



Public Service Electric and Gas Company, P.O. Box 236, Hackettstown, New Jersey 08038  
Hope Creek Generating Station

June 25, 1992

Chief George Corporale  
Bureau of Information Systems  
P. O. Box CN-029  
Trenton, N. J. 08625

RE: NEW JERSEY POLLUTANT DISCHARGE  
ELIMINATION SYSTEM  
DISCHARGE MONITORING REPORT  
HOPE CREEK GENERATING STATION  
NJPDES PERMIT NJ0025411

Dear Sir:

Attached is the Discharge Monitoring Report for the Hope Creek Generating Station for the month of May 1992.

This report is required by and prepared specifically for the Environmental Protection Agency (EPA) and the New Jersey Department of Environmental Protection (NJDEP). It presents only the observed results of measurements and analysis required to be performed by the above agencies. The choice of the measurement devices and analytical methods are controlled by the EPA and the NJDEP, not by the company, and there are limitations on the accuracy of such measurement devices and analytical techniques even when used and maintained as required. Accordingly, this report is not intended as an assertion that any instrument has measured, or that any reading analytical result represents the true value with absolute accuracy, nor is it an endorsement of the suitability of any analytical or measurement procedure.

If you have any questions concerning this report, please feel free to contact Mr. C. E. White.

Sincerely,

Joseph Hagan  
General Manager -  
Hope Creek Operations

020086

9207060009 920531  
PDR ADOCK 05000354  
R PDR

IF48  
11

ac NJPDES

2

6/25/92

CW:eaj  
Attachments

C Executive Director, DRBC  
USEPA - Dr. Richard Baker  
USNRC

NJPDES  
Explanation of conditions  
May 1992

6/25/92

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:

NET Atlantic, Inc. (08153)  
Hope Creek Generating Station (17451)  
Talbot Laboratory, Inc. (77535)  
South Jersey Testing, Inc. (06431)

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

Frequency for discharge point 461A, the Cooling Tower Blowdown, and the River were done at approximately 5 hour intervals to provide for the cycles of concentration in the system.

As per the Administrative Consent Order the TSS limit for discharge points 462A, 463A and 464 have been lifted and the interim thermal limits for discharge point 461A have been changed to 443 MBTU/hr (June - September) and 731 MBTU/hr (October - May).

Results reported on the Discharge Monitoring Report forms are consistent with permit limits, data supplied from contract laboratories, the June 1991 revision of the NJDEP DMR Instruction manual and specific guidance from DEP personnel attending DMR outreach seminars. Guidance from the DEP has also been re-confirmed at the May 19, 1992 meeting of the DMR Instruction Manual Review Committee.

NJPDES  
Explanation of Exceedances  
May 1992

6/25/92

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

DSN No.

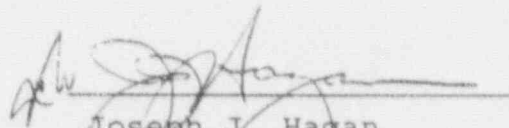
EXPLANATION

No Exceedances

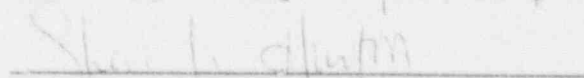
COUNTY OF SALEM  
STATE OF NEW JERSEY

I, Joseph J. Hagan, of full age, being duly sworn according to law, upon my oath depose and say:

1. I am the General Manager of the Hope Creek Generating Station, and as such am authorized to sign 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.

  
Joseph J. Hagan  
General Manager -  
Hope Creek Operations

Sworn and subscribed before me  
this 25 day of June 1992.



NOTARY PUBLIC  
STATE OF NEW JERSEY  
COMMISSION EXPIRES 12/31/93



NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF WATER RESOURCESMONITORING REPORT - TRANSMITTAL SHEET

NPDES NO.

REPORTING PERIOD

MO. YR.

MO. YR.

