

NRC 2001-052

August 10, 2001

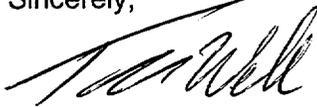
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Ladies/Gentlemen:

DOCKETS 50-266 AND 50-301  
EMERGENCY PLAN IMPLEMENTING PROCEDURE REVISIONS  
POINT BEACH NUCLEAR PLANT, UNITS 1 AND 2

Enclosed are copies of revised procedures to the Point Beach Nuclear Plant Emergency Plan Implementing Procedures. The revised procedures dated August 3, 2001, should be filed in your copy of the manual in accordance with the attached instructions.

Sincerely,



T. J. Webb  
Licensing Director

Enclosures

cc: NRC Resident Inspector (w/o/e)

A045

The following changes have been made to the (EPIP) Manual. Please **REMOVE** and **DESTROY** the previous revision(s) and replace them **IMMEDIATELY** with the current revision(s) that are attached.

EPIP 2.1, Notifications - ERO, State & Counties, and NRC, Revision 22.

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NAMES AND  
TELEPHONE NUMBERS  
DELETED

(T - Temporary Change)

C = Continuous Use  
R = Reference Use  
I = Information Use

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# EPIP 2.1

## NOTIFICATIONS - ERO, STATE & COUNTIES, AND NRC

**DOCUMENT TYPE:** Technical

**CLASSIFICATION:** NNSR

**REVISION:** 22

**EFFECTIVE DATE:** August 3, 2001

**APPROVAL AUTHORITY:** Department Manager

**PROCEDURE OWNER:** Emergency Preparedness Supervisor

**OWNER GROUP:** Emergency Preparedness

NAMES AND  
TELEPHONE NUMBERS  
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## 1.0 PURPOSE

This procedure is to provide guidance for making initial and subsequent notifications of a classified emergency to members of the Point Beach Nuclear Plant Emergency Response Organization (ERO), State of Wisconsin, Manitowoc County, Kewaunee County, KNPP and the Nuclear Regulatory Commission.

## 2.0 PREREQUISITES

### 2.1 Responsibilities

2.1.1 Duty Shift Superintendent (DSS) has the ultimate responsibility to complete notifications per this procedure until a formal turnover to the Emergency Director has been conducted.

2.1.2 **IF** available to assist with this procedure,  
**THEN** the DSS may assign these tasks to:

- Security Shift Commander (SSC)
- Operating Supervisor(s) (OS)
- Shift Technical Advisor (STA)

2.1.3 State and County Communicator shall assume notifications to the State and Counties upon activation of the Emergency Operations Facility (EOF).

2.1.4 ENS Communicator shall assume notifications to the NRC upon activation of the Technical Support Center (TSC).

### 2.2 Equipment

2.2.1 Notification of the Emergency Response Organization

- Point Beach Automated Notification System (primary means)
- Alpha-numeric paging accessed via telephone (backup means)
- Alpha-numeric paging system accessed via TSO (backup means)
- Manual Call Tree (backup means)

2.2.2 Notification of the State and County Emergency Managements

- Two-Digit Dial Select Telephone
- Commercial Telephones (PBX, GTE, Microwave)

2.2.3 Notification of the NRC

- Federal Telecommunications System (FTS) Emergency Notification System (ENS)
- Commercial Telephones (PBX, GTE, Microwave)

### 3.0 PRECAUTIONS AND LIMITATIONS

- 3.1 Completion of this procedure shall not prevent the operators from bringing the plant to a safe condition to protect the health and safety of the general public.
- 3.2 The State of Wisconsin Emergency Management, Manitowoc County Emergency Management, and Kewaunee County Emergency Government shall be notified **within 15-minutes of event classification**.
- 3.3 The NRC shall be notified **immediately following the state and county notifications, not to exceed one hour from declaration** of a classified emergency.
- 3.4 TSO knowledge is required for IBM mainframe access to the paging system.
- 3.5 Only approved personnel may activate the Point Beach Automated Notification System.

### 4.0 INITIAL CONDITIONS

- 4.1 An emergency has been declared or terminated.
- 4.2 A change from one emergency classification to another has occurred.
- 4.3 Further degradation of the level of safety of the plant, major changes in equipment or reactor status, or other major changes **NOT** involving a change in emergency classification have occurred.

