



Public Service Electric and Gas Company P.O. Box 238 Hanover Bridge, New Jersey 08038

Hope Creek Generating Station

September 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 August 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

100096

The Energy People

9210050311 920831
PDR ADOCK 05000354
R PDR

JE23

92-013 255 12-09

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER RESOURCES

MONITORING REPORT - TRANSMITTAL SHEET

NAPDES NO.

REPORTING PERIOD

MO. YR.

MO. YR.

010121514111

018 92 THRU 018 92

PERMITTEE:

Name Public Service Electric & Gas Company

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. (County) Salem

Telephone (609) 339-3453

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

NAPDES 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 checked="" type="checkbox"/>	<input type="checkbox"/>

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

NOTE: The "Hours Attended to 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) Clark E. Pierce

Grade & Registry No. X-1124

Signature [Signature]

Date 9/25/92

PRINCIPAL EXECUTIVE OFFICER or
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) Joseph J. Hagan

General Manager

Title (Printed) Hope Creek Operations

Signature [Signature]

Date 9/25/92

Continuous temperature monitoring of DSN 461A was interrupted for 3 hours on August First. This was due to an unplanned power outage. A conservative estimate was made for these 3 hours using the highest recorded temperature for that day.

Month Year

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

OPERATING EXCEPTIONS DETAILED

East lamper off line due to
rapid sludge settling rate

HOURS ATTENDED AT PLANT

Month 12/21Year 1912[illegible]

MONITORING REPORT - TRANSMITTAL SHEET

NJDES NO.

REPORTING PERIOD

MO. YR.

MO. YR.

00,25,41,102/92 THRU 02/92PERMITTEE:Name Public Service Electric & Gas CompanyAddress P.O. Box 236Hancocks Bridge, NJ 08038FACILITY:Name Hope Creek Generating StationAddress P.O. Box 236Hancocks Bridge, NJ County: SalemTelephone (609) 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-017NPL DISCHARGE MONITORING REPORT☒ EPA FORM 3320-1OPERATING 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 checked="" type="checkbox"/>	<input 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 OPERATORName (Printed) Andres NuriGrade & Registry No. -4 (54542)Signature Andres NuriDate 9/25/92PRINCIPAL EXECUTIVE OFFICER or
DULY AUTHORIZED REPRESENTATIVEName (Printed) Joseph J. Hagan
General Manager
Hope Creek Operations


Title (Printed)

Signature [Signature]Date 9/25/92

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 Sept 1992.



SHERIL L. HUSTON
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires Dec. 30, 1993

NJPDES
Explanation of Exceedances
August 1992

9/25/92

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

NJDEP
Explanation of conditions
August 1992

9/25/92

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

2

9/25/92

RAJ
CW:ej
Attachments

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

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)

NJ0025411

PERMIT NUMBER

464A

DISCHARGE NUMBER

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

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


MONITORING PERIOD
FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 08 DAY 31
(27-29) (22-23) (24-25) (26-27) (28-29) (30-31)

PERM STORM DRAIN
MAJOR
SOUTHERN REGION
SALEM

DMR NUMBER: 92080487

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (45-53)			(4 Card Only) QUALITY OR CONCENTRATION (45-53)			NO. EX	FREQUENCY OF ANALYSIS (54-55)	SAMPLE TYPE (56-59)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX			
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 1000	6.00000 MINIMUM	000000	9.00000 MAXIMUM		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	000040	000000		000000	11	11	-	1/mo	Grab
00530 1 1 (ADMIN) EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000 0000	000000	REPORT MNTH AVG	REPORT DLY MAX		ONCE/ MONTH	GRAB
HYDROCARBONS, IN H ₂ O, C ₁₀ -C ₁₄ EXT. CHROMAT	SAMPLE MEASUREMENT	000000	000000		000000	<0.10		0	1/mo	Grab
00551 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000 0000	000000	REPORT MNTH AVG	15.00000 DLY MAX		ONCE/ MONTH	GRAB-3
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	000000	000000		000000	11	11	0	1/mo	Grab
00680 1 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	0000 0000	000000	REPORT MNTH AVG	50.00000 DLY MAX		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.143	0.143		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	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY KNOWLEDGE 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 18 U.S.C. § 1379. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of 5 years 6 months and 1 year.	TELEPHONE	DATE
J. Hagan General Manager Hope Creek Operations TYPED OR PRINTED		609 339-3463	92 09 25
	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER YEAR MO DAY

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 preceding 72 HRS dry period sampling criteria. A single grab sample was obtained for information only.

