SCE&G SM
A SCANA COMPANY

January 9, 2001
RC-01-0011

Document Control Desk
U. S. Nuclear Regulatory Commission
Washington, DC 20555

Gentlemen:

Subject: VIRGIL C. SUMMER NUCLEAR STATION
DOCKET NO. 50/395
OPERATING LICENSE NO. NPF-12
TRANSMITTAL OF EMERGENCY PLAN PROCEDURE CHANGES

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In compliance with 10CFR50 Appendix E(V), South Carolina Electric & Gas Company, acting for itself and as agent for South Carolina Public Service Authority, transmits one controlled copy each of the following Emergency Plan Procedure Changes.

PROCEDURE	REV.	CHG.	TITLE
EPP-002	32	A	Communication and Notification
EPP-104	5	G	Verification of Communications Operability

The effectiveness of the Virgil C. Summer Nuclear Station Radiation Emergency Plan is not decreased by these procedure changes.

Should you have any questions, please contact Mrs. Donna Railey at (803) 345-4107.

Very truly yours,

Melvin N. Browne

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DWR/MNB/dr
Attachments

c: (Without Attachment unless noted)
L. A. Reyes (With 2 Attachments)
NRC Resident Inspector
RTS (RR 6000, O-L-99-0354)
File (810.10-2)
DMS (RC-01-0011)

A045

NUCLEAR EXCELLENCE - A SUMMER TRADITION!

SOUTH CAROLINA ELECTRIC & GAS COMPANY

VIRGIL C. SUMMER NUCLEAR STATION

NUCLEAR OPERATIONS

NUCLEAR OPERATIONS

COPY NO. 157

EMERGENCY PLAN PROCEDURE

EPP-002

COMMUNICATION AND NOTIFICATION

REVISION 32

SAFETY RELATED

L C Hipp
DISCIPLINE SUPERVISOR

8/17/99
DATE

S A Byrne
APPROVAL AUTHORITY

8/26/99
DATE

RECORD OF CHANGES

CHANGE LETTER	TYPE CHANGE	APPROVAL DATE	CANCELLATION DATE	CHANGE LETTER	TYPE CHANGE	APPROVAL DATE	CANCELLATION DATE
A	P	12/19/00					

INFORMATION USE

Procedure May Be Performed From Memory.
User Retains Accountability For Proper Performance.

NUCLEAR OPERATIONS
COPY NO. 157

SAP-139
ATTACHMENT III
PAGE 1 OF 3
REVISION 19

PROCEDURE DEVELOPMENT FORM - A

I. DATE: 10-13-00 PROC.# EPP-007 REV. # 32 CHG. A COMM. # _____
TITLE: Communication and Notification

NEW PROC ___ CHANGE ✓ PERMANENT ✓ SAFETY RELATED ✓
REVISION ___ RESTRICTED ___ FROM _____ TO _____ QUALITY RELATED ___
NON-SAFETY RELATED ___

II. **DESCRIPTION:**
See Attached

REASON FOR CHANGE:
See Attached

R.J. Schwartz / R.J. Schwartz
Originator Sign/Print

III. **WILL THIS REVISION/CHANGE/NEW PROCEDURE:**

	*YES	NO	N/A
1. Result in significant increased personnel radiation exposure? (ALARA review)	___	✓	
2. Result in a release of effluents to the Environment?	___	✓	
3. Degrade the effectiveness of the Radiation Emergency Plan?	___	✓	
4. Degrade the safeguards effectiveness of the Physical Security, Safeguards Contingency of Training and Qualification Plans?	___	___	✓

* **If any question 1 through 4 is answered "YES", refer to appropriate section of procedure for direction**

Required Reviews: Check ALL selections in first 3 columns for SAPs

								Other Reviews:
( ) MCHS	( ) MNL&OE	( ) MPLE	( ) GMES	( ) CWPS	( ) ISEG	( ) NOET	( ) QC	XGMNSS
( ) MDE	( ) MNPS	( ) MPSE	( ) GMNPO	( ) DE	( ) MNTS	XNPS	XQR	XQA
( ) MHPS	( ) MNT	( ) MSPD	( ) GMNSS	( ) FFD	( ) MQS	( ) NTET	( ) RC	X M. McKinney
( ) MMPR	( ) MOPS	( ) SAS	( ) GMSPD	XHPS	( ) MPR	XOPS	( ) RE	( ) _____
( ) MMS	( ) MP&S	( ) QA	( ) CHS	( ) ISD	( ) NL&OE	( ) PSE	( ) TU	( )

Discipline Supervisor
10/14/00
Date

IV. **10CFR50.59 SCREENING REVIEW/SAFETY EVALUATION**
☐ REQUIRED ☒ EXEMPT ☐ PSRC SUPPORTING DOCUMENT: 10CFR50.59
Discipline Supervisor Concurrence

V. **TEMPORARY APPROVAL:**
QUALIFIED REVIEWER _____ DATE _____
TELECON BY _____
SHIFT SUPERVISOR _____ DATE _____

QA REVIEW _____ DATE _____
TELECON BY _____
FINAL APPROVAL REQUIRED BY: DATE _____

VI. **DISCIPLINE SUPERVISOR FINAL REVIEW:**
PSRC REVIEW PRIOR TO IMPLEMENTATION? YES ___ NO ✓
TRAINING REQUIRED? YES ✓ NO ___
IF YES, PRIOR TO PROCEDURE IMPLEMENTATION? YES ___ NO ✓
P/CAP AFFECTED? YES ___ NO ✓
COMMENTS RESOLVED: Victor 12/14/00
Discipline Supervisor Date

VII. **P/CAP ACCEPTABLE?**
C. YES ___ NO ___ N/A / _____
NL&QE Date
N. YES ___ NO ___ N/A / _____
RESP. MGR. Date

VIII. **FINAL QA REVIEW (As Applicable)**
N/A / _____
QA Concurrence Date

IX. **APPROVAL AUTHORITY:**
N/A / _____
Training Completed Date
D.C. Williams 12/19/00
Procedure Approval/Concurrence Date

X. **PSRC REVIEW:**
A. REVIEWED BY:
_____ / _____
PSRC Chairman Date
COMMENTS: YES ___ NO ___

B. PSRC COMMENTS RESOLVED:
_____ / _____
Responsible Manager Date
_____ / _____
PSRC Chairman Date

EPP-002, Communication and Notification
Revision 32 Change A
Addendum to PDF-A, Section II
Description and Reason for Changes

Description: Revised Section 4.2 and Section 5.1.5.C to remove FTS 2000 telephone system.
Reason for Change: The NRC will discontinue use of the Federal Government's dedicated FTS 2000 long distance service as described in the NRC Regulatory Issue (RIS) 2000-11, on or about November 22, 2000.

Description: Revised Section 4.5 and 5.4.4 to delete the Forward Emergency Operations Center (FEOC).
Reason for Change: South Carolina has discontinued use of the facility and removed reference to the FEOC from their plans as specified in a letter from Mr. Ron Osborne with the SC Emergency Preparedness Division to Vic Kelley dated August 21, 2000.

Description: Deleted previous Section 4.5.1 and 5.4.3 which described notifying the State Warning Point until the State Emergency Operations Center (SEOC) is established.
Reason for Change: The SEOC is now the primary warning point for non-law enforcement emergencies. The previous State Warning Point, operated by the Highway Patrol, now serves as a backup warning point.

Description: Deleted previous Section 4.5.4 which stated that continuous communications to the NRC must be maintained for emergency classifications above a Notification of Unusual Event.
Reason for Change:
This is already stated in Section 4.1.2.

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ATTACHMENTS

ATTACHMENT I - Emergency Notification

ATTACHMENT II - Initial Notification

ATTACHMENT IIIA - NRC One Hour Notification/Event Notification Worksheet

ATTACHMENT IIIB - ANI Notification

ATTACHMENT IV - Followup Notification

ATTACHMENT V - Emergency Communications Log Sheet

1.0 PURPOSE

1.1 The purpose of this procedure is to delineate the specific notification requirements for each class of emergency and to provide a method for making these notifications.

2.0 REFERENCES

2.1 Virgil C. Summer Nuclear Station Radiation Emergency Plan.

2.2 NUREG-0654, Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants.

2.3 Emergency Planning Telephone Directory.

2.4 INPO 86-032, Emergency Resources Manual.

2.5 DCP-101, Document Control.

2.6 EPP-001, Activation and Implementation of the Emergency Plan.

2.7 EPP-021, Activation of the Early Warning Siren System (EWSS).

2.8 SAP-1131, Electronic Processing of Condition Evaluation Reports.

3.0 DEFINITIONS

3.1 Definitions

3.1.1 Initial Notification - A message to designated organization(s) or person(s) following a change of plant status from normal operations to any of the four emergency classifications or a change of plant status to a higher emergency classification or a change of plant status which leads to termination of the emergency classifications.

3.1.2 Followup Notification - A message sent to designated organization(s) or person(s) updating the initial notification or previous notification.

3.1.3 Emergency Planning Telephone Directory - A list of essential and non-essential support personnel, agencies, organizations and their telephone numbers. The Directory shall have controlled distribution in accordance with DCP-101, Document Control. The Directory shall be updated as necessary by the Emergency Services Unit (ESU), or at least quarterly.

3.1.4 Emergency Response Data System (ERDS) - A computerized system used to provide the Nuclear Regulatory Commission with direct real-time data of selected plant parameters and site environmental data at V. C. Summer Nuclear Station.

3.1.5 VCS Emergency Information System (EIS) - A computerized system used to record, transfer and display data generated during an emergency.

4.0 CONDITIONS AND PREREQUISITES

4.1 The Initial Notification time requirements are as follows:

4.1.1 State and local governments shall be notified within 15 minutes of declaration of the emergency classifications.

4.1.2 The Nuclear Regulatory Commission (NRC) Operations Center shall be notified immediately after notification of the State and local governments, and no later than one hour after declaration of the emergency classification, using the NRC One Hour Notification Form (Attachment IIIA) found in the Emergency Planning (EP) Tool Box. During an Alert, Site Area Emergency and General Emergency, an open line will be maintained with the NRC using the Emergency Notification System (ENS) phone.

4.1.3 American Nuclear Insurers (ANI) shall be notified:

A. Within one working day of a Notification of Unusual Event (NUE).

C04→ B. As soon as possible after the State and local governments and the NRC are notified following declaration of an Alert, Site Area Emergency, or General Emergency, using Attachment IIIB.

4.1.4 Other Initial Notifications to personnel or agencies shall be done using Attachment II, Initial Notification, as applicable.

4.2 Telephone Systems Used for Notifications

4.2.1 Emergency Notifications to the State and local governments will be faxed using the EIS and verified using the ESSX telephone system dedicated lines. If EIS is unavailable, notifications will be made manually using the ESSX phone and then faxing the Emergency Notification form to the State and counties. If the State and local governments cannot be contacted using the dedicated systems, the Shift Supervisor (SS) or his designee shall attempt contact using normal telephone lines or the fiberoptic system through the Palmetto Center. (Dial 70-0- for long distance and 70-9- for local calls).

4.2.2 Emergency Notifications to the NRC will be made on normal telephone lines. If the NRC cannot be contacted using normal telephone lines, the Shift Supervisor (SS) or his designee shall attempt contact using the fiberoptic system through the Palmetto Center. (Dial 70-0- for long distance and 70-9- for local calls). Chg A

4.2.3 If the NRC and State and local governments cannot be contacted by any of the above methods, the SS shall implement EPP-001, if applicable.

4.3 If an emergency classification change is made in the middle of a notification sequence, the Communicator will terminate that notification sequence and initiate the new notification for current status.

4.4 Followup notifications are required for all emergency classifications except Notification of Unusual Event.

C02→4.5 Followup notifications shall be made to the State and local governments every hour and when conditions change that could affect offsite areas or offsite emergency response. Chg A

4.6 When directed, the Communicators shall request authorization to sound the Early Warning Siren System (EWSS) in accordance with EPP-021, Activation of the Early Warning Siren System (EWSS).

