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United States Nuclear Regulatory Commission
ATTN: Document Control Desk
Washington, DC 20555

RE: Nine Mile Point Unit 1
Docket No. 50-220
DPR-63

Nine Mile Point Unit 2
Docket No. 50-410
NPF-69

Gentlemen:

Enclosed please find a copy of the following emergency procedure revisions for Niagara Mohawk's Nine Mile Point Nuclear Station:

EPMP-EPP-06, Revision 08, "Emergency Response Organization Notification Maintenance and Surveillance"

EPIP-EPP-20, Revision 08, "Emergency Notifications"

These procedure revisions are being submitted as required by Section V to Appendix E of 10 CFR Part 50. Should you have any questions, please feel free to contact Mr. James D. Jones, Director of Emergency Preparedness at (315) 349-4486.

Very truly yours,


John T. Conway
Vice President Nuclear Generation

/kcm

Enclosure

- xc:
Mr. H.J. Miller, Regional Administrator, Region I (2 copies)
Ms. M.K. Gamberoni, Section Chief PD-I, Section 1, NRR (letter only)
Mr. G.K. Hunegs, Senior Resident Inspector (1 copy)
Mr. P.S. Tam, Senior Project Manager, NRR (1 copy)
EP PPF

A045

NIAGARA MOHAWK POWER CORPORATION
NINE MILE POINT NUCLEAR STATION
EMERGENCY PLAN MAINTENANCE PROCEDURE

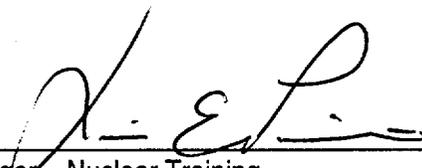
EPMP-EPP-06

REVISION 08

**EMERGENCY RESPONSE ORGANIZATION NOTIFICATION MAINTENANCE
AND SURVEILLANCE**

TECHNICAL SPECIFICATION REQUIRED

Approved by:
L. E. Pisano



Manager – Nuclear Training

8/22/00
Date

THIS IS A FULL REVISION

Effective Date: 08/25/2000

PERIODIC REVIEW DUE DATE AUGUST 2001

LIST OF EFFECTIVE PAGES

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1.0 **PURPOSE**

To provide guidance on the maintenance and surveillance of the methods used to notify the Emergency Response Organization (ERO) of drills, exercises and emergencies.

2.0 **RESPONSIBILITIES**

2.1 **Director - Emergency Preparedness:**

2.1.1 Assigns the performance of maintenance and surveillance of the ERO notification systems.

2.1.2 Oversees the maintenance of secondary responder notification and method, if appropriate.

2.2 **Initial Responder, Branch Manager, or Designee (with Secondary Responder Responsibilities):**

Assigns the performance of maintenance and surveillance of their notification systems, if applicable.

2.3 **ERO Members**

2.3.1 Maintains their own pagers in working condition.

2.3.2 Advises Emergency Preparedness of changes to home telephone numbers.

3.0 **PROCEDURE**

3.1 **Emergency Preparedness Actions**

3.1.1 **Pager Surveillance Test**

NOTE: The failure of the pager system to meet the success criteria shall result in immediate corrective actions by EP.

- a. Should be conducted weekly.
- b. Should consist of activation of ERO initial responder pagers by sending a "000999" code via telephone activation.
- c. Shall be considered successful if a single ERO initial responder pager receives and displays the "000999" message.

3.1.2 Telephone Notification System Maintenance

NOTE: Automated telephone notification for the ERO is provided by Community Alert Network (CAN).

- a. Maintain CAN System configuration in accordance with Attachment 1.
- b. Review the CAN List for initial responders quarterly. Make any changes needed to the CAN List so that it accurately reflects the current duty roster.
 - 1. Utilize Attachment 2 or equivalent form in conjunction with Attachment 4, for making changes.
- c. Provide secondary responder CAN list to appropriate Branch Managers for review and modification on a quarterly basis.

3.1.3 Telephone Notification System Surveillance and Testing

- a. The CAN System shall be tested quarterly as follows:
 - 1. Contact CAN in accordance with EPIP-EPP-20.
 - 2. Request activation of the system and provide an appropriate test message.

CAUTION

Selecting "Alert or higher" will result in the CAN message instructing ERO members to respond to emergency duty locations.

- 3. Successful activation is indicated by:
 - Activation of any ERO initial responder pager with the appropriate code.
 - Activation of the proper CAN telephone list based on the printed report from CAN.
- b. Failure of any test criteria shall result in immediate corrective actions by EP.

3.2 Initial Responder, Branch Manager, or Designee (With Secondary Responder Responsibilities) Actions

- 3.2.1 IF a CAN group roster exists, the responsible Initial Responder, Branch Manager, or designee on a quarterly basis, should perform the following:
- a. Review the roster for accuracy and if needed make changes using Attachment 2, or equivalent form in conjunction with Attachment 4.
 - b. Forward Attachment 2 with changes noted to Emergency Preparedness.
- 3.2.2 IF no CAN group roster exists, THEN the responsible Initial Responder, Branch Manager, or designee shall maintain and test their method for notifying secondary responders. This may include phone "trees" or pagers.

3.3 ERO Member Notification Test Actions

- 3.3.1 Respond to notification drills by completing Attachment 3 and sending it to EP.

NOTE: Pager tests are not considered notification drills.

- 3.3.2 Report any pager problems or failures to the NMPC pager coordinator.
- 3.3.3 Report any changes in home telephone numbers to Emergency Preparedness.

3.4 Modifications to the ERO

Emergency Preparedness may process any modifications to the ERO in accordance with the guidance provided in Attachment 5, "Modification to the Emergency Response Organization".

4.0 DEFINITIONS

- 4.1 **Community Alert Network (CAN)** - A vendor that provides an automated telephone service that activates the NMPC pager system and contacts designated persons with pre-recorded emergency messages.
- 4.2 **Notification Drill** - An evolution that tests the integrated capability of the ERO notification system, typically consisting of a pager and telephone notification.

5.0 REFERENCES AND COMMITMENTS

5.1 Technical Specifications

None

5.2 Licensee Documentation

Nine Mile Point Site Emergency Plan

5.3 Standards, Regulations, and Codes

None

5.4 Policies, Programs, and Procedures

None

5.5 Commitments

<u>Sequence Number</u>	<u>Commitment Number</u>	<u>Description</u>
------------------------	--------------------------	--------------------

None

6.0 RECORDS REVIEW AND DISPOSITION

6.1 The following records generated by this procedure shall be maintained by Records Management for the Permanent Plant File in accordance with NIP-RMG-01, Records Management:

None

6.2 The following records generated by this procedure are not required for retention in the Permanent Plant File:

- Attachment 2, CAN Database Change Form
- Attachment 3, Notification Drill Response Form
- Attachment 6, Deletion/Change of ERO Member Checklist
- Attachment 7, New ERO Member Checklist

LAST PAGE

ATTACHMENT 1: COMMUNITY ALERT NETWORK (CAN) SYSTEM DESCRIPTION

1.0 CAN is an automated telephone notification system that dials pre-defined telephone numbers when requested by NMPC. The CAN System will dispense a message to each person called, indicating plant status and any requested response.

2.0 The CAN database is divided into four lists, as follows:

<u>List #</u>	<u>When called</u>	<u>Who is called</u>
1	Unusual event, normal hours	EP Staff, (office phone) NRC Resident pager, ERO Initial Responder pagers
2	Unusual event, off-hours	EP Staff, (home phone) NRC Resident pager, ERO Initial Responder pagers
3	Alert or higher, normal hours	EP Staff, (office phone) NRC Resident pager, ERO Initial Responder pagers
4	Alert or higher, off-hours	<ul style="list-style-type: none">• All initial responders (home phone)• ERO initial responder pagers• Secondary responders (except for Engineering Support)• EP Staff (home phone), NRC Resident pager

3.0 EPIP-EPP-20 contains details on the activation of this system.

ATTACHMENT 2 (Cont)

GROUP NAME	DESCRIPTION
Initial	All Initial Responders
EOFTech	EOF Technical Assistants
Admin	Administrative/Clerical
U1RP	Unit 1 Radiation Protection
U2RP	Unit 2 Radiation Protection
U1Chem	Unit 1 Chemistry
U2Chem	Unit 2 Chemistry
U1Tecsups	Unit 1 Technical Support
U1Opssups	Unit 1 Operations Support
U2Tecsups	Unit 2 Technical Support
U2Opssups	Unit 2 Operations Support
U1MMaint	Unit 1 Mechanical Maintenance
U1EMaint	Unit 1 Electrical Maintenance
U1ICMain	Unit 1 I&C Maintenance
U2MMaint	Unit 2 Mechanical Maintenance
U2EMaint	Unit 2 Electrical Maintenance
U2ICMain	Unit 2 I&C Maintenance
JNC	Joint News Center
EOFDose	EOF Dose Assessment Staff

ATTACHMENT 3: NOTIFICATION DRILL RESPONSE FORM

Results Summary:

Name: _____

Emergency Position: _____

Team #: _____

Date Received: _____

Pager Activation:

Yes (Time _____ Message _____):

Not Received

Telephone Notification:

None

Drill

Unit 1

No response required

Not a Drill

Unit 2

Respond-normal location

Pager Test

Both Units

Respond-alternate location

Pager Test

Pager Test

Received call at home but was not there to answer.