010121514111

0151912 THRU 0151912

PERMITTEE: Name Public Service Electric & Gas CompanyAddress P. O. Box 236Hancocks Bridge, N. J. 08038FACILITY: Name Hobe Creek Generating StationAddress P.O. Box 236Hancocks Bridge, N. J. (County) SalemTelephone 1 609 1 339-3463FORMS ATTACHED (Indicate Quantity of Each)SLUDGE REPORTS - SANITARY☐ T-VWX-007 ☐ T-VWX-008 ☐ T-VWX-009SLUDGE REPORTS - INDUSTRIAL☐ T-VWX-010A ☐ T-VWX-010BWASTEWATER REPORTS☐ T-VWX-011 ☐ T-VWX-012 ☐ T-VWX-013GROUNDWATER REPORTS☐ VWX-015(A,B) ☐ VWX-016 ☐ VWX-017NPDES DISCHARGE MONITORING REPORT☒ 12 EPA FORM 3320-1OPERATING EXCEPTIONS

YES NO

DYE TESTING ☐ ☒TEMPORARY BYPASSING ☐ ☒DISINFECTION INTERRUPTION ☐ ☒MONITORING MALFUNCTIONS ☐ ☒UNITS OUT OF OPERATION ☐ ☒OTHER ☐ ☒(Detail any "Yes" on reverse side  
in appropriate space.)NOTE: The "Hours Attended as Planned" on the  
reverse of this sheet must also be completed.

AUTHENTICATION - I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

LICENSED OPERATORName (Printed) Clark E. PierceGrade & Registry No. N-1124Signature [Signature]Date 6-25-92PRINCIPAL EXECUTIVE OFFICER or  
DULY AUTHORIZED REPRESENTATIVEName (Printed) Joseph J. Hagan

General Manager

Title (Printed) Hope Creek OperationsSignature [Signature]Date 6-25-92

3

Year 9/2

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

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
DIVISION OF WATER RESOURCES

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.

REPORTING PERIOD

MO. YR.

MO. YR.

00125411

05/92 THRU 05/92

PERMITTEE: Name Public Service Electric & Gas Company

Address P.O. Box 236

Hancocks Bridge, NJ 08038

FACILITY: Name Hope Creek Generating Station

Address P.O. Box 236

Hancocks Bridge, NJ County Salem

Telephone (609) 339-3463

FORMS ATTACHED (Indicate Quantity of Each)

SLUDGE REPORTS - SANITARY

☐ T-VWX-007 ☐ T-VWX-008 ☐ T-VWX-009

SLUDGE REPORTS - INDUSTRIAL

☐ T-VWX-010A ☐ T-VWX-010B

WASTEWATER REPORTS

☐ T-VWX-011 ☐ T-VWX-012 ☐ T-VWX-013

GROUNDWATER REPORTS

☐ VWX-015(A,B) ☐ VWX-016 ☐ VWX-017

NJPDES DISCHARGE MONITORING REPORT

☒ EPA FORM 3320-1

OPERATING EXCEPTIONS

	YES	NO
DYE TESTING	<input type="checkbox"/>	<input checked="" type="checkbox"/>
TEMPORARY BYPASSING	<input type="checkbox"/>	<input checked="" type="checkbox"/>
DISINFECTION INTERRUPTION	<input type="checkbox"/>	<input checked="" type="checkbox"/>
MONITORING MALFUNCTIONS	<input type="checkbox"/>	<input checked="" type="checkbox"/>
UNITS OUT OF OPERATION	<input type="checkbox"/>	<input checked="" type="checkbox"/>
OTHER	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

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

AUTHENTICATION - I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

LICENSED OPERATOR

Name (Printed) Andres NURK

Grade & Registry No. S-4 (54542)

Signature Andres Nurk

Date 6/2/92

PRINCIPAL EXECUTIVE OFFICER or  
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) Joseph J. Hagen

General Manager

Title (Printed) Hope Creek Operations

Signature [Signature]

Date 6-25-92



## This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

Year 1921

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

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

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

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

DMR NUMBER: 92050489

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 6-30-91.