5.0 PROCEDURE

**NOTE:** The notifications of the Emergency Response Organization, State and Counties, KNPP, and Nuclear Regulatory Commission should be completed simultaneously if possible.

5.1 Notification of Emergency Response Organization (ERO)

**NOTE:** The ERO activation can be delayed if a security threat is in progress that would jeopardize the ERO safety. Other notifications shall be made.

**NOTE:** Step 5.1.2, Step 5.1.3, or Step 5.1.4, respectively, shall be performed only if the Point Beach Automated Notification System is unavailable.

**NOTE:** If ERO already activated by an Alert or Site Emergency Classification, do not repeat this section.

5.1.1 PBNP Automated Notification System (primary means)

- a. Determine the information desired to be sent to the Emergency Response Organization using Attachment A. Record the information at the bottom of Attachment A.
- b. From any on-site telephone, dial 7158 to access the PBNP Automated Notification System and follow the voice prompt instructions.
- c. When prompted, enter the scenario activation password "111222333" using the keypad on the telephone.
- d. When prompted, enter the 3-digit SCENARIO number from Attachment A.
- e. Press "3" to start the scenario.
- f. When the PBNP Automated Notification System says, "The scenario is building," press the "#" key, listen to "good-bye," and then hang up. Other menu options are available at this point (i.e., cancel scenario).

**NOTE:** IF the ERO pager(s) in the Control Room do not activate and display the message within 3-4 minutes, THEN go to Step 5.1.2 to send the page.

- g. Monitor the Emergency Response Organization (ERO) pager(s) in the Control Room for verification of activation.

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- h. Periodic fax printouts will automatically be sent to the Control Room, Technical Support Center, and Emergency Operations Facility, and JPIC to show who is responding and their estimated time of arrival.
- i. If the pager activation was successful, skip Steps 5.1.2 through 5.1.4 and return this procedure section and completed Attachment A to Emergency Preparedness or include in the TSC Manager turnover package.

Performed By:

_____	/
Performer (Print and Sign)	Date / Time

5.1.2 Alpha-Numeric Paging Accessed Via Telephone (backup means, not required if Step 5.1.1 was successful).

**NOTE 1: Enter pager number 0799 to do a PBNP All-Call page of the ERO.**

**NOTE 2: Enter the 4 digit pager number to page a specific individual.**  
(Ref. Emergency Telephone Directory)

**NOTE 3: You must enter the asterisks and two digit code to have the message sent to the pagers (i.e., "\*\*\*50" would display "PBNP UE, JPIC Only Report" or "\*\*\*017556247" would display "Call Immediately 7556247").**

a. Determine the pager message required:

- Use the following preprogrammed codes to provide event declarations.

**50 = PB UE, Only JPIC Report to Site
**51 = PB ALERT. Report to ERF at once.
**54 = PB SE. Report to ERF at once.
**57 = PB GE. Report to ERF at once.

- Use the following preprogrammed codes to provide other information, with a call back number, if appropriate:

**60 = Drill UE. JPIC Only Report
**61 = Drill. AL/SE/GE. Report
**62 = ERO Drill, Call 755-7151
**63 = ERO Drill, Call 800-236-1588
**64 = ERO Drill, Report to ERF
**01 = Call Immediately
**02 = Urgent Call
**03 = Call when Available
**07 = Please Call the Office
**99 = Phone Home

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- b. Access the paging system by dialing ext. 7243, 1-800-225-9372 or 8-544-7500.
- c. Listen to the prerecorded message and an audible tone. Enter the four-digit pager number of the person or group you want to page as determined in the above notes.
- d. Listen to the next prerecorded message that asks you to enter your callback number. Enter the "\*\*\*" code determined in Step 5.1.2.a and a phone number the person should call (only if appropriate).
- e. Listen for an audible tone again. The recording should then state that your message has been dispatched via the Wisconsin Electric paging system. Your page has now been completed.

**NOTE: IF the ERO pager(s) in the Control Room do not activate and display the message within 3-4 minutes, THEN go to Step 5.1.3 to send the page.**

- f. Monitor the ERO pager(s) in the control room for verification of activation.
- g. If the pager activation was successful, skip Steps 5.1.3 and 5.1.4 and return this procedure section to Emergency Preparedness or include in the TSC Manager turnover package.

