Duke Power
A Duke Energy Company

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February 2, 2000

U.S. Nuclear Regulatory Commission
Attention: Document Control Desk
Washington, DC 20555-0001

Subject: Duke Energy Corporation
Catawba Nuclear Station Units 1 and 2
Docket Nos. 50-413 and 50-414
Emergency Plan Implementing Procedures

Please find enclosed for NRC Staff use and review the following Emergency Plan Implementing Procedures:

RP/0/A/5000/002, Notification of Unusual Event (Rev. 033)
RP/0/A/5000/003, Alert (Rev. 035)
RP/0/A/5000/004, Site Area Emergency (Rev. 037)
RP/0/A/5000/005, General Emergency (Rev. 037)
RP/0/A/5000/007, Natural Disaster and Earthquake (Rev. 017)
SR/0/B/2000/002, Standard Procedure for EOF Commodities and Facilities (Rev. 001)

These revisions are being submitted in accordance with 10CFR 50.54(q) and do not decrease the effectiveness of the Emergency Plan Implementing Procedures or the Emergency Plan.

By copy of this letter, two copies of the above documents are being provided to the NRC, Region II.

If there are any questions, please call Tom Beadle at 803-831-4027.

Very truly yours,

Gary R. Peterson

Attachments

A045

xc (w/attachments):

L. A. Reyes
U.S. Nuclear Regulatory Commission
Regional Administrator, Region II
Atlanta Federal Center
61 Forsyth St., SW, Suite 23T85
Atlanta, GA 30303

(w/o attachments):

C. P. Patel
NRC Senior Project Manager (CNS)
U.S. Nuclear Regulatory Commission
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Washington, DC 20555-0001

D. J. Roberts
Senior Resident Inspector (CNS)
U.S. Nuclear Regulatory Commission
Catawba Nuclear Site

DUKE POWER COMPANY
CATAWBA NUCLEAR STATION
EMERGENCY PLAN IMPLEMENTING PROCEDURES INDEX

VOLUME I

PROCEDURE	TITLE
RP/0/A/5000/001	Classification of Emergency (Rev. 012)
RP/0/A/5000/002	Notification of Unusual Event (Rev. 033)
RP/0/A/5000/003	Alert (Rev. 035)
RP/0/A/5000/004	Site Area Emergency (Rev. 037)
RP/0/A/5000/005	General Emergency (Rev. 037)
RP/0/A/5000/06	Deleted
RP/0/A/5000/006 A	Notifications to States and Counties from the Control Room (Rev. 010)
RP/0/A/5000/006 B	Notifications to States and Counties from the Technical Support Center (Rev. 010)
RP/0/A/5000/006 C	Notifications to States and Counties from the Emergency Operations Facility (Rev. 010)
RP/0/A/5000/007	Natural Disaster and Earthquake (Rev. 017)
RP/0/A/5000/08	Deleted
RP/0/B/5000/008	Spill Response (Rev. 015)
RP/0/A/5000/009	Collision/Explosion (Rev. 005)
RP/0/A/5000/010	Conducting A Site Assembly or Preparing the Site for an Evacuation (Rev. 013)
RP/0/A/5000/11	Deleted
RP/0/B/5000/12	Deleted
RP/0/B/5000/013	NRC Notification Requirements (Rev. 023)
RP/0/B/5000/14	Deleted
RP/0/A/5000/015	Core Damage Assessment (Rev. 004)
RP/0/B/5000/016	Deleted
RP/0/B/5000/17	Deleted

DUKE POWER COMPANY
CATAWBA NUCLEAR STATION
EMERGENCY PLAN IMPLEMENTING PROCEDURES INDEX

VOLUME I

PROCEDURE	TITLE
RP/0/A/5000/018	Emergency Worker Dose Extension (1/15/96)
RP/0/B/5000/019	Deleted
RP/0/A/5000/020	Technical Support Center (TSC) Activation Procedure (Rev. 012)
RP/0/A/5000/021	Deleted
RP/0/B/5000/022	Evacuation Coordinator Procedure (Rev. 003)
RP/0/B/5000/023	Deleted
RP/0/A/5000/024	OSC Activation Procedure (Rev. 006)
RP/0/B/5000/025	Recovery and Reentry Procedure (Rev. 002)
RP/0/B/5000/026	Response to Bomb Threat (5/30/96)
RP/0/B/5000/028	Communications and Community Relations EnergyQuest Emergency Response Plan (Rev. 000)

DUKE POWER COMPANY
CATAWBA NUCLEAR STATION
EMERGENCY PLAN IMPLEMENTING PROCEDURES INDEX

VOLUME II

PROCEDURE	TITLE
HP/0/B/1000/006	Emergency Equipment Functional Check and Inventory (Rev. 053)
HP/0/B/1009/001	Radiation Protection Recovery Plan (Rev. 007)
HP/0/B/1009/003	Radiation Protection Response Following a Primary to Secondary Leak (Rev. 008)
HP/0/B/1009/004	Environmental Monitoring for Emergency Conditions Within the Ten-Mile Radius of CNS (Rev. 027)
HP/0/B/1009/005	Personnel/Vehicle Monitoring for Emergency Conditions (Rev. 016)
HP/0/B/1009/006	Alternative Method for Determining Dose Rate Within the Reactor Building (Rev. 008)
HP/0/B/1009/007	In-Plant Particulate and Iodine Monitoring Under Accident Conditions (Rev. 018)
HP/0/B/1009/008	Contamination Control During Transportation of Contaminated Injured Individuals (Rev. 014)
HP/0/B/1009/009	Guidelines for Accident and Emergency Response (Rev. 038)
HP/0/B/1009/014	Radiation Protection Actions Following an Uncontrolled Release of Radioactive Material (Rev. 008)
HP/0/B/1009/016	Distribution of Potassium Iodide Tablets in the Event of a Radioiodine Release (Rev. 010)
HP/0/B/1009/017	Deleted
HP/1/B/1009/017	Post-Accident Containment Air Sampling System (Rev. 001)
HP/2/B/1009/017	Post-Accident Containment Air Sampling System (Rev. 000)
HP/0/B/1009/018	Deleted
HP/0/B/1009/019	Emergency Radio System Operation, Maintenance and Communication (Rev. 010)
HP/0/B/1009/024	Implementing Procedure for Estimating Food Chain Doses Under Post-Accident Conditions (Rev. 002)

DUKE POWER COMPANY
CATAWBA NUCLEAR STATION
EMERGENCY PLAN IMPLEMENTING PROCEDURES INDEX

VOLUME II

PROCEDURE	TITLE
HP/0/B/1009/025	Deleted
HP/0/B/1009/026	On-Shift Offsite Dose Projections (Rev. 002)
SH/0/B/2005/001	Emergency Response Offsite Dose Projections (Rev. 000)
SH/0/B/2005/002	Protocol for the Field Monitoring Coordinator During Emergency Conditions (Rev. 000)
OP/0/A/6200/021	Operating Procedure for Post Accident Liquid Sampling System II+ (Rev. 031)
SR/0/B/2000/001	Standard Procedure for Public Affairs Response to the Emergency Response Facility (Rev. 001)
SR/0/B/2000/002	Standard Procedure for EOF Commodities and Facilities (Rev. 001)
SR/0/B/2000/003	Activation of the Emergency Operations Facility (Rev. 003)

(R06-97)

Duke Power Company
PROCEDURE PROCESS RECORD

(1)ID No. RP/0/A/5000/002
Revision No. 033

PREPARATION

(2) Station Catawba Nuclear Station

(3) Procedure Title Notification of Unusual Event

(4) Prepared By E. T. Burdette Date 12/28/99

(5) Requires 10CFR50.59 evaluation?
- ☒ Yes (New procedure or reissue with major changes)
- ☐ No (Revision with minor changes)
- ☐ No (To incorporate previously approved changes)

(6) Reviewed By Glenn C Mitchell (QR) Date 12/28/99

Cross-Disciplinary Review By L. Baumgarden (QR) NA ____ Date 1/13/2000

Reactivity Mgmt. Review By ____ (QR) NA GCM Date 12/28/99.

(7) Additional Reviews

Reviewed By ____ Date ____

Reviewed By ____ Date ____

(8) Temporary Approval *(if necessary)*

By ____ (SRO/QR) Date ____

By ____ (QR) Date ____

(9) APPROVED BY Richard L Swight Date 1/18/00

PERFORMANCE (Compare with control copy at least once every 14 calendar days while work is being performed)

(10) Compared with Control Copy ____ Date ____

Compared with Control Copy ____ Date ____

Compared with Control Copy ____ Date ____

(11) Dates(s) Performed ____

Work Order Number (W/O #) ____

COMPLETION

(12) Procedure Completion Verification

- ☐ Yes ☐ N/A Check lists and/or blanks properly initialed, signed, dated, or filled in NA, as appropriate?
- ☐ Yes ☐ N/A Listed enclosures attached?
- ☐ Yes ☐ N/A Data sheets attached, completed, dated and signed?
- ☐ Yes ☐ N/A Charts, graphs, etc. attached and properly dated, identified and marked?
- ☐ Yes ☐ N/A Procedure requirements met?

Verified By ____ Date ____

(13) Procedure Completion Approved ____ Date ____

(14) Remarks *(attach additional pages, if necessary)*

Duke Power Company Catawba Nuclear Station	Procedure No. RP/**0**/A/5000/002
Notification of Unusual Event	Revision No. 033
Multiple Use	Electronic Reference No. CN005GNL

Notification of Unusual Event

1. Symptoms

1.1 This condition exists when events are in process or have occurred which indicate a potential degradation of the level of safety of the plant.

2. Immediate Actions

NOTE: 1. Lines in left margin are for place keeping. Immediate actions may be performed simultaneously.

2. Only the Emergency Coordinator can complete Item 16 of the Emergency Notification Form to approve message for transmission

___ **Notify off-site agencies within 15 minutes of Emergency declaration time** using Emergency Notification Form. Refer to the appropriate notification procedure:

- RP/0/A/5000/006A, "Notifications to States and Counties from the **Control Room**"
- RP/0/A/5000/006B, "Notifications to States and Counties from the **Technical Support Center**"
- RP/0/A/5000/006C, "Notifications to States and Counties from the **Emergency Operations Facility**"

___ **IF** there is an indication of a radioactive release **AND** the TSC is not activated, contact RP shift to perform off-site dose assessment per HP/0/B/1009/026.

___ **IF** a radioactive release or hazardous material spill is occurring or has occurred **AND** the TSC is not activated, contact Environmental Management (EM), ext. 3333 for assistance in reporting to state, local or federal authorities. After hours, contact the Environmental Duty person by phone or pager. **IF** no answer, page 8-777-3333 which will page all Environmental Management personnel.

___ **IF** a Security Event exists, discuss the need to make the following announcement over the PA system with Security at extension 5364:

"This is the Operations Shift Manager. A Security Event is in progress. Do not move about the site. Remain at your present location until further notice. Report any suspicious activities to the CAS at extension 5364." **Repeat announcement.**

___ **Notify the NRC** using RP/0/B/5000/013, "NRC Notification Requirements." This notification should be made as quickly as possible but shall be made within one hour of the emergency declaration time.

3. Subsequent Actions

NOTE:	Subsequent Actions are not required to be followed in any particular sequence.

___ Notify Duty Station Manager (see current duty list).

___ Make Follow-up Notifications using applicable RP/0/A/5000/006A, RP/0/A/5000/006B, or RP/0/A/5000/006C.

NOTE:	Normally the Emergency Response Organization (ERO) is not activated at the Unusual Event (UE) classification; however, if the Operations Shift Manager or Station Manager decides to activate at the UE classification, refer to Enclosure 4.1.

___ Augment shift resources to assess and respond to the emergency situation as needed.

___ **IF** Security Event announcement, discussed above, was made over the PA system, make the following announcement over the PA system after the Security Event has been terminated:

"This is the Operations Shift Manager. The Security Event has been terminated. Return to normal work activity." **Repeat announcement**.

___ Assign the Emergency Planning Manager (or delegate) to close out the Emergency by a verbal summary to county and state authorities. Document this summary using Enclosure 4.2.

___ Assign an individual to provide a written summary to state and county authorities within thirty days. This report could be an LER or written report if an LER is not required.

Person assigned responsibility _____

4. Enclosures

4.1 Emergency Organization Activation

4.2 Unusual Event Close Out Briefing with States and Counties

5. Activate ERO pagers

- Use the Quikpage Key Pad located in the Control Room (***IF*** *Control Room key pad is unavailable, use key pad located in TSC Off-Site Communicator area*).

  1) Type "ERO" and press "ENTER"

  2) Press "M"

  3) Press appropriate message key:

     F1 for Catawba Drill

     OR

     F6 for Catawba Emergency

NOTE:	Specific facilities to be activated could be any combination of the TSC/OSC/EOF.

  4) Ensure the cursor is at the end of the line and type:

     "Unusual Event declared at (time) . Activate (specific facilities to be activated) ."

  5) Press "ENTER"

  6) Monitor pager located at the Quikpage Key Pad to verify ERO pager activation

     - **IF** Quikpage Key Pad is unavailable in both Control Room and TSC, dial 8-777-8376. When prompted, enter numeric password **2580.** When prompted, enter activation code **6789#.**

NOTE: Activation of the automatic dialing call back system is not required when activating only the TSC and OSC

6. Activate Automatic Dialing Call Back System (Community Alert Network)

NOTE: Back-up telephone number for Community Alert Network is (518) 862-0987.

