



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

Nuclear Business Unit

23  
March 22, 2000  
(SCH00-010)

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 449 228 454

**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 February 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

NJPDES Report  
February 2000

- C 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  
February 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  
February 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.

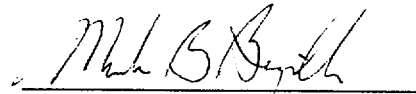
The following excursions are included in the attached report and are explained below. Excursions have not endangered nor significantly impacted public health or the environment.

<u>DSN NO.</u>	<u>EXPLANATION</u>
	None

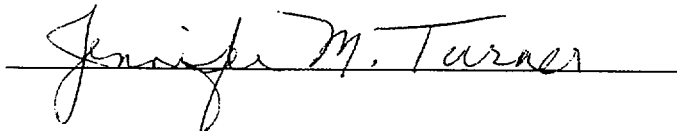
COUNTY OF SALEM  
STATE OF NEW JERSEY

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 23<sup>rd</sup> day of Mar 2000

  
\_\_\_\_\_

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

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF WATER QUALITY

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.

000051622

REPORTING PERIOD

Mo. Yr. Mo. Yr.

02|00 02|00

PERMITTEE: Name : Public Service Electric and Gas Company

Address: P.O. Box 236

FACILITY: Name : Salem Nuclear Generating Station

Address: Alloway Creek Neck Road

Hancock's Bridge

Telephone: (856) 935-6000

FORMS ATTACHED (Indicate Quantity of Each)

Operating Exceptions

SLUDGE REPORT-SANITARY

0 T-VWX-007 0 T-VWX-008 0 T-VWX-009  
0 EPA FORM 3320-1

DYE TESTING

Yes No  
— X

SLUDGE REPORT-INDUSTRIAL

0 T-VWX-010A 0 T-VWX-010B

TEMPORARY BYPASSING

— X

WASTEWATER REPORTS

0 T-VWX-011 0 T-VWX-012 0 T-VWX-013

DISINFECTION INTERRUPTION

— X

GROUNDWATER REPORTS

0 VWX-015(A,B) 0 VWX-016 0 VWX-017  
0 ELECTRONIC SUBMISSION

MONITORING MALFUNCTIONS

— X

UNITS OF OPERATION

— X

OTHER

— X

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

NJPDES DISCHARGE MONITORING REPORT

12 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 of 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) Michael J. Kubiak

Grade & Registry No. N-2 0016955

Signature *Michael J. Kubiak*

Date 3/21/00

Name (Printed) Mark B. Bezilla

Title (Printed) Vice President Operations

Signature *Mark B. Bezilla*

Date 3/23/00



PERMITTEE NAME/ADDRESS

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)

NJ0005622  
 PERMIT NUMBER

FACA  
 DISCHARGE NUMBER

MAJOR

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREEK, NJ 08038  
 DMR NUMBER: NJ0005622 FACA 022000

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	02	01		00	02	29
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

THERMAL DSCHG FOR DSN 481-483  
 SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)	UNITS	(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. CENTRIGADE 00010 1 0	SAMPLE MEASUREMENT	*****	*****		*****	11.4	15.3				CONTINCONTIN UOUS
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	46.1 01DAMX	DEG. C			CONTINCONTIN UOUS
TEMPERATURE, WATER DEG. CENTRIGADE 00010 2 0	SAMPLE MEASUREMENT	*****	*****		*****	8.8	10.1				CONTINCONTIN UOUS
EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	15.3 01DAMX	DEG. C			CONTINCONTIN UOUS
TEMPERATURE, WATER DEG. CENTRIGADE 00010 7 0	SAMPLE MEASUREMENT	*****	*****		*****	2.6	5.6				CONTINCONTIN UOUS
INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG. C			CONTINCONTIN UOUS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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 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]*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 856 935-6000  
 DATE 00 03 23  
 AREA CODE NUMBER YEAR MO DAY

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.



