



50-354

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

Nuclear Business Unit

July 24, 2000

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED  
ARTICLE NUMBER: 7099 3400 0002 4172 2846

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  
NJPDDES PERMIT NJ0025411

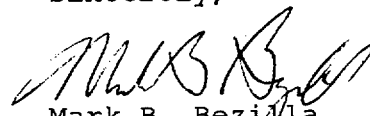
Dear Sir:

Attached is the Discharge Monitoring Report for the Hope Creek  
Generating Station for the month of June 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 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 Christopher White at (856) 339-3301.

Sincerely,

  
Mark B. Beziulla  
Vice President  
Operations

The power is in your hands.

IE25

Attachments

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

Attachments

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

BC Vice President - Operations  
Manager - Licensing and Regulation - Nuclear  
Maureen Vaskis, Esq.  
P. R. La Sala  
D. K. Hurka  
C. E. White  
J. Buchanan  
A. Nurk  
Chem File HCH 2000-047  
Env Lic File 2.1.6 HC Book

Explanation of Conditions

June 2000

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

07/24/00

Explanation of Exceedances

June 2000

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

DSN No.

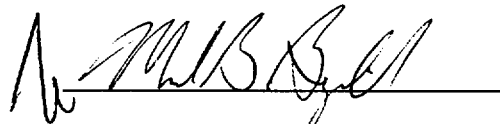
EXPLANATION

**No Exceedances**

COUNTY OF SALEM  
STATE OF NEW JERSEY

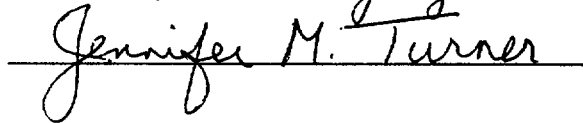
I, Mark B. Bezilla, of full age, being duly sworn according to law, upon my oath depose and say:

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 24<sup>th</sup> day of July 2000.



JENNIFER M. TURNER  
NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires July 25, 2005

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.  
0600 0600

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

DYE TESTING    YES    NO    X

TEMPORARY BYPASSING    X

SLUDGE REPORT - INDUSTRIAL

   T-VWX-010A    T-VWX-010B

DISINFECTION INTERRUPTION    X

WASTEWATER REPORTS

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

MONITORING MALFUNCTIONS    X

UNITS OUT OF OPERATION    X

GROUNDWATER REPORTS

   VWX-015(A,B)    VWX-016    VWX-017

OTHER    X

   ELECTRONIC SUBMISSION

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

NJPDES DISCHARGE MONITORING

  5   EPA FORM 3320-1

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

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

LICENSED OPERATOR

PRINCIPAL EXECUTIVE OFFICER OR  
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) Peter R. La Sala

Name (Printed) Mark B. Bezilla

Grade & Registry No. N-2 (0005928)

Title (Printed) Vice President, Operations

Signature *[Signature]*

Signature *[Signature]*

Date 7-20-00

Date 7/24/00

### OPERATING EXCEPTIONS DETAILED

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

1

HOURS ATTENDED AT PLANT

Month 06 Year 00

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	8	8	-	-	8	8	8	8	8
16	10	3	3	10	10	10	10	10	3	3	10	10	10	10	10
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
-	-	8	8	8	8	8	-	-	-	-	-	-	8		
3	3	10	10	10	10	10	3	3	10	10	10	10	10		



ADDENDA TO MONITORING REPORT - TRANSMITTAL SHEET

June 2000

07/24/2000

DISCHARGE NUMBER

PAGE	PARAMETER CODE	COMMENTS
------	----------------	----------

461A

1 of 3	*CPOX 1 0 **	Sampling frequency increased to 4/week to obtain additional operational data.
2 of 3	00680 2 0 **	NET Values are calculated utilizing results from grab samples.

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.  
10/6/00 10/6/00

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)

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

Operating Exceptions

	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>X</u>	<u>   </u>
OTHER	<u>X</u>	<u>   </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**

Name (Printed) Andres Nurk

Grade & Registry No. S-4 (0006979)

Signature Andres Nurk

Date 7/18/00

**PRINCIPAL EXECUTIVE OFFICER OR  
DULY AUTHORIZED REPRESENTATIVE**

Name (Printed) Mark B. Bezilla

Title (Printed) Vice President, Operations

Signature Mark B. Bezilla

Date 7/24/00

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	TO	YEAR	MO	DAY
00	06	01		00	06	30
(20-21)			(22-23)		(24-25)	
			(26-27)		(28-29)	
			(30-31)			

SOUTHERN REGION / SALEM

DMR NUMBER : NJ0025411 461A 012000

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(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	*****	*****		7.6	*****	8.6		0	WEEKLY	GRAB
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0000X 01RPMN	*****	9.0000X 01RPMX	SU		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	60.833	94.170	*****	*****	*****	*****		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		QRTLY	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		QRTLY	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	*****	*****		*****	26.5	33.1		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	00	07	24
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					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

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)  
NJ0025411  
PERMIT NUMBER

(17-19)  
461A  
DISCHARGE NUMBER

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

MAJOR

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	06	01	00	06	30
(20-21)		(22-23)	(26-27)		(28-29)
		(24-25)			(30-31)

SOUTHERN REGION / SALEM

NOTE: Read instructions before completing this form.

