



Tennessee Valley Authority, Post Office Box 2000, Soddy-Daisy, Tennessee 37379

June 9, 2000

U.S. Nuclear Regulatory Commission
ATTN: Document Control Desk
Washington, D.C. 20555

Gentlemen:

In the Matter of) Docket No. 50-327
Tennessee Valley Authority)

**SEQUOYAH NUCLEAR PLANT (SQN) - UNIT 1 CYCLE 10 (U1C10) 90-DAY
INSERVICE INSPECTION (ISI) SUMMARY REPORT**

Enclosed is SQN's U1C10 ISI Summary Report for the American Society of Mechanical Engineers (ASME) Section XI ISI and augmented non-destructive examination results that were performed from October 8, 1998 to March 18, 2000. The report contains the NIS-1 Owners Data Report that is divided into Appendix A (Steam Generator Tubing Inspection results), Appendix B (NIS-2 Owners Data Report for repairs and replacements), Appendix C (Pressure Test Report), and Appendix D (IWE Metal Containment Evaluations).

The ISI Summary Report is being provided in accordance with IWA-6220 and IWA-6230 of ASME Code, Section XI.

Please direct questions concerning this issue to me at (423) 843-7170 or J. D. Smith at (423) 843-6672.

Sincerely,



Pedro Salas
Licensing and Industry Affairs Manager

Enclosure

cc: See page 2

RGW-001

A047

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cc (Enclosure):

Mr. R. W. Hernan, Project Manager
Nuclear Regulatory Commission
One White Flint, North
11555 Rockville Pike
Rockville, Maryland 20852-2739

NRC Resident Inspector
Sequoyah Nuclear Plant
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U.S. Nuclear Regulatory Commission
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61 Forsyth St., SW, Suite 23T85
Atlanta, Georgia 30303-3415

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

ASME SECTION XI

INSERVICE INSPECTION SUMMARY REPORT FOR SEQUOYAH NUCLEAR PLANT

UNIT 1 CYCLE 10

DATE OF COMPLETION OF REPORT MAY 30, 2000

PREPARED BY *Joseph J. Moulton*
SYSTEM ENGINEER, COMPONENT (ISI)

REVIEWED BY *Spel...*
ISO NDE LEVEL III

REVIEWED BY *W. Wade*
ISO ISI/NDE SUPERVISOR

REVIEWED BY *James E. McFarland*
CORPORATE MATERIALS & INSPECTION

APPROVED BY *B. Buchanan*
COMPONENT ENGINEERING MANAGER

APPROVED BY *Keyward Styer*
ENGINEERING AND MATERIALS MANAGER

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
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FORM NIS-1 OWNERS' REPORT FOR INSERVICE INSPECTIONS

As required by the Provisions of the ASME Code Rules

1. Owner Tennessee Valley Authority, 1101 Market St. Chattanooga, TN. 37402-2801
(Name and Address of Owner)
2. Plant Sequoyah Nuclear Plant, P.O. Box 2000, Soddy Daisy, Tennessee 37384-2000
(Name and Address of Plant)
3. Plant Unit ONE (1)
4. Owner Certificate of Authorization (if required) Not Required
5. Commercial Service Date July 1, 1981
6. National Board Number for Unit No Number Assigned
7. Components Inspected:

Component or Appurtenance	Manufacturer or Installer	Manufacturer or Installer Serial No.	State or Province No.	National Board No.
Reactor Vessel	Westinghouse	30-616	N/A	N/A
Steam Generator	Westinghouse	1221, 1222 1223, 1224	N/A	68-58, 68-59 68-60, 68-61
Pressurizer	Westinghouse	1331	N/A	68-102
See Section 2 (Examination Plan) for remaining components	Tennessee Valley Authority	N/A	N/A	N/A

Note: Supplemental sheets in form of lists, sketches, or drawings may be used provided (1) size is 8½ in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-1 (back)

- 8. Examination Dates October 8, 1998 to March 18, 2000
- 9. Inspection Period Identification: Second Period
- 10. Inspection Interval Identification: Second Interval
- 11. Applicable Edition of Section XI 1989 Addenda N/A
- 12. Date/Revision of Inspection Plan: April 10, 2000 Revision 1
- 13. Abstract of Examinations and Tests. Include a list of examinations and tests and a statement concerning status of work required for Inspection Plan. See Introduction/Summary of Inservice Inspections. Examination status is on schedule. Examinations performed complete the first outage of the second period of the second interval.
- 14. Abstract of Results of Examinations and Tests. See Introduction/Summary of Inservice Inspections
- 15. Abstract of Corrective Measures. See Introduction/Summary of Inservice Inspections

We certify that a) the statements made in this report are correct b) the examinations and tests meet the Inspection Plan as required by ASME Code, Section XI, and c) corrective measures taken conform to the rules of the ASME Code, Section XI.

Certificate of Authorization No. (if applicable) N/A Expiration Date N/A
 Date MAY 2, 2000 Signed TVA By Jeffrey T. Goulet
 Owner Mark D. Hyde

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by HSB I & I Co. of Hartford CT have inspected the components described in this Owners' Data Report during the period October 8, 1998 to March 18, 2000, and state that to the best of my knowledge and belief, the Owner has performed examinations and tests and taken corrective measures described in this Owner's Report in accordance with the Inspection Plan and as required by the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations, and tests, and corrective measures described in this Owner's Report. Furthermore, neither the Inspector now his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN/3431
 Inspector's Signature National Board, State, Province and Endorsements
 Date MAY 11 2000

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
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INTRODUCTION / SUMMARY OF INSERVICE EXAMINATIONS

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
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Scope:

This is to provide an overview of the Inservice Examinations performed during the Unit 1 Cycle 10 for Class 1 and 2 components as required by 0-SI-DXI-000-114.2 "ASME Section XI ISI/NDE Program Unit 1 and Unit 2", SPP-9.1 "ASME Section XI and Augmented Nondestructive Examination Program", and IWA-6220 of ASME Section XI, 1989 Edition. This report also includes steam generator tubing eddy current examinations in Appendix A, repairs and replacements performed in Appendix B, pressure test examinations in Appendix C, and the IWE metal containment evaluations in accordance with 10CFR 50.55a(b)(2)(x) in Appendix D.

Introduction:

The code of record for the second inspection interval which began December 16, 1995 is the 1989 Edition of the ASME Boiler and Pressure Vessel Code, Section XI, Division 1.

The Unit 1 Cycle 10 inservice examinations were performed during the period from October 8, 1998 to March 18, 2000. This report also includes repairs and replacements performed during this period from October 8, 1998 to March 18, 2000. The Unit 1 Cycle 10 Refueling Outage began when the generator was taken off line on February 22, 2000. The outage was completed on March 18, 2000, when the generator was tied to the power grid. The inservice examinations were performed to the implementing plant Surveillance Instruction 0-SI-DXI-000-114.2, "ASME Section XI ISI/NDE Program Unit 1 and Unit 2". The steam generator tubing eddy current examinations are discussed in Appendix A, repairs and replacements are discussed in Appendix B, pressure test examinations are discussed in Appendix C, and the IWE metal containment evaluations are discussed in Appendix D. Examinations performed during this cycle satisfy the inspection requirements for the first outage of the second period of the second 10 year interval as defined in the 0-SI-DXI-000-114.2.

The Authorized Inspection Agency (AIA), Hartford Steam Boiler Inspection and Insurance Company, provided the following ANIIs:

Michael Lockwood, Stephen Heater, and Bruce Eamigh
Hartford Steam Boiler Inspection and Insurance Company
200 Ashford Center North, Suite 300
Atlanta, Georgia 30338-4860

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Summary :

Unit 1 Cycle 10 was the first scheduled refueling outage during the second inspection period of the second Ten Year ISI interval. Class 1 and 2 components were examined in accordance with 0-SI-DXI-000-114.2, "ASME Section XI ISI/NDE Program Unit 1 and Unit 2". A summary listing of examinations performed for code credit are listed in **SECTION 1**. The examinations were performed to TVA approved procedures. The class 1 and 2 components examined and results for this inservice inspection outage are listed in **SECTION 2**. There were twelve Notice of Indications generated for ASME Section XI, Class 1 and 2 examinations. See **SECTION 3** for notice of indications summary. See **SECTION 4** for additional samples. See **SECTION 5** for successive examinations. No regulatory required augmented examinations were performed which require submittal to the regulatory authority (Reference **SECTION 6**). There were no new ASME Class 1, 2, or 3 equivalent components for which examination results required acceptance by analytical evaluation (IWB-3132.4, IWB-3142.4, IWC-3122.4, IWC-3132.4 or IWD-3000). (Reference **SECTION 7**). There were six components which did not receive the code required examination coverage (see **SECTION 8**).

For Unit 1 Cycle 10 steam generator tubing eddy current examinations results and number of tubes examined see **Appendix A**.

For repairs and replacements performed see **Appendix B**.

For Unit 1 Cycle 10 system pressure test results see **Appendix C**.

For Unit 1 Cycle 10 IWE metal containment evaluations see **Appendix D**.

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SECTION 1

EXAMINATION SUMMARY

- **Examination Credit Summary**
- **Examination Code Category and Item Number Summary**

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EXAMINATION CREDIT SUMMARY

The inspection plan work required for the first outage of the second period of the second interval is on schedule.

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EXAMINATION CREDIT SUMMARY
ASME SECTION XI EXAMINATIONS FOR THE FIRST
OUTAGE (U1C10) OF THE SECOND PERIOD OF THE SECOND TEN-YEAR
INSPECTION INTERVAL

CATEGORY	TOTAL NUMBER REQUIRED FOR INTERVAL	TOTAL NUMBER CREDITED FOR THE INTERVAL	TOTAL NUMBER REQUIRED FOR SECOND PERIOD	TOTAL NUMBER CREDITED FOR THE SECOND PERIOD	TOTAL NUMBER CREDITED FOR U1C10 OF THE SECOND PERIOD	EXCLUSIONS EXCEPTIONS OR DEFERRALS
B-A	14	1	½	½	½	deferral permissible
B-B	5	1	2	0	0	
B-D	36	10	6	4	4	Code Case N-521
B-E	115	0	0	0	0	deferral permissible
B-F	22	4	5	0	0	Code Case N-521
B-G-1	RV (216) RCP (25) see note 10	RV (144)	RV (72)	RV (72)	RV (72)	RCP only when B-L-2 examination performed
B-G-2	PZR (1) SG (2) RCP (2) Valves (6) Piping (13)	PZR (1) SG (1) Valves (4) see note 1 Piping (7)	PZR (1) Piping (3)	PZR (1) Valves (1) Piping(3)	PZR (1) Valves (1) Piping(3)	RCP and valves only when B-L-2 or B-M-2 examination performed
B-H, see B-K of Code Case N-509						
B-J	259 see note 2	83 see note 3	87	2	2	

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EXAMINATION CREDIT SUMMARY
ASME SECTION XI EXAMINATIONS FOR THE FIRST
OUTAGE (U1C10) OF THE SECOND PERIOD OF THE SECOND TEN-YEAR
INSPECTION INTERVAL
(continued)

CATEGORY	TOTAL NUMBER REQUIRED FOR INTERVAL	TOTAL NUMBER CREDITED FOR THE INTERVAL	TOTAL NUMBER REQUIRED FOR SECOND PERIOD	TOTAL NUMBER CREDITED FOR THE SECOND PERIOD	TOTAL NUMBER CREDITED FOR U1C10 OF THE SECOND PERIOD	EXCLUSIONS EXCEPTIONS OR DEFERRALS
B-K-1, see B-K of Code Case N-509						
B-K of Code Case N-509	7	2	2	0	0	
B-L-1	1	0	0	0	0	deferral permissible: examine only if pump disassembled
B-L-2	1	0	0	0	0	deferral permissible: examine only if pump disassembled
B-M-1	N/A					
B-M-2	6	4	deferral permissible: examine only if valve disassembled	1	1	deferral permissible: examine only if valve disassembled
B-N-1	Three - 1 each period	1 (first period)	1	0	0	
B-N-2	6	0	0	0	0	deferral permissible
B-N-3	1	0	0	0	0	deferral permissible

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ASME SECTION XI EXAMINATIONS FOR THE FIRST
OUTAGE (U1C10) OF THE SECOND PERIOD OF THE SECOND TEN-YEAR
INSPECTION INTERVAL
(continued)

CATEGORY	TOTAL NUMBER REQUIRED FOR INTERVAL	TOTAL NUMBER CREDITED FOR THE INTERVAL	TOTAL NUMBER REQUIRED FOR SECOND PERIOD	TOTAL NUMBER CREDITED FOR THE SECOND PERIOD	TOTAL NUMBER CREDITED FOR U1C10 OF THE SECOND PERIOD	EXCLUSIONS EXCEPTIONS OR DEFERRALS
B-O	2	0	0	0	0	deferral permissible
B-P, see Appendix C						
B-Q, see Appendix A						
C-A	20 see note 4	10	7	6	6	
C-B	14 see note 4	7	5	4	4	
C-C see C-C of Code Case N-509						
C-C of Code Case N-509	29 see note 4	16	11	10	10	
C-D	1	1	0	0	0	
C-F-1	143 see notes 5 and 9	45	47	0	0	
C-F-2	29	9	10	0	0	
C-G	N/A					
C-H, see Appendix C						

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EXAMINATION CREDIT SUMMARY
ASME SECTION XI EXAMINATIONS FOR THE FIRST
OUTAGE (U1C10) OF THE SECOND PERIOD OF THE SECOND TEN-YEAR
INSPECTION INTERVAL
(continued)

CATEGORY	TOTAL NUMBER REQUIRED FOR INTERVAL	TOTAL NUMBER CREDITED FOR THE INTERVAL	TOTAL NUMBER REQUIRED FOR SECOND PERIOD	TOTAL NUMBER CREDITED FOR THE SECOND PERIOD	TOTAL NUMBER CREDITED FOR U1C10 OF THE SECOND PERIOD	EXCLUSIONS EXCEPTIONS OR DEFERRALS
F-A see F-A of Code Case N-491						
F-A of Code Case N-491	202 * *Class 1 and 2 only see notes 4 and 7	126 see notes 6 and 8	71	69	69	

Notes:

1. Credit taken only for the studs on 2 of the valves examined in B-G-2 during U1C8.
2. Piping modification in U1C10 of the second period added 12 B-J welds to the total number required for the interval increased from 247 to 259.
3. Due to piping modifications in the second period and the increase in the total number required in B-J for the interval these welds were added over the three periods - (4) first, (3) second, (5) third. The 4 welds in the first period are counted as credit for the interval.
4. Containment spray heat Exchanger 1B was replaced in U1C9 of the first period and the totals for C-A increased from 17 to 20, C-B increased from 12 to 14, C-C increased from 28 to 29, and F-A increased from 203 to 204 in the U1C9 report
5. Use of code paragraph IWC-1221(e) reduced the total number required for C-F-1 from 146 to 142 in the U1C9 report.

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EXAMINATION CREDIT SUMMARY
ASME SECTION XI EXAMINATIONS FOR THE FIRST
OUTAGE (U1C10) OF THE SECOND PERIOD OF THE SECOND TEN-YEAR
INSPECTION INTERVAL
(continued)

6. Removed from credit 2 supports (1-SIH-031 and 1-SIH-160) reported in F-A in U1C8 in the U1C9 report.
7. Due to the support modifications in the second period the total number required in F-A for the interval decreased from 204 to 202 during U1C10 in the U1C10 report.
8. Removed from credit one support in category F-A (1-SIH-065) in the first period due to it being deleted in U1C10 in the U1C10 report.
9. Due to piping modification in the second period the total number required in C-F-1 increased by one weld for the interval from 142 to 143 in the U1C10 report.
10. Increased total number of B-G-1 for RCP from 24 to 25 in the U1C10 report to include the examination of the RCP flange surface when the connection is disassembled.

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**EXAMINATION CODE CATEGORY
AND ITEM NUMBER SUMMARY**

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**EXAMINATION CODE CATEGORY
AND ITEM NUMBER SUMMARY
ASME SECTION XI CREDIT UNIT 1 CYCLE 10
CLASS 1 COMPONENTS**

COMPONENT	EXAM METHOD	CODE CATEGORY	CODE ITEM NUMBER	Sample
Reactor Vessel Head-to-Flange Weld	UT/MT	B-A	B1.40	½
Pressurizer Nozzle-to-Vessel Weld	UT	B-D	B3.110	2
Pressurizer Nozzle Inside Radius Section	UT	B-D	B3.120	2
Reactor Vessel Closure Head Nuts Greater Than 2 inches in Diameter	MT	B-G-1	B6.10	18
Reactor Vessel Closure Studs Greater Than 2 inches in Diameter When Removed	UT/MT	B-G-1	B6.30	18
Reactor Vessel Closure Washers	VT-1	B-G-1	B6.50	18
Reactor Vessel Threads in Flange	UT	B-G-1	B6.40	18
Pressurizer Bolts, Studs, and Nuts less than or equal to 2 inches diameter	VT-1	B-G-2	B7.20	1 manway
CVCS Piping Bolting	VT-1	B-G-2	B7.50	1
RCS Piping Bolting	VT-1	B-G-2	B7.50	1
SIS Piping Bolting	VT-1	B-G-2	B7.50	1
RCS Valve Bolting	VT-1	B-G-2	B7.70	1
RCS Piping Circumferential Welds NPS 4 Inches or larger	UT/PT	B-J	B9.11	2
RCS Valve Exceeding 4 Inches, Body Internal Surface	VT-3	B-M-2	B12.50	1
CVCS Class 1 Supports - Function A	VT-3	F-A	F1.10A	3
CVCS Class 1 Supports - Function B	VT-3	F-A	F1.10B	7
CVCS Class 1 Supports - Function C	VT-3	F-A	F1.10C	1
CVCS Class 1 Supports - Function D	VT-3	F-A	F1.10D	1
RCS Class 1 Supports - Function A	VT-3	F-A	F1.10A	1
RCS Class 1 Supports - Function B	VT-3	F-A	F1.10B	1
RCS Class 1 Supports - Function C	VT-3	F-A	F1.10C	1
RCS Class 1 Supports - Function D	VT-3	F-A	F1.10D	2

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**EXAMINATION CODE CATEGORY
AND ITEM NUMBER SUMMARY
ASME SECTION XI CREDIT UNIT 1 CYCLE 10
CLASS 1 COMPONENTS
(continued)**

COMPONENT	EXAM METHOD	CODE CATEGORY	CODE ITEM NUMBER	Sample
RHRS Class 1 Supports - Function A	VT-3	F-A	F1.10A	1
SIS Class 1 Supports - Function A	VT-3	F-A	F1.10A	2
SIS Class 1 Supports - Function B	VT-3	F-A	F1.10B	5
SIS Class 1 Supports - Function C	VT-3	F-A	F1.10C	1
SIS Class 1 Supports - Function D	VT-3	F-A	F1.10D	1

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**EXAMINATION CODE CATEGORY
AND ITEM NUMBER SUMMARY
ASME SECTION XI CREDIT UNIT 1 CYCLE 10
CLASS 2 COMPONENTS**

COMPONENT	EXAM METHOD	CODE CATEGORY	CODE ITEM NUMBER	Sample
Containment Spray Heat Exchanger 1A Shell Circumferential Weld	UT	C-A	C1.10	1
CVCS Seal Water Filter Shell Circumferential Weld	PT	C-A	C1.10	1
RHR Heat Exchanger Shell Circumferential Weld	UT	C-A	C1.10	1
CVCS Seal Water Filter Head Circumferential Weld	PT	C-A	C1.20	1
RHR Heat Exchanger Head Circumferential Weld	UT	C-A	C1.20	1
Containment Spray Heat Exchanger 1A Tube Sheet -to-Shell Circumferential Weld	UT	C-A	C1.30	1
Steam Generator Nozzle without Reinforcing Plate in Vessels greater than ½ inch thick	UT/MT	C-B	C2.21	1
Residual heat Removal Heat Exchanger Nozzle without Reinforcing Plate in Vessels greater than ½ inch thick	UT/MT	C-B	C2.21	1
BIT Nozzle without Reinforcing Plate in Vessels greater than ½ inch thick	UT/MT	C-B	C2.21	1
Steam Generator Nozzle Inside Radius Section	UT	C-B	C2.22	1
Seal Water Filter Integrally Welded Attachments	PT	C-C	C3.10	1
RHR Heat Exchanger Integrally Welded Attachments	PT	C-C	C3.10	1

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**EXAMINATION CODE CATEGORY
AND ITEM NUMBER SUMMARY
ASME SECTION XI CREDIT UNIT 1 CYCLE 10
CLASS 2 COMPONENTS
(continued)**

COMPONENT	EXAM METHOD	CODE CATEGORY	CODE ITEM NUMBER	Sample
CSS Piping Integrally Welded Attachments	PT	C-C	C3.20	1
CVCS Piping Integrally Welded Attachments	PT	C-C	C3.20	2
FW Piping Support Integrally Welded Attachments	MT	C-C	C3.20	1
MSS Piping Support Integrally Welded Attachments	MT	C-C	C3.20	1
RHR Piping Integrally Welded Attachments	PT	C-C	C3.20	1
SIS Piping Integrally Welded Attachments	PT	C-C	C3.20	2
CSS Class 2 Supports - Function A	VT-3	F-A	F1.20A	1
CSS Class 2 Supports - Function B	VT-3	F-A	F1.20B	1
CSS Class 2 Supports - Function C	VT-3	F-A	F1.20C	1
CVCS Class 2 Supports - Function A	VT-3	F-A	F1.20A	4
CVCS Class 2 Supports - Function B	VT-3	F-A	F1.20B	2
CVCS Class 2 Supports - Function C	VT-3	F-A	F1.20C	1
CVCS Class 2 Supports - Function D	VT-3	F-A	F1.20D	1
FWS Class 2 Supports - Function A	VT-3	F-A	F1.20A	1
FWS Class 2 Supports - Function B	VT-3	F-A	F1.20B	1
FWS Class 2 Supports - Function C	VT-3	F-A	F1.20C	1

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

**EXAMINATION CODE CATEGORY
AND ITEM NUMBER SUMMARY
ASME SECTION XI CREDIT UNIT 1 CYCLE 10
CLASS 2 COMPONENTS
(continued)**

COMPONENT	EXAM METHOD	CODE CATEGORY	CODE ITEM NUMBER	Sample
MSS Class 2 Supports - Function A	VT-3	F-A	F1.20A	1
MSS Class 2 Supports - Function C	VT-3	F-A	F1.20C	1
MSS Class 2 Supports - Function D	VT-3	F-A	F1.20D	1
RHRS Class 2 Supports - Function A	VT-3	F-A	F1.20A	2
RHRS Class 2 Supports - Function B	VT-3	F-A	F1.20B	2
RHRS Class 2 Supports - Function C	VT-3	F-A	F1.20C	1
RHRS Class 2 Supports - Function D	VT-3	F-A	F1.20D	1
SIS Class 2 Supports - Function A	VT-3	F-A	F1.20A	4
SIS Class 2 Supports - Function B	VT-3	F-A	F1.20B	8
SIS Class 2 Supports - Function C	VT-3	F-A	F1.20C	1
SIS Class 2 Supports - Function D	VT-3	F-A	F1.20D	1
RHR Pump Class 2 Equipment Support	VT-3	F-A	F1.40	1
SIS Pump Class 2 Equipment Support	VT-3	F-A	F1.40	1
RHR Heat Exchanger Class 2 Equipment Support	VT-3	F-A	F1.40	1
Seal Water Filter Class 2 Equipment Support	VT-3	F-A	F1.40	1
Seal Water Heat Exchanger Class 2 Equipment Support	VT-3	F-A	F1.40	1

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

EXAMINATION CODE CATEGORY AND ITEM NUMBER SUMMARY ASME SECTION XI CREDIT UNIT 1 CYCLE 10 STEAM GENERATORS				
COMPONENT	EXAM METHOD	CODE CATEGORY	CODE ITEM NUMBER	Sample
TUBING *	ET	B-Q	B16.20	*

* See Appendix A for Summary of Steam Generator Eddy Current Examinations.

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

EXAMINATION CODE CATEGORY AND ITEM NUMBER SUMMARY ASME SECTION XI CREDIT UNIT 1 CYCLE 10 PRESSURE TESTS				
COMPONENT	EXAM METHOD	CODE CATEGORY	CODE ITEM NUMBER	Sample
PRESSURE TEST *	VT	*	*	*

* See Appendix C for Summary of Pressure Tests.

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

**EXAMINATION CODE CATEGORY
AND ITEM NUMBER SUMMARY
ASME SECTION XI CREDIT UNIT 1 CYCLE 10
SUCCESSIVE EXAMINATIONS COMPONENTS**

COMPONENT	EXAM METHOD	CODE CATEGORY	CODE ITEM NUMBER	Sample
RCW-28-SE	PT	B-F	B5.40	1
Note: This is the required successive examination for the flaw initially detected during Unit 1 Cycle 5. There was no change in the second successive examination.				
1-RCH-080	PT	F-A	F1.10C	1
Note: This is the third successive examination. The flaw was initially detected during unit 1 cycle 4 and was re-examined in unit 1 cycles 5 and 8. The examination schedule may revert to the original schedule.				
RCPH-1	VT-3	F-A	F1.40	1
Note: This is the successive examination required per Code Case N-491 paragraph - 2420(b)				
RCPH-2	VT-3	F-A	F1.40	1
Note: This is the successive examination required per Code Case N-491 paragraph - 2420(b)				
RCPH-3	VT-3	F-A	F1.40	1
Note: This is the successive examination required per Code Case N-491 paragraph - 2420(b)				
RCPH-4	VT-3	F-A	F1.40	1
Note: This is the successive examination required per Code Case N-491 paragraph - 2420(b)				
SGH-1-1	VT-3	F-A	F1.40	1
Note: This is the successive examination required per Code Case N-491 paragraph - 2420(b)				
SGH-2-1	VT-3	F-A	F1.40	1
Note: This is the successive examination required per Code Case N-491 paragraph - 2420(b)				
SGH-3-1	VT-3	F-A	F1.40	1
Note: This is the successive examination required per Code Case N-491 paragraph - 2420(b)				
SGH-4-1	VT-3	F-A	F1.40	1
Note: This is the successive examination required per Code Case N-491 paragraph - 2420(b)				

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

SECTION 2

EXAMINATION PLAN (POST OUTAGE ISI REPORT)

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

This Section contains a standardized Post Outage ISI Report to satisfy the Reporting Requirements of IWA-6000 of the ASME Section XI Code. This report contains the Inservice Inspection data for Class 1 and 2 Components defined in 0-SI-DXI-000-114.2, "ASME Section XI ISI/NDE Program Unit 1 and Unit 2".

For Unit 1 Cycle 10 Steam Generator Tubing Eddy Current Examination results and number of tubes examined see **Appendix A**.

For Unit 1 Cycle 10 System Pressure Testing results see **Appendix C**.

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

POST OUTAGE ISI REPORT

OWNER: TENNESSEE VALLEY AUTHORITY
 NUCLEAR POWER GROUP
 1101 MARKET STREET
 CHATTANOOGA, TENNESSEE 37402

PLANT: SEQUOYAH NUCLEAR PLANT
 P.O. BOX 2000
 SODDY DAISY, TENNESSEE 37379

CERTIFICATION OF AUTHORIZATION: NOT REQUIRED

EXAM REQUIREMENT 89E-02 UNIT:1 CYCLE: 10 COMMERCIAL SERVICE DATE: JULY 1, 1981

NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED

System	Component Number	ISO Drawing	Category	Item Number	Exam Scheduled	NDE Procedure	Calibration Standard	Exam Date	Exam Report	Exam Results	NOI Number	Comments
RV	W08-09B	ISI-0504-C-09	B-A	B1.40	MT	N-MT-6		20000301	R-7552	Passed		240°-60°
RV	W08-09B	ISI-0504-C-09	B-A	B1.40	UT	N-UT-9	SQ-46	20000302	R-7555	Passed		240°-60°; 83% EXAMINATION COVERAGE ACHIEVED
PZR	RCW-16	ISI-0394-C-01	B-D	B3.110	UT	N-UT-19	BNP-79	20000228	R-7531	Passed		66.7% EXAMINATION COVERAGE ACHIEVED
PZR	RCW-17	ISI-0394-C-01	B-D	B3.110	UT	N-UT-19	BNP-79	20000228	R-7532	Passed		66.7% EXAMINATION COVERAGE ACHIEVED
PZR	RCW-16-IR	ISI-0394-C-01	B-D	B3.120	UT-IR	N-UT-55	SQ-77	20000228	R-7537	Passed		
PZR	RCW-17-IR	ISI-0394-C-01	B-D	B3.120	UT-IR	N-UT-55	SQ-77	20000228	R-7538	Passed		
RV	RVNUT-19	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000229	R-7579	Passed		
RV	RVNUT-20	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000229	R-7579	Passed		
RV	RVNUT-21	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000229	R-7579	Passed		
RV	RVNUT-22	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000229	R-7579	Passed		
RV	RVNUT-23	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000229	R-7579	Passed		
RV	RVNUT-24	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000229	R-7579	Passed		
RV	RVNUT-25	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000301	R-7580	Passed		
RV	RVNUT-26	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000301	R-7580	Passed		
RV	RVNUT-27	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000301	R-7580	Passed		
RV	RVNUT-28	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000301	R-7580	Passed		
RV	RVNUT-29	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000301	R-7580	Passed		
RV	RVNUT-30	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000301	R-7580	Passed		
RV	RVNUT-31	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000229	R-7579	Passed		
RV	RVNUT-32	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000229	R-7579	Passed		
RV	RVNUT-33	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000229	R-7579	Passed		
RV	RVNUT-34	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000229	R-7579	Passed		
RV	RVNUT-35	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000229	R-7579	Passed		
RV	RVNUT-36	ISI-0504-C-07	B-G-1	B6.10	MT	N-MT-6		20000229	R-7579	Passed		

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 1101 MARKET STREET
 CHATTANOOGA, TENNESSEE 37402

PLANT: SEQUOYAH NUCLEAR PLANT
 P.O. BOX 2000
 SODDY DAISY, TENNESSEE 37379

CERTIFICATION OF AUTHORIZATION: NOT REQUIRED

EXAM REQUIREMENT 89E-02 UNIT: 1 CYCLE: 10 COMMERCIAL SERVICE DATE: JULY 1, 1981

NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED

System	Component Number	ISO Drawing	Category	Item Number	Exam Scheduled	NDE Procedure	Calibration Standard	Exam Date	Exam Report	Exam Results	NOI Number	Comments
RV	RVSTUD-19	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000301	R-7575	Passed		
RV	RVSTUD-19	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000301	R-7577	Passed		
RV	RVSTUD-20	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000301	R-7575	Passed		
RV	RVSTUD-20	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000301	R-7577	Passed		
RV	RVSTUD-21	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000301	R-7575	Passed		
RV	RVSTUD-21	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000301	R-7577	Passed		
RV	RVSTUD-22	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000301	R-7575	Passed		
RV	RVSTUD-22	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000301	R-7577	Passed		
RV	RVSTUD-23	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000301	R-7575	Passed		
RV	RVSTUD-23	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000301	R-7577	Passed		
RV	RVSTUD-24	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000229	R-7574	Passed		
RV	RVSTUD-24	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000229	R-7576	Passed		
RV	RVSTUD-25	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000228	R-7573	Passed		
RV	RVSTUD-25	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000301	R-7578	Passed		
RV	RVSTUD-26	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000228	R-7573	Passed		
RV	RVSTUD-26	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000301	R-7578	Passed		
RV	RVSTUD-27	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000228	R-7573	Passed		
RV	RVSTUD-27	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000301	R-7578	Passed		
RV	RVSTUD-28	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000228	R-7573	Passed		
RV	RVSTUD-28	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000301	R-7578	Passed		
RV	RVSTUD-29	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000228	R-7573	Passed		
RV	RVSTUD-29	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000301	R-7578	Passed		
RV	RVSTUD-30	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000228	R-7573	Passed		
RV	RVSTUD-30	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000301	R-7578	Passed		
RV	RVSTUD-31	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000228	R-7573	Passed		
RV	RVSTUD-31	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000229	R-7576	Passed		

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PLANT: SEQUOYAH NUCLEAR PLANT
 P.O. BOX 2000
 SODDY DAISY, TENNESSEE 37379

CERTIFICATION OF AUTHORIZATION: NOT REQUIRED

EXAM REQUIREMENT 89E-02 UNIT:1 CYCLE: 10 COMMERCIAL SERVICE DATE: JULY 1, 1981

NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED

System	Component Number	ISO Drawing	Category	Item Number	Exam Scheduled	NDE Procedure	Calibration Standard	Exam Date	Exam Report	Exam Results	NOI Number	Comments
RV	RVSTUD-32	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000228	R-7573	Passed		
RV	RVSTUD-32	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000229	R-7576	Passed		
RV	RVSTUD-33	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000228	R-7574	Passed		
RV	RVSTUD-33	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000229	R-7576	Passed		
RV	RVSTUD-34	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000301	R-7575	Passed		
RV	RVSTUD-34	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000301	R-7577	Passed		
RV	RVSTUD-35	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000229	R-7574	Passed		
RV	RVSTUD-35	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000229	R-7576	Passed		
RV	RVSTUD-36	ISI-0504-C-07	B-G-1	B6.30	UT	N-UT-37	SQ-102	20000229	R-7574	Passed		
RV	RVSTUD-36	ISI-0504-C-07	B-G-1	B6.30	MT	N-MT-6		20000229	R-7576	Passed		
RV	RVTHREAD-19	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-20	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-21	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-22	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-23	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-24	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-25	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-26	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-27	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-28	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-29	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-30	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-31	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-32	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-33	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-34	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		