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

RAMS PSE&G
ADDRESS P.O. BOX 236/H21
HANCOCKS BRIDGE, NJ 08038

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

(2-16)
NJ0025411

PERMIT NUMBER

(2-19)
463A

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

MONITORING PERIOD
FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 08 DAY 31
(12-21) (12-29) (12-25) (12-21) (12-29) (12-31)

SOUTH STORM DRAIN
MAJOP
SOUTHERN REGION

SALEM

DMR NUMBER: 92080487

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-51)			(1 Card Only) QUALITY OR CONCENTRATION (46-51)			NO. EX.	FREQUENCY OF ANALYSIS (54-55)	SAMPLE TYPE (59-60)
		XXXXXXX	XXXXXXX	UNITS	XXXXXXX	XXXXXXX	XXXXXXX			
PH	SAMPLE MEASUREMENT	000000	000000		7.4	000000	7.4	0	1/mo	Grab
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	**** ****	6.00000 MINIMUM	000000	9.00000 MAXIMUM		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	000000	000000		000000	27	27	-	1/mo	Grab
00530 1 1 (ADMIN) EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	**** ****	000000	REPORT Mnth Avg	REPORT DLY MAX	MG/L	ONCE/ MONTH	GRAB
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT	SAMPLE MEASUREMENT	000000	000000		000000	<0.1	<1	0	1/mo	Grab
00551 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	**** ****	000000	REPORT Mnth Avg	15.00000 DLY MAX	MG/L	ONCE/ MONTH	GRAB-3
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	000000	000000		000000	15	15	0	1/mo	Grab
00680 1 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	000000	000000	**** ****	000000	REPORT Mnth Avg	50.00000 DLY MAX	MG/L	ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.110	0.110		000000	000000	000000	-	1/mo	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	REPORT DLY MAX	MGD	000000	000000	000000	**** ***	ONCE/ MONTH	
	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
18 USC 1011B. (Penalties under these statutes may include fines up to \$250,000
and/or maximum imprisonment of between 5 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

609 339-3463 92 09 25

AREA
CODE

NUMBER

YEAR MO DAY

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 preceding 72 HRS dry period sampling criteria. 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)

PERMIT NUMBER NJ0025411
DISCHARGE NUMBER 4628

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

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

MONITORING PERIOD
FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 08 DAY 31

SEWAGE W
MAJOR SALEM
SOUTHERN REGION

DMR NUMBER: 92080487

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (34-37)			QUALITY OR CONCENTRATION (34-37)			NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		UNIT	UNIT	UNIT	UNIT	UNIT	UNIT			
COLIFORM, FECAL GENERAL 74055 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	<1	<1	0	1/mo	Grab
	PERMIT REQUIREMENT	*****	*****	****	*****	200- 00000 MONTHLY	400- 00000 WKLY 650 ML		ONCE/ MONTH	GRAB
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 PERCENTREMOVAL	SAMPLE MEASUREMENT	*****	*****		97.5	97.5	*****	0	1/mo	Calc
	PERMIT REQUIREMENT	*****	*****	****	67.5- 00000 MONTHLY	REPORT AVERAGE	*****	PERCE NT	ONCE/ MONTH	CALCTD
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0 PERCENTREMOVAL	SAMPLE MEASUREMENT	*****	*****		98	98	*****	0	1/mo	Calc
	PERMIT REQUIREMENT	*****	*****	****	85- 00000 MONTHLY	REPORT AVERAGE	*****	PERCE NT	ONCE/ MONTH	CALCTD
OXYGEN DEMAND FIRST STAGE 82210 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.2	1.13		*****	10	10	0	1/mo	Calc
	PERMIT REQUIREMENT	8-21- 000 MONTH AVG	REPORT DLY MAX	KG/ DAY	*****	REPORT MONTH 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 1011. (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		
			609 339-3463	92	09	25