How long will it take you to get to your emergency response facility? (in minutes) _____

Appropriate number of Secondary Responders indicated they are available to respond:
(for Initial Responders whose Secondary Responders are not on CAN only)

Yes

No

N/A

Comments: _____

Please return to Emergency Preparedness, NLC
Fax: x4874

ATTACHMENT 4: GUIDELINES FOR CAN CHANGES

- 1) If the change is very simple in nature, for example: someone's phone number changed, or their name changed for whatever reason, process the Attachment 2, *CAN DATABASE CHANGE FORM* promptly.
- 2) If the change is more complex, for example: adding or removing someone from the CAN database due to new qualification, lost qualification, person changed departments, etc. then:
 - a) Verify the change is properly authorized in accordance with NIP-EPP-01.
 - 1) A valid NIP-EPP-01, Attachment 2, *ERO Change Request*, signed by the Director Emergency Preparedness, must be completed and approved before any change is initiated.
 - 2) IF you are made aware of a necessary change before you have an approved ERO Change Request, THEN ensure the change request is initiated and/or approved in accordance with the requirements outlined in NIP-EPP-01.
- 3) Major changes to the CAN system require even greater levels of verification and validation to ensure no inadvertent changes were incorporated during the change process. Depending on the nature of the change, any or all of the following actions should be performed when necessary:

Caution: **Verify all validation testing is performed in the "test" mode.**

If a mistake is made here, you stand the chance of falsely activating an actual emergency response of the ERO, the State, County, and Local emergency response organizations.

- a) Obtain a new printout from CAN of the ".vox" files and verify only the changes requested have been made.
- b) Obtain a new printout from CAN of the "call flow" logic files and verify only the requested changes have been made.
- c) Call CAN and schedule a time to physically test the requested changes.
 - 1) Actually run through the modifications via real time testing of the messages in the "test" mode.
 - 2) Ensure all possible affected message combinations are tested.

ATTACHMENT 5: MODIFICATION TO THE EMERGENCY RESPONSE ORGANIZATION

Page 1 of 3

1.0 Purpose

To provide guidance on adding, deleting or changing Emergency Response Organization (ERO) information.

2.0 Actions

NOTE: This guideline shall only be initiated upon receipt of NIP-EPP-01, Attachment 2 "ERO Change Form"

2.1 Verify that all required information on NIP-EPP-01, Attachment 2 is complete.

2.2 Complete required actions as stated in NIP-EPP-01, Attachment 2.

a. If this is a deletion or change, go to step 2.3.

b. If this is an addition, go to step 2.4.

2.3 **IF this is a deletion or change, THEN:**

NOTE: The steps below are contained in Attachment 6, *Deletion/Change of ERO Member Checklist*.

a. Change ERO duty roster, if necessary.

1. The Duty Roster may be found on the "S" Drive, under "Emergency Prep", "**ERO Duty Roster (year)(rev).doc**".

2. Ensure you only create a "draft" revision for the changes until you obtain final approval from the Director EP or designee before implementing the new roster officially.

b. The following activities should be completed as soon as possible once a new revision to the ERO Duty Roster becomes effective:

1. New rosters need to be "posted" on the bulletin boards.

The boards are located at:

a. NLC - outside of the EP offices

b. U-2 Ops Bldg. - across from the Plant Manager's office

c. U-1 Admin Bldg. (G-2) - by Reactor Engineering

d. P-Building - across from lunch room

e. Engineering Services Bldg. (ESB) - first floor back hallway

2. Replace copies in all ERFs: TSC, OSC, EOF, JNC.

2.3 (Cont)

- c. Remove ERO Member from:
 - 1. CAN database by completing an Attachment 2, *CAN DATABASE CHANGE FORM*, and following the instruction on the form.
 - 2. The ERO voice mail distribution list on x4444.
Password: 2468
- d. Contact Emergency Preparedness (EP) Training to accomplish the following:
 - 1. Remove the ERO Member from the qualification list.
 - 2. Remove the ERO Member from the ERO e-mail distribution list.
- e. Ensure that the ERO Member ERO pager is returned to EP if applicable.
- f. EP shall complete remainder of Attachment 6 checklist.

2.4 **IF this is an addition, THEN:**

Note: Many steps below are contained in Attachment 7, *New ERO Member Checklist*.

- a. Verify completion of ALL qualification requirements with EP Training.
- b. Obtain & provide an ERO pager by calling 821-6500, Option 1, or by using a spare kept by EP.
- c. Revise ERO Duty Roster.
 - 1. The Duty Roster may be found on the "**S**" Drive, under "**Emergency Prep**", "**ERO Duty Roster(year)(rev).doc**".
 - 2. Provide a copy of revised roster to new ERO member.
- d. Add ERO Member to ERO voice mail distribution list on x4444.
Password: 2468
- e. Contact Emergency Preparedness (EP) Training to accomplish the following:
 - 1. Add the ERO Member to the qualification list.
 - 2. Add the ERO Member to the ERO e-mail distribution list.
- f. Add ERO Member to CAN list by completing an Attachment 2, "*CAN DATABASE CHANGE FORM*", and following the instruction on the form.
- g. Inform ERO Member of the date of their first duty week.
- h. Provide a copy of ERO Drill/Exercise Schedule and review any commitments.

2.4 (Cont)

- i. Provide a copy of NIP-EPP-01 and review:
 - Fitness for duty requirements.
 - Duty week definition.
 - Drill and exercise responsibilities, including briefings and critiques.
 - Finding replacements for ERO activities.
- j. Describe CAN system response and expectations.
- k. Inform ERO Member of pager test each month and expected response.
- l. Inform ERO Member of position requalification requirements and responsibilities.
- m. Verify that ERO Member initials Checklist where appropriate.
- n. EP will complete remainder of Attachment 7 checklist.

3.0 **Documentation**

- 3.1 Attach *Deletion/Change of ERO Member Checklist* or *New ERO Member Checklist* to NIP-EPP-01, Attachment 2.
- 3.2 File all paperwork in EP Files under "ERO Changes (year)".

ATTACHMENT 6: DELETION/CHANGE OF ERO MEMBER CHECKLIST

ERO Member Name: _____

Position: _____

NOTE: This checklist is to be used in conjunction with Attachment 5, *Modification to the Emergency Response Organization*

- Revise ERO Duty Roster.
(not applicable for secondary responders)
- Revise CAN database. (see attachment 4)
- Direct EP Training remove ERO member from e-mail distribution list.
(not applicable for secondary responders)
- Direct EP Training remove ERO member from voice mail distribution list.
(not applicable for secondary responders)
- Ensure return of ERO pager if applicable.

Notified _____ of deletion/change to roster by phone in person
Name(s)

on _____.
Date / Time

Completed By (print/initial): _____ Date: _____

ATTACHMENT 7: NEW ERO MEMBER CHECKLIST

New ERO Member Name: _____

Position: _____

Action	ERO Member Initials	Date Completed
Received ERO-capable pager		
Received ERO Duty Roster (<input type="checkbox"/> not applicable for secondary responders)		
Acknowledge date of first duty week (_____) <small>Enter Dates Here</small>		
Receive Emergency Preparedness Drill/Exercise Schedule		
Acknowledge drill/exercise commitment dates		
Receive copy of NIP-EPP-01		
Understand NIP-EPP-01 responsibilities for <ul style="list-style-type: none"> • Fitness for Duty • Duty week • Drills/Exercises • Finding replacements/informing facility lead 		
Understand CAN system and expected response		
Understand pager test conducted every Friday and expected response		
Understand position re-qualification requirements and responsibilities		

Emergency Preparedness Department use only:

- Verify qualification complete through EP Training.
- Order pager. (not applicable for secondary responders)
- Add to CAN list. (see Attachment 4 for guidance)
- Coordinate having added to e-mail distribution. (not applicable for secondary responders)
- Coordinate having added to voice mail distribution. (not applicable for secondary responders)
- Remove incumbents being replaced (if applicable) from: CAN Voice mail e-mail

Completed By (print/initial): _____

Date: _____

NIAGARA MOHAWK POWER CORPORATION
NINE MILE POINT NUCLEAR STATION
EMERGENCY PLAN IMPLEMENTING PROCEDURE

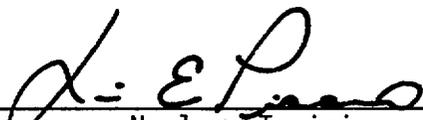
EPIP-EPP-20

REVISION 08

EMERGENCY NOTIFICATIONS

TECHNICAL SPECIFICATION REQUIRED

Approved by:
L. E. Pisano



Manager - Nuclear Training

8/28/00
Date

Effective Date: 09/11/2000

PERIODIC REVIEW DUE DATE: FEBRUARY 2001

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1.0 PURPOSE

To provide instructions for prompt initial notification and appropriate follow-up notification of emergency conditions at Nine Mile Point Nuclear Station (NMPNS) to offsite authorities, emergency response agencies, and selected NMPNS/NMPC personnel.