OWNER: TENNESSEE VALLEY AUTHORITY
 NUCLEAR POWER GROUP
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PLANT: SEQUOYAH NUCLEAR PLANT
 P.O. BOX 2000
 SODDY DAISY, TENNESSEE 37379

CERTIFICATION OF AUTHORIZATION: NOT REQUIRED

EXAM REQUIREMENT 89E-02 UNIT:1 CYCLE: 10 COMMERCIAL SERVICE DATE: JULY 1, 1981

NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED

System	Component Number	ISO Drawing	Category	Item Number	Exam Scheduled	NDE Procedure	Calibration Standard	Exam Date	Exam Report	Exam Results	NOI Number	Comments
RV	RVTHREAD-35	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RVTHREAD-36	ISI-0504-C-07	B-G-1	B6.40	UT	N-UT-37	SQ-52	20000227	R-7525	Passed		
RV	RWWASHER-19	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000229	R-7582	Passed		
RV	RWWASHER-20	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000229	R-7582	Passed		
RV	RWWASHER-21	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000229	R-7582	Passed		
RV	RWWASHER-22	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000229	R-7582	Passed		
RV	RWWASHER-23	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000229	R-7582	Passed		
RV	RWWASHER-24	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000229	R-7582	Passed		
RV	RWWASHER-25	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000228	R-7581	Passed		
RV	RWWASHER-26	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000228	R-7581	Passed		
RV	RWWASHER-27	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000228	R-7581	Passed		
RV	RWWASHER-28	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000228	R-7581	Passed		
RV	RWWASHER-29	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000228	R-7581	Passed		
RV	RWWASHER-30	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000228	R-7581	Passed		
RV	RWWASHER-31	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000228	R-7581	Passed		
RV	RWWASHER-32	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000228	R-7581	Passed		
RV	RWWASHER-33	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000228	R-7581	Passed		
RV	RWWASHER-34	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000228	R-7581	Passed		
RV	RWWASHER-35	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000228	R-7581	Passed		
RV	RWWASHER-36	ISI-0504-C-07	B-G-1	B6.50	VT-1	N-VT-1		20000228	R-7581	Passed		
PZR	1-MWCB-01	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000227	R-7513	Passed		
PZR	1-MWCB-02	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000227	R-7513	Passed		
PZR	1-MWCB-03	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000227	R-7513	Passed		
PZR	1-MWCB-04	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000227	R-7513	Passed		
PZR	1-MWCB-05	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000227	R-7513	Passed		
PZR	1-MWCB-06	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000227	R-7513	Passed		

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PLANT: SEQUOYAH NUCLEAR PLANT
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 SODDY DAISY, TENNESSEE 37379

CERTIFICATION OF AUTHORIZATION: NOT REQUIRED

EXAM REQUIREMENT 89E-02 UNIT:1 CYCLE: 10 COMMERCIAL SERVICE DATE: JULY 1, 1981

NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED

System	Component Number	ISO Drawing	Category	Item Number	Exam Scheduled	NDE Procedure	Calibration Standard	Exam Date	Exam Report	Exam Results	NOI Number	Comments
PZR	1-MWCB-07	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000228	R-7513	Passed		
PZR	1-MWCB-08	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000227	R-7513	Passed		
PZR	1-MWCB-09	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000227	R-7513	Passed		
PZR	1-MWCB-10	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000227	R-7513	Passed		
PZR	1-MWCB-11	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000227	R-7513	Passed		
PZR	1-MWCB-12	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000227	R-7513	Passed		
PZR	1-MWCB-13	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000227	R-7513	Passed		
PZR	1-MWCB-14	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000227	R-7513	Passed		
PZR	1-MWCB-15	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000227	R-7513	Passed		
PZR	1-MWCB-16	ISI-0394-C-04	B-G-2	B7.20	VT-1	N-VT-1		20000227	R-7513	Passed		
CVCS	SWI-2098-BC	CHM-2338-C-03	B-G-2	B7.50	VT-1	N-VT-1		20000224	R-7473	Passed		
RCS	RCF-29-BC	ISI-0369-C-03	B-G-2	B7.50	VT-1	N-VT-1		20000224	R-7467	Passed		
SIS	SI-1643-BC	CHM-2333-C-02	B-G-2	B7.50	VT-1	N-VT-1		20000301	R-7550	Passed		
RCS	68-563-BC	ISI-0369-C-03	B-G-2	B7.70	VT-1	N-VT-1		19990323	R-7366	Passed		
RCS	UPIW-23	ISI-0504-C-12	B-J	B9.11	PT	N-PT-9		20000302	R-7553	Passed		
RCS	UPIW-23	ISI-0504-C-12	B-J	B9.11	UT	N-UT-18	SQ-80	20000302	R-7566	Passed		
RCS	UPIW-23	ISI-0504-C-12	B-J	B9.11	UT	N-UT-18	SQ-81	20000302	R-7566	Passed		
RCS	UPIW-24	ISI-0504-C-12	B-J	B9.11	PT	N-PT-9		20000302	R-7554	Passed		
RCS	UPIW-24	ISI-0504-C-12	B-J	B9.11	UT	N-UT-18	SQ-81	20000302	R-7567	Passed		
RCS	UPIW-24	ISI-0504-C-12	B-J	B9.11	UT	N-UT-18	SQ-80	20000302	R-7567	Passed		
RCS	68-563	ISI-0369-C-03	B-M-2	B12.50	VT-3	N-VT-1		19990323	R-7367	Passed		
CSS	CSHXW-4-A	ISI-0462-C-01	C-A	C1.10	UT	N-UT-18	SQ-107	20000211	R-7452	Passed		
CVCS	SWFW-1	ISI-0458-C-01	C-A	C1.10	PT	N-PT-9		20000304	R-7608	Passed		
RHRS	RHRW-16-A	ISI-0290-C-02	C-A	C1.10	UT	N-UT-18	SQ-15	20000207	R-7450	Passed		
CVCS	SWFW-2	ISI-0458-C-01	C-A	C1.20	PT	N-PT-9		20000304	R-7609	Passed		
RHRS	RHRW-17-A	ISI-0290-C-02	C-A	C1.20	UT	N-UT-18	SQ-15	20000204	R-7449	Passed		

65% EXAMINATION COVERAGE ACHIEVED

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EXAM REQUIREMENT 89E-02 UNIT:1 CYCLE: 10 COMMERCIAL SERVICE DATE: JULY 1, 1981

NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED

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CSS	CSHXW-3-A	ISI-0462-C-01	C-A	C1.30	UT	N-UT-18	SQ-106	20000307	R-7454	Passed		
RHRS	RHRW-15-A	ISI-0290-C-02	C-B	C2.21	PT	N-PT-9		20000127	R-7390	Passed		
RHRS	RHRW-15-A	ISI-0290-C-02	C-B	C2.21	UT	N-UT-18	SQ-15	20000208	R-7455	Passed		39% EXAMINATION COVERAGE ACHIEVED
SG	MSW-3	ISI-0399-C-01	C-B	C2.21	MT	N-MT-6		20000227	R-7516	Passed		
SG	MSW-3	ISI-0399-C-01	C-B	C2.21	UT	N-UT-19	SQ-57	20000227	R-7533	Passed		
SIS	BIT-5	ISI-0069-C-01	C-B	C2.21	MT	N-MT-6		20000203	R-7403	Passed		
SIS	BIT-5	ISI-0069-C-01	C-B	C2.21	UT	N-UT-19	BNP-79	20000215	R-7453	Passed		67% EXAMINATION COVERAGE ACHIEVED
SG	MSW-3-IR	ISI-0399-C-01	C-B	C2.22	UT	N-UT-55	SQ-76	20000227	R-7530	Passed		
CVCS	SWFH-1-IA	ISI-0458-C-01	C-C	C3.10	PT	N-PT-9		20000304	R-7615	Passed		
RHRS	RHRHXH-18-A-IA	ISI-0290-C-02	C-C	C3.10	PT	N-PT-9		20000127	R-7397	Passed		
CSS	1-CSH-032-IA	CHM-2440-C-04	C-C	C3.20	PT	N-PT-9		20000214	R-7439	Passed		
CVCS	1-CVCH-538-IA	ISI-0448-C-37	C-C	C3.20	PT	N-PT-9		20000214	R-7448	Passed		
CVCS	1-CVCH-560-IA	ISI-0448-C-30	C-C	C3.20	PT	N-PT-9		20000209	R-7418	Passed		
FWS	1-FDH-207-IA	CHM-2439-C-01	C-C	C3.20	MT	N-MT-6		20000305	R-7614	Passed		
MSS	1-MSH-389-IA	CHM-2438-C-02	C-C	C3.20	MT	N-MT-6		20000303	R-7569	Passed		
RHRS	1-RHRH-412-IA	CHM-2435-C-02	C-C	C3.20	PT	N-PT-9		20000214	R-7447	Passed		
SIS	1-SIH-122-IA	ISI-0448-C-08	C-C	C3.20	PT	N-PT-9		20000303	R-7585	Passed		
SIS	1-SIH-135-IA	ISI-0448-C-10	C-C	C3.20	PT	N-PT-9		20000226	R-7535	Passed		
CVCS	1-CVCH-018	CHM-2434-C-01	F-A	F1.10A	VT-3	N-VT-1		20000224	R-7469	Passed		
CVCS	1-CVCH-052	CHM-2434-C-02	F-A	F1.10A	VT-3	N-VT-1		20000224	R-7478	Passed		
CVCS	1-CVCH-075	CHM-2434-C-03	F-A	F1.10A	VT-3	N-VT-1		20000224	R-7477	Passed		
RCS	1-RCH-029	ISI-0370-C-02	F-A	F1.10A	VT-3	N-VT-1		20000223	R-7456	Passed		
RHRS	1-RHRH-004	CHM-2435-C-01	F-A	F1.10A	VT-3	N-VT-1		20000224	R-7459	Passed		
SIS	1-SIH-165	CHM-2436-C-01	F-A	F1.10A	VT-3	N-VT-1		20000226	R-7511	Passed		
SIS	1-SIH-175	CHM-2436-C-01	F-A	F1.10A	VT-3	N-VT-1		20000224	R-7481	Passed		
CVCS	1-CVCH-079	CHM-2434-C-03	F-A	F1.10B	VT-3	N-VT-1		20000224	R-7476	Passed		

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CERTIFICATION OF AUTHORIZATION: NOT REQUIRED

EXAM REQUIREMENT 89E-02 UNIT:1 CYCLE: 10 COMMERCIAL SERVICE DATE: JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED

System	Component Number	ISO Drawing	Category	Item Number	Exam Scheduled	NDE Procedure	Calibration Standard	Exam Date	Exam Report	Exam Results	NOI Number	Comments
CVCS	1-CVCH-095	CHM-2434-C-03	F-A	F1.10B	VT-3	N-VT-1		20000224	R-7484	Passed		
CVCS	1-CVCH-124	CHM-2434-C-03	F-A	F1.10B	VT-3	N-VT-1		20000224	R-7482	Passed		
CVCS	1-CVCH-127	CHM-2434-C-03	F-A	F1.10B	VT-3	N-VT-1		20000224	R-7486	Passed		
CVCS	1-CVCH-130	CHM-2434-C-03	F-A	F1.10B	VT-3	N-VT-1		20000224	R-7485	Passed		
CVCS	1-CVCH-133	CHM-2434-C-03	F-A	F1.10B	VT-3	N-VT-1		20000224	R-7479	Passed		
CVCS	1-CVCH-136	CHM-2434-C-03	F-A	F1.10B	VT-3	N-VT-1		20000224	R-7483	Passed		
RCS	1-RCH-012	ISI-0370-C-02	F-A	F1.10B	VT-3	N-VT-1		20000224	R-7466	Passed		
SIS	1-SIH-159	CHM-2436-C-01	F-A	F1.10B	VT-3	N-VT-1		20000224	R-7468	Passed		
SIS	1-SIH-164	CHM-2436-C-01	F-A	F1.10B	VT-3	N-VT-1		20000224	R-7480	Passed		
SIS	1-SIH-215	CHM-2436-C-02	F-A	F1.10B	VT-3	N-VT-1		20000227	R-7520	Passed		
SIS	1-SIH-218	CHM-2436-C-02	F-A	F1.10B	VT-3	N-VT-1		20000224	R-7471	Passed		
SIS	1-SIH-227	CHM-2436-C-02	F-A	F1.10B	VT-3	N-VT-1		20000226	R-7512	Passed		
CVCS	1-RCH-022	CHM-2433-C-01	F-A	F1.10C	VT-3	N-VT-1		20000223	R-7463	Passed		RANGE:(1 1/16"-1 1/2", 124#-136#)
RCS	1-RCH-922	ISI-0370-C-01	F-A	F1.10C	VT-3	N-VT-1		20000223	R-7464	Passed		RANGE:(3/4"-1", 134#-148#)
SIS	1-SIH-068	CHM-2436-C-09	F-A	F1.10C	VT-3	N-VT-1		20000225	R-7517	Passed		RANGE:(1"-1 1/4"; 2449#-2705#)
CVCS	1-CVCH-991	CHM-2434-C-03	F-A	F1.10D	VT-3	N-VT-1		20000227	R-7518	Passed		
RCS	1-RCH-030	ISI-0370-C-02	F-A	F1.10D	VT-3	N-VT-1		20000223	R-7461	Passed		
RCS	1-RCH-895	ISI-0370-C-01	F-A	F1.10D	VT-3	N-VT-1		20000223	R-7462	Passed		
SIS	1-SIH-061	CHM-2436-C-09	F-A	F1.10D	VT-3	N-VT-1		20000226	R-7510	Passed		
CSS	1-CSH-429	ISI-0448-C-40	F-A	F1.20A	VT-3	N-VT-1		20000210	R-7423	Passed		
CVCS	1-CVCH-401	ISI-0448-C-24	F-A	F1.20A	VT-3	N-VT-1		20000208	R-7405	Passed		
CVCS	1-CVCH-404	ISI-0448-C-24	F-A	F1.20A	VT-3	N-VT-1		20000208	R-7404	Passed		
CVCS	1-CVCH-417	ISI-0448-C-26	F-A	F1.20A	VT-3	N-VT-1		20000208	R-7406	Passed		
CVCS	1-CVCH-573	ISI-0448-C-26	F-A	F1.20A	VT-3	N-VT-1		20000210	R-7422	Passed		
FWS	1-FDH-245	CHM-2439-C-02	F-A	F1.20A	VT-3	N-VT-1		20000303	R-7565	Engineering	1-SQ-425	
MSS	1-MSH-389	CHM-2438-C-02	F-A	F1.20A	VT-3	N-VT-1		20000303	R-7568	Passed		

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EXAM REQUIREMENT 89E-02 UNIT:1 CYCLE: 10 COMMERCIAL SERVICE DATE: JULY 1, 1981

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RHRS	1-RHRH-412	CHM-2435-C-02	F-A	F1.20A	VT-3	N-VT-1		20000211	R-7438	Passed		
RHRS	1-RHRH-462	CHM-2435-C-03	F-A	F1.20A	VT-3	N-VT-1		20000214	R-7440	Passed		
SIS	1-SIH-132	ISI-0448-C-09	F-A	F1.20A	VT-3	N-VT-1		20000224	R-7457	Passed		
SIS	1-SIH-420	ISI-0448-C-12	F-A	F1.20A	VT-3	N-VT-1		20000210	R-7424	Passed		
SIS	1-SIH-454	CHM-2436-C-03	F-A	F1.20A	VT-3	N-VT-1		20000207	R-7407	Passed		
SIS	1-SIH-456	CHM-2436-C-03	F-A	F1.20A	VT-3	N-VT-1		20000208	R-7421	Passed		
CSS	1-CSH-032	CHM-2440-C-04	F-A	F1.20B	VT-3	N-VT-1		20000214	R-7441	Passed		
CVCS	1-CVCH-473	ISI-0448-C-33	F-A	F1.20B	VT-3	N-VT-1		20000216	R-7446	Passed		
CVCS	1-CVCH-538	ISI-0448-C-37	F-A	F1.20B	VT-3	N-VT-1		20000211	R-7437	Passed		
FWS	1-FDH-207	CHM-2439-C-01	F-A	F1.20B	VT-3	N-VT-1		20000302	R-7548	Passed		
RHRS	1-SIH-386	CHM-2435-C-04	F-A	F1.20B	VT-3	N-VT-1		20000225	R-7494	Passed		
RHRS	1-SIH-387	CHM-2435-C-04	F-A	F1.20B	VT-3	N-VT-1		20000228	R-7534	Passed		
SIS	1-SIH-122	ISI-0448-C-08	F-A	F1.20B	VT-3	N-VT-1		20000303	R-7584	Passed		
SIS	1-SIH-126	ISI-0448-C-08	F-A	F1.20B	VT-3	N-VT-1		20000224	R-7460	Passed		
SIS	1-SIH-129	ISI-0448-C-08	F-A	F1.20B	VT-3	N-VT-1		20000224	R-7458	Passed		
SIS	1-SIH-135	ISI-0448-C-10	F-A	F1.20B	VT-3	N-VT-1		20000226	R-7536	Passed		
SIS	1-SIH-284	ISI-0448-C-06	F-A	F1.20B	VT-3	N-VT-1		20000224	R-7475	Passed		
SIS	1-SIH-330	ISI-0448-C-20	F-A	F1.20B	VT-3	N-VT-1		20000224	R-7474	Passed		
SIS	1-SIH-476	ISI-0448-C-03	F-A	F1.20B	VT-3	N-VT-1		20000208	R-7419	Passed		
SIS	47B435-525-04	ISI-0448-C-27	F-A	F1.20B	VT-3	N-VT-1		20000210	R-7428	Passed		
CSS	1-CSH-401	CHM-2440-C-05	F-A	F1.20C	VT-3	N-VT-1		20000215	R-7445	Passed		RANGE:(5/8"-7/8", 950#-1050#)
CVCS	1-CVCH-565	ISI-0448-C-31	F-A	F1.20C	VT-3	N-VT-1		20000209	R-7415	Engineering	1-SQ-408	RANGE:(1"-1 1/4", 81#-88#)
FWS	1-FDH-202	CHM-2439-C-01	F-A	F1.20C	VT-3	N-VT-1		20000224	R-7465	Engineering	1-SQ-412	RANGE:(7-9 DIVISIONS)
MSS	1-MSH-344	CHM-2438-C-02	F-A	F1.20C	VT-3	N-VT-1		20000224	R-7472	Passed		RANGE:(5/8"-1 1/16", 10967#-12121#)
RHRS	1-RHRH-480	ISI-0448-C-41	F-A	F1.20C	VT-3	N-VT-1		20000208	R-7414	Engineering	1-SQ-407	RANGE:(2 1/8"-2 1/2", 263#-282#)
SIS	1-SIH-434	ISI-0448-C-39	F-A	F1.20C	VT-3	N-VT-1		20000210	R-7427	Passed		RANGE:(7/16"-11/16", 1140#-1258#)

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CVCS	1-CVCH-480	ISI-0448-C-34	F-A	F1.20D	VT-3	N-VT-1		20000211	R-7433	Passed		
MSS	1-MSH-392	CHM-2438-C-02	F-A	F1.20D	VT-3	N-VT-1		20000303	R-7593	Passed		
RHRS	1-RHRH-401	CHM-2435-C-02	F-A	F1.20D	VT-3	N-VT-1		20000210	R-7426	Passed		
SIS	1-SIH-814	ISI-0448-C-19	F-A	F1.20D	VT-3	N-VT-1		20000224	R-7470	Passed		
CVCS	SWFH-1	ISI-0458-C-01	F-A	F1.40	VT-3	N-VT-1		20000304	R-7610	Passed		
CVCS	SWHXX-1	ISI-0460-C-01	F-A	F1.40	VT-3	N-VT-1		20000209	R-7417	Passed		
RHRS	RHRHXH-18-A	ISI-0290-C-02	F-A	F1.40	VT-3	N-VT-1		20000204	R-7411	Passed		
RHRS	RHRPH-1A-A	ISI-0353-B-01	F-A	F1.40	VT-3	N-VT-1		20000204	R-7409	Passed		
SIS	SIPH-A	ISI-0470-C-01	F-A	F1.40	VT-3	N-VT-1		20000204	R-7413	Passed		

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

SECTION 3

SUMMARY OF NOTIFICATION OF INDICATIONS

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

SUMMARY OF NOTIFICATIONS

The Unit 1 Cycle 10 Inservice Inspection of Class 1 and 2 components at Sequoyah Nuclear Plant included a total of twelve Notification of Indications (NOIs). The following is a listing of the NOIs and a brief summary of the corrective measures taken for each.

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

SUMMARY: NOTIFICATION OF INDICATIONS

NOI NUMBER	COMPONENT IDENTIFIER	DISCREPANCY	WORK INSTRUCTION	RE-EXAMINATION
1-SQ-407	1-RHRH-480	Loose bolting (VT-3)	WR# C388823	No re-examination required
DISPOSITION: Acceptance by evaluation per Code Case N-491 paragraph -3122.3.				
1-SQ-408	1-CVCH-565	Spring setting (VT-3)	N/A	No re-examination required
DISPOSITION: Acceptance by evaluation per Code Case N-491 paragraph -3122.3.				
1-SQ-412	1-FDH-202	Spring setting (VT-3)	N/A	No re-examination required
DISPOSITION: Acceptance by evaluation per Code Case N-491 paragraph -3122.3.				
1-SQ-416	RCPH-2	Loose bolting (VT-3)	WR# C399893	No re-examination required
DISPOSITION: Successive examination . Acceptance by evaluation per Code Case N-491 paragraph -3122.3.				
1-SQ-417	RCPH-3	Loose bolting and broke tack weld (VT-3)	WR# C399891	Yes re-examination required
DISPOSITION: Successive examination.				
1-SQ-418	RCPH-4	Loose bolting and broke tack weld (VT-3)	WR# C399887 and WR# C416001	Yes re-examination required
DISPOSITION: Successive examination.				

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

SUMMARY: NOTIFICATION OF INDICATIONS
(Continued)

1-SQ-420	SGH-3-1	Loose bolting (VT-3)	WR# C416009	No re-examination required
DISPOSITION: Successive examination . Acceptance by evaluation per Code Case N-491 paragraph - 3122.3.				
1-SQ-421	SGH-4-1	Loose bolting (VT-3)	WR# C416010	No re-examination required
DISPOSITION: Successive examination . Acceptance by evaluation per Code Case N-491 paragraph - 3122.3.				
1-SQ-422	SGH-2-1	Loose bolting (VT-3)	WR# C416011	No re-examination required
DISPOSITION: Successive examination . Acceptance by evaluation per Code Case N-491 paragraph - 3122.3.				
1-SQ-424	SGH-1-1	Loose bolting (VT-3)	WR# C416012	No re-examination required
DISPOSITION: Successive examination . Acceptance by evaluation per Code Case N-491 paragraph - 3122.3.				
1-SQ-425	1-FDH-245	Loose bolting (VT-3)	WR# C425297	No re-examination required
DISPOSITION: Acceptance by evaluation per Code Case N-491 paragraph -3122.3.				
1-SQ-426	1-RCH-117	Loose bolting (VT-3)	WR# C425298	No re-examination required
DISPOSITION: Acceptance by evaluation per Code Case N-491 paragraph -3122.3.				

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

SECTION 4
ADDITIONAL SAMPLES

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

ADDITIONAL SAMPLE SUMMARY

There were no examinations requiring additional examinations for Unit 1 Cycle 10.

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

SECTION 5

SUCCESSIVE EXAMINATIONS

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

SUCCESSIVE EXAMINATIONS

COMPONENT	CATEGORY	METHOD	PROGRAM 0-SI-DXI-000-114.2 REFERENCE SECTION	RESULTS
RCW-28-SE	B-F	PT	7.4.2.A	Unchanged
Note: It was initially detected during Unit 1 Cycle 5. This is the second successive examination.				
1-RCH-080	F-A	PT	7.4.2.A	Unchanged
Note: It was initially detected during Unit 1 Cycle 4. Examination may revert to the original schedule.				
RCPH-1	F-A	VT-3	7.4.2.D	Acceptable
Note: This is the successive examination required by Code Case N-491, paragraph -2420 (b).				
RCPH-2	F-A	VT-3	7.4.2.D	Acceptable
Note: This is the successive examination required by Code Case N-491, paragraph -2420 (b).				
RCPH-3	F-A	VT-3	7.4.2.D	Failed (re-examination report R-7633)
Note: This is the successive examination required by Code Case N-491, paragraph -2420 (b).				
RCPH-4	F-A	VT-3	7.4.2.D	Failed (re-examination report R-7637)
Note: This is the successive examination required by Code Case N-491, paragraph -2420 (b).				
SGH-1-1	F-A	VT-3	7.4.2.D	Acceptable
Note: This is the successive examination required by Code Case N-491, paragraph -2420 (b).				
SGH-2-1	F-A	VT-3	7.4.2.D	Acceptable
Note: This is the successive examination required by Code Case N-491, paragraph -2420 (b).				
SGH-3-1	F-A	VT-3	7.4.2.D	Acceptable
Note: This is the successive examination required by Code Case N-491, paragraph -2420 (b).				
SGH-4-1	F-A	VT-3	7.4.2.D	Acceptable
Note: This is the successive examination required by Code Case N-491, paragraph -2420 (b).				

OWNER: TENNESSEE VALLEY AUTHORITY
NUCLEAR POWER GROUP
1101 MARKET STREET
CHATTANOOGA, TENNESSEE 37402

PLANT: SEQUOYAH NUCLEAR PLANT
P.O. BOX 2000
SODDY DAISY, TENNESSEE 37379

CERTIFICATION OF AUTHORIZATION: NOT REQUIRED

EXAM REQUIREMENT S01-02 UNIT:1 CYCLE: 10 COMMERCIAL SERVICE DATE: JULY 1, 1981

NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED

System	Component Number	ISO Drawing	Category	Item Number	Exam Scheduled	NDE Procedure	Calibration Standard	Exam Date	Exam Report	Exam Results	NOI Number	Comments
PZR	RCW-28-SE	ISI-0394-C-01	B-F	B5.40	PT	N-PT-9		20000227	R-7514	Passed		REF: R-6974
RCS	1-RCH-080	ISI-0370-C-03	F-A	F1.10C	PT	N-PT-9		20000227	R-7515	Passed		REF: R-6918

OWNER: TENNESSEE VALLEY AUTHORITY
 NUCLEAR POWER GROUP
 1101 MARKET STREET
 CHATTANOOGA, TENNESSEE 37402

PLANT: SEQUOYAH NUCLEAR PLANT
 P.O. BOX 2000
 SODDY DAISY, TENNESSEE 37379

CERTIFICATION OF AUTHORIZATION: NOT REQUIRED

EXAM REQUIREMENT S02-02 UNIT:1 CYCLE: 10 COMMERCIAL SERVICE DATE: JULY 1, 1981

NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED

System	Component Number	ISO Drawing	Category	Item Number	Exam Scheduled	NDE Procedure	Calibration Standard	Exam Date	Exam Report	Exam Results	NOI Number	Comments
RCP	RCPH-1	ISI-0325-C-01	F-A	F1.40	VT-3	N-VT-1		20000228	R-7526	Passed		
RCP	RCPH-2	ISI-0325-C-01	F-A	F1.40	VT-3	N-VT-1		20000228	R-7527	Engineering	1-SQ-416	
RCP	RCPH-3	ISI-0325-C-01	F-A	F1.40	VT-3	N-VT-1		20000228	R-7528	Failed	1-SQ-417	
RCP	RCPH-4	ISI-0325-C-01	F-A	F1.40	VT-3	N-VT-1		20000228	R-7529	Failed	1-SQ-418	
SG	SGH-1-1	ISI-0399-C-02	F-A	F1.40	VT-3	N-VT-1		20000302	R-7551	Engineering	1-SQ-424	
SG	SGH-2-1	ISI-0399-C-02	F-A	F1.40	VT-3	N-VT-1		20000301	R-7545	Engineering	1-SQ-422	
SG	SGH-3-1	ISI-0399-C-02	F-A	F1.40	VT-3	N-VT-1		20000228	R-7543	Engineering	1-SQ-420	
SG	SGH-4-1	ISI-0399-C-02	F-A	F1.40	VT-3	N-VT-1		20000229	R-7544	Engineering	1-SQ-421	

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

SECTION 6

AUGMENTED EXAMINATIONS

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

Augmented Examinations

There were no augmented examinations performed during Unit 1 Cycle 10 as a part of the Inservice Inspection Program, 0-SI-DXI-000-114.2, that required submittal to regulatory agencies.

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

SECTION 7

ANALYTICAL EVALUATIONS

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

There were no acceptance by analytical evaluation assessments performed during Unit 1 Cycle 10 reporting period.

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

SECTION 8

REQUEST FOR RELIEF

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

During Unit 1 Cycle 10 there was three code class 1 and three code class 2 component that did not receive code required examination coverage due to design configuration, access limitations, etc. Request for relief will be submitted to the regulatory authorities in accordance with 10 CFR 50.55a. The percentage of examination coverage was derived from methods established in TVA NDE Procedures Manual. The following is a component summary.

REQUEST FOR RELIEF SUMMARY ASME SECTION XI UNIT 1 CYCLE 10					
COMPONENT	CODE CLASS	CODE CATEGORY	CODE ITEM NUMBER	EXAMINATION METHOD	PERCENT COVERAGE
W08-09B	1	B-A	B1.40	UT	83%
Examination report R-7555. Examination is limited due to configuration of closure head to flange weld. Refer to approved request for relief 1-ISI-2.					
RCW-16	1	B-D		UT	66.7%
Examination report R-7531. Examination is limited due to configuration of nozzle to head.					
RCW-17	1	B-D		UT	66.7%
Examination report R-7532. Examination is limited due to configuration of nozzle to head.					
BIT-5	2	C-B		UT	67%
Examination report R-7453. Examination is limited due to configuration of nozzle to head.					
RHRW-15-A	2	C-B		UT	39%
Examination report R-7455. Examination is limited due to configuration of nozzle-to-head.					
SWFW-2	2	C-A		PT	65%
Examination report R-7609. Examination is limited due to weld support attachments covering weld.					

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

APPENDIX A

SUMMARY OF ASME SECTION XI STEAM GENERATOR TUBING EXAMINATIONS

The inspection plan work required for the first outage of the second period of the second interval for Code Category B-Q, item number B16.20 is on schedule. The following table is a tabulation of examinations, results of examinations and corrective measures taken.

PREPARED BY _____

Mark D. Hydas

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

**SUMMARY OF SEQUOYAH UNIT 1 CYCLE 10
SG EDDY CURRENT INSPECTION/TUBE PLUGGING RESULTS**

EDDY CURRENT EXAM TYPE	SG 1	SG 2	SG 3	SG 4
Full Length Bobbin Coil	3301	3261	3128	3107
U-Bend Plus Point	174	175	144	148
Top of Tubesheet Plus Point	3301	3261	3128	3107
H01 Plus Point	295	51	776	1522
H02 Plus Point	73	96	740	765
H03 Plus Point	34	6	387	1194
H04 Plus Point	4	1	913	573
H05 Plus Point	5	1	75	108
H06 Plus Point	12	10	456	8
H07 Plus Point	47	40	70	46
HL Additional TSP Plus Point	360	429	463	395
PWSCC Left In Service Cycle 9	3	0	36	13
Dented Freespan HL Plus Point	9	12	17	14
<hr/>				
Total Exams Completed	7618	7343	10333	11000
Total Tubes Examined	3301	3261	3128	3107

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

**SUMMARY OF SEQUOYAH UNIT 1 CYCLE 10
SG EDDY CURRENT INSPECTION/TUBE PLUGGING RESULTS
(continued)**

INDICATIONS (Tubes)	SG 1	SG 2	SG 3	SG 4
AVB WEAR	6	21	22	13
CL WASTAGE	15	4	8	1
ODSCC HTS AXIAL	3	4	0	0
ODSCC HTS CIRC	1	3	0	0
ODSCC TSP AXIAL	229	228	198	128
ODSCC TSP CIRC	7	5	9	11
ODSCC ABOVE THE TTS	5	0	0	0
ODSCC FREESPAN	0	0	2	0
PWSCC HTS AXIAL	3	0	2	5
PWSCC HTS CIRC	8	24	11	11
PWSCC TSP AXIAL	7	5	87	61
PWSCC TSP CIRC	3	0	28	13
PWSCC U-BEND AXIAL	0	0	2	0
PWSCC U-BEND CIRC	3	3	0	3
VOLUMETRIC INDICATIONS	4	2	1	0
TSP CRACK	11	18	11	6
Total	305	317	381	252

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

**SUMMARY OF SEQUOYAH UNIT 1 CYCLE 10
SG EDDY CURRENT INSPECTION/TUBE PLUGGING RESULTS
(continued)**

PLUGGING STATUS	SG 1	SG 2	SG 3	SG 4
Previously Plugged Tubes	87	127	260	281
Plugged Cycle 10	31	48	70	51
Damage Mechanism				
ODSCC HTS AXIAL	3	4	0	0
ODSCC HTS CIRC	1	2	0	0
ODSCC TSP AXIAL	0	2	8	3
ODSCC TSP CIRC	3	4	8	0
ODSCC ABOVE HTS	5	0	0	0
PREVENTATIVE	1	12	4	12
PWSCC HTS AXIAL	2	0	2	4
PWSCC HTS CIRC	8	22	11	10
PWSCC TSP AXIAL	1	0	9	9
PWSCC TSP CIRC	3	0	25	11
PWSCC U-BEND AXIAL	0	0	2	0
PWSCC U-BEND CIRC	1	1	0	2
VOLUMETRIC INDICATION	3	1	1	0
Total Tubes Plugged	118	175	330	332

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

<u>Classification of Inspection Results</u>	<u>SG1</u>	<u>SG2</u>	<u>SG3</u>	<u>SG4</u>
Full Length Bobbin Coil	C-2	C-2	C-2	C-2
U-Bend Plus Point	C-2	C-2	C-3	C-3
Top of Tubesheet Plus Point	C-2	C-2	C-2	C-2
Dented TSP Plus Point	C-2	C-2	C-2	C-2
Dented Freespan Plus Point	C-1	C-1	C-1	C-1

Inspection Classification Category	Inspection Results
C-1	Less than 5% of the total tubes inspected are degraded tubes and none of the inspected tubes are defective.
C-2	One or more tubes, but not more than 1% of the total tubes inspected are defective, or between 5 and 10% of the total tubes inspected are degraded tubes
C-3	More than 10% of the total tubes inspected are degraded tubes or more than 1% of the inspected tubes are defective.