MONITORING PERIOD  
FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN  
MAJOR SALEM  
SOUTHERN REGION

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		XXXXXXX	XXXXXXX	UNITS	XXXXXXX	XXXXXXX	XXXXXXX			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	000000	000000		000000	24.4	29.0	0	Cont.	
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	35.0000 DLY MAX		CONTIN UOUS	
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 1 INTAKE FROM STREAM	SAMPLE MEASUREMENT	000000	000000		000000	17.3	20.1	-	Cont.	
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	REPORT DLY MAX		CONTIN UOUS	
PH	SAMPLE MEASUREMENT	000000	000000		8		9	0	2/Wk	Grab
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000	6.00000 MINIMUM	000000	9.00000 MAXIMUM		TWICE/GRAB WEEK	
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	000000	000000		000000	198	208	-	2/Mo	Grab
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	REPORT DLY MAX		TWICE/GRAB MONTH	
SOLIDS, TOTAL SUSPENDED 00530 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	000000	000000		000000	118	124	-	2/Mo	Calc
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	REPORT DLY MAX		TWICE/CALCTD MONTH	
SOLIDS, TOTAL SUSPENDED 00530 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	000000	000000		000000	79	95	-	2/Mo	Grab
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	REPORT DLY MAX		TWICE/GRAB MONTH	
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	000000	000000		000000	0.10	0.10	-	2/Mo	Grab
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	REPORT DLY MAX		TWICE/GRAB MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
J. Hagan  
General Manager  
Hope Creek Operations  
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED  
AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED  
ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR  
OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION  
IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE 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 \$100,000  
and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE  
609 339-3463  
DATE  
92 06 25  
AREA  
CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATION IS REQUIRED ONLY IF MAINTENANCE CHEMICALS CONTAINING THESE METALS ARE USED. IF  
NOT USED, ENTER "NOUI" FOR THESE METALS.

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

NAME PSEG  
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.  
OMB No. 2040-0004.  
Approval expires 6-30-91.

FACILITY PSEG HOPE CREEK GENERATING ST  
LOCATION LOWER ALLOWAYS CREE NJ 08038

MONITORING PERIOD  
FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN  
MAJOR SALEM  
SOUTHERN REGION

NOTE: Read instructions before completing this form.

DMR NUMBER: 92050489

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (38-43)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		XXXXXXX	XXXXXXX	UNITS	XXXXXXX	XXXXXXX	XXXXXXX				
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	000000	000000		000000	-0.05	0		0	2/mo	Calc
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	10.0000 DLY MAX	MG/L		TWICE/ MONTH	CALC
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	000000	000000		000000	0.18	0.30		-	2/mo	Grab
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	REPORT DLY MAX	MG/L		TWICE/ MONTH	GRAB
PHOSPHORUS, TOTAL (AS P) 00665 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	000000	000000		000000	0.28	0.33		-	2/mo	Grab
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	REPORT DLY MAX	MG/L		TWICE/ MONTH	GRAB
PHOSPHORUS, TOTAL (AS P) 00665 2 1 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	000000	000000		000000	0.12	0.13		-	2/mo	Calc*
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	REPORT DLY MAX	MG/L		TWICE/ MONTH	GRAB
PHOSPHORUS, TOTAL (AS P) 00665 7 1 INTAKE FROM STREAM	SAMPLE MEASUREMENT	000000	000000		000000	0.16	0.22		-	2/mo	Grab
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	REPORT DLY MAX	MG/L		TWICE/ MONTH	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	000000	000000		000000	11	11		-	2/mo	Grab
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	REPORT DLY MAX	MG/L		TWICE/ MONTH	GRAB
CARBON, TOT ORGANIC (TOC) 00680 2 1 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	000000	000000		000000	6.6	7		0	2/mo	Calc*
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	20.0000 DLY MAX	MG/L		TWICE/ MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
J. Hagan  
General Manager  
Hope Creek Operations  
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT (SEE 18 USC, § 1001 AND 33 USC, § 1319). (Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE 609 339-3463  
DATE 92 06 25  
AREA CODE NUMBER YEAR MO DAY

SAMPLING FOR COPPER, ZINC, AND CADMIUM IS REQUIRED ONLY IF MAINTENANCE CHEMICALS CONTAINING THESE METALS ARE USED. IF NOT USED, ENTER "NODIN" FOR THESE METALS. \* NET values calculated from grab samples.



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.  
OMB No. 2040-0004.  
Approval expires 6-30-91.

