

Beaver Valley Power Station Route 168 P.O. Box 4 Shippingport, PA 15077-0004

Lew W. Myers Senior Vice President 724-682-5234 Fax: 724-643-8069

July 27, 2001 L-01-100

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

Subject: Beaver Valley Power Station, Unit No. 1 and No. 2

BV-1 Docket No. 50-334, License No. DPR-66 BV-2 Docket No. 50-412, License No. NPF-73

Beaver Valley Power Station Emergency Preparedness

Implementing Procedures (Volume 2)

In accordance with 10 CFR Part 50.4, this letter forwards recent revisions of the Beaver Valley Power Station Emergency Preparedness Implementing Procedures (Volume 2) to the Nuclear Regulatory Commission. The changes do not decrease the effectiveness of the Plan and the Plan, as changed, continues to meet the requirements of Appendix E of 10 CFR 50. Therefore, 10 CFR Part 50.54(q) requires that these changes be submitted for information only.

If there are any questions on this submittal, please contact Mr. Thomas S. Cosgrove, Manager, Regulatory Affairs at 724-682-5203.

Sincerely,

Lew W. Myers

Enclosures

c: Mr. L. J. Burkhart, Project Manager (w/o enclosures)

Mr. D. M. Kern, Sr. Resident Inspector (w/o enclosures)

Mr. H. J. Miller, NRC Region I Administrator (2 copies)

A045

Enclosure Beaver Valley Power Station Emergency Preparedness Implementing Procedure Changes

The following is a brief recap of the changes made to Volume 2 of the Emergency Preparedness Implementing Procedures.

EPP/IP 1.1 CHANGES – REV. 26

<u>PAGE</u>	SECTION	CHANGE	REASON
i		Deleted "Director, Plant Services" and Added "Director, Planning and Scheduling".	Organizational change.
1	7.0	Added Condition Report #01-1975	Update References.
11	Att. 2	Deleted NRC BVPS Site Rep. G. Dentel.	Personnel Change.
39	NOTE	Provides directions if CAS cannot be contacted initially.	Human Factoring.
42	5.1.1	Provides directions if CAS cannot be contacted initially.	Human Factoring.
47	NOTE	Provides directions if CAS cannot be contacted initially.	Human Factoring.
50	5.1.1	Provides directions if CAS cannot be contacted initially.	Human Factoring.
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63	NOTE	Provides directions if CAS cannot be contacted initially.	Human Factoring.
66	5.1.1	Provides directions if CAS cannot be contacted initially.	Human Factoring.

APPROVAL PAGE

Intent Related Revision Yes	X No
IF YES	
OSC and Site Approval	
OSC Meeting Number	Date
ReviewedManager, Emergency Preparedness	Date
Approved Director, Projects and Scheduling	Date
IF NO	
Reviewed	0/15/01 Date
Approved Relief E Donnellon Director, Projects and Scheduling	6/18/0 <i>i</i> Date

EFFECTIVE INDEX

Issue 8 Rev.	0 1 2 3 4 5 6	OSC Approved OSC Approved OSC Approved OSC Approved Non-Safety Revisions Non-Safety Revisions OSC Approved	3-12-87 8-13-87 3-10-88 6-20-88 2-23-89 6-30-89 3-22-90
Issue 9 Rev.	0 1 2 3 5	OSC Approved Non-Intent Revision Non-Intent Revision	9-27-90 6-28-91 12-29-92
Davi	5	Non-Intent Revision	1-27-93
Rev.		OSC Approved	11-10-93
Rev. Rev.	6 7	Non-Intent Revision Non-Intent Revision	4-22-94 7-29-94
Rev. Rev.	8	Non-Intent Revision	11-15-94
Rev.	9	Non-Intent Revision	1-20-95
Rev.	10	Non-Intent Revision	5-26-95
Rev.	11	Non-Intent Revision	9-1-95
Rev.	12	Non-Intent Revision	12-8-95
Rev.	13	Non-Intent Revision	2-1-96
Rev.	14	Non-Intent Revision	10-23-96
Rev.	15	Non-Intent Revision	1-29-97
Rev.	16	Non-Intent Revision	6-17-97
Rev.	17	Non-Intent Revision	1-16-98
Rev.	18	OSC Approved	4-1-98
Rev.	19	OSC Approved	7-1-98
Rev.	20	Non-Intent Revision	1-13-99
Rev.	21	Non-Intent Revision	9-28-99
Rev.	22	Non-Intent Revision	12-2-99
Rev.	23	Non-Intent Revision	7-12-00
Rev.	24	Non-Intent Revision	1-23-01
Rev.	25	Non-Intent Revision	5-1-01
Rev.	26	Non-Intent Revisison	6-29-01

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- C. Responsibilities
- D. Action Levels/Precautions
- E. Procedure
- F. Final Condition
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A. <u>PURPOSE</u>

This procedure provides guidance for activation of the ERO and for making initial and follow-up notifications during an emergency.

B. REFERENCES

- 1.0 Beaver Valley Power Station Emergency Preparedness Plan.
- 2.0 Commonwealth of Pennsylvania Disaster Operations Plan/Annex E.
- 3.0 State of Ohio Nuclear Power Plant Emergency Response Plan.
- 4.0 West Virginia Radiological Emergency Plan for A Fixed Nuclear Facility.
- 5.0 Title 10, Code of Federal Regulations Part 50, Appendix E.
- 6.0 NUREG-0654/FEMA-REP-1, "Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants".
- 7.0 Condition Report #971737.
 Condition Report #980706.
 Condition Report #991967.
 Condition Report #993020
 TCN 1/2-00-020
 Nuclear Regulatory Issue Summary 2000-11
 Condition Report #01-1975

C. RESPONSIBILITIES

The Communications and Records Coordinator (or qualified designated communicator, until properly relieved) is responsible to ensure that all required offsite notifications are completed within the proper time frame following the declaration of an emergency. Security is responsible for initial notifications to near-site buildings.

D. <u>ACTION LEVELS/PRECAUTIONS</u>

- 1.0 This procedure is to be initiated upon any of the following conditions:
 - 1.1 An emergency condition has been declared at the Beaver Valley Power Station as defined in the BVPS Emergency Preparedness Plan.
 - 1.2 An existing emergency condition has been reclassified to a higher emergency category, and/or, a significant deterioration in conditions has occurred.
 - 1.3 The emergency situation has been corrected, the emergency terminated, and recovery operations have begun.

- 2.0 Emergency communications will originate in the BV 1/2 Control Rooms. See EPP/IP 1.2 "Communication and Dissemination of Information" for details of the communication systems available.
- 3.0 To minimize the spread of rumors and undue public anxiety, the following precautions should be followed:
 - 3.1 All initial and follow-up notifications to County and State agencies **SHALL** be made with the Bell telephone system as the primary means, with predesignated back-ups available in the event the telephone systems are inoperable. A code word is utilized to ensure only authorized individuals receive the information.
 - 3.2 Information SHALL be provided to only individuals whose identity is known, and whose organization is listed on the Emergency Notification Call-List EPP/IP 1.1, Attachment 2. Any requests for information should be relayed to Corporate Communications at 724-682-5201.
 - 3.3 No news announcements on the incident **SHALL** be made prior to completion of all required notifications. News announcements will be developed as coordinated by the Corporate Communications Department.
- 4.0 In the event of a forced Control Room evacuation, the Onshift Communications and Records Coordinator will relocate to the Communications Area of the TSC area of the ERF building, to make the required emergency notifications.
 - 4.1 The Onshift Communications and Records Coordinator should contact the Emergency Director for form approvals and log the Emergency Director's name on the appropriate form.

Unit #1 - 724-682-5827 Unit #2 - 724-682-5327

NOTE:

If necessary, Security may radio the officer assigned to the Emergency Director/NSS under Appendix R to relay information as needed.

5.0 Upon the initial declaration of an Alert, Site Area Emergency or General Emergency, Security personnel in the CAS will complete Attachment 6 of this IP.

- All event notifications and escalations **SHOULD** be made to PEMA. Follow-Up Notifications **SHOULD** be directed to DEP/BRP. PEMA will ensure DEP/BRP is informed of the situation and contacts the plant for verification and assessment of the incident.
- 7.0 Should any emergency situation require contacting the Beaver County Emergency Services Center (i.e., fire, ambulance), **<u>DO NOT</u>** use 9-1-1. **<u>NOTIFY</u>** Beaver County Emergency Services Center at (724) 775-0880.
- 8.0 Once the County Emergency Operations Centers (EOC's) are activated, the Coordinators may inform the BVPS emergency communicator of an alternate phone number to be utilized.
- 9.0 Should there be questions concerning the required notifications and/or the appropriate paperwork (notification forms, logs, etc.), personnel from Emergency Preparedness may be contacted for assistance.

E. PROCEDURE

NOTE:

Initial Notifications are to be made to the first six listed Agencies on the Emergency Notifications Call List, EPP/IP 1.1, Attachment 2 and MUST be made within 15 minutes of the event declaration. Subsequent notifications MUST still be made.

NOTE:

The BVPS Radio System is the alternate to the commercial phone system for notifications of offsite emergency response organizations. EPP/IP 1.2 Attachment 3, Step 6.0 provides direction in its use.

NOTE:

If an emergency is reclassified and upgraded during the Follow-Up Notification process, the Communicator SHALL terminate the notification in progress and begin the upgraded Initial Notification process again per appropriate Attachment. If the Initial Notification Conference (INC) call is in progress, then the upgraded notifications SHALL be provided at this time. The 15-minute clock for the notifications will restart at the time of the upgraded declaration.

NOTE:

IF contact cannot be made with the State of West Virginia, contact Hancock County (WVa) stating West Virginia did not answer and request Hancock County Office of Emergency Services contact the State with the Initial Notification information. It does not need read again.

NOTE:

Faxing of the Initial Notification Form is NOT the "Official" Notification to the Offsite Agencies and does NOT meet the 15-minute notification criteria. The 15-minute notification criteria is met and "Official" notification made when a representative of BVPS speaks with a representative of each Offsite Agency.

1.0 Initial Notifications

- 1.1 Complete Initial Notifications and document as thoroughly as possible according to the instructions provided.
- 1.2 Control Room personnel should utilize Part A of the applicable notification Attachment shown below.

•	Unusual Event Notification	Attachment 8
•	Alert Notification	Attachment 9
•	Site Area Emergency Notification	Attachment 10
•	General Emergency Notification	Attachment 11

1.3 TSC personnel should refer to Attachments 12 and 13.

2.0 Follow-Up Notifications

NOTE:

The follow-up notification provides technical information to those qualified to use the data and serves as a means to verify the authenticity of an emergency notification. The code word also provides verification.

NOTE:

Information for the Gaseous Follow-Up Notification Form is available via a MIDAS printout from Health Physics or EA&DP personnel.

2.1 Control Room personnel should utilize the applicable part of the Notification Attachment shown below.

•	Unusual Event Notification	Attachment 8, step 9
•	Alert Notification	Attachment 9, step 10
•	Site Area Emergency Notification	Attachment 10, step 10
•	General Emergency Notification	Attachment 11, step 10

2.2 TSC personnel should refer to Attachment 12, Step 3.0.

3.0 Subsequent Notifications

- 3.1 If it becomes necessary to reclassify the emergency, the Initial Notification Form is used and notifications are made in the same manner specified in Section E-1 of this procedure.
- 3.2 The Follow-Up Notification Form should be updated periodically (i.e., 2 times per shift) or at the discretion of the Emergency Director. This notification does not represent a change in classification.

4.0 Transfer of Responsibility

- 4.1 When TSC personnel are activated and have arrived onsite, a turnover SHALL be performed from the on-shift response organization to the TSC response organization.
- 4.2 When informed by TSC Communications and Records Coordinator, transfer communication responsibilities from the Control Room to the Technical Support Center.
- 4.3 Upon notification that the communication responsibilities have transferred to the TSC, the relieved Communications and Records Coordinator SHALL ensure the telephone "EPP switches" are in the "NORM" position.

5.0 Termination

5.1 When the emergency situation at BVPS has been terminated, make the appropriate termination calls per Attachment 5, Emergency Termination Checklist.

F. FINAL CONDITIONS

- 1.0 Use of this procedure **SHALL** be terminated when the emergency situation is corrected or when directed by the Emergency Director.
- 2.0 Attachment 5 (Emergency Termination Checklist) is to be completed for termination calls to offsite agencies for all emergency events.

NOTE:

Upon termination of the emergency situation and the subsequent termination of this IP, <u>All</u> originals of completed Attachments **SHALL** be forwarded to Emergency Preparedness.

EPP/Implementing Procedure

EPP/IP 1.1

NOTIFICATIONS

G.