OWNER : TENNESSEE VALLEY AUTHORITY
1101 MARKET STREET
CHATTANOOGA, TENNESSEE 37402-2801

PLANT : SEQUOYAH NUCLEAR PLANT
P.O. BOX 2000
SODDY DAISY, TENNESSEE 37384-2000

UNIT : ONE
COMMERCIAL SERVICE DATE : JULY 1, 1981
NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED

CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

Miscellaneous Nomenclature

<u>Notation</u>	<u>Description</u>
AVB	Anti-Vibration Bar
CIRC	Circumferential
CL	Cold leg
H01	1st hot support plate
H02	2nd hot support plate
H03	3rd hot support plate
H04	4th hot support plate
H05	5th hot support plate
H06	6th hot support plate
H07	7th hot support plate
HL	Hot leg
HTS	Top of Tubesheet - Hot Leg
ODSCC	Outer Diameter Stress Corrosion Cracking
PWSCC	Primary Water Stress Corrosion Cracking
TSP	Tube Support Plate
TTS	Top of Tubesheet

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

APPENDIX B

FORM NIS-2 "OWNERS REPORT FOR REPAIRS OR REPLACEMENTS"

PREPARED BY



A handwritten signature in black ink, appearing to be "A. Katz", is written over a horizontal line.

Owner: Tennessee Valley Authority Nuclear Power Group 1101 Market Street Chattanooga, Tennessee 37402	Plant: Unit 1
Plant: Sequoyah Nuclear Plant P. O. Box 2000 Soddy-Daisy, Tennessee 37384-2000	Owner Certificate of Authorization: Not Required
	Commercial Service Date: July 1, 1981
	National Board Number for the Unit: Not Required

Sheet 1 of 100

Appendix B

An index of the work documents which required reporting under the inclusion of the NIS-2 Report is as follows:

Work Initiating Document	Work Initiating Document	Work Initiating Document	Work Initiating Document
96-038095-000	99-003889-000	99-006767-000	99-008134-000
97-002362-000	99-003889-001	99-006767-001	99-008277-001
98-001545-000	99-003889-006	99-006882-000	99-008308-001
98-001856-000	99-003889-007	99-007097-000	99-008748-000
98-005759-000	99-003889-009	99-007098-000	99-008749-000
98-007344-000	99-003889-010	99-007100-000	99-008750-000
98-008311-000	99-003889-011	99-007302-000	99-008751-000
98-010798-002	99-003889-014	99-007304-000	99-008841-000
98-011152-000	99-003889-015	99-007305-000	00-000875-000
98-011152-001	99-006731-000	99-007307-000	00-001286-000
98-011152-003	99-006731-001	99-007803-000	00-001286-001
98-011368-000	99-006731-002	99-007803-001	00-001488-000
98-011384-000	99-006731-003	99-007803-002	00-001590-000
98-011711-000	99-006732-002	99-007803-003	00-001796-000
99-000882-003	99-006732-003	99-008030-000	00-001800-000
99-000882-004	99-006732-004	99-008032-000	00-002203-000
99-000882-007	99-006732-005	99-008033-000	
99-000882-008	99-006732-006	99-008039-000	
99-000882-009	99-006732-007	99-008041-000	
99-000882-010	99-006732-008	99-008075-000	
99-000882-012	99-006732-009	99-008098-000	
99-000882-013	99-006732-010	99-008107-000	
99-000882-017	99-006732-011	99-008110-000	
99-000882-018	99-006732-012	99-008111-000	
99-000882-021	99-006732-013	99-008131-000	
99-002352-000	99-006738-001	99-008133-000	

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 1/4/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No.. Job No.. etc. W60#96-038095-000
 Authorization No N/A
 Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ASME SCIII 1980 Edition, W80 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
RCS PORV (SPARE VALVE)	TARGET ROCK	3	NA	NA	1983	REPAIRED	YES

7. Description of Work REINSTALLED SEAL WELDS AT SEAT-TO-BODY AND BODY-TO-BONNET FOLLOWING MAINTENANCE.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed Kevin R. Blanton, MECH ENGR Date 4 JANUARY 19 2000 KW 1/4/2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/10/98 to 1/5/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature 1/15/00 National Board, State, Province, and Endorsements
Date JAN 5 19 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner <u>Tennessee Valley Authority</u> <small>Name</small> <u>1101 Market Street, Chattanooga, TN 37402-2801</u> <small>Address</small>	Date <u>3/27/00</u> Sheet <u>3</u> of <u>100</u>
2. Plant <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	Unit <u>1</u> <u>WO# 97-002362-000</u> <small>Repair Organization P.O. No.. Job No.. etc.</small> Type Code Symbol Stamp <u>N/A</u>
3. Work Performed by <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	Authorization No <u>N/A</u> Expiration Date <u>N/A</u>

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ASME SECT II 19 74 Edition, S74 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
RCP # 3	WESTINGHOUSE	2184	NA	NA	2000	REPLACED	YES
CARTRIDGE SEAL ASSEMBLY		2174	NA	NA	2000	REPLACEMENT	YES

7. Description of Work REPLACED CARTRIDGE SEAL ASSEMBLY AND #2 SEAL HOUSING CAP SCREWS.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 27 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/4/00 to 3/28/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 28, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 1/7/00
 Sheet 4 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 0
WO# 98-001545-000
Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Authorization No N/A
 Expiration Date N/A

4. Identification of system CYCS, CLASS 2

5. (a) Applicable Construction Code SEE 19 NA Edition, NA Addenda, NA Code Case
REMARKS
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>CYCS RELIEF VALVE</u>	<u>CROSBY</u>	<u>N-69958-00-002</u>	<u>NA</u>	<u>NA</u>	<u>1999</u>	<u>REPLACED</u>	<u>NO</u>

7. Description of Work REPLACED RELIEF VALVE DISC. VALVE IS A SPARE TO BE INSTALLED LATER.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE: CONTRACT #91734 AND WESTINGHOUSE E-SPECS 678758, 674257.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 7 JANUARY 2000

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 12/10/99 to 1/11/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431 National Board, State, Province, and Endorsements Date JAN 11 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 4/17/00
Name
1101 Market Street, Chattanooga, TN 37402-2801 Sheet 5 of 100
Address

2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 W0# 98-001856-000
Address Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 Authorization No N/A
Address Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code SEE 19 NA Edition, NA Addenda, NA Code Case
REMARKS
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
SPARE	CROSBY	N73370-01-04	NA	NA	1998	REPAIRED	No
PRESSURIZER		N73370-01-05	NA	NA	1998	REPAIRED	No
SAFETY		N73370-01-06	NA	NA	1998	REPAIRED	No
VALVES							

7. Description of Work MACHINED VALVE BODIES. THESE ARE
SPARE VALVES NEVER PLACED INTO SERVICE.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE: CONTRACT 91934 AND
Applicable Manufacturer's Data Reports to be Attached
WESTINGHOUSE E-Specs 678764 AND 676279

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature], Mech Eng Date 17 April 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 7/9/98 to 4/18/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements

Date April 18, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner <u>Tennessee Valley Authority</u> <small>Name</small> <u>1101 Market Street, Chattanooga, TN 37402-2801</u> <small>Address</small>	Date <u>10/24/99</u> Sheet <u>6</u> of <u>100</u>
2. Plant <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	Unit <u>0</u> <u>W0# 98-005759-000</u> <small>Repair Organization P.O. No., Job No., etc.</small>
3. Work Performed by <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	Type Code Symbol Stamp <u>N/A</u> Authorization No <u>N/A</u> Expiration Date <u>N/A</u>
4. Identification of system <u>RCS, CLASS 1</u>	
5. (a) Applicable Construction Code <u>ASME SECT III 1980</u> Edition, <u>W80</u> Addenda, <u>NA</u> Code Case (b) Applicable Edition of Section XI Utilized for Repairs or Replacements <u>1989</u>	

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>PRESSURIZER PORN</u>	<u>TARGET ROCK</u>	<u>8</u>	<u>NA</u>	<u>NA</u>	<u>1983</u>	<u>REPAIRED</u>	<u>YES</u>

7. Description of Work REINSTALLED SEAL WELDS FOLLOWING MAINTENANCE.
THIS VALVE BECOMES A SPARE TO BE INSTALLED LATER AS NEEDED.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure N/A Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature], MECH ENGR Date 26 OCTOBER 19 99
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this

Owner's Report during the period 7/9/98 to 10/27/99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3931
Inspector's Signature National Board, State, Province, and Endorsements

Date Oct 27 19 99

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code, Section XI

1. Owner TVAN Date 12/16/98
1101 Market Street
Chattanooga, TN 37401
Name
Address

2. Plant Sequoyah Nuclear Plant Unit 1
P.O. Box 2000
Soddy-Daisy, TN 37379
Name
Address WO# 98-007344-000
Repair/Replacement Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp NA
P.O. Box 2000 Authorization No. NA
Soddy-Daisy, TN 37379 Expiration Date NA
Name
Address

4. Identification of System CVCS AND CSS, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7, 19 69 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 19 89

6. Identification of Components:

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
1-CVCH-592	NA	NA	NA	NA	NA	INSTALLED	NO
1-CVCH-400	↓	↓	↓	↓	↓	↓	↓
1-CVCH-539	↓	↓	↓	↓	↓	↓	↓
1-CSH-455	↓	↓	↓	↓	↓	↓	↓
1-CVCH-446	↓	↓	↓	↓	↓	↓	↓

7. Description of Work MODIFIED PIPE SUPPORTS.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure Exempt
 Other Pressure NA psi Test Temp. _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.



FORM NIS-2 (Back)

9. Remarks NA
Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and that this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 16 DECEMBER, 19 1998
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Inspection & Insurance Co. of Hartford, CT have inspected the components described in this Owner's Report during the period 10/12/98 to 1/12/99, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature National Board, State, Province, and Endorsements

Date 1/12, 19 99

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code, Section XI

1. Owner TVAN
 1101 Market Street
 Chattanooga, TN 37401

Date 12/16/98
 Sheet 8 of 100

2. Plant Sequoyah Nuclear Plant
 P.O. Box 2000
 Soddy-Daisy, TN 37379

Unit 1
WIO# 98-007344-000
 Repair/Replacement Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
 P.O. Box 2000
 Soddy-Daisy, TN 37379

Type Code Symbol Stamp NA
 Authorization No. NA
 Expiration Date NA

4. Identification of System CVCS, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7, 19 69 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 19 89

6. Identification of Components:

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
1-CVCH-421	NA	NA	NA	NA	NA	INSTALLED	NO
47B406-2-2	↓	↓	↓	↓	↓	INSTALLED	↓
47B406-2-4	↓	↓	↓	↓	↓	INSTALLED	↓
1-CVCH-571	↓	↓	↓	↓	↓	REMOVED	↓

7. Description of Work MODIFIED PIPE SUPPORTS

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure Exempt
 Other Pressure _____ psi NA Test Temp. _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.



FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and that this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 16 DECEMBER, 19 1998
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Inspection & Insurance Co. of Hartford, CT have inspected the components described in this Owner's Report during the period 10/12/98 to 1/12/99, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements

Date 1/12, 19 99

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner <u>Tennessee Valley Authority</u> <small>Name</small> <u>1101 Market Street, Chattanooga, TN 37402-2801</u> <small>Address</small>	Date <u>3/24/00</u> Sheet <u>9</u> of <u>100</u>
2. Plant <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	Unit <u>1</u> <u>WO# 98-008311-000</u> <small>Repair Organization P.O. No.. Job No.. etc.</small> Type Code Symbol Stamp <u>N/A</u>
3. Work Performed by <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	Authorization No <u>N/A</u> Expiration Date <u>N/A</u>

4. Identification of system SAFETY INJECTION CLASS 2

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-FCV-63-11</u>	<u>ANCHOR DARLINGS</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACED</u>	<u>NO</u>

7. Description of Work REPLACED BONNET BOLTING

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks CONSTRUCTION CODE CONTRACT 91934 AND
Applicable Manufacturer's Data Reports to be Attached
WESTINGHOUSE E-SPECS 678765 & 676258.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECHANIC Date 24 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/23/00 to 3/27/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements
Date MARCH 27, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/10/00
 Sheet 10 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WIC# 98-010798-002
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system CVCS, CLASS 2

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-FCV-62-72	MASONELLAN	NA	NA	NA	2000	REPLACED	No

7. Description of Work REPLACED VALVE PLUG

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE: CONTRACT 91934

Applicable Manufacturers Data Reports to be Attached

AND WESTINGHOUSE E-Specs 678763
AND 676270.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 10 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/23/00 to 3/9/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date MARCH 10 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code, Section XI

1. Owner TVAN Date 3/1/99
1101 Market Street
Chattanooga, TN 37401 Address Sheet 11 of 100
2. Plant Sequoyah Nuclear Plant Unit 1
P.O. Box 2000 Name
Soddy-Daisy, TN 37379 Address WO# 98-01152-000
Repair/Replacement Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant
P.O. Box 2000 Name
Soddy-Daisy, TN 37379 Address Type Code Symbol Stamp NA
Authorization No. NA
Expiration Date NA
4. Identification of System CVCS, CLASS 2
5. (a) Applicable Construction Code ANSI B31.7, 19 69 Edition, 70 Addenda, N/A Code Case
(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 19 89

6. Identification of Components:

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
<u>1-BIH-407</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>INSTALLED</u>	<u>NO</u>

7. Description of Work MODIFIED PIPE SUPPORT.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure Exempt
Other Pressure N/A psi Test Temp. _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.



FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and that this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed K. Sullivan, MECH ENGR Date 1 MARCH, 19 99
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Inspection & Insurance Co. of Hartford, CT have inspected the components described in this Owner's Report during the period 1/6/99 to 3/3/99, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature National Board, State, Province, and Endorsements

Date 3/3, 19 99

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code, Section XI

1. Owner TVAN Date 3/1/99
 1101 Market Street
 Chattanooga, TN 37401
Name Address
 Sheet 12 of 100

2. Plant Sequoyah Nuclear Plant Unit 1
 P.O. Box 2000
 Soddy-Daisy, TN 37379
Name Address
W/O # 98-01152-001
Repair/Replacement Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
 P.O. Box 2000
 Soddy-Daisy, TN 37379
Name Address
 Type Code Symbol Stamp NA
 Authorization No. NA
 Expiration Date NA

4. Identification of System SAFETY INJECTION, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7, 19 69 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 19 89

6. Identification of Components:

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
1-SIH-491	NA	NA	NA	NA	NA	INSTALLED	NO
47B435-2-1						INSTALLED	
1-SIH-424						REMOVED	
1-SIH-495						REMOVED	
1-SIH-497						REMOVED	

7. Description of Work MODIFIED PIPE SUPPORTS

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure Exempt
 Other Pressure NA psi Test Temp. _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.



FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and that this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed V. J. Johnson, MECH ENGR Date 1 MARCH, 19 99
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Inspection & Insurance Co. of Hartford, CT have inspected the components described in this Owner's Report during the period 1/6/99 to 3/4/99, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature National Board, State, Province, and Endorsements

Date 3/4, 19 99

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 5/1/99
Name
1101 Market Street, Chattanooga, TN 37402-2801 Sheet 13 of 100
Address

2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 WIO# 98-01152-003
Address Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 Authorization No N/A
Address Expiration Date N/A

4. Identification of system RHR, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 1969 Edition, 70 Addenda, N/A Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-RHRH-447	NA	NA	NA	NA	NA	REPLACEMENT	NO
1-RHRH-489	↓	↓	↓	↓	↓	↓	↓
1-RHRH-442							
1-RHRH-454							

7. Description of Work MODIFIED PIPE SUPPORTS.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturers Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed K. Williams, MECH ENGR Date 1 MAY 19 99
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1-19-99 to 5-1-99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN/2533
Inspector's Signature National Board, State, Province, and Endorsements

Date 5-1 19 99

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 5/1/99
 Sheet 14 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
 WO# 98-01152-003

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No.. Job No.. etc.
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system RHR, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 1969 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-RHRH-427	NA	NA	NA	NA	NA	REPLACEMENT	No
1-RHRH-421	↓	↓	↓	↓	↓	↓	↓
1-RHRH-460							
1-RHRH-470							
1-RHRH-450							
47B406-3-1							
1-RHRH-445							
1-RHRH-490							
1-RHRH-490							

7. Description of Work MODIFIED PIPE SUPPORTS.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturers Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 1 MAY 19 99
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1-19-99 to 5-1-99 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 2533
Inspector's Signature National Board, State, Province, and Endorsements

Date 5-1 19 99

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/10/00
 Sheet 15 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 98-011368-000

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 60 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>SAFETY INJECTION</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACED</u>	<u>NO</u>
<u>PIPING</u>							

7. Description of Work REPLACED FLANGE BOLTING.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 10 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 12/3/99 to 3/11/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN 3431
National Board, State, Province, and Endorsements

Date March 11 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/10/00
 Sheet 16 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 98-011384-000
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7¹⁹ Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
SAFETY INJECTION PIPING	TVA	NA	NA	NA	2000	REPLACED	NO

7. Description of Work REPLACED FLANGE BORTING

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Mech. Engr Date 10 MARCH 2000

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 12/3/99 to 3/13/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions TN 3431 National Board, State, Province, and Endorsements

Date March 13 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 3/24/00
Name
1101 Market Street, Chattanooga, TN 37402-2801 Sheet 17 of 100
Address
 2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 WO# 98-01711-000
Address Repair Organization P.O. No., Job No., etc.
 3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name Authorization No N/A
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 Expiration Date N/A
Address

4. Identification of system MAIN STEAM, CLASS 2
 5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-PCV-1-30</u>	<u>COPEL VULCAN</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPAIRED</u>	<u>NO</u>

7. Description of Work PERFORMED BASEMETAL REPAIR BY MACHINING.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks CONSTRUCTION CODE DRAFT ASME CODE FOR
Pumps & VALVES, 1968, CLASS II.
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 24 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/28/00 to 3/27/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature National Board, State, Province, and Endorsements
Date March 27, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 2/27/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address
 2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
 3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
 Authorization No N/A
 Expiration Date N/A
 4. Identification of system SAFETY INJECTION, CLASS 1 & 2
 5. (a) Applicable Construction Code ANSI B31.7 ¹⁹69 Edition, 70 Addenda, N/A Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-SIH-32	PSA	801	NA	NA	2000	REPLACED	NO
1-SIH-32	TVA	NA	NA	NA	2000	REPLACEMENT	NO
1-SIH-31	TVA	NA	NA	NA	2000	REPLACEMENT	NO

7. Description of Work DELETED 1-SIH-31. REPLACED SNUBBER WITH SCROT. ON 1-SIH-32.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 27 FEBRUARY 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10-6-99 to 2-27-00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN/2533
Inspector's Signature National Board, State, Province, and Endorsements

Date Feb. 27, 2000 19

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner <u>Tennessee Valley Authority</u> <small>Name</small> <u>1101 Market Street, Chattanooga, TN 37402-2801</u> <small>Address</small>	Date <u>3/7/00</u> <hr/> Sheet <u>19</u> of <u>100</u> <hr/> Unit <u>1</u> <hr/> W/O # <u>99-000882-004</u> <small>Repair Organization P.O. No.. Job No.. etc.</small> Type Code Symbol Stamp <u>N/A</u> <hr/> Authorization No <u>N/A</u> <hr/> Expiration Date <u>N/A</u>
2. Plant <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	
3. Work Performed by <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	

4. Identification of system PRIMARY WATER, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, N/A Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>47A491-9-43</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE- MENT</u>	<u>NO</u>
<u>47A492-2-53</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE- MENT</u>	<u>NO</u>

7. Description of Work MODIFIED PIPE SUPPORTS

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed H. Wilson, MECH ENGR Date 7 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10-13-99 to 3-9-00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 2553
Inspector's Signature National Board, State, Province, and Endorsements

Date 3-9-00 19

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI**

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/17/00
 Sheet 20 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
 WO# 99-000882-007

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 1 AND 2

5. (a) Applicable Construction Code ANSI B31.7¹⁹ 69 Edition, 70 Addenda, N/A Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-SIH-1	TVA	NA	NA	NA	2000	REPLACEMENT	No
1-SIH-16	↓	↓	↓	↓	↓	↓	↓
1-SIH-21							
1-SIH-22							
1-SIH-25							

7. Description of Work MODIFIED PIPE SUPPORTS

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature], MECH ENGR Date 17 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/26/99 to 3/21/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 21 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/10/00
Sheet 21 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-000882-008
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 1 AND 2

5. (a) Applicable Construction Code ANSI B31.7 1968 Edition, 70 Addenda, N/A Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-SIH-44	TVA	NA	NA	NA	2000	REPLACEMENT	NO
1-SIH-45	↓	↓	↓	↓	↓	↓	↓
1-SIH-64							
1-SIH-62							
1-SIH-65							
1-SIH-66							

7. Description of Work MODIFIED PIPE SUPPORTS 1-SIH-44, -45-64.
DELETED THE REMAINDER.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 10 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/8/99 to 3/11/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 11 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 3/8/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc. WO# 99-000882-009

Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 1 AND 2

5. (a) Applicable Construction Code ANSI B31.7 ¹⁹ Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-SIH-108	TVA	NA	NA	NA	2000	REPLACE MENT	NO
1-SIH-70	↓	↓	↓	↓	↓	↓	↓
1-SIH-72							
1-SIH-76							
1-SIH-77							
1-SIH-107							

7. Description of Work MODIFIED 1-SIH-108 SUPPORT. DELETED THE REMAINDER OF THE SUPPORTS.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 8 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/28/99 to 3/9/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature 3/9/00 National Board, State, Province, and Endorsements
Date March 9 19 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/11/00
Sheet 23 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-000882-010

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 1 AND 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-SIH-113</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACEMENT</u>	<u>No</u>
<u>1-SIH-118</u>	<u>↓</u>	<u>↓</u>	<u>↓</u>	<u>↓</u>	<u>↓</u>	<u>↓</u>	
<u>1-SIH-119</u>	<u>↓</u>	<u>↓</u>	<u>↓</u>	<u>↓</u>	<u>↓</u>	<u>↓</u>	

7. Description of Work MODIFIED PIPE SUPPORT 1-SIH-113. DELETED THE OTHER TWO SUPPORTS

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 11 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/8/99 to 3/13/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements

Date March 13 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/10/00
 Sheet 24 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
Work 99-000882-012

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7¹⁹ 09 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-SIH-136</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACEMENT</u>	<u>NO</u>

7. Description of Work MODIFIED PIPE SUPPORT.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 10 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/3/00 to 3/11/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions TN3431

National Board, State, Province, and Endorsements

Date March 11 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/23/00
 Sheet 25 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
 WO# 99-000882-013

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 1

5. (a) Applicable Construction Code ANSI B31.7 19 00 Edition, 70 Addenda, N/A Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-S1H-171</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MATT</u>	<u>NO</u>

7. Description of Work MODIFIED PIPE SUPPORT

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 23 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/6/99 to 3/28/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3931
Inspector's Signature National Board, State, Province, and Endorsements

Date March 28, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/11/00
 Sheet 26 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
W/O# 99-000882-017

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 1968 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)						
1-SIH-386	TVA	NA	NA	NA	2000	REPLACE- MGNT	NO						
1-SIH-387													
1-SIH-388													
1-SIH-390													
1-SIH-391													
1-SIH-393													
1-SIH-395													
1-SIH-396								↓	↓	↓	↓	↓	↓

7. Description of Work MODIFIED PIPE SUPPORTS.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks N/A

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 20 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/8/00 to 3/1/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 21 2000

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI**

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/11/00
 Sheet 27 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
W/O# 99-000882-017

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No.. Job No.. etc.
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 1999 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-SIH-397</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MENT</u>	<u>No</u>
<u>1-SIH-398</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MENT</u>	<u>No</u>

7. Description of Work MODIFIED PIPE SUPPORTS

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 20 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/6/00 to 3/21/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements
Date March 21 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/10/00
Sheet 28 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WIO# 99-000882-018
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS I

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, N/A Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-SIH-803</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE- MENT</u>	<u>No</u>
<u>1-SIH-809</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE- MENT</u>	<u>No</u>

7. Description of Work DELETED PIPE SUPPORTS

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 10 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/28/99 to 3/12/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions

TN 3431

National Board, State, Province, and Endorsements

Date March 12 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 1/25/00
Sheet 29 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-000882-021
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system CHILLED WATER, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>47A915-B-23</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACEMENT</u>	<u>No</u>

7. Description of Work DELETED PIPE SUPPORT

8. Tests Conducted: Hydrostatic Pneumatic ~~Nominal Operating Pressure~~
Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 25 JANUARY 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 11/16/99 to 1/31/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature 11/31/00 National Board, State, Province, and Endorsements
Date Jan 31 10 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/11/00
 Sheet 30 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
 WO# 99-002352-000
Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Authorization No N/A
 Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ASME Sec III 19 68 Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989# SEE REMARKS

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
REACTOR	ROTTERDAM DRYDOCK	30616	NA	NA	2000	REPAIRED	NO
PRESSURE VESSEL							

7. Description of Work REPAIRED CANOPY SEAL WELD AT THE J-1 LOCATION.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

RELIEF HAS BEEN REQUESTED FOR THE REPAIR METHOD

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 11 MARCH 2000

Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 3/3/00 to 3/14/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions TN 3931 National Board, State, Province, and Endorsements

Date MARCH 14 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 3/8/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc. WTO# 99-003889-000

Authorization No N/A
Expiration Date N/A

4. Identification of system ICE CONDENSER, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 1969 Edition, 70 Addenda, N/A Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
47A462 - 12-11	PSA	20667	NA	NA	2000	REPLACE-MENT	No
47A462 - 12-25	PSA	20137	NA	NA	2000	REPLACE-MENT	No

7. Description of Work MODIFIED PIPE SUPPORTS.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed KP Winters, MECH ENGR Date 8 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 11-16-99 to 3-8-00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 2533
Inspector's Signature National Board, State, Province, and Endorsements

Date 3-8-2000 19

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/22/00
 Sheet 32 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
 KID# 99-00 3889-001
Repair Organization P.O. No.. Job No.. etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system ICE CONDENSER, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, N/A Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>47A462-13-14</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MGMT</u>	<u>NO</u>

7. Description of Work MODIFIED PIPE SUPPORT.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this Replacement conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 22 MARCH 2000
Owner, or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 12/5/99 to 3/27/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements

Date March 22, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/10/00
 Sheet 33 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-003889-006
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ANSI B31.7 ¹⁹ 69 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-RCH-863	TVA	NA	NA	NA	2000	REPLACE MENT	No
1-RCH-865	TVA	NA	NA	NA	2000	REPLACE MENT	No

7. Description of Work MODIFIED SUPPORT 1-RCH-863. DELETED
SUPPORT 1-RCH-865.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 10 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 11/24/99 to 3/11/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3931
Inspector's Signature National Board, State, Province, and Endorsements

Date March 11 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/20/00
 Sheet 34 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
 WO# 99-003889-007
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ANSI B31.7 ¹⁹ 60 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-RCH-36	TVA	NA	NA	NA	2000	REPLACEMENT	No
1-RCH-27	↓	↓	↓	↓	↓	↓	↓
1-RCH-24	↓	↓	↓	↓	↓	↓	↓
47B465-1-1	↓	↓	↓	↓	↓	↓	↓

7. Description of Work DELETED SUPPORT 1-RCH-24. INSTALLED NEW SUPPORT 47B465-1-1. MODIFIED THE OTHER SUPPORTS.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 20 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 11/29/99 to 3/22/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions

TN3431

National Board, State, Province, and Endorsements

Date

March 22

2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/11/00
 Sheet 35 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WLO# 99-003889-009
Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Authorization No N/A
 Expiration Date N/A

4. Identification of system CVCS, CLASS 1 AND 2

5. (a) Applicable Construction Code ANSI B31.7¹⁹ 69 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-CVCH-345	TVA	NA	NA	NA	2000	REPLACE-MENT	No
1-CVCH-346	↓	↓	↓	↓	↓	↓	↓
1-CVCH-320	↓	↓	↓	↓	↓	↓	↓
1-CVCH-321	↓	↓	↓	↓	↓	↓	↓

7. Description of Work MODIFIED SUPPORTS 1-CVCH-345 AND-346.
DELETED THE OTHER TWO SUPPORTS

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NO psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 20 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/11/00 to 3/21/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements

Date MARCH 21 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/8/00
Sheet 36 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WD# 99-003889-010
Repair Organization P.O. No., Job No., etc.
Type Code Symbol Stamp N/A

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Authorization No N/A
Expiration Date N/A

4. Identification of system CVCS, Class 2

5. (a) Applicable Construction Code ANSI B31.7¹⁹ 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-CVCH-271</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACEMENT</u>	<u>NO</u>

7. Description of Work MODIFIED PIPE SUPPORT

8. Tests Conducted: Hydrostatic Pneumatic ~~Nominal Operating Pressure~~
Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed William M. Meacham Date 8 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 11/24/99 to 3/9/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature #137100 National Board, State, Province, and Endorsements
Date March 9 19 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/8/00
 Sheet 37 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
 WO# 99-003889-011
Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Authorization No N/A
 Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ANSI B31.7 ¹⁹⁶⁹ Edition, 70 Addenda, N/A Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-RCH-11	TVA	NA	NA	NA	2000	REPLACE MENT	NO
1-RCH-18	↓	↓	↓	↓	↓	↓	↓
1-RCH-20							
1-RCH-26							
1-RCH-31							
1-RCH-35							

7. Description of Work DELETED PIPE SUPPORTS.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 8 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 11/24/99 to 3/9/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature 12/3/00 National Board, State, Province, and Endorsements
Date March 9 19 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 2/27/00
Sheet 38 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-003889-04
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system SGB, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 1969 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-SGBH-11</u>	<u>PSA</u>	<u>291</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MENT</u>	<u>NO</u>

7. Description of Work DELETE SUPPORT.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 27 FEBRUARY 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 11/16/99 to 2/27/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature mt 2/27/00 National Board, State, Province, and Endorsements
Date Feb 27 19 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/8/00

Sheet 39 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1

W/O # 99-003889-015
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A

Authorization No N/A

Expiration Date N/A

4. Identification of system SGBD, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-SGBH-132</u>	<u>PSA</u>	<u>16581</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE-MENT</u>	<u>NO</u>

7. Description of Work DELETED PIPE SUPPORT.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed KD Wittgen Mech Engr Date 8 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 11/16/99 to 3/8/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature 3/8/00 National Board, State, Province, and Endorsements
Date MARCH 8 18 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/29/00
Sheet 40 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WIO# 99-006731-000
Repair Organization P.O. No., Job No., etc.
Type Code Symbol Stamp N/A

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Authorization No N/A
Expiration Date N/A

4. Identification of system CONTAINMENT, CLASS MC

5. (a) Applicable Construction Code ASME SECT II 19 68 Edition, W68 Addenda, 1177-5, 1413, 1330-1 Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>CONTAINMENT PENETRATIONS</u>	<u>CBI</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACEMENT</u>	<u>NO</u>
<u>X-70 &</u>							
<u>X-74</u>							

7. Description of Work CAPPED OFF THE TWO PENETRATIONS.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure _____ psi Test Temp _____ °F
App J

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature], MECH ENGR Date 29 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/27/00 to 4/5/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions 7103431
National Board, State, Province, and Endorsements

Date April 5, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 3/31/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address
 2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
 3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
 WFO# 99-006731-001
Repair Organization P.O. No., Job No., etc.
 Authorization No N/A
 Expiration Date N/A