2.0 PRIMARY RESPONSIBILITIES

- 2.1 Director of Emergency Preparedness maintains overall control of the Site Emergency Plan and Procedures.
- 2.2 Station Shift Supervisor (SSS)/Site Emergency Director (SED) maintains overall control of emergency notifications until relieved by the Corporate Emergency Director.
- 2.3 Corporate Emergency Director (CED) maintains control of notifications to offsite authorities at the Emergency Operations Facility.
- 2.4 The Technical Data Coordinator (TDC) ensures continuous communication with the NRC from the Technical Support Center.

3.0 PROCEDURE

3.1 Notifications of an Emergency Event From the Control Room (SSS/SED) Including Updates/Reclassifications

- NOTES:**
- 1. Initial notifications to State and County officials shall be commenced within 15 minutes of event declaration.
 - 2. If a GENERAL EMERGENCY is declared, Protective Action Recommendations (PARs) shall be transmitted to offsite officials within 15 minutes.

3.1.1 The SSS/SED shall direct a Radwaste or Auxiliary Operator to report to Control Room to act as Communications Aide.

3.1.2 The SSS/SED shall direct the Communications Aide to perform actions contained in the Communications Aide Flowchart (Attachment 2).

3.1.3 The SSS/SED shall:

- a. Complete Part I Notification Fact Sheet (Attachment 1A)

NOTE: Notification must be started within 15 minutes from event declaration.

- 1. Complete all applicable sections.

3.1.3 (Cont)

2. Request radiological release information from the Chemistry Technician, then complete the information for Item #6 as follows:

NOTE: This section pertains to releases of radioactive materials that took place due to the classified emergency event. IF a radioactive material release is taking place and it is unknown if it is event-related, THEN assume the release is the result of the event.

a. No release

Check this selection if there is no release of radioactive materials related to the declared emergency event.

b. Release below federally approved operating limits (Technical Specifications)

Check this selection if a release of radioactive materials is in progress due to the event AND the release rate has been determined to NOT exceed Technical Specifications.

c. Release above federally approved operating limits (Technical Specifications)

Check this selection if a release of radioactive materials is in progress due to the event AND the release rate has been determined to exceed Technical Specifications.

d. Unmonitored release requiring evaluation

Check this selection if evidence exists of a release of radioactive materials from a pathway from which a release cannot be readily determined. (Example: Emergency Condenser vents, blowout panels)

3. Write the EAL # in the box provided for Item #8.
4. Provide further details under Additional Information, do not repeat the EAL description.
5. If the EAL requires no additional explanation, the Additional Information section may be left blank.

3.1.3 (Cont)

6. Indicate in Item #9 the following as applicable:

NOTE: Both plant stability and condition should be included.

- Stable: No escalation in emergency classification expected.
- Improving: Termination of emergency anticipated.
- Degrading: Escalation of emergency classification expected.
- Hot Shutdown/Cold Shutdown per Technical Specification definition.

7. Sign the Part 1 Notification Fact Sheet.

8. Provide to Communications Aide.

b. Complete the Community Alert Network Form (Attachment 4E).

NOTE: Notifications should be completed as soon as possible after Part 1 Notification Fact Sheets.

1. Complete all sections.

2. If the site becomes inaccessible for any reason, and response is required, indicate response required to Alternate Emergency Duty Location (Howard Road Service Center).

3. Sign the CAN contact form.

4. Provide to Communications Aide.

c. Complete the NRC Event Notification Worksheet (Attachment 7).

NOTE: NRC shall be notified as soon as practical, but in all cases within 1 hour of event declaration.

1. Complete all applicable sections.

2. Provide brief description.

3. Provide completed form to Communications Aide.

3.1.4 The SSS/SED should complete the Part I Notification Fact Sheet (Attachment 1A) every 30 minutes *for as long as notifications remain in Control Room.*

3.1.5 The SSS/SED shall ensure followup notifications are made to off-site officials (NYS and Oswego County) approximately every 30 minutes OR as appropriate after initial notifications are completed.

3.1.6 The SSS/SED shall ensure the Communications Aide:

- a. Completes turnover of communications duties to the EOF Communications Coordinator when directed by CED.
- b. Transfers ENS communications to the TSC.

3.1.7 For termination of Unusual Events only, the SSS/SED shall complete Part I - Notification Fact Sheet (Attachment 1A) through Line 5 and:

- a. Sign where appropriate
- b. Provide to the Communications Aide

3.2 Notifications for Transitory Event

3.2.1 Completing a Part 1 for a Transitory Event

a. IF a transitory event has occurred (as defined in EPIP-EPP-01 or 02), AND **NO** emergency classification currently exists, the SSS/SED shall:

- 1) Complete a Part 1 Notification Fact Sheet, Items 1-5, and Item 8.
- 2) Circle the emergency classification met during the transitory event AND the "Emergency Terminated" selection on Item 4.
- 3) Ensure notifications are completed within one hour in accordance with Attachment 5.

b. IF a transitory event has occurred (as defined in EPIP-EPP-01 or 02), AND emergency classification currently exists, the SSS/SED shall:

- 1) Complete a Part 1 Notification Fact Sheet (Attachment 1A).
- 2) Circle the emergency classification that currently exists in Item 4.
- 3) Note the emergency classification met during the transitory event and the time and date of termination in Item 8.
- 4) Implement emergency notifications in accordance with Step 3.1 of this procedure.

- 3.2.2 If appropriate, make notifications to the NRC in accordance with 10CFR50.72.
- 3.2.3 No other notifications are required for transitory events that do not result in a continued emergency classification.

3.3 Notifications of an Emergency Event From the EOF (CED) Including Updates/Reclassifications

- NOTES:**
- 1. If emergency event is reclassified, State and County official notification shall be commenced within 15 minutes of each reclassification.
 - 2. If a GENERAL EMERGENCY is declared, Protective Action Recommendations (PARs) shall be transmitted to offsite officials within 15 minutes.

3.3.1 The CED shall direct transfer of communications responsibilities from the Control Room to the EOF when the EOF Communications Coordinator is prepared to accept duties.

3.3.2 The CED shall verify updates are made to offsite officials (NYS and Oswego County) approximately every 30 minutes.

NOTE: Initial notification should already have been completed from the control room.

3.3.3 The CED shall ensure the EOF Communications Coordinator performs notifications specified on Communications Coordinator Checklist (Attachment 3).

3.3.4 The CED shall ensure the following documents are provided to the EOF Communications Coordinator:

- a. Updated Part I - Notification Fact Sheet (Attachment 1A) from the EOF Administrator for every emergency classification upgrade and/or approximately every 30 minutes.
- b. When appropriate, completed Part II - Dose Assessment Fact Sheet (Attachment 1B) from the ODAM
- c. Part III - Plant Status Board (Attachment 1C Unit 1 or Attachment 1D Unit 2) from Tech Assessment

3.3.5 When the event is terminated, the CED shall:

- a. Obtain a Part 1 Notification Fact Sheet from the EOF Administrator, completed through Line 5
- b. Sign where appropriate
- c. Provide to the EOF Communications Coordinator

3.3.6 The CED shall specify any specific or additional instructions for site facilities such as the Nuclear Learning Center (NLC), Energy Information Center (EIC), P Building, etc. to appropriate personnel (i.e. Security, Unaffected Control Room, Communications Coordinator, etc.).

3.4 Notifications of an Emergency Event From the Technical Support Center (TSC) Including Updates/Reclassifications

3.4.1 The Technical Data Coordinator (TDC) shall assign a person from the Technical Assessment Group to act as Emergency Notification System (ENS) Communicator.

3.4.2 The TDC shall direct the ENS Communicator to:

a. Activate the Unit 2 Emergency Response Data System (ERDS) per Attachment 6.

NOTE: For Unit 1, ERDS is activated by the Control Room

b. Call the Communications Aide in the Control Room and transfer ENS communications from the Control Room to the TSC.

c. Monitor ERDS every 60 minutes (If link is lost, restart per Attachment 6)

d. Continuously man the ENS telephone. If a backup phone is required because the ENS line (Red Phone) is inoperable, the NRC shall be notified (via commercial telephone) within 1 hour that the ENS line is inoperable.