ATT	ACHMENTS
1.0	INITIAL NOTIFICATION FORM
2.0	EMERGENCY NOTIFICATION CALL-LIST
3.0	FOLLOW-UP NOTIFICATION FORM
4.0	NRC EVENT NOTIFICATION WORKSHEET (Example)
5.0	EMERGENCY TERMINATION CHECKLIST
6.0	NEAR-SITE BUILDING EMERGENCY NOTIFICATIONS
7.0	ACTIVATION OF THE ERO USING BEEPERS AND ERO VOICE MAIL SYSTEM
8.0	UNUSUAL EVENT NOTIFICATIONS
9.0	ALERT NOTIFICATIONS
10.0	SITE AREA EMERGENCY NOTIFICATIONS
11.0	GENERAL EMERGENCY NOTIFICATIONS
12.0	TSC EVENT NOTIFICATIONS
13.0	NOTIFICATION FORM FAXING INSTRUCTIONS (Example)
14.0	ERO BEEPER ACTIVATION INSTRUCTIONS (Example)
15.0	ACTIVATION OF THE INITIAL NOTIFICATION CONFERENCE (INC) CALL INSTRUCTIONS (Example)

BEAVER VALLEY POWER STATION

ATTACHMENT 1 (1 of 1)

INITIAL NOTIFICATION FORM

	THIS IS A DRILL THIS IS AN ACT	UAL EVENT
1.	THIS IS BEAVER VALLEY POWER STATION, MY NAME IS	(Name).
	THE CODE WORD IS	
	MAY I PLEASE HAVE YOUR NAME	Document on IP 1.1Attachment 2).
	THE TIME IS	Document on IP 1.1Attachment 2).
2.	EMERGENCY CLASSIFICATION	
	UNUSUAL EVENT SI	TE AREA EMERGENCY
	ALERT	ENERAL EMERGENCY
	THE EVENT HAS BEEN TERMINATED.	*
	UNIT #1 UNIT #2 TIME: DAT	TE:
	THIS PRESENTS A/AN INITIAL DECLARATION	
	ESCALATION IN	CLASSIFICATION STATUS
	NO CHANGE	
3.	THE EMERGENCY ACTION LEVEL (EAL) NUMBER IS:	
	BRIEF NON-TECHNICAL DESCRIPTION OF EVENT	
4.	THERE IS NO	
	AN AIRBORNE NON-ROUTINE RADIOL	OGICAL RELEASE IN PROGRES
	A LIQUID	
5.	PROTECTIVE ACTION RECOMMENDATION (PAR)	
6.	WIND DIRECTION IS FROM: degrees AT 150'; WIND SP	EED IS: mph AT 35'
	THIS IS A DRILL THIS IS AN ACT	UAL EVENT
٠	<u>APPROVED</u> <u>DATE</u>	
	NOTE:	
	THIS PAPER IS INTENDED TO BE PINK FOR BVPS ONLY, IT IS WHITE TO	ACCOMODATE FAXING.

INTENTIONALLY BLANK

E_{1-/4}P 1.1 A5.715DQ ATTACHMENT 2 (1 of 10)

INITIAL NOTIFICATION

THE AGENCIES LISTED BELOW MUST BE NOTIFIED WITHIN FIFTEEN (15) MINUTES AFTER THE EMERGENCY HAS BEEN DECLARED.

		CIRC	LEONE	CIRCLE	ONE			
W. 724-4	ORGANIZATION	PRIMARY NUMBER	ALTERNATE NUMBER	EMERGI : CLA	The property of the second	CONTACT NAME TIME*	FAX	ini.
1.	Beaver County Emergency Management Agency Relay To: R. Chiodo, Director EOC Number:	724-775-0880 9-1-1 Dispatcher Beaver, PA	724-774-1049 BCEMA Director Director's Office	UE ALERT	SAE GE		Y	
2.	PA Emergency Management Agency Duty Officer	1-717-651-2001	Relay Thru BC-911 724-775-0880 BCEMA Director	UE ALERT	SAE GE		Y N	
3.	Columbiana County Emergency Management Agency Relay To: J. Carter, Director EOC Number:	1-330-424-7255 Sheriff's Dispatcher Lisbon, OH	1-330-424-9725 CCEMA Director Director's Office	UE ALERT	SAE GE		Y N	
4.	Ohio Emergency Management Agency Duty Officer EOC Number:	1-614-889-7150 Columbus, OH	1-614-466-2660 Ohio Highway Patrol Dispatcher	UE ALERT	SAE GE		Y	
5.	West Virginia Office of Emergency Services Duty Officer	1-304-558-5380 Charleston, WV	1-304-564-4100 Sheriff's 9-1-1 Dispatcher New Cumberland, WV	UE ALERT	SAE GE		Y N	
6.	Hancock County Office of Emergency Services Relay To: K. Sutton, Director EOC Number:	1-304-564-4100 Sheriff's 9-1-1 Dispatcher N. Cumberland, WV	1-304-564-4068 HCOES Dispatcher Dispatcher's Office	UE ALERT	SAE GE		Y N	

	0 00 10 10	Data
* Contact Time = Time of Initial Contact With Individual	Comm&Records Coord Signature:	Date:

FOLLOW-UP NOTIFICATION

		CIRCLE ONE		CIRCLE ONE				A A SECTION	
	ORGANIZATION	PRIMARY NUMBER	ALTERNATE NUMBER	CURRE CLASSIFIC	CAPT CONTRACTOR	CONTACT NAME	rime*	FAX	INÍ.
1.	Beaver County Emergency Management Agency Relay To: R. Chiodo, Director EOC Number:	724-775-0880 9-1-1 Dispatcher Beaver, PA	724-774-1049 BCEMA Director Director's Office	UE SA ALERT GI				Y N	
2.	PEMA / DEP/BRP	1-717-651-2001	Relay Thru BC-911 724-775-0880 BCEMA Director	UE ALERT	SAE GE			Y	
3.	Columbiana County Emergency Management Agency Relay To: J. Carter, Director EOC Number:	1-330-424-7255 Sheriff's Dispatcher Lisbon, OH	1-330-424-9725 CCEMA Director Director's Office	UE ALERT	SAE GE			Y N	
4.	Ohio Emergency Management Agency Duty Officer EOC Number:	1-614-889-7150 Columbus, OH	1-614-466-2660 Ohio Highway Patrol Dispatcher	UE ALERT	SAE GE			Y N	
5.	West Virginia Office of Emergency Services Duty Officer	1-304-558-5380 Charleston, WV	1-304-564-4100 Sheriff's 9-1-1 Dispatcher New Cumberland, WV	UE ALERT	SAE GE			Y N	
6.	Hancock County Office of Emergency Services Relay To: K. Sutton, Director EOC Number:	1-304-564-4100 Sheriff's 9-1-1 Dispatcher N. Cumberland, WV	1-304-564-4068 HCOES Dispatcher Dispatcher's Office	UE ALERT	SAE GE			Y N	

Contact Time = Time of Initial Contact With Individual	Comm&Records Coord Signature:	Date:	
Contact Time - Time of minus Contact With Individual	Commence Coord Digitature.	Duto.	_

The following are to be notified only for the emergency classifications listed in the Emergency Class column.

		CIRCLE ONE.		CIRCLE ONE	The second se	H. History	
	ORGANIZATION	5 kg 보고 보는 이번 경기는 그것 않는 사람이 있는 것들이 있는 사람이 되는 사람들이 되는 사람들이 되었다. 이번 경기를 하지 않는 것을 들고 모습니다. 이번 경기를 보고 되는 것을 했다.		EMERGENCY CLASS	CONTACT NAME TIME*	INITIALS	
7.	U.S. Nuclear Regulatory Commission During Normal Working Hours	NRC/ENS FAX	1-301-816-5100 or 1-301-951-0550 or 1-301-415-0550 1-301-816-5151	UE SAE ALERT GE			
8.	Contact one of the following: Superintendent Unit 1 Operations or Superintendent Unit 2 Operations Notifies	5111	Albert Hartner 724-378-2639 G. E. Storolis W. Pearce 724-643-4543				
	Plant Mgr. Notifies Sr. V.P. BVPS	1895 5234	L. Myers 330-757-7177	UE ONLY			
9.	Corp. Comm. (Notify One) A. J. Fenwick T. M. Schneider R. G. Wilkins	5201 330-761-4055 419-321-7129	724-899-2396 330-659-6810 440-774-2606 (Pager 1-419-640-3229)	UE ONLY			
10.	BVPS Emergency Preparedness (Notify One) S. L. Vicinie H. I. Szklsinki J. C. Contreras S. J. Paletta D. W. Skorupan	5767 5772 5773 5774 5808	724-869-7165 724-457-9210 412-795-4931 304-387-4393	UE ONLY			
11.	NRC BVPS Site Rep. (Notify One) D. Kern G. Wertz	5570 5570	724-728-3135 724-770-0393	UE ONLY			

Contact Time = Time of Initial Contact With Individual	Comm&Records Coord Signature:	Date:

The following organizations are notified only for the emergency classifications listed in the Emergency Class. column.

	ORGANIZATION	NUMBER	CIRCLE ONE EMERGENCY CLASS	CONTACT NAME TIME	ÎNÎTIALS
12.	Bruce Mansfield Power Station	724-643-2300 724-643-5851	ALERT SAE GE		
13.	Midland Water Plant	724-643-4920 (8:00-11:00 a.m. M thru F) Alternate: Beaver Co. EMA - 724-775-0880	Liquid Release		
14.	East Liverpool Water Plant Contact: Mr. Clark	1-330-385-5050 1-330-385-8812	Liquid Release		
15.	Chester, W. VA. Water Plant	1-304-564-4100 (24 hours) 1-304-387-2820	Liquid Release		
16.	U.S Corps of Engineering a. New Cumberland Dam (Downriver) b. Montgomery Dam (Upriver)	1-740-537-2571 724-643-8400 Alternate: Beaver Co. EMA-724-775-0880	Liquid Release		
17.	U.S. Coast Guard Marine Safety	412-644-5808 (Daylight) 1-800-253-7465 (Night) 1-800-424-8802 (Nat'l Response) Alternate: Beaver Co. EMA-724-775-0880	All offsite Releases - Actual or Imminent		
18.	INPO	1-800-321-0614 (24 hr.) (Switchboard) FAX - 1-770-644-8549 FAX - 1-770-644-8567 FAX - 1-770-644-8594	ALERT SAE GE		

*	Contact '	Time = 1	ime of	Initial	Contact	With	Individual

Commb	Dacorde	Coord	Signature:
COMMIN	checolus	Coora	Signature.

The following organizations are notified only for the emergency classifications listed in the Emergency Class. column.

	ORGANIZATION estinghouse Atomic Power Division Site Rep. (Don Durkosh)	724-682-5461 (W) 412-305-3198 (B)		
b.	Ed Dzanis	412-741-1861 (H) 724-544-3010 (Cell) 412-374-5216 (W) 412-372-3534 (H) 412-634-359 ((W) Beeper) 412-855-0505 (Car)	ALERT SAE GE	·
20. Am	Bruce Garry nerican Nuclear Insurers Radiological Nuclear Emergencies	412-374-6605 (W) 724-327-9051 (H) 412-760-4863 1-860-561-3433 (Ext. 500)	ALERT SAE GE	

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Comm&Records	Coord Signature:	

			CIRC	LE ONE				
	ORGANIZATION		EMER	GENCY	CONTACT			
		NUMBER	CI	LASS	NAME	TIME*	INITIALS	
21.	Pennsylvania DEP/BRP	1-717-651-2001	UE	ALERT				
			SAE	GE				
22.	Ohio Dept. of Health	614-644-2727	UE	ALERT				
	Bureau of Radiation Protection		SAE	GE				
23.	Pennsylvania State Police	724-773-7400	UE	ALERT			<u> </u>	
	(Brighton Barracks)		SAE	GE				
24.	BOC Gases	1-304-387-0889 (24 Hrs.)	UE	ALERT				
			SAE	GE				
25.	Ashland Oil Co.	1-800-274-5263	UE	ALERT				
			SAE	GE				
26.	Freedom Station Valvoline Oil	724-774-2020	UE	ALERT				
			SAE	GE				
27.	Buckeye Pipeline Co.	1-800-523-9420 (24 Hrs.) 1-800-551-1285 (24 Hrs.)	UE	ALERT				
		1-800-331-4115 (24 Hrs.)	SAE	GE				

* Contact Time = Time of Initial Contact With Individual	Comm&Records Coord Signature:	Date:
Contact Time - Time of minum Contact With Marvidan	Commerceords Coold Signature.	Date.