PERMITTEE NAME/ADDRESS

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)

MAJOR

NJ0005622  
 PERMIT NUMBER

FACB  
 DISCHARGE NUMBER

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREEK, NJ 08038  
 DMR NUMBER: NJ0005622 FACB 022000

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	02	01		00	02	29
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

THERMAL DSCHG FOR DSN 484-486  
 SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)	UNITS	(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53)		UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
						(54-55)	(56-57)				
TEMPERATURE, WATER DEG. CENTRIGADE 00010 1 0	SAMPLE MEASUREMENT	*****	*****		*****	11.2	13.9				CONTINUOUS
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	46.1 01DAMX	DEG. C			CONTINUOUS
TEMPERATURE, WATER DEG. CENTRIGADE 00010 2 0	SAMPLE MEASUREMENT	*****	*****		*****	8.6	10.0				CONTINUALCTD UOUS
EFFLUENT NET VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	15.3 01DAMX	DEG. C			CONTINUALCTD UOUS
TEMPERATURE, WATER DEG. CENTRIGADE 00010 7 0	SAMPLE MEASUREMENT	*****	*****		*****	2.6	5.6				CONTINUOUS
INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG. C			CONTINUOUS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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 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

856 935-6000

DATE

00 03 22

AREA CODE

NUMBER

YEAR MO DAY

EFFLUENT TEMP IS TO BE CALCULATED AS THE COMBINED AVERAGE OF EACH OF THE SEPARATE DISCHARGES 484-486. NET TEMP IS THE DIFFERENCE BETWEEN THE AMBIENT RIVER WATER TEMP AND THE AVE EFFLUENT TEMP OF 484-486.

LABS: 17327 06431 46405 77343

PERMITTEE NAME/ADDRESS

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)

**NJ0005622**  
 PERMIT NUMBER

**FACC**  
 DISCHARGE NUMBER

**THERMAL DSCHG FOR DSN 481-486**  
**MAJOR SALEM**

FACILITY **PSE&G SALEM GENERATING STATION**  
 LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**  
 DMR NUMBER: **NJ0005622 FACC 022000**

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	02	01		00	02	29
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

**SOUTHERN REGION**

PARAMETER (32-37)	■ ■ ■ ■ (3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)		UNITS	QUALITY OR CONCENTRATION (46-53) (54-61)			UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
THERMAL DISCHARGE MILLION BTUS PER HR. 00015 2 0	SAMPLE MEASUREMENT	15500	16085	MBTU/HR	*****	*****	*****				CONTINUALCTD
EFFLUENT NET VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 7 0	PERMIT REQUIREMENT	REPORT 01MOAV	30600 01DAMX		*****	*****	*****	****			
INTAKE FROM STREAM	SAMPLE MEASUREMENT	2791	2925	MGD	*****	*****	*****				DAILY CALCTD
	PERMIT REQUIREMENT	3024 01MOAV	REPORT 01DAMX		*****	*****	*****	****			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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 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 03 23

AREA CODE

NUMBER

YEAR MO DAY

PERMITTEE NAME/ADDRESS

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)

MAJOR

NJ0005622  
 PERMIT NUMBER

048C  
 DISCHARGE NUMBER

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREEK, NJ 08038  
 DMR NUMBER: NJ0005622 048C 022000

