY	CALC'
0050 1 0 FFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	****	DA	ILY	CALC'
HLORINE, TOTAL ESIDUAL	SAMPLE MEASUREMENT	****	*****		*****	NODI	NODI		01/10	DI	NODI
0060 R 0 EE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 01MOAV	.5 01DAMX	MG/L		REE/ EK	GRAB
HLORINE, TOTAL ESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1		ОТН		GRAB
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	.2 01DAMX	MG/L	TH		GRAB
	SAMPLE MEASUREMENT PERMIT REOUIREMENT										

MARK B. BEZILLA VICE PRESIDENT **OPERATIONS** 

TYPED OR PRINTED

AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELEIVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIG-NIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE 856,935-6000 00 02 24 AREA CODE NUMBER YEAR MO DAY

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

NAME PSE&G

ADDRESS P.O. BOX 236/N21

HANCOCKS BRIDGE, NJ 08038

NJ0005622 PERMIT NUMBER

00

486A DISCHARGE NUMBER

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

MONITORING PERIOD YEAR MO DAY 01 01

YEAR MO DAY TO 31 00 01

SOUTHERN REGION /

NUMBER

YEAR MO DAY

AUTHORIZED AGENT

SALEM

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADI (46-53) (54-61)		ING (4 Card Only) (38-45)		QUALITY OR CONCENTRATION (46-53) (54-61)			NO. FREG	SAMPLE
				UNITS				UNITS	(62 ANALY:	SIS TYPE
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****		<del>                                     </del>	=NCODE=
FAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 01DAMN	*****	*****	PERCE NT	1	Y
PH	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.8			LYGRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	****	****	6.0 01RPMN	****	9.0 01RPMX	នប	WEEK	LYGRAB
H	SAMPLE MEASUREMENT	*****	*****		7.6	*****	8.0		0WEEK	LYGRAB
0400 7 0 NTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT 01RPMN	*****	REPORT 01RPMX	នប	WEEK	LYGRAB
LOW, IN CONDUIT OR HRU TREATMENT PLANT	SAMPLE MEASUREMENT	436	489		*****	*****	*****		0DAIL	Y CALC
0050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****	**** ****	DAIL	Y CALC
HLORINE, TOTAL ESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		0NODI	NODI
00060 R 0 EEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 01MOAV	.5 01DAMX	MG/L	THRE WEEK	E/GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1		OTHRE	E/GRAB
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	****	*****	****	*****	REPORT 01MOAV	.2 01DAMX	MG/L	WEEK THRE WEEK	E/GRAB
	SAMPLE MEASUREMENT						V		T and short as w	
	PERMIT REQUIREMENT							ŀ		
AME/TITLE PRINCIPAL EXECUTIVE OFFI MARK B. BEZILLA VICE PRESIDENT OPERATIONS  TYPED OR PRINTED	ON MY INQU	AMILIAR WITH THE INCURRY OF THOSE IND: THE INFORMATION,	INFORMATION SUBMITT DIVIDUALS IMMEDIATE , I BELEIVE THE SUB	TTED HEREIN TELY RESPON JBMITTED IN	Y EXAMINED N; AND BASED NSIBLE FOR NFORMATION REE ARE SIG- INCLUDING S 1001 AND include fines up to ths and 5 years.)	SIGNATURE OF EXECUTIVE OF	FPRINCIPAL			DATE 00 02 2

\$10,000 and/or maximum imprisonment of between 6 months and 5 years.) PARAMETER 50060 LOCATIONS: "R" = SWS DSCHG (NO CWS FLOW) "S" = SWS DSCHG (NORMAL COND)

ENTER "NODI" FOR LOCATIONS THAT DO NOT APPLY.

PSE&G

P.O. BOX 236/N21

HANCOCKS BRIDGE, NJ 08038

FACILITY PSE&G SALEM GENERATING STATION

NAME

ADDRESS

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

(17-19)