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	ORGANIZATION	NUMBER	EMER	LE ONE GENCY ASS	CO NAME	ONTACT TIME*	INITIALS
28	Peoples Natural Gas	1-800-300-3333	UE SAE	ALERT GE			
29.	DOE RAP/IRAP Brookhaven Area Office	1-631-344-2200 (24 Hrs.)	UE SAE	ALERT GE			
30.	Medic-Rescue Ambulance Service	Relay through Beaver Co. EMA-724-775-0880 Alternate: 724-773-3104 724-728-3620 (Office)	UE SAE	ALERT GE			
31.	Shippingport Fire Department	Relay through Beaver Co. EMA-724-775-0880 Alternate: 724-773-3100	UE SAE	ALERT GE			
32.	Shippingport Borough	Relay through Beaver Co. EMA-724-775-0880 Alternate: Police 724-643-1371 Manager 724-643-4333 (W), 724-643-9661 (H)	UE SAE	ALERT GE			

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* Contact Time = Time of Initial Contact With Individual	Comm&Records Coord Signature:	Date:

	ORGANIZATION	NUMBER	ÉME	LE ONE RGENCY LASS	CONT NAME	'ACT TIME*	INITIALS
33.	The Medical Center, Beaver, PA Emergency Room	724-728-7110 Alternate: Relay through Beaver Co. EMA-724-775-0880	UE SAE	ALERT GE			INITIALS
34.	University of Pittsburgh Medical Center - Presbyterian Emergency Room	412-647-3333	UE SAE	ALERT GE			
35.	UPMC - Presby Radiation Emergency Response Program, Dept. of Radiation Medicine Radiation Safety Office	412-647-3595 412-624-2728	UE SAE	ALERT GE			
36.	West Virginia Bureau For Public Health /Radiation Protection	1-304-558-3526	UE SAE	ALERT GE			
37.	CSX Transportation Chief Dispatcher	1-800-232-0144	UE SAE	ALERT GE			

* Contact Time = Time of Initial Contact With Individual	Comm&Records Coord Signature:	Date:
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				LE ONE			
ORGANIZATION		NUMBER	EMERGENCY CLASS		CONTACT NAME TIME*		. inītiāls
38.	US National Weather Service-Pittsburgh Forecast Office Coraopolis Office	412-262-1882 (24 Hrs.)	UE SAE	ALERT GE			
39.	US Corps of Engineers Emergency Management Divisions	412-395-7144	UE SAE	ALERT GE			
40.	EPA Region III	215-814-9016	UE SAE	ALERT GE			
41.	National Response Center-DC (All Hazards)	800-424-8802 (24 Hrs.)	UE SAE	ALERT GE			
42.	PA Dept. of Environmental Protection	412-442-4000 (24 Hrs.)	UE SAE	ALERT GE			
43.	PennDOT - Bridgeville Office Dist. Maint. Engr William Sacco	412-429-5002 (W) 724-693-8214 (H)	UE SAE	ALERT GE			
44.	PennDOT - Rochester Office Maint. Manager - Frank Bologna	724-774-6610 (W) 724-869-5296 (H)	UE SAE	ALERT GE			

* Contact Time = Time of Initial Contact With Individual	Comm&Records Coord Signature:	Date:
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EPP/Implementing Procedures NOTIFICATIONS

EPP/IP 1.1 A5.715DQ

EMERGENCY NOTIFICATION CALL-LIST

(Cont.) ATTACHMENT 2 (10 of 10)

APPENDIX R PAX PHONES

Unit #1

East Cable Vault (BIP Area)

5827

West Cable Vault

5827

Unit #2

Alternate Shutdown Panel

5327

NOTE:

If necessary, CAS may radio the officer assigned to the Emergency Director/NSS under Appendix R, to relay information, as needed.

BEAVER VALLEY POWER STATION

ATTACHMENT 3 (1 of 5)

	THIS IS A DRILL THIS IS AN ACTUAL EVENT
	NOTE:
NO I of thi	MMEDIATE CALLBACK IS REQUIRED. If you have not received a call verifying receip is FAX within 30 minutes, please call (724) 643-8000.
<u> </u>	
1.	THIS IS: AT BEAVER VALLEY POWER STATIO
	UNIT 1/UNIT 2, THE CODE WORD IS MAY I HAVE YOU
	NAME PLEASE
2.	THE FOLLOWING DATA REPRESENT THE MOST CURRENT AND ACCURATE
	INFORMATION, PROJECTIONS, AND/OR PROGNOSIS AVAILABLE AS OF:
	TIME: DATE:
3.	EMERGENCY CLASSIFICATION:
	UNUSUAL EVENT SITE AREA EMERGENCY
	ALERT GENERAL EMERGENCY
	DECLARED AT:TIME DATE
4.	CAUSE OF EMERGENCY (EAL)
	APPROVED # FOLLOW-UP NOTIFICATION
	NOTE:
	THIS PAPER IS INTENDED TO BE PINK FOR BVPS ONLY, IT IS WHITE TO ACCOMODATE FAXING.

BEAVER VALLEY POWER STATION

ATTACHMENT 3 (2 of 5)

CONDITIONS	STABLE		NSTABLE		
REACTOR:	SHUTDOWN [T POWER		
EQUIPMENT 1	DAMAGE:				
NONE		MINOR		MAJOR	
COOLING:	NORMAL COO	DLDOWN (FORC	ED FLOW		
	NORMAL COC	OLDOWN (NATU	TRAL CIRCUI	ATION)	
	SAFETY INJEC	CTION COOLDO	WN (FEED A	ND BLEED)	
	N/A				
ACCIDENTA	L RADIOLOGI	CAL RELEAS	E: (TSC Only	y, See EA&DP)	
GASEOUS TO	ATMOSPHERE				
LIQUID TO O	HIO RIVER				
N/A					
SURFACE CO	NTAMINATION	ESTIMATES:			
				<u> </u>	
NON-PLANN	ED RADIOLOG	ICAL RELEA	SE: (TSC Or	nly, See EA&DP)
	BATCH RELEA	SES WAS IN F	ROGRESS		
ANY ROUTIN	IE BATCH RELE	EASE HAS BEE	N DISCONT	INUED	
N/A					
REQUEST FO	R OFFSITE SUP	PORT: Specify	Needs:	M	
-					
		·			

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ATTACHMENT 3 (3 of 5)

	NOTE:	Items numbered	to coincide with MID	AS print-out.
[1]	Time Prepared:			
[2]	Type of Accident:	(Circle One)		
	• LOCA/WITH DBA AC	TIVITY • STM	GEN TUBE RUPTURE	• FUEL HANDLING ACCIDENT
	• SMALL LINE BREAK	LOCA • LOS	S OF AC POWER	WASTE GAS DECAY TANK
	• LOCA/WITH GAP ACT	TIVITY • RCC	A EJECT	• FSAR BASIS
	• LOCA/WITH RCS ACT	TIVITY • MA	IN STEAMLINE	• TID LOCA
[3]	Time of Rx Trip or Ac	ccident start:		
[4]	Release Started: (Y)	(N) [5] 7	Γime:	(actual) (proj.)
[6]	Release Stopped: (Y)	(N) [7]]	Ouration:	(actual) (proj.)
[8]	Potential For Addition	nal Release: (Y)	(N)	
[9]	Projected Release Bas	ed on:		
[10]	Noble Gas:	uCi/	sec	
[11]	Iodine:	uCi/	sec	
[12]	Total:	uCi/	sec	
[13]	I/NG Ratio:			
[14]	Monitor ID:	U1	or U2 (Circle One)	
[15]	Reading:	cpm o	r uCi/cc (Circle One) [16] Flow: cfm
[17]	35ft Wind Speed: _	[18]	Delta-T:	[19] Stability:
[20]	150ft Direction:	[21]	500ft Direction:	[22] Precip: (Y) (N)
[23]	Source:			
			NOTE:	
	OTTE DADED TO EXPERIME	יה יה שני שני היה מי	RVPS ONLY IT IS WHITE TO	ACCOMODATE FAXING.

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ATTACHMENT 3 (4 of 5)

FOLLOW-UP NOTIFICATION FORM

			Projected				
	Dist	Sectors (a)	TEDE (b)	Thyroid CDE (c)			
[24]	EAB		REM	REM			
[25]	2 mi		REM	REM			
[26]	5 mi		REM	REM			
[27]	10 mi		REM	REM			
[28]	EDE-TO-TE	DE Ratio:		•			
[29]	Actual Field	Monitoring Result	s:				
	Time (a)	Point (b)	WB REM/Hr (c)	Thy REM/Hr (d)			
<u>OFFS</u>	ITE PROTEC	TIVE ACTION RE	ECOMMENDATION:				
							
				•			
				•			
			NOTE:				

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LIQUID

ATTACHMENT 3 (5 of 5)

DATE	/ TIME			
1.	Potential For Additional Release:	Yes No]	
	LIQUID RELEASE ASSESSMENT:			
	PROCEDURE	ATTACHMENT(s)		
2.	RADIONUCLIDES IN SAMPLE:			
	H-3 =	uCi/ml	=	_ uCi/ml
			=	
			=	
			· =	
	=	uCi/ml uCi/ml	=	
		ucbiii		_ ucbiii
	<u>Actua</u>	<u>l</u>	<u>Projected</u>	
3.	TIME OF RELEASE START			_
			<u> </u>	
		Hrs	Hrs.	
		gpm		
	DILUTION RATE (Due to BVPS)OHIO RIVER FLOW RATE	gpm cuft/sec		_ gpm
4.	TS/ODCM FRACTION (TS/ODCM Limit = 10 x NRC-EC)			
	No Émergency			
	Unusual Event (TS/ODCM Fra	action is > 2 , and release ≥ 60 minus	tes)	
	Alert Emergency (TS/ODCM F	Fraction is > 200 , and release ≥ 15 i	minutes)	
5.	EPA MPC FRACTION			
	No PAR required (EPA-MPC i	s < 12)		
	PAR REQUIRED PER EPP/IP	94.1 (EPA-MPC > 12: NOTIFY TE	HE MIDLAND	
	WATER TREATMENT PLAN	NT AND RECOMMEND THE PLA	ANT STOP	
		RIVER UNTIL NOTIFIED BY DE		
	REFER TO EPP/IP 1.1 ATTA	CHMENT 2 FOR OTHER NOTIF	ICATIONS.)	
		NOTE:		
	THIS PAPER IS INTENDED TO RE PINK FO	OR RVPS ONLY, IT IS WHITE TO AC	COMODATE FAXING.	

EPP/Implementing Procedures

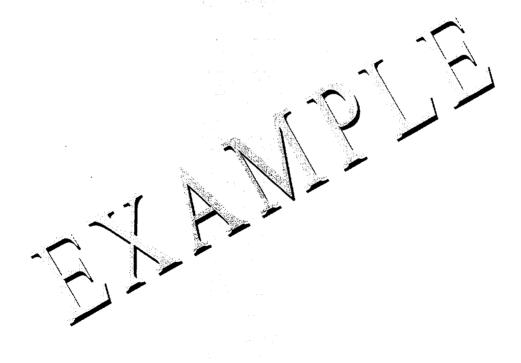
EPP/IP 1.1

NOTIFICATIONS

INTENTIONALLY BLANK

ATTACHMENT 4 (1 of 2)

NRC FORM 361 U.S. NUCLEAR REGULATORY COMMISSION OPERATIONS CENTER **EVENT NOTIFICATION WORKSHEET** NOTIFICATION TIME FACILITY OR ORGANIZATION CALLER'S NAME CALL BACK =: ENS EVENT TIME & ZONE EVENT DATE Lost Offsite Comms AESS (v) 1-Hr Non-Emergency 10 CFR 50.72(b)(1) (vi) Fire AFIR (i) (A) TS Required S/D (vi) **ASHU** Toxic Gas ACHE POWER/MODE BEFORE POWER/MODE AFTER (i) (B) TS Deviation ADEV (vi) Rad Release ARAD Degraded Condition ADEG (vi) Oth Hampering Safe Op. AHIN (ii) (A) Unanalyzed Condition AUNA 4-Hr Non-Emergency 10 CFR 50.72(b)(2) (ii) (B) Outside Design Basis AOUT **EVENT CLASSIFICATIONS** (ii) (C) Not Covered by Ops/Eps ACNO (i) Degrade While S/D ADAS GENERAL EMERGENCY GEN/AAEC ARPS (iii) Earthquake ANEA (ii) RPS Actuation (scram) SITE AREA EMERGENCY SIT/AAEC (iii) Flood ANFL (ii) ESF Actuation AESF ALERT ALE/AAEC (iii) Hurricane ANHU (iii) (A) Safe S/D Capability AINA UNUSUAL EVENT UNU/AAED Ice/Hail ANIC (iii) (B) RHR Capability AINB (iii) 50.72 NON-EMERGENCY ANLI AINC (See next Columns) (iii) Lightning (iii) (C) Control of Rad Release PHYSICAL SECURITY (73.71) D??? (iii) Tornado ANTO (iii) (D) Accident Mitigation AIND TRANSPORTATION NTRA (iii) Oth Natural Phenomenon ANOT (iv) (A) Air Release > 2X App B AAIR (iv) (B) Liq Release > 2X App B ALIQ 20.403 MATERIAL/EXPOSURE B??? (iv) ECCS Discharge to RCS ACCS Offsite Medical OTHER NDAM, NLCO, NBNL, NINF, NLTR **AENS** AMED (v) Lost ENS (v) NONR, CDEF, FLOM, EIRR, GCON Lost Emerg. Assessment AARC (vi) Offsite Notification APRE



Include: Systems affected, actuati	ons & their ini	tiating si	gnals, causes, eff	ect of event on plant, actions taken or planned, e	tc.		
NOTIFICATIONS	YES	NO	WILL BE	ANYTHING UNUSUAL OR NOT UNDER	STOOD?	YES	NO
NRC RESIDENT						(Explain above)	<u> </u>
STATE(s)				DID ALL SYSTEMS FUNCTION AS RE	QUIRED?	YES	NO
LOCAL							(Explain above)
OTHER GOV AGENCIES				MODE OF OPERATION	ESTIMATE F	OR	ADDITIONAL INFO
MEDIA/PRESS RELEASE				UNTIL CORRECTED:	RESTART DA	TE:	ON BACK?