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	02	01		00	02	29
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)	QUANTITY OR LOADING (54-61)	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45)	QUALITY OR CONCENTRATION (46-53)	UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	8	11			OTWICE/MONTH	COMPOS
00530 1 0	PERMIT REQUIREMENT	*****	*****	****	*****	30	100			TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE				****		01MOAV	01DAMX				
HYDROCARBONS, IN H2O	SAMPLE MEASUREMENT	*****	*****		*****	2	3			OTWICE/MONTH	GRAB
IR, CC14 EXT. CHROMA	PERMIT REQUIREMENT	*****	*****	****	*****	10	15			TWICE/MONTH	GRAB
00551 1 0				****		01MOAV	01DAMX				
EFFLUENT GROSS VALUE											
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	*****	*****		*****	7	7			OTWICE/MONTH	COMPOS
00610 1 0	PERMIT REQUIREMENT	*****	*****	****	*****	35	70			TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE				****		01MOAV	01DAMX				
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	*****	*****		*****	14	18			OTWICE/MONTH	COMPOS
00680 1 0	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	50			TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE				****		01MOAV	01DAMX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.1549	0.3247		*****	*****	*****			ODAILY	CALCTD
50050 1 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****		DAILY	CALCTD
EFFLUENT GROSS VALUE		01MOAV	01DAMX					****			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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 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 03 23  
 22

AREA CODE NUMBER YEAR MO DAY

PERMITTEE NAME/ADDRESS

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)

MAJOR

NJ0005622  
 PERMIT NUMBER

481A  
 DISCHARGE NUMBER

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREEK, NJ 08038  
 DMR NUMBER: NJ0005622 481A 022000

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	02	01		00	02	29
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

SOUTHERN REGION / SALEM

PARAMETER (32-37)	■ ■ ■ ■ ■ (3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)			UNITS	(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (54-61)			UNITS	NO. EX. OF ANALYSIS (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		*****	*****	*****			*****	*****	*****				
LC50 STATRE 96HR ACU CYPRINODON TAN6A 1 0 EFFLUENT GROSS VALUE PH	SAMPLE MEASUREMENT	*****	*****	*****	*****	CODE=N	*****	*****	*****			0	CODE=N
	PERMIT REQUIREMENT	*****	*****	*****	*****	50 01DAMN	*****	*****	*****	PERCENT		Q	TRLY
	SAMPLE MEASUREMENT	*****	*****	*****	*****	7.2	*****	*****	7.9			0	WEEKLYGRAB
00400 1 0 EFFLUENT GROSS VALUE PH	PERMIT REQUIREMENT	*****	*****	*****	*****	6.0 01RPMN	*****	*****	9.0 01RPMX	SU		W	WEEKLYGRAB
	SAMPLE MEASUREMENT	*****	*****	*****	*****	7.5	*****	*****	8.3			0	WEEKLYGRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01RPMN	*****	*****	REPORT 01RPMX	SU		W	WEEKLYGRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	503	520	*****	*****	*****	*****	*****	*****			0	DAILY CALCTD
50050 1 0 EFFLUENT GROSS VALUE CHLORINE, TOTAL RESIDUAL	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	*****	*****	****		D	DAILY CALCTD
50060 R 0 SEE COMMENTS BELOW CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI	NODI	*****			0	NODI NODI
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.3 01MOAV	.5 01DAMX	*****	MG/L		3	THREE/GRAB WEEK
50060 S 0 SEE COMMENTS BELOW	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 0.1	< 0.1	*****			0	THREE/GRAB WEEK
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT 01MOAV	.2 01DAMX	*****	MG/L		3	THREE/GRAB WEEK
	SAMPLE MEASUREMENT												
	PERMIT REQUIREMENT												

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 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 03 23  
 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.  
 WHEN MAIN CONDENSERS ARE CHLORINATED, MONITOR TRC 3 TIMES PER WEEK DURING 2-HR PERIODS OF CHLORINATION  
 LABS: 17327 06431 46405 77343

PERMITTEE NAME/ADDRESS

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)

MAJOR

NJ0005622  
 PERMIT NUMBER

482A  
 DISCHARGE NUMBER

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREEK, NJ 08038  
 DMR NUMBER: NJ0005622 482A 022000

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	02	01		00	02	29
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