FACILITY PSE&G HOPE CREEK GENERATING ST  
LOCATION LOWER ALLOWAYS CREE, NJ 08038  
DMR NUMBER: 92050489

MONITORING PERIOD  
FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN  
MAJOR SALEM  
SOUTHERN REGION

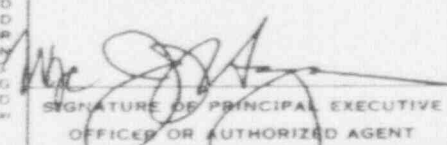
NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX	UNITS			
CARBON, TOT ORGANIC (TOC) 00680 7 1 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	4.4	4.5		-	2/mo	Grab
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX	MG/L		TWICE/MONTH	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		-	-	-
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX	MG/L		TWICE/MONTH	GRAB
CHROMIUM, TOTAL (AS CR) 01034 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		-	-	-
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	20000 DLY MAX	MG/L		TWICE/MONTH	CALCTD
CHROMIUM, TOTAL (AS CR) 01034 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		-	-	-
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX	MG/L		TWICE/MONTH	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		-	-	-
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX	MG/L		TWICE/MONTH	GRAB
COPPER, TOTAL (AS CU) 01042 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		-	-	-
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	20000 DLY MAX	MG/L		TWICE/MONTH	CALCTD
COPPER, TOTAL (AS CU) 01042 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI		-	-	-
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX	MG/L		TWICE/MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
J. Hagan  
General Manager  
Hope Creek Operations

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 18 USC § 1339. 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  
609 339-3463

DATE  
92 06 25

COMMENT AND EXPLANATION OF ANY VIOLATIONS: SAMPLING FOR CO, ZN, & CR IS REQUIRED ONLY IF MAINTENANCE CHEMICALS CONTAINING THESE METALS ARE USED. IF NOT USED, ENTER "NODI" FOR THESE METALS.

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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Approval expires 6-30-91.

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

DMR NUMBER: 92050489

MONITORING PERIOD  
FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN  
MAJOR SALEM  
SOUTHERN REGION

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX			
ZINC, TOTAL (AS ZN) 01092 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI	-	-	-
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX		TWICE/ MONTH	GRAB
ZINC, TOTAL (AS ZN) 01092 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI	-	-	-
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	60000 DLY MAX		TWICE/ MONTH	CALCTD
ZINC, TOTAL (AS ZN) 01092 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	NODI	NODI	-	-	-
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX		TWICE/ MONTH	GRAB
ASBESTOS (FIBROUS) 34225 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	<0.00003	<0.00003	-	2/mo	Grab
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX		TWICE/ MONTH	GRAB
ASBESTOS (FIBROUS) 34225 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****		*****	<0.00003	<0.00003	-	2/mo	Calc
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX		TWICE/ MONTH	CALCTD
ASBESTOS (FIBROUS) 34225 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****		*****	<0.00003	<0.00003	-	2/mo	Grab
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	40.01	55.77		*****	*****	*****	-	cont	
	PERMIT REQUIREMENT	REPORT MNTH AVG	REPORT DLY MAX	MGD	*****	*****	*****	****	CONTIN UOUS	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
J. Hagan  
General Manager  
Hope Creek Operations

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED  
AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED  
ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR  
OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION  
IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE 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 \$100,000  
and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE

609 339-3463 92 06 25

AREA CODE NUMBER YEAR MO DAY

SAMPLES FOR ANALYSIS OF ZN, LE, CR, IS REQUIRED ONLY IF MAINTENANCE CHEMICALS CONTAINING THESE METALS ARE USED. IF  
NOT USED, ENTER "NODI" FOR THESE METALS.



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

NAME PSEG  
ADDRESS P.O. BOX 236/N21  
HANCOCKS BRIDGE, 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 6-30-91.