NRC FORM 361 (8-89)

EPP/Implementing Procedures

NOTIFICATIONS

EPP/IP 1.1 A5.715DS

ATTACHMENT 4 (2 of 2) **EVENT NOTIFICATION WORKSHEET** USNIC OPERATIONS CENTER RADIOLOGICAL RELEASES: CHECK OR FILL IN APPLICABLE ITEMS (Specific details/expla ns 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 lodine 10 uCi/sec **Particulate** 1 uCi/sec Liquid (excluding tritium & disolved noble gases) 10 uCi/min Liquid (tritium) 0.2 Ci/min **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 RELEATED EQUIPMENT NOT OPERATIONAL: EVENT DESCRIPTION (Conti

EMERGENCY TERMINATION CHECKLIST

NOTE: The Offsite agencies DO NOT maintain the Emergency Termination Checklist. Instruct the agency to log the termination information and inform the cognizant individual of their organization of the termination date and time.

"This is Beaver Valley Power Station. This notification is to inform you that the emergency situation at Beaver Valley Power Station has been terminated on					
Date hours. Please complete all applicable procedures before terminating."					
ORGANIZATION	PERSON CONTACTED	NUMBER	CONTACT TIME *	INITIALS	
Beaver County Emergency Management Agency		724-775-0880			
PA Emergency Management Agency		1-717-651-2001			
Columbiana County Emergency Management Agency		1-330-424-7255			
Ohio Emergency Management Agency		1-614-889-7150			
Hancock County Office of Emergency Services		1-304-564-4100			
West Virginia Office of Emergency Services		1-304-558-5380			
U.S. Nuclear Regulatory Commission		1-301-816-5100			
Corporate Communications		724-682-5201			
Bruce Mansfield Power Station		724-643-2300			
* Contact Time = Time of Initial Contact With Individual	Approved (ED/ERM)	1		Date:	

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EMERGENCY TERMINATION CHECKLIST

NOTE: Notifications regarding the termination of the emergency situation at BVPS SHALL be made to any agency receiving Initial or Follow-Up Notifications.

ORGANIZATION	PERSON CONTACTED	NUMBER	CONTACT TIME.*	INITIALS
	·			
	-			
		,		
		,		

Contact Time = Time of Initial Contact With Individual	Approved (ED/ERM)	Date:

BEAVER VALLEY POWER STATION

ATTACHMENT 6 (1 of 2)

SECURITY NEAR-SITE BUILDING EMERGENCY NOTIFICATION INSTRUCTIONS

1) At the initial declaration of an Alert, or higher, emergency classification or if a Site protective action is required as determined by the Emergency Director (NSS), Security personnel SHALL page each of the following facilities using the building page number shown below or contact a listed individual.

			TIME NOTIFIED	
A)	Training Buildi	ing The Control of th		
	PAX 7003	Building Page		
B)	Simulator Buile	ding		
	PAX 7001	Building Page		
C)	Site Engineerin	te Engineering Building (SEB)		
	PAX 7007	Building Page		
D)	Warehouse 22	in the state of th		
	PAX 7002	Building Page		

BEAVER VALLEY POWER STATION

ATTACHMENT 6 (2 of 2)

SECURITY NEAR-SITE BUILDING EMERGENCY NOTIFICATION INSTRUCTIONS

2) Security personnel will circle or complete the following information per the Emergency Director (designee) and provide over the page/phone. Repeat message.

PART I			
This is an ACTUAL EVENT. Beaver Valley Power Station Unit # 1 / 2 has declared an			
emergency classification of ALERT / SITE AREA / GENERAL EMERGENCY at			
(Time) All Emergency Response Personnel SHALL report to			
their Emergency Response positions. This is an ACTUAL EVENT.			

PART II

NOTE: READ ONLY IF A SITE EVACUATION IS REQUIRED.

This is an ACTUAL EVENT. A Site Evacuation has been declared by the Emergency Director. All non-emergency response personnel:

- 1) Are dismissed to GO HOME.
- 2) REPORT TO THE Hookstown Grange Offsite Assembly Area, or
- 3) REPORT TO THE Western District Headquarters Raccoon Substation) Offsite

 Assembly Area to await further instructions.

This is an ACTUAL EVENT.

ATTACHMENT 7 (1 of 8)

ACTIVATION OF THE ERO USING BEEPERS AND ERO VOICE MAIL SYSTEM

A. PURPOSE

This attachment is for using beepers and the Voice Mail System to make emergency event notifications to Emergency Response Organization (ERO) personnel and to verify that adequate ERO staffing levels are available.

B. <u>RESPONSIBILITY</u>

The Onshift Communications and Records Coordinator is responsible to ensure the actions outlined in this attachment are implemented.

C. EQUIPMENT AND MATERIALS

- 1.0 The following beeper notification system equipment is kept in CAS:
 - 1.1 ERO beeper.
- 2.0 The following are found in the Control Room EPP sealed drawer.
 - 2.1 Event Classification Packages

ATTACHMENT 7 (2 of 8)

D. <u>PROCEDURE</u>

1.0 Beeper Activation, using ERO Voice Mail System by CAS.

NOTE:

If at any time prior to beeper activation utilizing the 5080 suffix, the beepers activate with the appropriate code and with 4370 or 4380 as the last four (4) digits, continue with the Initial Notifications in progress.

- 1.1 Upon the failure of the BVERS to actuate the ERO beepers, or at the discretion of the NSS/Emergency Director, the Onshift Communications and Records Coordinator SHALL call the Central Alarm Station (CAS), providing to the Nuclear Security Shift Supervisor or designee the following:
 - 1.1.1 Your name and position.
 - 1.1.2 EPP Code Word.
 - 1.1.3 Event Classification
 - 1.1.4 Appropriate beeper code:

999995080 ("Actual Event")

000005080 ("Actual Event--Site Inaccessible")

1.1.5 Request a call back when CAS pager actuates with proper code.

ATTACHMENT 7 (3 of 8)

1.1.6 Instructions as to which message to be used for the ERO Voice Mail System:

"Actual Event"

"Actual Event--Site Inaccessible"

- 1.2 Instruct the Nuclear Shift Security Supervisor to activate the beepers with the appropriate code.
 - 1.2.1 Instruct the Nuclear Shift Security Supervisor to repeat the beeper activation two (2) times, 10 minutes apart to ensure that all appropriate personnel receive the call (i.e., 11:00 original call, 11:10 first recall, 11:20 second recall).
- 1.3 Once the ERO Voice Mail message has been changed, the Nuclear Security Shift Supervisor, or his designee, SHALL activate the ERO beepers.

NOTE:

The BVPS Radio System is the alternate to the commercial phone system for notification of offsite emergency response organizations. EPP/IP 1.2, Attachment 3, Step 6.0 provides direction in its use.

1.4 Twenty minutes after the CAS pager has actuated, perform the following:

NOTE:

The ERO Voice Mail System has a maximum of 4 lines available. If no lines are available, a busy signal will be received.

- 1.4.1 Remove the last three (3) pages of this Attachment "ERO Position List".
- 1.4.2 From a touch-tone phone or from a PAX phone dial 9-682-5080.

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ATTACHMENT 7 (4 of 8)

1.4.3 When the message begins press #.

NOTE:

Any calls responding to the beeper activation that are received by CAS or the Control Room are also to be included in the ERO Beeper Holders List.

NOTE:

Pressing 1 will repeat the voice mail message, pressing 2 will go to the next message. DO NOT ERASE voice mail messages. You do not have to wait for the prompt to press 1 or 2.

1.4.4 When prompted to enter a Mail Box Number, enter * 1 1 3 for an Actual Event or * 1 1 4 for an Actual Event-Site Inaccessible.

NOTE:

ERO Call List and ERO Beeper Holders List are located on the EP Department Web Page.

1.5 On the "ERO Position List", record the callers name, ETA and if they are "fit-for-duty" in the columns beside their ERO position. If a caller reports not "fit-for-duty", write N/A in the ETA column.

NOTE:

The first 18 positions on the "ERO Position List" is the "Minimum Staffing" for TSC activation.

1.6 When done with messages on the ERO Voice Mail System, press * * to exit Voice Mail.

ATTACHMENT 7 (5 of 8)

1.7 Verify the first 18 positions on the "ERO Position List" are filled.

NOTE:

Attempts to contact designated coordinators or alternates of a position should be made using the current Emergency Response Organization Call List.

- 1.8 If no one for a designated position on the Minimum Staffing Section of the "ERO Position List" has responded, make follow-up calls to the designated coordinator **OR** alternates **UNTIL** a person qualified to fill that position has been contacted.
- 1.9 When all responses have been recorded on the "ERO Position List" AND the Minimum Staffing Checklist, perform the following:
 - 1.9.1 Deliver copies of all paperwork to the ED.
 - 1.9.2 Retain the original paperwork and forward to the Emergency Preparedness upon termination of the event.
- 1.10 When the emergency terminates or at the direction of the NSS/Emergency Director or Communications and Records Coordinator, have CAS return the ERO Voice Mail message to the **NORMAL** message.
- 1.11 In the case of an actual emergency, Control Room personnel **SHOULD NOT** erase the incoming voice mail messages. They are to be retained for permanent records of the calls received during the emergency.
- 2.0 Return to EPP/IP 1.1, Notification Attachment in progress.

ERO POSITION LIST

ATTACHMENT 7 (6 of 8)

POSITION	NAME	ЕТА	FFD
EMERGENCY DIRECTOR			
COMMUNICATIONS & RECORDS COORDINATOR			
COMMUNICATIONS ASSISTANT			
COMMUNICATIONS ASSISTANT			
COMMUNICATIONS ASSISTANT			
EA&DP COORDINATOR			
TSC COORDINATOR			
RADCON COORDINATOR			
MAINTENANCE COORDINATOR			
ENGINEERING COORDINATOR			
OSC COORDINATOR			
ROC COORDINATOR			
COMPUTER COORDINATOR			
MECHANICAL ENGINEER	,		
ELECTRICAL ENGINEER			
NUCLEAR ENGINEER	,		
CHEMISTRY COORDINATOR			
EMERGENCY RECOVERY MANAGER			

EPP/Implementing Procedures

NOTIFICATIONS

ERO POSITION LIST

EPP/IP 1.1 ATTACHMENT 7 (7 of 8)

POSITION	NAME	ETA	FFD
OSC COORDINATOR ASSISTANT			
OSC COMMUNICATOR			
ROC COORDINATOR ASSISTANT			
ROC COORDINATOR ASSISTANT			
ROC COORDINATOR ASSISTANT			
ASSISTNAT TO THE EMERGENCY DIRECTOR			
TSC OPS COORDINATOR			
TSC OPS COORDINATOR ASSISTANT			
OPS COMMUNICATOR			
OPS COMMUNICATOR			-
OPS COMMUNICATOR			
EA&DP ASSISTANT			
EA&DP ASSISTANT			
ENVIRONMENTAL COORDINATOR			
CHEMISTRY COORDINATOR ASSISTANT			
COMPUTER OPERATOR			
COMPUTER OPERATOR	,		
COMPUTER OPERATOR			
MATERIALS ENGINEER			

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ERO POSITION LIST

ATTACHMENT 7 (8 of 8)

POSITION	NAME	ETA	FFD
SYSTEM ENGINEER			
ASSISTANT TO THE EMERGENCY/RECOVERY MANAGER			
EOF OPERATIONS COORDINATOR			
EOF OPS COMMUNICATOR			
OFFSITE AGENCY LIAISON			
NUCLEAR COMMUNICATIONS MANGER			
NUCLEAR COMMUNICATIONS WRITER			,
NUCLEAR COMMUNICATIONS WRITER			
NUCLEAR COMMUNICATIONS TECHNICAL ADVISOR			
JPIC MANAGER			
INFORMATION MANAGER			
INFORMATION COORDINATOR			
CHIEF COMPANY SPOKESPERSON			
TECHNICAL ADVISOR	·		
MEDIA RELATIONS COORDINATOR			
MEDIA RELATIONS COORDINATOR			
LOGISTICS COORDINATOR			

ATTACHMENT 8 (1 of 7)

UNUSUAL EVENT NOTIFICATIONS CONTROL ROOM

A.	Onshi	ift Com	municati	ions and Records Coordinator Initial Notification Actions:
	1.0	IF RI	EQUES'	TED by NSS, activate ERO, (otherwise proceed to Step 2.0).
		1.1	Ask N	SS/ED: SITE ACCESSIBLE or SITE INACCESSIBLE.
		1.2	Activa	ate ERO beepers by:
			1.2.1	On EP Auto-Dialer, press button marked BVERS OR dial 9# 643-4370 (or from a PAX phone, dial 9-643-4370).
			1.2.2	Interrupt the greeting by IMMEDIATELY entering XXXXXX.
			1.2.3	When prompted, enter scenario number:
				SITE ACCESSIBLE - XXXXX SITE INACCESSIBLE - XXXXX
			1.2.4	When prompted, verify scenario number (9 for YES or 6 for NO).
			1.2.5	Verify, when prompted, "You will cue SCENARIO XXXXX. It will now be sent. Are you sure this is what you want to do?" (9 for YES or 6 for NO)
			1.2.6	Hang up.
				NOTE:
				After 2 unsuccessful attempts to contact CAS, proceed to Step 2.0.
	1.			tral Alarm Station (CAS) (PAX 5114/5115) and provide the information:
			1.3.1	EPP Communicator (Give your Name) .
			1.3.2	EPP CODE WORD
			1.3.3	An UNUSUAL EVENT has been declared.