4.7 The Technical Support Center (TSC) Communicators shall be responsible for the request for off-site emergency services, unless otherwise directed by the Emergency Director (ED) or Offsite Emergency Coordinator (OEC).

5.0 PROCEDURE

5.1 Initial Notifications

5.1.1 Upon initial declaration of an emergency classification, the Interim Emergency Director (IED) shall:

A. For an Alert or higher emergency classification inform the Shift Communicator to activate the Pager System Statewide and Local group calls for the utility's Emergency Response Organization(ERO), designating whether the Emergency Operations Facility (EOF) or Backup EOF is to be used.

B. Complete lines 5 through 16 on Attachment I, Emergency Notification, with all the available information. Direct the Shift Communicator to make the initial notification to the State and local governments.

5.1.2 The Shift Communicator shall:

A. Initiate the Initial Notification Form (Attachment II).

C03→ B. If directed by the IED, activate the Pager System Statewide and Local group call for the utility's ERO by:

1. Using the programmed phone behind the SS's desk:

a. Depress the Local Pagers button.

b. Watch the phone number displayed as the phone dials.

c. Listen for the instruction to enter the caller password.

d. Enter the caller password, 707, on the telephone keypad.

e. Listen for the instruction to enter the telephone number.

f. Enter 999-9999-1 for an emergency utilizing the EOF or enter 999-9999-2 for an emergency utilizing the Backup EOF.

g. Hang up the telephone.

h. Repeat steps a. through g. with the Statewide Pager button.

i. Backup the local group call by repeating steps a. through g. with the Local Pagers button.

j. Back up the statewide group call by repeating steps a. through g. with the Statewide Pagers button.

k. Listen for the verification pagers in the SS's office to sound and ensure the correct code is displayed by both pagers.

2. If the programmed telephone behind the SS's desk does not properly activate the pager system:

a. Obtain the envelope from the Control Room Security Key locker containing the telephone numbers for the Local and Statewide pager group calls.

b. On any touch tone telephone, enter the telephone number for the Local Pager group call.

c. Listen for the instruction to enter the caller password.

d. Enter the caller password, 707, on the telephone keypad.

e. Listen for the instruction to enter the telephone number.

f. Enter 999-9999-1 for an emergency utilizing the EOF, or enter 999-9999-2 for an emergency utilizing the Backup EOF.

g. Hang up the telephone.

h. On any touch-tone telephone, enter the telephone number for the Statewide Pager group call.

i. Repeat steps c. through g.

j. Repeat steps b. through g. to repeat the Local Pager group call.

k. Repeat steps h. through i. to repeat the Statewide Pager group call.

l. Listen for the verification pagers in the SS's office to sound and ensure the correct code is displayed by both pagers.

3. If the pager system fails to activate the Local or Statewide pagers with the correct code displayed on the pagers:

a. Obtain the Call Tree from either the Shift Supervisor's Company Mail and Telephone Directory or the EP Tool Box in the SS's office.

b. Follow the instructions on the Call Tree form to call in both the Onsite and Offsite EROs.

NOTE 5.1.3

The Emergency Preparedness Division may change notification points dependent upon conditions. Follow their direction and document the changes.

5.1.3 If EIS is unavailable, the Communicator shall notify the State and County Governments as follows:

A. Complete Lines 1-4 and the Message Number on Attachment I Emergency Notification Form. Ensure Lines 5 through 16 are complete and the information is legible.

B. Pick up the handset on the ESSX phone and dial the ESSX Code for the desired call group. ESSX Codes are listed in the Emergency Planning Telephone Directory.

NOTE 5.1.3.C

If all parties do not respond within approximately 30 seconds, attempt to contact the non-responding party(ies) using the individual ESSX Code, or the alternate telephone number, as soon as the initial message is complete.

C. Instruct the answering parties to "Stand By" until all parties are on the line.

D. Sign off responding parties on Attachment II, Initial Notification, as applicable.

E. Read information from Attachment I, Emergency Notification, slowly and concisely.

F. Ask the State Warning Point if they would like to authenticate this transmission. If so, follow guidance on Attachment I, page 2 of 3.

G. Telecopy Attachment I, Emergency Notification, to the State and local government agencies to ensure the information is correct, as follows:

1. Place the copy face down on the Fax machine.

2. Press the "Initial Notific." button.

3. Press the START button.

4. Verify that the form was sent to each location by an "OK" in the Status Column of the Fax report issued by the Fax machine.

NOTE 5.1.3.G.

The Emergency Planning Telephone Directory lists alternates for various personnel. These notifications are to be made in numerical sequence, as indicated, and will be considered complete upon successful notification of one of the listed.

H. Continue making notifications following Attachment II, Initial Notification, as applicable.

I. Notify the IED/ED or OEC when the notifications are complete.

J. The Shift Communicator may be relieved, or supplemented, at any point in this procedure by the Technical Support Center (TSC) or Emergency Operations Facility (EOF) Communicators.

5.1.4 If EIS is available, the Communicator will verify receipt of the faxed Emergency Notification Form within 15 minutes of the declaration of the event as follows:

A. Pick up the handset on the ESSX phone and dial the ESSX code for the desired call group. ESSX codes are listed in the Emergency Planning Telephone Directory.

Note 5.1.4 B

If all parties do not respond within approximately 30 seconds, verify receipt with parties on the line and attempt to call non-responding parties individually.

B. Instruct the answering parties to "Stand By" until all parties are on the line.

C. Sign off responding parties on Attachment II, Initial Notification, as applicable.

D. Ask responding parties if they received a legible Form. Read the Emergency Notification Form to them and ask if they have any questions concerning the form. If a legible fax was not received by any party, manually fax the Form to them.

E. Ask the State Warning Point if they would like to authenticate this transmission. If so, follow guidance on Attachment I, page 2 of 3.

5.1.5 The NRC shall be notified as follows:

A. The IED shall complete the Event Notification Worksheet of Attachment III, NRC One Hour Notification. Ensure the worksheet is complete and the information is legible.

B. The Communicator shall then review the worksheet and complete the caller's signature on page 1 of Attachment IIIA.

C. Using the ENS telephone, dial the telephone number on the orange sticker located on the phone. Chg A

D. Read the information on the worksheet slowly and concisely.

E. Notify the IED/ED or OEC when the notification is complete.

5.2 Notifications for Change in Emergency Classification

5.2.1 Upon escalation to a higher emergency classification, the Communicator will, upon direction from the IED/ED or OEC, implement notifications in accordance with Attachment II, Initial Notification, which corresponds to the higher emergency classification.

5.2.2 When the emergency classification is downgraded or terminated, the Communicator will, upon direction from the IED/ED or OEC, implement notifications in accordance with Attachment II, Initial Notification.

5.3 Offsite Emergency Services

5.3.1 Upon direction from the IED/ED, the Shift/TSC Communicator will implement the requested notification(s). Give the following information:

This is the V. C. Summer Nuclear Station. This is a drill/not a drill. We request fire fighting/emergency medical assistance at the V. C. Summer Nuclear Station.

5.3.2 Upon direction from the IED/ED or OEC, the Communicator will contact other utilities for assistance using the Institute of Nuclear Power Operations (INPO) Emergency Resource Manual, Reference 2.4, available in both the TSC and the EOF storage cabinets.

5.4 Followup Notifications

5.4.1 The Communicator(s) will implement followup notifications. The information in Attachment I is to be given to the personnel/agencies as listed in Attachment IV.

NOTE 5.4.2

Prior to the EOF Communicator assuming responsibilities for notification, that person shall receive a turnover briefing from the Shift/TSC Communicator(s). All transfers of notification responsibilities shall be documented.

5.4.2 Followup notifications will be made to the State and local governments by the Shift/TSC Communicator(s) following the instruction in Steps 5.1.3 or 5.1.4 until the EOF is activated and assumes offsite notification responsibilities. Thereafter, the Shift/TSC Communicator will transmit applicable updated information to the EOF as it becomes available. Chg A

5.5 TSC/OSC/EOF Communications

5.5.1 The TSC, OSC, EOF and Backup EOF Emergency Telephone Lists are provided in the Emergency Planning Telephone Directory.

5.5.2 Complete layouts of the TSC, OSC, EOF, and the Backup EOF are detailed in the Emergency Planning Telephone Directory.

5.6 Communications not logged on Notification Forms (Attachments II, IIIA, IIIB,) should be logged on Attachment V, Emergency Communications Log Sheet, by TSC/EOF Communicators. This form may be used by any of the Emergency Response Personnel to log telephone communications.

5.7 Emergency Response Data System (ERDS) Activation

5.7.1 The ERDS must be activated as soon as possible, but not greater than one hour from the declaration of an Alert or higher emergency classification.

5.7.2 The ERDS may be activated by the licensee during emergency drills or exercises.

5.7.3 The ERDS will normally be activated by the NRC Communicator in the TSC from any Satellite Display System (SDS) computer terminal by performing the following.

A. Type ERDS and press ENTER.

B. A history of up to fifteen messages will be displayed along with indication of either ACTIVATED or DEACTIVATED.

C. Activate the ERDS by:

1. Depressing the F2 key on the keypad.

2. The operator will be prompted for the ERDS password.

3. Enter the ERDS password, ERDSSSS and press ENTER.

4. Wait for an approximately two minute time delay for the ERDS computer to activate. This time is to allow the ERDS computer to establish a link with the NRC.

5. If the ERDS is not transferring data to the NRC within five minutes, an "NRC ERROR" condition will be displayed.

6. If the ERDS is activated and a red "NRC ERROR" is displayed, wait 5 additional minutes during which time the computer will repetitively attempt to establish the link with the NRC.

7. If the ERDS computer fails to establish a link with the NRC Computer and the "NRC ERROR" message persists, notify the NRC via the ENS telephone.

8. Any time the ERDS displays a VS1 ERROR, notify the VCS Information Systems Department Generations Systems Group as listed on the duty roster.

D. To deactivate the ERDS, perform the following:

1. Depress the F2 key on the keypad.

2. Enter the ERDS password, ERDSSSS and press ENTER.

6.0 RECORDS

6.1 Forward written material or legible copies of written material generated because of an emergency to the ESU. The ESU will insure appropriate written material is included in the applicable Condition Evaluation Report.

7.0 REVISION SUMMARY

7.1 Incorporated Change A through F.

7.2 Clarified 5.1.1.A by specifying the Pager System is activated at an Alert or higher classification.

7.3 Deleted actions associated with EIS in 5.1.1.B. to conform to actual practice.

7.4 Changed 5.7.3 from the EP Representative activating ERDS to the NRC Communicator in order to make more effective use of resources.

7.5 Added the ERDS password to 5.7.3.C. and 5.7.3.D to make the procedure more user friendly.

7.6 Changed the NRC Form 361 in Attachment IIIA to be a sample so the procedure does not have to be changed if the NRC changes their form.

EMERGENCY NOTIFICATION

1. [A] THIS IS A DRILL [B] ACTUAL EMERGENCY [ ] INITIAL [ ] FOLLOW-UP* MESSAGE NUMBER _____

2. SITE: V. C. SUMMER UNIT: 1 REPORTED BY: _____

3. TRANSMITTAL TIME / DATE: _____ / _____ / _____ / _____ CONFIRMATION PHONE NUMBER: _____
(Eastern) mm dd yy

4. AUTHENTICATION (If Required): _____ _____
(Number) (Codeword)

5. EMERGENCY CLASSIFICATION:
[A] NOTIFICATION OF UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

6. [A] Emergency Declaration At: [B] Termination At: TIME / DATE: _____ / _____ / _____ / _____ (If B, go to item 16.)
(Eastern) mm dd yy

7. EMERGENCY DESCRIPTION/REMARKS: _____

8. PLANT CONDITION: [A] IMPROVING [B] STABLE [C] DEGRADING

9. REACTOR STATUS: [A] SHUTDOWN TIME / DATE _____ / _____ / _____ / _____ [B] _____% POWER
(Eastern) mm dd yy

10. EMERGENCY RELEASE(S):
[A] NONE (Go to item 14.) [B] POTENTIAL (Go to item 14.) [C] IS OCCURRING [D] HAS OCCURRED

11. **TYPE OF RELEASE: [ ] ELEVATED [X] GROUND LEVEL

[A] AIRBORNE Started: _____ / _____ / _____ / _____ Stopped: _____ / _____ / _____ / _____
Time (Eastern) mm dd yy Time (Eastern) mm dd yy

[B] LIQUID: Started _____ / _____ / _____ / _____ Stopped: _____ / _____ / _____ / _____
Time (Eastern) mm dd yy Time (Eastern) mm dd yy

12: **RELEASE MAGNITUDE: [ ] CURIES PER SEC. [ ] CURIES NORMAL OPERATING LIMITS: [ ] BELOW [ ] ABOVE

[A] NOBLE GASES _____ [B] IODINES _____

[C] PARTICULATES _____ [D] OTHER _____

13. **ESTIMATE OF PROJECTED OFFSITE DOSE: [ ] NEW [ ] UNCHANGED

	TEDE mrem	Thyroid CDE mrem
SITE BOUNDARY		
2 MILES		
5 MILES		
10 MILES		

PROJECTION TIME _____

ESTIMATED DURATION _____ Hrs.