489C

NJ0005622 PERMIT NUMBER DISCHARGE NUMBER MONITORING PERIOD

YEAR MO DAY 01 00 01

YEAR MO DAY 01 31 00

MAJOR

PARAMETER	"	(3 Card Only) (46-53)	QUANTITY OR LOADIN (54-61)	IG .	(4 Card Only) (38-45)	QUALITY OR CONCENTS (46-53)	RATION (54-61)		NO. FREQ. EX. OF	SAMPL
(32-37)		1		UNITS			J	UNITS	(62 ANALYSIS 63) (64-68)	IS TYPE
PH	SAMPLE MEASUREMENT	*****	*****		7.8	*****	7.8		0 ONCE/	
0400 1 0 FFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 01RPMN	*****	9.0 01RPMX	នប	after a community of the contract	/ GRAB
DLIDS, TOTAL JSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	17	17		0 ONCE/	/ GRAB
0530 1 0 FFLUENT GROSS VALUE		*****	*****	****	*****	30 01MOAV	100 01DAMX	MG/L		GRAB
DROCARBONS, IN H20 , CC14 EXT. CHROMA	SAMPLE MEASUREMENT	*****	*****		*****	< 0.5	< 0.5		0ONCE/ MONTH	GRAB
551 1 0 FLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	10 01MOAV	15 01DAMX	MG/L		GRAE
RBON, TOT ORGANIC	SAMPLE MEASUREMENT	*****	*****		*****	7	7		0ONCE/ MONTH	GRAE
680 1 0 FLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	50 01DAMX	MG/L	land a second at the second	GRAE
OW, IN CONDUIT OR RU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0715	0.0715		*****	****	*****			CALC
050 1 0 FLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	****	ONCE/ MONTH	CALC
	SAMPLE MEASUREMENT							V		
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
ME/TITLE PRINCIPAL EXECUTIVE OFFI ARK B. BEZILLA ICE PRESIDENT PERATIONS TYPED OR PRINTED	ON MY INQU	MILIAR WITH THE IN UIRY OF THOSE IND:	F LAW THAT I HAVE I INFORMATION SUBMITI INFORMATION SUBMITIFUR INFORMATION IN THE SUBPLETE. I AM AWARE BMITTING FALSE INFORD IMPRISONMENT. SES under these statu	TTED HEREIN TELY RESPON:	N; AND BASED	SIGNATURE OF I	PRINCIPAL ARE			0 02

TOTAL SUSPENDED SOLIDS SHALL NOT EXCEED A 7-DAY AVERAGE OF 45 MG/L. THIS DISCHARGE IS DESIGNATED AS DSN 489 IN PERMIT

LABS: 17327 06431 46405 77343

PSE&G

ADDRESS P.O. BOX 236/N21

NAME

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

(2-16) (17-19)

NJ0005622 PERMIT NUMBER 487B DISCHARGE NUMBER #3 Oil Skim Tank DSN-487B MAJOR SALEM

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

HANCOCKS BRIDGE, NJ 08038

SOUTHERN REGION

	/ <b>-</b> '	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)			NO. FR	EO.
PARAMETER (32-37)				UNITS	1,55		(34 01)	UNITS		F SAMPLE
TEMPERATURE, WATER DEG. CENTRIGADE	SAMPLE MEASUREMENT	*****	****		*****	14.6	15.6		<del>                                     </del>	E/ GRAB
00010 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	43.3 01DAMX	DEG.C		E/ GRAB
РН	SAMPLE MEASUREMENT	*****	*****		7.8	*****	8.0	·	0 ONC	E/ GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 01RPMN	****	9.0 01RPMX	នប		E/ GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	8	16			E/ GRAB
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	****	REPORT 01MOAV	100 01DAMX	MG/L		E/ GRAB
HYDROCARBONS, IN H20 IR, CC14 EXT. CHROMA	SAMPLE MEASUREMENT	*****	*****		*****	< 0.5	< 0.5			E/ GRAB
00551 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	15 01DAMX	MG/L		E/ GRAB
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	*****	*****		*****	8	15		0 ONC	E/GRAB
00680 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	****	REPORT 01MOAV	50 01DAMX	MG/L		E/ GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0114	0.0114		*****	*****	*****		0 ONC	E/ CALCTE
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	****	****		E/ CALCTE
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT			ļ						
MARK B. BEZILLA VICE PRESIDENT OPERATIONS TYPED OR PRINTED	ON MY INQU	MILIAR WITH THE I OUIRY OF THOSE IND	F LAW THAT I HAVE INFORMATION SUBMIT DIVIDUALS IMMEDIAT , I BELEIVE THE SU PLETE. I AM AWARE BMITTING FALSE INF ND IMPRISONMENT. S s under these stat prisonment of betw	TTED HEREI TELY RESPO	IN; AND BASED ONSIBLE FOR	signature of executive of authorized a	F PRINCIPAL AR	TELEP	-6000	DATE  OO 02 24  YEAR MO DAY