ATTACHMENT 8 (2 of 7)

UNUSUAL EVENT NOTIFICATIONS CONTROL ROOM

- 1.3.4 ERO pagers will be activated. Call back at PAX _____ when beeper activates.
- 1.3.5 STATE, "Begin Near-Site Building Emergency Notifications".
- 2.0 Activate Off-Site Agency Initial Notification Conference (INC) Call.
 - 2.1 On EP Auto-Dialer, press button marked **INC OR** dial 9# 1-330-315-4380 (or from a PAX phone, dial 9-1-330-315-4380).
 - 2.2 Interrupt the greeting by **IMMEDIATELY** entering XXXXXX.
 - 2.2.1 IF unable to activate INC, GO TO PART B of this procedure.
 - 2.3 When prompted, enter the scenario number XXXX.
 - 2.4 When prompted, verify the scenario number (9 for YES or 6 for NO).
 - 2.5 Verify, when prompted, "You will cue SCENARIO XXXX. It will now be sent. Are you sure this is what you want to do?" (9 for YES or 6 for NO).
 - 2.6 Hang up.
- 3.0 Access Initial Notification Conference Bridge.
 - 3.1 On EP Auto-Dialer, press button marked **CONF. Bridge OR** dial 9# 682-1900 (**OR** from a PAX phone, dial 9 682-1900).
 - 3.2 When prompted, enter XXXX, then the # key.

ATTACHMENT 8 (3 of 7)

UNUSUAL EVENT NOTIFICATIONS CONTROL ROOM

- 4.0 Provide Initial Notification to Offsite Agencies.
 - 4.1 Obtain completed Initial Notification form from the NSS/ED or Control Room FAX machine.
 - 4.2 As each Agency enters the INC call, state the following:

4.2.1	"This is _	(Your Name)	at Beaver	Valley	Power
	Station, th	e Code Word is	Plea	ase stand	l-by for
	an emerge	ency message."			

4.2.2 Record the contact time and the name of the agency representative.

Agency	Contact Time	Contact Name	INC	FAX	Initials
Beaver County			Y/N	Y/N	
PEMA (State of Pennsylvania)			Y/N	Y/N	
Columbiana County			Y/N	Y/N	
OEMA (State of Ohio)			Y/N	Y/N	
Hancock County			Y/N	Y/N	
WVOES* (State of West Virginia)			Y/N	Y/N	

- * Hancock County can notify WVOES (State of West Virginia) if not on the Conference Call or not able to be contacted.
 - 4.3 Ask each agency if they received the Initial Notification Form FAX and if it is legible.
 - 4.3.1 IF YES, ask if there are any questions.
 - 4.3.2 STATE the Protective Action Recommendation.
 - 4.3.3 IF NO, provide information from Initial Notification Form.

(Continued)

ATTACHMENT 8 (4 of 7)

UNUSUAL EVENT NOTIFICATIONS CONTROL ROOM

4.4		E "A Follownes available."	-Up N	otification	will be	e prov	rided a	as ii	nformat	tion
4.5		E "Beaver Varence Call. Agsion."	•			_				
4.6	For an	y Agency(ies)	NOT o	n the confe	erence ca	all, per	form t	he fo	llowing	g:
	4.6.1	Contact each	remaini	ng Offsite	Agency	and,				
	4.6.2	Record the co	ontact ti	me and the	name o	f the a	gency	repre	esentati	ve.
	4.6.3	STATE "Thi	is is	(Your Na	ıme)	1	EPP C	omn	unicate	or".
	4.6.4	STATE "EP	P Code	Word is _			····		"	
	4.6.5	Ask each Age and if it is leg	•	hey receiv	ed the I	nitial N	Votifica	ation	Form	Fax
-		4.6.5.1	If YE	S, ask if the	ere are a	ny que	stions			

- 5.0 Verify ERO was activated (if required) otherwise proceed to Step 6.0.
 - 5.1 Contact Central Alarm Station (CAS) (PAX 5114/5115) (if they have not previously contacted the Control room).

Notification Form.

5.1.1 If contact with CAS was NOT made in Step 1.3, relay the information from Step 1.3 at this time.

STATE the Protective Action Recommendation.

If NO, provide information from the Initial

5.2 Verify CAS beeper activated.

4.6.5.2

4.6.5.3

5.2.1 If CAS beeper did not activate, perform EPP/IP 1.1, Attachment 7.

ATTACHMENT 8 (5 of 7)

UNUSUAL EVENT NOTIFICATIONS CONTROL ROOM

- 5.3 Notify the NSS/ED of ERO Initial Notifications completed and of ERO activation status.
 - Give NSS/ED the Execution Roster qualified Report from BVERS when it arrives on Control Room FAX machine (approximately one hour from ERO activation).
- 6.0 Place communications console phone switches to the EPP position.
- 7.0 Contact the NRC within one (1) hour of the event declaration per EPP/IP 1.1, Attachment 2. (Licensed) personnel from the opposite unit should be used to perform this notification.
 - 7.1 Record notification to NRC on EPP/IP 1.1, Attachment 2.
- 8.0 Contact each of the remaining Personnel/Organizations, as required, per EPP/IP 1.1, Attachment 2
- 9.0 Conduct Follow-Up Notifications.
 - 9.1 Obtain a completed Follow-Up Notification Form from the NSS/ED or the Control Room FAX machine.
 - 9.2 20 minutes after FAX was sent, or after return FAX received in the Control Room, notify the six (6) Offsite Agencies INDIVIDUALLY using EPP/IP 1.1, Attachment 2 by:
 - 9.2.1 **STATE** "This is (Your Name) EPP Communicator".
 - 9.2.2 STATE "The Code Word is ______
 - 9.2.3 Record the contact time and the name of the agency representative on the Follow-Up Notification part of EPP/IP 1.1, Attachment 2.
 - 9.2.4 Ask agency if they received the Follow-Up Notification #XX FAX and if it is legible.
 - 9.2.5 If YES, ask if any questions.

ATTACHMENT 8 (6 of 7)

UNUSUAL EVENT NOTIFICATIONS CONTROL ROOM

- 9.2.6 If NO, provide information from the Follow-Up Notification Form.
- 10.0 When contacted, turnover to Communications and Records Coordinator or (Communications Assistant) in the TSC (if ERO activated).
 - 10.1 Place Communications Console phone switches back to NORMAL position.
- 11.0 Upon termination of the emergency:
 - 11.1 When directed by NSS/ED, complete the Emergency Termination Checklist, EPP/IP 1.1, Attachment 5.
 - 11.2 Collect all original/completed attachments and forward to Emergency Preparedness.

NOTE:

ONLY perform this part to contact Offsite Agencies individually for Initial Notification.

- B. Individual Offsite Agency Initial Notification(s).
 - 1.0 Obtain completed Initial Notification Form from the NSS/ED or Control Room FAX machine.
 - 2.0 Contact each required Offsite Agency per EPP/IP 1.1, Attachment 2.
 - 3.0 Record the contact time and the name of agency representative on attachment.
 - 4.0 STATE "This is (Your Name) EPP Communicator".
 - 5.0 STATE "EPP Code Word is ______.

ATTACHMENT 8 (7 of 7)

UNUSUAL EVENT NOTIFICATIONS CONTROL ROOM

- 6.0 Ask each agency if they received the Initial Notification Form FAX and if it is legible.
 - 6.1 If YES, ask if there are any questions.
 - 6.2 **STATE** the Protective Action Recommendation.
 - 6.3 If NO, provide information from Initial Notification Form.
- 7.0 Return to Part A, Step 5.0 of this attachment.

EPP/Implementing Procedures

EPP/IP 1.1

NOTIFICATIONS

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ATTACHMENT 9 (1 of 7)

ALERT NOTIFICATIONS CONTROL ROOM

				CONTROL ROOM		
A.	Onshi	ft Com	municati	ions and Records Coordinator Initial Notification Actions:		
1.0 Activate ERO, if not already done (otherwise proceed to Step 2.0).						
		1.1	Ask N	SS/ED: SITE ACCESSIBLE or SITE INACCESSIBLE.		
		1.2	Activa	ate ERO beepers by:		
			1.2.1	On EP Auto-Dialer, press button marked <u>BVERS</u> OR dial 9# 643-4370 (or from a PAX phone, dial 9-643-4370).		
			1.2.2	Interrupt the greeting by IMMEDIATELY entering XXXXXX.		
			1.2.3	When prompted, enter scenario number:		
				SITE ACCESSIBLE - XXXXX SITE INACCESSIBLE - XXXXX		
			1.2.4	When prompted, verify scenario number (9 for YES or 6 for NO).		
			1.2.5	Verify, when prompted, "You will cue SCENARIO XXXXX. It will now be sent. Are you sure this is what you want to do?" (9 for YES or 6 for NO)		
			1.2.6	Hang up.		
				NOTE:		
				NOID.		
				After 2 unsuccessful attempts to contact CAS, proceed to Step 2.0.		
		1.3		Central Alarm Station (CAS) (PAX 5114/5115) and provide the ving information:		
			1.3.1	EPP Communicator (Give your Name)		
			1.3.2	EPP CODE WORD		
			1.3.3	An ALERT has been declared.		

ATTACHMENT 9 (2 of 7)

ALERT NOTIFICATIONS CONTROL ROOM

- 1.3.4 ERO pagers will be activated. Call back at PAX _____ when beeper activates.
- 1.3.5 STATE, "Begin Near-Site Building Emergency Notifications".
- 2.0 Activate Off-Site Agency Initial Notification Conference (INC) Call.
 - 2.1 On EP Auto-Dialer, press button marked <u>INC</u> OR dial 9# 1-330-315-4380 (or from a PAX phone, dial 9-1-330-315-4380).
 - 2.2 Interrupt the greeting by **IMMEDIATELY** entering XXXXXX.
 - 2.2.1 IF unable to activate INC, GO TO PART B of this procedure.
 - 2.3 When prompted, enter the scenario number XXXX.
 - 2.4 When prompted, verify the scenario number (9 for YES or 6 for NO).
 - 2.5 Verify, when prompted, "You will cue SCENARIO XXXX. It will now be sent. Are you sure this is what you want to do?" (9 for YES or 6 for NO).
 - 2.6 Hang up.
- 3.0 Access Initial Notification Conference Bridge.
 - 3.1 On EP Auto-Dialer, press button marked **CONF. Bridge OR** dial 9# 682-1900 (**OR** from a PAX phone, dial 9 682-1900).
 - 3.2 When prompted, enter XXXX, then the # key.

ATTACHMENT 9 (3 of 7)

ALERT NOTIFICATIONS CONTROL ROOM

- 4.0 Provide Initial Notification to Offsite Agencies.
 - 4.1 Obtain completed Initial Notification form from the NSS/ED or Control Room FAX machine.
 - 4.2 As each Agency enters the INC call, state the following:

4.2.1	"This is _	(Your Name)	at	Beaver	Valley	Power
	Station, th	e Code Word is		Plea	ase stand	l-by for
	an emerge	ncy message."		•		

4.2.2 Record the contact time and the name of the agency representative.

Agency	Contact Time	Contact Name	INC	FAX	Initials
Beaver County			Y/N	Y/N	
PEMA (State of Pennsylvania)			Y/N	Y/N	
Columbiana County			Y/N	Y/N	
OEMA (State of Ohio)			Y/N	Y/N	
Hancock County			Y/N	Y/N	
WVOES* (State of West Virginia)			Y/N	Y/N	

- * Hancock County can notify WVOES (State of West Virginia) if not on the Conference Call or not able to be contacted.
 - 4.3 Ask each agency if they received the Initial Notification Form FAX and if it is legible.
 - 4.3.1 IF YES, ask if there are any questions.
 - 4.3.2 STATE the Protective Action Recommendation.
 - 4.3.3 IF NO, provide information from Initial Notification Form.