3.4.3 For each emergency reclassification, The TDC shall complete the NRC Event Notification Worksheet (Attachment 7)

NOTE: NRC shall be notified as soon as practical, but in all cases, within 1 hour of event declaration.

3.4.4 The TDC shall direct the ENS Communicator to:

a. Read NRC Event Notification Worksheet (Attachment 7) information to NRC Headquarters.

b. Fax NRC Event Notification Worksheet (Attachment 7) to NRC Headquarters per Attachment 4, F.

3.4.5 The TDC shall direct the Radiological Assessment Group to continuously man the Health Physics Network (HPN) telephone.

3.5 Notifications to the Control Room

- 3.5.1 Upon receipt of a notification on the RECS line, the CSO (or designee) should:
- a. Complete a Part 1 Notification Fact Sheet (Attachment 1A) using the information provided.
 - b. Inform the SSS/SED of the notification and provide the completed Part 1 Notification Fact Sheet (Attachment 1A).
- 3.5.2 The SSS/SED should:
- a. Review the information contained in the completed Part 1 Notification Fact Sheet (Attachment 1A).
 - b. Evaluate any events or conditions against EPIP-EPP-01/02 and, if necessary, declare the emergency.
 - c. If JAFNPP declares a General Emergency or initiates a site evacuation, consider performing a site evacuation per EPIP-EPP-19.
 - d. If necessary, implement appropriate Emergency Plan Implementing Procedures.

4.0 DEFINITIONS

- 4.1 **Community Alert Network (CAN).** An automated computer callout system used to assist with notification of NMPC emergency response personnel.
- 4.2 **NRC Emergency Telecommunication System (ETS).** A dedicated telephone system to communicate important plant information to the NRC during an emergency. This includes the Emergency Notification System (ENS) known as the "red phone", the Health Physics Network (HPN), and other lines for NRC use.
- 4.3 **Normal Hours.** Normal work hours between 0700 and 1530 Monday through Friday excluding holidays.
- 4.4 **Off-Hours.** All hours not considered normal hours.
- 4.5 **Oswego County Warning Point (Oswego County 911 Center).** The communications center at the Oswego County 911 Center in Oswego, New York serves as a notification point for messages from the utilities to appropriate officials in the county. The center can communicate directly to the State Warning Point and also has a radio to communicate directly with the Nine Mile Point and James A. Fitzpatrick Nuclear Stations.

- 4.6 **Radiological Emergency Communication System (RECS).** A dedicated telephone system used to provide initial notification of an emergency, and continuing emergency information to New York State, Oswego County, JAFNPP, and the unaffected unit Control Room.
- 4.7 **State Warning Point (SWP).** New York State's center for receipt and dissemination of warnings of an attack upon the United States as well as actual or impending natural or man-made disasters. The SWP is located in Albany, New York.

5.0 **REFERENCES AND COMMITMENTS**

5.1 **Technical Specifications**

None

5.2 **Licensee Documentation**

Site Emergency Plan

5.3 **Standards, Regulations, and Codes**

- 5.3.1 NUREG-0654, Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants
- 5.3.2 10CFR50.72, Immediate Notification Requirements for Operating Nuclear Power Reactors
- 5.3.3 10CFR50, Appendix E, Emergency Planning and Preparedness for Production and Utilization Facilities

5.4 **Policies, Programs, and Procedures**

- 5.4.1 EPIP-EPP-01, Classification of Emergency Conditions Unit 1
- 5.4.2 EPIP-EPP-02, Classification of Emergency Conditions Unit 2
- 5.4.3 EPIP-EPP-18, Activation and Direction of Emergency Plan
- 5.4.4 EPIP-EPP-23, Emergency Personnel Action Procedures

5.5 **Commitments**

<u>Sequence</u> <u>Number</u>	<u>NCTS</u> <u>Number</u>	<u>Description</u>
----------------------------------	------------------------------	--------------------

None

6.0 RECORD REVIEW AND DISPOSITION

6.1 The following records generated by this procedure that are the result of an actual emergency shall be maintained by Records Management for the Permanent Plant File in accordance with NIP-RMG-01, Records Management:

- Attachment 1A NINE MILE POINT NUCLEAR STATION NOTIFICATION FACT SHEET
- PART 1
- Attachment 1B NINE MILE POINT NUCLEAR STATION NOTIFICATION FACT SHEET
- PART 2
- Attachment 1C PART III - UNIT 1 PLANT STATUS BOARD
- Attachment 1D PART III - UNIT 2 PLANT STATUS BOARD
- Attachment 2 CONTROL ROOM COMMUNICATIONS AIDE FLOWCHART
- Attachment 3 COMMUNICATIONS COORDINATOR CHECKLIST (EOF)
- Attachment 4 EMERGENCY CONTACT FORM
- Attachment 5 RECS LINE INSTRUCTIONS
- Attachment 6 EMERGENCY RESPONSE DATA SYSTEM (ERDS) ACTIVATION
- Attachment 7 NRC EVENT NOTIFICATION WORKSHEET

6.2 The following records generated as a result of a drill or exercise are not required for retention in the Permanent Plant File:

- Attachment 1B NINE MILE POINT NUCLEAR STATION NOTIFICATION FACT SHEET
- PART 2
- Attachment 1C PART III - UNIT 1 PLANT STATUS BOARD
- Attachment 1D PART III - UNIT 2 PLANT STATUS BOARD
- Attachment 2 CONTROL ROOM COMMUNICATIONS AIDE FLOWCHART
- Attachment 3 COMMUNICATIONS COORDINATOR CHECKLIST (EOF)
- Attachment 4 EMERGENCY CONTACT FORM
- Attachment 5 RECS LINE INSTRUCTIONS
- Attachment 6 EMERGENCY RESPONSE DATA SYSTEM (ERDS) ACTIVATION

**ATTACHMENT 1A: NINE MILE POINT NUCLEAR STATION
NOTIFICATION FACT SHEET - PART 1**

Sheet 1 of 4

**"THIS IS TO REPORT AN INCIDENT AT NINE MILE POINT NUCLEAR STATION, STAND BY FOR ROLL CALL."
Conduct roll call to include the following:**

Sequence No.	<input type="checkbox"/> New York State Warning Point	<input type="checkbox"/> Oswego County Warning Point	<input type="checkbox"/> JA Fitzpatrick Power Plant	<input type="checkbox"/> Unaffected 9MP Unit
Roll Call Acknowledged by:	Name	Name	Name	Name

PART 1 - GENERAL INFORMATION

1. This message is being transmitted on: <i>(Date)</i> _____ at <i>(Time)</i> _____		VIA: A. RECS B. Other _____
2. This is: A. <u>NOT</u> an Exercise B. An Exercise		3. The facility providing this information is: D. Nine Mile Point Unit 1 E. Nine Mile Point Unit 2 F. J.A. Fitzpatrick
4. The Emergency Classification is: A. Unusual Event C. Site Area Emergency E. Emergency F. Recovery B. Alert D. General Emergency Terminated G. Transportation Incident		
5. This Emergency Classification declared on: <i>(Date)</i> _____ at <i>(Time)</i> _____		
6. Release of Radioactive Materials due to the classified event: A. No Release B. Release below federally approved operating limits (Technical Specifications) <input type="checkbox"/> To Atmosphere <input type="checkbox"/> To Water C. Release above federally approved operating limits (Technical Specifications) <input type="checkbox"/> To Atmosphere <input type="checkbox"/> To Water D. Unmonitored release requiring evaluation		
7. Protective Action Recommendations: A. No need for Protective Actions outside the site boundary. B. EVACUATE the following ERPAs: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 C. SHELTER all remaining ERPAs		
8. EAL #: <div style="border: 2px solid black; width: 150px; height: 100px; display: inline-block; vertical-align: top;"></div> Additional Information _____ _____ _____		
9. The Plant status is: A. Stable C. Degrading E. Cold Shutdown B. Improving D. Hot Shutdown		
10. Reactor Shutdown: A. Not Applicable B. <i>(Date)</i> _____ at <i>(Time)</i> _____		
11. Wind Speed: _____ Miles/hr at elevation _____ feet		12. Wind Direction: _____ Degrees at elevation _____ feet <i>(From)</i>
13. Stability Class: A B C D E F G		14. Reported By: _____ at Tel. No. (315) _____ (Communicator Name)

**"DOES OSWEGO COUNTY OR NEW YORK STATE NEED CLARIFICATION ON ANY INFORMATION? (Provide as appropriate)
THIS IS THE END OF THE MESSAGE. STANDBY FOR VERIFICATION ROLL CALL."**