6.1 Dial 1-800-552-4226 (Hotline/Activation Line)

6.2 **IF** CAN is being activated for a **DRILL**, read one of the following messages depending on day and time.

IF Monday through Thursday between 0700 through 1730, read the following message:

"This is ____(name)____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Day List message number 5. Please call me back to verify system operation at _____."
(Phone # in Simulator)

IF not Monday through Thursday between 0700 through 1730, read the following message:

"This is ____(name)____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Night List message number 5. Please call me back to verify system operation at _____."
(Phone # in Simulator)

6.3 **IF** CAN is being activated for an **EMERGENCY**, read one of the following messages depending on day and time.

IF Monday through Thursday between 0700 through 1730, read the following message:

"This is ____(name)____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Day List message number 6. Please call me back to verify system operation at (803) 831-7332."

IF not Monday through Thursday between 0700 through 1730, read the following message:

"This is ____(name)____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Night List message number 6. Please call me back to verify system operation at (803) 831-7332."

Enclosure 4.2

Unusual Event Close Out Briefing with States and Counties

Person Providing Verbal Summary: _____

Brief Event Description: _____

_____

_____

Agency	Person Contacted	Date/Time
South Carolina	_____	____/____
North Carolina	_____	____/____
York County	_____	____/____
Gaston County	_____	____/____
Mecklenburg County	_____	____/____

Comments/Questions from States and Counties: _____

_____

_____

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_____

(R06-97)

Duke Power Company
PROCEDURE PROCESS RECORD

(1)ID No. RP/0/A/5000/003
Revision No. 035

PREPARATION

(2) tation Catawba Nuclear Station

(3) Procedure Title Alert

(4) Prepared By E. T. Beadle Date 12/28/99

(5) Requires 10CFR50.59 evaluation?
- ☒ Yes (New procedure or reissue with major changes)
- ☐ No (Revision with minor changes)
- ☐ No (To incorporate previously approved changes)

(6) Reviewed By GARY L MITCHELL (QR) Date 12/28/99.

Cross-Disciplinary Review By L. Baumgarden (QR) NA ____ Date 1/13/2000

Reactivity Mgmt. Review By ____ (QR) NA GLM Date 12/28/99.

(7) Additional Reviews

Reviewed By ____ Date ____

Reviewed By ____ Date ____

(8) Temporary Approval *(if necessary)*

By ____ (SRO/QR) Date ____

By ____ (QR) Date ____

(9) APPROVED BY Richard L Swigart Date 1/18/00

PERFORMANCE (Compare with control copy at least once every 14 calendar days while work is being performed)

(10) Compared with Control Copy ____ Date ____

Compared with Control Copy ____ Date ____

Compared with Control Copy ____ Date ____

(11) Dates(s) Performed ____

Work Order Number (W/O #) ____

COMPLETION

(12) Procedure Completion Verification

- ☐Yes ☐ N/A Check lists and/or blanks properly initialed, signed, dated, or filled in NA, as appropriate?
- ☐Yes ☐ N/A Listed enclosures attached?
- ☐Yes ☐ N/A Data sheets attached, completed, dated and signed?
- ☐Yes ☐ N/A Charts, graphs, etc. attached and properly dated, identified and marked?
- ☐Yes ☐ N/A Procedure requirements met?

Verified By ____ Date ____

(13) Procedure Completion Approved ____ Date ____

(14) Remarks *(attach additional pages, if necessary)*

Duke Power Company Catawba Nuclear Station **Alert** **Multiple Use**	Procedure No. RP/**0**/A/5000/003 Revision No. 035 Electronic Reference No. CN005GNM

Alert

1. Symptoms

1.1 Events are in process or have occurred which involve an actual or potential substantial degradation of the level of safety of the plant.

2. Immediate Actions

NOTE:	Lines in left margin are for place keeping. Immediate actions may be performed simultaneously.

___ **Advise site personnel** by making the following announcement over the plant PA system: *"This is the Operations Shift Manager. An Alert has been declared for Unit _____ based on _____. Activate the TSC, OSC, and EOF."* **Repeat announcement.**
(brief description of event)

___ **Activate Emergency Organization** by using Enclosure 4.1.

___ **Notify off-site agencies within 15 minutes of Emergency declaration time** using an Emergency Notification Form. Refer to one of the following notification procedures for instructions:

- RP/0/A/5000/006A, "Notifications to States and Counties from the **Control Room**"
- RP/0/A/5000/006B, "Notifications to States and Counties from the **Technical Support Center**"
- RP/0/A/5000/006C, "Notifications to States and Counties from the **Emergency Operations Facility**"

___ **IF** there is an indication of a radioactive release **AND** the TSC is not activated, contact RP shift to perform off-site dose assessment per HP/0/B/1009/026.

___ **IF** a radioactive release or hazardous material spill is occurring or has occurred **AND** the TSC is not activated, contact Environmental Management (EM), ext. 3333 for assistance in reporting to state, local or federal authorities. After hours, contact the Environmental Duty person by phone or pager. **IF** no answer, page 8-777-3333 which will page all Environmental Management personnel.

___ **IF** a Security Event exists, discuss the feasibility of conducting a site assembly with the Security Shift Supervisor at extension 5364.

IF a Site Assembly is not feasible per Security,

___ Announce over the plant PA System:

"This is the Operations Shift Manager. A security event is in progress. Do not move about the site. Remain at your present location until further notice. Report any suspicious activities to the CAS at extension 5364." **Repeat Announcement.**

___ N/A the following step:

___ **Conduct a Site Assembly** using RP/0/A/5000/010, "Conducting a Site Assembly or Preparing the Site for an Evacuation."

___ **Notify the NRC** using RP/0/B/5000/013, "NRC Notification Requirements." This notification should be made as quickly as possible but shall be made within one hour of the emergency declaration time.

___ Initiate Emergency Response Data System (ERDS) transmission by performing the following:

___ Type "ERDS" or select "Main," then "General," then "ERDS" on a Control Room OAC workstation connected to the affected unit's OAC

___ Initiate ERDS transmission by depressing F1 or clicking "Activate."

___ **IF** ERDS transmission will not connect to the NRC, inform the NRC using ENS. The TSC Data Coordinator will troubleshoot and initiate ERDS transmission upon arrival in the TSC.

3. Subsequent Actions

NOTE: Subsequent Actions are not required to be followed in any particular sequence.

___ Ensure RP has dispatched technicians for on-site monitoring/surveys per HP/0/B/1009/009, "Guidelines for Accident and Emergency Response."

___ Make Follow-up Notifications using applicable RP/0/A/5000/006A (CR), RP/0/A/5000/006B (TSC), or RP/0/A/5000/006C (EOF).

___ RP/0/A/5000/018, "Emergency Worker Dose Extension," shall be used to authorize emergency worker doses expected to exceed normal occupational exposure limits during a declared emergency event or exceed blanket dose extension limits authorized by the Radiation Protection Manager.

___ Augment shift resources to assess and respond to the emergency situation as needed.

___ Announce over the plant PA system the current emergency classification level and summary of plant status.

___ Assess emergency conditions and the corresponding emergency classification. See RP/0/A/5000/001, "Classification of Emergency," then:

Remain in an Alert

OR

Escalate to a more severe emergency classification

OR

Reduce to a less severe emergency classification
(Refer to Enclosure 4.3)

OR

Terminate the emergency (Refer to RP/0/A/5000/020 or SR/0/B/2000/003 for Termination Criteria).

- Announce any emergency classification level changes over the plant PA, including a summary of plant status.

___ **IF** Security Event announcement, discussed above, was made over the PA system, conduct a Site Assembly using RP/0/A/5000/010, "Conducting a Site Assembly or Preparing the Site for an Evacuation," and make the following announcement over the PA system after the Security Event has been terminated:

"This is the Operations Shift Manager. The Security Event has been terminated. Proceed to your Site Assembly point." **Repeat announcement**.

___ Provide turnover to TSC Emergency Coordinator using Enclosure 4.2.

___ In the event that a worker's behavior or actions contributed to an actual or potential substantial degradation of the level of safety of the plant (incidents resulting in an Alert or higher emergency declaration), the supervisor must consider and establish whether or not a for cause drug/alcohol screen is required. The FFD Program Administrator or designee is available to discuss/assist with the incident.

___ The EOF Director shall close out the emergency with a verbal summary to county and state authorities. Document this summary using Enclosure 4.4.

___ The EOF Director shall assign an individual to provide a written report to county and state authorities within thirty days. This report could be an LER or a written report if an LER is not required.

Person assigned responsibility _____

4. Enclosures

4.1 Emergency Organization Activation

4.2 Emergency Coordinator Turnover Form

4.3 Criteria for Downgrading an Emergency Level

4.4 Alert Close Out Briefing with States and Counties

1. Activate ERO Pagers

- Use the Quikpage Key Pad located in the Control Room (***IF*** *Control Room key pad is unavailable, use key pad located in TSC Off-Site Communicator area*).

  1) Type "ERO" and press "ENTER"

  2) Press "M"

  3) Press appropriate message key:

     F1 for Catawba Drill

     OR

     F6 for Catawba Emergency

  4) Ensure cursor is at the end of the line and type "Alert declared at (time) . Activate TSC/OSC/EOF."

  5) Press "ENTER"

  6) Monitor pager located at the Quikpage key pad to verify ERO pager activation.

- **IF** Quikpage Key Pad is unavailable in both Control Room and TSC, dial 8-777-8376. When prompted, enter numeric password **2580.** When prompted, enter activation code **6789#.**

2. Activate Automatic Dialing Call Back System (Community Alert Network)

NOTE:	Back-up telephone number for Community Alert Network is (518) 862-0987.

2.1 Dial 1-800-552-4226 (Hotline/Activation Line)

2.2 **IF** CAN is being activated for a **DRILL**, read one of the following messages depending on day and time.

IF Monday through Thursday between 0700 through 1730, read the following message:

"This is _____(name)_____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Day List message number 5. Please call me back to verify system operation at _____."
(Phone # in Simulator)

IF not Monday through Thursday between 0700 through 1730, read the following message:

"This is _____(name)_____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Night List message number 5. Please call me back to verify system operation at _____."
(Phone # in Simulator)

2.3 **IF** CAN is being activated for an **EMERGENCY**, read one of the following messages depending on day and time.

IF Monday through Thursday between 0700 through 1730, read the following message:

"This is _____(name)_____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Day List message number 6. Please call me back to verify system operation at (803) 831-7332."

IF not Monday through Thursday between 0700 through 1730, read the following message:

"This is _____(name)_____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Night List message number 6. Please call me back to verify system operation at (803) 831-7332."

Enclosure 4.2

Emergency Coordinator Turnover Form

1. Plant Status:

   Unit 1: _____

   _____

   Unit 2: _____

   _____

2. Emergency Classification:

   _____

   Time Declared: _____

3. Off-Site Agency Notifications Turnover to TSC Complete? _____ (Y/N)

4. Time Next Notification due: _____

5. Significant Events:

   _____ Radioactive Release
   Y/N

   _____ Injured Personnel
   Y/N

   _____ Other (Specify _____)

6. Protective Actions in Progress:

   _____ Site Assembly (Time Initiated _____)
   Y/N

   _____ Off-Site Protective Actions Recommended
   Y/N (List _____)

   _____ Other (Specify _____)
   Y/N

7. Response Procedure In Progress:

   RP_____ RP_____ RP_____

8. Actions in Progress:

   _____

   _____

   _____

Enclosure 4.3

Criteria for Downgrading an Emergency Level

Date
Initial/Time

_____ 1. The probability that plant conditions will continue to improve is evident.

_____ 2. All emergency action level notifications have been completed.

_____ 3 Emergency response facility staffing may be reduced.

_____ 4. The criteria established for the emergency classification has been evaluated. Conditions warrant a lower emergency action level.

_____ 5. The event related release of radioactive material to the environment is terminated.

_____ 6. The control of any fire, flood, earthquake or similar emergency condition is acceptable.

_____ 7. Any corrective actions specified by the Emergency Coordinator to place the plant in a safe condition have been completed and the plant has been placed in the appropriate operating mode.

_____ 8. The Emergency Coordinator has evaluated the plant status with respect to the Emergency Action Levels and recommends downgrading the emergency classification.

_____ 9. Emergency classification level downgraded to _____

_____

Enclosure 4.4

Alert Close Out Briefing with States and Counties

Person Providing Verbal Summary: _____

Brief Event Description: _____

_____

_____

_____

Agency	Person Contacted Date/Time
South Carolina	_____
North Carolina	_____
York County	_____
Gaston County	_____
Mecklenburg County	_____

Comments/Questions from States and Counties: _____

_____

_____

_____

_____

_____

_____

_____

_____

_____

(R06-97)

Duke Power Company
PROCEDURE PROCESS RECORD

(1)ID No. RP/0/A/5000/004
Revision No. 037

PREPARATION

(2) Station Catawba Nuclear Station

(3) Procedure Title Site Area Emergency

(4) Prepared By E.T. Beadle Date 1/31/2000

(5) Requires 10CFR50.59 evaluation?
- ☒ Yes (New procedure or reissue with major changes)
- ☐ No (Revision with minor changes)
- ☐ No (To incorporate previously approved changes)

(6) Reviewed By GARY CMITCHELL. (QR) Date 1/31/2000

Cross-Disciplinary Review By _____ (QR) NA GLM Date 1/31/2000

Reactivity Mgmt. Review By _____ (QR) NA GLM Date 1/31/2000

(7) Additional Reviews

Reviewed By _____ Date _____

Reviewed By _____ Date _____

(8) Temporary Approval *(if necessary)*

By _____ (SRO/QR) Date _____

By _____ (QR) Date _____

(9) APPROVED BY Richard L Swiggart Date 1/31/2000

PERFORMANCE (Compare with control copy at least once every 14 calendar days while work is being performed)

(10) Compared with Control Copy _____ Date _____

Compared with Control Copy _____ Date _____

Compared with Control Copy _____ Date _____

(11) Dates(s) Performed _____

Work Order Number (W/O #) _____

COMPLETION

(12) Procedure Completion Verification

- ☐Yes ☐ N/A Check lists and/or blanks properly initialed, signed, dated, or filled in NA, as appropriate?
- ☐Yes ☐ N/A Listed enclosures attached?
- ☐Yes ☐ N/A Data sheets attached, completed, dated and signed?
- ☐Yes ☐ N/A Charts, graphs, etc. attached and properly dated, identified and marked?
- ☐Yes ☐ N/A Procedure requirements met?