FACILITY PSEG HOPE CREEK GENERATING ST  
LOCATION LOWER ALLOWAYS CREE, NJ 08038

DMR NUMBER: 92050489

COOLING TOWER BLOWDOWN  
MAJOR  
SOUTHERN REGION

SALEM

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			UNITS (54-61)	NO. EX (62-69)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX				
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	<0.1	<0.1		0	cont	
	PERMIT REQUIREMENT	*****	*****	****	*****	•20000 MNTN AVG	•50000 DLY MAX	MG/L		CONTIN UOUS	
HEAT (WINTER) (PER HOUR) 81387 2 1 (ADMIN) EFFLUENT NET VALUE	SAMPLE MEASUREMENT	166.0	247		*****	*****	*****		0	cont	Calc
	PERMIT REQUIREMENT	REPORT	731.00000 MNTN AVG	MBTU/ HR	*****	*****	*****	****		CONTIN UOUS	CALC
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
J. Hagan  
General Manager  
Hope Creek Operations  
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED  
AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED  
ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR  
OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION  
IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIG-  
NIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING  
THE POSSIBILITY OF FINE AND IMPRISONMENT (SEE 18 USC § 1001 AND  
33 USC § 1339). (Penalties under these statutes may include fines up to \$10,000  
and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

609 839-3463 92 06 25  
AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS: SAMPLING FOR CU, CR, & CK IS REQUIRED ONLY IF MAINTENANCE CHEMICALS CONTAINING THESE METALS ARE USED. IF  
NOT USED, ENTER "NODI" FOR THESE METALS.

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

NAME PSEG

ADDRESS P.O. BOX 236/N21

HANDCOCKS BRIDGE NJ 08038

FACILITY PSEG HOPE CREEK GENERATING ST  
LOCATION LOWER ALLOWAYS CREEK NJ 08038

DMR NUMBER: 92050469

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

(17-19)

PERMIT NUMBER

NJ0025411

DISCHARGE NUMBER

461C

Form Approved  
OMB No. 2040-0004  
Approval expires 6-30-91

LOW VOLUME SAN SYSTEM  
MAJOR SOUTHERN REGION

MONITORING PERIOD

FROM 12/23/92 TO 12/23/92  
YEAR 92 MO 05 DAY 01  
YEAR 92 MO 05 DAY 31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	(1 Card Only) QUANTITY OR LOADING (46-51)		(1 Card Only) QUANTITY OR CONCENTRATION (56-61)		NO. OF ANALYSES (62-63)		FREQUENCY OF ANALYSES (64-65)	SAMPLE TYPE (66-70)
	XXXXXXXXX	XXXXXX	XXXXXX	XXXXXX	UNIT	UNIT		
TEMPERATURE WATER	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	1/wk	Grab
DEG CENTIGRADE	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	WEEKLY	GRAB
CODIC 1 I	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	1/wk	Grab
EFFLUENT GROSS VALUE	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	WEEKLY	GRAB
PH	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	2/mo	Comp
OC400 1 I	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	2/mo	Grab
SOLIDS TOTAL	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	TWICE/MONTH	GRAB
SUSPENDED	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	2/mo	Comp
OC530 1 I	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	2/mo	Grab
HYDROCARBONS IN H2O	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	TWICE/MONTH	GRAB
IR+CC14 EXT. CHROMAT	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	2/mo	Comp
OC551 1 I	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	2/mo	Grab
NITROGEN AMMONIA	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	TWICE/MONTH	GRAB
TOTAL (AS N)	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	2/mo	Comp
OC610 1 I	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	2/mo	Grab
CARBON TOT ORGANIC (TOC)	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	TWICE/MONTH	GRAB
OC680 1 I	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	2/mo	Comp
EFFLUENT GROSS VALUE	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	TWICE/MONTH	GRAB
COPPER TOTAL (AS CU)	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	2/mo	Grab
OC1042 1 I	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	TWICE/MONTH	COMPOS
EFFLUENT GROSS VALUE	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	2/mo	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
J. Hagan  
General Manager  
Hope Creek Operations

TYPED OR PRINTED

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
\* Permit requires composite samples.