(Continued)

5.0

5.2

ATTACHMENT 9 (4 of 7)

ALERT NOTIFICATIONS CONTROL ROOM

4.4		E "A Follow les available."	-Up Notification will be provided as information		
4.5	STATE "Beaver Valley Power Station is exiting the Initial Notification Conference Call. Agencies may remain on the Conference Call for further discussion."				
4.6	For an	For any Agency(ies) not on the conference call, perform the following:			
	4.6.1	Contact each	remaining Offsite Agency and,		
	4.6.2	Record the co	ntact time and the name of the agency representative.		
	4.6.3	STATE "Thi	s is(Your Name) EPP Communicator".		
	4.6.4	STATE "EPI	P Code Word is"		
	4.6.5	Ask each Age and if it is leg	ency if they received the Initial Notification Form Fax ible.		
-		4.6.5.1	If YES, ask if there are any questions.		
•		4.6.5.2	STATE the Protective Action Recommendation.		
		4.6.5.3	If NO, provide information from the Initial Notification Form.		
Verify	ERO v	vas activated (i	f required) otherwise proceed to Step 6.0.		
5.1			m Station (CAS) (PAX 5114/5115) (if they have not the Control room).		

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Verify CAS beeper activated.

5.2.1 If CAS beeper did not activate, perform EPP/IP 1.1, Attachment 7.

5.1.1 If contact with CAS was NOT made in Step 1.3, relay the

information from Step 1.3 at this time.

ATTACHMENT 9 (5 of 7)

ALERT NOTIFICATIONS CONTROL ROOM

- 5.3 Notify the NSS/ED of ERO Initial Notifications completed and of ERO activation status.
 - Give NSS/ED the Execution Roster qualified Report from BVERS when it arrives on Control Room FAX machine (approximately one hour from ERO activation).
- 6.0 Place communications console phone switches to the EPP position.
- 7.0 Complete **EPP SITE ACCOUNTABILITY FORM** (EPP/IP 3.2, Attachment 2) as time permits.
- 8.0 Contact the NRC within one (1) hour of the event declaration per EPP/IP 1.1, Attachment 2. (Licensed) personnel from the opposite unit should be used to perform this notification.
 - 8.1 Record notification to NRC on EPP/IP 1.1, Attachment 2.
- 9.0 Contact each of the remaining Personnel/Organizations, as required, per EPP/IP 1.1, Attachment 2
- 10.0 Conduct Follow-Up Notifications.
 - 10.1 Obtain a completed Follow-Up Notification Form from the NSS/ED or the Control Room FAX machine.
 - 10.2 20 minutes after FAX was sent, or after return FAX received in the Control Room, notify the six (6) Offsite Agencies INDIVIDUALLY using EPP/IP 1.1, Attachment 2 by:
 - 10.2.1 STATE "This is (Your Name) EPP Communicator".
 - 10.2.2 STATE "The Code Word is _____
 - 10.2.3 Record the contact time and the name of the agency representative on the Follow-Up Notification part of EPP/IP 1.1, Attachment 2.

ATTACHMENT 9 (6 of 7)

ALERT NOTIFICATIONS CONTROL ROOM

- 10.2.4 Ask agency if they received the Follow-Up Notification #XX FAX and if it is legible.
- 10.2.5 If YES, ask if any questions.
- 10.2.6 If NO, provide information from the Follow-Up Notification Form.
- 11.0 When contacted, turnover to Communications and Records Coordinator or (Communications Assistant) in the TSC (if ERO activated).
 - 11.1 Place Communications Console phone switches back to NORMAL position.
- 12.0 Upon termination of the emergency:
 - 12.1 When directed by NSS/ED, complete the Emergency Termination Checklist, EPP/IP 1.1, Attachment 5.
 - 12.2 Collect all original/completed attachments and forward to Emergency Preparedness.

NOTE:

ONLY perform this part to contact Offsite Agencies individually for Initial Notification.

- B. Individual Offsite Agency Initial Notification(s).
 - 1.0 Obtain completed Initial Notification Form from the NSS/ED or Control Room FAX machine.
 - 2.0 Contact each required Offsite Agency per EPP/IP 1.1, Attachment 2.
 - 3.0 Record the contact time and the name of agency representative on attachment.
 - 4.0 STATE "This is (Your Name) EPP Communicator".
 - 5.0 STATE "EPP Code Word is ______."

ATTACHMENT 9 (7 of 7)

ALERT NOTIFICATIONS CONTROL ROOM

- 6.0 Ask each agency if they received the Initial Notification Form FAX and if it is legible.
 - 6.1 If YES, ask if there are any questions.
 - 6.2 **STATE** the Protective Action Recommendation.
 - 6.3 If NO, provide information from Initial Notification Form.
- 7.0 Return to Part A, Step 5.0 of this attachment.

EPP/Implementing Procedures

EPP/IP 1.1

NOTIFICATIONS

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ATTACHMENT 10 (1 of 7)

SITE AREA EMERGENCY NOTIFICATIONS CONTROL ROOM

				CONTROL ROOM				
A.	Onshi	ift Com	municat	ions and Records Coordinator Initial Notification Actions:				
	1.0 Activate ERO, if not already done (otherwise proceed to Step 2.0).							
		1.1	Ask N	SS/ED: SITE ACCESSIBLE or SITE INACCESSIBLE.				
		1.2	Activa	ate ERO beepers by:				
			1.2.1	On EP Auto-Dialer, press button marked <u>BVERS</u> OR dial 9# 643-4370 (or from a PAX phone, dial 9-643-4370).				
			1.2.2	Interrupt the greeting by IMMEDIATELY entering XXXXXX.				
			1.2.3	When prompted, enter scenario number:				
				SITE ACCESSIBLE - XXXXX SITE INACCESSIBLE - XXXXX				
			1.2.4	When prompted, verify scenario number (9 for YES or 6 for NO).				
		·	1.2.5	Verify, when prompted, "You will cue SCENARIO XXXXX. It will now be sent. Are you sure this is what you want to do?" (9 for YES or 6 for NO)				
			1.2.6	Hang up.				
				North				
				NOTE:				
				After 2 unsuccessful attempts to contact CAS, proceed to Step 2.0.				
		1.3		Central Alarm Station (CAS) (PAX 5114/5115) and provide the ving information:				
			1.3.1	EPP Communicator (Give your Name) .				
			1.3.2	EPP CODE WORD				
			1.3.3	A SITE AREA EMERGENCY has been declared.				

ATTACHMENT 10 (2 of 7)

SITE AREA EMERGENCY NOTIFICATIONS CONTROL ROOM

- 1.3.4 ERO pagers will be activated. Call back at PAX _____ when beeper activates.
- 1.3.5 STATE, "Begin Near-Site Building Emergency Notifications".
- 2.0 Activate Off-Site Agency Initial Notification Conference (INC) Call.
 - 2.1 On EP Auto-Dialer, press button marked <u>INC</u> OR dial 9# 1-330-315-4380 (or from a PAX phone, dial 9-1-330-315-4380).
 - 2.2 Interrupt the greeting by **IMMEDIATELY** entering XXXXXX.
 - 2.2.1 IF unable to activate INC, GO TO PART B of this procedure.
 - 2.3 When prompted, enter the scenario number XXXX.
 - 2.4 When prompted, verify the scenario number (9 for YES or 6 for NO).
 - Verify, when prompted, "You will cue SCENARIO XXXX. It will now be sent. Are you sure this is what you want to do?" (9 for YES or 6 for NO).
 - 2.6 Hang up.
- 3.0 Access Initial Notification Conference Bridge.
 - 3.1 On EP Auto-Dialer, press button marked **CONF. Bridge OR** dial 9# 682-1900 (**OR** from a PAX phone, dial 9 1-682-1900).
 - 3.2 When prompted, enter XXXX, then the # key.

ATTACHMENT 10 (3 of 7)

SITE AREA EMERGENCY NOTIFICATIONS CONTROL ROOM

4.0	Provide Initial Notification to Offsite Agencies.
	1 10 1100 mmaar 1 touriouguli to Ombito 1 igonolos.

4.1	Obtain	completed	Initial	Notification	form	from	the	NSS/ED	or	Control
	Room 1	FAX machi	ne.							

4.2 As each Agency enters the INC call, state the follow	/ing:
--	-------

4.2.1	"This is	(Your Name)	at	Beaver	Valley	Power
	Station,	the Code Word is		Plea	ase stand	l-by for
	an emerg	gency message."		•		

4.2.2 Record the contact time and the name of the agency representative.

Agency	Contact Time	Contact Name	INC	FAX	Initials
Beaver County	N 12.14		Y/N	Y/N	
PEMA (State of Pennsylvania)			Y/N	Y/N	
Columbiana County			Y/N	Y/N	
OEMA (State of Ohio)			Y/N	Y/N	
Hancock County			Y/N	Y/N	
WVOES* (State of West Virginia)			Y/N	Y/N	

- * Hancock County can notify WVOES (State of West Virginia) if not on the Conference Call or not able to be contacted.
 - 4.3 Ask each agency if they received the Initial Notification Form FAX and if it is legible.
 - 4.3.1 IF YES, ask if there are any questions.

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- 4.3.2 **STATE** the Protective Action Recommendation.
- 4.3.3 IF NO, provide information from Initial Notification Form.

(Continued)

ATTACHMENT 10 (4 of 7)

SITE AREA EMERGENCY NOTIFICATIONS CONTROL ROOM

4.4		TE "A Follownes available."	v-Up Notification will be provided as information
4.5	Confe	TE "Beaver Varence Call. Again."	alley Power Station is exiting the Initial Notification gencies may remain on the Conference Call for further
4.6	For ar	ny Agency(ies)	not on the conference call, perform the following:
	4.6.1	Contact each	remaining Offsite Agency and,
	4.6.2	Record the co	ontact time and the name of the agency representative.
	4.6.3	STATE "Th	is is(Your Name) EPP Communicator".
	4.6.4	STATE "EP	P Code Word is"
	4.6.5	Ask each Ag and if it is leg	ency if they received the Initial Notification Form Fav
		4.6.5.1	If YES, ask if there are any questions.
		4.6.5.2	STATE the Protective Action Recommendation.
		4.6.5.3	If NO, provide information from the Initial Notification Form.

- 5.0 Verify ERO was activated (if required) otherwise proceed to Step 6.0.
 - 5.1 Contact Central Alarm Station (CAS) (PAX 5114/5115) (if they have not previously contacted the Control room).
 - 5.1.1 If contact with CAS was NOT made in Step 1.3, relay the information from Step 1.3 at this time.
 - 5.2 Verify CAS beeper activated.
 - 5.2.1 If CAS beeper did not activate, perform EPP/IP 1.1, Attachment 7.

ATTACHMENT 10 (5 of 7)

SITE AREA EMERGENCY NOTIFICATIONS CONTROL ROOM

- 5.3 Notify the NSS/ED of ERO Initial Notifications completed and of ERO activation status.
 - Give NSS/ED the Execution Roster qualified Report from BVERS when it arrives on Control Room FAX machine (approximately one hour from ERO activation).
- 6.0 Place communications console phone switches to the EPP position.
- 7.0 Complete **EPP SITE ACCOUNTABILITY FORM** (EPP/IP 3.2, Attachment 2) and deliver to CAS (if not previously done).
- 8.0 Contact the NRC within one (1) hour of the event declaration per EPP/IP 1.1, Attachment 2. (Licensed) personnel from the opposite unit should be used to perform this notification.
 - 8.1 Record notification to NRC on EPP/IP 1.1, Attachment 2.
- 9.0 Contact each of the remaining Personnel/Organizations, as required, per EPP/IP 1.1, Attachment 2
- 10.0 Conduct Follow-Up Notifications.
 - 10.1 Obtain a completed Follow-Up Notification Form from the NSS/ED or the Control Room FAX machine.
 - 10.2 20 minutes after FAX was sent, or after return FAX received in the Control Room, notify the six (6) Offsite Agencies INDIVIDUALLY using EPP/IP 1.1, Attachment 2 by:
 - 10.2.1 **STATE** "This is (Your Name) EPP Communicator".
 - 10.2.2 STATE "The Code Word is ______
 - 10.2.3 Record the contact time and the name of the agency representative on the Follow-Up Notification part of EPP/IP 1.1, Attachment 2.
 - 10.2.4 Ask agency if they received the Follow-Up Notification #XX FAX and if it is legible.

ATTACHMENT 10 (6 of 7)

SITE AREA EMERGENCY NOTIFICATIONS CONTROL ROOM

- 10.2.5 If YES, ask if any questions.
- 10.2.6 If NO, provide information from the Follow-Up Notification Form.
- 11.0 When contacted, turnover to Communications and Records Coordinator or (Communications Assistant) in the TSC (if ERO activated).
 - 11.1 Place Communications Console phone switches back to NORMAL position.
- 12.0 Upon termination of the emergency:
 - 12.1 When directed by NSS/ED, complete the Emergency Termination Checklist, EPP/IP 1.1, Attachment 5.
 - 12.2 Collect all original/completed attachments and forward to Emergency Preparedness.

NOTE:

ONLY perform this part to contact Offsite Agencies individually for Initial Notification.