COMMENT 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/NJ21

HANCOCKS BRIDGE, NJ 08038

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

PERMIT NUMBER NJ0025411

DISCHARGE NUMBER 4628

Form Approved

OMB No. 2040-0004

Approval expires 6-30-91

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

DMR NUMBER: 92080487

MONITORING PERIOD
FROM 92 08 01 TO 92 08 31

SEWAGE M-M-
MAJOR
SOUTHERN REGION
SALEM

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	QUANTITY OR LOADING (34-35)		QUALITY OR CONCENTRATION (36-37)		UNITS	NO. OF ANALYSES PER MONTH	FREQUENCY OF ANALYSES (38-39)	SAMPLE TYPE (40-41)
	(42-43)	(44-45)	(46-47)	(48-49)				
BOD 5-DAY (20 DEG. C)	REPORT MONTHLY AVG	40.0	REPORT MONTHLY AVG	325	MG/L	0	1/mo	Grab
00310 60 RAW SEW/INFLUENT	PERMIT REQUIREMENT	40.0	REPORT MONTHLY MAX	325	MG/L	0	ONCE/MONTH	GRAB
BOD 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	1.0	REPORT MONTHLY AVG	8	MG/L	0	1/mo	Grab
00310 10 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	1.0	REPORT MONTHLY MAX	8	MG/L	0	ONCE/MONTH	GRAB
PH	SAMPLE MEASUREMENT	6.2	REPORT MONTHLY MAX	7.2	MG/L	0	2/WK	Grab
00400 10 EFFLUENT SPOSS VALUE	PERMIT REQUIREMENT	6.0	REPORT MONTHLY MAX	9.0	MG/L	0	ONCE/MONTH	GRAB
SOLIDS, TOTAL	SAMPLE MEASUREMENT	460	REPORT MONTHLY MAX	460	MG/L	0	1/mo	Comp
SUSPENDED	PERMIT REQUIREMENT	460	REPORT MONTHLY MAX	460	MG/L	0	ONCE/MONTH	Comp
00530 60 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	11	REPORT MONTHLY MAX	11	MG/L	0	ONCE/MONTH	Comp
SOLIDS, TOTAL	PERMIT REQUIREMENT	11	REPORT MONTHLY MAX	11	MG/L	0	ONCE/MONTH	Comp
SUSPENDED	SAMPLE MEASUREMENT	11	REPORT MONTHLY MAX	11	MG/L	0	ONCE/MONTH	Comp
00530 10 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	11	REPORT MONTHLY MAX	11	MG/L	0	ONCE/MONTH	Comp
OIL AND GREASE	SAMPLE MEASUREMENT	11	REPORT MONTHLY MAX	11	MG/L	0	ONCE/MONTH	Comp
FREON EXTR--GRAY METH	SAMPLE MEASUREMENT	11	REPORT MONTHLY MAX	11	MG/L	0	ONCE/MONTH	Comp
OC556 10	PERMIT REQUIREMENT	11	REPORT MONTHLY MAX	11	MG/L	0	ONCE/MONTH	Comp
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	11	REPORT MONTHLY MAX	11	MG/L	0	ONCE/MONTH	Comp
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.030	REPORT MONTHLY MAX	0.030	MG/L	0	ONCE/MONTH	Comp
50050 10 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.030	REPORT MONTHLY MAX	0.030	MG/L	0	ONCE/MONTH	Comp

NAME/TITLE: J. Hagan
General Manager
Hope Creek Operations

DATE: 92 08 25

TELEPHONE: 339-3463

AREA CODE: 609

NUMBER: 339-3463

YEAR: 92

MO: 08

DAY: 25

OFFICIAL OF AUTHORIZED AGENT

* Frequency was 3/wk for weeks ending 8/9 and 8/23

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

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

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

NAME PSE&G
ADDRESS Box 236/N21
12766 NJ 08038

NJC025411
PERMIT NUMBER

4624
DISCHARGE NUMBER

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

MONITORING PERIOD
FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 08 DAY 31
(10/21) (22/23) (24/25) (26/27) (28/29) (30/31)