14. **METEOROLOGICAL DATA: [A] WIND DIRECTION (from) _____ ° [B] SPEED (mph) _____
[C] STABILITY CLASS _____ [D] PRECIPITATION (type) _____

15. RECOMMENDED PROTECTIVE ACTIONS
[A] NO RECOMMENDED PROTECTIVE ACTIONS
[B] EVACUATE ZONES _____
[C] SHELTER IN-PLACE ZONES _____
[D] OTHER _____

16. APPROVED BY: _____ _____ TIME / DATE _____ / _____ / _____ / _____
(Name) (Title) (Eastern) mm dd yy

* If items 8-14 have not changed, only items 1-7 and 15-16 are required to be completed.
** Information may not be available on initial notifications.

AUTHENTICATION PROCEDURE

1. This Authentication Code List is for use with Warning Messages of nuclear incidents/accidents.

2. To use the code, the person receiving the message randomly selects a number and instructs the person sending the message to: "Authenticate number (and states the number selected from the attached code list)." For instance, from the sample code list below, a message could be authenticated as follows:

   A. Person receiving the message: "Authentication number 100".

   B. Person sending the message: "I authenticate number 100 as Nimbus".

Authentication Code List

1. Explorer
2. Gemini
3. Voyager
4. Viking
5. Fuel
6. Challenger
7. Atlas
8. Apollo
9. Thor
10. Navajo
11. Mercury
12. Nike
13. Galaxy
14. Satellite
15. Agena
16. Centaur
17. Titan
18. Pegasus
19. Jupiter
20. Bomarc
21. Mace
22. Trident
23. Peacekeeper
24. Minuteman
25. Oxydizer
26. Penguin
27. Delta
28. Chevaline
29. Juno
30. Pershing
31. Skybolt
32. Vanguard
33. Malabar
34. Saturn
35. Bumper
36. Lark
37. Sunnyvale
38. Rascal
39. Corporal
40. Polaris
41. Spacecraft
42. Snark
43. Ranger
44. Tiros
45. Echo
46. Vela
47. Surveyor
48. Syncom
49. Mariner
50. Pioneer
51. Launch
52. Orbiter
53. NASA
54. Mariner
55. Westar
56. Skylab
57. Booster
58. Palapa
59. Marisat
60. Payload
61. Columbia
62. Matador
63. Ariane
64. Atlantis
65. Discovery
66. Galileo
67. Telstar
68. Athena
69. Starbird
70. Shuttle
71. Endeavor
72. Antigua
73. Ascension
74. Redstone
75. Andros
76. Sentinel
77. Poseidon
78. Kourou
79. Vandenburg
80. Cape Canaveral
81. Dynasoar
82. Satcom
83. Intelsat
84. Harpoon
85. Hound Dog
86. Tomahawk
87. Lacrosse
88. Spacelab
89. Navstar
90. Megellan
91. Cassini
92. Hubble
93. Skynet
94. Ulysses
95. Rollback
96. Umbilical
97. ARIA
98. Comstar
99. Castor
100. Nimbus
101. Landsat
102. Soyuz
103. Mir
104. Sputnik
105. Astronaut
106. Cosmonaut
107. Aerobee
108. Gantry
109. Blockhouse
110. Telemetry
111. Antenna
112. Aurora
113. Crawler
114. Shroud
115. Dryden
116. White Sands
117. Lockheed
118. Boeing
119. Blue Scout
120. GEMS
121. Star Cast
122. Solar
123. Goddard
124. Bermuda
125. Bahama
126. Analog
127. Digital
128. Honeywell
129. Raytheon
130. Acquisition

INITIAL NOTIFICATION

MESSAGE #_____

NOTIFICATION OF UNUSUAL EVENT | ALERT | SITE AREA EMERGENCY | GENERAL EMERGENCY

ACTIVATE PAGER SYSTEMS FOR ALERT, SITE AREA EMERGENCY OR GENERAL EMERGENCY — TIME _____

		Person Contacted	Time	Caller Initials
	(within 15 min. of declaration)			
1.	State Warning Point			
2.	Fairfield County			
3.	Newberry County			
4.	Richland County			
5.	Lexington County			

6. NRC (as soon as possible, but not more than one hour from time of event) See Attachment IIIA _____ _____

7. Off-Site Emergency Coordinator (contact one person)
_____
Person notified _____ _____

8. Media Coordinator (contact one person)
_____
Person notified _____ _____

9. Fairfield Pump Storage (Notify to evacuate Facility at Site Area and General Emergency) _____ _____

**10. INPO (No Time Limit) _____ _____

**11. ANI (See Attachment III.B) _____ _____

INITIAL NOTIFICATIONS COMPLETE: _____ (SIGNATURE) _____ (DATE) _____ (TIME)

NOTIFICATION OF TERMINATION COMPLETE: _____ (SIGNATURE) _____ (DATE) _____ (TIME)

**For NUE - Emergency Services Unit will make notification within one working day.

Comments:

NRC ONE HOUR NOTIFICATION

The NRC shall be notified as soon as possible but no later than 1 hour after declaration of the emergency, using pages 2 through 3 of this attachment.

1. Notify one of the following NRC Offices: (Begin with a.)

   a. NRC Operations Center via dedicated ENS line

   b. NRC Operations Center via normal land line

   c. NRC Region II in Atlanta via normal land line

Person Contacted	Date	Time

Caller's Signature	Date	Time

Comments:

NRC FORM 361 (3-90)

U.S. NUCLEAR REGULATORY COMMISSION
OPERATIONS CENTER

EVENT NOTIFICATION WORKSHEET

NOTIFICATION TIME	FACILITY OR ORGANIZATION	UNIT	CALLER'S NAME	CALL BACK #: ENS _____ or ( ) _____ - _____

EVENT TIME & ZONE	EVENT DATE
	/ /
POWER/MODE BEFORE	POWER/MODE AFTER

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)	O???
	TRANSPORTATION	NTRA
	MATERIAL/EXPOSURE	B???/E???/F???
	FITNESS FOR DUTY	HFIT
	OTHER	X????/C???/G???

1-Hr Non-Emergency 10 CFR 50.72(b)(1)

(i)(A)	TS Required S/D	ASHU
(i)(B)	TS Deviation	ADEV
(ii)	Degraded Condition	ADEG
(ii)(A)	Unanalyzed Condition	AUNA
(ii)(B)	Outside Design Basis	AOUT
(ii)(C)	Not Covered by OPs/EPs	ACNC
(iii)	Earthquake	ANEA
(iii)	Flood	ANFL
(iii)	Hurricane	ANHU
(iii)	Ice/Hail	ANIC
(iii)	Lightning	ANLI
(iii)	Tornado	ANTO
(iii)	Oth Natural Phenomenon	ANOT
(iv)	ECCS Discharge to RCS	ACCS
(v)	Lost ENS	AENS
(v)	Lost Other Assessment/Comms	AARC
(v)	Emergency Siren INOP	AESS
(vi)	Fire	AFIR
(vi)	Toxic Gas	ACHE
(vi)	Rad Release	ARAD
(vi)	Oth Hampering Safe Op.	AHIN

4-Hr Non-Emergency 10 CFR 50.72(b)(2)

(i)	Degrade While S/D	ADAS
(ii)	RPS Actuation (scram)	ARPS
(ii)	ESF Actuation	AESF
(iii)(A)	Safe S/D Capability	AINA
(iii)(B)	RHR Capability	AINB
(iii)(C)	Control of Rad Release	AINC
(iii)(D)	Accident Mitigation	AIND
(iv)(A)	Air Release > 2X App B	AAIR
(iv)(B)	Liq Release > 2X App B	ALIQ
(v)	Offsite Medical	AMED
(vi)	Offsite Notification	APRE

DESCRIPTION

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

SAMPLE

NOTIFICATIONS	YES	NO	WILL BE
NRC RESIDENT			
STATE(s)			
LOCAL			
OTHER GOV AGENCIES			
MEDIA/PRESS RELEASE			

ANYTHING UNUSUAL OR NOT UNDERSTOOD?	YES *(Explain above)*	NO
DID ALL SYSTEMS FUNCTION AS REQUIRED?	YES	NO *(Explain above)*

MODE OF OPERATION UNTIL CORRECTED:	ESTIMATED RESTART DATE:	ADDITIONAL INFO ON BACK? ☐ YES ☐ NO

NRC Form 361 (3-95) ADDITIONAL INFORMATION USNRC OPERATIONS CENTER

RADIOLOGICAL RELEASES: CHECK OR FILL IN APPLICABLE ITEMS *(specific details/explanations should be covered in event 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 path 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)*

ANI NOTIFICATION

C04→American Nuclear Insurers (ANI) is to be notified as soon as possible after State and local governments and the NRC are notified following the declaration of an Alert, Site Area Emergency, or General Emergency. Provide information that is on the most recent Emergency Notification Form. If the initial call to ANI is received by an answering service, leave the name and number of a knowledgable person, such as the Lead Communicator, that the ANI representative may use to call back.

Person Contacted _____ Time _____ Date _____

Caller's Signature _____

Comments:

FOLLOWUP NOTIFICATION

MESSAGE #_____

	Agency	Person Contacted	Time	Caller's Initials
1.	State Warning Point	_____	_____	_____
2.	Fairfield County	_____	_____	_____
3.	Newberry County	_____	_____	_____
4.	Richland County	_____	_____	_____
5.	Lexington County	_____	_____	_____
	SEOC, when staffed	_____	_____	_____
	FEOC, when staffed	_____	_____	_____

Notifications complete: _____ _____
Caller's Signature Date

Comments:

EMERGENCY COMMUNICATIONS LOG SHEET

DATE:	TIME:	CIRCLE ONE:	INCOMING	OUTGOING
TO/FROM:				
MESSAGE:				
RECEIVED BY:				

DATE:	TIME:	CIRCLE ONE:	INCOMING	OUTGOING
TO/FROM:				
MESSAGE:				
RECEIVED BY:				

DATE:	TIME:	CIRCLE ONE:	INCOMING	OUTGOING
TO/FROM:				
MESSAGE:				
RECEIVED BY:				

SOUTH CAROLINA ELECTRIC & GAS COMPANY

VIRGIL C. SUMMER NUCLEAR STATION

NUCLEAR OPERATIONS

NUCLEAR OPERATIONS

COPY NO. 157

EMERGENCY PLAN PROCEDURE

EPP-104

VERIFICATION OF COMMUNICATIONS OPERABILITY

REVISION 5

DISCIPLINE SUPERVISOR — DATE 5/1/97

APPROVAL AUTHORITY — DATE 5/1/97

RECORD OF CHANGES

CHANGE LETTER	TYPE CHANGE	APPROVAL DATE	CANCELLATION DATE	CHANGE LETTER	TYPE CHANGE	APPROVAL DATE	CANCELLATION DATE
A	P	09-09-97		E	P	06-05-00	
B	P	09-22-97		F	P	9-26-00	
C	P	11-04-98		G	P	12/19/00	
D	P	12-29-98					

INFORMATION USE

Procedure may Be Performed From Memory.
User Retains Accountability For Proper Performance.