- B. Individual Offsite Agency Initial Notification(s).
 - 1.0 Obtain completed Initial Notification Form from the NSS/ED or Control Room FAX machine.
 - 2.0 Contact each required Offsite Agency per EPP/IP 1.1, Attachment 2.
 - 3.0 Record the contact time and the name of agency representative on attachment.
 - 4.0 STATE "This is ______ (Your Name) EPP Communicator.
 - 5.0 STATE "EPP Code Word is .'

ATTACHMENT 10 (7 of 7)

SITE AREA EMERGENCY NOTIFICATIONS CONTROL ROOM

- 6.0 Ask each agency if they received the Initial Notification Form FAX and if it is legible.
 - 6.1 If YES, ask if there are any questions.
 - 6.2 **STATE** the Protective Action Recommendation.
 - 6.3 If NO, provide information from Initial Notification Form.
- 7.0 Return to Part A, Step 5.0 of this attachment.

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ATTACHMENT 11 (1 of 7)

GENERAL EMERGENCY NOTIFICATIONS CONTROL ROOM

				CONTROL ROUM
A.	Onshi	ift Com	nunicat	ions and Records Coordinator Initial Notification Actions:
	1.0	Activa	ate ERC), if not already done (otherwise proceed to Step 2.0).
		1.1	Ask N	SS/ED: SITE ACCESSIBLE or SITE INACCESSIBLE.
		1.2	Activa	ate ERO beepers by:
			1.2.1	On EP Auto-Dialer, press button marked <u>BVERS</u> OR dial 9# 643-4370 (or from a PAX phone, dial 9-643-4370).
			1.2.2	Interrupt the greeting by IMMEDIATELY entering XXXXXX.
			1.2.3	When prompted, enter scenario number:
				SITE ACCESSIBLE - XXXXX SITE INACCESSIBLE - XXXXX
			1.2.4	When prompted, verify scenario number (9 for YES or 6 for NO).
			1.2.5	Verify, when prompted, "You will cue SCENARIO XXXXX. It will now be sent. Are you sure this is what you want to do?" (9 for YES or 6 for NO)
			1.2.6	Hang up.
				NOTE:
				After 2 unsuccessful attempts to contact CAS, proceed to Step 2.0.
		1.3		Central Alarm Station (CAS) (PAX 5114/5115) and provide the ring information:
			1.3.1	EPP Communicator (Give your Name)
			1.3.2	EPP CODE WORD
			1.3.3	A GENERAL EMERGENCY has been declared.

ATTACHMENT 11 (2 of 7)

GENERAL EMERGENCY NOTIFICATIONS CONTROL ROOM

- 1.3.4 ERO pagers will be activated. Call back at PAX _____ when beeper activates.
- 1.3.5 STATE, "Begin Near-Site Building Emergency Notifications".
- 2.0 Activate Off-Site Agency Initial Notification Conference (INC) Call.
 - 2.1 On EP Auto-Dialer, press button marked <u>INC</u> OR dial 9# 1-330-315-4380 (or from a PAX phone, dial 9-1-330-315-4380).
 - 2.2 Interrupt the greeting by <u>IMMEDIATELY</u> entering XXXXXX.
 - 2.2.1 IF unable to activate INC, GO TO PART B of this procedure.
 - 2.3 When prompted, enter the scenario number XXXX.
 - 2.4 When prompted, verify the scenario number (9 for YES or 6 for NO).
 - 2.5 Verify, when prompted, "You will cue SCENARIO XXXX. It will now be sent. Are you sure this is what you want to do?" (9 for YES or 6 for NO).
 - 2.6 Hang up.
- 3.0 Access Initial Notification Conference Bridge.
 - 3.1 On EP Auto-Dialer, press button marked **CONF. Bridge OR** dial 9# 682-1900 (**OR** from a PAX phone, dial 9 682-1900).
 - 3.2 When prompted, enter XXXX, then the # key.

ATTACHMENT 11 (3 of 7)

GENERAL EMERGENCY NOTIFICATIONS CONTROL ROOM

- 4.0 Provide Initial Notification to Offsite Agencies.
 - 4.1 Obtain completed Initial Notification form from the NSS/ED or Control Room FAX machine.
 - 4.2 As each Agency enters the INC call, state the following:

4.2.1	"This is (Your Name)	at	Beaver	Valley	Power
	Station, the Code Word is		Plea	ase stand	l-by for
	an emergency message."				

4.2.2 Record the contact time and the name of the agency representative.

Agency	Contact Time	Contact Name	INC	FAX	Initials
Beaver County			Y/N	Y/N	
PEMA (State of Pennsylvania)		,	Y/N	Y/N	
Columbiana County			Y/N	Y/N	
OEMA (State of Ohio)			Y/N	Y/N	
Hancock County			Y/N	Y/N	
WVOES* (State of West Virginia)			Y/N	Y/N	

- * Hancock County can notify WVOES (State of West Virginia) if not on the Conference Call or not able to be contacted.
 - 4.3 Ask each agency if they received the Initial Notification Form FAX and if it is legible.
 - 4.3.1 IF YES, ask if there are any questions.

- 4.3.2 STATE the Protective Action Recommendation.
- 4.3.3 IF NO, provide information from Initial Notification Form.

(Continued)

ATTACHMENT 11 (4 of 7)

GENERAL EMERGENCY NOTIFICATIONS CONTROL ROOM

- 4.4 **STATE** "A Follow-Up Notification will be provided as information becomes available."
- 4.5 **STATE** "Beaver Valley Power Station is exiting the Initial Notification Conference Call. Agencies may remain on the Conference Call for further discussion."
- 4.6 For any Agency(ies) not on the conference call, perform the following:
 - 4.6.1 Contact each remaining Offsite Agency and,
 - 4.6.2 Record the contact time and the name of the agency representative.
 - 4.6.3 STATE "This is (Your Name) EPP Communicator".
 - 4.6.4 STATE "EPP Code Word is _____."
 - 4.6.5 Ask each Agency if they received the Initial Notification Form Fax and if it is legible.
 - 4.6.5.1 If YES, ask if there are any questions.
 - 4.6.5.2 **STATE** the Protective Action Recommendation.
 - 4.6.5.3 If **NO**, provide information from the Initial Notification Form.
- 5.0 Verify ERO was activated (if required) otherwise proceed to Step 6.0.
 - 5.1 Contact Central Alarm Station (CAS) (PAX 5114/5115) (if they have not previously contacted the Control room).
 - 5.1.1 If contact with CAS was NOT made in Step 1.3, relay the information from Step 1.3 at this time.
 - 5.2 Verify CAS beeper activated.
 - 5.2.1 If CAS beeper did not activate, perform EPP/IP 1.1, Attachment 7.

ATTACHMENT 11 (5 of 7)

GENERAL EMERGENCY NOTIFICATIONS CONTROL ROOM

- 5.3 Notify the NSS/ED of ERO Initial Notifications completed and of ERO activation status.
 - Give NSS/ED the Execution Roster qualified Report from BVERS when it arrives on Control Room FAX machine (approximately one hour from ERO activation).
- 6.0 Place communications console phone switches to the EPP position.
- 7.0 Complete **EPP SITE ACCOUNTABILITY FORM** (EPP/IP 3.2, Attachment 2) and deliver to CAS (if not previously done).
- 8.0 Contact the NRC within one (1) hour of the event declaration per EPP/IP 1.1, Attachment 2. (Licensed) personnel from the opposite unit should be used to perform this notification.
 - 8.1 Record notification to NRC on EPP/IP 1.1, Attachment 2.
- 9.0 Contact each of the remaining Personnel/Organizations, as required, per EPP/IP 1.1, Attachment 2
- 10.0 Conduct Follow-Up Notifications.
 - 10.1 Obtain a completed Follow-Up Notification Form from the NSS/ED or the Control Room FAX machine.
 - 10.2 20 minutes after FAX was sent, or after return FAX received in the Control Room, notify the six (6) Offsite Agencies INDIVIDUALLY using EPP/IP 1.1, Attachment 2 by:
 - 10.2.1 **STATE** "This is (Your Name) EPP Communicator".
 - 10.2.2 **STATE** "The Code Word is _____
 - 10.2.3 Record the contact time and the name of the agency representative on the Follow-Up Notification part of EPP/IP 1.1, Attachment 2.
 - 10.2.4 Ask agency if they received the Follow-Up Notification #XX FAX and if it is legible.

ATTACHMENT 11 (6 of 7)

GENERAL EMERGENCY NOTIFICATIONS CONTROL ROOM

- 10.2.5 If YES, ask if any questions.
- 10.2.6 If NO, provide information from the Follow-Up Notification Form.
- 11.0 When contacted, turnover to Communications and Records Coordinator or (Communications Assistant) in the TSC (if ERO activated).
 - 11.1 Place Communications Console phone switches back to NORMAL position.
- 12.0 Upon termination of the emergency:
 - 12.1 When directed by NSS/ED, complete the Emergency Termination Checklist, EPP/IP 1.1, Attachment 5.
 - 12.2 Collect all original/completed attachments and forward to Emergency Preparedness.

NOTE:

ONLY perform this part to contact Offsite Agencies individually for Initial Notification.

- B. Individual Offsite Agency Initial Notification(s).
 - 1.0 Obtain completed Initial Notification Form from the NSS/ED or Control Room FAX machine.
 - 2.0 Contact each required Offsite Agency per EPP/IP 1.1, Attachment 2.
 - 3.0 Record the contact time and the name of agency representative on attachment.
 - 4.0 STATE "This is (Your Name) EPP Communicator.
 - 5.0 STATE "EPP Code Word is _____."

ATTACHMENT 11 (7 of 7)

GENERAL EMERGENCY NOTIFICATIONS CONTROL ROOM

- 6.0 Ask each agency if they received the Initial Notification Form FAX and if it is legible.
 - 6.1 If YES, ask if there are any questions.
 - 6.2 **STATE** the Protective Action Recommendation.
 - 6.3 If NO, provide information from Initial Notification Form.
- 7.0 Return to Part A, Step 5.0 of this attachment.

EPP/Implementing Procedures

EPP/IP 1.1

NOTIFICATIONS

ATTACHMENT 12 (1 of 7)

TSC EVENT NOTIFICATION

A. <u>INSTRUCTIONS</u>

- 1.0 Communications and Records Coordinator/Communications Assistant Actions:
 - 1.1 Obtain copies of the forms faxed to the TSC by the Control Room from the TSC Fax machine located on the Communicator's desk.
 - 1.2 Contact the Control Room for turnover.
 - 1.2.1 When turnover is complete, have the Onshift Communications and Records Coordinator place phone switches to the NORMAL position.
 - 1.3 Make copies of previously complete Initial and Follow-Up Notification Forms and distribute to the following:

1.3.1 **TSC** (8):

- Communications Assts. (3)
- Communications and Records Coord.
- Emergency Director
- OPS Coordinator
- OPS Communicator (Red Phone)
- OEMA Liaison Communicator

1.3.2 **EOF** (7):

- Emergency/Recovery Manager DEP/BRP
- Offsite Agency Liaison
 PEMA
- NRC OEMA
- WVOES

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- 1.4 Obtain the EPP Notification Books from the Communicators desk, if not already done.
- 1.5 Continue with Notifications from the point the Onshift Communications and Records Coordinator stopped.

ATTACHMENT 12 (2 of 7)

TSC EVENT NOTIFICATION

2.0 Initial Notifications, Communications and Records Coordinator Actions:

NOTE:

Initial Notifications are to be made to the first six (6) listed Agencies on the EMERGENCY NOTIFICATIONS CALL-LIST, EPP/IP 1.1, Attachment 2 and MUST be made within 15 minutes of the event declaration. Subsequent notifications MUST still be made.

NOTE:

The BVPS Radio System is the alternate to the commercial phone system for notifications to offsite emergency response organizations. EPP/IP 1.2, Attachment 3, Step 6.0 provides direction in its use.

NOTE:

If an emergency is reclassified and upgraded during the Follow-Up Notification process, the Communications and Records Coordinator SHALL terminate the notification in progress and begin the upgraded Initial Notification process again per appropriate Attachment. If the Initial Notification Conference (INC) call is in progress, then the upgraded notifications SHALL be provided at this time. The 15-minute clock for the notifications will restart at the time of the upgraded declaration.

- 2.1 Provide the Emergency Director with the following:
 - Initial Notification Form (EPP/IP 1.1, Attachment 1)
 - Follow-Up Notification Form (EPP/IP 1.1, Attachment 3)
 - 2.1.1 Provide the NRC Worksheet to the TSC Ops Coordinator for completion.
- 2.2 Obtain completed **INITIAL NOTIFICATION FORM** from the Emergency Director.
- 2.3 Review INITIAL NOTIFICATION FORM for all lines completed.