Verified By _____ Date _____

(13) Procedure Completion Approved _____ Date _____

(14) Remarks *(attach additional pages, if necessary)*

Duke Power Company Catawba Nuclear Station **Site Area Emergency** **Multiple Use**	Procedure No. RP/**0**/A/5000/004 Revision No. 037 Electronic Reference No. CN005GNN

Site Area Emergency

1. Symptoms

1.1 Events are in process or have occurred which involve actual or likely major failures of plant functions needed for protection of the public.

2. Immediate Actions

NOTE:	Lines in left margin are for place keeping. Immediate actions may be performed simultaneously.

_____ **Advise site personnel** by making the following announcement over the plant PA system: "This is the Operations Shift Manager. A Site Area Emergency has been declared for Unit _____ based on _____. Activate the TSC, OSC, and EOF." (brief description of event)

_____ **Repeat announcement.**

_____ **Activate Emergency Organization** by using Enclosure 4.1.

_____ **Notify off-site agencies within 15 minutes of Emergency declaration time** using Emergency Notification Form. Refer to one of the following notification procedures for instructions:

- RP/0/A/5000/006A, "Notifications to States and Counties from the **Control Room**"
- RP/0/A/5000/006B, "Notifications to States and Counties from the **Technical Support Center**"
- RP/0/A/5000/006C, "Notifications to States and Counties from the **Emergency Operations Facility**"

_____ **IF** there is an indication of a radioactive release **AND** the TSC is not activated, contact RP shift to perform off-site dose assessment per HP/0/B/1009/026.

_____ **IF** a radioactive release or hazardous material spill is occurring or has occurred **AND** the TSC is not activated, contact Environmental Management (EM), ext. 3333 for assistance in reporting to state, local or federal authorities. After hours, contact the Environmental Duty person by phone or pager. **IF** no answer, page 8-777-3333 which will page all Environmental Management personnel.

_____ **IF** a Security Event exists, discuss the feasibility of conducting a site assembly with the Security Shift Supervisor at extension 5364.

IF a Site Assembly is not feasible per Security:

_____ Announce over the plant PA system:

"This is the Operations Shift Manager. A security event is in progress. Do not move about the site. Remain at your present location until further notice. Report any suspicious activities to the CAS at extension 5364." **Repeat Announcement.**

_____ N/A the following step.

_____ **Conduct a Site Assembly** using RP/0/A/5000/010, "Conducting a Site Assembly or Preparing the Site for an Evacuation."

_____ **Notify the NRC** using RP/0/B/5000/013, "NRC Notification Requirements." This notification should be made as quickly as possible but shall be made within one hour of the emergency declaration time.

_____ **IF** Emergency Response Data System (ERDS) transmission has not been initiated (Alert classification), initiate ERDS by performing the following:

_____ Type "ERDS" or select "Main," then "General," then "ERDS" on a Control Room OAC workstation connected to the affected unit's OAC

_____ Initiate ERDS transmission by depressing F1 or clicking "Activate."

_____ **IF** ERDS transmission will not connect to the NRC, inform the NRC using ENS. The TSC Data Coordinator will troubleshoot and initiate ERDS transmission upon arrival in the TSC.

3. Subsequent Actions

NOTE:	Subsequent Actions are not required to be followed in any particular sequence.

_____ Ensure RP has dispatched On-Site and Off-Site Field Monitoring Teams with associated communications equipment per HP/0/B/1009/009, "Guidelines for Accident and Emergency Response." Make follow-up notifications to state and county authorities:

- Every hour until the emergency is terminated

OR

- If there is any significant change to the situation

OR

- As agreed upon with an Emergency Management official from each individual agency

_____ Make follow-up Protective Actions on-site as needed.

- Consider evacuation of nonessential station personnel using RP/0/A/5000/010, "Conducting a Site Assembly or Preparing the Site for an Evacuation."

_____ RP/0/A/5000/018, "Emergency Worker Dose Extension," shall be used to authorize emergency worker doses expected to exceed normal occupational exposure limits during a declared emergency event or exceed blanket dose extension limits authorized by the Radiation Protection Manager.

_____ Augment shift resources to assess and respond to the emergency situation as needed.

_____ Announce over the plant PA system the current emergency classification level and summary of plant status.

_____ Assess the emergency conditions and the corresponding emergency classification. See RP/0/A/5000/001, "Classification of Emergency," then:

Remain in a Site Area Emergency

OR

Escalate to a more severe emergency classification

OR

Reduce to a less severe emergency classification (Refer to Enclosure 4.2)

OR

Terminate the emergency (Refer to RP/0/A/5000/020 or SR/0/B/2000/003 for Termination Criteria).

- Announce any emergency classification level changes over the plant PA, including a summary of plant status.

_____ **IF** Security Event announcement, discussed above, was made over the PA system, conduct a Site Assembly using RP/0/A/5000/010, "Conducting a Site Assembly or Preparing the Site for an Evacuation," and make the following announcement over the PA system after the Security Event has been terminated:

"This is the Operations Shift Manager. The Security Event has been terminated. Proceed to your Site Assembly point." **Repeat announcement**.

_____ Provide turnover to TSC Emergency Coordinator using Enclosure 4.3.

_____ In the event that a worker's behavior or actions contributed to an actual or potential substantial degradation of the level of safety of the plant (incidents resulting in an Alert or higher emergency declaration), the supervisor must consider and establish whether or not a for cause drug/alcohol screen is required. The FFD Program Administrator or designee is available to discuss/assist with the incident.

_____ The EOF Director shall close out or recommend reduction of the emergency class by briefing of off-site authorities at the Emergency Operations Facility or by phone if necessary. Document the close out briefing using Enclosure 4.4.

_____ The EOF Director shall assign an individual to provide a written report within thirty days. This report could be an LER or a written report if an LER is not required.

_____ Person Assigned Responsibility _____

4. Enclosures

4.1 Emergency Organization Activation

4.2 Criteria For Downgrading An Emergency Level

4.3 Emergency Coordinator Turnover Form

4.4 Site Area Emergency Close Out Briefing with States and Counties

1. Activate ERO Pagers

- Use the Quikpage Key Pad located in the Control Room (*IF Control Room key pad is unavailable, use key pad located in TSC Off-Site Communicator area*).

  1) Type "ERO" and press "ENTER"

  2) Press "M"

  3) Press appropriate message key:

     F1 for Catawba Drill

     OR

     F6 for Catawba Emergency

  4) Ensure cursor is at the end of the line and type:

     "Site Area Emergency declared at (time). Activate TSC/OSC/EOF."

  5) Press "ENTER"

  6) Monitor pager located at Quikpage Key Pad to verify ERO pager activation.

- **IF** Quikpage Key Pad is unavailable in both Control Room and TSC, dial 8-777-8376. When prompted, enter numeric password **2580.** When prompted, enter activation code **6789#.**

2. Activate Automatic Dialing Call Back System (Community Alert Network)

NOTE:	Back-up telephone number for Community Alert Network is (518) 862-0987

2.1 Dial 1-800-552-4226 (Hotline/Activation Line)

- Perform step 4.1.2.2 or 4.1.2.3 depending on drill or emergency.

2.2 **IF** CAN is being activated for a **DRILL**, read one of the following messages depending on day and time. **IF** Monday through Thursday between 0700 through 1730, read the following message:

"This is _____(name)_____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Day List message number 5. Please call me back to verify system operation at _____."
(Phone # in Simulator)

IF not Monday through Thursday between 0700 through 1730, read the following message:

"This is _____(name)_____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Night List message number 5. Please call me back to verify system operation at _____."
(Phone # in Simulator)

2.3 **IF** CAN is being activated for an **EMERGENCY**, read one of the following messages depending on day and time.

IF Monday through Thursday between 0700 through 1730, read the following message:

"This is _____(name)_____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Day List message number 6. Please call me back to verify system operation at (803) 831-7332."

IF not Monday through Thursday between 0700 through 1730, read the following message:

"This is _____(name)_____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Night List message number 6. Please call me back to verify system operation at (803) 831-7332."

Enclosure 4.2

Criteria for Downgrading an Emergency Level

Date
Initial/Time

_____ 1. The probability that plant conditions will continue to improve is evident.

_____ 2. All emergency action level notifications have been completed.

_____ 3. Emergency response facility staffing may be reduced.

_____ 4 The criteria established for the emergency classification has been evaluated. Conditions warrant a lower emergency action level.

_____ 5. The event related release of radioactive material to the environment is terminated.

_____ 6. The control of any fire, flood, earthquake or similar emergency condition is acceptable.

_____ 7. Any corrective actions specified by the Emergency Coordinator to place the plant in a safe condition have been completed and the plant has been placed in the appropriate operating mode.

_____ 8. The Emergency Coordinator has evaluated the plant status with respect to the Emergency Action Levels and recommends downgrading the emergency classification.

_____ 9. Emergency classification level downgraded to _____
_____

Enclosure 4.3

Emergency Coordinator Turnover Form

1. Plant Status:

   Unit 1:_____

   _____

   Unit 2:_____

   _____

2. Emergency Classification: _____

   Time Declared: _____

3. Off-Site Agency Notifications Turnover to TSC Complete? _____(Y/N)

4. Time Next Notification Due: _____

5. Significant Events:

   _____ Radioactive Release
   Y/N

   _____ Injured Personnel
   Y/N

   _____ Other (Specify _____)
   Y/N

6. Protective Actions in Progress:

   _____ Site Assembly (Time Initiated _____)
   Y/N

   _____ Off-Site Protective Actions Recommended
   Y/N (List)_____

   _____ Other (Specify _____)
   Y/N

7. Response Procedure In Progress: _____

   RP _____ RP _____ RP _____

8. Actions in Progress:

   _____

   _____

   _____

Enclosure No. 4.4

RP/**0**/A/5000/004

Page 1 of 1

Site Area Emergency Close Out Briefing with States and Counties

Person Providing Verbal Summary: _____

Brief Event Description: _____

_____

_____

_____

Agency	Person Contacted	Date/Time
South Carolina	_____	____/____
North Carolina	_____	____/____
York County	_____	____/____
Gaston County	_____	____/____
Mecklenburg County	_____	____/____

Comments/Questions from States and Counties: _____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

(R06-97)

Duke Power Company
PROCEDURE PROCESS RECORD

(1)ID No. RP/0/A/5000/005
Revision No. 037

PREPARATION

(2) Station Catawba Nuclear Station

(3) Procedure Title General Emergency

(4) Prepared By E. J. Beadle Date 12/28/99

(5) Requires 10CFR50.59 evaluation?
- ☒ Yes (New procedure or reissue with major changes)
- ☐ No (Revision with minor changes)
- ☐ No (To incorporate previously approved changes)

(6) Reviewed By GARY L MITCHELL (QR) Date 12/28/99

Cross-Disciplinary Review By L Baumgardner (QR) NA ____ Date 1/17/2000

Reactivity Mgmt. Review By ____ (QR) NA GLM Date 12/28/99

(7) Additional Reviews

Reviewed By ____ Date ____

Reviewed By ____ Date ____

(8) Temporary Approval *(if necessary)*

By ____ (SRO/QR) Date ____

By ____ (QR) Date ____

(9) APPROVED BY Richard D Swigart Date 1/18/00

PERFORMANCE (Compare with control copy at least once every 14 calendar days while work is being performed)

(10) Compared with Control Copy ____ Date ____

Compared with Control Copy ____ Date ____

Compared with Control Copy ____ Date ____

(11) Dates(s) Performed ____

Work Order Number (W/O #) ____

COMPLETION

(12) Procedure Completion Verification

- ☐ Yes ☐ N/A Check lists and/or blanks properly initialed, signed, dated, or filled in NA, as appropriate?
- ☐ Yes ☐ N/A Listed enclosures attached?
- ☐ Yes ☐ N/A Data sheets attached, completed, dated and signed?
- ☐ Yes ☐ N/A Charts, graphs, etc. attached and properly dated, identified and marked?
- ☐ Yes ☐ N/A Procedure requirements met?

Verified By ____ Date ____

(13) Procedure Completion Approved ____ Date ____

(14) Remarks *(attach additional pages, if necessary)*

Duke Power Company Catawba Nuclear Station **General Emergency** **Multiple Use**	Procedure No. RP/**0**/A/5000/005 Revision No. 037 Electronic Reference No. CN005GNO

General Emergency

1. Symptoms

1.1 Events are in process or have occurred which involve actual or imminent substantial core degradation or melting with potential for loss of containment integrity.