NORTH STORM DRAIN
MAJOR SALEM
SOUTHERN REGION

DMR NUMBER: 92080487

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (34-35)			QUALITY OR CONCENTRATION (34-35)			NO. EX (37-38)	FREQUENCY OF ANALYSIS (34-35)	SAMPLE TYPE (37-38)
		XX/XX/XX/XX	XX/XX/XX/XX	UNITS	XX/XX/XX/XX	XX/XX/XX/XX	XX/XX/XX/XX			
PH	SAMPLE MEASUREMENT	*****	*****		7.5	*****	7.5	0	1/mo	Grab
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	**** MINIMUM	*****	*****	*****	SU	ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	142	142	-	1/mo	Grab
00530 1 1 (ADMIN) EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MONTH AVG	REPORT DLY MAX	MG/L	ONCE/MONTH	GRAB
HYDROCARBONS, IN H ₂ O, IR, C14 EXT. CHROMAT	SAMPLE MEASUREMENT	*****	*****		*****	0.20	0	0	1/mo	Grab*
00551 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MONTH AVG	15-***** DLY MAX	MG/L	ONCE/MONTH	GRAB-3
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	*****	*****		*****	7.4	7	0	1/mo	Grab
00680 1 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MONTH AVG	50-***** DLY MAX	MG/L	ONCE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.102	0.102		*****	*****	*****	-	1/mo	
50050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MONTH AVG	REPORT DLY MAX	MGD	*****	*****	*****	****	ONCE/MONTH	
	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 § 1343. (Penalties apply to individuals who willfully falsify, conceal or withhold information.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE 609 339-3463	DATE 92 09 25
--	---	--	---------------------------	------------------

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 preceding 72 HRS dry period sampling criteria. 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)

NJ0025411
PERMIT NUMBER

461C
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

MONITORING PERIOD
FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 08 DAY 01
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

LOW VOLUME WW SYSTEM

MAJOR

SALE

SOUTHERN REGION

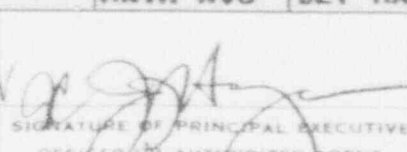
DMR NUMBER: 92080487

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(If Card Only) QUANTITY OR LOADING (34-35)			(If Card Only) QUALITY OR CONCENTRATION (36-37)			NO. EX	FREQUENCY OF ANALYSIS (34-35)	SAMPLE TYPE (36-37)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	22.9	24.5		-	1/wk Grab
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	REPORT Dly Max	DEG.C		WEEKLY GRAB
PH 00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		3		8		0	1/wk Grab
	PERMIT REQUIREMENT	*****	*****	****	6.00000 MINIMUM	*****	9.00000 MAXIMUM	SU		WEEKLY GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	2	2		0	2/mo Comp
	PERMIT REQUIREMENT	*****	*****	****	*****	30.00000 Mnth Avg	100.00000 Dly Max	MG/L		TWICE/COMPOS MONTH
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	0	0		0	2/mo Grab
	PERMIT REQUIREMENT	*****	*****	****	*****	10.00000 Mnth Avg	15.00000 Dly Max	MG/L		TWICE/GRAB MONTH
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	0	0.27		0	2/mo Comp
	PERMIT REQUIREMENT	*****	*****	****	*****	35.00000 Mnth Avg	REPORT Dly Max	MG/L		TWICE/COMPOS MONTH
CARBON, TOT ORGANIC (TOC) 00680 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	19.5	38		0	2/mo Comp
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	50.00000 Dly Max	MG/L		TWICE/GRAB MONTH
COPPER, TOTAL (AS CU) 01042 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	0.08	0.1		0	2/mo Grab
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT Mnth Avg	20.00000 Dly Max	MG/L		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 SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. § 1001 AND 18 U.S.C. § 1341. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 5 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT


TELEPHONE
609 339-3463
DATE
92 09 25

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

* Permit requires composite samples.