ATTACHMENT 12 (3 of 7)

TSC EVENT NOTIFICATION

- 2.4 Make three (3) copies of completed INITIAL NOTIFICATION FORM.
 - 2.4.1 Provide copies of INITIAL NOTIFICATION FORM to Communications Assistants.
- 2.5 Remove the **NOTIFICATION FORM FAXING INSTRUCTIONS** from the Communications and Records Coordinator's EPP Notification Book.
 - 2.5.1 Fax the **INITIAL NOTIFICATION FORM** following the steps on the **NOTIFICATION FORM FAXING INSTRUCTIONS** (Attachment 13 of this procedure).
- 2.6 Initiate the INC call, per Attachment 15.
- 2.7 Instruct another Communications Assistant to dial the INC, on another phone, to assist in monitoring the INC call.
- 2.8 As each Agency enters the INC call, state the following:
 - 2.8.1 "This is (Your Name) at Beaver Valley Power Station, the Code Word is ______. Please stand-by for an emergency message."
 - 2.8.2 Conduct a roll-call using EPP/IP 1.1, Attachment 2, Page 2, for Agencies 1-6 documenting names and contact time.
 - 2.8.3 Verify from each Agency receipt of the appropriate Initial Notification Fax (i.e., Unusual Event, Alert, Site Area or General Emergency) and that the Fax is legible.
 - IF YES, ask if any Agency has questions regarding the information provided on the fax. Inform the Agency that a Follow-Up Notification will be relayed as information becomes available.
 - STATE the Protective Action Recommendation.
 - IF NO, provide information from the Initial Notification Form AND inform the Agency that a Follow-Up Notification will be relayed as information becomes available.

ATTACHMENT 12 (4 of 7)

TSC EVENT NOTIFICATION

- 2.8.4 STATE "A Follow-Up Notification will be provided as information becomes available."
- 2.8.5 STATE "Beaver Valley Power Station is exiting the Initial Notification Conference Call. Agencies may remain on the Conference Call for further discussion."
- 2.8.6 If a party cannot be contacted in a reasonable period of time, bypass that party and proceed down the list. After other required notifications are complete, re-attempt to contact any bypassed parties. Every effort MUST be made to contact the organizations listed in Attachment 2 and all attempts MUST be documented.
- 2.9 Notify the Emergency Director when the Initial Notification calls to the first six (6) Agencies have been made.
- 2.10 For any Agency(ies) not on the conference call, perform the following:
 - 2.10.1 Contact each remaining Offsite Agency and,
 - 2.10.2 Record the contact time and the name of the agency representative.

2.10.3 STATE "This is ____(Your Name) ____ EPP Communicator".

- 2.10.4 **STATE** "EPP Code Word is _____."
- 2.10.5 Ask each Agency if they received the Initial Notification Form Fax and if it is legible.
 - 2.10.5.1 If **YES**, ask if there are any questions.
 - 2.10.5.2 **STATE** the Protective Action Recommendation.
 - 2.10.5.3 If NO, provide information from the Initial Notification Form.
- 2.11 Verify the Ops Coordinator has given the NRC WORKSHEET to the OPS Communicator manning the NRC phone for relaying information. Log time contacted on EPP/IP 1.1, Attachment 2.

ATTACHMENT 12 (5 of 7)

TSC EVENT NOTIFICATION

3.0 Follow-Up Notifications

NOTE:

The follow-up notification provides technical information to those qualified to use the data and serves as a means to verify the authenticity of an emergency notification. The **CODEWORD** also provides verification.

NOTE:

The Follow-Up Notification Form should be updated periodically (i.e., 2 times per shift) or at the discretion of the Emergency Director.

- 3.1 Obtain information for the FOLLOW-UP NOTIFICATION FORM (EPP/IP 1.1, Attachment 3).
- 3.2 Complete the **FOLLOW-UP NOTIFICATION FORM** and make three (3) copies to give to the Communications Assistants.
- 3.3 Fax the FOLLOW-UP NOTIFICATION FORM following the instructions on the NOTIFICATION FORM FAXING INSTRUCTIONS (Attachment 13 of this procedure).

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NOTE:

If an emergency is reclassified and upgraded during the Follow-Up Notification process, the Communications and Records Coordinator SHALL terminate the notification in progress and begin the upgraded Initial Notification process again per appropriate Attachment. If the Initial Notification Conference (INC) call is in progress, then the upgraded notifications SHALL be provided at this time. The 15-minute clock for the notifications will restart at the time of the upgraded declaration.

NOTE:

The INC call **SHALL** not be used for Follow-Up Notifications. Offsite Agencies **SHALL** be called individually.

ATTACHMENT 12 (6 of 7)

TSC EVENT NOTIFICATION

- Upon receiving the TSC copy of the Follow-Up Notification Fax, or approximately 20 minutes after sending the Fax, begin Follow-Up Notifications to the first six (6) listed Agencies using EPP/IP 1.1, Attachment 2 "EMERGENCY NOTIFICATION CALL-LIST".
 - 3.4.1 Begin call by stating "This is (Your Name) at Beaver Valley Power Station, the Code Word is _____. This is a Follow-Up Notification verification call."
 - 3.4.2 Record name and time of contact on EPP/IP 1.1. Attachment 2.

NOTE:

The Follow-Up Notifications # (Number) is Entered in the lower right corner of Attachment 3, page 1 of 5.

- 3.4.3 Verify receipt of Follow-Up Notification # XX Fax and that the Fax is legible.
 - IF YES, ask if there are any questions.
 - IF NO, provide information from the Follow-Up Notification Form.
- 3.4.4 If a party cannot be contacted in a reasonable period of time, bypass that party and proceed down the list. After other required notifications are complete, re-attempt to contact any bypassed parties. Every effort must be made to contact the organizations listed in Attachment 2 and all attempts must be documented.

4.0 Subsequent Notifications

- 4.1 If an emergency is escalated in classification, the INITIAL NOTIFICATION FORM is used and notifications are made in the same manner specified in Steps 2 and 3 of this procedure.
 - 4.1.1 If an emergency is escalated in classification, and the INC call is ongoing, then confirm the upgraded receipt of the Initial Notification Fax on the current INC call.
 - 4.1.2 If an Agency has not received the upgraded Fax, provide the information.

ATTACHMENT 12 (7 of 7)

TSC EVENT NOTIFICATION

- 5.0 Site Assembly and Personnel Accountability
 - 5.1 Provide information to Near-Site Assembly Area Coordinators per EPP/IP 3.2, Attachment 7.
- 6.0 Termination
 - 6.1 Complete the **EMERGENCY TERMINATION CHECKLIST** (EPP/IP 1.1, Attachment 5).
 - 6.2 Collect all originals of the completed attachments and forward to Emergency Preparedness.

B. FINAL CONDITIONS

- 1.0 Use of this procedure **SHALL** be terminated when the emergency situation is corrected or when directed by the Emergency Director.
- 2.0 Attachment 5 (Emergency Termination Checklist) is to be completed for termination calls to offsite agencies for all emergency events.

NOTE:

*

Upon termination of the emergency situation and the subsequent termination of this IP, <u>All</u> originals of completed Attachments **SHALL** be forwarded to Emergency Preparedness.

EPP/Implementing Procedures

EPP/IP 1.1

NOTIFICATIONS

ATTACHMENT 13 (1 of 1)

NOTIFICATION FORM FAXING INSTRUCTIONS EXAMPLE

110	TIFICATION FORM FAXING INSTRUCTIONS EXAMILE
1.0	Turn external speaker located on rear of fax machine to "ON".
2.0	Place completed Notification Forms on the Fax Machine (face down) and perform the following steps:
	NOTE:
	Not all voice prompts are listed here, only the key ones. Fax Speed Dial Numbers are pre-programmed only in the Control Room, TSC and JPIC.
3.0	Lift phone receiver on Fax Machine, or press the "HOOK" button.
4.0	Press Speed Dial number "01" on the Fax Machine labeled "EPP FAX", (or dial). This will connect you to a voice prompt which states "WELCOME TO AT&T'S ENHANCED FAX".
5.0	At the voice prompt "ENTER THE SUBSCRIBER ID AND POUND SIGN", Press Speed Dial number <u>"02"</u> , (or enter the Subscriber ID number followed by the <u>"#"</u> symbol).
6.0	At the voice prompt "ENTER THE PASSWORD AND POUND SIGN", Press Speed Dial number "103", (or enter the Password ID number followed by the "#" symbol).
7.0	You will hear a voice prompt "LOGGING IN, PLEASE WAIT". At the voice prompt "TO SEND MESSAGE, PRESS 1". PRESS 1 on the Fax number keys (do not wait for additional prompts).
	NOTE:
	If Speed Dial 04 is used, Step 9.0 does not need to be performed.
8.0	At the prompt "ENTER RECIPIENT ADDRESS NUMBER, TO ADDRESS TO A LIST PRESS *L ", Press Speed Dial Number ("04") or enter ().
9.0	At the voice prompt "WHEN FINISHED PRESS THE "*" AND "#" KEYS", press <u>"*#"</u> buttons on the Fax number keys.
10.0	A voice prompt will inform you that "YOUR MESSAGE ID IS \underline{XXXX} AND WILL BE SENT TO \underline{XXXX} RECIPIENTS".
11.0	At the voice prompt, "PLEASE START YOUR FAX MACHINE", press the Fax "START" button.
12.0	Hang up the phone or press the "HOOK" button if used.
13.0	Return to procedure/Attachment step in progress.

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EPP/Implementing Procedures

EPP/IP 1.1

NOTIFICATIONS

ATTACHMENT 14 (1 of 1)

ERO BEEPER ACTIVATION INSTRUCTIONS (EXAMPLE)

1.0	Ask l	NSS/ED: SITE ACCESSIBLE or SITE INACCESSIBLE
2.0	Activ	rate ERO Beepers by:
	2.1	On EP Auto-Dialer, press button marked BVERS OR dial 9# 643-4370 (or from a PAX phone, dial 9-643-4370).
	2.2	Interrupt the greeting by IMMEDIATELY entering XXXXXX.
	2.3	When prompted, enter scenario number:
		SITE ACCESSIBLE XXXXX SITE INACCESSIBLE XXXXX
	2.4	When prompted, verify scenario number (9 for YES or 6 for NO).
	2.5	Verify, when prompted, "You will cue SCENARIO XXXXX. It will now be sent. Are you sure this is what you want to do?" (9 for YES or 6 for NO)
	2.6	Hang up.
3.0		the Central Alarm Station (CAS) (PAX 5114/5115) and provide the following mation:
	3.1	EPP Communicator (Give your Name).
	3.2	EPP CODE WORD
	3.3	A(n) has been declared
	3.4	ERO pagers will be activated. Call back at PAX when beeper activates.
	3.5	STATE, "Begin Near-Site Building Emergency Notifications".
4.0	Retu	rn to Procedure/Attachment Step in progress.

ATTACHMENT 15 (1 of 2)

ACTIVATION OF THE INITIAL NOTIFICATION CONFERENCE (INC) CALL INSTRUCTIONS (EXAMPLE)

NOTE:

For an ALERT, or higher emergency declaration, the ERO Beepers SHALL be activated prior to the initiation of the INC call. Part A.1 initiates the INC call computer program. Part A.2 provides direction for the Communicator to enter the conference call with the Offsite Agencies.

A. <u>INITIATING INC</u>

NOTE:

If BVERS is unavailable, go to Part B.1 of this Attachment.

- 1.0 Activate Offsite Agency Initial Notification Conference (INC) Call.
 - 1.1 On EP Auto-Dialer, press button marked <u>INC</u> OR DIAL 9# 1-330-315-4380 (or from a PAX phone, dial 9-1-330-315-4380).
 - 1.2 Interrupt the greeting by **IMMEDIATELY** entering XXXXXX.
 - 1.2.1 IF unable to activate INC, GO TO PART B of this procedure.
 - 1.3 When prompted, enter the SCENARIO NUMBER XXXXX.
 - 1.4 When prompted, verify the SCENARIO NUMBER (9 for YES OR 6 for NO).
 - 1.5 Verify when prompted, "You will cue SCENARIO XXXX. It will now be sent. Are you sure this is what you want to do?" (9 for YES OR 6 for NO.
 - 1.6 Hang up.
- 2.0 Access Initial Notification Conference Bridge.
 - 2.1 On EP Auto-Dialer, press button marked CONF. Bridge OR dial 9# 682-1900 (OR from a PAX phone, dial 9 682-1900).
 - 2.2 When prompted, enter XXXXX, then the # key.
- 3.0 Return to Procedure/Attachment Step in progress.

ATTACHMENT 15 (2 of 2)

ACTIVATION OF THE INITIAL NOTIFICATION CONFERENCE (INC) CALL INSTRUCTIONS (EXAMPLE)

B.	Indiv	idual Offsite Agency Initial Notification(s).
	1.0	Obtain completed Initial Notification Form from the NSS/ED or Control Room FAX machine.
	2.0	Contact each required Offsite Agency per EPP/IP 1.1, Attachment 2.
	3.0	Record the contact time and the name of agency representative on attachment.
	4.0	STATE "This is (Your Name) EPP Communicator".
	5.0	STATE "EPP Code Word is"
	6.0	Ask each agency if they received the Initial Notification Form FAX and if it is legible.
		6.1 If YES, ask if there are any questions.
		6.2 STATE the Protective Action Recommendation.
		6.3 If NO, provide information from Initial Notification Form.
	7.0	Return to Procedure/Attachment Step in progress.