4. Identification of system ERCW, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, N/A Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
47A450-22-5	TVA	NA	NA	NA	2000	REPLACE MGMT	NO
47A053-210	↓	↓	↓	↓	↓	↓	↓
47A450-20-51							
47A450-20-40							
47A450-20-41							
47A450-20-27							
47A450-20-26							
47A450-20-28							

7. Description of Work DELETED PIPE SUPPORTS.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturers Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature], MECH ENGR Date 31 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/4/00 to 4/5/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements

Date April 5, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/31/00
 Sheet 42 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WIO# 99-006731-001
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system ERCW, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 ¹⁹ Edition, 20 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
47A450-20-29	TVA	NA	NA	NA	2000	REPLACEMENT	NO
47A053-866	↓	↓	↓	↓	↓	↓	↓
47A450-20-21	↓	↓	↓	↓	↓	↓	↓

7. Description of Work DELETED PIPE SUPPORTS

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed K. Deitzgen, MECH ENGR Date 31 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/4/00 to 4/5/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

MHC
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date April 5, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/31/00
 Sheet 43 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-006731-002
Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Authorization No N/A
 Expiration Date N/A

4. Identification of system CONTAINMENT, CLASS MC

5. (a) Applicable Construction Code ASME SEC III 1968 Edition, 1468 Addenda, 1177-5, 1413, 1330-1 Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>CONTAINMENT PENETRATIONS</u>	<u>CBI</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>1976</u>	<u>REPLACEMENT</u>	<u>NO</u>
<u>X-69</u>							
<u>AND X-73</u>							

7. Description of Work CAPPED OFF THE TWO CONTAINMENT PENETRATIONS.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F
APP J

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed K. Kelly, MECH ENGR Date 31 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/28/00 to 4/10/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date April 10, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/31/00
 Sheet 44 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-006731-003
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system ERCW CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 1969 Edition, 70 Addenda, N/A Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
47A450-20-24	TVA	NA	NA	NA	2000	REPLACEMENT	NO
47A053-895							
47A053-561							
47A053-279							
47A450-20-36							
47A053-618							
47A053-562							
47A053-834							

7. Description of Work DELETED PIPE SUPPORTS

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturers Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 31 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/10/00 to 4/7/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements

Date April 7 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/31/00
Sheet 45 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-006731-003
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system EQCKT, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 1969 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
47A053-563	TVA	NA	NA	NA	2000	REPLACE MENT	NO
47A053-208	↓	↓	↓	↓	↓	↓	↓
47A053-865							
47A053-855							
47A450-20-38							
47A450-20-23							
47A450-20-39							

7. Description of Work DELETED PIPE SUPPORTS

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 31 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/10/00 to 4/7/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN03431
Inspector's Signature National Board, State, Province, and Endorsements

Date April 7, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/22/00
 Sheet 46 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
 WO# 99-006732-002

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No.. Job No.. etc. N/A
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 1

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 CODE CASE N-416-1

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-02-63-542	UST&D	1-02-63-542	NA	NA	2000	REPLACE MENT	YES
SI PIPING	TVA	NA	NA	NA	2000	REPLACE MENT	NO

7. Description of Work INSTALLED ECCS THROTTLING ORIFICE.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

KRW 3/22/00

CONSTRUCTION CODE

Applicable Manufacturer's Data Reports to be Attached

ORIFICE ASME SEC III 1989 E

PIPING ANSI B31.7 1969 E / 1970 A

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 22 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/22/00 to 3/23/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date MARCH 23 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner <u>Tennessee Valley Authority</u> <small>Name</small> <u>1101 Market Street, Chattanooga, TN 37402-2801</u> <small>Address</small>	Date <u>3/23/00</u> Sheet <u>47</u> of <u>100</u>
2. Plant <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	Unit <u>1</u> <u>W10th 99-006732-003</u> <small>Repair Organization P.O. No., Job No., etc.</small>
3. Work Performed by <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	Type Code Symbol Stamp <u>N/A</u> Authorization No <u>N/A</u> Expiration Date <u>N/A</u>

4. Identification of system SAFETY INJECTION, CLASS 1

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 CODE CASE N-416-1

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-02-63-544</u>	<u>UST&D</u>	<u>1-02-63544</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MENT</u>	<u>YES</u>
<u>SI PIPING</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MENT</u>	<u>NO</u>

7. Description of Work INSTALLED ECCS THROTTLING ORIFICE

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks CONSTRUCTION CODE
Applicable Manufacturer's Data Reports to be Attached
ORIFICE ASME SEC III 1989E
PIPING ANSI B31.7 1969E / ^{KNW 3/23/00} ~~1970E~~ 1970A

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 23 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/22/00 to 3/23/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements
Date MARCH 23 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 3/23/00
Name
1101 Market Street, Chattanooga, TN 37402-2801 Sheet 48 of 100
Address
 2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 WO#99-006732-004
Address Repair Organization P.O. No., Job No., etc.
 3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name Authorization No N/A
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 Expiration Date N/A
Address

4. Identification of system SAFETY INJECTION, CLASS 1
 5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989, CODE CASE N-416-1
 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-OR-63-546</u>	<u>UST&D</u>	<u>1-OR-63-546</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MENT</u>	<u>Yes</u>
<u>SI PIPING</u>	<u>TYA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MENT</u>	<u>NO</u>

7. Description of Work INSTALLED ECCS THROTTLING ORIFICE.
 8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks CONSTRUCTION CODE
Applicable Manufacturers Data Reports to be Attached
ORIFICE ASME SEC III 1989 E
PIPING ANSI B31.7 1969 E/1970A

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 23 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/22/00 to 3/23/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions TN 3431
National Board, State, Province, and Endorsements

Date MARCH 23 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 3/22/00
Name
1101 Market Street, Chattanooga, TN 37402-2801 Sheet 49 of 100
Address

2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 K10# 99-006732-005
Address Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 Authorization No N/A
Address Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS I

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 CODE CASE N-416-1

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-02-63-548	UST&D	1-02-63-548	NA	NA	2000	REPLACEMENT	YES
SI PIPING	TVA	NA	NA	NA	2000	REPLACEMENT	NO

7. Description of Work INSTALLED ECCS THROTTLING ORIFICE,

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE

Applicable Manufacturer's Data Reports to be Attached

ORIFICE ASME Sec III 1989 E

PIPING ANSI B31.7 1969 E/1970 A

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 22 MARCH 2000

Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/22/00 to 3/23/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions

TN3431

National Board, State, Province, and Endorsements

Date March 23 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 3/22/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address
 2. Plant Sequoyah Nuclear Plant Sheet 50 of 100
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
 3. Work Performed by Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
 Repair Organization P.O. No., Job No., etc. WO# 99-006732-006
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY (INJECTION) CLASS 1
 5. (a) Applicable Construction Code SEE 19 REMARKS Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 CODE CASE
N-416-1

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-OR-63-550	UST&D	1-OR-63-550	NA	NA	2000	REPLACE MENT	YES
SI PIPING	TVA	NA	NA	NA	2000	REPLACE MENT	NO

7. Description of Work INSTALLED ECCS THROTTLING ORIFICE.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE

Applicable Manufacturers Data Reports to be Attached

DRIFICE ASME SECT III 1989E

PIPING ANSI B31.7 1969E/1970A

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 22 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/23/00 to 3/23/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date MARCH 23 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 3/22/00
Name
1101 Market Street, Chattanooga, TN 37402-2801 Sheet 51 of 100
Address
 2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 WO# 99-006732-007
Address Repair Organization P.O. No., Job No., etc.
 3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name Authorization No N/A
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 Expiration Date N/A
Address

4. Identification of system SAFETY INJECTION, CLASS 1
 5. (a) Applicable Construction Code ^{SEE} REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 CODE CASE
N-410-1

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-02-63-552	UST&D	1-02-63-552	NA	NA	2000	REPLACE MENT	Yes
SI PIPING	TVA	NA	NA	NA	2000	REPLACE MENT	NO

7. Description of Work INSTALLED ECCS THROTTLING ORIFICE

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE

Applicable Manufacturer's Data Reports to be Attached

ORIFICE ASME SECT III 1989 E

PIPING ANSI B31.7 1967 E / 1970 A

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature], MECH ENGR Date 22 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/23/00 to 3/23/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements

Date MARCH 23 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/22/00
 Sheet 52 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
 WIO# 99-006732-008

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc. N/A
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 1

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 CODE CASE N-416-1

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-02-03-554	UST&D	1-02-03-554	NA	NA	2000	REPLACE MENT	YES
SI PIPING	TVA	NA	NA	NA	2000	REPLACE MENT	NO

7. Description of Work INSTALLED ECCS THROTTLING ORIFICE.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE

Applicable Manufacturer's Data Reports to be Attached

ORIFICE ASME SEC III 1989E

PIPING ANSI B31.7 1969E | 1970A

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA

Expiration Date

NA

Signed

[Signature] MECH ENGR

Date

22 MARCH

2000

Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/23/00 to 3/23/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions

TN3431

National Board, State, Province, and Endorsements

Date

March 23

2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/23/00
 Sheet 53 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-006732-009
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 1

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989, CODE CASE N-416-1

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-02-63-550</u>	<u>UST&D</u>	<u>1-02-63-550</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACEMENT</u>	<u>YES</u>
<u>SI PIPING</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACEMENT</u>	<u>NO</u>

7. Description of Work INSTALLED ECCS THROTTLING ORIFICE

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks CONSTRUCTION CODE
Applicable Manufacturer's Data Reports to be Attached

ORIFICE ASME SECTION III 1982E

PIPING ANSI B31.7 1969E/1970A

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed K. J. Johnson, MECH ENGR Date 23 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/23/00 to 3/23/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements
Date MARCH 23 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 3/22/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address
 Sheet 54 of 100

2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
WO# 99-006732-010
Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION CLASS 1

5. (a) Applicable Construction Code SEE 19 NA Edition, NA Addenda, NA Code Case
REMARKS
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 CODE CASE
N-416-1

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-DR-63-582	UST&D	1-DR-63-582	NA	NA	2000	REPLACE MGMT	YES
SI PIPING	TVA	NA	NA	NA	2000	REPLACE MGMT	NO

7. Description of Work INSTALLED ECCS THROTTLING ORIFICE.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE

Applicable Manufacturer's Data Reports to be Attached

DRIFICE ASME SEC III 1989 E

PIPING ANSI B31.7 1969 E / 1970 A

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 22 MARCH 2000

Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/25/00 to 3/23/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions

TN3431
National Board, State, Province, and Endorsements

Date March 23 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 3/22/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address
 2. Plant Sequoyah Nuclear Plant Sheet 55 of 100
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
 3. Work Performed by Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
 WJO# 99-006732-011
Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 1
 5. (a) Applicable Construction Code SEE 19 NA Edition, NA Addenda, NA Code Case
REMARKS
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989, CODE CASE
N-416-1
 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-02-63-583	UST&D	1-02-63-583	NA	NA	2000	REPLACE MENT	YES
SI PIPING	TVA	NA	NA	NA	2000	REPLACE MENT	NO

7. Description of Work INSTALLED ECCS THROTTLING ORIFICE.
 8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks CONSTRUCTION CODE:
Applicable Manufacturer's Data Reports to be Attached

ORIFICE: ASME SEC III 1989 E

PIPING: ANSI B31.7 1969E/1970A

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 22 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/25/00 to 3/23/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 23 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/22/00
Sheet 50 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-006732-012

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS I

5. (a) Applicable Construction Code SEE 19 REMARKS Edition, NA Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 CODE CASE
N-416-1

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>10R63584</u>	<u>UST&D</u>	<u>10R63584</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MENT</u>	<u>YES</u>
<u>SLIPPING</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MENT</u>	<u>NO</u>

7. Description of Work INSTALLED EECS THROTTLING ORIFICE.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE

Applicable Manufacturer's Data Reports to be Attached

ORIFICE: ASME SEC III 1989 EDITION

PIPING: ANSI B31.7 CGE/70A

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 22 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/25/00 to 3/23/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date MARCH 23 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/22/00
 Sheet 57 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-006732-013
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 1

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989, CODE CASE N-416-1

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-OR-63-585	UST&D	1-OR-63-585	NA	NA	2000	REPLACE MENT	YES
SI PIPING	TVA	NA	NA	NA	2000	REPLACE MENT	NO

7. Description of Work INSTALLED ECCS THROTTLING ORIFICE

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE

Applicable Manufacturer's Data Reports to be Attached

ORIFICE ASME SECT II 1989E

PIPING ANSI B31.7 1969E/1970A

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 22 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/25/00 to 3/23/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions TN 3431

National Board, State, Province, and Endorsements

Date March 23 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/13/00
 Sheet 58 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit NA
NO# 99-006738-001
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system CVCS, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 1969 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-CVCH-204</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACEMENT</u>	<u>NO</u>

7. Description of Work MODIFIED PIPE SUPPORT.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturers Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 13 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/10/00 to 3/13/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 13 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/27/00
 Sheet 59 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
 WO# 99 006767-000

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system CVCS, CLASS 2

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 CODE CASE N-4167

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-0262-2033	UST&D	9923-3	NA	NA	2000	REPLACE MGMT	YES
CVC PIPING	TVA	NA	NA	NA	2000	REPLACE MGMT	NO

7. Description of Work INSTALLED BREAKDOWN ORIFICE

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE

Applicable Manufacturer's Data Reports to be Attached

ORIFICE ASME SEC III 1989E

PIPING ANSI B31.7 1969E/1970 ADD

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 27 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/18/00 to 3/28/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements

Date March 28, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner <u>Tennessee Valley Authority</u> <small>Name</small> <u>1101 Market Street, Chattanooga, TN 37402-2801</u> <small>Address</small>	Date <u>3/23/00</u> Sheet <u>60</u> of <u>100</u> Unit <u>1</u>
2. Plant <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	Repair Organization P.O. No., Job No., etc. <u>W/O# 99-006767-001</u> Type Code Symbol Stamp <u>N/A</u>
3. Work Performed by <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	Authorization No <u>N/A</u> Expiration Date <u>N/A</u>

4. Identification of system CVCS, CLASS 2

5. (a) Applicable Construction Code ^{SEE} REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 CODE CASE N-416-1

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-02-62-2034</u>	<u>UST&D</u>	<u>9922-4</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MENT</u>	<u>YES</u>
<u>CVCS PIPING</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MENT</u>	<u>NO</u>

7. Description of Work INSTALLED BREAKDOWN ORIFICE

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE

Applicable Manufacturer's Data Reports to be Attached

ORIFICE ASME SECTION III 1989 E

PIPING ANSI B31.7 1969 E/1970 A

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 23 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/18/00 to 3/28/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 28, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner <u>Tennessee Valley Authority</u> <small>Name</small> <u>1101 Market Street, Chattanooga, TN 37402-2801</u> <small>Address</small>	Date <u>3/27/00</u> Sheet <u>61</u> of <u>100</u> Unit <u>1</u> WID# <u>99-006582-000</u> <small>Repair Organization P.O. No., Job No., etc.</small> Type Code Symbol Stamp <u>N/A</u> Authorization No <u>N/A</u> Expiration Date <u>N/A</u>
2. Plant <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	
3. Work Performed by <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-RCH-72</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MENT</u>	<u>No</u>
<u>1-RCH-130</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MENT</u>	<u>No</u>

7. Description of Work MODIFIED PIPE SUPPORTS

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 27 MARCH 2000

Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 12/8/99 to 3/28/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions TN3431 National Board, State, Province, and Endorsements

Date March 28, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/7/00
Sheet 62 of 100

2. Plant Sequoyah Nuclear Plant
Address
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000

Unit 1
WO# 99-007097-000

3. Work Performed by Sequoyah Nuclear Plant
Address
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system MS, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 1969 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-MSH-315	BE	SQ 84	NA	NA	2000	REPLACED	No
1-MSH-315	BE	87C21 525	NA	NA	2000	REPLACE- MENT	No

7. Description of Work REPLACED SNUBBER

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Mech ENGR Date 7 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/20/00 to 3/7/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature 3/7/00 National Board, State, Province, and Endorsements
Date March 7 18 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 2/27/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
 Repair Organization P.O. No., Job No., etc.
 Authorization No N/A
 Expiration Date N/A

4. Identification of system FEEDWATER, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-FDH-243</u>	<u>BE</u>	<u>SQ-125</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACED</u>	<u>No</u>
<u>1-FDH-243</u>	<u>BE</u>	<u>87C21526</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE-MENT</u>	<u>NO</u>

7. Description of Work REPLACED SNUBBER.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 27 FEBRUARY 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/20/00 to 2/27/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature 2/27/00 National Board, State, Province, and Endorsements
Date Feb 27 19 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/7/00
 Sheet 64 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WIO# 99-007100-000
Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Authorization No N/A
 Expiration Date N/A

4. Identification of system AMS, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-AMSH-12</u>	<u>BE</u>	<u>SQ 88</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACED</u>	<u>NO</u>
<u>1-AMSH-12</u>	<u>BE</u>	<u>87C21724</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACEMENT</u>	<u>NO</u>

7. Description of Work REPLACED SNUBBER

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 7 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/20/00 to 3/7/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature 3/7/00 National Board, State, Province, and Endorsements
Date March 7 18 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner <u>Tennessee Valley Authority</u> <small>Name</small> <u>1101 Market Street, Chattanooga, TN 37402-2801</u> <small>Address</small>	Date <u>2/12/00</u> Sheet <u>65</u> of <u>100</u>
2. Plant <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	Unit <u>1</u> <u>WO# 99-007302-000</u> <small>Repair Organization P.O. No., Job No., etc.</small> Type Code Symbol Stamp <u>N/A</u>
3. Work Performed by <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	Authorization No <u>N/A</u> Expiration Date <u>N/A</u>

4. Identification of system RHR, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7¹⁹⁶⁹ Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-RHRH-467</u>	<u>PSA</u>	<u>374</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACED</u>	<u>NO</u>
<u> </u>	<u> </u>	<u>378</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACED</u>	<u>NO</u>
<u> </u>	<u> </u>	<u>14484</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MENT</u>	<u>NO</u>
<u> </u>	<u> </u>	<u>14486</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACE MENT</u>	<u>NO</u>

7. Description of Work REPLACED SNUBBERS

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 12 FEBRUARY 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/20/00 to 2/22/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature National Board, State, Province, and Endorsements
Date Feb 22, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 2/27/00
Sheet 66 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-007304-000
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ANSI B31.7 ¹⁹ 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-RCH-96</u>	<u>PSA</u>	<u>152</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACED</u>	<u>NO</u>
<u>1-RCH-96</u>	<u>PSA</u>	<u>11293</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACEMENT</u>	<u>NO</u>

7. Description of Work REPLACED SNUBBER.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature], MECH ENGR Date 27 FEBRUARY 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/20/00 to 2/27/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature 2/27/00 National Board, State, Province, and Endorsements
Date Feb 27, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 1/27/00
Name
1101 Market Street, Chattanooga, TN 37402-2801 Sheet 67 of 100
Address

2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 WD# 99-007305-000
Address Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 Authorization No N/A
Address Expiration Date N/A

4. Identification of system CVCS, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 1969 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-CVCH-588</u>	<u>PSA</u>	<u>315</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACED</u>	<u>No</u>
		<u>338</u>				<u>REPLACED</u>	
		<u>20638</u>				<u>REPLACE MENT</u>	
		<u>20640</u>				<u>REPLACE MENT</u>	

7. Description of Work REPLACED SUPPORT SNUBBERS

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 27 JANUARY 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/5/00 to 1/31/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature National Board, State, Province, and Endorsements
Date Jan 31, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 1/18/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address
 Sheet 68 of 100

2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
1210# 99-007307-000
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
 Authorization No N/A
 Expiration Date N/A

4. Identification of system DEMIN WATER, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 ¹⁹ 69 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
47A492-1-B	PSA	3871B	NA	NA	2000	REPLACEMENT	No
47A492-1-B	PSA	49B	NA	NA	2000	REPLACED	No

7. Description of Work REPLACED SNUBBER

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/22/00
 Sheet 69 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-007803-000
Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Authorization No N/A
 Expiration Date N/A

4. Identification of system CONTAINMENT, CLASS IAC

5. (a) Applicable Construction Code ASME SECTION II 19 68 Edition, W68 Addenda, 1177-5, 1413, 1330-1, 1431 Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
PENETRATION	CBI	NA	NA	NA	1976	REPAIRED	NO
X-64							

7. Description of Work PERFORMED BASEMETAL REPAIR BY GRINDING

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI.
 repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 22 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/27/00 to 3/27/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date MARCH 27, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/22/00
 Sheet 70 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
W0400-007803-001

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A
 Authorization No N/A

Expiration Date N/A

4. Identification of system CONTAINMENT, CLASS IAC

5. (a) Applicable Construction Code ASME SEC III 19 68 Edition, 1468 Addenda, 1177-9, 1413, 1330-1, 1431 Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>PENETRATION</u>	<u>CBI</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>1976</u>	<u>REPAIRED</u>	<u>NO</u>
<u>X-65</u>							

7. Description of Work PERFORMED BASEMETAL REPAIR BY GRINDING.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this Repair conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 22 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/27/00 to 3/27/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3931
National Board, State, Province, and Endorsements

Date March 27, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/22/00
 Sheet 71 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
 Wlot# 99-007803-002
Repair Organization P.O. No.. Job No.. etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system CONTAINMENT, CLASS MC

5. (a) Applicable Construction Code ASME SECTION II 19 68 Edition, 1468 Addenda, 1177-3, 1413, 1330-1 Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>PENETRATION X-06</u>	<u>CBI</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>1976</u>	<u>REPAIRED</u>	<u>NO</u>

7. Description of Work PERFORMED BASEMETAL REPAIR BY GRINDING.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature], MECH ENGR Date 22 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/27/00 to 3/27/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 27, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/22/00
Sheet 72 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-007803-0073 *KNW 3/22/00*

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system CONTAINMENT, CLASS IAC

5. (a) Applicable Construction Code ASME SEC III 19 68 Edition, W108 Addenda, 1179-5, 1413, 1330-1
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Code Case 1431

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>PENETRATION</u>	<u>CBI</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>1976</u>	<u>REPAIRED</u>	<u>NO</u>
<u>X-67</u>							

7. Description of Work PERFORMED BASEMETAL REPAIR BY GRINDING.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 22 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/27/00 to 3/27/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3931
National Board, State, Province, and Endorsements

Date March 27, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 2/27/00
Name
1101 Market Street, Chattanooga, TN 37402-2801 Sheet 73 of 100
Address

2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 WO# 99-008030-000
Address Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 Authorization No N/A
Address Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ANSI B31.7 1969 Edition, 70 Addenda, N/A Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-RCH-893</u>	<u>PSA</u>	<u>170</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACED</u>	<u>No</u>
<u>1-RCH-893</u>	<u>PSA</u>	<u>20175</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACEMENT</u>	<u>No</u>

7. Description of Work REPLACED SNUBBER

8. Tests Conducted: Hydrostatic Pneumatic ~~Nominal Operating Pressure~~
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 27 FEBRUARY 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/19/00 to 2/27/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature National Board, State, Province, and Endorsements
Date Feb 27 19 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 2/27/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc. WD# 99-008032-000

Authorization No N/A

Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ANSI B31.7 ¹⁹ 69 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-RCH-835	PSA	198	NA	NA	2000	REPLACED	NO
1-RCH-835	PSA	20174	NA	NA	2000	REPLACEMENT	NO

7. Description of Work REPLACED SNUBBER

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 27 FEBRUARY 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/19/00 to 2/27/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3931
Inspector's Signature [Signature] National Board, State, Province, and Endorsements
Date Feb 27 19 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/7/00
 Sheet 75 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-008033-000
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system CVCS, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 ¹⁹ ~~60~~ Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-CVCH-612	PSA	475,494	NA	NA	2000	REPLACED	NO
1-CVCH-612	PSA	38719, 38723	NA	NA	2000	REPLACEMENT	NO

7. Description of Work REPLACED SNUBBERS

8. Tests Conducted: Hydrostatic Pneumatic ~~Nominal~~ Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 7 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1-19-00 to 3-9-00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 2533
Inspector's Signature National Board, State, Province, and Endorsements

Date 3-9-2000 19

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 2/2/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

2. Plant Sequoyah Nuclear Plant Sheet 76 of 100
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

3. Work Performed by Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

W/O # 99-008039-000
Repair Organization P.O. No., Job No., etc.

Type Code Symbol Stamp N/A

Authorization No N/A

Expiration Date N/A

4. Identification of system RHR, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 ¹⁹ 69 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-RHRH-482	PSA	106	NA	NA	2000	REPLACED	NO
1-RHRH-482		1314B	NA	NA	2000	REPLACEMENT	NO

7. Description of Work REPLACED SNUBBER

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturers Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 2 FEBRUARY 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/24/00 to 2/3/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3931
Inspector's Signature nd 2/3/00 National Board, State, Province, and Endorsements
Date Feb 3 10 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 2/2/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

4. Identification of system RHR, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 ¹⁹60 Edition, 70 Addenda, N/A Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-RHRH-483</u>	<u>PSA</u>	<u>267</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACED</u>	<u>NO</u>
<u>1-RHRH-483</u>		<u>14685</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACEMENT</u>	<u>NO</u>

7. Description of Work REPLACED SNUBBER

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 2 FEBRUARY 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/24/00 to 2/9/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3931
Inspector's Signature 1/29/00 National Board, State, Province, and Endorsements
Date Feb 9 15 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/28/00
 Sheet 78 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WLO # 99-008075-000
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ASME SEC III 19 80 Edition, W180 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-PCV-6B-340A	TARGET ROCK	7	NA	NA	1983	REPLACED	Yes
1-PCV-6B-340A		8	NA	NA	1983	REPLACEMENT	Yes

7. Description of Work REPLACED PRESSURIZER PORV.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this Replacement conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 31 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 11/08/99 to 3/31/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date April 3, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/14/00
 Sheet 79 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WIO# 99-008098-000
Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 2

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-63-626	CROSBY	RV-1-8856A	NA	NA	2000	REPLACED	No
1-63-626	CROSBY	RV-2-8856B	NA	NA	2000	REPLACE MENT	No

7. Description of Work REPLACED RELIEF VALVE

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks CONSTRUCTION CODE: CONTRACT 91934 AND
Applicable Manufacturer's Data Reports to be Attached
WESTINGHOUSE E-SPEC 678758 & 676257.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 14 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 9/28/99 to 3/20/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN.3431
Inspector's Signature National Board, State, Province, and Endorsements
Date MARCH 20 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/27/00
Sheet 80 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WD# 99-008107-000

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No.. Job No.. etc.
Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system RCS, CASS 1

5. (a) Applicable Construction Code SEE 19 NA Edition, NA Addenda, NA Code Case
REMARKS
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-68-564	CROSBY	SPARE B	NA	NA	2000	REPLACED	No
1-68-564		SPARE A	NA	NA	2000	REPLACEMENT	No
1-RCH-130	TVA	NA	NA	NA	2000	REPLACED	No

7. Description of Work REPLACED PRESSURIZER SAFETY VALVE.
REPLACED SUPPORT BOLTING.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE

Applicable Manufacturer's Data Reports to be Attached

VALVE - WESTINGHOUSE CONTRACT 91931 AND ESPECS
678764 & 676279

SUPPORT/PIPING - ANSI B31.7 1967E / 1970A

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 27 MARCH 2000
Owner of Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/10/00 to 3/28/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 28, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/10/00
Sheet 81 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-008110-000

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system CVCS, CLASS 2

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-62-662	CROSBY	NG9971-01-0003	NA	NA	2000	REPLACED	NO
1-62-662	CROSBY	RV-1-8117	NA	NA	2000	REPLACE-MENT	NO

7. Description of Work REPLACED RELIEF VALVE

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks CONSTRUCTION CODE: CONTRACT 91934 AND
Applicable Manufacturer's Data Reports to be Attached
WESTINGHOUSE E-SPEC 678758 & 678257.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 21 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 9/28/99 to 3/21/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements

Date March 21 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/15/00
 Sheet 82 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-008111-000

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 2

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-63-627	CROSBY	RV-1-8856B	NA	NA	2000	REPLACED	NO
1-63-627	CROSBY	RV-2-8856A	NA	NA	2000	REPLACEMENT	NO

7. Description of Work REPLACED RELIEF VALVE

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks CONSTRUCTION CODE: CONTRACT 91934
Applicable Manufacturer's Data Reports to be Attached
AND WESTINGHOUSE E-SPEC 678758 & 676257.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 15 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 9/28/99 to 3/22/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements
Date March 22 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/14/00
 Sheet 83 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
W/O# 99-008131-000

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system RHR, CLASS 2

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-74-505	CROSBY	RV-2-8708	NA	NA	2000	REPLACED	No
1-74-505	CROSBY	472387-00-002	NA	NA	2000	REPLACE MENT	No

7. Description of Work REPLACED RELIEF VALVE

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE: CONTRACT 91934 AND

Applicable Manufacturer's Data Reports to be Attached

WESTINGHOUSE E-SPEC 618758 & 676257

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECHANIC Date 14 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 3/2/00 to 3/20/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature National Board, State, Province, and Endorsements

Date March 20 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/9/00
 Sheet 84 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WD # 99-008133-000
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system CYCS, CLASS 2

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-62-636	CROSBY	N69963-006-006	NA	NA	2000	REPLACED	No
1-62-636	CROSBY	RV-2-8124	NA	NA	2000	REPLACEMENT	No

7. Description of Work REPLACED RELIEF VALVE.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks CONSTRUCTION CODE: CONTRACT 91934 AND
Applicable Manufacturer's Data Reports to be Attached
WESTINGHOUSE E-SPEC 678758 & 676257

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 21 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/28/00 to 3/21/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 21 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/11/00
 Sheet 85 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
 WID # 99-008134-000

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No.. Job No.. etc.
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system CVC'S, CLASS 2

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-62-675	CROSBY	RV-2-8119	NA	NA	2000	REPLACED	No
1-62-675	CROSBY	NO9963-01-001	NA	NA	2000	REPLACE-MENT	No

7. Description of Work REPLACED RELIEF VALVE

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE: CONTRACT 91934 AND

Applicable Manufacturer's Data Reports to be Attached

WESTINGHOUSE E-SPECS 678758 & 676257.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 11 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 3/2/00 to 3/12/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 12 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 4/5/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address
 Sheet 86 of 100

2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
WID# 99-008277-001
Repair Organization P.O. No., Job No., etc.
 3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
 Authorization No N/A
 Expiration Date N/A

4. Identification of system FEEDWATER, CLASS 2

5. (a) Applicable Construction Code SEE 19 NA Edition, NA Addenda, NA Code Case
REMARKS
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-3-S10	WALWORTH	NA	NA	NA	2000	REPLACED	NO

7. Description of Work REPLACED BONNET STUDS & NUTS.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE: DRAFT ASME CODES
Applicable Manufacturer's Data Reports to be Attached

FOR PUMPS AND VALVES, 1968.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MEGA ENGR Date 5 APRIL 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/29/00 to 4/10/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements

Date April 10, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/11/00
 Sheet 87 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WIO# 99-008308-001
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system AFW CLASS 2

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-3-892	WALWORTH	NA	NA	NA	2000	REPAIR	NO

7. Description of Work REINSTALLED HINGE PIN PLUG TO BODY SEAL WELD.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE: DRAFT ASME CODE
FOR PUMPS AND VALVES, 1968.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Mech Engr Date 11 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 3/8/00 to 3/12/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN 3431
Inspector's Signature National Board, State, Province, and Endorsements
Date MARCH 12 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/20/00
 Sheet 88 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
 W/O# 99-008748-000

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc. N/A
 Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ASME SEC III 19 77 Edition, 579 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-FSV-68-394</u>	<u>TARGET ROCK</u>	<u>7</u>	<u>12</u>	<u>NA</u>	<u>1980</u>	<u>REPAIRED</u>	<u>YES</u>

7. Description of Work REINSTALLED BODY-TO-BONNET SEAL WELD

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature], MECH ENGR Date 20 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/28/99 to 3/21/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 21 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/20/00
 Sheet 89 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 99-008749-000
Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Authorization No N/A
 Expiration Date N/A

4. Identification of system DCS, CLASS 1

5. (a) Applicable Construction Code ASME SEC III 19 77 Edition, 579 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-FSV-68-395	TARGET ROCK	8	13	NA	1980	REPAIRED	YES

7. Description of Work REINSTALLED BODY-TO-BONNET SEAL WELD

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure N/A psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this Repair conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 20 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/28/99 to 3/21/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 21 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/20/00
 Sheet 90 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WLO# 99-008750-000
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system RCS CLASS 2

5. (a) Applicable Construction Code ASME SEC III 19 77 Edition, 579 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-FSV-68-324	TARGET ROCK	13	278	NA	1981	REPAIRED	YES

7. Description of Work REINSTAUGED BODY-TO-BONNET SEAL WELD.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI.
 repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA

Expiration Date

NA

Signed

[Signature] MECH ENGR

Date

20 MARCH 2000

Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/28/99 to 3/22/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions

TN 3431

National Board, State, Province, and Endorsements

Date

March 22 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/20/00

Sheet 91 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1

WO# 99-008751-000

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A

Authorization No N/A

Expiration Date N/A

4. Identification of system RCS CLASS 2

5. (a) Applicable Construction Code ASME SEC III 19 77 Edition, 579 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>1-FSV-68-397</u>	<u>TARGET ROCK</u>	<u>18</u>	<u>283</u>	<u>NA</u>	<u>1981</u>	<u>REPAIRED</u>	<u>YES</u>

7. Description of Work REINSTALLED BODY-TO BONNET SEAL WELD.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed Haltzman, MECH ENGR Date 20 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/28/99 to 3/21/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions TN3431

National Board, State, Province, and Endorsements

Date March 21 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/14/00

Sheet 92 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1

W0# 99-008841-000
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A

Authorization No N/A

Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ASME SEC III 1980 Edition, 80 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-PCV-68-334	TARGET ROCK	9	NA	NA	1985	REPLACED	Yes
1-PCV-68-334	TARGET ROCK	3	NA	NA	1983	REPLACEMENT	Yes

7. Description of Work REPLACED PRESSURIZER PORV.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 20 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 1/13/00 to 3/20/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 20 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 2/12/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

2. Plant Sequoyah Nuclear Plant Sheet 93 of 100
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

3. Work Performed by Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc. WO# 00-000875-000
Type Code Symbol Stamp N/A

Authorization No N/A
Expiration Date N/A

4. Identification of system ERCW, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 ¹⁹ 69 Edition, 70 Addenda, N/A Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>47A450-20-43</u>	<u>PSA</u>	<u>36835</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACED</u>	<u>No</u>
<u>47A450-20-43</u>	<u>PSA</u>	<u>38730</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACEMENT</u>	<u>No</u>

7. Description of Work REPLACED SNUBBER.

8. Tests Conducted: Hydrostatic Pneumatic ~~Nominal~~ Operating Pressure
Other Pressure NO psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature], MECH ENGR Date 12 FEBRUARY 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/2/00 to 2/22/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements

Date Feb, 22 ¹⁹ 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner <u>Tennessee Valley Authority</u> <small>Name</small> <u>1101 Market Street, Chattanooga, TN 37402-2801</u> <small>Address</small>	Date <u>3/22/00</u> Sheet <u>94</u> of <u>100</u>
2. Plant <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	Unit <u>1</u> <u>WJ# 00-001286-000</u> <small>Repair Organization P.O. No., Job No., etc.</small> Type Code Symbol Stamp <u>N/A</u>
3. Work Performed by <u>Sequoyah Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Soddy-Daisy, TN, 37384-2000</u> <small>Address</small>	Authorization No <u>N/A</u> Expiration Date <u>N/A</u>

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ASME SEC III 1974 Edition, S74 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>RCP# 4</u>	<u>WESTINGHOUSE</u>	<u>2189</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACED</u>	<u>YES</u>
<u>CARTRIDGE SEAL ASSEMBLY</u>		<u>2027</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>REPLACEMENT</u>	<u>YES</u>

7. Description of Work REPLACED CARTRIDGE SEAL ASSEMBLY

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 22 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/23/00 to 3/28/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date MARCH 28, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/27/00
 Sheet 95 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 00-001286-001
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ASME SECTION III 19 74 Edition, 574 Addenda, N/A Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
RCP #4 CARTRIDGE SEAL	WESTINGHOUSE	2027	NA	NA	2000	REPLACED	YES

7. Description of Work REPLACED #2 SEAL HOUSING CAP SCREWS

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 27 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/27/00 to 3/28/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements
Date March 28, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/21/00
Sheet 96 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 00-001488-000

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system PCS, CLASS 1

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
<u>RCP# 4</u>	<u>TVA</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>	<u>2000</u>	<u>Repaired</u>	<u>No</u>
<u>SUPPORT ME# PS-8</u>							

7. Description of Work REPAIR BY WELDING OF TACK WELDS OF SUPPORT SHIMS.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure NA psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature], MECH ENGR Date 21 MARCH 2000
Owner of Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 3/2/00 to 3/23/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 23 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/21/00

Sheet 97 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1

WO# 00-001590-000

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Repair Organization P.O. No., Job No., etc.
 Type Code Symbol Stamp N/A

Authorization No N/A

Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
RCP# 3	TVA	NA	NA	NA	1960	REPAIRED	NO
SUPPORT MK# PS-7							

7. Description of Work REPAIRED BY WELDING OF TACK WELDS OF SUPPORT SHIMS.

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ ~~psi~~ Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

NA

Applicable Manufacturers Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature], MECH ENGR Date 21 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 3/5/00 to 3/27/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions TN3431
National Board, State, Province, and Endorsements

Date March 27, 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/7/00
 Sheet 98 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WO# 00-001796-000
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
 Authorization No N/A
 Expiration Date N/A

4. Identification of system CYCS, CLASS 2

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-62-688	CROSBY	RV-2-8120	NA	NA	2000	REPLACED	NO
1-62-688	CROSBY	NA69958-00-0002	NA	NA	2000	REPLACE-MENT	NO

7. Description of Work REPLACED RELIEF VALVE

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE: CONTRACT 91934 AND
Applicable Manufacturer's Data Reports to be Attached

WESTINGHOUSE E-SPEC 678798 & 676257.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MECH ENGR Date 7 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 3/2/00 to 3/8/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature 3/8/00 National Board, State, Province, and Endorsements
Date March 8 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address

Date 3/7/00
Sheet 99 of 100

2. Plant Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Unit 1
WID # 00-001800-000
Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address

Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system CVCS, CLASS 2

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-62-649	CROSBY	RV-2-8123	NA	NA	2000	REPLACED	NO
1-62-649	CROSBY	NC9964-00-000	NA	NA	2000	REPLACEMENT	NO

7. Description of Work REPLACED RELIEF VALVE

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE: CONTRACT 91934
Applicable Manufacturer's Data Reports to be Attached

AND WESTINGHOUSE E-SPECS 676257 & 678758.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the repair or replacement rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] MEEB GAR Date 7 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 3/2/00 to 3/8/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature 3/8/00 National Board, State, Province, and Endorsements
Date March 8 19 2000

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority Date 3/24/00
Name
1101 Market Street, Chattanooga, TN 37402-2801
Address
 Sheet 100 of 100

2. Plant Sequoyah Nuclear Plant Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
 WID# 00-002203-000
Repair Organization P.O. No., Job No., etc.
 3. Work Performed by Sequoyah Nuclear Plant Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000
Address
 Authorization No N/A
 Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 2

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-63-626	CROSBY	RV-2- 8350B	NA	NA	2000	REPLACED	NO
1-63-626	CROSBY	RV-1- 8350B	NA	NA	2000	REPLACEMENT	NO

7. Description of Work REPLACED RELIEF VALVE

8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure _____ psi Test Temp _____ °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks

CONSTRUCTION CODE: CONTRACT 91934 AND

Applicable Manufacturer's Data Reports to be Attached

WESTINGHOUSE E-SPECS 678758 & 676257.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [Signature] Date 24 MARCH 2000
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Hartford Steam Boiler Insp & Ins Co. of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 3/14/00 to 3/31/00 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions TN3431
Inspector's Signature National Board, State, Province, and Endorsements

Date MARCH 31, 2000

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

APPENDIX C

PRESSURE TEST REPORT

The inspection plan work required for the first outage of the second period of the second interval for Code Category B-P, Code Category C-H, Code Category D-A, Item number D1.10; Code Category D-B, Item number D2.10; and Code Category D-C, Item number D3.10 is on schedule. The following table is a tabulation of pressure test, results of pressure test and corrective measures taken.

PREPARED BY



OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

**System Pressure Tests
Unit 1 Cycle 10
Second Period of the Second Interval**

System	Test Package ID	Performance Date	Test Results
Class 1 RCS System Leakage Test	P4402	3/16/00	No leakage identified.

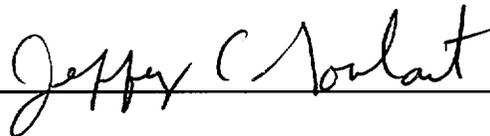
OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

APPENDIX D

IWE METAL CONTAINMENT EVALUATIONS

The following are the evaluations performed for containment examinations performed during U1C10 for inaccessible areas and additional examinations in accordance with 10CFR 50.55a(b)(2)(x) for Class MC components.

PREPARED BY



OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

SUMMARY OF IWE METAL CONTAINMENT EVALUATIONS

The Unit 1 Cycle 10 Inservice Inspection of Class MC components included a total of fifteen Notification of Indications (NOIs) for IWE Metal Containment evaluations. The following is a index of the NOIs for the evaluations that require reporting per 10CFR 50.55a(b)(2)(x).

OWNER : TENNESSEE VALLEY AUTHORITY 1101 MARKET STREET CHATTANOOGA, TENNESSEE 37402-2801	PLANT : SEQUOYAH NUCLEAR PLANT P.O. BOX 2000 SODDY DAISY, TENNESSEE 37384-2000
UNIT : ONE COMMERCIAL SERVICE DATE : JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT : NOT REQUIRED	CERTIFICATE OF AUTHORIZATION : NOT REQUIRED

SUMMARY : IWE METAL CONTAINMENT EVALUATIONS

NOI NUMBER	COMPONENT IDENTIFIER
1-SQ-401	MB-1 (AZ 60° to AZ 175°)
DISPOSITION: Repaired/replaced damaged moisture barrier not bounded to concrete.	
1-SQ-402	MB-1 (SCV surface 12" above and 6" below)
DISPOSITION: Replaced moisture barrier.	
1-SQ-403	MB-2 (AZ 175° to AZ 254° and AZ 267° to AZ 303°)
DISPOSITION: Repaired/replaced damaged moisture barrier not bounded to concrete..	
1-SQ-404	MB-2 (SCV surface 12" above and 6" below)
DISPOSITION: Replaced moisture barrier.	
1-SQ-405	MB-3 (AZ 303° to AZ 60°)
DISPOSITION: Repaired/replaced damaged moisture barrier not bounded to concrete.	
1-SQ-406	MB-3 (SCV surface 12" above and 6" below)
DISPOSITION: Replaced moisture barrier.	
1-SQ-410	SCV-4 (X-47A and X-47B)
DISPOSITION: Cleaned and repainted areas.	
1-SQ-411	SCV-1, 2, 3 and 4 (F-G)
DISPOSITION: Cleaned and repainted areas.	
1-SQ-413	SCV-1 and 2 (penetrations X-64, 66, 66, and 67)
DISPOSITION: Cleaned and repainted areas.	
1-SQ-414	SCV-1, 2, 3 and 4 (E-F)
DISPOSITION: Cleaned and repainted areas.	
1-SQ-415	SCV-1, 2, 3 and 4 (D-E)
DISPOSITION: Cleaned and repainted areas.	
1-SQ-419	SCV-4 (X-114 and X-115)
DISPOSITION: Cleaned and repainted areas.	
1-SQ-423	SCV-1, 2, 3 and 4 (C-D)
DISPOSITION: Cleaned and repainted areas.	
1-SQ-427	SCV-1, 2, 3 and 4 (A-C)
DISPOSITION: Cleaned and repainted areas.	
1-SQ-428	SCV-4 (X-69 OB, X-73 OB, X-69 IB, X-70 IB, X-73 IB and X-74 IB)
DISPOSITION: Cleaned and repainted areas.	

NOTIFICATION OF INDICATION FORM

NOI No. 1-50-401 Plant/Unit SCV SQNP UI PART I - FINDINGS
Examination Report No. CISI-0002 ISI Dwg./Sh. No. CISI-1000C-59 REV L
Description of Indication (Sketch/Photograph if Required for Clarification): MOISTURE BARRIER NOT BONDED TO CONCRETE

Signature of Examiner/Certification Level: [Signature] /Date: 1-11-00
Signature of ISO Coordinator (Field Supervisor): [Signature] /Date: 1-11-00
Signature of ISI Program Owner: [Signature] /Date: 1/11/00

PART II - DISPOSITION

See Attached
Remove/Replace Moisture Barrier in accordance with EPC E 20286A Inspect device for material degradation
Administrative control document number (PER, WR/WO) if applicable: WO 99-000007-00

ASME XI Subsection IWE Yes No If Yes, complete the supplemental information Parts II and III of Page 2 of this form in addition to Parts II, III, and IV, of Page 1. If No, completion of Parts II and III of Page 2 of this form is not required and attachment of Page 2 with Page 1 is not required.

Disposition Prepared/Recorded By: [Signature] Org. UIK Date: 01/31/2000

PART III - ADDITIONAL EXAMINATIONS

Additional Sample Required [IW(X)-2430]: Yes No Page 2 of 2 additional samples attached? Yes No

(Attach list of items in additional sample, if yes.) * SEE PAGE 2 OF 2 [Signature] 2/1/2000
ISI or CISI Program Owner Date

Successive Examination Required: Yes No [Signature] 2/1/2000
ISI or CISI Program Owner Date

PART IV - VERIFICATION OF CLOSURE

Reexamination Report number, if Applicable: SCV-0004
Signature of ISO Coordinator: [Signature] Date: 2/8/00

Finding resulted from performance of the General visual Examination Yes No If Yes, concurrence of the Registered Professional Engineer (RPE) or Individual Responsible for performance is required (N/A otherwise):
N/A [Signature]
RPE/Responsible Engineer Date

Comments: _____

Verification of Complete Corrective Action Required by Disposition (Including Page 2, if applicable)
Signature of ISI or CISI Program Owner: [Signature] Date: 2/8/2000

NOTIFICATION OF INDICATION FORM
SUBSECTION IWE

Complete this page in addition to Page 1 for findings affecting Class MC/Subsection IWE.

NOI No. 1-SQ-401 Plant/Unit SQN / UNIT 1
Examination Report No. SCV-0002 Component ID MB-1 (60°-175°)

PART II - DISPOSITION (Supplemental Information)

Evaluation of inaccessible areas as required by 10CFR 50.55a(b)(2)(x)(A)
(Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions) [additional separate continuation sheets may be attached, as necessary].

(SEE ATTACHED)

Administrative control document number (PER, WR/WO) if applicable: WO 99-000007-000

Disposition Prepared By: Jack Adams *JJA* Org. M/N Date 01/31/2000

PART III - ADDITIONAL EXAMINATIONS (Supplemental Information)

Additional examinations required per 10CFR50.55a(b)(2)(x)(D) Yes No
If Yes, provide (1) A description of each flaw or area, including the extent of degradation, and the conditions that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations to verify that similar degradation does not exist in similar components; (3) A description of the necessary corrective actions; and (4) The number and type of additional examinations to ensure detection of similar degradation in similar components [additional separate continuation sheets may be attached, as necessary].

(SEE ATTACHED)

Specified By: Jack Adams *JJA* Org. M/N Date: 01/31/2000

**NOTIFICATION OF INDICATION FORM
ATTACHMENT**

NOI No. 1-SQ-401 Plant/Unit SQN / UNIT 1
Examination Report No. SCV-0002 Component ID MB-1 (60°-175°)

PART II - DISPOSITION (Attachment to Page 2 of 2) continued

This NOI documents the indications noted during the VT-3 examination of the moisture barrier at the interface between the SCV and the raceway floor. The moisture barrier (MB-1) from AZ 60° to 175° was examined in accordance with the requirements of Table IWE-2500-1 Examination Category E-D. The examination results identified degradation of the seal at various locations as noted in the examination report (the seal is not adhered to the concrete interface). There was no degradation identified for the SCV surface in the seal area, and the moisture barrier seal appeared to have good adherence to the SCV.

The existing moisture barrier along with the fiberglass filler in the crevice (6 inches below the surface) was removed and replaced with a polyurethane elastomeric material. This polyurethane elastomeric material will serve to fill the crevice area, act as the protective coating for the SCV, and provide a leak tight barrier. While the moisture barrier was removed a VT-3 examination was performed from 12 inches above the moisture barrier to 6 inches below the moisture barrier. This area is normally inaccessible due to the stainless steel flashing, insulation and moisture barrier material (refer to drawing CISI-1000-C-59). Examination results (minor pitting and corrosion) for this area (12 inches above to 6 inches below the moisture barrier surface) are documented on NOI 1-SQ-402. There were no areas on the SCV above or below the moisture barrier that required re-coating. The polyurethane elastomeric material will serve as the coating for the area at the moisture barrier. The moisture barrier seal was replaced in accordance with EDC E20286A, re-examined and determined acceptable under VT-3 requirements. Based on the information above, there is no indication that an adverse condition exists in the areas examined or that an adverse condition would be present in inaccessible areas.

Disposition Prepared By: Jack Adams *JLA* Org. M/N Date: 01/31/2000

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-401 Plant/Unit SQN / UNIT 1
Examination Report No. SCV-0002 Component ID MB-1 (60°-175°)

PART III- ADDITIONAL EXAMINATIONS (Attachment to Page 2 of 2) continued

This NOI documents the indications noted during the VT-3 examination of the moisture barrier at the interface between the SCV and the raceway floor. The moisture barrier (MB-1) from AZ 60° to 175° was examined in accordance with the requirements of Table IWE-2500-1 Examination Category E-D. The examination results identified degradation of the seal at various locations as noted in the examination report (the seal is not adhered to the concrete interface). There was no degradation identified for the SCV surface in the seal area, and the moisture barrier seal appeared to have good adherence to the SCV.

The existing moisture barrier along with the fiberglass filler in the crevice (6 inches below the surface) was removed and replaced with a polyurethane elastomeric material. This polyurethane elastomeric material will serve to fill the crevice area, act as the protective coating for the SCV, and provide a leak tight barrier. While the moisture barrier was removed a VT-3 examination was performed from 12 inches above the moisture barrier to 6 inches below the moisture barrier. This area is normally inaccessible due to the stainless steel flashing, insulation and moisture barrier material (refer to drawing CISI-1000-C-59). Examination results (minor pitting and corrosion) for this area (12 inches above to 6 inches below the moisture barrier surface) are documented on NOI 1-SQ-402. There were no areas on the SCV above or below the moisture barrier that required re-coating. The polyurethane elastomeric material will serve as the coating for the area at the moisture barrier. The moisture barrier seal was replaced in accordance with EDC E20286A, re-examined and determined acceptable under VT-3 requirements.

Additional examinations are required. The basis for this decision was due to the moisture barrier seal not adhering to the concrete interface during the initial examination. The additional examinations will include 100% of the remaining length of the moisture barrier (MB-2 and MB-3).

Specified By Jack Adams *JLA* Org. M/N Date: 01/31/2000

NOTIFICATION OF INDICATION FORM

NOI No. 1-SQ-402 Plant/Unit SON PART I - FINDINGS CISI-1000-C-59 Rev. 1
CU ISI Dwg./Sh. No. MB-1 (SCV surface 12" above & 6" below)
Examination Report No. SCV-0003 Component ID

Description of Indication (Sketch/Photograph if Required for Clarification): Degraded coating with minor corrosion, pitting and discoloration in the area 6" below the moisture barrier. (VT-3 Exam) 60°-120° AND 120°-175°
2/1/24/00

Signature of Examiner/Certification Level: Dan M. Provenell /Date: 1-18-00
Signature of ISO Coordinator (Field Supervisor): Ed Wade /Date: 1/18/00
Signature of ISI Program Owner: Jeff Moulant /Date: 1/18/00

PART II - DISPOSITION See Attached

Administrative control document number (PER, WRWO) if applicable: WD 99-000007-000

ASME XI Subsection IWE Yes No If Yes, complete the supplemental information Parts II and III of Page 2 of this form in addition to Parts II, III, and IV, of Page 1. If No, completion of Parts II and III of Page 2 of this form is not required and attachment of Page 2 with Page 1 is not required.

Disposition Prepared/Recorded By: J. L. Adams Org. M/V Date: 2/2/2000 ^{92a} 2/7/2000

PART III - ADDITIONAL EXAMINATIONS

Additional Sample Required [IW(X)-2430]: Yes No Page 2 of 2 additional samples attached? Yes No

(Attach list of items in additional sample, if yes.) Jeff Moulant 2/7/2000
ISI or CISI Program Owner Date

Successive Examination Required: Yes No Jeff Moulant 2/7/2000
ISI or CISI Program Owner Date

PART IV - VERIFICATION OF CLOSURE

Reexamination Report number, if Applicable: SCV-000A
Signature of ISO Coordinator: Ed Wade Date: 2/8/2000

Finding resulted from performance of the General visual Examination Yes No If Yes, concurrence of the Registered Professional Engineer (RPE) or Individual Responsible for performance is required (N/A otherwise):
N/A N/A
RPE/Responsible Engineer Date

Comments: _____

Verification of Complete Corrective Action Required by Disposition (Including Page 2, if applicable)
Signature of ISI or CISI Program Owner: Jeff Moulant Date: 2/8/2000
Owner:

**NOTIFICATION OF INDICATION FORM
ATTACHMENT**

NOI No. 1-SQ-402

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0003

Component ID MB-1 (60°-175°) (SCV surface
12" above and
6" below)

PART II - DISPOSITION (Attachment to Page 1 of 2) continued

This NOI documents the indications noted during the VT-3 examination of the SCV interior surface in the vicinity of the moisture barrier at the interface of the SCV and raceway floor. This inspection was a result of a VT-3 examination of the moisture barrier integrity and is documented under NOI 1-SQ-401. The examination results identified degradation of the seal at various locations as noted in the examination report for NOI 1-SQ-401 (the seal was not adhered to the concrete interface). The areas have been identified for coating degradation and a VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified conditions consisting of mild uniform corrosion, discoloration and minor pitting below the floor surface. The area was evaluated after cleaning.

The moisture barrier was removed from approximately AZ 60° to 175° and the SCV surface was examined in accordance with the requirements of Table IWE-2500-1 Examination Category E-A (IWE-2500(b)). The examination was performed from 12 inches above the floor to 6 inches below the floor interface. There was mild uniform corrosion, minor pitting and discoloration of the coating below the floor surface. There was no detrimental flaws or degradation of the SCV liner noted during the inspection.

The existing moisture barrier along with the fiberglass filler in the crevice (6 inches below the floor interface) was removed and replaced with a polyurethane elastomeric material. This polyurethane elastomeric material will serve to fill the crevice, act as the protective coating for the SCV, and provide a leak tight barrier. This area is normally inaccessible due to the stainless steel flashing, insulation and moisture barrier material (refer to CISI-1000-C-59). There were no areas on the SCV above or below the floor surface that required re-coating. The polyurethane elastomeric material will serve as the coating for the area at the moisture barrier. The moisture barrier seal was replaced in accordance with EDC E20286A, re-examined and determined acceptable under VT-3 requirements. Based on the information above, these SCV areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. The SCV area is acceptable for continued service, and no further corrective action is required.

Disposition Prepared By: Jack Adams *JAA*

Org. M/N

Date: 02/07/2000

NOTIFICATION OF INDICATION FORM
SUBSECTION IWE

Complete this page in addition to Page 1 for findings affecting Class MC/Subsection IWE.

NOI No. 1-SQ-402 Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0003 Component ID MB-1 (60°-175°) (SCV surface
12" above and 6"
below)

PART II - DISPOSITION (Supplemental Information)

Evaluation of inaccessible areas as required by 10CFR 50.55a(b)(2)(x)(A)
(Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the
degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary
corrective actions) [additional separate continuation sheets may be attached; as necessary].

(SEE ATTACHED)

Administrative control document number (PER, WR/WO) if applicable: WO 99-000007-000

Disposition Prepared By: Jack Adams *JAC* Org. M/N Date 2/7/2000

PART III - ADDITIONAL EXAMINATIONS (Supplemental Information)

Additional examinations required per 10CFR50.55a(b)(2)(x)(D) Yes No
If Yes, provide (1) A description of each flaw or area, including the extent of degradation, and the conditions
that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations
to verify that similar degradation does not exist in similar components; (3) A description of the necessary
corrective actions; and (4) The number and type of additional examinations to ensure detection of similar
degradation in similar components [additional separate continuation sheets may be attached, as necessary].

(SEE ATTACHED)

Specified By: Jack Adams *JAC* Org. M/N Date: 2/7/2000

**NOTIFICATION OF INDICATION FORM
ATTACHMENT**

NOI No. 1-SQ-402 Plant/Unit SQN / UNIT 1
Examination Report No. SCV-0003 Component ID MB-1 (60°-175°) (SCV surface
12" above and 6"
below)

PART II - DISPOSITION (Attachment to Page 2 of 2) continued

This NOI documents the indications noted during the VT-3 examination of the SCV interior surface in the vicinity of the moisture barrier at the interface of the SCV and raceway floor. This inspection was a result of a VT-3 examination of the moisture barrier integrity and is documented under NOI 1-SQ-401. The examination results identified degradation of the seal at various locations as noted in the examination report for NOI 1-SQ-401 (the seal was not adhered to the concrete interface). The areas have been identified for coating degradation and a VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified conditions consisting of mild uniform corrosion, discoloration and minor pitting below the floor surface. The area was evaluated after cleaning.

The moisture barrier was removed from approximately AZ 60° to 175° and the SCV surface was examined in accordance with the requirements of Table IWE-2500-1 Examination Category E-A (IWE-2500(b)). The examination was performed from 12 inches above the floor to 6 inches below the floor interface. There was mild uniform corrosion, minor pitting and discoloration of the coating below the floor surface. There was no detrimental flaws or degradation of the SCV liner noted during the inspection.

The existing moisture barrier along with the fiberglass filler in the crevice (6 inches below the floor interface) was removed and replaced with a polyurethane elastomeric material. This polyurethane elastomeric material will serve to fill the crevice, act as the protective coating for the SCV, and provide a leak tight barrier. This area is normally inaccessible due to the stainless steel flashing, insulation and moisture barrier material (refer to CISI-1000-C-59). There were no areas on the SCV above or below the floor surface that required re-coating. The polyurethane elastomeric material will serve as the coating for the area at the moisture barrier. The moisture barrier seal was replaced in accordance with EDC E20286A, re-examined and determined acceptable under VT-3 requirements. Based on the information above, these SCV areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. Therefore, there is no indication that an adverse condition exists in the area examined or that an adverse condition would be present in inaccessible areas.

Disposition Prepared By: Jack Adams *JA* Org. M/N Date: 02/07/2000

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-402

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0003

Component ID MB-1 (60°-175°) (SCV surface
12" above and 6"
below)

PART III- ADDITIONAL EXAMINATIONS (Attachment to Page 2 of 2) continued

This NOI documents the indications noted during the VT-3 examination of the SCV interior surface in the vicinity of the moisture barrier at the interface of the SCV and raceway floor. This inspection was a result of a VT-3 examination of the moisture barrier integrity and is documented under NOI 1-SQ-401. The examination results identified degradation of the seal at various locations as noted in the examination report for NOI 1-SQ-401 (the seal was not adhered to the concrete interface). The areas have been identified for coating degradation and VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified conditions consisting of mild uniform corrosion, discoloration and minor pitting below the floor surface. The area was evaluated after cleaning.

The moisture barrier was removed from approximately AZ 60° to 175° and the SCV surface was examined in accordance with the requirements of Table IWE-2500-1 Examination Category E-A (IWE-2500(b)). The examination was performed from 12 inches above the floor to 6 inches below the floor interface. There was mild uniform corrosion, minor pitting and discoloration of the coating below the floor surface. There was no detrimental flaws or degradation of the SCV liner noted during the inspection.

The existing moisture barrier along with the fiberglass filler in the crevice (6 inches below the floor interface) was removed and replaced with a polyurethane elastomeric material. This polyurethane elastomeric material will serve to fill the crevice, act as the protective coating for the SCV, and provide a leak tight barrier. This area is normally inaccessible due to the stainless steel flashing, insulation and moisture barrier material (refer to CISI-1000-C-59). There were no areas on the SCV above or below the floor surface that required re-coating. The polyurethane elastomeric material will serve as the coating for the area at the moisture barrier. The moisture barrier seal was replaced in accordance with EDC E20286A, re-examined and determined acceptable under VT-3 requirements. Based on the information above, these SCV areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. The SCV area is acceptable for continued service, and no further corrective action is required. Therefore, additional examinations are not warranted.

Specified By Jack Adams *JA*

Org. M/N

Date: 02/07/2000

NOTIFICATION OF INDICATION FORM

NOI No. 1-50-403 Plant/Unit SNP/Unit #1 PART I - FINDINGS ISI Dwg./Sh. No. CIST-1000-C-59 REV.1

Examination Report No. SCV-0005 Component ID MB-2

Description of Indication (Sketch/Photograph if Required for Clarification): MOISTURE BARRIER IS UNBOUNDED (SPLIT/SEPARATED). SEE ATTACHED DATA SHEETS FOR EXAM DETAILS.

Signature of Examiner/Certification Level: _____ Date: 1/20/00
Signature of ISO Coordinator (Field Supervisor): _____ Date: 1/28/00
Signature of ISI Program Owner: Jeff A. Aulant Date: 1/28/00

PART II - DISPOSITION

See NOI 1-50-401

Administrative control document number (PER, WRWO) if applicable: WO 99-000007-600

ASME XI Subsection IWE Yes No If Yes, complete the supplemental information Parts II and III of Page 2 of this form in addition to Parts II, III, and IV, of Page 1. If No, completion of Parts II and III of Page 2 of this form is not required and attachment of Page 2 with Page 1 is not required.

Disposition Prepared/Recorded By: J. A. Adam Org. MLN Date: 3/3/00

PART III - ADDITIONAL EXAMINATIONS

Additional Sample Required [IW(X)-2430]: Yes No Page 2 of 2 additional samples attached? Yes No

(Attach list of items in additional sample, if yes.)

Jeff A. Aulant 3/4/00
ISI or CISI Program Owner Date

Successive Examination Required: Yes No

Jeff A. Aulant 3/4/00
ISI or CISI Program Owner Date

PART IV - VERIFICATION OF CLOSURE

Reexamination Report number, if Applicable: SCV-0008
Signature of ISO Coordinator: Y. Swade Date: 3/5/00

Finding resulted from performance of the General visual Examination Yes No If Yes, concurrence of the Registered Professional Engineer (RPE) or Individual Responsible for performance is required (N/A otherwise):
NA RPE/Responsible Engineer NA Date

Comments: _____

Verification of Complete Corrective Action Required by Disposition (Including Page 2, if applicable)
Signature of ISI or CISI Program Owner: Jeff A. Aulant Date: 3/6/00

NOTIFICATION OF INDICATION FORM
SUBSECTION IWE

Complete this page in addition to Page 1 for findings affecting Class MC/Subsection IWE.

NOI No. 1-SQ-403

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0005

Component ID MB-2 (175°-254 & 267°-303°)

PART II - DISPOSITION (Supplemental Information)

Evaluation of inaccessible areas as required by 10CFR 50.55a(b)(2)(x)(A)
(Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions) [additional separate continuation sheets may be attached, as necessary].

(SEE ATTACHED)

Administrative control document number (PER, WRWO) if applicable: WO 99-000007-000

Disposition Prepared By: Jack Adams *JAA* Org. M/N Date 3/3/00

PART III - ADDITIONAL EXAMINATIONS (Supplemental Information)

Additional examinations required per 10CFR50.55a(b)(2)(x)(D) Yes No
If Yes, provide (1) A description of each flaw or area, including the extent of degradation, and the conditions that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations to verify that similar degradation does not exist in similar components; (3) A description of the necessary corrective actions; and (4) The number and type of additional examinations to ensure detection of similar degradation in similar components [additional separate continuation sheets may be attached, as necessary].

(SEE ATTACHED)

Specified By: Jack Adams *JAA* Org. M/N Date: 3/3/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-403

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0005

Component ID MB-2 (175°-254°
& 267°-303°)

PART II - DISPOSITION (Attachment to Page 2 of 2) continued

This NOI documents the indications noted during the VT-3 examination of the moisture barrier at the interface between the SCV and the raceway floor. The moisture barrier (MB-2) from AZ 175° to 303° (excluding the fuel transfer concrete enclosure from azimuth 254° to 267° where the moisture barrier does not exist) was examined in accordance with the requirements of Table IWE-2500-1 Examination Category E-D. The examination results identified degradation of the seal at various locations as noted in the examination report (the seal is not adhered to the concrete interface). There was no degradation identified for the SCV surface in the seal area, and the moisture barrier seal appeared to have good adherence to the SCV.

The existing moisture barrier along with the fiberglass filler in the crevice (6 inches below the surface) was removed and replaced with a polyurethane elastomeric material. This polyurethane elastomeric material will serve to fill the crevice area, act as the protective coating for the SCV, and provide a leak tight barrier. While the moisture barrier was removed a VT-3 examination was performed from 12 inches above the moisture barrier to 6 inches below the moisture barrier. This area is normally inaccessible due to the stainless steel flashing, insulation and moisture barrier material (refer to drawing CISI-1000-C-59). Examination results (minor pitting and corrosion) for this area (12 inches above to 6 inches below the moisture barrier surface) are documented on NOI 1-SQ-404. There were no areas on the SCV above or below the moisture barrier that required re-coating. The polyurethane elastomeric material will serve as the coating for the area at the moisture barrier. The moisture barrier seal was replaced in accordance with EDC E20286A, re-examined and determined acceptable under VT-3 requirements. Based on the information above, there is no indication that an adverse condition exists in the areas examined or that an adverse condition would be present in inaccessible areas.