TELEPHONE

DATE

AREA CODE

NUMBER

YEAR

MO

DAY

PERMITTEE NAME/ADDRESS (Include

Facility Name/Location if different)

NAME PSEG

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 6-30-91

FACILITY PSEG HOPE CREEK GENERATING ST

LOCATION LOWER ALLOWAYS CREE, NJ 08038

DMR NUMBER: 32050489

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

LOW VOLUME WW SYSTEM

MAJOR

SALEM

SOUTHERN REGION

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		XXXXXXXX (46-53)	XXXXXXXX (46-53)	UNITS (46-53)	XXXXXXXX (46-53)	XXXXXXXX (46-53)	XXXXXXXX (46-53)	UNITS (46-53)			
IRON, TOTAL (43-FC)		000000	000000		000000	1.4	1.7		-	2/mo	Grab
1045 1 0	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT Mnth Avg	REPORT Dly Max	MG/L		TWICE/GRAB MONTH	
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OF THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.01	0.02		000000	000000	000000		0	Cont	
50050 1 0	PERMIT REQUIREMENT	REPORT Mnth Avg	45000 Dly Max	MGD	000000	000000	000000	0000		CONTINUOUS	
EFFLUENT GROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

J. Hagan  
General Manager  
Hope Creek Operations

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 18 USC § 1339. (Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 6 months and 3 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

609 339-3463 92 06 25

AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS: (Reference all attachments here)

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

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

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

(2-16) NJ0025411  
PET #12 NUMBER  
(17-19) 462A  
DISCHARGE NUMBER

Form Approved.  
OMB No. 2040-0004  
Approval expires 6-30-91.

FACILITY PSEG HOPE CREEK GENERATING ST  
LOCATION LOWER ALLOWAYS CREE NJ 08038  
DMR NUMBER: 92050489

MONITORING PERIOD  
FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NORTH STORM DR IN  
MAJOR SALEM  
SOUTHERN REGION  
NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (58-63)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX	UNITS			
PH	SAMPLE MEASUREMENT	000000	000000		7.6	000000	7.6		✓	1/mo	Grab
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000 0000	6.0000 MINIMUM	000000	9.0000 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	000000	000000		000000	155	155		-	1/mo	Grab
00530 1 1 (ADMIN) EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000 0000	000000	REPORT Mnth Avg	REPORT DLY MAX	MG/L		ONCE/ MONTH	GRAB
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT	SAMPLE MEASUREMENT	000000	000000		000000	0.50	0		0	1/mo	Grab *
00551 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000 0000	000000	REPORT Mnth Avg	15.0000 DLY MAX	MG/L		ONCE/ MONTH	GRAB-2
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	000000	000000		000000	8	8		0	1/mo	Grab
00680 1 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000 0000	000000	REPORT Mnth Avg	50.0000 DLY MAX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.21	0.21		000000	000000	000000		-	1/mo	
00050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT DLY MAX	MGD	000000	000000	000000	0000 000		ONCE/ MONTH	
	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 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$5000 and/or maximum imprisonment of between 6 months and 5 years.	TELEPHONE	DATE	
J. Hagan General Manager Hope Creek Operations TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	609 339-3463	92 06 25

COMMENTS AND EXPLANATION OF ANY VARIATIONS FROM THE PERMIT, EXCEPT FOR PET HC FOR WHICH SAMPLES SHALL BE TAKEN DURING THE 1ST PRECIPITATION EVENT OF MONTH WHICH CAUSES DISCHARGE DURING WORKING HRS & IS PRECEDED BY MINIMUM DRY PERIOD OF 72 HRS. \*Unable to meet sampling criteria due to discharge event occurring prior to and continuing into normal working hours. A single grab sample was obtained for information only.



NAME P. J. EG  
ADDRESS P.O. BOX 236/NZ1  
HANCOCKS BRIDGE, NJ 08038

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

(2-16)
NJ0025411
PERMIT NUMBER

462B

Form Approved  
OMB No. 2040-0004  
Approval expires 6-30-91

FACILITY PSEG HOPE CREEK GENERATING ST  
LOCATION LOWER ALLOWAYS CREEK, NJ 08038  
DMR NUMBER: 92050489

## MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	05	01		92	05	31
	(26-27)	(28-29)	(30-31)		(26-27)	(28-29)	(30-31)