Check those involved in termination roll call.	<input type="checkbox"/> New York State Warning Point	<input type="checkbox"/> Oswego County Warning Point	<input type="checkbox"/> JA Fitzpatrick Power Plant	<input type="checkbox"/> Unaffected 9MP Unit
--	---	--	---	--

**"NINE MILE POINT 1/2 OUT" Time (24 hr clock): _____
Approved By (CED/SED) _____**

**ATTACHMENT 1B: NINE MILEPOINT NUCLEAR STATION
NOTIFICATION FACT SHEET - PART 2**

Sheet 2 of 4

RADIOLOGICAL ASSESSMENT DATA

15. Message transmitted at:
 Date _____ Time _____ Location/Facility Transmitted From: _____

16. General Release Information

A. Release > Tech Specs started: Date _____ Time _____
 B. Release > Tech Specs expected to end: Date _____ Time _____ OR Unknown Intermittent
 C. Release > Tech Specs ended: Date _____ Time _____
 D. Reactor Shutdown: N/A OR Date _____ Time _____
 E. Wind Speed: _____ miles/hour OR _____ meters/second at elevation _____ feet or meters (Circle one)
 F. Wind Direction from: _____ degrees at elevation _____ feet or meters (Circle one)
 G. Stability Class: PASQUIL A B C D E F G OR Other _____

17. Atmospheric Release Information

A. Release from: Ground Elevated
 B. Iodine/Noble Gas Ratio _____
 C. Total Release Rate _____ Ci/sec
 D. Noble Gas Release Rate _____ Ci/sec
 E. Iodine Release Rate _____ Ci/sec
 F. Particulate Release Rate _____ Ci/sec

18. Waterborne Release Information

A. Volume of Release _____ gal or liters
 B. Total Concentration _____ µCi/ml
 C. Radionuclides in Release _____
 D. Total Activity Released _____

19. Dose Calculations (based on a release duration of _____ hours)

Calculation is based on (circle one) A. Inplant Measurements B. Field Measurements C. Assumed Source Term

Table below applies to (circle one) A. Atmospheric Release B. Waterborne Release

Distance	Dose	
	TEDE (rem)	CDE - Child Thyroid (rem)
Site Boundary		
2 Miles		
5 Miles		
10 Miles		
__ Miles		

20. Field Measurements of Dose Rates or Surface Contamination/Deposition

Mile/Sector OR Mile/Degrees	Location OR Sampling Point	Time of Reading	Dose Rate OR Contamination (Include Units)

Approved By: (SED/CED) _____

Date (MM/DD/YY)	Time (24 Hour)
-----------------	----------------

(Process Computer Displayed Time)

Major Parameters		Trend*	Misc. System/Component Status						Trend*
Rx Pressure	_____ psig		Pressure Relief Valves (ERV):						
Rx Temp	_____ °F		(111)	(112)	(121)	(122)	(113)	(123)	
Rx Level	_____ in.		108A	108B	108C	108D	108E	108F	
Rx Shutdown	<input type="checkbox"/> Yes <input type="checkbox"/> No _____ Time		Closed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
APRM	_____ %		Open	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rx Power Level	_____ Mwe		Inop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	_____ Mwt		Safety Valves <input type="checkbox"/> Norm <input type="checkbox"/> Offn						
Drywell Temp	_____ °F		MSIV's: 111 112 121 122						
Drywell Pressure	_____ psig		Open	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Torus Pressure	_____ psig		Closed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Torus Water Temp	_____ °F		Rx Water Cleanup System :						
Torus Water Level	_____ ft.		PMP 11	PMP 12	AUX	System Status			
Cond. Stor. Tk Level	_____ ft.		<input type="checkbox"/> Operating	<input type="checkbox"/> Operating	<input type="checkbox"/> Operating	<input type="checkbox"/> Isolated			
Safeguards Status			<input type="checkbox"/> Standby	<input type="checkbox"/> Standby	<input type="checkbox"/> Standby	<input type="checkbox"/> Unisolated			
			<input type="checkbox"/> Inop	<input type="checkbox"/> Inop	<input type="checkbox"/> Inop				
Emerg. Loop 11	<input type="checkbox"/>	<input type="checkbox"/>	ADS						
Cooling: Loop 12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Operating <input type="checkbox"/> Standby <input type="checkbox"/> Inop _____ Time						
Liq Poison PMP 11	<input type="checkbox"/>	<input type="checkbox"/>	Containment Spray:						
System: PMP 12	<input type="checkbox"/>	<input type="checkbox"/>	Loop	Operating Spray Mode	Operating Torus Cool	Stby	Inop		
DW Inert & CAD Sys	<input type="checkbox"/>	<input type="checkbox"/>	111	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Emergency Loop 11	<input type="checkbox"/>	<input type="checkbox"/>	112	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Vent System: Loop 12	<input type="checkbox"/>	<input type="checkbox"/>	121	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Primary Cont Integrity (Drywell)	<input type="checkbox"/> Yes <input type="checkbox"/> No _____ Time		122	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Secondary Cont Integrity (Rx Bldg)	<input type="checkbox"/> Yes <input type="checkbox"/> No _____ Time		Shutdown Cooling:						
Safety Injection Modes			Loop	Operating	Stby	Inop			
Feedwater Flow _____ x 10 ⁵ #/hr			11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Core Spray 11 Flow _____ x 10 ⁴ #/hr			12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Core Spray 12 Flow _____ x 10 ⁴ #/hr			13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
CRD to RPV Flow _____ x 10 ³ #/hr			Hydrogen Concentration _____ %						
			Oxygen Concentration _____ %						
			Power Availability Schemes						
CRD Pump 11	<input type="checkbox"/>	<input type="checkbox"/>	Offsite:	115KV (101 North)	<input type="checkbox"/> Yes <input type="checkbox"/> No _____ KV				
CRD Pump 12	<input type="checkbox"/>	<input type="checkbox"/>		115KV (101 South)	<input type="checkbox"/> Yes <input type="checkbox"/> No _____ KV				
FWP 11	<input type="checkbox"/>	<input type="checkbox"/>	Onsite:	Diesel Generator 102	<input type="checkbox"/> Yes <input type="checkbox"/> No				
FWP 12	<input type="checkbox"/>	<input type="checkbox"/>		Diesel Generator 103	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Core Spray 111	<input type="checkbox"/>	<input type="checkbox"/>		Battery Board 11	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Core Spray 112	<input type="checkbox"/>	<input type="checkbox"/>		Battery Board 12	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Core Spray 121	<input type="checkbox"/>	<input type="checkbox"/>							
Core Spray 122	<input type="checkbox"/>	<input type="checkbox"/>							
HPCI Status	<input type="checkbox"/>	<input type="checkbox"/>							

*Trend Symbols: ↑ = Increasing ↓ = Decreasing → = No Change

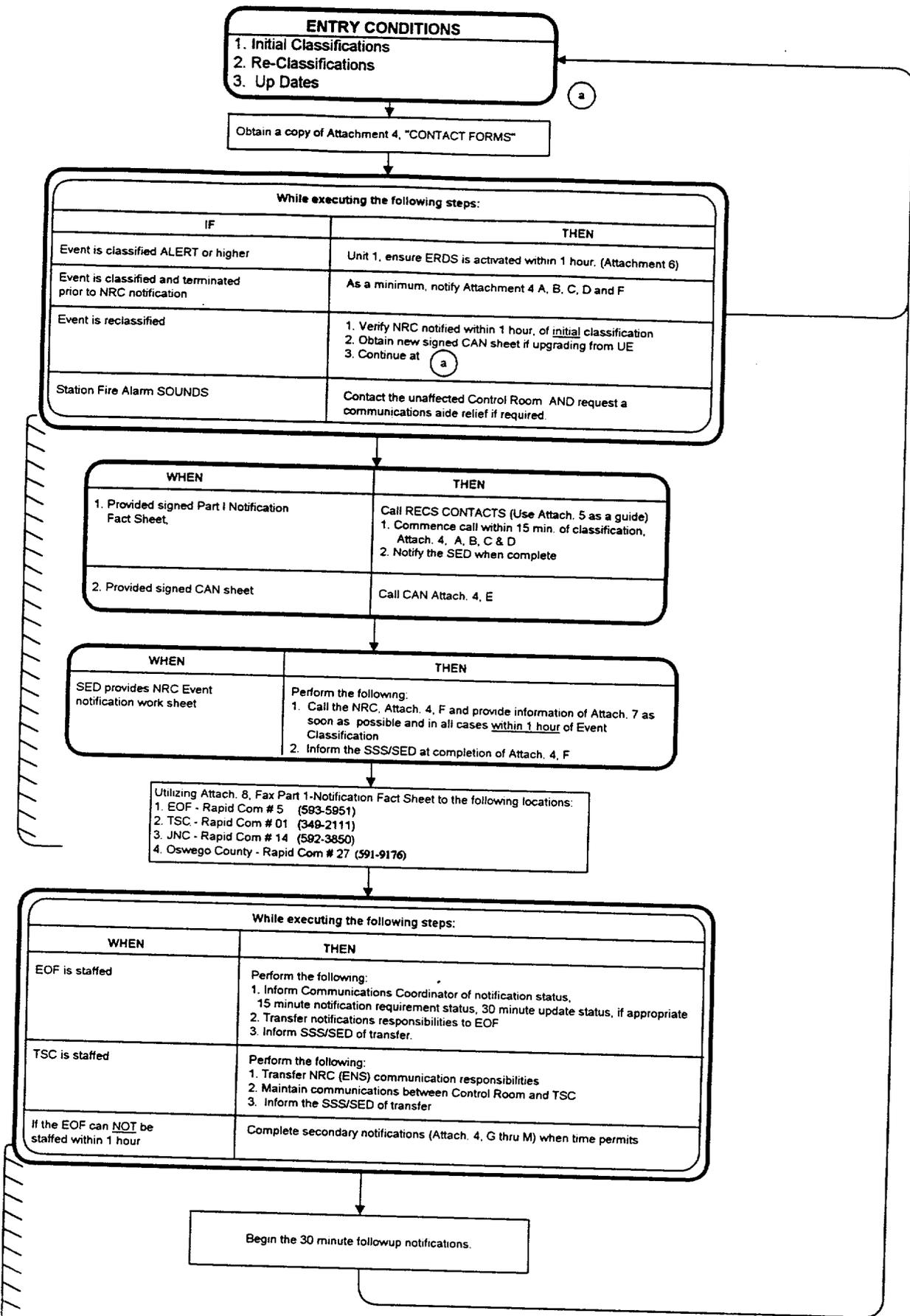
Date (MM/DD/YY)	Time (24 Hour)
-----------------	----------------