2. Immediate Actions

NOTE: Lines in left margin are for place keeping. Immediate actions may be performed simultaneously.

_____ **Advise site personnel** by making the following announcement over the plant PA system:

"This is the Operations Shift Manager. A General Emergency has been declared for Unit ____ based on (brief description of event). Activate the TSC, OSC, and EOF." **Repeat announcement.**

_____ **Activate Emergency Response Organization** by using Enclosure 4.1.

_____ **Make an immediate PROTECTIVE ACTION RECOMMENDATION** (PAR) to be entered on Line 15 of the Emergency Notification Form. Determine PAR based on current lower tower wind speed (use upper tower wind speed if lower tower wind speed is not available) as below:

WIND SPEED LESS THAN OR EQUAL TO 5 MPH

Evacuate zones: A0, A1, B1, C1, D1, E1, F1

AND

Shelter in place zones: A2, A3, B2, C2, D2, E2, F2, F3

OR

WIND SPEED GREATER THAN 5 MPH

Evacuate two mile radius **AND** all affected zones 5 miles downwind **AND** shelter in place remaining 10 mile EPZ as shown on Enclosure 4.2, page 2 of 2.

_____ **Notify off-site agencies within 15 minutes of Emergency declaration time** using an Emergency Notification Form. Refer to one of the following procedures for instructions:

- RP/0/A/5000/006A, "Notifications to States and Counties from the **Control Room**"
- RP/0/A/5000/006B, "Notifications to States and Counties from the **Technical Support Center**"
- RP/0/A/5000/006C, "Notifications to States and Counties from the **Emergency Operations Facility**"

_____ **IF** there is an indication of a radioactive release **AND** the TSC is not activated, contact RP shift to perform off-site dose assessment per HP/0/B/1009/26.

_____ **IF** a radioactive release or hazardous material spill is occurring or has occurred **AND** the TSC is not activated, contact Environmental Management (EM), ext. 3333, for assistance in reporting to state, local or federal authorities. After hours, contact the Environmental Duty person by phone or pager. **IF** no answer, page 8-777-3333 which will page all Environmental Management personnel.

_____ **IF** a Security Event exists, discuss the feasibility of conducting a Site Assembly with the Security Shift Supervisor at extension 5364.

IF a Site Assembly is not feasible per Security:

_____ Announce over the plant PA System:

"This is the Operations Shift Manager. A security event is in progress. Do not move about the site. Remain at your present location until further notice. Report any suspicious activities to the CAS at extension 5364." **Repeat Announcement.**

_____ N/A the following two steps.

_____ **Conduct a Site Assembly** using RP/0/A/5000/010, "Conducting a Site Assembly or Preparing the Site for an Evacuation."

_____ **Conduct a Site Evacuation** using RP/0/A/5000/010, "Conducting a Site Assembly or Preparing the Site for an Evacuation."

_____ **Notify the NRC** using RP/0/B/5000/013, "NRC Notification Requirements." This notification should be made as quickly as possible but shall be made within one hour of the emergency declaration time.

_____ **IF** Emergency Response Data System (ERDS) transmission has not been initiated (Alert or SAE classification), initiate ERDS by performing the following:

_____ Type "ERDS" or select "Main," then "General," then "ERDS" on a Control Room OAC workstation connected to the affected unit's OAC

_____ Initiate ERDS transmission by depressing F1 or clicking "Activate."

_____ **IF** ERDS transmission will not connect to the NRC, inform the NRC using ENS. The TSC Data Coordinator will troubleshoot and initiate ERDS transmission upon arrival in the TSC.

3. Subsequent Actions

NOTE:	Subsequent Actions are not required to be followed in any particular sequence.

_____ Ensure RP has dispatched On-Site and Off-Site Field Monitoring Teams with associated communications equipment per HP/0/B/1009/009, "Guidelines for Accident and Emergency Response."

_____ Evaluate specific plant conditions, off-site dose projections, field monitoring team data, and assess need to update Protective Action Recommendations made to states and counties in previous notification. Refer to:

- Enclosure 4.3, page 1 of 3, Guidance for Subsequent Protective Actions, Subsequent Protective Action Recommendation Flowchart
- Enclosure 4.4, Evacuation Time Estimates for Catawba Plume Exposure EPZ.

_____ Make follow-up notifications to state and county authorities:

- Every hour until the emergency is terminated

OR

- If there is any significant change to the situation

OR

- As agreed upon with an Emergency Management official from each individual agency

_____ RP/0/A/5000/018, "Emergency Worker Dose Extension," shall be used to authorize emergency worker doses expected to exceed normal occupational exposure limits during a declared emergency event or exceed blanket dose extension limits authorized by the Radiation Protection Manager.

_____ Augment shift resources to assess and respond to the emergency situation as needed.

_____ Announce over the plant PA system the current emergency classification level and summary of plant status.

_____ Assess the emergency conditions and the corresponding emergency classification. See RP/0/A/5000/001, "Classification of Emergency," then:

Remain in a General Emergency

OR

Terminate the emergency (Refer to RP/0/A/5000/020 or SR/0/B/2000/003 for Termination Criteria).

- Announce any emergency classification level changes over the plant PA, including a summary of plant status.

_____ **IF** Security Event announcement, discussed above, was made over the PA system, conduct a Site Assembly and Site Evacuation using RP/0/A/5000/010, "Conducting a Site Assembly or Preparing the Site for an Evacuation," and make the following announcement over the PA system after the Security Event has been terminated:

"This is the Operations Shift Manager. The Security Event has been terminated. Proceed to your Site Assembly point."

Repeat announcement.

_____ Provide turnover to TSC Emergency Coordinator using Enclosure 4.5.

_____ In the event that a worker's behavior or actions contributed to an actual or potential substantial degradation of the level of safety of the plant (incidents resulting in an Alert or higher emergency declaration), the supervisor must consider and establish whether or not a for cause drug/alcohol screen is required. The FFD Program Administrator is available to discuss/assist with the incident.

_____ EOF Director will terminate the emergency and recommend entry into Recovery by briefing the off-site authorities at the Emergency Operations Facility or if necessary by phone. Document the termination briefing using Enclosure 4.6.

_____ The EOF Director shall assign an individual to provide a written report within thirty days. This report could be an LER or a written report if an LER is not required.

Person Assigned Responsibility _____

4. Enclosures

4.1 Emergency Organization Activation

4.2 Mile Emergency Planning Zone (EPZ) Map and Protective Action Zone Determination Tables

4.3 Guidance for Subsequent Protective Actions

- Page 1 of 3, Subsequent Protective Action Recommendation Flowchart
- Page 2 of 3, Guidance for Determination of GAP Activity
- Page 3 of 3, Protective Action Guides For Large Fission Product Inventory Greater Than Gap Activity In containment

4.4 Evacuation Time Estimates for Catawba Plume Exposure EPZ

4.5 Emergency Coordinator Turnover Form

4.6 General Emergency Termination Briefing with States and Counties

1. Activate ERO Pagers

- Use the Quikpage Key Pad located in the Control Room (*IF Control Room key pad is unavailable, use key pad located in TSC Off-Site Communicator area*).

1) Type "ERO" and press "ENTER"

2) Press "M"

3) Press appropriate message key:

   F1 for Catawba Drill

   OR

   F6 for Catawba Emergency

4) Ensure cursor is at the end of the line and type:

   "General Emergency declared at ____(time)____. Activate TSC/OSC/EOF."

5) Press "ENTER"

6) Monitor pager at Quikpage Key Pad to verify ERO pager activation.

   - IF Quikpage Key Pad is unavailable in both Control Room and TSC, dial 8-777-8376. When prompted, enter numeric password **2580.** When prompted, enter activation code **6789#.**

2. Activate Automatic Dialing Call Back System (Community Alert Network)

NOTE: Back-up telephone number for Community Alert Network is (518) 862-0987

2.1 Dial 1 (800) 552-4226 (Hotline/Activation Line)

2.2 **IF** CAN is being activated for a **DRILL**, read one of the following messages depending on day and time.

IF Monday through Thursday between 0700 through 1730, read the following message:

"This is ____(name)____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Day List message number 5. Please call me back to verify system operation at _____."
(Phone # in Simulator)

IF not Monday through Thursday between 0700 through 1730, read the following message:

"This is ____(name)____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Night List message number 5. Please call me back to verify system operation at _____."
(Phone # in Simulator)

2.3 **IF** CAN is being activated for an **EMERGENCY**, read one of the following messages depending on day and time.

IF Monday through Thursday between 0700 through 1730, read the following message:

"This is ____(name)____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Day List message number 6. Please call me back to verify system operation at (803) 831-7332."

IF not Monday through Thursday between 0700 through 1730, read the following message:

"This is ____(name)____ from Duke Power, Catawba. The Password is Catawba. Please run Catawba Night List message number 6. Please call me back to verify system operation at (803) 831-7332."

Enclosure 4.2

10 Mile Emergency Planning Zone (EPZ) Map and Protective Action Zone Determination Tables

Map is located in Control Copy in Emergency Planning or Document Management

10 Mile Emergency Planning Zone (EPZ) Map and Protective Action Zone Determination Tables

Use this table to determine the recommended zones for evacuation within the:
2 mile radius and 5 miles downwind, when the windspeed is greater than 5 mph.

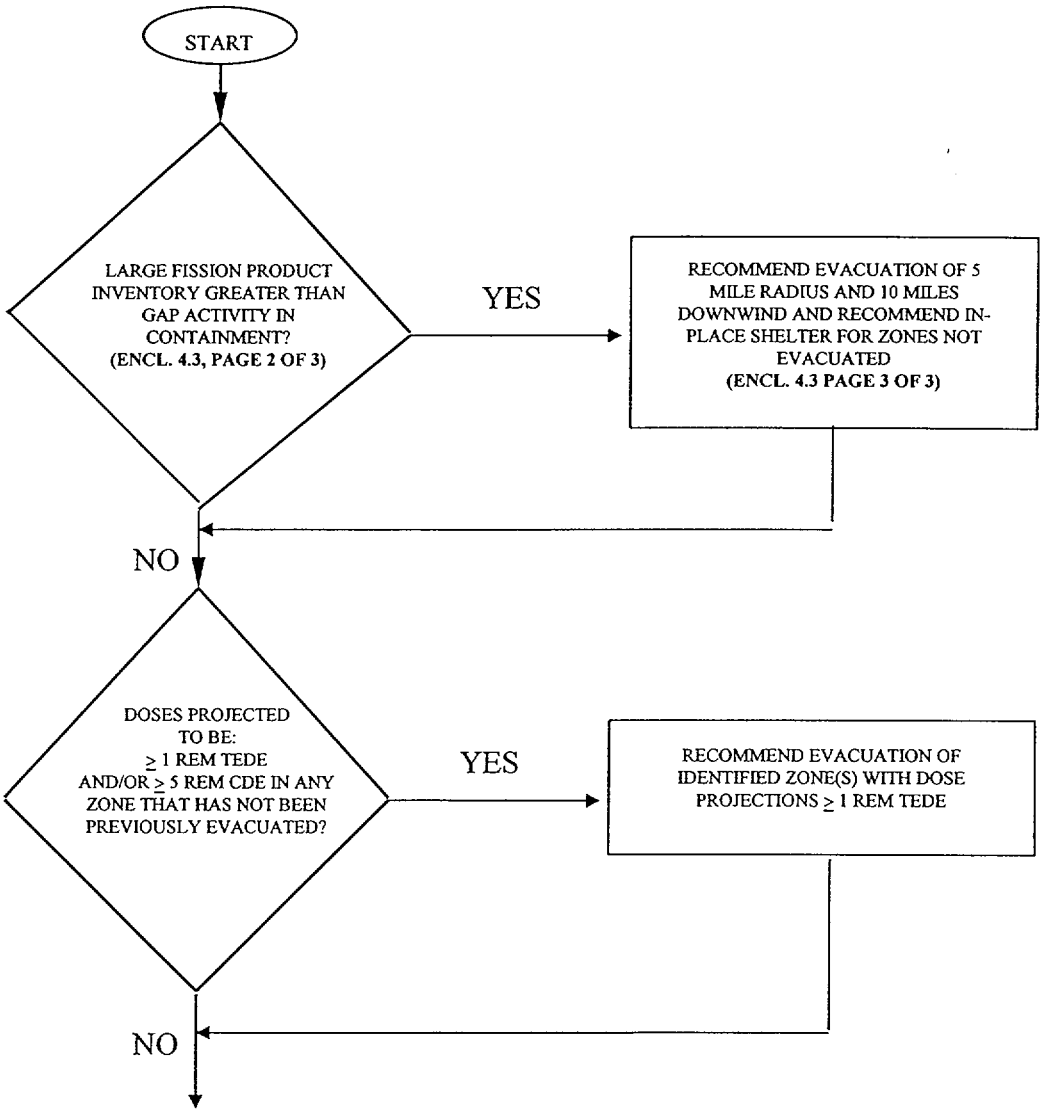
NOTE:

1. *Upper tower wind direction is preferred. If not available, use lower tower wind direction. Use wind direction from National Weather Service if site meteorological information is not available. NWS: Primary: 1-800-268-7785 Backup: 864-879-1085.*
2. *Wind direction indicator in Control Room has a scale of 0 to 540 degrees. Both 0 and 360 degrees indicate North.*
3. *Subtract 360 from wind direction indications greater than 360 degrees to arrive at wind direction for table below.*