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

NAME **PSE&G**
 ADDRESS **P.O. BOX 236/H21**
HANCOCKS BRIDGE, NJ 08038

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

(216) (1719)
NJ0025417 **461A**
 PERMIT NUMBER DISCHARGE NUMBER

Form Approved,
 OMB No. 2043-0004
 Approval expires 6-30-91.

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

MONITORING PERIOD
 FROM YEAR **92** MO **08** DAY **01** TO YEAR **92** MO **08** DAY **31**
 (2021) (2223) (2425) (2627) (2829) (3031)

COOLING TOWER BLOWDOWN
 MAJOR **SALEM**
 SOUTHERN REGION

DMR NUMBER: **92080487**

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (45-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			UNITS	NO. EX (52-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (66-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX				
CHLORINE, TOTAL RESIDUAL 50060 1 0	SAMPLE MEASUREMENT	*****	*****		*****	<0.1	<0.1		0	cont	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	20000 Mnth Avg	50000 DLY MAX	MG/L		CONTIN UOUS	
HEAT (SUMMER) (PER HOUR) 81386 2 1 (ADMIN)	SAMPLE MEASUREMENT	233.06	331		*****	*****	*****		0	cont	Calc
EFFLUENT NET VALUE	PERMIT REQUIREMENT	REPORT Mnth Avg	443-00000 DLY MAX	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										
	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 U.S.C. § 1001 AND 33 U.S.C. § 1319). Penalties under these statutes may include fines up to \$200,000 and/or maximum imprisonment of between 6 months and 5 years.	TELEPHONE		DATE	
		609 339-3463		92	08
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO DAY

SAMPLE INFORMATION OF ANY VOLATILE ORGANIC COMPOUNDS IS REQUIRED ONLY IF MAINTENANCE CHEMICALS CONTAINING THESE METALS ARE USED. IF NOT USED, ENTER "NODI" FOR THESE METALS.

PERMITTEE NAME: PSEEG HOPE CREEK GENERATING ST
Facility Name/Location (if different)
NAME PSEEG
ADDRESS P.O. BOX 236/M21
HANCOCKS BRIDGE, NJ 08038

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

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

461.3
DISCHARGE NUMBER

NJ002543
PERMIT NUMBER

COOLING TOWER BLOWDOWN
MAJOR REGION
SOUTHERN REGION

MONITORING PERIOD

FROM 92 08 01 TO 92 08 31
YEAR MONTH DAY

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

DMR NUMBER: 92080487

NOTE: Read instructions before completing this form.

PARAMETER (22-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING (34-35)	UNITS	QUALITY OR CONCENTRATION (34-35)			FREQUENCY OF ANALYSIS (36-38)	SAMPLE TYPE (39-40)
				XX	XX	XX		
ZINC TOTAL (AS ZN)	XXXXXX	XXXXXX	MG/L	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
01092 1 0 EFFLUENT GROSS VALUE	XXXXXX	XXXXXX	MG/L	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
ZINC TOTAL (AS ZN)	XXXXXX	XXXXXX	MG/L	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
01092 2 0 EFFLUENT NET VALUE	XXXXXX	XXXXXX	MG/L	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
ZINC TOTAL (AS ZN)	XXXXXX	XXXXXX	MG/L	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
01092 7 0 INTAKE FROM STREAM	XXXXXX	XXXXXX	MG/L	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
ASBESTOS (FIBROUS)	XXXXXX	XXXXXX	UG/L	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
34225 1 0 EFFLUENT GROSS VALUE	XXXXXX	XXXXXX	UG/L	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
ASBESTOS (FIBROUS)	XXXXXX	XXXXXX	UG/L	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
34225 2 0 EFFLUENT NET VALUE	XXXXXX	XXXXXX	UG/L	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
ASBESTOS (FIBROUS)	XXXXXX	XXXXXX	UG/L	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
34225 7 0 INTAKE FROM STREAM	XXXXXX	XXXXXX	UG/L	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
FLOW IN CONDUIT OR THRU TREATMENT PLANT	XXXXXX	XXXXXX	UG/L	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
50050 1 0 EFFLUENT GROSS VALUE	XXXXXX	XXXXXX	UG/L	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX

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

TYPED OR PRINTED

SAMPLE FREQUENCY OF ANALYSIS
NOT USED, ENTER "NODI" FOR THESE METALS.