Major Parameters		Trend*
Pressure	_____ psig	
Rx Temp	_____ °F	
Rx Level	_____ in.	
Rx Shutdown	<input type="checkbox"/> Yes <input type="checkbox"/> No _____ Time	
APRM	_____ %	
Power Level	_____ MwE	
	_____ MwT	
Drywell Pressure	_____ psig	
Drywell Temp	_____ °F	
Suppression Pool:		
Air Temp	_____ °F	
Air Pres	_____ psig	
Water Temp	_____ °F	
Water Level	_____ ft.	
Safeguards Status		Trend*
Standby Liq. Tank Level	_____ gal	
Standby Liq. Flow	_____ gpm	
SGTS:		
<input type="checkbox"/> Operating	<input type="checkbox"/> Standby	<input type="checkbox"/> Inoperative
Containment Integrity :		
Primary	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Secondary	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Safety Injection Modes		Trend*
Feedwater Flow	_____ K#/hr.	
Control Rod Drive :		
<input type="checkbox"/> Operating	<input type="checkbox"/> Standby	<input type="checkbox"/> Inoperative
High Pressure Core Spray	_____ gpm	
Low Pressure Core Spray	_____ gpm	
LPCI:		
Loop A	_____ gpm	
Loop B	_____ gpm	
Loop C	_____ gpm	
Rx Core Isol. Cooling	_____ gpm	
Service Water :		
<input type="checkbox"/> Available	<input type="checkbox"/> Not Available	

Misc. System/Component Status		Trend*
Safety Relief Valves	<input type="checkbox"/> Open <input type="checkbox"/> Closed	
ADS	<input type="checkbox"/> Open <input type="checkbox"/> Closed	
Rx Water Cleanup System		
<input type="checkbox"/> Operating	<input type="checkbox"/> Standby <input type="checkbox"/> Inoperative	
Residual Heat Removal Systems		Trend*
Mode	(A, B, C) Loop	
<input type="checkbox"/> Low Pressure Coolant Injection		
<input type="checkbox"/> Containment Spray		
<input type="checkbox"/> Shutdown Cooling		
<input type="checkbox"/> Steam Condensing		
<input type="checkbox"/> Suppression Pool Cooling		
<input type="checkbox"/> Suppression Pool Spray		
Drywell		Trend*
Hydrogen Concentration	_____ %	
Oxygen Concentration	_____ %	
Power Available		Trend*
Offsite		
115 KV Scriba A	<input type="checkbox"/> Available <input type="checkbox"/> Not Available	
115 KV Scriba B	<input type="checkbox"/> Available <input type="checkbox"/> Not Available	
Onsite		
Diesel Generator		
	Operating Standby-Run Standby-S/D Inop	
Div 1	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Div 2	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Div 3	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
4KV Emergency Bus		
	Available Not Available	
Div 1	<input type="checkbox"/> <input type="checkbox"/>	
Div 2	<input type="checkbox"/> <input type="checkbox"/>	
Div 3	<input type="checkbox"/> <input type="checkbox"/>	
	Available Not Available	
Div 1	<input type="checkbox"/> <input type="checkbox"/>	
Div 2	<input type="checkbox"/> <input type="checkbox"/>	
Div 3	<input type="checkbox"/> <input type="checkbox"/>	
Normal Battery		
<input type="checkbox"/> Available	<input type="checkbox"/> Not Available	

*Trend Symbols: ↑ = Increasing ↓ = Decreasing → = No Change

ATTACHMENT 2: CONTROL ROOM COMMUNICATIONS AIDE FLOWCHART



E. Community Alert Network (CAN)

<p>REQUIREMENT</p>	<p>Notification to CAN and Pager Activation System should occur only when:</p> <ol style="list-style-type: none"> 1. Directed by SSS/SED/CED for event notification 2. It is the first notification required for any Emergency Classification, OR 3. The Emergency Classification is upgraded from an Unusual Event Classification. 4. Per EOF Communications Coordinator Checklist. <p>NOTE: The Dose Assessment Advisor should be consulted to determine if Alternate Emergency Reporting Locations may be appropriate due to offsite doses.</p>			
<p>CONTACT METHOD</p>	<p>Password: ONTARIO</p> <p>1. (800)552-4226 2. (877)786-8478 3. (800)992-2331</p> <table border="1" data-bbox="277 562 1430 638"> <tr> <td data-bbox="277 562 669 638">Start Time</td> <td data-bbox="673 562 894 638">Date</td> <td data-bbox="899 562 1430 638">Person Contacted</td> </tr> </table>	Start Time	Date	Person Contacted
Start Time	Date	Person Contacted		
<p>MESSAGE</p>	<p>"THIS IS TO REPORT AN INCIDENT AT NINE MILE POINT NUCLEAR STATION"</p> <p>A. This:</p> <ol style="list-style-type: none"> 1. <input type="checkbox"/> is a drill 2. <input type="checkbox"/> is not a drill <p>B. Involving:</p> <ol style="list-style-type: none"> 1. <input type="checkbox"/> Nine Mile Point Unit 1 2. <input type="checkbox"/> Nine Mile Point Unit 2 3. <input type="checkbox"/> Both Units 4. <input type="checkbox"/> James A. Fitzpatrick Power Plant <p>C. Responders report to:</p> <ol style="list-style-type: none"> 1. <input type="checkbox"/> No response is required 2. <input type="checkbox"/> Response required to EOF/TSC/OSC 3. <input type="checkbox"/> Response required to Alternate Emergency Duty Location <p>D. Event Classification/time of day:</p> <ol style="list-style-type: none"> 1. <input type="checkbox"/> Unusual Event - Normal Hours 2. <input type="checkbox"/> Unusual Event - Off Hours 3. <input type="checkbox"/> Alert or Higher - Normal Hours 4. <input type="checkbox"/> Alert or Higher - Off Hours 			
<p>CONTROL ROOM EOF</p>	<p>Check the appropriate Call Back Number: EOF: <input type="checkbox"/> (315) 593-5875</p> <p>Unit 1: <input type="checkbox"/> (315) 349-2869 <input type="checkbox"/> (315) 349-2842</p> <p>Unit 2: <input type="checkbox"/> (315) 349-2172 <input type="checkbox"/> (315) 349-2173 <input type="checkbox"/> Other: _____</p>			
<p>PAGER ACTIVATION</p>	<p>Caution: Performing the following steps will result in the notification of the ERO.</p> <ol style="list-style-type: none"> A. Call Pager Activation System at 1-(800)-732-4365. B. When prompted for pager number enter 0017. C. When prompted for numeric message, and using the three number code indicated by the completed "Message" section above, enter 000 () () () <p style="text-align: center;">A B C</p> <p><i>Example: for a Drill at Unit 1, with No response required, enter 000111.</i></p> <p><i>Example: for a real event at Unit 2, response required to normal location, enter 000222.</i></p> <p><i>Example: for a real event at Unit 1, response required to alternate location, enter 000213.</i></p>			
<p>Message Approval (SED)/(CED)</p>	<p>Time</p>			