PROTECTIVE ACTION ZONES DETERMINATION TABLE		
Wind Direction (Degrees from North) (See Notes 2 & 3)	**2 Mile Radius - 5 miles Downwind** *EVACUATE*	**Remainder of EPZ** *IN-PLACE SHELTER*
348.75 -11.25	A0, B1, C1, D1	A1, A2, A3, B2, C2, D2, E1, E2, F1, F2, F3
11.26 -33.75	A0, C1, D1	A1, A2, A3, B1, B2, C2, D2, E1, E2, F1, F2, F3
33.76 -56.25	A0, C1, D1, E1	A1, A2, A3, B1, B2, C2, D2, E2, F1, F2, F3
56.26 -78.75	A0, C1, D1, E1, F1	A1, A2, A3, B1, B2, C2, D2, E2, F2, F3
78.76 -101.25	A0, C1, D1, E1, F1	A1, A2, A3, B1, B2, C2, D2, E2, F2, F3
101.26 -123.75	A0, D1, E1, F1	A1, A2, A3, B1, B2, C1, C2, D2, E2, F2, F3
123.76 -146.25	A0, E1, F1	A1, A2, A3, B1, B2, C1, C2, D1, D2, E2, F2, F3
146.26 -168.75	A0, A1, E1, F1	A2, A3, B1, B2, C1, C2, D1, D2, E2. F2, F3
168.76 -191.25	A0, A1, E1, F1	A2, A3, B1, B2, C1, C2, D1, D2, E2. F2, F3
191.26 -213.75	A0, A1, B1, E1, F1	A2, A3, B2, C1, C2, D1, D2, E2, F2, F3
213.76 -236.25	A0, A1, B1, F1	A2, A3, B2, C1, C2, D1, D2, E1, E2, F2, F3
236.26 -258.75	A0, A1, B1, F1	A2, A3, B2, C1, C2, D1, D2, E1, E2, F2, F3
258.76 -281.25	A0, A1, B1, C1	A2, A3, B2, C2, D1, D2, E1, E2, F1, F2, F3
281.26 -303.75	A0, A1, B1, C1	A2, A3, B2, C2, D1, D2, E1, E2, F1, F2, F3
303.76 -326.25	A0, B1, C1	A1, A2, A3, B2, C2, D1, D2, E1, E2, F1, F2, F3
326.26 -348.74	A0, B1, C1, D1	A1, A2, A3, B2, C2, D2, E1, E2, F1, F2, F3

Enclosure 4.3

Guidance for Subsequent Protective Actions
Subsequent Protective Action Recommendation Flowchart



CONTINUE ASSESSMENT OF LARGE FISSION PRODUCT INVENTORY IN CONTAINMENT, DOSE PROJECTION CALCULATIONS, WIND SPEED AND WIND DIRECTION TO DETERMINE IF ADDITIONAL ZONES SHOULD BE RECOMMENDED FOR EVACUATION.

NOTE: CHANGES IN WIND SPEED AND/OR WIND DIRECTION MAY REQUIRE THAT ADDITIONAL ZONES BE RECOMMENDED FOR EVACUATION. THESE ADDITIONAL RECOMMENDATIONS ARE BASED ON THE FOLLOWING:

- IF WIND SPEED IS LESS THAN OR EQUAL TO 5 MPH AND LARGE FISSION PRODUCT INVENTORY IS LESS THAN GAP ACTIVITY IN CONTAINMENT, RECOMMEND EVACUATION OF ZONES A0, A1, B1, C1, D1, E1, AND F1 IF NOT PREVIOUSLY RECOMMENDED FOR EVACUATION
- IF WIND SPEED IS GREATER THAN 5 MPH AND LARGE FISSION PRODUCT INVENTORY IS LESS THAN GAP ACTIVITY IN CONTAINMENT, USE ENCLOSURE 4.2 PAGE 2 OF 2 TO DETERMINE IF EVACUATION OF ADDITIONAL ZONES SHOULD BE RECOMMENDED
- IF LARGE FISSION PRODUCT INVENTORY IS GREATER THAN GAP ACTIVITY IN CONTAINMENT, USE ENCLOSURE 4.3 PAGE 3 OF 3 TO DETERMINE IF EVACUATION OF ADDITIONAL ZONES SHOULD BE RECOMMENDED

Guidance for Determination of Gap Activity

Fission product inventory inside Containment is greater than gap activity if the containment radiation level exceeds the levels in the table below:

TIME AFTER SHUTDOWN (HOURS)	HIGH RANGE CONTAINMENT MONITOR READING - **EMF 53A and/or EMF 53B** *100 % GAP Activity Release*
0	2,340 R/Hr
0 - 2	864 R/Hr
2 - 4	624 R/Hr
4 - 8	450 R/Hr
>8	265 R/Hr

This Table Only Used For Large Fission Product Inventory Greater Than Gap Activity In Containment.

Use this table to determine the recommended zones for evacuation within the:

5 mile radius and 10 miles downwind for any windspeed.

NOTE: 1. *Upper tower wind direction is preferred. If not available, use lower tower wind direction. Use wind direction from National Weather Service if site meteorological information is not available. NWS: Primary: 1-800-268-7785 Backup: 864-879-1085.*

2. *Wind direction indicator in Control Room has a scale of 0 to 540 degrees. Both 0 and 360 degrees indicate North.*

3. *Subtract 360 from wind direction indications greater than 360 degrees to arrive at wind direction for table below.*

PROTECTIVE ACTION ZONES DETERMINATION TABLE		
Wind Direction (Degrees from North) (See Notes 2 & 3)	**5 Mile Radius - 10 miles Downwind** ***EVACUATE***	**Remainder of EPZ** ***IN-PLACE SHELTER***
348.75 -11.25	A0, A1, B1, B2, C1, C2, D1, D2, E1, F1	A2, A3, E2, F2, F3
11.26 -33.75	A0, A1, B1, C1, C2, D1, D2, E1, F1	A2, A3, B2, E2, F2, F3
33.76 -56.25	A0, A1, B1, C1, C2, D1, D2, E1, E2, F1	A2, A3, B2, F2, F3,
56.26 -78.75	A0, A1, B1, C1, C2, D1, D2, E1, E2, F1, F2	A2, A3, B2, F3
78.76 -101.25	A0, A1, B1, C1, D1, D2, E1, E2, F1, F2	A2, A3, B2, C2, F3,
101.26 -123.75	A0, A1, B1, C1, D1, D2, E1, E2, F1, F2, F3	A2, A3, B2, C2
123.76 -146.25	A0, A1, B1, C1, D1, E1, E2, F1, F2, F3	A2, A3, B2, C2, D2
146.26 -168.75	A0, A1, A2, B1, C1, D1, E1, E2, F1, F2, F3	A3, B2, C2, E2
168.76 -191.25	A0, A1, A2, B1, C1, D1, E1, F1, F2, F3	A3, B2, C2, D2, E2
191.26 -213.75	A0, A1, A2, A3, B1, B2, C1, D1, E1, F1, F2, F3	C2, D2, E2
213.76 -236.25	A0, A1, A2, A3, B1, B2, C1, D1, E1, F1, F2, F3	C2, D2, E2
236.26 -258.75	A0, A1, A2, A3, B1, B2, C1, D1, E1, F1, F3	C2, D2, E2, F2
258.76 -281.25	A0, A1, A2, A3, B1, B2, C1, C2, D1, E1, F1	D2, E2, F2, F3
281.26 -303.75	A0, A1, A2, A3, B1, B2, C1, C2, D1, E1, F1	D2, E2, F2, F3
303.76 -326.25	A0, A1, A3, B1, B2, C1, C2, D1, E1, F1	A2, D2, E2, F2, F3
326.26 -348.74	A0, A1, B1, B2, C1, C2, D1, D2, E1, F1	A2, A3, E2, F2, F3

Evacuation Time Estimates for Catawba Plume Exposure EPZ

Analysis Case	Approx. Distance (Miles)	Approx. Direction	Subareas Included	Evacuation Time (Minutes)[3] Fair Weather Winter Weekday	Fair Weather Winter Weeknight	Fair Weather Summer Weekend	Adverse Weather[4] Winter Weekday	Adverse Weather[4] Winter Weeknight	Adverse Weather[4] Summer Weekend
1	0 - 2	180°, E	A-0[1]	210	180	180	210	180	180
2	0 - 2	180°, W	A-0[2]	210	180	180	210	180	180
3	0 - 5	90°, NE	A-0[1], A-1	210	180	180	210	180	180
4	0 - 5	90°, SE	A-0[1], B-1, C-1	220	200	200	240	200	205
5	0 - 5	90°, NW	A-0[2], E-1, F-1	220	200	200	240	200	205
6	0 - 5	90°, SW	A-0[2], D-1	220	200	200	240	200	205
7	0 -10	90°, NE	A-0[1], A-1, A-2, A-3	210	180	325	210	185	375
8	0 -10	90°, SE	A-0[1], B-1, C-1, B-2, C-2	305	295	320	410	400	360
9	0 -10	90°, NW	A-0[2], E-1, F-1, E-2, F-2, F-3	240	200	220	260	240	225
10	0 -10	90°, SW	A-0[2], D-1, D-2	240	220	220	280	240	240
11	0 -10	360°	Entire EPZ- A-0[1], A-0[2], A-1, B-1, C-1, A-2, B-2, C-2, D-1, E-1, F-1, D-2, E-2, A-3, F-3	305	295	325	415	400	375

[1]Mecklenburg County portion of Subarea A-0.
[2]York County portion of Subarea A-0.
[3]Includes times associated with notification, preparation and travel out of the EPZ area, rounded to nearest 5-minute interval.
[4]Reduction in roadway capacities and travel speeds of 20% for summer weekend conditions (rain), 30% for winter weekday and winter weeknight conditions (ice).
* Evacuation of outdoor transient facilities throughout the entire EPZ is included in all evacuation cases, per the offsite RERP's.

Enclosure 4.5

Emergency Coordinator Turnover Form

1. Plant Status:

   Unit 1:_____

   _____

   Unit 2:_____

   _____

2. Emergency Classification: _____

   Time Declared: _____

3. Off-Site Agency Notifications Turnover to TSC Complete? _____(Y/N)

4. Time Next Notification Due: _____

5. Significant Events:

   _____ Radioactive Release
   Y/N

   _____ Injured Personnel
   Y/N

   _____ Other (Specify _____)
   Y/N

6. Protective Actions in Progress:

   _____ Site Assembly (Time Initiated _____)
   Y/N

   _____ Off-Site Protective Actions Recommended
   Y/N (List)_____

   _____ Other (Specify _____)
   Y/N

7. Response Procedure In Progress: _____

   RP _____ RP _____ RP _____

8. Actions in Progress:

   _____

   _____

   _____

Enclosure 4.6

General Emergency Termination Briefing with States and Counties

Person Providing Verbal Summary: _____

Brief Event Description: _____

_____

_____

_____

Agency	Person Contacted	Date/Time
South Carolina	_____	____/____
North Carolina	_____	____/____
York County	_____	____/____
Gaston County	_____	____/____
Mecklenburg County	_____	____/____

Comments/Questions from States and Counties: _____

_____

_____

_____

_____

_____

_____

_____

_____

_____

(R06-97)

Duke Power Company
PROCEDURE PROCESS RECORD

(1)ID No. RP/0/A/5000/007
Revision No. 017

PREPARATION

(2) Station Catawba Nuclear Station

(3) Procedure Title Natural Disaster and Earthquake

(4) Prepared By E. T. Brodie Date 12/3/99

(5) Requires 10CFR50.59 evaluation?
- ☒ Yes (New procedure or reissue with major changes)
- ☐ No (Revision with minor changes)
- ☐ No (To incorporate previously approved changes)

(6) Reviewed By Gary L Mitchell (QR) Date 12/6/99

Cross-Disciplinary Review By LB Baumgarner (QR) NA ____ Date 1/4/2000

Reactivity Mgmt. Review By ____ (QR) NA GLM Date 12/6/99.

(7) Additional Reviews

Reviewed By ____ Date ____

Reviewed By ____ Date ____

(8) Temporary Approval *(if necessary)*

____ (SRO/QR) Date ____

By ____ (QR) Date ____

(9) APPROVED BY Richard L Swigart Date 1/7/2000

PERFORMANCE (Compare with control copy at least once every 14 calendar days while work is being performed)

(10) Compared with Control Copy ____ Date ____

Compared with Control Copy ____ Date ____

Compared with Control Copy ____ Date ____

(11) Dates(s) Performed ____

Work Order Number (W/O #) ____

COMPLETION

(12) Procedure Completion Verification

- ☐ Yes ☐ N/A Check lists and/or blanks properly initialed, signed, dated, or filled in NA, as appropriate?
- ☐ Yes ☐ N/A Listed enclosures attached?
- ☐ Yes ☐ N/A Data sheets attached, completed, dated and signed?
- ☐ Yes ☐ N/A Charts, graphs, etc. attached and properly dated, identified and marked?
- ☐ Yes ☐ N/A Procedure requirements met?

Verified By ____ Date ____

(13) Procedure Completion Approved ____ Date ____

(14) marks *(attach additional pages, if necessary)*

Duke Power Company Catawba Nuclear Station	Procedure No. RP/**0**/A/5000/007
Natural Disaster and Earthquake	Revision No. 017
Multiple Use	Electronic Reference No. CN005GNT

Natural Disaster and Earthquake

1. Symptoms

NOTE:	The Duke Power Company System Coordinator will notify the Control Room for all severe weather warnings issued for York County. The Control Room is also provided with a NOAA radio.