Disposition Prepared By:

Jack Adams *Ja*

Org. M/N

Date: 3/3/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-403

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0005

Component ID MB-2 (175°-254°
& 267°-303°)

PART III- ADDITIONAL EXAMINATIONS (Attachment to Page 2 of 2) continued

This NOI documents the indications noted during the VT-3 examination of the moisture barrier at the interface between the SCV and the raceway floor. The moisture barrier (MB-2) from AZ 175° to 303° (excluding the fuel transfer concrete enclosure from azimuth 254° to 267° where the moisture barrier does not exist) was examined in accordance with the requirements of Table IWE-2500-1 Examination Category E-D. The examination results identified degradation of the seal at various locations as noted in the examination report (the seal is not adhered to the concrete interface). There was no degradation identified for the SCV surface in the seal area, and the moisture barrier seal appeared to have good adherence to the SCV.

The existing moisture barrier along with the fiberglass filler in the crevice (6 inches below the surface) was removed and replaced with a polyurethane elastomeric material. This polyurethane elastomeric material will serve to fill the crevice area, act as the protective coating for the SCV, and provide a leak tight barrier. While the moisture barrier was removed a VT-3 examination was performed from 12 inches above the moisture barrier to 6 inches below the moisture barrier. This area is normally inaccessible due to the stainless steel flashing, insulation and moisture barrier material (refer to drawing CISI-1000-C-59). Examination results (minor pitting and corrosion) for this area (12 inches above to 6 inches below the moisture barrier surface) are documented on NOI 1-SQ-404. There were no areas on the SCV above or below the moisture barrier that required re-coating. The polyurethane elastomeric material will serve as the coating for the area at the moisture barrier. The moisture barrier seal was replaced in accordance with EDC E20286A, re-examined and determined acceptable under VT-3 requirements.

Additional examinations are not required because 100% of the remaining examinations within Examination Category E-D, Item number E5.30 (moisture barrier) were examined as the disposition for NOI 1-SQ-401.

Specified By

Jack Adams *JA*

Org. M/N

Date: 3/3/00

UNIT 1 MB-2 EXAMINATION
 AREAS OF MOISTURE BARRIER DETERIORATION

Component ID	Unacceptable Area	Length of Area	Report #
MB-2 Azimuth 175°-254° & 267° -303°	180'0" to 180'7"	7"	SCV-0005
	183'0" to 183'3"	3"	SCV-0005
	189'5" to 189'9"	4"	SCV-0005
	191'0" to 191'3"	3"	SCV-0005
	209'1" to 209'5"	4"	SCV-0005
	215'0" to 216'1"	1' 1"	SCV-0005
	220'0" to 220'2"	2"	SCV-0005
	246'0" to 246'1"	1"	SCV-0005
	271'2" to 271'5"	3"	SCV-0005
MB-2 LENGTH		3' 4"	

EXAMINED BY: [Signature] LEVEL: I

EXAMINED BY: Douglas Monnewell LEVEL: II

NOTIFICATION OF INDICATION FORM

NOI No. 1-50-404 Plant/Unit SON/LWR #1 PART I - FINDINGS
ISI Dwg./Sh. No. CISI-1000-C-59 REV 1
Examination Report No. SCV-0006 Component ID MB-2 (SCV SURFACE 12" ABOVE & 6" BELOW)
Description of Indication (Sketch/Photograph if Required for Clarification): RUST AND LIGHT PITTING ARE PRESENT BELOW THE FLOOR LEVEL (MOISTURE BARRIER REMOVED). SEE ATTACHED FOR SPECIFIC LOCATIONS

Signature of Examiner/Certification Level: _____ /Date: 1/21/00
Signature of ISO Coordinator (Field Supervisor): [Signature] /Date: 1/28/00
Signature of ISI Program Owner: [Signature] /Date: 1/28/00

PART II - DISPOSITION

See Attached

Administrative control document number (PER, WR/WO) if applicable: W099-000007-000

ASME XI Subsection IWE Yes No If Yes, complete the supplemental information Parts II and III of Page 2 of this form in addition to Parts II, III, and IV, of Page 1. If No, completion of Parts II and III of Page 2 of this form is not required and attachment of Page 2 with Page 1 is not required.

Disposition Prepared/Recorded By: [Signature] Org. M/N Date: 3/4/00

PART III - ADDITIONAL EXAMINATIONS

Additional Sample Required [IW(X)-2430]: Yes No Page 2 of 2 additional samples attached? Yes No

(Attach list of items in additional sample, if yes.) [Signature] Date: 3/4/00
ISI or CISI Program Owner

Successive Examination Required: Yes No [Signature] Date: 3/4/00
ISI or CISI Program Owner

PART IV - VERIFICATION OF CLOSURE

Reexamination Report number, if Applicable: SCV-0008
Signature of ISO Coordinator: [Signature] Date: 3/5/00

Finding resulted from performance of the General visual Examination Yes No If Yes, concurrence of the Registered Professional Engineer (RPE) or Individual Responsible for performance is required (N/A otherwise):
N/A RPE/Responsible Engineer N/A Date

Comments: _____

Verification of Complete Corrective Action Required by Disposition (Including Page 2, if applicable)
Signature of ISI or CISI Program Owner: [Signature] Date: 3/6/00

NOTIFICATION OF INDICATION FORM
SUBSECTION IWE

Complete this page in addition to Page 1 for findings affecting Class MC/Subsection IWE.

NOI No. 1-SQ-404

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0006

Component ID MB-2 (175°-254 & 267°-303°) (SCV surface 12" above and 6" below)

PART II - DISPOSITION (Supplemental Information)

Evaluation of inaccessible areas as required by 10CFR 50.55a(b)(2)(x)(A) (Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions) [additional separate continuation sheets may be attached, as necessary].

(SEE ATTACHED)

Administrative control document number (PER, WRWO) if applicable: WO 99-000007-000

Disposition Prepared By: Jack Adams Org. M/N Date _____

PART III - ADDITIONAL EXAMINATIONS (Supplemental Information)

Additional examinations required per 10CFR50.55a(b)(2)(x)(D) Yes No
If Yes, provide (1) A description of each flaw or area, including the extent of degradation, and the conditions that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations to verify that similar degradation does not exist in similar components; (3) A description of the necessary corrective actions; and (4) The number and type of additional examinations to ensure detection of similar degradation in similar components [additional separate continuation sheets may be attached, as necessary].

(SEE ATTACHED)

Specified By: Jack Adams *Jha*

Org. M/N

Date: 3/4/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-404

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0006

Component ID MB-2 (175°-254
& 267°-303°) (SCV surface 12"
above and
6" below)

PART II - DISPOSITION (Attachment to Page 1 of 2) continued

This NOI documents the indications noted during the VT-3 examination of the SCV interior surface in the vicinity of the moisture barrier at the interface of the SCV and raceway floor. This inspection was a result of a VT-3 examination of the moisture barrier integrity and is documented under NOI 1-SQ-403. The examination results identified degradation of the seal at various locations as noted in the examination report for NOI 1-SQ-403 (the seal was not adhered to the concrete interface). The areas have been identified for coating degradation and a VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified conditions consisting of mild uniform corrosion, discoloration and minor pitting below the floor surface. The area was evaluated after cleaning.

The moisture barrier was removed from approximately AZ 175° to 303° (excluding the fuel transfer concrete enclosure from azimuth 254° to 267° where the moisture barrier does not exist) and the SCV surface was examined in accordance with the requirements of Table IWE-2500-1 Examination Category E-A (IWE-2500(b)). The examination was performed from 12 inches above the floor to 6 inches below the floor interface. There was mild uniform corrosion, minor pitting and discoloration of the coating below the floor surface. There were no detrimental flaws or degradation of the SCV liner noted during the inspection.

The existing moisture barrier along with the fiberglass filler in the crevice (6 inches below the floor interface) was removed and replaced with a polyurethane elastomeric material. This polyurethane elastomeric material will serve to fill the crevice, act as the protective coating for the SCV, and provide a leak tight barrier. This area is normally inaccessible due to the stainless steel flashing, insulation and moisture barrier material (refer to CISI-1000-C-59). There were no areas on the SCV above or below the floor surface that required re-coating. The polyurethane elastomeric material will serve as the coating for the area at the moisture barrier. The moisture barrier seal was replaced in accordance with EDC E20286A, re-examined and determined acceptable under VT-3 requirements. Based on the information above, these SCV areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. The SCV area is acceptable for continued service, and no further corrective action is required.

Disposition Prepared By: Jack Adams

Jack Adams

Org. M/N

Date: 3/9/00

**NOTIFICATION OF INDICATION FORM
ATTACHMENT**

NOI No. 1-SQ-404

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0006

Component ID MB-2 (175°-254 & 267°-303°) (SCV surface 12" above and 6" below)

PART II - DISPOSITION (Attachment to Page 2 of 2) continued

This NOI documents the indications noted during the VT-3 examination of the SCV interior surface in the vicinity of the moisture barrier at the interface of the SCV and raceway floor. This inspection was a result of a VT-3 examination of the moisture barrier integrity and is documented under NOI 1-SQ-403. The examination results identified degradation of the seal at various locations as noted in the examination report for NOI 1-SQ-403 (the seal was not adhered to the concrete interface). The areas have been identified for coating degradation and a VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified conditions consisting of mild uniform corrosion, discoloration and minor pitting below the floor surface. The area was evaluated after cleaning.

The moisture barrier was removed from approximately AZ 175° to 303° (excluding the fuel transfer concrete enclosure from azimuth 254° to 267° where the moisture barrier does not exist) and the SCV surface was examined in accordance with the requirements of Table IWE-2500-1 Examination Category E-A (IWE-2500(b)). The examination was performed from 12 inches above the floor to 6 inches below the floor interface. There was mild uniform corrosion, minor pitting and discoloration of the coating below the floor surface. There were no detrimental flaws or degradation of the SCV liner noted during the inspection.

The existing moisture barrier along with the fiberglass filler in the crevice (6 inches below the floor interface) was removed and replaced with a polyurethane elastomeric material. This polyurethane elastomeric material will serve to fill the crevice, act as the protective coating for the SCV, and provide a leak tight barrier. This area is normally inaccessible due to the stainless steel flashing, insulation and moisture barrier material (refer to CISI-1000-C-59). There were no areas on the SCV above or below the floor surface that required re-coating. The polyurethane elastomeric material will serve as the coating for the area at the moisture barrier. The moisture barrier seal was replaced in accordance with EDC E20286A, re-examined and determined acceptable under VT-3 requirements. Based on the information above, these SCV areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. Therefore, there is no indication that an adverse condition exists in the area examined or that an adverse condition would be present in inaccessible areas.

Disposition Prepared By:

Jack Adams



Org. M/N

Date: 3/4/00

**NOTIFICATION OF INDICATION FORM
ATTACHMENT**

NOI No. 1-SQ-404

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0006

Component ID MB-2 (175°-254 & 267°-303°) (SCV surface 12" above and 6" below)

PART III- ADDITIONAL EXAMINATIONS (Attachment to Page 2 of 2) continued

This NOI documents the indications noted during the VT-3 examination of the SCV interior surface in the vicinity of the moisture barrier at the interface of the SCV and raceway floor. This inspection was a result of a VT-3 examination of the moisture barrier integrity and is documented under NOI 1-SQ-404. The examination results identified degradation of the seal at various locations as noted in the examination report for NOI 1-SQ-404 (the seal was not adhered to the concrete interface). The areas have been identified for coating degradation and VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified conditions consisting of mild uniform corrosion, discoloration and minor pitting below the floor surface. The area was evaluated after cleaning.

The moisture barrier was removed from approximately AZ 175° to 303° (excluding the fuel transfer concrete enclosure from azimuth 254° to 267° where the moisture barrier does not exist) and the SCV surface was examined in accordance with the requirements of Table IWE-2500-1 Examination Category E-A (IWE-2500(b)).

The examination was performed from 12 inches above the floor to 6 inches below the floor interface. There was mild uniform corrosion, minor pitting and discoloration of the coating below the floor surface. There were no detrimental flaws or degradation of the SCV liner noted during the inspection.

The existing moisture barrier along with the fiberglass filler in the crevice (6 inches below the floor interface) was removed and replaced with a polyurethane elastomeric material. This polyurethane elastomeric material will serve to fill the crevice, act as the protective coating for the SCV, and provide a leak tight barrier. This area is normally inaccessible due to the stainless steel flashing, insulation and moisture barrier material (refer to CISI-1000-C-59). There were no areas on the SCV above or below the floor surface that required re-coating. The polyurethane elastomeric material will serve as the coating for the area at the moisture barrier. The moisture barrier seal was replaced in accordance with EDC E20286A, re-examined and determined acceptable under VT-3 requirements. Based on the information above, these SCV areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. The SCV area is acceptable for continued service, and no further corrective action is required. Therefore, additional examinations are not warranted.

Specified By Jack Adams *JA*

Org. M/N

Date: 3/9/00

NOTIFICATION OF INDICATION FORM

NOI No. 1-50-405 Plant/Unit 504/Unit #1 PART I - FINDINGS
ISI Dwg./Sh. No. CTST-1000-C-59 R1

Examination Report No. SCV-0009 Component ID MB-3

Description of Indication (Sketch/Photograph if Required for Clarification): MOISTURE BARRIER IS NOT BOUNDED TO CONCRETE. MB-3 1st INCREMENT 303° to 325° 6" - 340° 7" to 360° 0" to 6" SEE ATTACHED
2nd Increment 6° to 39° and 39° to 60°
3rd Increment 325° 6" to 340° 7"

Signature of Examiner/Certification Level: _____ /Date: 2/10/00
Signature of ISO Coordinator (Field Supervisor): Jeff Moulant /Date: 2/8/00
Signature of ISI Program Owner: _____ /Date: 2/8/2000

PART II - DISPOSITION

See NOI 1-50-401

Administrative control document number (PER, WR/WO) if applicable: WD 99-000007-000

ASME XI Subsection IWE Yes No If Yes, complete the supplemental information Parts II and III of Page 2 of this form in addition to Parts II, III, and IV, of Page 1. If No, completion of Parts II and III of Page 2 of this form is not required and attachment of Page 2 with Page 1 is not required.

Disposition Prepared/Recorded By: Jeff Moulant Org. MU Date: 3/7/00

PART III - ADDITIONAL EXAMINATIONS

Additional Sample Required [IW(X)-2430]: Yes No Page 2 of 2 additional samples attached? Yes No

(Attach list of items in additional sample, if yes.)

Successive Examination Required: Yes No
ISI or CISI Program Owner Jeff Moulant Date 3/7/00

PART IV - VERIFICATION OF CLOSURE

Reexamination Report number, If Applicable: SCV-0012
Signature of ISO Coordinator: Jeff Moulant Date: 3/7/00

Finding resulted from performance of the General visual Examination Yes No
If Yes, concurrence of the Registered Professional Engineer (RPE) or Individual Responsible for performance is required (N/A otherwise):
NA RPE/Responsible Engineer NA Date

Comments: _____

Verification of Complete Corrective Action Required by Disposition (Including Page 2, if applicable)
Signature of ISI or CISI Program Owner: Jeff Moulant Date: 3/7/00

NOTIFICATION OF INDICATION FORM
SUBSECTION IWE

Complete this page in addition to Page 1 for findings affecting Class MC/Subsection IWE.

NOI No. 1-SQ-405

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0009

Component ID MB-3 (303° -60°)

PART II - DISPOSITION (Supplemental Information)

Evaluation of inaccessible areas as required by 10CFR 50.55a(b)(2)(x)(A) (include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions) [additional separate continuation sheets may be attached, as necessary].

(SEE ATTACHED)

Administrative control document number (PER, WR/WO) if applicable: WO 99-000007-000

Disposition Prepared By: Jack Adams *Jla* Org. M/N Date 3/7/00

PART III - ADDITIONAL EXAMINATIONS (Supplemental Information)

Additional examinations required per 10CFR50.55a(b)(2)(x)(D) Yes No
If Yes, provide (1) A description of each flaw or area, including the extent of degradation, and the conditions that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations to verify that similar degradation does not exist in similar components; (3) A description of the necessary corrective actions; and (4) The number and type of additional examinations to ensure detection of similar degradation in similar components [additional separate continuation sheets may be attached, as necessary].

(SEE ATTACHED)

Specified By: Jack Adams *Jla* Org. M/N Date: 3/7/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-405

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0009

Component ID MB-3 (303° -60°)

PART II - DISPOSITION (Attachment to Page 2 of 2) continued

This NOI documents the indications noted during the VT-3 visual examination of the moisture barrier at the interface between the SCV and the raceway floor. The moisture barrier (MB-3) from AZ 303° to 60° was examined in accordance with the requirements of Table IWE-2500-1 Examination Category E-D. The examination results identified degradation of the seal at various locations as noted in the examination report (the seal is not adhered to the concrete interface). There was no degradation identified for the SCV surface in the seal area, and the moisture barrier seal appeared to have good adherence to the SCV.

The existing moisture barrier along with the fiberglass filler in the crevice (6 inches below the surface) was removed and replaced with a polyurethane elastomeric material. This polyurethane elastomeric material will serve to fill the crevice area, act as the protective coating for the SCV, and provide a leak tight barrier. While the moisture barrier was removed a VT-3 examination was performed from 12 inches above the moisture barrier to 6 inches below the moisture barrier. This area is normally inaccessible due to the stainless steel flashing, insulation, and moisture barrier material (refer to drawing CISI-1000-C-59). Examination results (minor pitting and corrosion) for this area (12 inches above to 6 inches below the moisture barrier surface) are documented on NOI 1-SQ-406. There was one area at 30° azimuth where the corrosion appeared to reduce the SCV wall thickness (ref. PER 00-00191-000). This suspect area was located in the crevice four inches below the moisture barrier seal area. This area was cleaned and an ultrasonic examination performed (for the UT results refer to Report BOP-978). The ultrasonic thickness readings verified that there was no significant wall loss in this location (ref. Calc# SCG-CSG-88-091 and PER SQ981102PER). To ensure that no further reduction in wall loss would occur a 6" x 12" area of the SCV was coated and the polyurethane elastomeric subsequently applied. The polyurethane elastomeric material will also serve as the coating for this area and will serve as the primary coating for the remaining areas of the SCV at the moisture barrier. The moisture barrier seal was replaced in accordance with EDC E20286A, re-examined and determined acceptable under VT-3 requirements.

Based on the information above, there is no indication that an adverse condition exists in the areas examined or that an adverse condition would be present in inaccessible areas.

Disposition Prepared By:

Jack Adams *JAA*

Org. M/N

Date: 3/7/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-405

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0009

Component ID MB-3 (303° -60°)

PART III- ADDITIONAL EXAMINATIONS (Attachment to Page 2of 2) continued

This NOI documents the indications noted during the VT-3 visual examination of the moisture barrier at the interface between the SCV and the raceway floor. The moisture barrier (MB-3) from AZ 303° to 60° was examined in accordance with the requirements of Table IWE-2500-1 Examination Category E-D. The examination results identified degradation of the seal at various locations as noted in the examination report (the seal is not adhered to the concrete interface). There was no degradation identified for the SCV surface in the seal area, and the moisture barrier seal appeared to have good adherence to the SCV.

The existing moisture barrier along with the fiberglass filler in the crevice (6 inches below the surface) was removed and replaced with a polyurethane elastomeric material. This polyurethane elastomeric material will serve to fill the crevice area, act as the protective coating for the SCV, and provide a leak tight barrier. While the moisture barrier was removed a VT-3 examination was performed from 12 inches above the moisture barrier to 6 inches below the moisture barrier. This area is normally inaccessible due to the stainless steel flashing, insulation, and moisture barrier material (refer to drawing CISI-1000-C-59). Examination results (minor pitting and corrosion) for this area (12 inches above to 6 inches below the moisture barrier surface) are documented on NOI 1-SQ-406. There was one area at 30° azimuth where the corrosion appeared to reduce the SCV wall thickness (ref. PER 00-00191-000). This suspect area was located in the crevice four inches below the moisture barrier seal area. This area was cleaned and an ultrasonic examination performed (for the UT results refer to Report BOP-978). The ultrasonic thickness readings verified that there was no significant wall loss in this location (ref. Calc# SCG-CSG-88-091 and PER SQ981102PER). To ensure that no further reduction in wall loss would occur a 6" x 12" area of the SCV was coated and the polyurethane elastomeric subsequently applied. The polyurethane elastomeric material will also serve as the coating for this area and will serve as the primary coating for the remaining areas of the SCV at the moisture barrier. The moisture barrier seal was replaced in accordance with EDC E20286A, re-examined and determined acceptable under VT-3 requirements.

Additional examinations are not required because 100% of the remaining examinations within Examination Category E-D, Item number E5.30 (moisture barrier) were examined as the disposition for NOI 1-SQ-401.

Specified By

Jack Adams *JA*

Org. M/N

Date: 3/7/00

UNIT 1 MB-3 EXAMINATION
AREAS OF MOISTURE BARRIER DETERIORATION

Component ID	Unacceptable Area	Length of Area	Report #
MB-3	347'0" to 347'2.5"	2 1/2"	SCV-0009
Azimuth 303° - 6°	351'0" to 351'6"	6"	SCV-0009
	358'2" to 359'0"	10"	SCV-0009
	25'2" to 25'8"	6"	SCV-0009
	34'2" to 34'10"	8"	SCV-0009
	38'4" to 38'10"	6"	SCV-0009
MB-3 TOTAL LENGTH		3' 2 1/2"	

EXAMINED BY: Joe Smyrl LEVEL: II

EXAMINED BY: D.K. McCarland LEVEL: II

NOTIFICATION OF INDICATION FORM

NOI No. 1-SQ-406 Plant/Unit 50W/UNIT #1 PART I - FINDINGS
ISI Dwg./Sh. No. CISI-1000-C-59 R1
Examination Report No. SCV-0010 Component ID MR-3

Description of Indication (Sketch/Photograph if Required for Clarification): RUST AND LIGHT PITTING ARE PRESENT BELOW THE FLOOR LEVEL (MOISTURE BARRIER REMOVED). SEE ATTACHED FOR SPECIFIC LOCATIONS. MS 02/04/2000

Signature of Examiner/Certification Level: _____ /Date: 02/04/2000
Signature of ISO Coordinator (Field Supervisor): [Signature] /Date: 02/08/2000
Signature of ISI Program Owner: [Signature] /Date: 2/8/2000

PART II - DISPOSITION
See Attached

Administrative control document number (PER, WRWO) if applicable: PER 00-001191-000
WO 99-000007-000

ASME XI Subsection IWE Yes No If Yes, complete the supplemental information Parts II and III of Page 2 of this form in addition to Parts II, III, and IV, of Page 1. If No, completion of Parts II and III of Page 2 of this form is not required and attachment of Page 2 with Page 1 is not required.

Disposition Prepared/Recorded By: [Signature] Org. NU Date: 3/7/00

PART III - ADDITIONAL EXAMINATIONS
Additional Sample Required [IW(X)-2430]: Yes No Page 2 of 2 additional samples attached? Yes No
(Attach list of items in additional sample, if yes.)
Signature of ISI Program Owner: [Signature] Date: 3/7/00

Successive Examination Required: Yes No
Signature of ISI Program Owner: [Signature] Date: 3/7/00

PART IV - VERIFICATION OF CLOSURE
Reexamination Report number, if Applicable: SCV-0012
Signature of ISO Coordinator: [Signature] Date: 3/7/00

Finding resulted from performance of the General visual Examination Yes No If Yes, concurrence of the Registered Professional Engineer (RPE) or Individual Responsible for performance is required (N/A otherwise):
N/A RPE/Responsible Engineer N/A Date

Comments: _____

Verification of Complete Corrective Action Required by Disposition, (Including Page 2, if applicable)
Signature of ISI or CISI Program Owner: [Signature] Date: 3/7/00

NOTIFICATION OF INDICATION FORM
SUBSECTION IWE

Complete this page in addition to Page 1 for findings affecting Class MC/Subsection IWE.

NOI No. 1-SQ-406

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0010

Component ID MB-3 (303°-60°) (SCV surface 12" above and 6" below)

PART II - DISPOSITION (Supplemental Information)

Evaluation of inaccessible areas as required by 10CFR 50.55a(b)(2)(x)(A)
(Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions) [additional separate continuation sheets may be attached, as necessary].

(SEE ATTACHED)

Administrative control document number (PER, WR/WO) if applicable: WO 99-000007-000
PER 00-001191-000

Disposition Prepared By: Jack Adams *JA* Org. M/N Date 3/7/00

PART III - ADDITIONAL EXAMINATIONS (Supplemental Information)

Additional examinations required per 10CFR50.55a(b)(2)(x)(D) Yes No
If Yes, provide (1) A description of each flaw or area, including the extent of degradation, and the conditions that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations to verify that similar degradation does not exist in similar components; (3) A description of the necessary corrective actions; and (4) The number and type of additional examinations to ensure detection of similar degradation in similar components [additional separate continuation sheets may be attached, as necessary].

(SEE ATTACHED)

Specified By: Jack Adams *JA* Org. M/N Date: 3/7/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-406

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0010

Component ID MB-3 (303°-60°) (SCV surface 12"
above and 6"
below)

PART II - DISPOSITION (Attachment to Page 1 of 2) continued

This NOI documents the indications noted during the VT-3 visual examination of the SCV interior surface in the vicinity of the moisture barrier at the interface of the SCV and raceway floor. This inspection was a result of a VT-3 visual examination of the moisture barrier integrity and is documented under NOI 1-SQ-405. The examination results identified degradation of the seal at various locations as noted in the examination report for NOI 1-SQ-405 (the seal was not adhered to the concrete interface). After removal of the moisture barrier the areas adjacent to and beneath the moisture barrier were identified as having coating degradation and a VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified conditions consisting of mild uniform corrosion, discoloration and minor pitting below the floor surface. There was one area at 30° azimuth where the corrosion appeared to reduce the SCV wall thickness (ref. PER 00-00191-000), however ultrasonic thickness readings verified that there was no significant wall loss in this location (ref. Calc# SCG-CSG-88-091 and PER SQ981102PER). All areas were evaluated after cleaning.

The moisture barrier was removed from approximately AZ 303° to 60° and the SCV surface was examined in accordance with the requirements of Table IWE-2500-1 Examination Category E-A and IWE-2500(b). The examination was performed from 12 inches above the floor to 6 inches below the floor interface. There was mild uniform corrosion, minor pitting and discoloration of the coating below the floor surface, with one suspect area at azimuth 30 degrees. There were no detrimental flaws or significant degradation of the SCV noted during the inspection.

The existing moisture barrier along with the fiberglass filler in the crevice (6 inches below the surface) was removed and replaced with a polyurethane elastomeric material. This polyurethane elastomeric material will serve to fill the crevice area, act as the protective coating for the SCV, and provide a leak tight barrier. While the moisture barrier was removed a VT-3 examination was performed from 12 inches above the moisture barrier to 6 inches below the moisture barrier. This area is normally inaccessible due to the stainless steel flashing, insulation, and moisture barrier material (refer to drawing CISI-1000-C-59). There was one area at 30° azimuth where the corrosion appeared to reduce the SCV wall thickness. This suspect area was located in the crevice four inches below the moisture barrier seal area. The area was cleaned and an ultrasonic examination performed (for the UT results refer to Report BOP-978). The ultrasonic thickness readings verified that there was no significant wall loss in this location. To ensure that no further reduction in wall loss would occur a 6" x 12" area of the SCV was coated and the polyurethane elastomeric subsequently applied. The polyurethane elastomeric material will also serve as the coating for this area and will serve as the primary coating for the remaining areas of the SCV at the moisture barrier. The moisture barrier seal was replaced in accordance with EDC E20286A, re-examined and determined acceptable under VT-3 requirements. Based on the information above, these SCV areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. The SCV area is acceptable for continued service, and no further corrective action is required.

Disposition Prepared By: Jack Adams *Jda*

Org. M/N

Date: 3/7/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-406

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0010

Component ID MB-3 (303°-60°) (SCV surface 12"
above and 6"
below)

PART II - DISPOSITION (Attachment to Page 2 of 2) continued

This NOI documents the indications noted during the VT-3 visual examination of the SCV interior surface in the vicinity of the moisture barrier at the interface of the SCV and raceway floor. This inspection was a result of a VT-3 visual examination of the moisture barrier integrity and is documented under NOI 1-SQ-405. The examination results identified degradation of the seal at various locations as noted in the examination report for NOI 1-SQ-405 (the seal was not adhered to the concrete interface). After removal of the moisture barrier the areas adjacent to and beneath the moisture barrier were identified as having coating degradation and a VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified conditions consisting of mild uniform corrosion, discoloration and minor pitting below the floor surface. There was one area at 30° azimuth where the corrosion appeared to reduce the SCV wall thickness (ref. PER 00-00191-000), however ultrasonic thickness readings verified that there was no significant wall loss in this location (ref. Calc# SCG-CSG-88-091 and PER SQ981102PER). All areas were evaluated after cleaning.

The moisture barrier was removed from approximately AZ 303° to 60° and the SCV surface was examined in accordance with the requirements of Table IWE-2500-1 Examination Category E-A and IWE-2500(b). The examination was performed from 12 inches above the floor to 6 inches below the floor interface. There was mild uniform corrosion, minor pitting and discoloration of the coating below the floor surface, with one suspect area at azimuth 30 degrees. There were no detrimental flaws or significant degradation of the SCV noted during the inspection.

The existing moisture barrier along with the fiberglass filler in the crevice (6 inches below the surface) was removed and replaced with a polyurethane elastomeric material. This polyurethane elastomeric material will serve to fill the crevice area, act as the protective coating for the SCV, and provide a leak tight barrier. While the moisture barrier was removed a VT-3 examination was performed from 12 inches above the moisture barrier to 6 inches below the moisture barrier. This area is normally inaccessible due to the stainless steel flashing, insulation, and moisture barrier material (refer to drawing CISI-1000-C-59). There was one area at 30° azimuth where the corrosion appeared to reduce the SCV wall thickness. This suspect area was located in the crevice four inches below the moisture barrier seal area. The area was cleaned and an ultrasonic examination performed (for the UT results refer to Report BOP-978). The ultrasonic thickness readings verified that there was no significant wall loss in this location. To ensure that no further reduction in wall loss would occur a 6" x 12" area of the SCV was coated and the polyurethane elastomeric subsequently applied. The polyurethane elastomeric material will also serve as the coating for this area and will serve as the primary coating for the remaining areas of the SCV at the moisture barrier. The moisture barrier seal was replaced in accordance with EDC E20286A, re-examined and determined acceptable under VT-3 requirements.

Based on the information above, these SCV areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. Therefore, there is no indication that an adverse condition exists in the area examined or that an adverse condition would be present in inaccessible areas.

Disposition Prepared By:

Jack Adams *JAA*

Org. M/N

Date:

3/7/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-406

Plant/Unit SQN 7 UNIT 1

Examination Report No. SCV-0010

Component ID MB-3 (303°-60°) (SCV surface 12"
above and 6"
below)

PART III- ADDITIONAL EXAMINATIONS (Attachment to Page 2 of 2) continued

This NOI documents the indications noted during the VT-3 visual examination of the SCV interior surface in the vicinity of the moisture barrier at the interface of the SCV and raceway floor. This inspection was a result of a VT-3 visual examination of the moisture barrier integrity and is documented under NOI 1-SQ-405. The examination results identified degradation of the seal at various locations as noted in the examination report for NOI 1-SQ-405 (the seal was not adhered to the concrete interface). After removal of the moisture barrier the areas adjacent to and beneath the moisture barrier were identified as having coating degradation and a VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified conditions consisting of mild uniform corrosion, discoloration and minor pitting below the floor surface. There was one area at 30° azimuth where the corrosion appeared to reduce the SCV wall thickness (ref. PER 00-00191-000), however ultrasonic thickness readings verified that there was no significant wall loss in this location (ref. Calc# SCG-CSG-88-091 and PER SQ981102PER). All areas were evaluated after cleaning.

The moisture barrier was removed from approximately AZ 303° to 60° and the SCV surface was examined in accordance with the requirements of Table IWE-2500-1 Examination Category E-A and IWE-2500(b). The examination was performed from 12 inches above the floor to 6 inches below the floor interface. There was mild uniform corrosion, minor pitting and discoloration of the coating below the floor surface, with one suspect area at azimuth 30 degrees. There were no detrimental flaws or significant degradation of the SCV noted during the inspection.

The existing moisture barrier along with the fiberglass filler in the crevice (6 inches below the surface) was removed and replaced with a polyurethane elastomeric material. This polyurethane elastomeric material will serve to fill the crevice area, act as the protective coating for the SCV, and provide a leak tight barrier. While the moisture barrier was removed a VT-3 examination was performed from 12 inches above the moisture barrier to 6 inches below the moisture barrier. This area is normally inaccessible due to the stainless steel flashing, insulation, and moisture barrier material (refer to drawing CISI-1000-C-59). There was one area at 30° azimuth where the corrosion appeared to reduce the SCV wall thickness. This suspect area was located in the crevice four inches below the moisture barrier seal area. The area was cleaned and an ultrasonic examination performed (for the UT results refer to Report BOP-978). The ultrasonic thickness readings verified that there was no significant wall loss in this location. To ensure that no further reduction in wall loss would occur a 6" x 12" area of the SCV was coated and the polyurethane elastomeric subsequently applied. The polyurethane elastomeric material will also serve as the coating for this area and will serve as the primary coating for the remaining areas of the SCV at the moisture barrier. The moisture barrier seal was replaced in accordance with EDC E20286A, re-examined and determined acceptable under VT-3 requirements.