IF MAINTENANCE CHEMICALS CONTAINING THESE METALS ARE USED, IF

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER

609 339-346 92 09 25
AREA CODE NUMBER YEAR MO DAY

PERMITTEE NAME/ADDRESS (Include Facility Name/Location Y4/Permit)

NAME PSE66

ADDRESS P.O. BOX 236/NJ 08036

HANCOCKS BRIDGE NJ 08036

FACILITY PSE66 HOPE CREEK GENERATING ST

LOCATION LOWER ALLOWAYS CREEK NJ 08036

DMR NUMBER: 92080487

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

12/16

MJ0025411

PERMIT NUMBER

461A

DISCHARGE NUMBER

MONITORING PERIOD

FROM 92 08 01 TO 92 08 31

12/16 12/20/92 12/20/92

Form Approved
OMB No. 2040-0004
Approval expires 6-30-9...

COOLING TOWER BLOWDOWN
MAJOR
SOUTHERN REGION
SALEM

NOTE: Read instructions before completing this form

PARAMETER (12-17)	QUANTITY OR LOADING (14-15)		QUALITY OR CONCENTRATION (16-18)		UNITS	NO. EX.	FREQUENCY OF ANALYSIS (19-20)	SAMPLE TYPE (21-22)
	(14-15)	(15-16)	(16-17)	(17-18)				
CARBON, TOT ORGANIC (TOC)	00680	7	1	000000	MG/L	-	-	Grab
INTAKE FROM STREAM	00680	7	1	000000	MG/L	-	-	Grab
CHROMIUM, TOTAL (AS CR)	01034	1	0	000000	MG/L	-	-	Grab
EFFLUENT GROSS VALUE	01034	1	0	000000	MG/L	-	-	Grab
CHROMIUM, TOTAL (AS CR)	01034	2	0	000000	MG/L	-	-	Grab
EFFLUENT NET VALUE	01034	2	0	000000	MG/L	-	-	Grab
CHROMIUM, TOTAL (AS CR)	01034	7	0	000000	MG/L	-	-	Grab
INTAKE FROM STREAM	01034	7	0	000000	MG/L	-	-	Grab
COPPER, TOTAL (AS CU)	01042	1	0	000000	MG/L	-	-	Grab
EFFLUENT GROSS VALUE	01042	1	0	000000	MG/L	-	-	Grab
COPPER, TOTAL (AS CU)	01042	2	0	000000	MG/L	-	-	Grab
EFFLUENT NET VALUE	01042	2	0	000000	MG/L	-	-	Grab
COPPER, TOTAL (AS CU)	01042	7	0	000000	MG/L	-	-	Grab
INTAKE FROM STREAM	01042	7	0	000000	MG/L	-	-	Grab

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

TYPED OR PRINTED

SAMPLES FOR ANALYSIS OF TOXIC SUBSTANCES ARE REQUIRED ONLY IF MAINTENANCE CHEMICALS CONTAINING THESE METALS ARE USED. IF NOT USED, ENTER "NODI" FOR THESE METALS.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
[Signature]

TELEPHONE
609 339-3463

DATE
92 09 25

PAGE 3 OF 12

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

NJ0025411
PERMIT NUMBER

461A
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

MONITORING PERIOD
FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 08 DAY 31
(10-31) (12-31) (12-31) (1-31) (2-29) (2-28) (3-31)