DMR NUMBER : NJ0025411 461A 012000

PARAMETER (32-37)		(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			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	24.4	27.9		0	CONTIN UOUS	CK REQ
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.C		CONTIN UOUS	CK REQ
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	79.7	91.6		0	CONTIN UOUS	CK REQ
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	97.10000 01DAMX	DEG.F		CONTIN UOUS	CK REQ
TEMPERATURE, WATER DEG. FAHRENHEIT 0011 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	75.8	82.3		0	CONTIN UOUS	CK REQ
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	DEG.F		CONTIN UOUS	CK REQ
PHOSPHORUS, TOTAL (AS P) 00665 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	CODE=N	CODE=N		0	CODE=N	CODE=N
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		ONCE/ MONTH	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	7.2	7.2		0	ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		ONCE/ MONTH	GRAB
CARBON, TOT ORGANIC (TOC) 00680 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****		*****	1	1	**	0	ONCE/ MONTH	CALCTD
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	20.0000 01DAMX	MG/L		ONCE/ MONTH	GRAB
CARBON, TOT ORGANIC (TOC) 00680 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	6.9	6.9		0	ONCE/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT 01MOAV	REPORT 01DAMX	MG/L		ONCE/ MONTH	GRAB
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		00	07	24
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY

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

\*Please refer to the attached Transmittal Sheet Addenda.

LABS: 17451 77343 06431

2 3

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

Form Approved.  
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FACILITY LOCATION PSE&G HOPE CREEK GENERATING ST  
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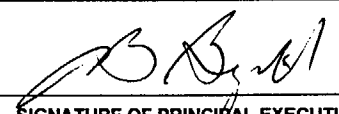
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
FROM 00	06	01	TO 00	06	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

SOUTHERN REGION / SALEM

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DMR NUMBER : NJ0025411 461A 012000

PARAMETER (32-37)		(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			
HEAT (SUMMER) (PER HOUR) 81387 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	85	252	MBTU/HR	*****	*****	*****	****	0	DAILY	CALCTD
	PERMIT REQUIREMENT	REPORT 01MOAV	662.0000X 01DAMX		*****	*****	*****		***		DAILY
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	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			856	339-3463	00	07	24
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NAME

PSE&G

ADDRESS

P.O. BOX 236/N21

HANCOCKS BRIDGE,NJ 08038

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

NJ0025411

PERMIT NUMBER

462B

DISCHARGE NUMBER

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

FROM

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	06	01	00	06	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

TO

SOUTHERN REGION / SALEM

DMR NUMBER : NJ0025411 462B 012000

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
BOD, 5-DAY (20 DEG. C) 00310 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2	2	KG/DAY	*****	*****	*****	0	ONCE/ MONTH	COMPOS		
	PERMIT REQUIREMENT	8.0000X 01MOAV	REPORT 01DAMX		*****	*****	*****	**** ***	ONCE/ MONTH	COMPOS		
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**** ****	*****	8	8	0	ONCE/ MONTH	COMPOS		
	PERMIT REQUIREMENT	*****	*****		*****	30.0000X 01MOAV	REPORT 01DAMX	MG/L	ONCE/ MONTH	COMPOS		
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**** ****	*****	2	2	0	ONCE/ MONTH	GRAB		
	PERMIT REQUIREMENT	*****	*****		*****	10.0000X 01MOAV	15.0000X 01DAMX	MG/L	ONCE/ MONTH	GRAB		
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.021	.037	MGD	*****	*****	*****	0	DAILY	METER		
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****	**** ***	DAILY	METER		
COLIFORM, FECAL GENERAL 74055 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**** ****	*****	<1	<1	0	ONCE/ MONTH	GRAB		
	PERMIT REQUIREMENT	*****	*****		*****	200.0000X 01MOGE	400.0000X 01DAGE	#/100	ONCE/ MONTH	GRAB		
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 PERCENTREMOVAL	SAMPLE MEASUREMENT	*****	*****	**** ****	91.6	*****	*****	0	ONCE/ MONTH	CALCTD		
	PERMIT REQUIREMENT	*****	*****		87.5000X 01MOAVMN	*****	*****	PERCENT	ONCE/ MONTH	CALCTD		
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 1 0 PERCENTREMOVAL	SAMPLE MEASUREMENT	*****	*****	**** ****	98	*****	*****	0	ONCE/ MONTH	CALCTD		
	PERMIT REQUIREMENT	*****	*****		85.0000X 01MOAVMN	*****	*****	PERCENT	ONCE/ MONTH	CALCTD		
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	00	07	24	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY	

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

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

NAME PSE&G  
ADDRESS P.O. BOX 236/N21  
HANCOCKS BRIDGE,NJ 08038

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

NJ0025411  
PERMIT NUMBER

461C  
DISCHARGE NUMBER

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

MAJOR

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

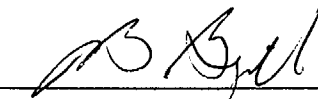
MONITORING PERIOD							
YEAR			MO			DAY	
FROM	00	06	01	TO	00	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

DMR NUMBER : NJ0025411 461C 012000

SOUTHERN REGION / SALEM

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**** ****	*****	7	7	MG/L	0	ONCE/ MONTH	COMPOS
	PERMIT REQUIREMENT	*****	*****		*****	30.0000 01MOAV	100.0000 01DAMX		ONCE/ MONTH	COMPOS	
PETROL HYDROCARBONS, TOTAL RECOVERABLE 45501 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**** ****	*****	6	8	MG/L	0	TWICE/ MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	10.0000 01MOAV	15.0000 01DAMX		TWICE/ MONTH	GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.020	.040	MGD	*****	*****	*****	**** ***	0	CONTIN UOUS	METER
	PERMIT REQUIREMENT	REPORT 01MOAV	REPORT 01DAMX		*****	*****	*****		CONTIN UOUS	METER	
CARBON, TOT ORGANIC (TOC) 00680 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	**** ****	*****	12	12	MG/L	0	ONCE/ MONTH	COMPOS
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 01MOAV	50.0000 01DAMX		ONCE/ MONTH	COMPOS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	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 VicePresident Operations			856	339-3463	00	07	24
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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