NUCLEAR OPERATIONS

COPY NO. 157

SAP-139
ATTACHMENT III
PAGE 1 OF 3
REVISION 19

PROCEDURE DEVELOPMENT FORM - A

I. DATE: 10-23-00 .PROC.# EPP-104 REV. # 5 CHG. G COMM. # _____

TITLE: Verification of Communications Operability

NEW PROC ___ CHANGE ✓ PERMANENT ✓ SAFETY RELATED ___

REVISION ___ RESTRICTED ___ FROM _____ TO _____ QUALITY RELATED ___

NON-SAFETY RELATED ✓

II. **DESCRIPTION:** Deleted Forward Emerg. Ops. Center from Attachment I-A

REASON FOR CHANGE: SC has discontinued use of the facility and removed reference to the FEOC from their plans as specified in a letter from Mr Ron Osborne with SCEPD to Vic Kelley, dated 8-21-00.

R.J. Schwartz / R.J. Schwartz
Originator Sign/Print

III. **WILL THIS REVISION/CHANGE/NEW PROCEDURE:**

	*YES	NO	N/A
1. Result in significant increased personnel radiation exposure? (ALARA review)	___	✓	
2. Result in a release of effluents to the Environment?	___	✓	
3. Degrade the effectiveness of the Radiation Emergency Plan?	___	✓	
4. Degrade the safeguards effectiveness of the Physical Security, Safeguards Contingency of Training and Qualification Plans?	___	___	✓

* **If any question 1 through 4 is answered "YES", refer to appropriate section of procedure for direction**

Required Reviews: Check ALL selections in first 3 columns for SAPs

								Other Reviews:
( ) MCHS	( ) MNL&OE	( ) MPLE	( ) GMES	( ) CWPS	( ) ISEG	( ) NOET	( ) QC	X GMNSS
( ) MDE	( ) MNPS	( ) MPSE	( ) GMNPO	( ) DE	( ) MNTS	X NPS	X QR	X QA
( ) MHPS	( ) MNT	( ) MSPD	( ) GMNSS	( ) FFD	( ) MQS	( ) NTET	( ) RC	( ) _____
( ) MMPR	( ) MOPS	( ) SAS	( ) GMSPD	X HPS	( ) MPR	X OPS	( ) RE	( ) _____
( ) MMS	( ) MP&S	( ) QA	( ) CHS	( ) ISD	( ) NL&OE	( ) PSE	( ) TU	( ) _____

Discipline Supervisor
10/24/00
Date

IV. **10CFR50.59 SCREENING REVIEW/SAFETY EVALUATION**

☐ REQUIRED ☒ EXEMPT ☐ PSRC SUPPORTING DOCUMENT: 10CFR50.54q

Discipline Supervisor Concurrence

V. **TEMPORARY APPROVAL:**

QUALIFIED REVIEWER _____ DATE _____ QA REVIEW _____ DATE _____

TELECON BY _____ TELECON BY _____

SHIFT SUPERVISOR _____ DATE _____ FINAL APPROVAL REQUIRED BY: DATE _____

VI. **DISCIPLINE SUPERVISOR FINAL REVIEW:**

PSRC REVIEW PRIOR TO IMPLEMENTATION? YES___ NO ✓

TRAINING REQUIRED? YES ✓ NO ___

IF YES, PRIOR TO PROCEDURE IMPLEMENTATION? YES___ NO ✓

P/CAP AFFECTED? YES ___ NO X

COMMENTS RESOLVED: 11/15/00
Discipline Supervisor Date

VII. **P/CAP ACCEPTABLE?** N/A

C. YES ___ NO ___ NL&OE / Date

N. YES ___ NO ___ N/A RESP. MGR. / Date

VIII. **FINAL QA REVIEW (As Applicable)**

N/A
QA Concurrence / Date

IX. **APPROVAL AUTHORITY:**

N/A
Training Completed / Date

D.C. Williams 11/19/00
Procedure Approval/Concurrence Date

X. **PSRC REVIEW:**

A. REVIEWED BY:

_____ /
PSRC Chairman Date

COMMENTS: YES ___ NO ___

B. PSRC COMMENTS RESOLVED:

_____ /
Responsible Manager Date

_____ /
PSRC Chairman Date

NUCLEAR OPERATIONS

COPY NO. 157

SAP-139
ATTACHMENT III
PAGE 1 OF 3
REVISION 19

PROCEDURE DEVELOPMENT FORM - A

I. DATE: 07-26-00 PROC.# EPP-104 REV. # 5 CHG. F COMM. # _____

TITLE: Verification of Communications Operability

NEW PROC ___ CHANGE ✓ PERMANENT ✓ SAFETY RELATED ___

REVISION ___ RESTRICTED ___ FROM _____ TO _____ QUALITY RELATED ___

NON-SAFETY RELATED ✓

II. **DESCRIPTION:** Add Note 5.3

REASON FOR CHANGE: Ensure sirens are not disabled for maintenance reasons prior to test.

Leonard Bouknight — Originator — Leonard Bouknight — Sign/Print

III. **WILL THIS REVISION/CHANGE/NEW PROCEDURE:**

		*YES	NO	N/A
1.	Result in significant increased personnel radiation exposure? (ALARA review)	___	✓	
2.	Result in a release of effluents to the Environment?	___	✓	
3.	Degrade the effectiveness of the Radiation Emergency Plan?	___	✓	___
4.	Degrade the safeguards effectiveness of the Physical Security, Safeguards Contingency of Training and Qualification Plans?	___	___	✓

* **If any question 1 through 4 is answered "YES", refer to appropriate section of procedure for direction**

Required Reviews: Check ALL selections in first 3 columns for SAPs

								Other Reviews:
( ) MCHS	( ) MNL&OE	( ) MPLE	( ) GMES	( ) CWPS	( ) ISEG	( ) NOET	( ) QC	( ) _____
( ) MDE	( ) MNPS	( ) MPSE	( ) GMNPO	( ) DE	( ) MNTS	(✓) NPS	(✓) QR	( ) _____
( ) MHPS	( ) MNT	( ) MSPD	(✓) GMNSS	( ) FFD	( ) MQS	( ) NTET	( ) RC	( ) _____
( ) MMPR	( ) MOPS	( ) SAS	( ) GMSPD	(✓) HPS	( ) MPR	(✓) OPS	( ) RE	( ) _____
( ) MMS	( ) MP&S	( ) QA	( ) CHS	( ) ISD	( ) NL&OE	( ) PSE	( ) TU	( ) _____

Discipline Supervisor

8/29/00 — Date

IV. **10CFR50.59 SCREENING REVIEW/SAFETY EVALUATION**

☐ REQUIRED ☒ EXEMPT ☐ PSRC SUPPORTING DOCUMENT: 50.59Q

Discipline Supervisor Concurrence

V. **TEMPORARY APPROVAL:**

QUALIFIED REVIEWER _____ DATE _____ QA REVIEW _____ DATE _____

TELECON BY _____ TELECON BY _____

SHIFT SUPERVISOR _____ DATE _____ FINAL APPROVAL REQUIRED BY: DATE _____

VI. **DISCIPLINE SUPERVISOR FINAL REVIEW:**

PSRC REVIEW PRIOR TO IMPLEMENTATION? YES ___ NO ✓

TRAINING REQUIRED? YES ___ NO ✓

IF YES, PRIOR TO PROCEDURE IMPLEMENTATION? YES ___ NO ___

P/CAP AFFECTED? YES ___ NO ✓

COMMENTS RESOLVED: Discipline Supervisor — 9/14/00 Date

VII. **P/CAP ACCEPTABLE?**

C. YES ___ NO ___ NL&OE / Date

N. YES ___ NO ___ RESP. MGR. / Date

VIII. **FINAL QA REVIEW (As Applicable)**

N/A — QA Concurrence / Date

IX. **APPROVAL AUTHORITY:**

N/A — Training Completed / Date

D.E. Williams — Procedure Approval/Concurrence — 9/26/00 Date

X. **PSRC REVIEW:**

A. REVIEWED BY:

PSRC Chairman / Date

COMMENTS: YES ___ NO ___

B. PSRC COMMENTS RESOLVED:

Responsible Manager / Date

PSRC Chairman / Date

NUCLEAR OPERATIONS
COPY NO. 157

PROCEDURE DEVELOPMENT FORM - A

I. DATE: 03/01/00 PROC.# EPP-104 REV.# 5 CHG. E COMM. #
TITLE: Verification of Communications Operability

NEW PROC ___ CHANGE ✓ PERMANENT ✓ SAFETY RELATED ___
REVISION ___ RESTRICTED ___ FROM ___ TO ___ QUALITY RELATED ___
NON-SAFETY RELATED ✓

II. DESCRIPTION: 1) Change step 5.2.7.C and Att. 1-D to read Plant Radiation Alarms.
2) Change ~~3.3.4.L.4.a~~ 3.3.4.L.4.a and 5.3.3.J.10.a to 25 MWR.
3) Delete from Att. 1-B Item # 2.F.2 "LLEA Radio".
REASON FOR CHANGE: 1) Clarify which alarms will be heard during test.
2) To give siren repairs a higher priority MWR.
3) Replaced by new radio channels to Newberry and Fairfield Counties.

Originator: Leonard Bowknight Sign/Print: Leonard Bowknight

III. WILL THIS REVISION/CHANGE/NEW PROCEDURE:

		*YES	NO	N/A
1.	Result in significant increased personnel radiation exposure? (ALARA review)	___	✓	
2.	Result in a release of effluents to the Environment?	___	✓	
3.	Degrade the effectiveness of the Radiation Emergency Plan?	___	✓	___
4.	Degrade the safeguards effectiveness of the Physical Security, Safeguards Contingency of Training and Qualification Plans?	___	✓	___

* If any question 1 through 4 is answered "YES", refer to appropriate section of procedure for direction.

REQUIRED REVIEW AND COMMENT:

( ) MOPS	( ) MHPS	( ) GMNPO	( ) QA	( ) TU	( ) ISD	( )
( ) MMS	( ) MDE	( ) GMES	( ) QC	( ) CHS	( ) RC	( )
( ) MQS	( ) MNT	(✓) GMNSS	( ) SAS	(✓) RPS	( )	( )
( ) MPSE	( ) MNL&OE	( ) GMSPD	(✓) MNTS	( ) PSE	( )	( )
( ) MCHS	( ) MNPS	(✓) OPS	(✓) NPS	( ) DE	( )	( )

REQUESTED REVIEWS:

Discipline Supervisor 3/7/00 Date

IV. 10CFR50.59 SCREENING REVIEW/SAFETY EVALUATION
☐ REQUIRED ☒ EXEMPT ☐ PSRC SUPPORTING DOCUMENT: ___
Discipline Supervisor Concurrence

V. TEMPORARY APPROVAL:
QUALIFIED REVIEWER ___ DATE ___ NA QA REVIEW ___ DATE ___
TELECON BY ___ TELECON BY ___
SHIFT SUPERVISOR ___ DATE ___ FINAL APPROVAL REQUIRED BY: DATE ___

VI. DISCIPLINE SUPERVISOR FINAL REVIEW:
PSRC REVIEW PRIOR TO IMPLEMENTATION? YES ___ NO ✓
TRAINING REQUIRED? YES ___ NO ✓
IF YES, PRIOR TO PROCEDURE IMPLEMENTATION? YES ___ NO ___
P/CAP AFFECTED? YES ___ NO ✓
COMMENTS RESOLVED: 5-9-00
Discipline Supervisor Date

VII. P/CAP ACCEPTABLE?
C. YES ___ NO ___ N/A / N/A / Date
N&GE
N. YES ___ NO ___ / / Date
RESP. MGR.

VIII. FINAL QA REVIEW (As Applicable)
NA / Date
QA Concurrence

IX. APPROVAL AUTHORITY:
N/A / Date
Training Completed
B C Williams 6/5/2000
Procedure Approval/Concurrence Date

X. PSRC REVIEW:
A. REVIEWED BY:
___ / Date
PSRC Chairman
COMMENTS: YES ___ NO ___

B. PSRC COMMENTS RESOLVED:
___ / Date
Responsible Manager
___ / Date
PSRC Chairman

NUCLEAR OPERATIONS
COPY NO. ___ 157

PROCEDURE DEVELOPMENT FORM - A

I. DATE: 11-30-98 PROC.# EPP-104 REV.# 5 CHG. D COMM.# _____
TITLE: Verification of Communications Operability

NEW PROC ___ CHANGE ✓ PERMANENT ✓ SAFETY RELATED ___
REVISION ___ RESTRICTED ___ FROM _____ TO _____ QUALITY RELATED ___
NON-SAFETY RELATED ✓

II. DESCRIPTION: ① Change Ref 2.8 from EPP-001 to NL-122 ② Sections 5.3.1.I.1, 5.3.2.F.1 and 5.3.3.K.1 changed EPP-001 to NL-122.