F. Nuclear Regulatory Commission: Emergency Operations Center

<p>REQUIREMENT</p>	<p>(Normally performed from the Control Room or T.S.C.) Notify at all emergency classifications and reclassifications; provide follow-up information. NOTE: If a backup phone is required to be used because ENS line (Red Phone) is inoperable, the NRC shall be notified (via commercial telephone) within 1 hour that the ENS line is inoperable.</p>					
<p>CONTACT METHOD</p>	<p>ENS Line (Red Phone) using telephone numbers listed: 1. (301)816-5100 (Main) 3. (301)415-0550 (Second Backup) 2. (301)951-0550 (Backup) 4. (301)816-5151 (Fax)</p> <table border="1" data-bbox="277 478 1395 554"> <tr> <td data-bbox="277 478 553 554">Start Time</td> <td data-bbox="553 478 781 554">Date</td> <td data-bbox="781 478 1395 554">Person Contacted</td> </tr> </table>			Start Time	Date	Person Contacted
Start Time	Date	Person Contacted				
<p>MESSAGE</p>	<p>Read Event Notification Worksheet (Attachment 7). State that this notification is being performed under 10CFR50.72.</p>					

G. NMPC Energy Center

<p>REQUIREMENT</p>	<p>Notify at Alert, Site Area Emergency or General Emergency; provide follow-up information as requested.</p>					
<p>CONTACT METHOD</p>	<p>1. 349-2637 2. 342-4117</p> <table border="1" data-bbox="310 884 1395 957"> <tr> <td data-bbox="310 884 521 957">Start Time</td> <td data-bbox="521 884 716 957">Date</td> <td data-bbox="716 884 1395 957">Person Contacted</td> </tr> </table>			Start Time	Date	Person Contacted
Start Time	Date	Person Contacted				
<p>MESSAGE</p>	<p>"This <i>(is/is not)</i> a drill. This is Nine Mile Point Nuclear Station Unit (1/2). A _____ <i>(state emergency class)</i> has been declared. Notify the Energy Center Manager or designee, and make a PA announcement for Niagara Mohawk Emergency Response personnel to report to their emergency facilities." At an Alert or SAE add: "Inform the Energy Center Manager (or designee) to direct all visitors at the Energy Center and surrounding park area to leave the site property". At a GE add: "Inform the Energy Center Manager (or designee) to direct all visitors to go to the Reception Center at the NYS Fairgrounds". <u>Provide further guidance as directed by the CED.</u></p>					

H. General Electric BWR Emergency Support Program

<p>REQUIREMENT</p>	<p>Notify at Alert, Site Area Emergency or General Emergency; provide follow-up information as requested. (ref. GE SIL 324)</p>					
<p>CONTACT METHOD</p>	<p>(408)971-1038</p> <table border="1" data-bbox="310 1499 1395 1572"> <tr> <td data-bbox="310 1499 521 1572">Start Time</td> <td data-bbox="521 1499 716 1572">Date</td> <td data-bbox="716 1499 1395 1572">Person Contacted</td> </tr> </table>			Start Time	Date	Person Contacted
Start Time	Date	Person Contacted				
<p>MESSAGE</p>	<p>"This <i>(is/is not)</i> a drill. This is Niagara Mohawk Power Corporation, Nine Mile Point Nuclear Station (1/2). This is to notify you that we are in a <i>(state emergency class)</i>." Provide your name, telephone number, and an alternate number they may use. NOTE: Once communication is established with the TLAM, no further notification is necessary. (exception is when you are tasked with event termination notifications)</p>					

I. INPO Emergency Response Center

REQUIREMENT	Notify at Alert, Site Area Emergency or General Emergency; provide follow-up information as requested.		
CONTACT METHOD	1. (800) 321-0614 2. (770) 644-8000 (switchboard) 3. (770) 644-8549 for FAX 4. (770) 644-8732 for FAX Confirmation		
	Start Time	Date	Person Contacted
MESSAGE	<p>"This <i>(is/is not)</i> a drill. This is Nine Mile Point Nuclear Station (1/2). This is to notify you that we are in a <i>(state emergency class)</i>. When INPO Liaison responding to the emergency arrives in local area, they should contact the Technical Liaison and Advisory Manager located in the EOF at (315) 593-5884 or (315) 593-5818."</p> <p>NOTE: Once communication is established with the TLAM, no further notification is necessary. (exception is when you are tasked with event termination notifications)</p>		

J. Oswego County Sheriff's Department

REQUIREMENT	Notify at Alert, Site Area Emergency or General Emergency; provide follow-up information as requested.		
CONTACT METHOD	1. 911 3. 349-3409 2. 343-5490		
	Start Time	Date	Person Contacted
MESSAGE	<p>"This <i>(is/is not)</i> a drill. This is Nine Mile Point Nuclear Station (1/2). This is to notify you that we are in a <i>(state emergency class)</i>. Please assign deputies to Lake Road at the east and west site boundaries to establish traffic control points."</p>		

K. DOE Federal Radiological Monitoring and Assessment Plan (FRMAP)

REQUIREMENT	Notify at Alert, Site Area Emergency or General Emergency; provide follow-up information as requested.		
CONTACT METHOD	1. (516) 344-2200 2. (516) 344-3424		
	Start Time	Date	Person Contacted
MESSAGE	<p>"This <i>(is/is not)</i> a drill. This is Nine Mile Point Nuclear Station (1/2). This is to notify you that we are in a <i>(state emergency class)</i>."</p>		

L. American Nuclear Insurers

REQUIREMENT	Notify at Alert, Site Area Emergency or General Emergency; provide follow-up information as requested.		
CONTACT METHOD	(860) 561-3433 extension 304		
	Start Time	Date	Person Contacted
MESSAGE	<p>"This <i>(is/is not)</i> a drill. This is Nine Mile Point Nuclear Station (1/2). This is to notify you that we are in a <i>(state emergency class)</i>."</p> <p>NOTE: Once communication is established with the TLAM, no further notification is necessary. (exception is when you are tasked with event termination notifications)</p>		

M. System Hydro Supervisor

REQUIREMENT	Notify at Alert, Site Area Emergency or General Emergency. Provide updates and follow-up information as requested. (ref. NMPC Radiological Emergency Plan for FERC Project #2474 & 10551, dated 1991)		
CONTACT METHOD	1. FAX (315) 788-4895 4. (315) 788-1136 2. (315) 788-4016 5. (315) 788-1137 3. (315) 788-4017		
	Start Time	Date	Person Contacted
MESSAGE	FAX Notification Fact Sheet-Part 1 (Attachment 1A). Confirm receipt via phone.		

ATTACHMENT 5: RECS LINE INSTRUCTIONS

This section provides instructions on how to provide the Notification Fact Sheet - Part 1 information over the RECS dedicated line.

1. Assure the Notification Fact Sheet - Part 1 is completed and the Emergency Director signature line is signed.
2. Obtain Emergency Contact Forms Packet (Attachment 4).
3. Provide the Part 1 data to agencies via the RECS line.
 - a. Lift the handset of RECS telephone (with yellow face plate) and press A*. Wait about 20 seconds for all responders to answer.
 - b. Push button in the handset to talk.
 - c. State the following: "THIS IS TO REPORT AN INCIDENT AT THE NINE MILE POINT NUCLEAR STATION. STANDBY FOR ROLL CALL....".

NOTE: When each organization answers, they should identify themselves and wait for the Roll Call to begin.

- d. Pause to permit individuals to obtain their copies of forms on which they will record the information you will read to them.
4. Conduct a roll call by stating "Roll Call: New York State Warning Point" (wait to obtain an answer) then continue to include Oswego County Warning Point (pause) and James A. Fitzpatrick Nuclear Power Plant (pause), and unaffected Nine Mile Point Plant. Ask for and record names given.
5. For parties that do not respond to call, state the following "recalling (Party) _____". If the party still does not respond, then call them using the backup method specified. If a backup method is not specified, continue notifications and inform SSS/SED/CED as soon as possible.
6. Upon completion of roll call, read the Notification Fact Sheet - Part 1. Do so by reading each line item number, and the associated information.
7. Upon completion state "This is the end of the message Standby For Verification Roll Call". Conduct roll call as earlier, except it is not necessary to record names. Then ask if Oswego County or if N. Y. State have received the message. Provide corrected message information if necessary.
8. After all information is provided state "Nine Mile Point (Unit 1, Unit 2 or EOF) out". Record the time that the notification is completed.

ATTACHMENT 6: EMERGENCY RESPONSE DATA SYSTEM (ERDS) ACTIVATION

Sheet 1 of 2

NOTES: The ERDS shall be activated within one hour of the declaration of an alert or higher.

Unit 1 ERDS console is located in the Aux Control Room, Process Computer Room.