Based on the information above, these SCV areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. The SCV area is acceptable for continued service, and no further corrective action is required. Therefore, additional examinations are not warranted.

Specified By Jack Adams *JA*

Org. M/N

Date: 3/7/00

NOTIFICATION OF INDICATION FORM

NOI No. 1-SQ 4/0 Plant/Unit U1 C10 PART I - FINDINGS
Examination Report No. SCV 0014 ISI Dwg./Sh. No. CISI - 1000 C - 20
SCV 0015 Component ID (X-047A X-047B) SCV - 4

Description of Indication (Sketch/Photograph if Required for Clarification): has discoloration, blistering + peeling.
Painted/coated surface

Signature of Examiner/Certification Level: [Signature] /Date: 2/15/00
Signature of ISO Coordinator (Field Supervisor): [Signature] /Date: 2/16/00
Signature of ISI Program Owner: [Signature] /Date: 2/17/00

PART II - DISPOSITION
See Attached

Administrative control document number (PER, WR/WO) if applicable: PER 00-001386-000

ASME XI Subsection IWE Yes No If Yes, complete the supplemental information Parts II and III of Page 2 of this form in addition to Parts II, III, and IV, of Page 1. If No, completion of Parts II and III of Page 2 of this form is not required and attachment of Page 2 with Page 1 is not required.

Disposition Prepared/Recorded By: [Signature] Org. MV Date: 3/7/00

PART III - ADDITIONAL EXAMINATIONS

Additional Sample Required [IW(X)-2430]: Yes No Page 2 of 2 additional samples attached? Yes No
(Attach list of items in additional sample, if yes.)
ISI or CISI Program Owner [Signature] Date 3/7/00

Successive Examination Required: Yes No
ISI or CISI Program Owner [Signature] Date 3/7/00

PART IV - VERIFICATION OF CLOSURE

Reexamination Report number, if Applicable: SCV-0022 Date: 3/7/00
Signature of ISO Coordinator: [Signature]

Finding resulted from performance of the General-visual Examination Yes No If Yes, concurrence of the Registered Professional Engineer (RPE) or Individual Responsible for performance is required (N/A otherwise):
RPE/Responsible Engineer N/A Date N/A

Comments: _____

Verification of Complete Corrective Action Required by Disposition (Including Page 2, if applicable)
Signature of ISI or CISI Program Owner: [Signature] Date: 3/7/00

NOTIFICATION OF INDICATION FORM
SUBSECTION IWE

Complete this page in addition to Page 1 for findings affecting Class MC/Subsection IWE.

NOI No. 1-SQ-410 Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0014 & SCV-0015 Component ID SCV-4 (X-47A & X-47B)

PART II - DISPOSITION (Supplemental Information)

Evaluation of inaccessible areas as required by 10CFR 50.55a(b)(2)(x)(A)
(Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions) [additional separate continuation sheets may be attached, as necessary].

(SEE ATTACHED)

Administrative control document number (PER, WR/WO) if applicable: PER
WO 00-001386-000

Disposition Prepared By: Jack Adams *JLa* Org. M/N

Date 3/2/00

PART III - ADDITIONAL EXAMINATIONS (Supplemental Information)

Additional examinations required per 10CFR50.55a(b)(2)(x)(D) Yes No
If Yes, provide (1) A description of each flaw or area, including the extent of degradation, and the conditions that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations to verify that similar degradation does not exist in similar components; (3) A description of the necessary corrective actions; and (4) The number and type of additional examinations to ensure detection of similar degradation in similar components [additional separate continuation sheets may be attached, as necessary].

(SEE ATTACHED)

Specified By: Jack Adams *JLa* Org. M/N

Date: 3/7/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-410

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0014 & SCV-0015

Component ID SCV-4 (X-47A & X-47B)

PART II - DISPOSITION (Attachment to Page 1 of 2) continued

This NOI documents the indications noted during the VT-3 examination of glycol penetrations X-47A and X-47B prior to paint removal. This inspection revealed areas of corrosion caused by entrapment of condensation on the surfaces of the carbon steel bellows plate. Additionally, the convolutes of both penetrations exhibited foreign material in the form of tape and paint and were addressed under WR C402408 (WO 99-008022-000).

The general corrosion of the carbon steel bellows plate showed pitting on the penetrations with several areas identified by ultrasonic examination that exceeded the minimum wall value as specified by Civil Engineering in memorandum B39 991208 001. Penetrations X-47A and X-47B had three areas and two areas respectively, that exceeded the drawing required minimum wall. The low areas for X-47A are located in grids A2, F2 and G2 and the low areas associated with X-47B are located in grid locations E-2 and F-2. All of the low areas identified by ultrasonic examination are part of the grid system for the 9.5 inch bellow plate that separates the two bellows. The wall thickness' recorded for X-47A were 0.320", 0.314" and 0.280" respectively, and 0.301" and 0.279" for X-47B (for specific locations of identified low areas see Report SCV-0016).

Additionally, pit depth measurements were taken in grid areas A1 and H1 on X-047A and X-47B respectively. These areas also exceeded the minimum wall value as specified by Civil Engineering in memorandum B39 991208 001. The depth measurements were taken where the most severe pitting was identified at approximately TDC of the bellow plate nearest the flued head. (See ultrasonic report SCV-0016 for grid lay out and BOP report #981 for pit depth locations.) Pit depth readings of 0.051" and 0.041" respectively, were recorded.. The bellow plate wall thickness in these grid areas (A1 & H1) were 0.364" and 0.342", respectively. The pitting and low areas identified are addressed under PER 00-001386-000

All low areas identified were determined acceptable by Engineering under calculation SCG-2S99-002. (Refer to drawing 74229-D14.0 of Contract 92615 for nominal wall thickness). The areas were evaluated after coating removal and cleaning.

Other than the penetration, the containment vessel and vessel to penetration interface had no evidence of active corrosion. These areas on the vessel and vessel to penetration interface are not considered suspect and do not impact the structural integrity or leak tightness of the steel containment vessel. No detrimental conditions inherent to corrosion was observed on the SCV in the area of penetrations X-47A and X-47B.

All the areas of the SCV adjacent to the penetrations and the carbon steel portions of the penetrations will be recoated in accordance with site procedures ensuring that the majority of the carbon steel surfaces will be more resistant to a corrosive atmosphere during operation. Areas in close proximity to the stainless steel convolutes are restricted from being coated because of Engineering requirements regarding coatings on or near stainless steel components, but exhibit no conditions that would promote the initiation of a corrosion cell. A VT-3 pre-service visual examination was performed on these areas following re-application of the coatings to satisfy the requirements of IWE-2200(g). The penetrations and their interface with the SCV are acceptable for continued service and no further corrective action is required.

Disposition Prepared By: Jack Adams *Jda*

Org. M/N

Date: 3/1/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-410

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0014 & SCV-0015

Component ID SCV-4 (X-47A & X-47B)

PART II - DISPOSITION (Attachment to Page 2 of 2) continued

This NOI documents the indications noted during the VT-3 examination of glycol penetrations X-47A and X-47B prior to paint removal. This inspection revealed areas of corrosion caused by entrapment of condensation on the surfaces of the carbon steel bellows plate. Additionally, the convolutes of both penetrations exhibited foreign material in the form of tape and paint and were addressed under WR C402408 (WO 99-008022-000).

The general corrosion of the carbon steel bellows plate showed pitting on the penetrations with several areas identified by ultrasonic examination that exceeded the minimum wall value as specified by Civil Engineering in memorandum B39 991208 001. Penetrations X-47A and X-47B had three areas and two areas respectively, that exceeded the drawing required minimum wall. The low areas for X-47A are located in grids A2, F2 and G2 and the low areas associated with X-47B are located in grid locations E-2 and F-2. All of the low areas identified by ultrasonic examination are part of the grid system for the 9.5 inch bellow plate that separates the two bellows. The wall thickness' recorded for X-47A were 0.320", 0.314" and 0.280" respectively, and 0.301" and 0.279" for X-47B (for specific locations of identified low areas see Report SCV-0016).

Additionally, pit depth measurements were taken in grid areas A1 and H1 on X-047A and X-47B respectively. These areas also exceeded the minimum wall value as specified by Civil Engineering in memorandum B39 991208 001. The depth measurements were taken where the most severe pitting was identified at approximately TDC of the bellow plate nearest the flued head. (See ultrasonic report SCV-0016 for grid lay out and BOP report #981 for pit depth locations.) Pit depth readings of 0.051" and 0.041" respectively, were recorded. The bellow plate wall thickness in these grid areas (A1 & H1) were 0.364" and 0.342", respectively. The pitting and low areas identified are addressed under PER 00-001386-000

All low areas identified were determined acceptable by Engineering under calculation SCG-2S99-002 . (Refer to drawing 74229-D14.0 of Contract 92615 for nominal wall thickness). The areas were evaluated after coating removal and cleaning.

Other than the penetration, the containment vessel and vessel to penetration interface had no evidence of active corrosion. These areas on the vessel and vessel to penetration interface are not considered suspect and do not impact the structural integrity or leak tightness of the steel containment vessel. No detrimental conditions inherent to corrosion was observed on the SCV in the area of penetrations X-47A and X-47B.

All the areas of the SCV adjacent to the penetrations and the carbon steel portions of the penetrations will be recoated in accordance with site procedures ensuring that the majority of the carbon steel surfaces will be more resistant to a corrosive atmosphere during operation. Areas in close proximity to the stainless steel convolutes are restricted from being coated because of Engineering requirements regarding coatings on or near stainless steel components, but exhibit no conditions that would promote the initiation of a corrosion cell. A VT-3 pre-service visual examination was performed on these areas following re-application of the coatings to satisfy the requirements of IWE-2200(g). Based on the information above these areas associated with the glycol penetrations are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. Therefore, there is no indication that an adverse condition exists in the area examined or that an adverse condition would be present in inaccessible areas.

Disposition Prepared By:

Jack Adams

Org. M/N

Date: 3/7/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-410

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0014 & SCV-0015

Component ID SCV-4 (X-47A & X-47B)

PART III- ADDITIONAL EXAMINATIONS (Attachment to Page 2 of 2) continued

This NOI documents the indications noted during the VT-3 examination of glycol penetrations X-47A and X-47B prior to paint removal. This inspection revealed areas of corrosion caused by entrapment of condensation on the surfaces of the carbon steel bellows plate. Additionally, the convolutes of both penetrations exhibited foreign material in the form of tape and paint and were addressed under WR C402408 (WO 99-008022-000).

The general corrosion of the carbon steel bellows plate showed pitting on the penetrations with several areas identified by ultrasonic examination that exceeded the minimum wall value as specified by Civil Engineering in memorandum B39 991208 001. Penetrations X-47A and X-47B had three areas and two areas respectively, that exceeded the drawing required minimum wall. The low areas for X-47A are located in grids A2, F2 and G2 and the low areas associated with X-47B are located in grid locations E-2 and F-2. All of the low areas identified by ultrasonic examination are part of the grid system for the 9.5 inch bellow plate that separates the two bellows. The wall thickness recorded for X-47A were 0.320", 0.314" and 0.280" respectively, and 0.301" and 0.279" for X-47B (for specific locations of identified low areas see Report SCV-0016).

Additionally, pit depth measurements were taken in grid areas A1 and H1 on X-047A and X-47B respectively. These areas also exceeded the minimum wall value as specified by Civil Engineering in memorandum B39 991208 001. The depth measurements were taken where the most severe pitting was identified at approximately TDC of the bellow plate nearest the flued head. (See ultrasonic report SCV-0016 for grid lay out and BOP report #981 for pit depth locations.) Pit depth readings of 0.051" and 0.041" respectively, were recorded. The bellow plate wall thickness in these grid areas (A1 & H1) were 0.364" and 0.342", respectively. The pitting and low areas identified are addressed under PER 00-001386-000

All low areas identified were determined acceptable by Engineering under calculation SCG-2S99-002. (Refer to drawing 74229-D14.0 of Contract 92615 for nominal wall thickness). The areas were evaluated after coating removal and cleaning.

Other than the penetration, the containment vessel and vessel to penetration interface had no evidence of active corrosion. These areas on the vessel and vessel to penetration interface are not considered suspect and do not impact the structural integrity or leak tightness of the steel containment vessel. No detrimental conditions inherent to corrosion was observed on the SCV in the area of penetrations X-47A and X-47B.

All the areas of the SCV adjacent to the penetrations and the carbon steel portions of the penetrations will be recoated in accordance with site procedures ensuring that the majority of the carbon steel surfaces will be more resistant to a corrosive atmosphere during operation. Areas in close proximity to the stainless steel convolutes are restricted from being coated because of Engineering requirements regarding coatings on or near stainless steel components, but exhibit no conditions that would promote the initiation of a corrosion cell. A VT-3 pre-service visual examination was performed on these areas following re-application of the coatings to satisfy the requirements of IWE-2200(g). The penetrations and their interface with the SCV are acceptable for continued service and no further corrective action is required.

Regarding additional examinations, only penetrations X-64, X-65, X-66, X-67, X-114, X-115, X-47A and X-47B carry chilled water or glycol, which potentially would produce condensation during operation, creating a corrosive environment on unprotected carbon steel components. Disposition of examinations of the inside and outside surfaces of penetrations X-64, X-65, X-66, X-67 and the outside surfaces of X-114 and X-115, are included on NOIs 1-SQ-413 and 1-SQ-419. Since the containment surface areas at each of these penetrations have been inspected, no additional examinations are required.

Specified By Jack Adams *JAA*

Org. M/N

Date: 3/7/00

NOTIFICATION OF INDICATION FORM

NOI No. 1-50-411 Plant/Unit SON1 PART I - FINDINGS
ISI Dwg./Sh. No. CISI-1000 C-09, 10, 11, 12

Examination Report No. SCV-0017, 0018 Component ID SCV-1, 2, 3, 4 (F-R)
0019, 0020

Description of Indication (Sketch/Photograph if Required for Clarification): General rust and discoloration of containment in the annulus

Signature of Examiner/Certification Level: D. C. ... /Date: 2-23-00
Signature of ISO Coordinator (Field Supervisor): [Signature] /Date: 2-24-00
Signature of ISI Program Owner: [Signature] /Date: 2-24-00

PART II - DISPOSITION

See Attached

Administrative control document number (PER, WR/WO) if applicable: _____

ASME XI Subsection IWE Yes No If Yes, complete the supplemental information Parts II and III of Page 2 of this form in addition to Parts II, III, and IV, of Page 1. If No, completion of Parts II and III of Page 2 of this form is not required and attachment of Page 2 with Page 1 is not required.

Disposition Prepared/Recorded By: [Signature] Org. MN Date: 02/28/00

PART III - ADDITIONAL EXAMINATIONS

Additional Sample Required [IW(X)-2430]: Yes No Page 2 of 2 additional samples attached? Yes No

(Attach list of items in additional sample, if yes.)
Signature of ISI Program Owner: [Signature] Date: 2/29/00

Successive Examination Required: Yes No
Signature of ISI & CISI Program Owner: [Signature] Date: 2/29/00

PART IV - VERIFICATION OF CLOSURE

Reexamination Report number, if Applicable: SCV-0061, SCV-0062, SCV-0063 & SCV-0064
Signature of ISO Coordinator: [Signature] Date: 3/7/00

Finding resulted from performance of the General visual Examination Yes No If Yes, concurrence of the Registered Professional Engineer (RPE) or Individual Responsible for performance is required (N/A otherwise):
RPE/Responsible Engineer: N/A Date: N/A

Comments: _____

Verification of Complete Corrective Action Required by Disposition (Including Page 2, if applicable)
Signature of ISI or CISI Program Owner: [Signature] Date: 3/7/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No.: 1-SQ-411

Plant/Unit: SQN/UNIT 1

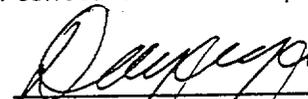
Examination Report No.: SCV-0017, 18, 19, and 20

Component ID: SCV-1, 2, 3, 4(F-G)

PART II - DISPOSITION, page 1 of 2

This NOI documents the indications noted during the VT-3 visual examinations of the SCV exterior surface areas. The areas examined have been identified for coating repair, and this VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified indications consisting of minor rusting and discoloration. The penetrations and surrounding surfaces of the containment shell are identified on the listed examination reports and were visually inspected and evaluated after surface preparation. The SCV surface, stiffeners, and penetrations showed minor corrosion and pitting, with no visible signs of active corrosion. The surface condition (minor corrosion and pitting) appeared to be pitting from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. These areas will be re-coated according to site procedure M&AI-5.3. A VT-3 preservice examination will be performed on these areas following reapplication of the coatings to satisfy the requirements of IWE-2200(g). The component is acceptable for continued service, and no further corrective action is required.

Prepared By:


DU T. NGUYEN

Org.

MN

Date

02/28/00

NOTIFICATION OF INDICATION FORM
SUBSECTION IWE

Complete this page in addition to Page 1 for findings affecting Class MC/Subsection IWE.

NOI No. 1-SQ-411

Plant/Unit SQN/Unit 1

Examination Report No. SCV 0017, 18, 19 & 20

Component ID SCV 1,2,3,4 (F-G)

PART II - DISPOSITION (Supplemental Information)

Evaluation of inaccessible areas as required by 10CFR 50.55a(b)(2)(x)(A)
(Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions) [additional separate continuation sheets may be attached, as necessary].

This NOI documents the indications noted during the VT-3 visual examination of the SCV exterior surface areas from horizontal stiffener F to horizontal stiffener G, and vertical stiffeners 1 through 360. (Refer to drawing CISI-1000-08 for details.) The areas examined were identified for coating repairs, and this visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The SCV surface, stiffeners and penetrations showed minor corrosion, rusting, and pitting, with no visible signs of active corrosion. The areas examined did not show any significant wall loss or gross degradation. The corrosion damage appeared to be from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. Based on this information, there is no indication that an adverse condition exists in the areas examined or that an adverse condition would be present in inaccessible areas.

Administrative control document number (PER, WR/WO) if applicable: _____

Disposition Prepared By: Duy T. Nguyen

Org. MN

Date 02/28/00

PART III - ADDITIONAL EXAMINATIONS (Supplemental Information)

Additional examinations required per 10CFR50.55a(b)(2)(x)(D) Yes No
If Yes, provide (1) A description of each flaw or area, including the extent of degradation, and the conditions that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations to verify that similar degradation does not exist in similar components; (3) A description of the necessary corrective actions; and (4) The number and type of additional examinations to ensure detection of similar degradation in similar components [additional separate continuation sheets may be attached, as necessary].

This NOI documents the indications noted during the VT-3 visual examination of the SCV exterior surface areas from horizontal stiffener F to horizontal G, and vertical stiffeners 1 through 360. (Refer to drawing CISI-1000-08 for details). The areas examined were identified for coating repairs, and this visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The SCV surface, stiffeners, and penetrations showed minor corrosion, rusting, and pitting, with no visible signs of active corrosion. The areas examined did not show any significant wall loss or gross degradation. The corrosion damage appeared to be from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. The areas will be recoated according to site procedures. A VT-3 preservice examination will be performed on these areas following reapplication of the coatings to satisfy the requirements of IWE-2200(a). The component is acceptable for continued service, and no further corrective action is required. Therefore, additional examinations are not warranted.

Specified By: Duy T. Nguyen

Org. MN

Date: 02/28/00

NOTIFICATION OF INDICATION FORM

PART I - FINDINGS

NOI No. 1-SQ-413 Plant/Unit SQW1 ISI Dwg./Sh. No. CISI-1000-C-09, 10
Examination Report No. SCV 0023, 0024 Component ID SCV-1 X-64, X-65, SCV 2 X 66, X 67
Description of Indication (Sketch/Photograph if Required for Clarification): Outboard and Inboard
ON EACH COMPONENT.
Significant Oxidation

Signature of Examiner/Certification Level: [Signature] /Date: 2/25/00
Signature of ISO Coordinator (Field Supervisor): [Signature] /Date: 2/25/00
Signature of ISI Program Owner: [Signature] /Date: 3/7/00

PART II - DISPOSITION

See Attached

Administrative control document number (PER, WR/WO) if applicable: _____

ASME XI Subsection IWE Yes No If Yes, complete the supplemental information Parts II and III of Page 2 of this form in addition to Parts II, III, and IV, of Page 1. If No, completion of Parts II and III of Page 2 of this form is not required and attachment of Page 2 with Page 1 is not required.

Disposition Prepared/Recorded By: [Signature] Org. ME Date: 03/07/00

PART III - ADDITIONAL EXAMINATIONS

Additional Sample Required [IW(X)-2430]: Yes No Page 2 of 2 additional samples attached? Yes No

(Attach list of items in additional sample, if yes.)

[Signature] 3/7/00
ISI or CISI Program Owner Date

Successive Examination Required: Yes No

[Signature] 3/7/00
ISI or CISI Program Owner Date

PART IV - VERIFICATION OF CLOSURE

Reexamination Report number, if Applicable: SCV-0106, SCV-0107, SCV-0108 + SCV-0109
Signature of ISO Coordinator: [Signature] Date: 3/10/00

Finding resulted from performance of the General visual Examination

Yes No If Yes, concurrence of the Registered Professional Engineer (RPE) or Individual Responsible for performance is required (N/A otherwise):

N/A RPE/Responsible Engineer N/A Date

Comments: _____

Verification of Complete Corrective Action Required by Disposition (Including Page 2, if applicable)

Signature of ISI or CISI Program Owner: [Signature] Date: 3/10/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-413

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0023, SCV-0024,
SCV-0025 & SCV-0026

Component ID SCV-1 (X-64 & X-65) IB & OB
SCV-2 (X-66 & X-67) IB & OB

PART II - DISPOSITION (Attachment to Page 1 of 2) continued

This NOI documents the indications noted during the VT-3 visual examination of the inboard (IB) and outboard (OB) Chilled Water penetrations. The areas examined were identified for coating repair, and this VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The outboard and inboard penetrations are identified on the listed examination reports and were visually inspected and evaluated after surface preparation. The examination results for the outboard side of the penetrations identified degradation of the penetration reinforcement in the form of pitting and corrosion that required further evaluation. Moisture had been absorbed and held against the nozzle reinforcement by black foam insulation which led to the severe corrosion. The outboard penetrations were cleaned and prepared (removed pitting and corrosion) and an ultrasonic thickness examination was performed to verify the remaining wall thickness of the penetration reinforcement and Chilled Water piping. All the ultrasonic thickness measurements of the reinforcement were greater than the minimum wall (0.100") thickness specified by Civil Engineering in memorandum B39 990507 001. In addition, the full penetration welds attaching the reinforcement to the nozzle were measured and all readings were above the 0.404" minimum wall value specified by Engineering in memorandum B39 990506 001, for the combined thickness of the reinforcement and Chilled Water piping. (For ultrasonic results refer to Reports SCV-0047 and SCV-0048.)

The examination of the inboard Chilled Water penetrations showed minor corrosion and pitting, with no visible signs of active corrosion. The penetrations are also identified on the listed examination reports and were visually inspected and evaluated after surface preparation.

The outboard and inboard Chilled Water penetrations do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. These areas will be re-coated according to site procedure M&AI-5.3. A VT-3 preservice examination will be performed on these areas following reapplication of the coatings to satisfy the requirements of IWE-2200(g).

The Chilled Water penetrations are acceptable for continued service. However, the outboard side of the Chilled Water penetrations will be added to the Sequoyah, ASME Section XI IWE/IWL Containment Inservice Inspection Program as an augmented examination as required by IWE-1240 for components likely to experience accelerated degradation due to repeated wetting and drying conditions. Lastly, after reapplication of the coatings, ultrasonic thickness measurements will be taken to establish a baseline for successive examination.

Disposition Prepared By:

RG [Signature]

Org.

02/07/00
ME

Date:

03/07/00

NOTIFICATION OF INDICATION FORM
SUBSECTION IWE

Complete this page in addition to Page 1 for findings affecting Class MC/Subsection IWE.

NOI No. 1-SQ-413 Plant/Unit SQN / UNIT 1

Examination Report No. SCV-0023, SCV-0024, Component ID SCV-1 (X-64 & X-65) IB & OB
SCV-0025 & SCV-0026 SCV-2 (X-66 & X-67) IB & OB

PART II - DISPOSITION (Supplemental Information)

Evaluation of inaccessible areas as required by 10CFR 50.55a(b)(2)(x)(A)
(Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions) [additional separate continuation sheets may be attached, as necessary].

(SEE ATTACHED)

Administrative control document number (PER, WR/WO) if applicable: WO 99-007803-000, 001, 002 & 003

Disposition Prepared By: _____ Org. _____ Date _____

PART III - ADDITIONAL EXAMINATIONS (Supplemental Information)

Additional examinations required per 10CFR50.55a(b)(2)(x)(D) Yes No
If Yes, provide (1) A description of each flaw or area, including the extent of degradation, and the conditions that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations to verify that similar degradation does not exist in similar components; (3) A description of the necessary corrective actions; and (4) The number and type of additional examinations to ensure detection of similar degradation in similar components [additional separate continuation sheets may be attached, as necessary].

(SEE ATTACHED)

Specified By: _____ Org. _____ Date: _____

✓

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-413

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-00023, SCV-0024
SCV-0025 & SCV-0026

Component ID SCV-1 (X-64 & X-65) IB & OB
SCV-2 (X-66 & X-67) IB & OB

PART II - DISPOSITION (Attachment to Page 2 of 2) continued

This NOI documents the indications noted during the VT-3 visual examination of the inboard (IB) and outboard (OB) Chilled Water penetrations. The areas examined were identified for coating repair, and this VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The outboard and inboard penetrations are identified on the listed examination reports and were visually inspected and evaluated after surface preparation. The examination results for the outboard side of the penetrations identified degradation of the penetration reinforcement in the form of pitting and corrosion that required further evaluation. Moisture had been absorbed and held against the nozzle reinforcement by black foam insulation which led to the severe corrosion. The outboard penetrations were cleaned and prepared (removed pitting and corrosion) and an ultrasonic thickness examination was performed to verify the remaining wall thickness of the penetration reinforcement and Chilled Water piping. All the ultrasonic thickness measurements of the reinforcement were greater than the minimum wall (0.100") thickness specified by Civil Engineering in memorandum B39 990507 001. In addition, the full penetration welds attaching the reinforcement to the nozzle were measured and all readings were above the 0.404" minimum wall value specified by Engineering in memorandum B39 990506 001, for the combined thickness of the reinforcement and Chilled Water piping. (For ultrasonic results refer to Reports SCV-0047 and SCV-0048.)

The examination of the inboard Chilled Water penetrations showed minor corrosion and pitting, with no visible signs of active corrosion. The penetrations are also identified on the listed examination reports and were visually inspected and evaluated after surface preparation.

The outboard and inboard Chilled Water penetrations do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. These areas will be re-coated according to site procedure M&AI-5.3. A VT-3 preservice examination will be performed on these areas following reapplication of the coatings to satisfy the requirements of IWE-2200(g). In addition, after reapplication of the coatings, ultrasonic thickness measurements will be taken to establish a baseline for successive examination. The Chilled Water penetrations are acceptable for continued service.

Based on the information above, these SCV penetrations do not impact the structural integrity or leak tightness of the SCV. Therefore, there is no indication that an adverse condition exists in the area examined or that an adverse condition would be present in inaccessible areas.

Disposition Prepared By:



Org.

ME

Date:

03/07/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No. 1-SQ-413

Plant/Unit SQN / UNIT 1

Examination Report No. SCV-00023, SCV-0024
SCV-0025 & SCV-0026

Component ID SCV-1 (X-64 & X-65) IB & OB
SCV-2 (X-66 & X-67) IB & OB

PART III- ADDITIONAL EXAMINATIONS (Attachment to Page 2 of 2) continued

This NOI documents the indications noted during the VT-3 visual examination of the inboard (IB) and outboard (OB) Chilled Water penetrations. The areas examined were identified for coating repair, and this VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The outboard and inboard penetrations are identified on the listed examination reports and were visually inspected and evaluated after surface preparation. The examination results for the outboard side of the penetrations identified degradation of the penetration reinforcement in the form of pitting and corrosion that required further evaluation. Moisture had been absorbed and held against the nozzle reinforcement by black foam insulation which led to the severe corrosion. The outboard penetrations were cleaned and prepared (removed pitting and corrosion) and an ultrasonic thickness examination was performed to verify the remaining wall thickness of the penetration reinforcement and Chilled Water piping. All the ultrasonic thickness measurements of the reinforcement were greater than the minimum wall (0.100") thickness specified by Civil Engineering in memorandum B39 990507 001. In addition, the full penetration welds attaching the reinforcement to the nozzle were measured and all readings were above the 0.404" minimum wall value specified by Engineering in memorandum B39 990506 001, for the combined thickness of the reinforcement and Chilled Water piping. (For ultrasonic results refer to Reports SCV-0047 and SCV-0048.)

The examination of the inboard Chilled Water penetrations showed minor corrosion and pitting, with no visible signs of active corrosion. The penetrations are also identified on the listed examination reports and were visually inspected and evaluated after surface preparation.

The outboard and inboard Chilled Water penetrations do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. These areas will be re-coated according to site procedure M&A1-5.3. A VT-3 preservice examination will be performed on these areas following reapplication of the coatings to satisfy the requirements of IWE-2200(g). In addition, after reapplication of the coatings, ultrasonic thickness measurements will be taken to establish a baseline for successive examination. The Chilled Water penetrations are acceptable for continued service.

Based on the information above, and the fact that all the penetrations that carry chilled water or glycol (X-64, X-65, X-66, X-67, X-47A, X-47B, X-114 and X-115) have been examined and evaluated. (See NOIs 1-SQ-410 & 1-SQ-419.) These SCV Chilled Water penetrations are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. The SCV area is acceptable for continued service, and no further corrective action is required. Therefore, additional examinations are not warranted.

Specified By



Org. M/N

Date:

03/07/00

NOTIFICATION OF INDICATION FORM

PART I - FINDINGS

NOI No. 1-50414 Plant/Unit SON 1 ISI Dwg./Sh. No. C131-1000 - C-09, 10, 11, 12

Examination Report No. SCV-0021, 0027
SCV-0028, 0029 Component ID SCV-1, 2, 3+4 (E-F)

Description of Indication (Sketch/Photograph if Required for Clarification): GENERAL DUST AND DISCOLORATION ON CONTAINMENT LINER IN THE ANODIUS

Signature of Examiner/Certification Level: [Signature] /Date: 2/25/00
Signature of ISO Coordinator (Field Supervisor): [Signature] /Date: 2/26/00
Signature of ISI Program Owner: [Signature] /Date: 2/26/00

PART II - DISPOSITION

See attached

Administrative control document number (PER, WRWO) if applicable: _____

ASME XI Subsection IWE Yes No If Yes, complete the supplemental information Parts II and III of Page 2 of this form in addition to Parts II, III, and IV, of Page 1. If No, completion of Parts II and III of Page 2 of this form is not required and attachment of Page 2 with Page 1 is not required.

Disposition Prepared/Recorded By: [Signature] Org. ME Date: 03/02/00

PART III - ADDITIONAL EXAMINATIONS

Additional Sample Required [IW(X)-2430]: Yes No Page 2 of 2 additional samples attached? Yes No

(Attach list of items in additional sample, if yes.) [Signature] 3/10/00
ISI or CISI Program Owner Date

Successive Examination Required: Yes No [Signature] 3/10/00
ISI or CISI Program Owner Date

PART IV - VERIFICATION OF CLOSURE

Reexamination Report number, if Applicable: SCV-0095, SCV-0096, SCV-0097 + SCV-0098
Signature of ISO Coordinator: [Signature] Date: 3/10/00

Finding resulted from performance of the General visual Examination Yes No If Yes, concurrence of the Registered Professional Engineer (RPE) or Individual Responsible for performance is required (N/A otherwise):
N/A N/A
RPE/Responsible Engineer Date

Comments: _____

Verification of Complete Corrective Action Required by Disposition (Including Page 2, if applicable)
Signature of ISI or CISI Program Owner: [Signature] Date: 3/10/00

✓

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No.: 1-SQ-414

Plant/Unit: SQN/UNIT 1

Examination Report No.: SCV-0021, 27, 28, and 29

Component ID: SCV-1, 2, 3, 4(E-F)

PART II - DISPOSITION, page 1 of 2

This NOI documents the indications noted during the VT-3 visual examinations of the SCV exterior surface areas. The areas examined have been identified for coating repair, and this VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified indications consisting of minor rusting and discoloration. The penetrations and surrounding surfaces of the containment shell are identified on the listed examination reports and were visually inspected and evaluated after surface preparation. The SCV surface, stiffeners, and penetrations showed minor corrosion and pitting, with no visible signs of active corrosion. The surface condition (minor corrosion and pitting) appeared to be pitting from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. These areas will be re-coated according to site procedure M&AI-5.3. A VT-3 preservice examination will be performed on these areas following reapplication of the coatings to satisfy the requirements of IWE-2200(g). The component is acceptable for continued service, and no further corrective action is required.