REASON FOR CHANGE: There is no longer an EAL in EPP-001 associated with EWSS operability. EWSS inoperability requires a 1 hr report to the NRC in accordance with NL-122.

R.J. Schwartz — RJSchwartz
Originator Sign/Print

III. WILL THIS REVISION/CHANGE/NEW PROCEDURE:

	*YES	NO	N/A
1. Result in significant increased personnel radiation exposure? (ALARA review)	___	✓	
2. Result in a release of effluents to the Environment?	___	✓	
3. Degrade the effectiveness of the Radiation Emergency Plan?	___	✓	
4. Degrade the safeguards effectiveness of the Physical Security, Safeguards Contingency of Training and Qualification Plans?	___	___	✓

* If any question 1 through 4 is answered "YES", refer to appropriate section of procedure for direction.

REQUIRED REVIEW AND COMMENT:
() MOPS () MHPS () GMNPO () QA () TU () ISD
() MMS () MDE () GMES () QC () CHS () RC
() MQS () MNT () GMNSS () SAS (X) HPS (X) Counk ()
() MPSE () MNL&OE () GMSPD () MNTS () PSE ()
() MCHS () MNPS (X) OPS (X) NPS () DE ()

REQUESTED REVIEWS: (X) QA (X) GMNSS

Discipline Supervisor — 11/30/98 Date

IV. 10CFR50.59 SCREENING REVIEW/SAFETY EVALUATION
☐ REQUIRED ☒ EXEMPT ☐ PSRC SUPPORTING DOCUMENT: 10 CFR 50.54q
Discipline Supervisor Concurrence

V. TEMPORARY APPROVAL:
QUALIFIED REVIEWER _____ DATE _____
TELECON BY _____
SHIFT SUPERVISOR _____ DATE _____

QA REVIEW _____ DATE _____
TELECON BY _____
FINAL APPROVAL REQUIRED BY: DATE _____

VI. DISCIPLINE SUPERVISOR FINAL REVIEW:
PSRC REVIEW PRIOR TO IMPLEMENTATION? YES ___ NO ✓
TRAINING REQUIRED? YES ___ NO ✓
IF YES, PRIOR TO PROCEDURE IMPLEMENTATION? YES ___ NO ___
P/CAP AFFECTED? YES ___ NO ✓
COMMENTS RESOLVED: RJSchwartz for V.J. Kelley / 12-23-98
Discipline Supervisor Date

VII. P/CAP ACCEPTABLE?
C. YES ___ NO ___ N/A / NL&OE Date
N. YES ___ NO ___ N/A / RESP. MGR. Date

VIII. FINAL QA REVIEW (As Applicable)
N/A / QA Concurrence Date

IX. APPROVAL AUTHORITY:
N/A / Training Completed Date
S.A. Bauer / 12/29/98 Procedure Approval/Concurrence Date

X. PSRC REVIEW:
A. REVIEWED BY:
PSRC Chairman Date
COMMENTS: YES ___ NO ___

B. PSRC COMMENTS RESOLVED:
Responsible Manager Date
PSRC Chairman Date

NUCLEAR OPERATIONS
COPY NO. 157

SAP-139
ATTACHMENT IV
PAGE 1 OF 3
REVISION 18

PROCEDURE DEVELOPMENT FORM - A

I. DATE: 10/6/98 PROC# EPP-164 REV.# 5 CHG. C COMM.#
TITLE: VERIFICATION OF COMMUNICATIONS OPERABILITY

NEW PROC ___ CHANGE X PERMANENT X
REVISION ___ RESTRICTED ___ FROM ___ TO ___
SAFETY RELATED ___
QUALITY RELATED ___
NON-SAFETY RELATED X

II. DESCRIPTION:
ATT. 1-E REFLECT NEW LOCATIONS OF CIMMUNICATIONS EQUIPMENT IN THE BACK-UP EOF

REASON FOR CHANGE:
RELOCATION OF THE BACK-UP EOF

C M Counts
Originator Sign/Print

III. WILL THIS REVISION/CHANGE/NEW PROCEDURE:

		*YES	NO	N/A
1.	Result in significant increased personnel radiation exposure? (ALARA review)	___	X	
2.	Result in a release of effluents to the Environment?	___	X	
3.	Degrade the effectiveness of the Radiation Emergency Plan?	___	X	
4.	Degrade the safeguards effectiveness of the Physical Security, Safeguards Contingency of Training and Qualification Plans?	___	___	X

* If any question 1 through 4 is answered "YES", refer to appropriate section of procedure for direction.

REQUIRED REVIEW AND COMMENT:

(X) MOPS	(X) MHPS	( ) GMNPO	( ) QA	( ) TU	( ) ISD	( ) ___
( ) MMS	( ) MDE	( ) GMES	( ) QC	( ) CHS	( ) RC	( ) ___
( ) MQS	( ) MNT	( ) GMNSS	( ) SAS	( ) HPS	(X) RPSchultz	( ) ___
( ) MPSE	( ) MNL&OE	( ) GMSPD	( ) MNTS	( ) PSE	( ) ___	( ) ___
( ) MCHS	( ) MNPS	( ) OPS	(X) NPS	( ) DE	( ) ___	( ) ___

REQUESTED REVIEWS:

Discipline Supervisor Victor Kelly 10/6/98 Date

IV. 10CFR50.59 SCREENING REVIEW/SAFETY EVALUATION
☐ REQUIRED ☒ EXEMPT ☐ PSRC SUPPORTING DOCUMENT: 10 CFR 50.54(q)

Victor Kelly
Discipline Supervisor Concurrence

V. TEMPORARY APPROVAL:
QUALIFIED REVIEWER ___ DATE N/A
TELECON BY ___
SHIFT SUPERVISOR ___ DATE ___

QA REVIEW ___ DATE ___
TELECON BY ___
FINAL APPROVAL REQUIRED BY: DATE ___

VI. DISCIPLINE SUPERVISOR FINAL REVIEW:
PSRC REVIEW PRIOR TO IMPLEMENTATION? YES ___ NO ✓
TRAINING REQUIRED? YES ___ NO ✓
IF YES, PRIOR TO PROCEDURE IMPLEMENTATION? YES ___ NO ___
P/CAP AFFECTED? YES ___ NO ✓
COMMENTS RESOLVED: Victor Kelly 10/29/98
Discipline Supervisor Date

VII. P/CAP ACCEPTABLE?
C. YES ___ NO ___ NA / NL&OE Date
N. YES ___ NO ___ NA / RESP. MGR. Date

VIII. FINAL QA REVIEW (As Applicable)
___ / QA Concurrence Date

IX. APPROVAL AUTHORITY:
N/A EB / Training Completed Date
Stan A. Ford 11/4/98
Procedure Approval/Concurrence Date

X. PSRC REVIEW:
A. REVIEWED BY:
___ / PSRC Chairman Date
COMMENTS: YES ___ NO ___

B. PSRC COMMENTS RESOLVED:
___ / Responsible Manager Date
___ / PSRC Chairman Date

NUCLEAR OPERATIONS
COPY NO. 157

PROCEDURE DEVELOPMENT FORM - A

I. DATE: 09/19/97 PROC.# EPP-104 REV.# 5 CHG. B COMM.# _____
TITLE: Verification of Communications Operability

NEW PROC ___ CHANGE ✓ PERMANENT ✓ SAFETY RELATED ___
REVISION ___ RESTRICTED ___ FROM _____ TO _____ QUALITY RELATED ___
NON-SAFETY RELATED ✓

II. **DESCRIPTION:** Correct pagination error in change A. Reissued entire procedure

REASON FOR CHANGE:
Information lost d. because of pagination in change A. Personnel Error.

CM Counts
Originator Sign/Print

III. **WILL THIS REVISION/CHANGE/NEW PROCEDURE:**

		*YES	NO	N/A
1.	Result in significant increased personnel radiation exposure? (ALARA review)	___	✓	
2.	Result in a release of effluents to the Environment?	___	✓	
3.	Degrade the effectiveness of the Radiation Emergency Plan?	___	✓	
4.	Degrade the safeguards effectiveness of the Physical Security, Safeguards Contingency of Training and Qualification Plans?	___	___	✓

* **If any question 1 through 4 is answered "YES", refer to appropriate section of procedure for direction.**

REQUIRED REVIEW AND COMMENT:

( ) MOPS	( ) MHPS	( ) GMNPO	( ) QA	( ) TU	( ) ISD	(✓) QA
( ) MMS	( ) MDE	( ) GMES	( ) QC	( ) CHS	( ) RC	(✓) GMNSS
( ) MQS	( ) MNT	( ) GMNSS	( ) SFADC	(✓) HPS	( ) ____	( ) ____
( ) MSCE	( ) MNL&OE	( ) GMSPD	( ) MNTS	( ) SCE	( ) ____	( ) ____
( ) MCHS	( ) MNPS	(✓) OPS	(✓) NPS	( ) DE	( ) ____	( ) ____

REQUESTED REVIEWS:

Discipline Supervisor 9/22/97 Date

IV. **10CFR50.59 SCREENING REVIEW/SAFETY EVALUATION**
☐ REQUIRED ☑ EXEMPT ☐ PSRC SUPPORTING DOCUMENT: 10CFR50.54a

Discipline Supervisor Concurrence

V. **TEMPORARY APPROVAL:**
QUALIFIED REVIEWER _____ DATE _____ NA
TELECON BY _____
SHIFT SUPERVISOR _____ DATE _____

QA REVIEW _____ DATE _____
TELECON BY _____
FINAL APPROVAL REQUIRED BY: DATE _____

VI. **DISCIPLINE SUPERVISOR FINAL REVIEW:**
PSRC REVIEW PRIOR TO IMPLEMENTATION? YES ___ NO ✓
TRAINING REQUIRED? YES ___ NO ✓
IF YES, PRIOR TO PROCEDURE IMPLEMENTATION? YES ___ NO ___
P/CAP AFFECTED? YES ___ NO ✓
COMMENTS RESOLVED: 9/22/97
Discipline Supervisor Date

VII. **P/CAP ACCEPTABLE?**
C. YES ___ NO NA / NL&OE Date
N. YES ___ NO ___ / RESP. MGR. Date

VIII. **FINAL QA REVIEW (As Applicable)**
NA / QA Concurrence Date

IX. **APPROVAL AUTHORITY:**
/ Training Completed Date
S.L. Ci Bard 9/22/97
Procedure Approval/Concurrence Date

X. **PSRC REVIEW:**
A. REVIEWED BY:
/ PSRC Chairman Date
COMMENTS: YES ___ NO ___

B. PSRC COMMENTS RESOLVED:
/ Responsible Manager Date
/ PSRC Chairman Date

NUCLEAR OPERATIONS

COPY NO. 157

SAP-139
ATTACHMENT IV
PAGE 1 OF 3
REVISION 17

PROCEDURE DEVELOPMENT FORM - A

I. DATE: 8-5-97 PROC. # EPP-104 REV. # 5 CHG. A COMM. # _____
TITLE: VERIFICATION OF COMMUNICATIONS OPERABILITY

NEW PROC ___ CHANGE X PERMANENT X SAFETY RELATED ___
REVISION ___ RESTRICTED ___ FROM _____ TO _____ QUALITY RELATED ___
NON-SAFETY RELATED X