Unit 2 ERDS Console is located in the Tech Assessment Room of the TSC.

Step 7 is required only if ERDS System is powered down.

1. Turn on / verify on the following:

- Codex 2235 Modem
- Codex 2171 Modem
- ERDS PC (computer)
- VAX to ERDS PC Modem

Once turned on, after a short delay, the computer screen should display a screen similar to the following:

Welcome to the Nine Mile Point Unit 1 (2)
Emergency Response Data System (ERDS)

Console Login:

2. Log on the ERDS computer by entering the following keystrokes:

- Type "erds"
- Depress the "Enter" key

3. When the password prompt appears

- Type "erdsu1" for Unit 1, OR "erdsu2" for Unit 2
- Depress the "Enter" key

4. When the system prompt appears (\$), enter the following keystrokes

- Type "erds"

If performing a reconnection, enter the following keystrokes:

- Type "erds -r"

5. Verify the ERDS link is established by observing the following on the screen:

"Handshake complete. Beginning transmission"
"Press DEL to terminate program manually"

6. Every 60 minutes after initial connection, verify that ERDS is still connected by time, date and sequence as displayed at the bottom center of the screen.
 - This information is contained at the end of the data packet, and should update every 60 seconds.
 - If reconnection is necessary, go to Step 4.

7. When it is necessary to terminate the ERDS program, press the "DEL" key. Do not turn any equipment off. Unit 1 ERDS must be always "on".

TROUBLESHOOTING

Problem	Solution
Loss of communications (after successful connection)	<ul style="list-style-type: none"> • Reconnect using Steps 4, 5, 6
NRC host computer busy	<ul style="list-style-type: none"> • Contact NRC Duty Officer (NRC red phone) for instructions
NRC request you use a different phone number to call ERDS	<ul style="list-style-type: none"> • At Step 4 enter "erdst #####" (where the # represent the area code and telephone number given to you by the NRC).
Following message appears "Timeout, remote host failed to respond within 1 minute" or "Remote host sent refused"	<ul style="list-style-type: none"> • Wait about 5 minutes after one of these messages first appears (this will give ERDS time to establish a link on its own). • If no connection is made, contact the NRC Duty Officer (NRC red phone) for instructions.
Loss of source data, <u>or</u> any NMPC ERDS hardware problems.	<ul style="list-style-type: none"> • Inform NRC Duty Officer (NRC red phone) of problems. • Inform SSS or SED of problem. • Have SSS contact computer on call supervisor.
Computer console locks up.	<ul style="list-style-type: none"> • Reboot and restart. May be accomplished by turning power Off and then back On, or by depressing "Control", "Alt", and "Delete" keys simultaneously.

NRC FORM 351 (3-90)	EVENT NOTIFICATION WORKSHEET	U.S. NUCLEAR REGULATORY COMMISSION OPERATIONS CENTER
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NOTIFICATION TIME	FACILITY OR ORGANIZATION	UNIT	CALLER'S NAME	CALL BACK # : ENS _____ or () _____
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EVENT TIME & ZONE	EVENT DATE / /
POWER/MODE BEFORE	POWER/MODE AFTER

1-Hr Non-Emergency 10 CFR 50.72(b)(1)		4-Hr Non-Emergency 10 CFR 50.72(b)(2)	
(i)(A) TS Required S/D	ASHU	(v) Emergency Siren INOP	AESS
(i)(B) TS Deviation	ADEV	(vi) Fire	AFIR
(ii) Degraded Condition	ADEG	(vi) Toxic Gas	ACHE
(iii)(A) Unanalyzed Condition	AUNA	(vi) Rad Release	ARAD
(iii)(B) Outside Design Basis	AOUT	(vi) Oth Hampering Safe Op.	AHIN
(iii)(C) Not Covered by OPs/EPs	ACNC	(i) Degrade While S/D	ADAS
(iii) Earthquake	ANEA	(ii) RPS Actuation (scram)	ARPS
(iii) Flood	ANFL	(ii) ESF Actuation	AESF
(iii) Hurricane	ANHU	(iii)(A) Safe S/D Capability	AINA
(iii) Ice/Hail	ANIC	(iii)(B) RHR Capability	AINB
(iii) Lightning	ANLI	(iii)(C) Control of Rad Release	AINC
(iii) Tornado	ANTO	(iii)(D) Accident Mitigation	AIND
(iii) Oth Natural Phenomenon	ANOT	(iv)(A) Air Release > 2X App 8	AAIR
(iv) ECCS Discharge to RCS	ACCS	(iv)(B) Liq Release > 2X App 8	ALIQ
(v) Lost ENS	AENS	(v) Offsite Medical	AMED
(v) Lost Other Assessment/Comms	AARC	(vi) Offsite Notification	APRE

EVENT CLASSIFICATIONS	
GENERAL EMERGENCY	GEN/AAEC
SITE AREA EMERGENCY	SIT/AAEC
ALERT	ALE/AAEC
UNUSUAL EVENT	UNU/AAEC
50.72 NON-EMERGENCY	(see next columns)
PHYSICAL SECURITY (73.71)	D???
TRANSPORTATION	NTRA
MATERIAL/EXPOSURE	B???:E???:F???
FITNESS FOR DUTY	HFIT
OTHER	N???:C???:G???

DESCRIPTION			
Include: Systems affected, actuations & their initiating signals, causes, effect of event on plant, actions taken or planned, etc.			

NOTIFICATIONS	YES	NO	WILL BE	ANYTHING UNUSUAL OR NOT UNDERSTOOD?	YES <i>(Explain above)</i>	NO	
NRC RESIDENT							
STATE(s)				DID ALL SYSTEMS FUNCTION AS REQUIRED?	YES	NO <i>(Explain above)</i>	
LOCAL							
OTHER GOV AGENCIES				MODE OF OPERATION	ESTIMATED RESTART DATE:		
MEDIA/PRESS RELEASE				UNTIL CORRECTED:			
						ADDITIONAL INFO ON BACK? <input type="checkbox"/> YES <input type="checkbox"/> NO	

NRC Form 361 (3-80)

ADDITIONAL INFORMATION

USNRC OPERATIONS CENTER

RADIOLOGICAL RELEASES CHECK OR FILL IN APPLICABLE ITEMS (Specific details/explanations should be covered in every description)					
LIQUID RELEASE	GASEOUS RELEASE	UNPLANNED RELEASE	PLANNED RELEASE	ONGOING	TERMINATED
MONITORED	UNMONITORED	OFFSITE RELEASE	T.S. EXCEEDED	RM ALARMS	AREAS EVACUATED
PERSONNEL EXPOSED OR CONTAMINATED		OFFSITE PROTECTIVE ACTIONS RECOMMENDED		State release date in description.	

	Release Rate (Ci/sec)	% T.S. LIMIT	HOO GUIDE	Total Activity (Ci)	% T.S. LIMIT	HOO GUIDE
Noble Gas			0.1 Ci/sec			1000 Ci
Iodine			10 uCi/sec			0.01 Ci
Particulate			1 uCi/sec			1 mCi
Liquid (excluding tritium & dissolved noble gases)			10 uCi/min			0.1 Ci
Liquid (tritium)			0.2 Ci/min			5 Ci
Total Activity						

	PLANT STACK	CONDENSER/AIR EJECTOR	MAIN STEAM LINE	SG BLOWDOWN	OTHER
RAD MONITOR READINGS:					
ALARM SETPOINTS:					
% T.S. LIMIT (if applicable)					

RCS OR SG TUBE LEAKS: CHECK OR FILL IN APPLICABLE ITEMS: (Specific details/explanations should be covered in event description)

LOCATION OF THE LEAK (e.g., SG #, valve, pipe, etc.):

LEAK RATE:	UNITS: gpm/gpd	T.S. LIMITS:	SUDDEN OR LONG TERM DEVELOPMENT:
LEAK START DATE:	TIME:	COOLANT ACTIVITY & UNITS: PRIMARY -	SECONDARY -

LIST OF SAFETY RELATED EQUIPMENT NOT OPERATIONAL:

EVENT DESCRIPTION (Continued from front)

ATTACHMENT 8: RAPID COM FAX INSTRUCTIONS

NOTE: If performing this portion of the procedure during a DRILL or EXERCISE, ensure the word **"DRILL"** is written across the form.

1. Perform the following if faxing from a Sharp Model F04700:
 - a. Insert document in FAX machine face down.
 - b. Flip up plastic cover to expose numbers 33 through 48.
 - c. Press button 48.

This is equivalent to dialing the following Rapid Com numbers for:

EOF 05 (593-5951)
TSC 01 (349-2111)
JNC 13 (592-3850)
Osw. County 22 (591-9176)
NYS EMO 24 (518) 457-9930

- d. The transaction report will be printed when the machine has completed the fax.