Performed By:

\_\_\_\_\_ / \_\_\_\_\_  
Performer (Print and Sign)

\_\_\_\_\_ / \_\_\_\_\_  
Date / Time

5.1.3 Alpha-Numeric Paging Accessed Via IBM Mainframe (TSO) (backup means not required if Step 5.1.1 or 5.1.2 was successful).

**NOTE:** You must have TSO access to page via the IBM Mainframe system. If you do not have TSO access, notify DSS to re-assign to an individual with TSO access.

- a. Access the mainframe MULTSESS menu from a computer.
- b. After selecting the TSO application and receiving the READY text, type in "PAGE" and the enter key.

**NOTE 1:** Do not use symbols.

**NOTE 2:** Enter pager number 0799 to do a PBNP All-Call page of the ERO.

**NOTE 3:** To page an individual, hit the enter key and select the name from the list of pager users displayed using a last name search.

- c. A paging screen will appear asking you for an alpha-numeric message and the pager number you want to reach. Type the message per the event classification and any activation needs of the Emergency Response Facilities.
- d. Tab to the pager number blank and enter the pager or group number.
- e. Press ENTER to have your message sent.
- f. After a slight delay, a message comes up showing that your message was sent and who was paged.
- g. This completes the page. You can continue with another page or press PF3 as needed to return to the READY prompt. Type CESF and the enter key to log off TSO at this point.

**NOTE: IF the ERO pager(s) in the Control Room do not activate and display the message within 3-4 minutes, THEN go to Step 5.1.4 to send the page.**

- h. Monitor the ERO pager(s) in the control room for verification of activation.
- i. If the pager activation was successful, skip Step 5.1.4 and return this procedure section to Emergency Preparedness or include in the TSC Manager turnover package.

Performed By:

\_\_\_\_\_ / \_\_\_\_\_  
Performer (Print and Sign)                      Date / Time

- 5.1.4 Manual Call Tree (reference Emergency Telephone Directory) (backup means, not required if Step 5.1.1 or 5.1.2 , or Step 5.1.3 was successful).

**NOTE 1: Use this process if all automated methods of notifying the ERO fail.**

**NOTE 2: IF unable to contact any of the following personnel, THEN assign that section to onsite individual.**

- a. Contact two people from the Emergency Preparedness staff, an onshift STA, OS, or Security, and the On-Call Management for each discipline as indicated below, instructing them to:

- Notify qualified ERO personnel for each position listed (ref ETD 01), determine FFD, fill the "\*" minimum positions first, and staff each position to the (#) level indicated.
  - (a) FFD #1 - "Are you able to respond?"
  - (b) FFD #2 - If yes, "Have you consumed alcohol in the last five hours?"
  - (c) FFD #3 - If no, instruct person to report immediately to emergency response facility and fill the position of \_\_\_\_\_.
- Contact you with periodic status updates.
- Report to their emergency response facility upon completion of the notifications.

(a) EP Staff #1 \_\_\_\_\_ (Name)

- (1) \*TSC Manager (1)
- (2) TSC/EOF Communicator (1)
- (3) \*EOF/CR Communicator (1)
- (4) \*Engineering Coordinator (1)
- (5) \*Operations Coordinator (1)
- (6) \*OSC Coordinator (1)
- (7) \*ENS Communicator (1)
- (8) \*Rad/Chem Coordinator (1)
- (9) Security Coordinator (1)
- (10) Plant Status Monitor-TSC (1)
- (11) Administrative Support Leader-TSC (1)
- (12) Rad/Chem Monitor (1)
- (13) Reactor/Core Physics Engineer (1)
- (14) PRA Engineer (1)
- (15) Mechanical Systems Engineer (1)
- (16) Electrical/I&C Engineer (1)

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(b) EP Staff #2 \_\_\_\_\_ (Name)

- (1) \*Emergency Director (1)
- (2) \*EOF Manager (1)
- (3) \*TSC/CR Communicator (1)
- (4) \*Dose/PAR Coordinator (1)
- (5) \*State/Counties Communicator (1)
- (6) \*JPIC Communicator (1)
- (7) \*Resource Coordinator (1)
- (8) Plant Status Monitor-EOF (1)
- (9) Dose/PAR Monitor (1)
- (10) HPN/SRC Communicator (1)
- (11) State Liaison (1)
- (12) Offsite Assembly Area Coordinator (1)
- (13) Corporate Communicator (1)
- (14) Administrative Support Leader-EOF (1)
- (15) Kewaunee County Liaison (1)
- (16) Manitowoc County Liaison (1)
- (17) JPIC Manager