1.1 Tornado Watch issued for York County

1.2 Tornado Warning issued for York County or Tornado on-site

1.3 Hurricane winds are expected on-site within 12 hours

1.4 Earthquake is detected by instrumentation or felt in plant

1.4.1 Seismic event alarm SMA-3 on 1MC8

1.4.2 OBE Exceeded alarm on 1AD-4, B/8

1.4.3 Light on Peak Shock Annunciator PSA-1575 on 1MC8

1.4.4 Effects of an earthquake are seen, felt or heard.

1.5 Flooding due to High Lake Level (Lake Elevation > 593.5 Mean Sea Level (MSL)) or Seiche (Lake Tidal Wave).

1.6 Low Lake Level (Lake Elevation < 557.5 Ft. MSL)

2. Immediate Actions

None.

3. Initial Actions

3.1 **IF** a Tornado Watch has been issued for York County, perform Enclosure 5.1.

3.2 **IF** a Tornado Warning has been issued for York County or Tornado on-site, perform Enclosure 5.2

3.3 **IF** Hurricane winds are expected on-site within 12 hours, perform Enclosure 5.3.

3.4 **IF** an Earthquake is detected by instrumentation or felt in plant, perform Enclosure 5.4.

3.5 **IF** Flooding due to High Lake Level (Lake Elevation > 593.5 MSL) or Seiche (Lake Tidal Wave), perform Enclosure 5.5.

3.6 **IF** Low Lake Level (Lake Elevation < 557.5 Ft. MSL), perform Enclosure 5.6.

4. Subsequent Actions

4.1 **IF** communications are lost or communications trouble is encountered, refer to the Emergency Response Telephone Directory.

4.2 Contact the Catawba Nuclear Site NRC Resident Inspector (Duty Person) anytime this procedure is entered.

5. Enclosures

5.1 Tornado Watch issued for York County

5.2 Tornado Warning issued for York County or Tornado on-site

5.3 Hurricane winds are expected on-site within 12 hours

5.4 Earthquake

5.5 Flooding due to High Lake Level (Lake Elevation > 593.5 MSL) or Seiche (Lake Tidal Wave

5.6 Low Lake Level (Lake Elevation < 557.5 Ft. MSL)

1. Initial Actions

NOTE:
1. A Tornado Watch indicates conditions are favorable for a tornado to occur.
2. Wind speed information > 90 mph shall be obtained from the National Weather Service located in Greenville/Spartanburg, S.C. at 1-800-268-7785 or 1-864-879-1085 (unpublished).
3. Initial Actions may be performed simultaneously.

1.1 Announce the following over the PA System:

"Attention all plant personnel. Attention all plant personnel. This is the Operations Shift Manager. A tornado watch has been issued for York County. Be prepared to take shelter should a tornado develop on site. Further updates will be provided as conditions warrant."

NOTE: Further determination should be made for system(s) required to be shut down by this response procedure but required to be operating by a compensatory action item.

1.2 Refer to the Open Compensatory Action Items and review for applicability.

1.3 **Consider** implementing the following:

1.3.1 Contact Security and verify that exterior doors are being closed per Security procedures.

1.3.2 **IF** a personnel safety hazard does not exist due to lightning or high winds, the Shift Work Manager will utilize appropriate personnel to lower crane booms.

1.3.3 Inform RP/Radwaste Chemistry to minimize all handling of radioactive materials and releases of radioactive waste to the environment for the duration of the Tornado Watch.

1.3.4 **IF** RN swapover to the Standby Nuclear Service Water Pond has not occurred automatically on Low Low Lake Level of 557.5 ft. MSL, refer to AP/0/A/5500/020 (Loss of Nuclear Service Water).

2. Subsequent Actions

2.1 Severe Weather Information/Forecast

To obtain the latest severe weather information/forecast for York County, contact the National Weather Service located in Greenville/Spartanburg, S.C. at 1-800-268-7785 or 1-864-879-1085 (unpublished).

2.2 Meteorological Conditions

As a backup to the Catawba site meteorological system (i.e. wind speed, wind direction, etc.), contact the National Weather Service located in Greenville/Spartanburg, S.C. at 1-800-268-7785 or 1-864-879-1085 (unpublished).

2.3 This procedure remains in effect until one of the following conditions are met:

- Termination of Tornado Watch for York County by National Weather Service

OR

- Duke Power Meteorological Group (704-594-0341) verifies that a tornado threat to the Catawba Nuclear Site no longer exists.

Tornado Warning Issued For York County OR Tornado On-Site

1. Initial Actions

NOTE:
1. Tornado Warning indicates that an actual tornado has been reported to NWS or has been sighted on radar.
2. Wind speed information > 90 mph shall be obtained from the National Weather Service located in Greenville/Spartanburg, S.C. at 1-800-268-7785 or 1-864-879-1085 (unpublished).
3. Initial Actions may be performed simultaneously.

1.1 Should the sustained winds, lasting 15 minutes, in excess of 95 mph develop on site which jeopardize the safe operation of the reactor, take the unit(s) to Hot Standby (Mode 3). For the initiation of any unit shutdown, carry out the reporting provisions of RP/0/B/5000/013, (NRC Notification Requirements).

1.2 Classify the emergency as appropriate per RP/0/A/5000/001, (Classification of Emergency).

1.3 Commence notification and other protective measures as directed by appropriate Emergency Response Procedure.

1.4 Announce the following over the PA System:

1.4.1 Tornado is not expected to pass over the Site

"Attention all plant personnel. Attention all plant personnel. This is the Operations Shift Manager. A tornado warning has been issued for York County. Be prepared to take shelter should a tornado develop on site. Further updates will be provided as conditions warrant."

1.4.2 Tornado is expected to pass over the Site

"Attention all plant personnel. Attention all plant personnel. This is the Operations Shift Manager. A tornado warning has been issued for York County. Take shelter immediately. Do not take shelter in temporary buildings or trailers. Further updates will be provided as conditions warrant."

NOTE:	Further determination should be made for system(s) required to be shut down by this response procedure but required to be operating by a compensatory action item.

1.5 Refer to the Open Compensatory Action Items and review for applicability. Expedite the restoration of important plant systems and components.

1.6 Review AP/1(2)/A/5500/007, (Loss of Normal Power), EP/1(2)/A/5000/ECA-0.0, (Loss of All AC Power), and OP/0/B/6100/013, (Standby Shutdown Facility Operation). Take the necessary actions to ensure equipment required for station blackout response is available.

1.7 Perform **OR** verify the following steps have been performed:

1.7.1 Contact Security and verify that exterior doors are being closed per Security procedures.

1.7.2 **IF** a personnel safety hazard does not exist due to lightning or high winds, the Shift Work Manager will utilize appropriate personnel to lower crane booms.

1.7.3 Determine the status of the Alternate AC Sources (SSF Diesel) and take necessary actions to ensure its availability.

1.7.4 Take necessary steps to increase CACST, UST and hotwell inventories utilizing Chemistry to assist.

1.7.5 Assure any out of service battery chargers are returned to service utilizing IAE to assist.

1.7.6 Inform RP/Radwaste Chemistry to stop all handling of radioactive materials and releases of radioactive waste to the environment for the duration of the Tornado Warning.

1.7.7 **IF** RN swapover to the Standby Nuclear Service Water Pond has not occurred automatically on Low Low Lake Level of 557.5 ft. MSL, refer to AP/0/A/5500/020 (Loss of Nuclear Service Water).

1.7.8 Ventilation Systems shall be aligned as follows:

A. Ensure the VF Systems are shutdown per OP/1(2)/A/6450/004 (Fuel Pool Ventilation System).

B. Ensure the following ventilation systems are shut down:

1. VQ per OP/1(2)/A/6450/017 (Containment Air Release and Addition System)

2. VP per OP/1(2)/A/6450/015 (Containment Purge System)

3. VE per OP/1(2)/A/6450/002 (Annulus Ventilation System)

1.7.9 Notify the responsible System Engineer on duty that all ventilation systems are being shut down, and they need to consider the possibility of condensation.

1.7.10 Ensure fuel handling operations are stopped.

1.8 **IF** a Tornado has been determined to be on site, perform the following steps:

1.8.1 Ensure all VA fans are off.

NOTE: The action taken in the next step causes the VA system to be inoperable. TS 3.0.3 is applicable on both units.

1.8.2 Depress the "INITIATE" pushbuttons on "TORNADO ISOL TRN A(B)" on 1MC-5 and 2MC-5 ensuring all automatic functions occur as expected.

1.8.3 **IF** an emergency classification has not been declared, inform York County 911 of the event.

1.8.4 **IF** York County is informed of the event, inform the NRC of this notification to another government agency using, RP/0/A/5000/013, "NRC Notifications Requirements."

2. Subsequent Actions

2.1 Severe Weather Information/Forecast

To obtain the latest severe weather information/forecast for York County, contact the National Weather Service located in Greenville/Spartanburg, S.C. at 1-800-268-7785 or 1-864-879-1085 (unpublished).

2.2 Meteorological Conditions

As a backup to the Catawba site meteorological system (i.e. wind speed, wind direction, etc.), contact the National Weather Service located in Greenville/Spartanburg, S.C. at 1-800-268-7785 or 1-864-879-1085 (unpublished).

2.3 **WHEN** conditions permit, perform a survey of plant structures and equipment (similar to normal daily rounds) to determine the extent of damage, if any, and record in both Nuclear Shift Supervisor's Logs.

2.3.1 Notify personnel from IAE and Mechanical Maintenance to assist Operations in the evaluation of weather induced damage as necessary.

2.3.2 Notify Radiation Protection personnel to survey the Reactor, Auxiliary and Fuel Pool Buildings to ensure shielding integrity.

2.3.3 Notify Chemistry personnel to survey areas where damage may release dangerous chemicals (e.g. Sulfuric Acid Storage).

2.4 **IF** applicable, discuss the extent of plant damage caused by tornado with site management and determine the need for plant shutdown and/or repair.

2.5 Restore affected plant systems to normal operation per applicable site procedures.

2.6 This procedure remains in effect until one of the following conditions are met:

- Termination of Tornado Watch for York County by National Weather Service

OR

- Duke Power Meteorological Group (704-594-0341) verifies that a tornado threat to the Catawba Nuclear Site no longer exists.

1. Initial Actions

NOTE: 1. Wind speed information > 90 mph shall be obtained from the National Weather Service located in Greenville/Spartanburg, S.C. at 1-800-268-7785 or 1-864-879-1085 (unpublished).

2. Initial Actions may be performed simultaneously.

1.1 Announce the following over the PA System:

"Attention all plant personnel. Attention all plant personnel. This is the Operations Shift Manager. Hurricane force winds are projected to be on site within 12 hours. Be prepared to take shelter should the hurricane force winds develop on site. Further updates will be provided as conditions warrant."

NOTE: Further determination should be made for system(s) required to be shut down by this response procedure but required to be operating by a compensatory action item.

1.2 Refer to the Open Compensatory Action Items and review for applicability. Expedite the restoration of important plant systems and components.

1.3 Review AP/1(2)/A/5500/007, (Loss of Normal Power), EP/1(2)/A/5000/ECA-0.0, (Loss of All AC Power) and OP/0/B/6100/013, (Standby Shutdown Facility Operation). Take the necessary actions to ensure equipment required for station blackout response is available.

NOTE: Sustained winds (lasting 15 minutes) in excess of 73 mph is used as the indicator of the arrival of the hurricane on-site. As the hurricane moves across the site wind speeds could exceed the design basis wind speed of 95 mph.

1.4 Discuss with site management to determine when and how to implement the requirement that the plant be at Hot Standby (Mode 3) two hours before the anticipated hurricane arrival at the site.

NOTE: Consideration should be given to the potential for difficulty to travel to the site following the storm due to storm debris.

1.5 Review the adequacy of site staff, with station management, to support operations and repair. IF additional personnel are deemed necessary, the current Duty List should be utilized.

1.6 Determine the status of the Alternate AC Sources (SSF Diesel) and take necessary actions to ensure its availability.

1.7 Take necessary steps to increase CACST, UST and hotwell inventories utilizing Chemistry to assist.

1.8 Assure any out of service battery chargers are returned to service utilizing IAE to assist.

1.9 **IF** a personnel safety hazard does not exist due to lightning or high winds, the Shift Work Manager will utilize appropriate personnel to lower crane booms.

1.10 Evaluate running the Diesel Generators based on previous run history prior to the arrival of hurricane force winds on site.

2. Subsequent Actions

2.1 Take the unit(s) to Hot Standby (Mode 3) two hours prior to the arrival of hurricane force winds (sustained wind speeds, lasting 15 minutes, in excess of 73 mph). For the initiation of any unit shutdown, carry out the reporting provisions of RP/0/B/5000/013, (NRC Notification Requirements).

2.2 Complete the following steps prior to the arrival of hurricane force winds on site:

2.2.1 Inform RP/Radwaste Chemistry to stop all handling of radioactive materials and releases of radioactive waste to the environment for the duration of the hurricane.

2.2.2 IF RN swapover to the Standby Nuclear Service Water Pond has not occurred automatically on Low Low Lake Level of 557.5 ft. MSL, refer to AP/0/A/5500/020 (Loss of RN System)

2.2.3 Ventilation Systems shall be aligned as follows:

A. Minimize releases from VQ System while controlling containment pressure throughout the emergency per OP/1(2)/A/6450/017 (Containment Air Release and Addition System).