SOUTHERN REGION / SALEM

PARAMETER (32-37)	■ ■ ■ ■ (3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)		UNITS	(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (54-61)		UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		QUANTITY	LOADING			QUALITY	CONCENTRATION				
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****			0	CODE=N
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 01DAMN	*****	*****	PERCENT		Q	TRLY
PH	SAMPLE MEASUREMENT	*****	*****		7.2	*****	7.8			0	WEEKLYGRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 01RPMN	*****	9.0 01RPMX	SU		W	WEEKLYGRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.5	*****	8.3			0	WEEKLYGRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT 01RPMN	*****	REPORT 01RPMX	SU		W	WEEKLYGRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	421	491		*****	*****	*****			0	DAILY CALCTD
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	****		D	DAILY CALCTD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			0	NODI NODI
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 01MOAV	.5 01DAMX	MG/L		3	WEEK GRAB
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	0.1			0	3 WEEK GRAB
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	.2 01DAMX	MG/L		3	WEEK GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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 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 03 22

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.

WHEN MAIN CONDENSERS ARE CHLORINATED, MONITOR TRC 3 TIMES PER WEEK DURING 2-HR PERIODS OF CHLORINATION  
 LABS: 17327 06431 46405 77343

PERMITTEE NAME/ADDRESS

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)

MAJOR

NJ0005622  
 PERMIT NUMBER

483A  
 DISCHARGE NUMBER

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREEK, NJ 08038  
 DMR NUMBER: NJ0005622 483A 022000

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	02	01		00	02	29
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)		(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53)		UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
			UNITS	UNITS							
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****			0	CODE=N
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 01DAMN	*****	*****	PERCENT		Q	TRLY
PH	SAMPLE MEASUREMENT	*****	*****		7.3	*****	7.8			0	WEEKLYGRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 01RPMN	*****	9.0 01RPMX	SU		W	WEEKLYGRAB
PH	SAMPLE MEASUREMENT	*****	*****		7.5	*****	8.3			0	WEEKLYGRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT 01RPMN	*****	REPORT 01RPMX	SU		W	WEEKLYGRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	459	463		*****	*****	*****			0	DAILY CALCTD
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	****		D	DAILY CALCTD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			0	NODI NODI
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 01MOAV	.5 01DAMX	MG/L		3	GRAB WEEK
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1			0	3 GRAB WEEK
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	.2 01DAMX	MG/L		3	GRAB WEEK
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

MARK B. BEZILLA  
 VICE PRESIDENT  
 OPERATIONS

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

856 935-6000 00 03 22

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.

WHEN MAIN CONDENSERS ARE CHLORINATED, MONITOR TRC 3 TIMES PER WEEK DURING 2-HR PERIODS OF CHLORINATION  
 LABS: 17327 06431 46405 77343

PERMITTEE NAME/ADDRESS

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)

MAJOR

NJ0005622  
 PERMIT NUMBER

484A  
 DISCHARGE NUMBER

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREEK, NJ 08038  
 DMR NUMBER: NJ0005622 484A 022000

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	02	01		00	02	29
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

SOUTHERN REGION / SALEM

PARAMETER (32-37)	■ ■ ■ ■ SAMPLE MEASUREMENT	(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)		(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53)		UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
			UNITS	UNITS							
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****				0CODE=N
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 01DAMN	*****	*****	PERCENT		QTRLY	
PH	SAMPLE MEASUREMENT	*****	*****		7.4	*****	7.8			OWEELYGRAB	
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 01RPMN	*****	9.0 01RPMX	SU		WEEKLYGRAB	
PH	SAMPLE MEASUREMENT	*****	*****		7.5	*****	8.3			OWEELYGRAB	
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT 01RPMN	*****	REPORT 01RPMX	SU		WEEKLYGRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT		517	535	*****	*****	*****			0DAILY CALCTD	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	****		DAILY CALCTD	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			0NODI NODI	
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 01MOAV	.5 01DAMX	MG/L		THREE/GRAB WEEK	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1			0THREE/GRAB WEEK	
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	.2 01DAMX	MG/L		THREE/GRAB WEEK	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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 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.)