SENAGE W.M.  
MAJOR  
SOUTHERN REGION

SALE FM

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	QUANTITY OR LOADING (46-53)			QUALITY OR CONCENTRATION (54-61)			NO. EX. (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		XXXXXX (46-53)	XXXXXX (54-57)	UNITS (58-61)	XXXXXX (54-57)	XXXXXX (58-61)	XXXXXX (62-65)				UNITS (66-69)
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	66.2	66.2		*****	672	672		-	1/mo	Grab
00310 G O RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	KG/ DAY	*****	REPORT Mnth Avg	REPORT Dly Max	MG/L		ONCE/ MONTH	GRAB
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	0.4	0.4		*****	4	4		0	1/mo	Grab
00310 I O EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	6-88888 Mnth Avg	REPORT Dly Max	KG/ DAY	*****	REPORT Mnth Avg	REPORT Dly Max	MG/L		ONCE/ MONTH	GRAB
PH	SAMPLE MEASUREMENT	*****	*****		6.9	*****	9		0	2/wk	Grab
00400 I O EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**** ****	6-00000 MINIMUM	*****	6-00000 MINIMUM	SU		TWICE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	554	554		-	1/mo	Comp
00530 G O RAW SEW/INFLUENT	PERMIT REQUIREMENT	*****	*****	**** ****	*****	REPORT Mnth Avg	REPORT Dly Max	MG/L		ONCE/ MONTH	COMPOS
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	4	4		0	1/mo	Comp
00530 I O EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**** ****	*****	30-88888 Mnth Avg	100-88888 Dly Max	MG/L		ONCE/ MONTH	COMPOS
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****		*****	1	1		0	1/mo	Grab
FREON EXTR-GRAV METH	PERMIT REQUIREMENT	*****	*****	**** ****	*****	10-88888 Mnth Avg	15-88888 Dly Max	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.028	0.043		*****	*****	*****		-	Daily	Floind
50050 I O EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT Dly Max	MGD	*****	*****	*****	**** ***		DAILY	FLOIND
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 IN SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. In other words these statutes may include fines up to \$200,000 and or maximum imprisonment of between 6 months and 3 years.					TELEPHONE		DATE		
J. Hagan General Manager Hope Creek Operations							609 339-3463		92 06 25		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY



PERMITTEE NAME/ADDRESS (Include

Facility Name/Location if different)

NAME PSEG

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

4628

PERMIT NUMBER

DISCHARGE NUMBER

Form Approved.

OMB No. 2040-0004.

Approval expires 6-30-91.

FACILITY PSEG HOPE CREEK GENERATING ST

LOCATION LOWER ALLOWAYS CREE, NJ 08038

DMR NUMBER: 92050489

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

SEWAGE W.W.

MAJOR

SALEM

SOUTHERN REGION

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (58-65)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX				
COLIFORM, FECAL GENERAL 74255 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	000000	000000		000000	<1	<1		0	1/mo	Grab
	PERMIT REQUIREMENT	000000	000000	0000	000000	200-00000 MONTHGEO	400-00000 WKLY GEO	#/100 ML		ONCE/ MONTH	GRAB
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 PERCENTREMOVAL	SAMPLE MEASUREMENT	000000	000000		99.4	99.4	000000		0	1/mo	Calc
	PERMIT REQUIREMENT	000000	000000	0000	87.50000 MONAVMIN	REPORT AVERAGE	000000	PERCE NT		ONCE/ MONTH	CALCTD
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0 PERCENTREMOVAL	SAMPLE MEASUREMENT	000000	000000		99	99	000000		0	1/mo	Calc
	PERMIT REQUIREMENT	000000	000000	0000	85.00000 MONAVMIN	REPORT AVERAGE	000000	PERCE NT		ONCE/ MONTH	CALCTD
OXYGEN DEMAND FIRST STAGE 82210 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.5	0.5		000000	4.8	4.8		0	1/mo	Calc
	PERMIT REQUIREMENT	8.20000 MNTN AVG	REPORT DLY MAX	KG/ DAY	000000	REPORT MNTN AVG	REPORT DLY MAX	MG/L		ONCE/ MONTH	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

J. Hagan  
General Manager  
Hope Creek Operations

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 18 USC § 1339. (Fines/penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 3 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE

OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

609 339-3463

AREA  
CODE

NUMBER

92 06 25

YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)  
NAME PSEG  
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

463A

PERMIT NUMBER

DISCHARGE NUMBER

Form Approved.  
OMB No. 2040-0004.  
Approval expires 6-30-91.