B. Ensure the following ventilation systems are shut down:

1. VF per OP/1(2)/A/6450/004 (Fuel Pool Ventilation System)

2. VP per OP/1(2)/A/6450/015 (Containment Purge System)

3. VE per OP/1(2)/A/6450/002 (Annulus Ventilation System)

2.2.4 Notify the responsible System Engineer on duty that VF, VP, and VE ventilation systems are being shut down, and they need to consider the possibility of condensation.

2.2.5 Ensure fuel handling operations are stopped.

2.3 **IF** the hurricane has been determined to be on site, perform the following steps:

2.3.1 Ensure all VA fans are off.

NOTE:	The action taken in the next step causes the VA system to be inoperable. TS 3.0.3 is applicable on both units

2.3.2 Depress the "INITIATE" pushbuttons on "TORNADO ISOL TRN A(B)" on 1MC-5 and 2MC-5 ensuring all automatic functions occur as expected.

2.4 Classify the emergency as appropriate per RP/0/A/5000/001, (Classification of Emergency), and commence notification and other protective measures as directed by appropriate Emergency Response Procedure.

2.5 Severe Weather Information/Forecast

To obtain the latest severe weather information/forecast for York County, contact the National Weather Service located in Greenville/Spartanburg, S.C. at 1-800-268-7785 or 1-864-879-1085 (unpublished).

2.6 Meteorological Conditions

As a backup to the Catawba site meteorological system (i.e. wind speed, wind direction, etc.), contact the National Weather Service located in Greenville/Spartanburg, S.C. at 1-800-268-7785 or 1-864-879-1085 (unpublished).

2.7 **IF** applicable and **WHEN** conditions permit, perform a survey of plant structures and equipment to determine the extent of damage, if any, and record in both Nuclear Shift Supervisor's Logs.

2.7.1 Notify personnel from IAE and Mechanical Maintenance to assist Operations in the evaluation of weather induced damage as necessary.

2.7.2 Notify Radiation Protection personnel to survey the Reactor, Auxiliary and Fuel Pool Buildings to ensure shielding integrity.

2.7.3 Notify Chemistry personnel to survey areas where damage may release dangerous chemicals (e.g. Sulfuric Acid Storage).

2.8 Restore affected plant systems to normal operation per applicable site procedures.

2.9 This procedure remains in effect until the Duke Power Meteorological Group (704-594-0341) verifies that the threat of hurricane force winds to the Catawba Nuclear Site no longer exists.

1. Initial Actions

NOTE:
1. Initial Actions may be performed simultaneously.
2. The four Reactor Coolant Leakage Detection Systems are not seismically qualified and must be assumed to be inoperable following any seismic event. EMF38(L) and EMF39(L) can be verified to be operable based on power availability and sample pump operation.
3. Reactor Coolant Leakage Detection Systems are not required to be operable during Cold Shutdown.
4. An OAC Alarm at point CID 2252 indicates that there has been a recording of an event by seismic instrumentation. This alarm is in addition to an event indicator and initiation by starter unit MIMT 5090.

1.1 Following any earthquake that is felt in the plant or is recorded on instrumentation, including earthquakes smaller than OBE, assume all four Reactor Coolant Leakage Detection Systems (listed below) are inoperable:

1.1.1 Containment Floor and Equipment Sump Level and Flow Monitoring System

1.1.2 VUCDT Level Monitoring System)

1.1.3 EMF38(L)

1.1.4 EMF39(L)

1.2 Determine the operable status of 1(2)EMF38(L) and 1(2)EMF39(L) by the following methods and apply the appropriate action statement for Technical Specification 3.4.15.

A. Perform a source check from the Control Room to verify that power to 1(2)EMF38(L) and 1(2)EMF39(L) is available.

B. Visually verify that 1(2)EMF38(L) and 1(2)EMF39(L) sample pump is operational

NOTE:

1. Decision on Shutdown **IF** the OBE has been exceeded **OR** significant damage is found during operator walkdowns, the plant should be shutdown in an orderly manner for more detailed inspections. **IF** the plant has tripped under conditions which would warrant shutdown, the plant should remain shutdown for detailed inspections.

2. Pre-Shutdown Inspections Following a decision to shutdown the plant, but prior to initiating shutdown, visual inspections of essential safe shutdown equipment should be performed to determine its readiness. Other factors outside of the control of the plant that could affect the timing of the shutdown (e.g. availability/reliability of off site power), should also be evaluated at this time.

3. Normal Shutdown **WHEN** plant capability to safely shutdown has been verified, normal shutdown would proceed. Under all circumstances the method and pace at which the Reactor is brought to a safe condition should continue to be based upon all instrumentation indications and the operator's judgment.

1.3 **IF** the Operational Bases Earthquake (OBE) Exceeded Alarm 1AD-4, B/8, is received **AND** the effects of an earthquake are felt, immediately take the Unit(s) to Hot Standby (Mode 3). For the initiation of any unit shutdown, carry out the reporting provisions of RP/0/B/5000/013, (NRC Notification Requirements).

1.4 **IF** the Operational Bases Earthquake (OBE) Exceeded Alarm 1AD-4, B/8, is received **AND** the effects of an earthquake are felt, swap RN to the Standby Nuclear Service Water Pond in accordance with OP/0/A/6400/006C (Nuclear Service Water System).

1.5 Classify the emergency as appropriate per RP/0/A/5000/001, (Classification of Emergency), and commence notification and other protective measures as directed by appropriate Emergency Response Procedure.

1.6 **IF** the FWST level is decreasing, verify valves 1(2)FW33A and 1(2)FW49B are closed.

1.7 **WHEN** appropriate, announce the impending condition over the plant PA System.

2. Subsequent Actions

2.1 Notify IAE to remove the magnetic tapes from the SMA-3 recorder to evaluate and verify the magnitude of the earthquake according to AM/0/B/5100/010, "Kinemetrics Seismic Monitoring System Data Collection." Section 3.0 of this enclosure is provided as a reference for seismic monitoring instrument locations.

2.2 **IF** the earthquake intensity is >0.15g horizontal **OR** >0.1g vertical (SSE level) as measured by 1MIMT 5070 (provided by IAE from step 2.1), proceed to take the unit(s) to Cold Shutdown (Mode 5). For the initiation of any unit shutdown, carry out the reporting provisions of RP/0/B/5000/013, (NRC Notification Requirements).

2.3 Seismic verification may be obtained by calling the National Earthquake Information Service at 1-800-525-7848 or 1-303- 273-8500.

2.4 All records made by accelerographs and recorders shall be evaluated to verify the extent of the earthquake.

2.5 **IF** the earthquake was determined to be >OBE, Regulatory Compliance shall make a report to NRC Region II within 24 hours via telephone. (10CFR 50.72)

2.6 **IF** the earthquake was determined to be <OBE but recorded on seismic instrumentation, Regulatory Compliance shall prepare and submit a special report to the NRC as defined in Selected Licensee Commitments (SLC) Section 16.7-2, Seismic Instrumentation, Testing Requirements, b.

2.7 **IF** applicable and **WHEN** conditions permit, perform a survey of plant structures and equipment (similar to normal daily rounds) to determine the extent of damage, if any, and record in both Shift Supervisor's Logs.

2.7.1 Notify personnel from IAE and Mechanical Maintenance to assist Operations in the evaluation of damage as necessary.

2.7.2 Notify Radiation Protection personnel to survey the Reactor, Auxiliary and Fuel Pool Buildings to ensure shielding integrity.

2.7.3 Notify Chemistry personnel to survey areas where damage may release dangerous chemicals (e.g. Sulfuric Acid Storage).

2.8 Restore affected plant systems to normal operation per applicable site procedures.

3. Station Seismic Monitoring Instruments

Instrument #	Name	Location
1MIMT-5010	Peak Accelerograph	Cold Leg Accumulator 1A
1MIMT-5020	Peak Accelerograph	NC Pipe at PZR Surge Line
1MIMT-5030	Peak Accelerograph	NI Pump 1A

NOTE: 1MIMT-5040 also provides input to Peak Shock Annunciator (PSA1575)

1MIMT-5040	Spectrum Recorder	RB Basement 0°
1MIMT-5050	Spectrum Recorder	PZR Lower Support
1MIMT-5060	Spectrum Recorder	Aux Bldg. 577 EL (PP-56)

NOTE: 1MIMT-5000 provides indication of OBE Exceeded on 1AD-4, B/8 in Control Room

1MIMT-5000	Seismic Switch	RB Basement 0°
1MIMT-5070	Strong Motion Accelerograph	RB Basement 0°
1MIMT-5080	Strong Motion Accelerograph	Annulus 619 EL 0°
1MIMT-5090	Starter Unit for SMA-3	RB Basement 0°

Seismic Instrumentation System Information

Seismic switch 1MIMT-5000 provides a Control Room Annunciator 1AD4/B8 for indication of OBE exceeded. 1MIMT 5070/5080 receive a start signal from 1MIMT-5090. 1MIMT 5070/5080 provide magnetic tape recordings which must be played back on SMP-1 to get a recording of the data to be analyzed.

1MIMT-5040 provides Control Room indication of greater than 70% OBE (amber light) or greater than 100% OBE (red light) for certain frequencies between 2 and 25.4 Hz.

1MIMT-5010/5020/5030/5040/5050/5060 contain removable scratch plates. These scratch plates provide indication of peak accelerations.

Enclosure 5.5

Flooding Due to High Lake Level (Lake Elevation > 593.5 MSL) or Seiche (Lake Tidal Wave)

1. Initial Actions

NOTE:	1. Seiche is same as High Lake Level. 2. Initial Actions may be performed simultaneously.

1.1 Should the lake level exceed 593.5 Ft MSL and jeopardize the safe operation of the reactor, take the unit(s) to Hot Standby (Mode 3). For the initiation of any unit shutdown, carry out the reporting provisions of RP/0/B/5000/013, (NRC Notification Requirements).

1.2 Contact SPOC to close the Auxiliary Service Building rolling doors AR2 (Hot Tool Crib) and AR5 (Waste Shipping Area). **IF** the rolling doors are damaged to the extent they cannot be closed, insure a suitable 7½" barrier is installed across the door opening above the 594+0 Floor Slab until the door(s) can be repaired.

1.3 Classify the emergency as appropriate per RP/0/A/5000/001, (Classification of Emergency), and commence notification and other protective measures as directed by appropriate Emergency Response Procedure.

1.4 **WHEN** appropriate, announce the impending condition over the plant PA System.

2. Subsequent Actions

2.1 **IF** applicable and **WHEN** conditions permit, perform a survey of plant structures and equipment to determine the extent of damage, if any, and record in both Nuclear Shift Supervisor's Logs.

2.1.1 Notify personnel from IAE and Mechanical Maintenance to assist Operations in the evaluation of weather induced damage as necessary.

2.1.2 Notify Radiation Protection personnel to survey the Reactor, Auxiliary and Fuel Pool Buildings to ensure shielding integrity.

2.1.3 Notify Chemistry personnel to survey areas where damage may release dangerous chemicals (e.g. Sulfuric Acid Storage).

2.2 Restore affected plant systems to normal operation per applicable site procedures.

Enclosure 5.6

Low Lake Level
(Lake Elevation < 557.5 Ft. MSL)

1. Initial Actions

NOTE:	Initial Actions may be performed simultaneously.

1.1 Classify the emergency as appropriate per RP/0/A/5000/001, (Classification of Emergency), and commence notification and other protective measures as directed by appropriate Emergency Response Procedure.

1.2 Lake level elevations below 557.5 FT. MSL shall be obtained from the Duke Power Company System Coordinator on the Control Room System Coordinator phone or at 8-382-4413.

1.3 Should the lake level decrease below 550.4 Ft MSL and jeopardize the safe operation of the reactor, take the unit(s) to Hot Standby (Mode 3). For the initiation of any unit shutdown, carry out the reporting provisions of RP/0/B/5000/013, (NRC Notification Requirements).

1.4 **WHEN** appropriate, announce the impending condition over the plant PA System.

2. Subsequent Actions

2.1 **IF** applicable and **WHEN** conditions permit, perform a survey of plant structures and equipment to determine the extent of damage, if any, and record in both Nuclear Shift Supervisor's Logs.

2.1.1 Notify personnel from IAE and Mechanical Maintenance to assist Operations in the evaluation of weather induced damage as necessary.

2.1.2 Notify Radiation Protection personnel to survey the Reactor, Auxiliary and Fuel Pool Buildings to ensure shielding integrity.

2.1.3 Notify Chemistry personnel to survey areas where damage may release dangerous chemicals (e.g. Sulfuric Acid Storage).

2.2 Restore affected plant systems to normal operation per applicable site procedures.

(R06-97)

Duke Power Company
PROCEDURE PROCESS RECORD
FOR STANDARD PROCEDURES

(1) ID No. SR/0/B/2000/002
Revision No. 001

PREPARATION ☒

(2) **Procedure Title:** **Standard Procedure for EOF Commodities and Facilities**

(3) Prepared By B. R. Lutt Date 12/29/99

(4) Applicable To:	☐ ONS	☒ MNS	☒ CNS
(5) Technical Advisor		[signature]	B.R. Lutt
(6) Requires 10CFR50.59 Evaluation?	☐ Yes ☐ No	☑ Yes ☐ No	☒ Yes ☐ No
	YES = New procedure or revision with major changes at applicable site		NO = Revision with minor changes NO = To incorporate previously approved changes
(7) Review (QR)	By _____ Date _____	By Alan L. Beaver Date 1/19/2000	By GARY L MITCHELL Date 12/29/99.
Cross-Disciplinary Review (QR)	By _____ NA ____ Date ____	By _____ NA AHB Date 1/19/2000	By _____ NA GLM Date 12/29/99
Reactivity Mgmt. Review (QR)	By _____ NA ____ Date ____	By _____ NA AHB Date 1/19/2000	By _____ NA GLM Date 12/29/99.
(8) Additional Reviews	By _____ Date _____ By _____ Date _____	By Libby Applegate Date 12-30-99 By _____ Date _____	By _____ Date _____ By _____ Date _____
(9) Approved	By _____ Date _____	By [signature] Date 1/24/2000	By Richard L Swingle Date 12/29/99
(10) Use Level	**Multiple Use**		

PERFORMANCE (Compare with Control Copy every 14 calendar days while work is being performed.)