COOLING TOWER BLOWDOWN
MAJOR SALEM
SOUTHERN REGION


DMR NUMBER: 92080487

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (46-51)			QUALITY OR CONCENTRATION (58-63)			NO. EX (64-65)	FREQUENCY OF ANALYSIS (66-68)	SAMPLE TYPE (69-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	UNITS			
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	<0.10	<1	0	2/mo	Calc
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	10.0000 DLY MAX		TWICE/GRAB MONTH	
HYDROCARBONS, IN H2O, IR, CC14 EXT. CHROMAT 00551 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****	****	*****	0.18	0.30	-	2/mo	Grab
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX		TWICE/GRAB MONTH	
PHOSPHORUS, TOTAL (AS P) 00665 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	0.27	0.38	-	2/mo	Grab
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX		TWICE/GRAB MONTH	
PHOSPHORUS, TOTAL (AS P) 00665 2 1 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	0	0.08	-	2/mo	Calc
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX		TWICE/GRAB MONTH	
PHOSPHORUS, TOTAL (AS P) 00665 7 1 INTAKE FROM STREAM	SAMPLE MEASUREMENT	*****	*****	****	*****	0.27	0.30	-	2/mo	Grab
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX		TWICE/GRAB MONTH	
CARBON, TOT ORGANIC (TOC) 00680 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	3.4	5.8	-	2/mo	Grab
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	REPORT DLY MAX		TWICE/GRAB MONTH	
CARBON, TOT ORGANIC (TOC) 00680 2 1 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	1.6	2	0	2/mo	Calc
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT MNTH AVG	20.0000 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 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 \$250,000 and/or maximum imprisonment of 5 years and 30 days.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT


TELEPHONE
609 339-3463
DATE
92 09 25

COMMITTEE ON THE EXPLANATION OF ANY VIOLATIONS OF THE ACT OR RULES OF THE ACT
SAMPLING FOR CU, ZN, & CR IS REQUIRED ONLY IF MAINTENANCE CHEMICALS CONTAINING THESE METALS ARE USED. IF NOT USED, ENTER "NODI" 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/M21
HANCOCKS BRIDGE, NJ 08038

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

PERMIT NUMBER NJ0025411
DISCHARGE NUMBER 461A

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

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

MONITORING PERIOD
FROM YEAR 92 MO 08 DAY 01 TO YEAR 92 MO 08 DAY 31
(12/21) (12/23) (12/25) (12/27) (12/29) (12/31)

COOLING TOWER BLOWDOWN
MAJOR SALEM
SOUTHERN REGION


DMR NUMBER: 92080487

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (66-70)
		XXXXXX	XXXXXX	UNITS	XXXXXX	XXXXXX	XXXXXX			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	000000	000000		000000	30.6	33.7	0	cont	
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	35.6000 DLY MAX		CONTIN UOUS	
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 1 INTAKE FROM STREAM	SAMPLE MEASUREMENT	000000	000000		000000	23.6	25.6	-	cont	
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	REPORT DLY MAX		CONTIN UOUS	
PH 00400 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	000000	000000		8		9	0	2/wk	Grab
	PERMIT REQUIREMENT	000000	000000	0000	6.0000 MINIMUM	000000	9.0000 MAXIMUM	SU	TWICE/GRAB WEEK	
SOLIDS, TOTAL SUSPENDED 00530 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	000000	000000		000000	136	180	-	2/mo	Grab
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	REPORT DLY MAX	MG/L	TWICE/GRAB MONTH	
SOLIDS, TOTAL SUSPENDED 00530 2 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	000000	000000		000000	71	93	-	2/mo	Calc
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	REPORT DLY MAX	MG/L	TWICE/CALC MONTH	
SOLIDS, TOTAL SUSPENDED 00530 7 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	000000	000000		000000	64	87	-	2/mo	Grab
	PERMIT REQUIREMENT	000000	000000	0000	000000	REPORT MNTH AVG	REPORT DLY MAX	MG/L	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	MG/L	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 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 5 months and 1 year.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT


TELEPHONE 609 339-3463
DATE 92 09 25
AREA CODE NUMBER YEAR MO DAY

SAMPLING FOR CO, ZN, & CR IS REQUIRED ONLY IF MAINTENANCE CHEMICALS CONTAINING THESE METALS ARE USED. IF NOT USED, ENTER "NODI" FOR THESE METALS.