FACILITY PSEG HOPE CREEK GENERATING ST  
LOCATION LOWER ALLOWAYS CREE NJ 08038

DMR NUMBER: 92050489

## MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

SOUTH STORM DRAIN

MAJOR

SALEM

SOUTHERN REGION

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-67)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (66-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX	UNITS			
PH	SAMPLE MEASUREMENT	000000	000000		7.2	000000	7.2		0	1/mo	Grab
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000 0000	6.0000 MINIMUM	000000	9.0000 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	000000	000000		000000	42	42		-	1/mo	Grab
00530 1 1 (ADMIN) EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000 0000	000000	REPORT Mnth Avg	REPORT DLY MAX	MG/L		ONCE/ MONTH	GRAB
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT	SAMPLE MEASUREMENT	000000	000000		000000	0.50	0		0	1/mo	Grab *
00551 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000 0000	000000	REPORT Mnth Avg	15.0000 DLY MAX	MG/L		ONCE/ MONTH	GRAB-3
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	000000	000000		000000	18.1	18		0	1/mo	Grab
00680 1 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000 0000	000000	REPORT Mnth Avg	50.0000 DLY MAX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.22	0.22		000000	000000	000000		-	1/mo	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT DLY MAX	MGD	000000	000000	000000	0000 000		ONCE/ MONTH	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
J. Hagan  
General Manager  
Hope Creek Operations

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE  
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

609 339-3463

92 06 25

AREA  
CODE

NUMBER

YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VARIATIONS FROM DISCHARGE LIMITS: SAMPLES TO BE TAKEN DURING A DISCHARGE EVENT, EXCEPT FOR PET HC FOR WHICH SAMPLES SHALL BE TAKEN DURING THE 1ST PRECIPITATION EVENT OF MONTH WHICH CAUSES DISCHARGE DURING WORKING HRS & IS PRECEDED BY MINIMUM DRY PERIOD OF 72 HRS. \*Unable to meet sampling criteria due to discharge event occurring prior to and continuing into normal working hours. A single grab sample was obtained for information only.

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

464A

PERMIT NUMBER

DISCHARGE NUMBER

Form Approved.  
OMB No. 2040-0004.  
Approval expires 6-30-91.

FACILITY PSE&G HOPE CREEK GENERATING ST

LOCATION LOWER ALLOWAYS CREE, NJ 08038

DMR NUMBER: 92050489

MONITORING PERIOD

FROM YEAR 92 MO 05 DAY 01 TO YEAR 92 MO 05 DAY 31  
(12-21) (12-23) (12-25) (26-27) (28-29) (30-31)

PERIM STORM DRAIN

MAJOR

SALEM

SOUTHERN REGION

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-57)			(4 Card Only) QUALITY OR CONCENTRATION (58-67)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (54-65)	SAMPLE TYPE (69-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX			
PH	SAMPLE MEASUREMENT	000000	000000		7.8	000000	7.8	0	1/mo	Grab
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000	6.00000 MINIMUM	000000	9.00000 MAXIMUM	SU	ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	000000	000000		000000	29	29	-	1/mo	Grab
00531 1 1 (ADMIN) EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	REPORT DLY MAX	MG/L	ONCE/ MONTH	GRAB
HYDROCARBONS, IN H2O, IP, CC14 EXT. CHROMAT	SAMPLE MEASUREMENT	000000	000000		000000	0.30	0	0	1/mo	Grab *
00551 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	15.00000 DLY MAX	MG/L	ONCE/ MONTH	GRAB-3
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	000000	000000		000000	12	12	0	1/mo	Grab
00680 1 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	50.00000 DLY MAX	MG/L	ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.29	0.29		000000	000000	000000	-	1/mo	
00050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MNTH AVG	REPORT DLY MAX	MGD	000000	000000	000000	0000	ONCE/ MONTH	
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

J. Hagan  
General Manager  
Hope Creek Operations

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SIGNATURE OF PRINCIPAL EXECUTIVE

OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

609 339-3463 92 06 25

AREA CODE

NUMBER

YEAR

MO

DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS: A discharge event, except for PET HC FOP which samples shall be taken during the 1st precipitation event of month which causes discharge during working hrs & is preceded by minimum dry period of 72 hrs. \*Unable to meet sampling criteria due to discharge event occurring prior to and continuing into normal working hours. A single grab sample was obtained for information only.