(11) Compared with Control Copy _____ Date _____

Compared with Control Copy _____ Date _____

Compared with Control Copy _____ Date _____

(12) Date(s) Performed _____

Work Order Number (WO#) _____

COMPLETION

(13) Procedure Completion Verification

☐ Yes ☐ NA Check lists and/or blanks initialed, signed, dated, or filled in NA, as appropriate?

☐ Yes ☐ NA Listed enclosures attached?

☐ Yes ☐ NA Data sheets attached, completed, dated, and signed?

☐ Yes ☐ NA Charts, graphs, etc. attached, dated, identified, and marked?

☐ Yes ☐ NA Procedure requirements met?

Verified By _____ Date _____

(14) Procedure Completion Approved _____ Date _____

(15) Remarks (*Attach additional pages, if necessary.*)

Duke Power Company McGuire/Catawba Nuclear Station **Standard Procedure for EOF Commodities and Facilities** **Multiple Use**	Procedure No. **SR/0/B/2000/002** Revision No. 001 Electronic Reference No. CP0094AZ

Standard Procedure for EOF Commodities and Facilities

1. Symptoms

An emergency condition exists requiring EOF activation.

2. Immediate Actions

Activate the EOF C&F Telephone Call-up list utilizing the EOF Commodities and Facilities Reference Guide. (Section 4.1)

The following commodities and facilities functions are established or made available:

- Communication Systems (Enclosure 4.1)
- Fleet Services (Enclosure 4.2)
- Administration (Enclosure 4.3)
- Commissary (Enclosure 4.4)
- Risk Management (Enclosure 4.5)
- Purchasing (Enclosure 4.6)

3. Subsequent Actions

Shutdown EOF per Enclosure 4.7.

4. Enclosures

4.1 Communications

4.2 Fleet Services

4.3 Administration

4.4 Commissary

4.5 Risk Management

4.6 Purchasing

4.7 EOF Shutdown Checklist

NOTE:	**Refer to the EOF Commodities and Facilities Reference Guide for specific information regarding contacts, phone numbers, and available equipment/services.**

1. Purpose

Provides the telephone and radio requirements of the overall recovery organization as well as electrical needs.

2. Major Functions

2.1 Install and maintain telephone system.

2.2 Supply mobile radios and radio pagers.

2.3 Install additional electrical hookups as needed.

NOTE:	Telecommunications Operations Center is staffed 7 days a week, 24 hours a day.

2.4 Notify Telecommunications Operations Center should any additional problem solving be necessary and/or additional personnel be required.

3. Communications Systems

Telephone System

The system consists of independent lines for use by Emergency Response personnel and provisions are made for phones for NRC use and special off-site agency coordination use.

Radio Systems

These systems consist of 3 independent systems for use by the Offsite Communicators, NC, and SC (State Radios and Low Band system), and Duke Dose Assessment (800 Mhz system).

4. Equipment

Communications: All communication equipment for the MNS/CNS EOF is in each individual room and location.

NOTE:	**Refer to the EOF Commodities and Facilities Reference Guide for specific information regarding contacts, phone numbers, and available equipment/services.**

1. Purpose

Provides necessary equipment for movement of material and personnel.

2. Major Functions

2.1 Furnish vehicles and operators for personnel and equipment movement.

2.2 Provide common carrier and specialized carrier service for specific material and personnel needs.

2.3 Coordinate, trace, and expedite material deliveries and shipments in and out of recovery site.

2.4 Provide fuel for on-site recovery vehicles.

2.5 Transport environmental samples for analysis upon request by the Radiological Assessment Group.

3. Additional Personnel Required

Additional personnel may be required to handle functions such as shuttle service, garbage pickup, environmental sample transport. Immediate needs are to be assessed upon arrival at the site.

4. First Call-Out

4.1 On the first call-out, the director or designee will organize and transport the equipment and operating personnel needed initially.

4.2 The first contingency will begin with establishment of base operations. This will include personnel establishment and transport equipment assessment.

4.3 Equipment presently harbored at the General Office, Toddville, McGuire and Catawba sites, depending on the magnitude and need, is available for use at the onset. An assessment of availability will be made on arrival of the first transportation contingency.

4.4 Environmental samples transport requests will be initiated by the Radiological Assessment Group. The time and location of sample pick-up will be determined by the Transportation Director and Field Monitoring Coordinator. Sample destination will be the Applied Science Center (ASC) or unaffected station, as specified by the Radiological Assessment Group.

NOTE:	**Refer to the EOF Commodities and Facilities Reference Guide for specific information regarding contacts, phone numbers, and available equipment/services.**

1. Purpose

To provide general administrative office support and supplies.

2. Major Functions

2.1 Provide office supplies and equipment.

2.2 Provide photography services and cameras.

2.3 Provide secretarial/clerical services.

2.4 Provide telephone call-out list for Commodities & Facilities team.

2.5 Provide copy services.

2.6 Provide air travel, hotel, and car rental arrangements.

2.7 Contact Payroll to get checks for individuals upon request.

2.8 Provide assistance for Petty Cash activities.

2.9 Provide in-house craft resources as requested.

2.10 Verify from the EOF Off-Site Agency Communicators that the EOF clocks have the correct time and have been synchronized.

3. Action List Upon Arrival at EOF

3.1 Upon arrival at EOF, members of the Administration staff will be responsible for the following:

3.1.1 Ensure that Commodities and Facilities area is set up.

3.1.1.1 Supply cabinet unlocked and open.

3.1.1.2 Get pads, pencils, etc., out of cabinet.

NOTE:	The correct time can be obtained from the EOF Off-Site Agency Communicators

3.1.1.3 Verify facility clocks have been synchronized.

3.1.2 Furnish additional personnel if needed.

3.1.3 Copy Center / Fax services.

3.1.4 Main Frame Computers and VMS Servers.

3.1.5 Upon EOF activation, contact the College Street Center to inform them of the need to keep mainframe computers and VMS servers available.

NOTE:	Network Operations is available 7 days a week, 24 hours a day.

3.1.6 Contact the lead operator at Network Operations (College Street).

A. Request they contact Duke Shift Supervisor and VMS Support on call personnel.

B. Advise Network Operations to alert Duke Shift Supervisor and VMS Support of the drill/emergency and the necessity to keep mainframe computer and VMS servers available.

4. Action List for Changing from Emergency to Recovery Mode

4.1 Replenish supplies.

4.2 Determine additional space requirements.

4.3 Prepare weekly work schedules.

4.4 Determine hotel/motel accommodations and travel requirements; contact Corporate Travel Center for securing these requirements.

NOTE:	**Refer to the EOF Commodities and Facilities Reference Guide for specific information regarding contacts, phone numbers, and available equipment/services.**

1. Purpose

Meet basic nutritional and personal needs of the recovery organization.

2. Major Functions

2.1 Furnish food and beverage.

2.2 Provide tables and chairs.

2.3 Provide tents.

2.4 Furnish portable toilets.

2.5 Furnish trash receptacles.

3. Tasks Upon Arrival

3.1 Public Address system switched on. (P.A. amplifier is in Janitor Storage Room).

3.2 Copiers in the Copy Room and Offsite Agency Communications area turned on.

4. Recovery Mode (Perform the following if necessary)

4.1 Notify Food Vendors - Set up shift operations to support recovery efforts for meals and breaks (snacks) with times and locations for serving.

4.2 Notify chairs and table suppliers/vendors for appropriate needs and quantities.

4.3 Notify tent suppliers for appropriate needs and quantities.

4.4 Notify portable toilet suppliers for appropriate needs and quantities.

4.5 Notify trash receptacles suppliers for appropriate needs and quantities.

4.6 Establish shift coverage of commissary personnel to support total recovery efforts.

NOTE:	**Refer to the EOF Commodities and Facilities Reference Guide for specific information regarding contacts, phone numbers, and available equipment/services.**

1. Purpose

1.1 Serve as liaison between Duke and insurance companies.

1.2 Interface with other EOF groups to provide assistance needed by insurance companies.

2. Major Functions

2.1 Provide contact with insurance companies.

2.2 Assist insurance companies in data gathering.

2.3 Assist insurance companies in establishing claims offices to disburse emergency assistance funds to evacuees.

3. Interfacing with Other Groups

3.1 Interface with appropriate technical support groups to obtain the necessary technical information sufficient to satisfy the needs of the insurance companies.

3.2 Work with Administrative Group to provide assistance in securing motel reservations if insurance companies should dispatch an investigative team.

3.3 Claims Office

3.3.1 In the event it becomes necessary to evacuate members of the general public, the insurance company would set up claims offices to disburse emergency assistance funds.

3.3.2 The Risk Management Group would provide as much assistance as possible in expediting the setting up of this claims office.

3.3.3 The Risk Management Group would also communicate with Public Affairs about its location and operation. Claims would be handled by insurance company personnel.

NOTE:	**Refer to the EOF Commodities and Facilities Reference Guide for specific information regarding contacts, phone numbers, and available equipment/services.**

1. Purpose

Coordinate all activities with the Recovery Organization relating to procurement of materials, equipment and services.

NOTE:	The EOF Director and Commodities and Facilities Manager are authorized to approve expenses incurred in the performance of the duties described in this procedure.

2. Major Functions

2.1 Issue requisitions.

2.2 Negotiate contracts.

2.3 Issue purchase orders.

2.4 Expedite hardware and software.

2.5 Coordinate receipt of material.

2.6 Coordinate distribution of material.

3. Additional Personnel Required

3.1 Since most of the purchasing function will be handled in either the General Office or the Site Purchasing Groups, the entire Purchasing Department will be at the Purchasing Director's disposal. The General Office and Site Purchasing Groups will deploy and staff back-up teams per the Purchasing Director's instructions.

3.2 The EOF Purchasing team will utilize the clerical support provided by the Administration Director for necessary support functions in the EOF.

4. Arrival at EOF

4.1 The Purchasing Director will assess the situation and activate the GO Purchasing team, if necessary.

4.2 Immediate work will begin on procurement of equipment, material and services as may be required.

5. Interface with Other Groups

5.1 Work with Transportation Director to ensure expeditious delivery of equipment to the site and with the Administration Director to obtain required funds from petty cash for small purchases.

5.2 Work with Nuclear Generation Department concerning the receipt and distribution of equipment and materials.

6. Crisis Stage to Recovery Stage

NOTE: The following is a checklist of things to do and/or consider when moving from the CRISIS STAGE to the RECOVERY STAGE of an event.

6.1 Activate Purchasing back-up teams.

6.2 Prepare work schedule for Purchasing team.

6.3 Assess need for additional personnel support.

6.4 Assess need to activate Field Commodity contacts.

6.5 Establish expediting level at Level One.

7. Procedures

7.1 Requisitioning Equipment

7.1.1 When it has been determined that material, equipment, or services are needed, Purchasing Coordinators at the EOF will convey that need as rapidly as possible to the Purchasing Department utilizing telephones and/or fax machines.

7.1.2 Requisitions for the recovery effort will be expedited through the Purchasing Department system for immediate order processing.

7.2 Expediting

Expediting Level One or higher will apply to all purchases for the recovery operation unless determined otherwise.

7.3 Receiving

7.3.1 Receipt of material and equipment will be handled by the Nuclear Site Commodities & Facilities Group.

7.3.2 A member of the Emergency Operations Purchasing Team will coordinate with Receiving to assure that the material gets to the appropriate destination at the site.

NOTE:	**Refer to the EOF Commodities and Facilities Reference Guide for specific information regarding contacts, phone numbers, and available equipment/services.**

1. Administration

INITIALS

____ 1.1 Secure Commodities & Facilities area.

____ 1.2 Restock office supplies as necessary.

____ 1.3 Arrange for return of relocated office equipment.

____ 1.4 Notify Hotels/Motels of release of rooms.

____ 1.5 Assist personnel needing airline transportation home.

2. Communications

____ 2.1 Secure radio base stations.

____ 2.2 Contact Computer Support to release computers from emergency status.

____ 2.3 Return portable communications equipment to storage location (if applicable).

3. Purchasing

____ Transfer information on outstanding requisitions to normal Purchasing contacts.

4. Commissary

____ 4.1 Notify vendors to discontinue food service to Emergency Operations Facility.

____ 4.2 Notify vendors to pick up furniture and equipment not required for Recovery.

____ 4.3 Make arrangements for trash removal.

____ 4.4 Copy machines cut off.

____ 4.5 Public address system off.

5. Fleet Services

_____ 5.1 Arrange for transport of relocated equipment to original location, if applicable.

_____ 5.2 Arrange for transportation home for personnel (as needed).

6. Risk Management

_____ Notify insurance companies of change in status.

Please replace tab for HP/0/B/1009/017 with unit specific tabs.