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

TELEPHONE 856 935-6000  
 DATE 00 03 22  
 AREA CODE NUMBER YEAR MO DAY

PARAMETER 50060 LOCATIONS: "R" = SWS DSCHG (NO CWS FLOW) "S" = SWS DSCHG (NORMAL COND)  
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 LABS: 17327 06431 46405 77343

PERMITTEE NAME/ADDRESS

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 HANCOCKS BRIDGE, NJ 08038

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

NJ0005622  
 PERMIT NUMBER

485A  
 DISCHARGE NUMBER

MAJOR

FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREEK, NJ 08038  
 DMR NUMBER: NJ0005622 485A 022000

MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
00	02	01		00	02	29
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		*****	*****	*****		*****	*****	*****				
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****	*****	*****	CODE=N	*****	*****	*****	0	CODE=N	CODE=N
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	50 01DAMN	*****	*****	PERCENT		QTRLY	
PH	SAMPLE MEASUREMENT	*****	*****	*****	*****	7.4	*****	7.8		0	WEEKLYGRAB	
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	6.0 01RPMN	*****	9.0 01RPMX	SU		WEEKLYGRAB	
PH	SAMPLE MEASUREMENT	*****	*****	*****	*****	7.5	*****	8.3		0	WEEKLYGRAB	
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 01RPMN	*****	REPORT 01RPMX	SU		WEEKLYGRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	470	493	*****	*****	*****	*****	*****		0	DAILY CALCTD	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	*****	*****		DAILY CALCTD	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI	NODI		0	NODI NODI	
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.3 01MOAV	.5 01DAMX	MG/L		THREE/GRAB WEEK	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 0.1	< 0.1		0	THREE/GRAB WEEK	
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT 01MOAV	.2 01DAMX	MG/L		THREE/GRAB WEEK	
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

MARK B. BEZILLA  
 VICE PRESIDENT  
 OPERATIONS

TYPED OR PRINTED

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YEAR MO DAY

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WHEN MAIN CONDENSERS ARE CHLORINATED, MONITOR TRC 3 TIMES PER WEEK DURING 2-HR PERIODS OF CHLORINATION  
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PERMITTEE NAME/ADDRESS

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 DISCHARGE MONITORING REPORT (DMR)  
 (2-16) (17-19)

MAJOR

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486A  
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FACILITY PSE&G SALEM GENERATING STATION  
 LOCATION LOWER ALLOWAYS CREEK, NJ 08038  
 DMR NUMBER: NJ0005622 486A 022000

MONITORING PERIOD						
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(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (46-53)	QUANTITY OR LOADING (54-61)	UNITS	QUALITY OR CONCENTRATION (54-61)			UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
					(4 Card Only) (38-45)	(4 Card Only) (46-53)	(4 Card Only) (54-61)				
LC50 STATRE 96HR ACU CYPRINODON	SAMPLE MEASUREMENT	*****	*****		CODE=N	*****	*****			0	CODE=N
TAN6A 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	50 01DAMN	*****	*****	PERCENT		QTRLY	
PH	SAMPLE MEASUREMENT	*****	*****		7.4	*****	7.8			0	WEEKLYGRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 01RPMN	*****	9.0 01RPMX	SU		WEEKLYGRAB	
PH	SAMPLE MEASUREMENT	*****	*****		7.5	*****	8.3			0	WEEKLYGRAB
00400 7 0 INTAKE FROM STREAM	PERMIT REQUIREMENT	*****	*****	****	REPORT 01RPMN	*****	REPORT 01RPMX	SU		WEEKLYGRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	486	489		*****	*****	*****			0	DAILY CALCTD
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	****		DAILY CALCTD	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			0	NODI NODI
50060 R 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	.3 01MOAV	.5 01DAMX	MG/L		THREE/GRAB WEEK	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	< 0.1	< 0.1			0	THREE/GRAB WEEK
50060 S 0 SEE COMMENTS BELOW	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	.2 01DAMX	MG/L		THREE/GRAB WEEK	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 MARK B. BEZILLA  
 VICE PRESIDENT  
 OPERATIONS