CMC 8/28/97

II. DESCRIPTION: ~~Page 1, added Attachment V~~, Added step 4.16, Added Section 5.10, Added Attachment V. I pg 2 of 2
CMC 9/18/97

REASON FOR CHANGE: Provide mechanism to test and document faxing capability of EIS to the State al local governments. QA97001-4

CM Coarts Originator CM Coarts Sign/Print

III. WILL THIS REVISION/CHANGE/NEW PROCEDURE:

	* YES	NO	N/A
1. Result in significant increased personnel radiation exposure? (ALARA review)	___	✓	
2. Result in a release of effluents to the Environment?	___	✓	
3. Degrade the effectiveness of the Radiation Emergency Plan?	___	✓	
4. Degrade the safeguards effectiveness of the Physical Security, Safeguards Contingency or Training and Qualification Plans?	___	___	✓

*** If any question 1 through 4 is answered "YES", refer to appropriate section of procedure for direction.**

REQUIRED REVIEW AND COMMENT:

(✓) ~~QR~~ (LRB) () NL&OE () CHS () GMNPO () _____
(✓) OPS () MNTS (✓) HPS () GMES () _____
(✓) QA (✓) NPS () SCE () GMNSS () _____
() QC () TU () DE () _____ () _____

REQUESTED REVIEWS:

(✓) GMNSS
() _____
() _____
() _____
() _____

Discipline Supervisor 8-12-97 Date

IV. 10CFR50.59 SCREENING REVIEW/~~SAFETY EVALUATION~~

☐ REQUIRED ☑ EXEMPT ☑ PSRC CMC 8/5/97 SUPPORTING DOCUMENT: 10CFR50.54(q)

Discipline Supervisor concurrence

V. TEMPORARY APPROVAL:

QUALIFIED REVIEWER _____ DATE _____ NA
TELECON BY _____
SHIFT SUPERVISOR _____ DATE _____

QA REVIEW _____ DATE _____
TELECON BY _____
FINAL APPROVAL REQUIRED BY: DATE _____

VI. DISCIPLINE SUPERVISOR FINAL REVIEW:

PSRC REVIEW PRIOR TO IMPLEMENTATION? YES ___ NO ✓
TRAINING REQUIRED? YES ___ NO ✓
IF YES, PRIOR TO PROCEDURE IMPLEMENTATION? YES ___ NO ___
P/CAP AFFECTED? YES ___ NO ✓
COMMENTS RESOLVED: Discipline Supervisor 8/28/97 Date
TRAINING COMPLETED: NA Discipline Supervisor Date

VII. P/CAP ACCEPTABLE?

C. YES ___ NO ___ NA / NL&OE Date
N. YES ___ NO ___ / RESP. MGR. Date

VIII. FINAL QA REVIEW (As Applicable)

NA / QA Concurrence Date

IX. APPROVAL AUTHORITY:

Stan A. Bauer 9/9/97 Approval/Concurrence Date

X. PSRC REVIEW:

A. REVIEWED BY: NA
PSRC Chairman / Date
COMMENTS: YES ___ NO ___

B. PSRC COMMENTS RESOLVED:
Responsible Manager / Date
PSRC Chairman / Date

EPP-104, Verification of Communications Operability
Revision 5, Change E
Addendum to 10CFR50.54q Evaluation

Description:
Change step 5.2.7.C and Att. I-D to read "Plant Radiation Alarm".
Reason for Change:
Clarify which alarm will be heard during test.
10CFR50.54q Evaluation
This is change does not affect sections in 10CFR50.47 or 10CFR50 Appendix E. This change is administrative in nature. This change is to clarify that only the Plant Radiation Alarm will be sent over the speaker at the Circulating Water Intake. Therefore, this change does not decrease the effectiveness of the Radiation Emergency Plan. This change does not require further revision of the Radiation Emergency Plan or Emergency Plan Procedures.

Description:
Change 3.2.2.L.4.a and 5.3.3.J.10.a to 2S MWR.
Reason for Change:
To give siren repairs a higher priority MWR.
10CFR50.54q Evaluation
This is change does not affect sections in 10CFR50.47 or 10CFR50 Appendix E. This change is administrative in nature. The priority of the repair of sirens is not mentioned in the Radiation Emergency Plan. . Therefore, this change does not decrease the effectiveness of the Radiation Emergency Plan. This change does not require further revision of the Radiation Emergency Plan or Emergency Plan Procedures.

Description:
Delete from Att. I-B Item # 2.F.2 "LLEA Radio".
Reason for Change:
Radio channels to Newberry and Fairfield Counties replaced this radio.
10CFR50.54q Evaluation
Due to the age of this radio it was replaced with radio channels on the 800 mhz radio system.
10CFR50.54q Evaluation
This change affects 10CFR50.47(b)(5) and 10CFR50.Appendix E (IV)D. This radio is a backup system to the telephones for the notification of state and local governments. The radio was replaced because of its age and the difficulty in obtaining repair parts. The new channels are part of the current radio system utilized by the site. The radio is not identified in the Radiation Emergency Plan. Therefore, this change does not decrease the effectiveness of the Radiation Emergency Plan. This change does not require further revision of the Radiation Emergency Plan or Emergency Plan Procedures.

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ATTACHMENTS

Attachment I-A - Verification of Communications Operability (Monthly Test)

Attachment I-B - Verification of Communications Operability (Quarterly Test)

Attachment I-C - Verification of Communications Operability (Annual Test)

Attachment I-D - Verification of Plant Emergency Alarm Warning Lights and Speakers (Quarterly Test)

Attachment I-E - Verification of Communications Operability - Backup EOF (Quarterly Test)

Attachment II - Verification of School Monitor Radios (Annual Test)

Attachment III - Equipment Trouble Report

Attachment IV - Transient Sign Verification (Annual Test)

1.0 PURPOSE

1.1 The purpose of this procedure is to provide guidance for verifying that communications designated for use during an emergency are operational.

1.2 This procedure provides a method to document the tests of the emergency communications equipment.

2.0 REFERENCES

2.1 FEMA-43, Standard Guide for the Evaluation of Alert and Notification Systems for Nuclear Power Plants.

2.2 NUREG-0654/FEMA REP-1, Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants.

CO_6→ 2.3 10CFR50, Appendix E, IV,E,9 a-d.

2.4 10CFR50.72.

2.5 EP-100, Virgil C. Summer Nuclear Station Radiation Emergency Plan.

2.6 Emergency Planning Telephone Directory.

2.7 EMP-170.003, Warning Siren Maintenance.

2.8 NL-122, Regulatory Notification and Reporting. | Chg D

2.9 EPP-002, Communications and Notification.

2.10 EPP-021, Activation of the Early Warning Siren System (EWSS).

2.11 EPP-026, Operation of the Siren Control System.

2.12 SAP-143, Preventative Maintenance Program.

3.0 DEFINITIONS

3.1 Definitions

3.1.1 EWSS Annual Operability - The percentage of operability of the Early Warning Siren System (EWSS) for a 12 month period.

3.1.2 Percentage of Operability of the EWSS - The total number of sirens tested divided into the number of satisfactory tests, for all tests.

4.0 CONDITIONS AND PREREQUISITES

4.1 The required frequency for verification of communications (telephone and/or radio, as applicable) operability is as follows:

4.1.1 Monthly tests will be conducted with State and county governments within the 10 mile Plume Emergency Planning Zone (EPZ).

4.1.2 Quarterly tests will be conducted with federal and State agencies within the 50 mile Ingestion EPZ.

4.1.3 Annual tests will be conducted among VCSNS, state and county Emergency Operation Centers and Radiation Monitoring Teams.

4.2 The EWSS shall be tested at the following frequency:

4.2.1 A silent test of the EWSS shall be performed at least every 14 days.

4.2.2 A growl test of each siren shall be performed at least monthly, and when preventive maintenance has been performed.

4.2.3 A complete cycle test (full system activation) shall be performed at least annually.

4.3 Plant Emergency Alarms shall be tested weekly, normally on the first scheduled workday, satisfactory results will be signified by the approval signatures on the PMTS sheet. There is no requirement for a data sheet.

$CO_3 \rightarrow$4.4 The Plant Emergency Alarm Warning Lights shall be tested quarterly.

4.5 School Monitor Radios shall be tested annually.

$NO_1 \rightarrow$ 4.6 When a test is conducted on the DHEC radio, ensure the radios are separated by a distance of at least 15 air miles.

4.7 Designated telephone numbers in the Emergency Planning Telephone Directory shall be verified quarterly by the Emergency Services Unit (ESU).

4.8 All tests shall be documented in accordance with SAP-143, Preventative Maintenance Program.

$CO_6 \rightarrow$4.9 The FTS 2000 Telephone System shall be tested monthly in the Control Room, TSC and EOF, as applicable.

4.10 The ESU shall ensure all tests specified in this procedure are performed and documented.

4.11 The 75% operability of the EWSS is based on the acceptance criteria for the Public Response Survey conducted during the final acceptance test of the EWSS by the Federal Emergency Management Agency.

4.12 The Public Address Speakers at siren locations #9 and #45 are not considered part of the EWSS.

4.13 Annual preventative maintenance activities on sirens will be performed in accordance with SAP-143 and EMP-170.003.

4.14 EPP-026 Attachment VI provides a list of sirens, siren locations and the company supplying power to the siren.

4.15 RTU STATUS indicating a RESTART indicates the RTU had a power fluctuation and has lost the data gathered during a test. This condition does not indicate a failure of the siren to properly sound. A retest shall be done of the siren and the results recorded on the original test documentation.

4.16 Communications to the State and local governments via fax using the VCS Emergency Information System (EIS) shall be performed monthly. Test results will be documented using Attachment I-A. | Chg. A

5.0 PROCEDURE

5.1 In-Plant Communications

5.1.1 The ESU, or designee, shall perform communications tests and record results on Attachments I-A, I-B, I-C, or I-E.

5.1.2 The person performing the test shall verify that the method of communication is operable, as follows:

A. A ringdown telephone shall contact the party it is intended to reach.
B. The all-call function shall simultaneously contact all parties it is intended to reach. | Chg. B

C. A normal telephone circuit shall be able to reach the number dialed.

D. A radio shall be tested to ensure it is operable.

E. The Plant Page shall be tested to ensure each set can page and communicate with another set.

F. The FTS 2000 telephones shall be tested to ensure that they contact another telephone with a callback.

G. A fax machine shall be tested to ensure it can send and receive messages.

NOTE 5.1.3

Failure of an ENS telephone is a one hour reportable event in accordance with 10CFR50.72.

5.1.3 If there is a failure of the FTS 2000 telephone system, the Control Room/SS will be notified. The SS (or his designee) shall:

A. Notify the NRC Operations Center.

B. When the telephone service is restored, notify the NRC Operations Center.

5.1.4 The person performing the test shall record the results in the Test Results space on the appropriate attachments. If the test results are unsatisfactory, contact the applicable maintenance group for repair and notify the SS.

5.1.5 When the equipment has been repaired, the ESU, or designee, shall test the equipment and document the test.

$CO_3 \rightarrow$5.2 Plant Emergency Alarm Warning Lights and Speakers

5.2.1 Announce over Plant Paging System, the weekly Emergency Alarm Test.

5.2.2 A weekly test of the Plant Fire Alarm shall be conducted by Operations personnel as follows:

A. Simultaneously depress both FIRE ALARM buttons on the FIRE AND SECURITY panel (XCP-6040).

B. Verify the CONTROL ROOM SPEAKERS MUTED light is illuminated.

C. Verify with personnel located in the buildings that the alarm can be heard.

5.2.3 A weekly test of the Plant Radiation Alarm shall be conducted by Operations personnel, as follows:

A. Simultaneously depress both PLANT RADIATION buttons on the FIRE AND SECURITY panel (XCP-6040).

B. Verify the CONTROL ROOM SPEAKERS MUTED light is illuminated.

C. Verify with personnel located in the buildings that the alarm can be heard.

5.2.4 A weekly test of the Reactor Building Evacuation Alarm shall be conducted by Operations personnel, as follows:

A. Simultaneously depress both REACTOR BLDG. EVACUATION ALARM buttons on the FIRE AND SECURITY panel (XCP-6040).

B. Verify that the red flashing warning lights on the 463' Turbine Building or other locations are functional.

C. If the Reactor Building is occupied during the test, ensure the alarm is heard.

5.2.5 If a Plant Alarm Test is unsatisfactory, promptly notify the ESU and contact Electrical Maintenance to begin repairs.