Prepared By: Drew T. Reppey

Org. MB

Date 03/02/00

✓

**NOTIFICATION OF INDICATION FORM
SUBSECTION IWE**

Complete this page in addition to Page 1 for findings affecting Class MC/Subsection IWE.

NOI No. 1-SQ-414 Plant/Unit SQN/Unit 1

Examination Report No. SCV 0021, 27, 28 & 29 Component ID SCV 1,2,3,4 (E-F)

PART II - DISPOSITION (Supplemental Information)

Evaluation of inaccessible areas as required by 10CFR 50.55a(b)(2)(x)(A)
(Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions) [additional separate continuation sheets may be attached, as necessary].

This NOI documents the indications noted during the VT-3 visual examination of the SCV exterior surface areas from horizontal stiffener E to horizontal stiffener F, and vertical stiffeners 1 through 360. (Refer to drawing CISI-1000-08 for details.) The areas examined were identified for coating repairs, and this visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The SCV surface stiffeners and penetrations showed minor corrosion, rusting, and pitting, with no visible signs of active corrosion. The areas examined did not show any significant wall loss or gross degradation. The corrosion damage appeared to be from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. Based on this information, there is no indication that an adverse condition exists in the areas examined or that an adverse condition would be present in inaccessible areas.

Administrative control document number (PER, WR/WO) if applicable: _____

Disposition Prepared By: Greg T. Reynolds Org. ME Date 03/02/00

PART III - ADDITIONAL EXAMINATIONS (Supplemental Information)

Additional examinations required per 10CFR50.55a(b)(2)(x)(D) Yes No
If Yes, provide (1) A description of each flaw or area, including the extent of degradation, and the conditions that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations to verify that similar degradation does not exist in similar components; (3) A description of the necessary corrective actions; and (4) The number and type of additional examinations to ensure detection of similar degradation in similar components [additional separate continuation sheets may be attached, as necessary].

This NOI documents the indications noted during the VT-3 visual examination of the SCV exterior surface areas from horizontal stiffener E to horizontal F, and vertical stiffeners 1 through 360. (Refer to drawing CISI-1000-08 for details). The areas examined were identified for coating repairs, and this visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The SCV surface stiffeners, and penetrations showed minor corrosion, rusting, and pitting, with no visible signs of active corrosion. The areas examined did not show any significant wall loss or gross degradation. The corrosion damage appeared to be from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. The areas will be recoated according to site procedures. A VT-3 preservice examination will be performed on these areas following reapplication of the coatings to satisfy the requirements of IWE-2200(a). The component is acceptable for continued service, and no further corrective action is required. Therefore, additional examinations are not warranted.

Specified By: Greg T. Reynolds Org. ME Date: 03/02/00

NOTIFICATION OF INDICATION FORM

PART I - FINDINGS

NOI No. 1-SP-415 Plant/Unit 59N1 ISI Dwg./Sh. No. CISI-1000-C-09,10,11,12

Examination Report No. SCV-0035, 0036, 0037, 0038 Component ID 02-212100 SCV-1,2,3,4 (D-E)

Description of Indication (Sketch/Photograph if Required for Clarification): General rust and discoloration on containment liner in the annulus

Signature of Examiner/Certification Level: D. Covert II /Date: 2-27-00

Signature of ISO Coordinator (Field Supervisor): J Wade /Date: 2-28-00

Signature of ISI Program Owner: Jeff Boulat /Date: 2-29-00

PART II - DISPOSITION

See attached

Administrative control document number (PER, WRWO) if applicable: _____

ASME XI Subsection IWE Yes No If Yes, complete the supplemental information Parts II and III of Page 2 of this form in addition to Parts II, III, and IV, of Page 1. If No, completion of Parts II and III of Page 2 of this form is not required and attachment of Page 2 with Page 1 is not required.

Disposition Prepared/Recorded By: Doug T. Nguyen Org. ME Date: 03/02/00

PART III - ADDITIONAL EXAMINATIONS

Additional Sample Required [IW(X)-2430]: Yes No Page 2 of 2 additional samples attached? Yes No

(Attach list of items in additional sample, if yes.)

Jeff Boulat 3/4/00
ISI or CISI Program Owner Date

Successive Examination Required: Yes No

Jeff Boulat 3/4/00
ISI or CISI Program Owner Date

PART IV - VERIFICATION OF CLOSURE

Reexamination Report number, if Applicable: SCV-0055, SCV-0056, SCV-0057, SCV-0058

Signature of ISO Coordinator: J Wade Date: 3/4/00

Finding resulted from performance of the General visual Examination Yes No

If Yes, concurrence of the Registered Professional Engineer (RPE) or Individual Responsible for performance is required (N/A otherwise):

N/A N/A
RPE/Responsible Engineer Date

Comments: _____

Verification of Complete Corrective Action Required by Disposition (Including Page 2, if applicable)

Signature of ISI or CISI Program Owner: Jeff Boulat Date: 3/6/00

✓

**NOTIFICATION OF INDICATION FORM
ATTACHMENT**

NOI No.: 1-SQ-415

Plant/Unit: SQN/UNIT 1

Examination Report No.: SCV-0035, 36, 37, and 38

Component ID: SCV-1, 2, 3, 4(D-E)

PART II - DISPOSITION, page 1 of 2

This NOI documents the indications noted during the VT-3 visual examinations of the SCV exterior surface areas. The areas examined have been identified for coating repair, and this VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified indications consisting of minor rusting and discoloration. The penetrations and surrounding surfaces of the containment shell are identified on the listed examination reports and were visually inspected and evaluated after surface preparation. The SCV surface, stiffeners, and penetrations showed minor corrosion and pitting, with no visible signs of active corrosion. The surface condition (minor corrosion and pitting) appeared to be pitting from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. These areas will be re-coated according to site procedure M&AI-5.3. A VT-3 preservice examination will be performed on these areas following reapplication of the coatings to satisfy the requirements of IWE-2200(g). The component is acceptable for continued service, and no further corrective action is required.

Prepared By: Darryl T. Reynolds

Org. OME

Date 03/02/00

NOTIFICATION OF INDICATION FORM
SUBSECTION IWE

Complete this page in addition to Page 1 for findings affecting Class MC/Subsection IWE.

NOI No. 1-SQ-415 Plant/Unit SQN/Unit 1

Examination Report No. SCV 0035, 36, 37 & 38 Component ID SCV 1,2,3,4 (D-E)

PART II - DISPOSITION (Supplemental Information)

Evaluation of inaccessible areas as required by 10CFR 50.55a(b)(2)(x)(A)
(Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions) [additional separate continuation sheets may be attached, as necessary].

This NOI documents the indications noted during the VT-3 visual examination of the SCV exterior surface areas from horizontal stiffener D to horizontal stiffener E, and vertical stiffeners 1 through 360. (Refer to drawing CISI-1000-08 for details.) The areas examined were identified for coating repairs, and this visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The SCV surface stiffeners and penetrations showed minor corrosion, rusting, and pitting, with no visible signs of active corrosion. The areas examined did not show any significant wall loss or gross degradation. The corrosion damage appeared to be from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. Based on this information, there is no indication that an adverse condition exists in the areas examined or that an adverse condition would be present in inaccessible areas.

Administrative control document number (PER, WR/WO) if applicable: _____

Disposition Prepared By: Drey T. Nguyen Org. ME Date 03/02/00

PART III - ADDITIONAL EXAMINATIONS (Supplemental Information)

Additional examinations required per 10CFR50.55a(b)(2)(x)(D) Yes No
If Yes, provide (1) A description of each flaw or area, including the extent of degradation, and the conditions that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations to verify that similar degradation does not exist in similar components; (3) A description of the necessary corrective actions; and (4) The number and type of additional examinations to ensure detection of similar degradation in similar components [additional separate continuation sheets may be attached, as necessary].

This NOI documents the indications noted during the VT-3 visual examination of the SCV exterior surface areas from horizontal stiffener D to horizontal E, and vertical stiffeners 1 through 360. (Refer to drawing CISI-1000-08 for details.) The areas examined were identified for coating repairs, and this visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The SCV surface stiffeners and penetrations showed minor corrosion, rusting, and pitting, with no visible signs of active corrosion. The areas examined did not show any significant wall loss or gross degradation. The corrosion damage appeared to be from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. The areas will be recoated according to site procedures. A VT-3 preservice examination will be performed on these areas following reapplication of the coatings to satisfy the requirements of IWE-2200(a). The component is acceptable for continued service, and no further corrective action is required. Therefore, additional examinations are not warranted.

Specified By: Drey T. Nguyen Org. ME Date: 03/02/00

NOTIFICATION OF INDICATION FORM

PART I - FINDINGS

NOI No. 1-50-419 Plant/Unit SON/1 ISI Dwg./Sh. No. CISI-1000-C-27 Rev 0
Examination Report No. SCV-0044 0045 Component ID Reexamination X-114, X115 OUTBOARD
Description of Indication (Sketch/Photograph if Required for Clarification): Corrosion discoloration and corrosion products (rust) on components.

Signature of Examiner/Certification Level: [Signature] /Date: 2/29/00
Signature of ISO Coordinator (Field Supervisor): [Signature] /Date: 2/29/00
Signature of ISI Program Owner: [Signature] /Date: 2/29/00

PART II - DISPOSITION

See Attached

Administrative control document number (PER, WR/WO) if applicable: _____

ASME XI Subsection IWE Yes No If Yes, complete the supplemental information Parts II and III of Page 2 of this form in addition to Parts II, III, and IV, of Page 1. If No, completion of Parts II and III of Page 2 of this form is not required and attachment of Page 2 with Page 1 is not required.

Disposition Prepared/Recorded By: [Signature] Org. ME Date: 03/02/00

PART III - ADDITIONAL EXAMINATIONS

Additional Sample Required [IW(X)-2430]: Yes No Page 2 of 2 additional samples attached? Yes No

(Attach list of items in additional sample, if yes.)

Successive Examination Required: Yes No
ISI or CISI Program Owner: [Signature] Date: 3/4/00
ISI or CISI Program Owner: [Signature] Date: 3/4/00

PART IV - VERIFICATION OF CLOSURE

Reexamination Report number, if Applicable: SCV-0059 & SCV-0060
Signature of ISO Coordinator: [Signature] Date: 3/4/00

Finding resulted from performance of the General visual Examination Yes No If Yes, concurrence of the Registered Professional Engineer (RPE) or Individual Responsible for performance is required (N/A otherwise):
RPE/Responsible Engineer: N/A Date: N/A

Comments: _____

Verification of Complete Corrective Action Required by Disposition (Including Page 2, if applicable)
Signature of ISI or CISI Program Owner: [Signature] Date: 3/6/00

✓

**NOTIFICATION OF INDICATION FORM
ATTACHMENT**

NOI No.: 1-SQ-419

Plant/Unit: SQN/UNIT 1

Examination Report No.: SCV-0044 and 45

Component ID: SCV-4(X-114 and X-115)

PART II - DISPOSITION, page 1 of 2

This NOI documents the indications noted during the VT-3 visual examinations of the SCV exterior surface areas at penetrations X-114 and X-115. The areas examined have been identified for coating repair, and this VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified indications consisting of minor rusting and discoloration. The penetrations and adjacent surfaces of the containment shell are identified on the listed examination reports and were visually inspected and evaluated after surface preparation. The penetrations and adjacent SCV surface showed minor corrosion and pitting, with no visible signs of active corrosion. The surface condition (minor corrosion and pitting) appeared to be pitting from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. These areas will be re-coated according to site procedure M&AI-5.3. A VT-3 preservice examination will be performed on these areas following reapplication of the coatings to satisfy the requirements of IWE-2200(g). The component is acceptable for continued service, and no further corrective action is required.

Prepared By: Greg T. Nguyen

Org. ME

Date 03/02/00

✓

**NOTIFICATION OF INDICATION FORM
SUBSECTION IWE**

Complete this page in addition to Page 1 for findings affecting Class MC/Subsection IWE.

NOI No. 1-SQ-419 Plant/Unit SQN/Unit 1
Examination Report No. SCV-0044 & 45 Component ID SCV-4 (X-114 & X-115)

PART II - DISPOSITION (Supplemental Information)

Evaluation of inaccessible areas as required by 10CFR 50.55a(b)(2)(x)(A)
(Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions) [additional separate continuation sheets may be attached, as necessary].

This NOI documents the indications noted during the VT-3 visual examination of the SCV exterior surface areas at penetrations X-114 and X-115. (Refer to drawing CISI-1000-08 for details.)

The areas examined were identified for coating repairs, and this visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The penetrations and the adjacent SCV surface showed minor corrosion, rusting, and pitting, with no visible signs of active corrosion. The areas examined did not show any significant wall loss or gross degradation. The corrosion damage appeared to be from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. Based on this information, there is no indication that an adverse condition exists in the areas examined or that an adverse condition would be present in inaccessible areas.

Administrative control document number (PER, WR/WO) if applicable: _____

Disposition Prepared By: Doug T. Myers Org. ME Date 03/02/00

PART III - ADDITIONAL EXAMINATIONS (Supplemental Information)

Additional examinations required per 10CFR50.55a(b)(2)(x)(D) Yes No
If Yes, provide (1) A description of each flaw or area, including the extent of degradation, and the conditions that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations to verify that similar degradation does not exist in similar components; (3) A description of the necessary corrective actions; and (4) The number and type of additional examinations to ensure detection of similar degradation in similar components [additional separate continuation sheets may be attached, as necessary].

This NOI documents the indications noted during the VT-3 visual examination of the SCV exterior surface areas at penetrations X-114 and X-115. (Refer to drawing CISI-1000-08 for details.)

The areas examined were identified for coating repairs, and this visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The penetrations and the adjacent SCV surfaces showed minor corrosion, rusting, and pitting, with no visible signs of active corrosion. The areas examined did not show any significant wall loss or gross degradation. The corrosion damage appeared to be from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. The areas will be recoated according to site procedures. A VT-3 preservice examination will be performed on these areas following reapplication of the coatings to satisfy the requirements of IWE-2200(a). The component is acceptable for continued service, and no further corrective action is required. Therefore, additional examinations are not warranted. (Refer to NOI 1-SQ-410)

Specified By: Doug T. Myers Org. ME Date: 03/02/00

NOTIFICATION OF INDICATION FORM

PART I - FINDINGS

NOI No. 1-50-423 Plant/Unit SPN1 ISI Dwg./Sh. No. CISI-1000-C-09,10,11,12

Examination Report No. SCV-0049,0050 Component ID SCV-1,2,3,4 (C-C-D)
0051, 0052

Description of Indication (Sketch/Photograph if Required for Clarification): General rust and discoloration on containment liner in the annulus

Signature of Examiner/Certification Level: [Signature] /Date: 3-2-00
Signature of ISO Coordinator (Field Supervisor): [Signature] /Date: 3-2-00
Signature of ISI Program Owner: [Signature] /Date: 3/2/2000

PART II - DISPOSITION

See Attached

Administrative control document number (PER, WRWO) if applicable: _____

ASME XI Subsection IWE: Yes No If Yes, complete the supplemental information Parts II and III of Page 2 of this form in addition to Parts II, III, and IV, of Page 1. If No, completion of Parts II and III of Page 2 of this form is not required and attachment of Page 2 with Page 1 is not required.

Disposition Prepared/Recorded By: [Signature] Org. ME Date: 03/07/00

PART III - ADDITIONAL EXAMINATIONS

Additional Sample Required [IW(X)-2430]: Yes No Page 2 of 2 additional samples attached? Yes No

(Attach list of items in additional sample, if yes.)
ISI or C/ISI Program Owner [Signature] Date 3/7/00

Successive Examination Required: Yes No
ISI or C/ISI Program Owner [Signature] Date 3/7/00

PART IV - VERIFICATION OF CLOSURE

Reexamination Report number, if Applicable: SCV-0082, SCV-0083, SCV-0084, SCV-0085
Signature of ISO Coordinator: [Signature] Date: 3-11-00

Finding resulted from performance of the General visual Examination Yes No If Yes, concurrence of the Registered Professional Engineer (RPE) or Individual Responsible for performance is required (N/A otherwise):
RPE/Responsible Engineer N/A Date N/A

Comments: _____

Verification of Complete Corrective Action Required by Disposition (Including Page 2, if applicable)
Signature of ISI or C/ISI Program Owner: [Signature] Date: 3/11/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No.: 1-SQ-423

Plant/Unit: SQN/UNIT 1

Examination Report No.: SCV-0049, 50, 51, and 52

Component ID: SCV-1, 2, 3, 4(C-D)

PART II - DISPOSITION, page 1 of 2

This NOI documents the indications noted during the VT-3 visual examinations of the SCV exterior surface areas. The areas examined have been identified for coating repair, and this VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified indications consisting of minor rusting and discoloration. The penetrations and surrounding surfaces of the containment shell are identified on the listed examination reports and were visually inspected and evaluated after surface preparation. The SCV surface, stiffeners, and penetrations showed minor corrosion and pitting, with no visible signs of active corrosion. The surface condition (minor corrosion and pitting) appeared to be pitting from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. These areas will be re-coated according to site procedure M&AI-5.3. A VT-3 preservice examination will be performed on these areas following reapplication of the coatings to satisfy the requirements of IWE-2200(g). The component is acceptable for continued service, and no further corrective action is required.

Prepared By: *Jaypiper*

Org. ME

Date 03/07/00

NOTIFICATION OF INDICATION FORM
SUBSECTION IWE

Complete this page in addition to Page 1 for findings affecting Class MC/Subsection IWE.

NOI No. 1-SQ-423

Plant/Unit SQN/Unit 1

Examination Report No. SCV 0049, 50, 51 & 52

Component ID SCV 1,2,3,4 (C-D)

PART II - DISPOSITION (Supplemental Information)

Evaluation of inaccessible areas as required by 10CFR 50.55a(b)(2)(x)(A) (Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions) [additional separate continuation sheets may be attached, as necessary].

This NOI documents the indications noted during the VT-3 visual examination of the SCV exterior surface areas from horizontal stiffener C to horizontal stiffener D, and vertical stiffeners 1 through 360, excluding the SCV surface area from vertical stiffener 63.5 to 67.5 that is inaccessible due to the fuel transfer tube concrete enclosure. (Refer to drawing CISI-1000-08 for details.)

The areas examined were identified for coating repairs, and this visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The SCV surface, stiffeners, and penetrations showed minor corrosion, rusting, and pitting, with no visible signs of active corrosion. The areas examined did not show any significant wall loss or gross degradation. The corrosion damage appeared to be from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. Based on this information, there is no indication that an adverse condition exists in the areas examined or that an adverse condition would be present in inaccessible areas.

Administrative control document number (PER, WRWO) if applicable: _____

Disposition Prepared By: *Douglas*

Org. ME

Date 03/07/00

PART III - ADDITIONAL EXAMINATIONS (Supplemental Information)

Additional examinations required per 10CFR50.55a(b)(2)(x)(D) Yes No
If Yes, provide (1) A description of each flaw or area, including the extent of degradation, and the conditions that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations to verify that similar degradation does not exist in similar components; (3) A description of the necessary corrective actions; and (4) The number and type of additional examinations to ensure detection of similar degradation in similar components [additional separate continuation sheets may be attached, as necessary].

This NOI documents the indications noted during the VT-3 visual examination of the SCV exterior surface areas from horizontal stiffener C to horizontal D, and vertical stiffeners 1 through 360, excluding the SCV surface area from vertical stiffener 63.5 to 67.5 that is inaccessible due to the fuel transfer tube concrete enclosure. (Refer to drawing CISI-1000-08 for details).

The areas examined were identified for coating repairs, and this visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The SCV surface, stiffeners, and penetrations showed minor corrosion, rusting, and pitting, with no visible signs of active corrosion. The areas examined did not show any significant wall loss or gross degradation. The corrosion damage appeared to be from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. The areas will be recoated according to site procedures. A VT-3 preservice examination will be performed on these areas following reapplication of the coatings to satisfy the requirements of IWE-2200(g). The component is acceptable for continued service, and no further corrective action is required. Therefore, additional examinations are not warranted.

Specified By: *Douglas*

Org. ME

Date: 03/07/00

NOTIFICATION OF INDICATION FORM

PART I - FINDINGS

NOI No. 1-50-427 Plant/Unit 500/1 ISI Dwg./Sh. No. C151-1000-C-09,10,11,12

Examination Report No. SCV-0065, 0066, 0067, 0068 Component ID SCV-1,2,3+4 (A-C)

Description of Indication (Sketch/Photograph if Required for Clarification): General RUST AND DISCOLORATION ON CONTAINMENT LINE IN THE ANNULUS

Signature of Examiner/Certification Level: [Signature] /Date: 3/5/00
Signature of ISO Coordinator (Field Supervisor): [Signature] /Date: 3/6/00
Signature of ISI Program Owner: [Signature] /Date: 3/6/00

PART II - DISPOSITION

See Attached

Administrative control document number (PER, WR/WO) if applicable: W.O. 99-007713-000

ASME XI Subsection IWE Yes No If Yes, complete the supplemental information Parts II and III of Page 2 of this form in addition to Parts II, III, and IV, of Page 1. If No, completion of Parts II and III of Page 2 of this form is not required and attachment of Page 2 with Page 1 is not required.

Disposition Prepared/Recorded By: [Signature] Org. ME Date: 03/07/00

PART III - ADDITIONAL EXAMINATIONS

Additional Sample Required [IW(X)-2430]: Yes No Page 2 of 2 additional samples attached? Yes No

(Attach list of items in additional sample, if yes.)

[Signature] 3/7/00
ISI or CISI Program Owner Date

Successive Examination Required:

Yes No

[Signature] 3/7/00
ISI or CISI Program Owner Date

PART IV - VERIFICATION OF CLOSURE

Reexamination Report number, if Applicable: SCV-0086, SCV-0087, SCV-0088, SCV-0089
Signature of ISO Coordinator: [Signature] Date: 3-11-00

Finding resulted from performance of the General visual Examination

Yes No

If Yes, concurrence of the Registered Professional Engineer (RPE) or Individual Responsible for performance is required (N/A otherwise):

N/A N/A
RPE/Responsible Engineer Date

Comments: _____

Verification of Complete Corrective Action Required by Disposition (Including Page 2, if applicable)

Signature of ISI or CISI Program Owner: [Signature] Date: 3/11/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No.: 1-SQ-427

Plant/Unit: SQN/UNIT 1

Examination Report No.: SCV-0065, 66, 67, and 68

Component ID: SCV-1, 2, 3, 4(A-C)

PART II - DISPOSITION, page 1 of 2

This NOI documents the indications noted during the VT-3 visual examinations of the SCV exterior surface areas. The areas examined have been identified for coating repair, and this VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified indications consisting of minor rusting and discoloration. The penetrations and surrounding surfaces of the containment shell are identified on the listed examination reports and were visually inspected and evaluated after surface preparation. The SCV surface, stiffeners, and penetrations showed minor corrosion and pitting, with no visible signs of active corrosion. The surface condition (minor corrosion and pitting) appeared to be pitting from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. These areas will be re-coated according to site procedure M&AI-5.3. A VT-3 preservice examination will be performed on these areas following reapplication of the coatings to satisfy the requirements of IWE-2200(g). The component is acceptable for continued service, and no further corrective action is required.

Prepared By: *Dayguy*

Org. MF

Date 03/07/00

NOTIFICATION OF INDICATION FORM
SUBSECTION IWE

Complete this page in addition to Page 1 for findings affecting Class MC/Subsection IWE.
NOI No. 1-SQ-427 Plant/Unit SQN/Unit 1

Examination Report No. SCV 0065, 66, 67 & 68 Component ID SCV 1,2,3,4 (A-C)

PART II - DISPOSITION (Supplemental Information)

Evaluation of inaccessible areas as required by 10CFR 50.55a(b)(2)(x)(A)

(Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions) [additional separate continuation sheets may be attached, as necessary].

This NOI documents the indications noted during the VT-3 visual examination of the SCV exterior surface areas from horizontal stiffener A to horizontal stiffener C, and vertical stiffeners 1 through 360, excluding the SCV surface area from vertical stiffener 63.5 to 67.5 that is inaccessible due to the fuel transfer tube concrete enclosure. In addition, the area from elevation 679' 9 3/8" to 680' 9 7/8" that runs from vertical stiffeners 1 -58 and 71 - 90 is inaccessible due to the emergency gas treatment (EGTS) duct work. (Refer to drawing CISI-1000-08 for details.)

The areas examined were identified for coating repairs, and this visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The SCV surface, stiffeners, and penetrations showed minor corrosion, rusting, and pitting, with no visible signs of active corrosion. The areas examined did not show any significant wall loss or gross degradation. The corrosion damage appeared to be from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. Based on this information, there is no indication that an adverse condition exists in the areas examined or that an adverse condition would be present in inaccessible areas.

Administrative control document number (PER, WR/WO) if applicable: _____

Disposition Prepared By: *D. S. [Signature]* Org. ME Date 03/07/00

PART III - ADDITIONAL EXAMINATIONS (Supplemental Information)

Additional examinations required per 10CFR50.55a(b)(2)(x)(D) Yes No

If Yes, provide (1) A description of each flaw or area, including the extent of degradation, and the conditions that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations to verify that similar degradation does not exist in similar components; (3) A description of the necessary corrective actions; and (4) The number and type of additional examinations to ensure detection of similar degradation in similar components [additional separate continuation sheets may be attached, as necessary].

This NOI documents the indications noted during the VT-3 visual examination of the SCV exterior surface areas from horizontal stiffener A to horizontal C, and vertical stiffeners 1 through 360, excluding the SCV surface area from vertical stiffener 63.5 to 67.5 that is inaccessible due to the fuel transfer tube concrete enclosure. In addition, the area from elevation 679' 9 3/8" to 680' 9 7/8" that runs from vertical stiffeners 1 -58 and 71 - 90 is inaccessible due to the emergency gas treatment (EGTS) duct work. (Refer to drawing CISI-1000-08 for details.) details). The areas examined were identified for coating repairs, and this visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The SCV surface, stiffeners, and penetrations showed minor corrosion, rusting, and pitting, with no visible signs of active corrosion. The areas examined did not show any significant wall loss or gross degradation. The corrosion damage appeared to be from original construction. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. The areas will be recoated according to site procedures. A VT-3 preservice examination will be performed on these areas following reapplication of the coatings to satisfy the requirements of IWE-2200(a). The component is acceptable for continued service, and no further corrective action is required. Therefore, additional examinations are not warranted.

Specified By: *D. S. [Signature]* Org. ME Date: 03/07/00

NOTIFICATION OF INDICATION FORM

PART I - FINDINGS

NOI No. 1-SQ-428 Plant/Unit SON/1 ISI Dwg./Sh. No. C151-1000-C-08 (1-4TW450-22 RC)
Examination Report No. SCV-0101, SCV-0102, SCV-0103, SCV-006 Component ID SCV-4 (X-69 and X-073) OB
SCV-4 (X-069, X-070, X-073 & X-074) IB

Description of Indication (Sketch/Photograph if Required for Clarification): General rust and discoloration of inboard (IB) and outboard (OB) penetrations.

Signature of Examiner/Certification Level: Douglas Thompson Date: 3-8-00
Signature of ISO Coordinator (Field Supervisor): Hy Wade Date: 3-8-00
Signature of ISI Program Owner: Jeffery A. Rowland Date: 3/10/00

PART II - DISPOSITION

See Attached

Administrative control document number (PER, WR/WO) if applicable: WD 99-006731-0004-002

ASME XI Subsection IWE Yes No If Yes, complete the supplemental information Parts II and III of Page 2 of this form in addition to Parts II, III, and IV, of Page 1. If No, completion of Parts II and III of Page 2 of this form is not required and attachment of Page 2 with Page 1 is not required.

Disposition Prepared/Recorded By: J. A. Rowland Org. MN Date: 3/13/00

PART III - ADDITIONAL EXAMINATIONS

Additional Sample Required [IW(X)-2430]: Yes No Page 2 of 2 additional samples attached? Yes No

(Attach list of items in additional sample, if yes.)
ISI or CISI Program Owner Jeffery A. Rowland Date 3/13/00

Successive Examination Required: Yes No
ISI or CISI Program Owner Jeffery A. Rowland Date 3/13/00

PART IV - VERIFICATION OF CLOSURE

Reexamination Report number, if Applicable: SCV-0090, SCV-0092, SCV-0074, SCV-0075, SCV-0076, SCV-0077
Signature of ISO Coordinator: Hy Wade Date: 3/13/00

Finding resulted from performance of the General visual Examination Yes No If Yes, concurrence of the Registered Professional Engineer (RPE) or Individual Responsible for performance is required (N/A otherwise):
N/A RPE/Responsible Engineer NA Date

Comments: _____

Verification of Complete Corrective Action Required by Disposition (Including Page 2, if applicable)
Signature of ISI or CISI Program Owner: Jeffery A. Rowland Date: 3/13/00

NOTIFICATION OF INDICATION FORM
ATTACHMENT

NOI No.: 1-SQ-428

Plant/Unit: SQN/UNIT 1

Examination Report No.: SCV-099, SCV-0100, SCV-0101 and SCV- 0102

Component ID: SCV-4 (X-069 IB & OB, X-70 IB, X-73 IB & OB and X-74 IB)

PART II - DISPOSITION, Page 1 of 2

This NOI documents the indications noted during the VT-3 visual examination of the inboard (IB) and outboard (OB) ERCW penetration surface areas for penetrations X-69 and X-73 and the inboard (IB) surface areas of penetrations X-70 and X-74. (Refer to drawing CISI-1000-08 for location and WOs 99-006731-000 & 99-006731-002 for the extent of examination.) The penetrations examined were modified during the outage and required coating removal and repairs to the existing coating. Therefore, a visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The penetrations showed minor corrosion, and rusting, with no visible signs of active corrosion. The surface areas examined did not show any significant wall loss or gross degradation. The penetrations are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. The penetrations will be recoated according to site procedure M&AI-5.3 and a VT-3 preservice examination will be performed on these penetrations following reapplication of the coatings to satisfy the requirements of IWE-2200(g).

The component is acceptable for continued service, and no further corrective action is required.

Prepared By: _____

J. A. Adams

Org. _____

MU

Date 3/13/00

NOTIFICATION OF INDICATION FORM
SUBSECTION IWE

Complete this page in addition to Page 1 for findings affecting Class MC/Subsection IWE.
NOI No. 1-SQ-428 Plant/Unit SQN/Unit 1

Examination Report No. SCV-0099, SCV-0100 Component ID SCV-4 (X-069 & X-073) OB
SCV-0101 & SCV-0102 SCV-4 (X-069, X-070, X-073,
& X-074) IB

PART II - DISPOSITION (Supplemental Information)

Evaluation of inaccessible areas as required by 10CFR 50.55a(b)(2)(x)(A)
(Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation;
(2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions)
[additional separate continuation sheets may be attached, as necessary].

This NOI documents the indications noted during the VT-3 visual examination of the inboard (IB) and outboard (OB)
ERCW penetration surface areas for penetrations X-69 and X-73 and the inboard surface areas of X-70 and X-74.
(Refer to drawing CISI-1000-08 for location and WOs 99-006731-000 & 99-006731-002 for the extent of examination.)
The penetrations examined were modified during the outage and required coating removal and repairs to existing coating.
Therefore, a visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of
IWE-2500(b). The penetrations showed minor corrosion, and rusting, with no visible signs of active corrosion.
The penetrations examined did not show any significant wall loss or gross degradation.
These penetrations are not considered suspect and do not impact the structural integrity or leak
tightness of the SCV. No detrimental flaws were observed. Based on this information, there is no indication that an
adverse condition exists in the areas examined or that an adverse condition would be present in inaccessible areas.

Administrative control document number (PER, WR/WO) if applicable: _____

Disposition Prepared By: J. D. Adams Org. MN

Date 3/12/00

PART III - ADDITIONAL EXAMINATIONS (Supplemental Information)

Additional examinations required per 10CFR50.55a(b)(2)(x)(D) Yes No
If Yes, provide (1) A description of each flaw or area, including the extent of degradation, and the conditions
that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations
to verify that similar degradation does not exist in similar components; (3) A description of the necessary
corrective actions; and (4) The number and type of additional examinations to ensure detection of similar
degradation in similar components [additional separate continuation sheets may be attached, as necessary].

This NOI documents the indications noted during the VT-3 visual examination of the inboard (IB) and outboard (OB)
ERCW penetration surface areas for penetrations X-69 and X-73 and the inboard surface areas of X-70 and X-74.
(Refer to drawing CISI-1000-08 for location and WOs 99-006731-000 & 99-006731-002 for the extent of examination.)
The penetrations examined were modified during the outage and required coating removal and repairs to existing coating.
Therefore, a visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of
IWE-2500(b). The penetrations showed minor corrosion, and rusting, with no visible signs of active corrosion.
The penetrations examined did not show any significant wall loss or gross degradation.
These penetrations are not considered suspect and do not impact the structural integrity or leak
tightness of the SCV. No detrimental flaws were observed. The penetrations will be recoated according to site procedure
M&AI-5.3 and a VT-3 preservice examination will be performed on these penetrations following reapplication
of the coatings to satisfy the requirements of IWE-2200(a). The components are acceptable for continued service, and
no further corrective action is required. Therefore, additional examinations are not warranted.

Specified By: J. D. Adams

Org. MN

Date: 3/13/00