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*[Handwritten Signature]*

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856 935-6000 00 03 22

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 LABS: 17327 06431 46405 77343

PERMITTEE NAME/ADDRESS

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

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 DISCHARGE MONITORING REPORT (DMR)  
 (2-16) (17-19)

MAJOR

**NJ0005622**  
 PERMIT NUMBER

**489C**  
 DISCHARGE NUMBER

FACILITY **PSE&G SALEM GENERATING STATION**

LOCATION **LOWER ALLOWAYS CREEK, NJ 08038**

DMR NUMBER: **NJ0005622 489C 022000**

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YEAR	MO	DAY	TO	YEAR	MO	DAY
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SOUTHERN REGION / SALEM

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)	UNITS	(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (46-53) (54-61)		UNITS	NO. EX. (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH	SAMPLE MEASUREMENT	*****	*****		7.7	*****	7.7			0 ONCE/MONTH	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0	*****	9.0	SU		0 ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	8	8			0 ONCE/MONTH	GRAB
00530 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	30	100	MG/L		0 ONCE/MONTH	GRAB
					01MOAV	01DAMX					
HYDROCARBONS, IN H2O IR, CC14 EXT. CHROMA	SAMPLE MEASUREMENT	*****	*****		*****	< 0.5	< 0.5			0 ONCE/MONTH	GRAB
00551 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	10	15	MG/L		0 ONCE/MONTH	GRAB
					01MOAV	01DAMX					
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	*****	*****		*****	8	8			0 ONCE/MONTH	GRAB
00680 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	50	MG/L		0 ONCE/MONTH	GRAB
					01MOAV	01DAMX					
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0860	0.0860		*****	*****	*****			0 ONCE/MONTH	CALCTD
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT	REPORT	MGD	*****	*****	*****	****		0 ONCE/MONTH	CALCTD
		01MOAV	01DAMX					****			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

**MARK B. BEZILLA**  
**VICE PRESIDENT**  
**OPERATIONS**

TYPED OR PRINTED

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TELEPHONE

856 935-6000

AREA CODE NUMBER

DATE

00 03 22

YEAR MO DAY

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

PERMITTEE NAME/ADDRESS

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)

**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**

DMR NUMBER: **NJ0005622 487B 022000**

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	02	01		00	02	29
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

**SOUTHERN REGION**

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) (46-53)	QUANTITY OR LOADING (54-61)		(4 Card Only) (38-45)	QUALITY OR CONCENTRATION (54-61)		UNITS	NO. EX. (62 63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
				UNITS							
TEMPERATURE, WATER DEG. CENTRIGADE 00010 1 0	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			ONODI	NODI
EFFLUENT GROSS VALUE PH	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	43.3 01DAMX	DEG.C		ONCE/ DISCHG	GRAB
00400 1 0	SAMPLE MEASUREMENT	*****	*****		NODI	*****	NODI			ONODI	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 01RPMN	*****	9.0 01RPMX	SU		ONCE/ DISCHG	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			ONODI	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	100 01DAMX	MG/L		ONCE/ DISCHG	GRAB
HYDROCARBONS, IN H2O IR, CC14 EXT. CHROMA 00551 1 0	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			ONODI	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	15 01DAMX	MG/L		ONCE/ DISCHG	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI			ONODI	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	50 01DAMX	MG/L		ONCE/ DISCHG	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0	SAMPLE MEASUREMENT	NODI	NODI		*****	*****	*****			ONODI	NODI
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX	MGD	*****	*****	*****	****		ONCE/ DISCHG	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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 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]*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

856 935-6000

AREA CODE

NUMBER

DATE

00 03 22

YEAR MO DAY