5.2.6 Document the results of the Plant Emergency Alarms on the PMTS sheet. There is no requirement for a data sheet.

5.2.7 Quarterly Test of Plant Emergency Alarm Warning Lights and Speakers

A. Dispatch available Electrical Maintenance personnel to the Circulating Water Intake Structure.

B. The quarterly test of the Plant Emergency Alarm Warning Lights shall be conducted in conjunction with a weekly Plant Alarms Test by the Operations Department and documented on Attachment I-D.

C. Station personnel shall verify Plant Radiation Alarm can be heard over the speaker at the Circulating Water Intake Structure and documented on Attachment I-D. | Chg. E

CO_5→ D. Contact Security at the Central Alarm Station

1. Instruct them to contact a minimum of 3 security personnel and verify the alarms can be heard throughout the plant.

2. Document the results on Attachment I-D of this procedure. If the alarms cannot be heard in an area(s) of the plant, initiate an MWR for repairs.

E. If the test is unsatisfactory, promptly notify the ESU and contact Electrical Maintenance to repair.

F. Retest of the equipment will be documented on the MWR.

NOTE 5.3

Prior to testing the Early Warning Siren System, ensure the Siren Control System Computer is designated as PRIMARY Mode and the printer is ready to operate. EPP-026, Operation of the Siren Control System provides instructions on changing the Mode.

NOTE 5.3

Prior to testing the Early Warning Siren System, ensure Maintenance Personnel do not have a siren disabled for Preventive Maintenance purposes.

Chg F

5.3 Early Warning Siren System

5.3.1 Silent Test

A. The silent test of the EWSS is the responsibility of the Operations Department.

B. Obtain the EWSS key from the Control Room Supervisor's Key Box.

C. Insert the key into the Siren Control Console's SYSTEM Switch in the Control Room and turn the key to the ON position.

D. Verify the SYSTEM READY Indicator Light is illuminated. The Siren Control Console is now operational.

E. Place the CALL SELECTOR Switch to ALL CALL.

F. Press and hold the SILENT TEST button until the light illuminates. It will take a minimum of 3 seconds.

G. Turn the key to the OFF position and return the key to the Control Room Supervisor's Key Box.

H. Once the system has completed the Silent Test cycle after approximately 20 minutes, the results of the silent test will be printed at the Siren Control System Computer designated as PRIMARY Mode.

I. If the percentage of operability for the EWSS is less than 75%, declare the system inoperable and accomplish the following:

1. Refer to NL-122 for reportability requirements. | Chg D

2. Notify the ESU, who will contact the appropriate group to make repairs.

J. Notify the ESU of any sirens reporting a failure.

K. Attach the results to the PMTS and forward to the ESU.

L. The ESU shall:

1. Review the printout of the test.

2. Record siren(s) failures on Attachment III.

3. Notify the appropriate group to make repairs to any inoperable siren(s) utilizing Attachment III.

4. If there is an electrical repair, the ESU will generate a plant MWR and forward it to Electrical Maintenance. The following guidance will be used to establish the priority:

a. 2S -The percentage of siren operability is greater than or equal to 75%. | Chg. E

b. 1 -The percentage of operability is less than 75%.

5. Update the percentage of operability of the EWSS on the ESU computer network.

M. When a failed siren is repaired, perform a silent test on that siren. If the retest is satisfactory, return the siren to service. Document the retest on Attachment III.

N. Attach Attachment III to the PMTS package, when all retests are complete. | Chg. B

5.3.2 Growl Test

A. Prior to conducting a Growl Test, ensure the following are notified:

1. SCANA, Public Affairs
2. Control Room Personnel
3. NRC Resident Inspector
4. State Emergency Preparedness Division
5. County Emergency Preparedness Offices
6. Station Switchboard Operator

B. Growl testing of the siren system is the responsibility of the ESU.

C. The tester shall verify operability of each siren by sending a growl test signal using the Siren Control System computer designated as PRIMARY Mode.

D. The results of the growl test will be printed at the Siren Computer System terminal designated as PRIMARY Mode.

$CO_1 \rightarrow$ E. Once the test has been completed, the ESU shall:

1. Ascertain the numbers and locations of sirens that failed to operate.
2. Poll the siren(s) that failed to verify the operability status of the siren(s).
3. Record the cause of the failure on the printout.

4. Do a FIELD RTU RESET, as follows:

   a. Press the F2 key to display the Directory Screen.

   b. Move the cursor to the FIELD RTU RESET block.

   c. Press the "1" key.

   d. Press the ENTER key.

5. If the RTU STATUS indicated a RESTART do a retest of the individual siren. Indicate the results of the retest on the printout.

6. If necessary, correct the siren numbers and percent operability on the printout.

7. Record siren failure(s) on Attachment III.

8. Notify the appropriate group to make repairs to any inoperable siren(s) utilizing Attachment III.

9. If there is an electrical repair, the ESU will generate a plant MWR and forward it to Electrical Maintenance. The following guidance will be used to establish the priority:

   a. 2S - The percentage of siren operability is greater than or equal to 75%.

   b. 1 - The percentage of operability is less than 75%.

10. Update the percentage of operability of the EWSS on the ESU computer network.

F. If the system-wide growl test success percentage for the EWSS is less than 75%, declare the system inoperable and accomplish the following:

   1. Notify the SS. The SS should refer to NL-122 for reportability requirements. | Chg D

   2. Notify the appropriate group to make repairs.

G. When a failed siren is repaired, perform a growl test on that siren. If the retest is satisfactory, return the siren to service. Document the retest on Attachment III.

H. Attach Attachment III to the PMTS package, when all retest are complete.

5.3.3. Complete Cycle Test

A. Prior to conducting a Complete Cycle Test, ensure the following are notified:

1. SCANA, Public Affairs

2. Control Room Personnel

3. NRC Resident Inspector

4. State Emergency Preparedness Division

5. County Emergency Preparedness Offices

6. Station Switchboard Operator

B. The complete cycle test is the responsibility of the ESU.

C. Obtain the EWSS key from the Control Room Supervisor's Key Box.

D. Insert the key into the Siren Control Console's SYSTEM Switch in the Control Room and turn the key to the ON position.

E. Verify the SYSTEM READY Indicator Light is illuminated. The Siren Control Console is now operational.

F. Place the CALL SELECTOR Switch to ALL CALL.

G. Press and hold the ACTIVATE button until the light illuminates. It will take a minimum of 3 seconds.

H. Turn the key to the OFF position and return the key to the Control Room Supervisor's Key Box.

I. Once the system has completed the Activation Cycle, an Activation Report will be printed at the Siren Control System Computer designated as PRIMARY.

J. Once the test has been completed, the ESU shall:

1. Ascertain the numbers and locations of sirens that failed to operate.

2. Poll the siren(s) that failed to verify the operability status of the siren(s).

3. Record the cause of the failure on the printout.

4. Do a FIELD RTU RESET, as follows:

   a. Press the F2 key to display the Directory Screen.

   b. Move the cursor to the FIELD RTU RESET block.

   c. Press the "1" key.

   d. Press the ENTER key.

5. If the RTU STATUS indicated a RESTART, do a retest of the individual siren. Indicate the results of the retest on the printout.

6. If a siren indicates a failure, personnel may be dispatched to the siren location to interview residents in the immediate area to determine if the siren sounded. The name of the residents shall be recorded with the results of the interview to determine if the siren activated properly.

7. If necessary, correct the siren numbers and percent operability on the printout.

8. Record siren failure(s) on Attachment III.

9. Notify the appropriate group to make repairs to any inoperable siren(s) utilizing Attachment III.

10. If there is an electrical repair, the ESU will generate a plant MWR and forward it to Electrical Maintenance. The following guidance will be used to establish the priority:

    a. 2S - The percentage of siren operability is greater than or equal to 75%. | Chg. E

    b. 1 - The percentage of operability is less than 75%.

11. Update the percentage of operability of the EWSS on the ESU computer network.

K. If the percentage of operability for the EWSS is less than 75%, declare the system inoperable and accomplish the following:

1. Notify the SS. The SS should refer to NL-122 for reportability requirements. | Chg D

2. Notify Electrical Maintenance to make repairs.

L. Update the percentage of operability to the EWSS on the ESU computer network.

M. When a failed siren is repaired, perform a complete cycle test on that siren. If the retest is satisfactory, return the siren to service. Document the retest on Attachment III.

N. Attach Attachment III to the PMTS package, when all retest are complete.

5.4 School Monitor Radios

5.4.1 The ESU is responsible for the verification of operability of the School Monitor Radios.

NOTE 5.4.2

Prior to testing, the ESU shall ensure coordination between the station and the schools.

5.4.2 The School Monitor Radios shall be tested annually by the ESU, as follows:

A. Obtain the EWSS key from the Control Room Supervisor's Key Box.

B. Insert the key into the Siren Control Console's SYSTEM Switch in the Control Room and turn the key to the ON position.

C. Verify the SYSTEM READY Indicator Light illuminates. It will take a minimum of 3 seconds.

D. Key the SCHOOL MONITOR MICROPHONE and hold down.

E. Read the message below into the microphone

This is a Drill! This is a Drill! This is the V. C. Summer Nuclear Station testing the School Monitor Radios. (Repeat)

F. Release the microphone key to deactivate the system.

G. Turn the key to the OFF position and return the key to the Control Room Supervisor's Key Box.

H. Document the test on Attachment II by contacting the holders of School Monitor Radios and verifying operability.

I. If a radio fails to receive the test, contact the appropriate maintenance group to make repairs.

J. When a failed School Monitor Radio is repaired, perform a test of that radio and return it to service when the test is satisfactorily performed.

5.5 Public Address Speakers

5.5.1 The ESU is responsible for the verification of operability of the Public Address Speakers.

5.5.2 The Public Address Speakers shall be tested quarterly, as follows:

A. Ensure personnel are in position to hear the speaker.

B. Obtain the EWSS key from the Control Room Supervisor's Key Box.

C. Insert the key into the Siren Control Console's SYSTEM Switch in the Control Room and turn the key to the ON position.

D. Verify the SYSTEM READY Indicator Light illuminates. It will take a minimum of 3 seconds.

E. Key the PUBLIC ADDRESS MICROPHONE and hold down.

F. Read the message below into the microphone

> This is a Drill! This is a Drill! This is the V. C. Summer Nuclear Station testing the Public Address Speakers. (Repeat)

G. Release the microphone key to deactivate the system.

H. Turn the key to the OFF position and return the key to the Control Room Supervisor's Key Box.

I. Document the test on Attachment I-B by contacting personnel at the Speakers to learn if they heard the announcement.

J. If a Speaker is inoperable, notify the appropriate maintenance group to make repairs. If there is an electrical problem, the ESU will generate a plant MWR and forward it to Electrical Maintenance. The priority of the MWR shall be 2S or greater.

K. When a failed speaker is repaired, perform a test on that speaker and return it to service when the test has been satisfactorily performed.

5.6 Emergency Response Data System (ERDS)

5.6.1 A quarterly test of the ERDS shall be performed by the ESU normally on Thursday of the sixth complete week of the quarter.

5.6.2 The test shall be coordinated with the NRC Operations Center.

5.6.3 The test will demonstrate the ability to:

A. Establish a link with the ERDS in accordance with EPP-002.

B. Transmit all parameters in the plant's ERDS database for two hours.

C. Reconnect the ERDS upon a loss of telephone connection.

D. Terminate the ERDS link in accordance with EPP-002.

5.6.4 Test results shall be documented on the PMTS sheet. If the test results are unsatisfactory, contact the applicable maintenance group for repairs and notify the SS.

5.7 Public Information Brochure

5.7.1 An information brochure to the public within the plume exposure pathway shall be published annually.

5.7.2 The brochure development will begin in the third quarter of each year and will normally be accomplished by the SCANA Public Affairs Department.

5.7.3 This brochure shall be reviewed and approved by the ESU prior to distribution.

$NO_2 \rightarrow$5.8 Information for Transient Population

5.8.1 Signs located throughout the plume exposure pathway provide the transient population instructions on obtaining local emergency information should an emergency or accident occur.

5.8.2 These signs shall be inspected annually for legibility and information, using Attachment IV, which also includes an assessment of the need for signs at additional locations.

5.9 Badge Accountability Printer

5.9.1 Request personnel in the Access Portal to send a printout to the TSC Badge Accountability Printer.

5.9.2 Verify the printout is legible.

5.10 Emergency Information System (EIS) Communication verification.

5.10.1 In conjunction with the monthly test of the ESSX lines or separately, notify the State and local government warning point dispatchers that a test fax will be transmitted to them and they will be called to verify receipt. Document on Attachment I-A page 2 of 2.

5.10.2 Generate an Emergency Notification Form using EIS and transmit it using the Initial Notification fax group. Chg. A

5.10.3 Wait four minutes and call the dispatchers either individually or using the group call option in ESSX and verify receipt and legibility. Document on Attachment V.

5.10.4 Upon successful completion of this test, stop and restart EIS to clear all data.

5.10.5 If any location failed to receive a legible fax, notify the appropriate group for repairs.

Chg. A

5.10.6 If EIS faxing capability cannot be repaired by the end of the current shift, notify the duty Shift Supervisor that manual faxing of Emergency Notification Forms must be performed until repairs are effected.

5.10.7 When repairs are complete and a successful retest has been performed, notify the duty Shift Supervisor that EIS is repaired and can be used for faxing.

6.0 RECORDS

6.1 All of the attachments to this procedure will be retained in accordance with the Document Management System (DMS).

7.0 REVISION SUMMARY

7.1 Added Section 4.15 to define an RTU RESTART and to provide instructions for what to do when one is received. This is being incorporated per letter from Motorola dated April 15,1997.

7.2 Added Step 3,5 &6 to Section 5.3.2.E to provide better guidance for the performance of Growl test.

7.3 Added Steps 3,5,6 & 7 to Section 5.3.3.J to provide better guidance for the performance of the Complete Cycle Test.

7.4 Changed the Title Page from "STATION ADMINISTRATIVE" to "EMERGENCY PLAN". This was a typographical mistake from the previous revision.

VERIFICATION OF COMMUNICATIONS OPERABILITY
(MONTHLY TEST)

ITEM #	EQUIPMENT DESCRIPTION	TEST RESULTS		MINIMUM QUANTITY	COMMENTS
		SAT	UNSAT		
1	A. ESSX Comm.Equip. and Programs in TSC				
	1 - State Emerg. Ops. Center			1	
	2 - Fairfield Co.			1	
	3 - Newberry Co.			1	
	4 - Richland Co.			1	
	5 - Lexington Co.			1	
	6 - State Warning Point			1	
	7 - "All Call"			1	
	B. CR ESSX Telephone			1	
	C. EOF ESSX Telephone			1	
2	NRC Telephones				
	1 - Control Room				
	ENS			1	
	2 - TSC Command Center				
	RSCPL			1	
	ENS			2	
	3 - TSC NRC area				
	PMCPL			1	
	HPN			1	
	5 - EOF Command Center				
	RSCPL			1	
	PMCPL			1	
	ENS			1	
	MCL			1	
	HPN			1	
	6 - EOF NRC Area				
	ENS			1	
	MCL			1	
3	TSC Badge Accountability Printer			1	

Chg G

Chg A

*If the test results are unsatisfactory, contact the appropriate maintenance group for repair and notify the Shift Supervisor.

VERIFICATION OF COMMUNICATIONS OPERABILITY (MONTHLY TEST)

VERIFICATION OF EIS COMMUNICATIONS

I. Notify the State and local government dispatchers of the test fax:

	NAME	TIME
State Warning Point		
Newberry County		
Fairfield County		
Lexington County		
Richland County		

II. Generate the ENF and transmit to the Initial Notification fax group:

Time of transmission: _____

III. Call the Warning Points and verify receipt of legible faxes: (Denote specific problems and corrective actions in the remarks section.)

	LEGIBLE?) (YES/NO)	TIME RECEIVED
State Warning Point		
Newberry County		
Fairfield County		
Lexington County		
Richland County		

Chg. A

IV. Remarks:

_____

_____

_____

_____

_____

_____

_____

Satisfactory Test: _____
SIGNATURE

Date: _____

*If the test results are unsatisfactory, contact the appropriate maintenance group for repair and notify the Shift Supervisor.

VERIFICATION OF COMMUNICATIONS OPERABILITY
(QUARTERLY TEST)

ITEM #	EQUIPMENT DESCRIPTION	TEST RESULTS		MINIMUM QUANTITY	COMMENTS
		SAT	UNSAT*		
1	Plant Status Communicator Network				
	A. Control Room			1	
	B. TSC			1	
	C. EOF			1	
2	Technical Support Center				
	A. Engineering Area				
	1 - Telephone Lines			3	
	2 - Plant Page			1	
	B. NRC Area				
	1 - Telephone Lines			3	
	2 - Plant Page			1	
	C. Westinghouse Area				
	1- Telephone Line			1	
	D. Architect/Engineer Area				
	1 - Telephone Line			1	
	E. Command Center				
	1 - Plant Page			1	
	F. Commununications Area				
	1 - Telephone Lines			2	
	2- 800 mHz Radio			1	
	3 – Telecopiers			2	
	G. Media Area				
	Telephone			1	
	H. Chemistry/Administration Supervisor Area				
	1 -Telephone Lines			2	
	2 -Plant Page			1	

Chg. F

*If the test results are unsatisfactory, contact the appropriate maintenance group for repair and notify the Shift Supervisor.

VERIFICATION OF COMMUNICATIONS OPERABILITY
(QUARTERLY TEST)

ITEM #	EQIUPMENT DESCRIPTION	TEST RESULTS		MINIMUM	COMMENTS
		SAT	UNSAT*	QUANTITY	
3	Operations Support Center				
	1 -Telephones			3	
	2 -Plant Page			1	
4	CREP Room				
	1 - State and Counties Notification Telephone			1	
	2 - One Telephone Line			1	
5	EOF				
	A Fax			2	
	B. EOF Environmental Base Radio			1	
	C. EOF State (DHEC) Radio Tranceiver			1	
	D. EOF State (EPD) Radio Transceiver			1	
	E Westinghouse Telephone Line			1	
	F. Architect/Engineer Telephone Line			1	
6	Monitoring Team				
	1 - HP Lab Radios			5	
	2 - Environmental Lab Radios			2	
7	Public Address Speakers				
	1 - Speaker #9			1	
	2 - Speaker #45			1	
	3 - School Monitor Radio Transmitter			1	
8	Review Emergency Planning Telephone Directory and Call Tree			N/A	

*If the test results are unsatisfactory, contact the appropriate maintenance group for repair and notify the Shift Supervisor.

VERIFICATION OF COMMUNICATIONS OPERABILITY
(ANNUAL TEST)

ITEM #	EQUIPMENT DESCRIPTION	TEST RESULTS		MINIMUM QUANTITY	COMMENTS
		SAT	UNSAT*		
1	Fairfield County Emergency Operations Center (EOC)			N/A	
2	Newberry County EOC			N/A	
3	Richland County EOC			N/A	
4	Lexington County EOC			N/A	

*If the test results are unsatisfactory, contact the appropriate maintenance group for repair and notify the Shift Supervisor.

VERIFICATION OF
PLANT EMERGENCY ALARM WARNING LIGHTS AND SPEAKERS
(QUARTERLY TEST)

ITEM #	EQUIPMENT DESCRIPTION	TEST RESULTS		MINIMUM QUANTITY	COMMENTS
		SAT	UNSAT*		
1	Plant Emergency Alarm Warning Lights				
	A. Diesel Generator Room A			2	
	B. Diesel Generator Room B			2	
	C. Turbine Building 412'			4	
	D. Turbine Building 436'			4	
	E. Turbine Building 463'			1	
	F. Auxiliary Building 485'			1	
	G. Auxiliary Building 388'				
	(1 in each Charging Pump Rm.)			3	
2	Speakers at Circulating Water Intake Structure			1	
3	Contact Security personnel located throughout the plant to verify the plant alarms can be heard in the plant.			3	

*If the test results are unsatisfactory, contact the appropriate maintenance group for repair and notify the Shift Supervisor.

VERIFICATION OF COMMUNICATIONS OPERABILITY - BACKUP EOF
(QUARTERLY TEST)

ITEM #	EQUIPMENT DESCRIPTION	TEST RESULTS		MINIMUM QUANTITY	COMMENTS
		SAT	UNSAT*		
1	Rooms 1109 and 1110				
	A. Telephone extensions and instruments			9	
	B. ED to OEC Ringdown (931-5552)			1	
	C. ED Briefing (931-5992)			1	
	D. Plant Status Communicator (931-5128)			1	Chg C
2	Communicator Room				
	A. Telephone extensions and instruments			2	
	B. Fax extension (ESSX 251-6256) and Machine			1	
	C. ESSX Line (256-6255)				
3	Room 1112				
	A. Telephone extensions and instruments			2	
	B. Fax Extension			1	
4	AP Card Room				
	A. Telephone extensions and instruments			1	

*If the test results are unsatisfactory, contact the appropriate maintenance group for repair and notify the Shift Supervisor.

VERIFICATION OF SCHOOL MONITOR RADIOS
(ANNUAL TEST)

ITEM #	EQUIPMENT DESCRIPTION	TEST RESULTS		MINIMUM QUANTITY	COMMENTS
		SAT	UNSAT*		
1	School Monitor Radios in schools:				
	A. Kelley Miller School			1	
	B. McCrorey Liston School			1	
	C. Pomaria-Garmany School			1	
	D. Little Mountain School			1	
	E. Mid-Carolina High School			1	
	F. Chapin Elementary School			1	
	G. Chapin High School			1	
	H. Chapin Middle School			1	
	I. Mid-Carolina Middle School			1	

*If the test results are unsatisfactory, contact the appropriate maintenance group for repair and notify the Shift Supervisor.

PMTS NO., if applicable: ____________________

EQUIPMENT TROUBLE REPORT

Siren #	Trouble Indicated	Corrective Action	Date of Retest	Results	Initial

Notified Communications Dept. Date ____________________ Signature ________________________

Repair Activities Complete Date ______________________ Signature ________________________

RETURN TO EMERGENCY SERVICES UNIT UPON COMPLETION.

TRANSIENT SIGN VERIFICATION

ITEM #	EQUIPMENT DESCRIPTION	TEST RESULTS		MINIMUM QUANTITY	COMMENTS
		SAT	UNSAT*		
1	Glenn's 6 to 10 - Hwy 215			1	
2	Tanner's Grocery - Hwy 215 & 99			1	
3	Salem Crossroads Store - Hwy 215 & 34			1	
4	Berley's Store - Hwy 34 & 28			1	
5	Frick's Grocery - Hwy 76 in Lt. Mountain			1	
6	Wicker's Store - Hwy 213			1	
7	Shealy Brothers Store - Pomaria			1	
8	Ray Blair's Store - Blair			1	
9	Overlook Park - Hwy 215			1	
10	Hwy 215 Boat Landing			1	
11	Highway 99 Lake Monticello Boat Landing			1	
12	Entrance to Broad River Water Fowl Area			1	
13	Cannons Creek Boat Landing			1	
14	Highway 99 Causeway			1	
15	Heller's Creek Boat Landing			1	
16	Lake Monticello Sub Impoundment Entrance			1	
17	Pinner's Bridge Primitive Boat Landing			1	
18	Hwy 34 Primitive Boat Landing			1	
19	Offsite Holding Area Signs			9	

*If the test results are unsatisfactory, contact the appropriate maintenance group for repair and notify the Shift Supervisor.

Are additional signs needed at other locations? Yes / No (Circle one). If yes, specify location(s) _____

_____