(c) Onshift STA, OS, or Security \_\_\_\_\_ (Name)

- (1) \*DSS (Reentry Team Coordinator) from "off" crews (1)
- (2) \*Operating Supervisor (Operations Leader) from "off" crews (2)
- (3) CO Reentry from "off" crews (4)
- (4) AO Reentry from "off" crews (4)

(d) Radiation Protection \_\_\_\_\_ (Name)

- (1) \*Offsite Radiation Protection Coordinator (1)
- (2) \*Radiation Protection Leader (1)
- (3) \*Field Team Leader (1)
- (4) \*Offsite RP Reentry (2)
- (5) Onsite RP Reentry (4)
- (6) Offsite RP Reentry (4)

(e) Maintenance Supervisor \_\_\_\_\_ (Name)

- (1) \*Mechanical Leader (1)
- (2) \*Electrical Leader (1)
- (3) Mechanical Reentry (4)
- (4) Electrical Reentry (4)

(f) I&C Supervisor \_\_\_\_\_ (Name)

- (1) \*I&C Leader (1)
- (2) I&C Reentry (4)

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(g) Chemistry Supervisor \_\_\_\_\_ (Name)

- (1) \*Chemistry Leader (1)
- (2) Chemistry Reentry (4)

b. Return this procedure section to Emergency Preparedness or include in the TSC Manager turnover package.

Performed By:	
_____	/
Performer (Print and Sign)	Date / Time

5.2 Notifications to State and Counties

**NOTE 1:** The notification of state and county emergency government agencies shall be notified within 15 minutes of event classification, event termination, or change in protective action recommendations.

**NOTE 2:** The State Radiological Coordinator may place a separate call to obtain additional information for purposes of determining State and County Emergency Operation Center(s) activations.

**NOTE 3:** Priority levels are assigned to Two-Digit Dial-Select communications as follows:

1	Siren Activation
2	Event Notification/PAR Upgrade
3	Status Update
4	General Information

**NOTE 4:** IF the event is classified as a General Emergency, THEN recommend minimum protective actions.

5.2.1 The Emergency Director shall complete or delegate the completion of Attachment B, Nuclear Accident Reporting Form.

5.2.2 The Emergency Director shall approve the contents of Attachment B, Nuclear Accident Reporting Form, prior to the release of the information.

5.2.3 Provide this procedure section and the completed form to the person designated to make the communications, conducting a verbal review of the information as required.

**NOTE:** IF the Two-Digit Dial-Select is out-of-service, THEN use commercial telephones (ref. Emergency Telephone Directory) to make the notification.

5.2.4 Record a callback number for the facility you are calling from on Attachment B, Nuclear Accident Reporting Form.

5.2.5 Using the Two-Digit Dial-Select telephone:

- Pick up the handset and ask if the line is clear. (Similar to Gai-tronics)
- **IF** the line is busy,  
**THEN** inform them of your Priority 2 notification.
- They will clear the line, unless a Priority 1 discussion is in progress.
- When the line is clear, continue with the notification.

**NOTE 1: IF unable to contact a specific agency after five (5) rings, THEN press the # key to stop the ringing and continue with the notification to the agencies online. Then use commercial telephone to contact those agencies which were not reached.**

**NOTE 2: Two locations will ring for the State: WEM in Madison and State Patrol (off-hours). Press the # key to stop the ringing if one location does not answer.**

5.2.6 Dial "22" to contact the following agencies simultaneously:

- Manitowoc County Sheriff Dispatcher
- Kewaunee County Sheriff Dispatcher
- State of Wisconsin Emergency Management (WEM)

5.2.7 Record the time and the name of the person who answers FOR EACH AGENCY on Attachment B, Nuclear Accident Reporting Form, you are transmitting.

5.2.8 Request each agency to remain on the line while you communicate the event information.

5.2.9 Request each agency to remain on the line while you ask one agency (preferably the State) to repeat the information as a confirmation of accuracy.

5.2.10 Request each agency to transmit the event information to appropriate personnel within their agency, instructing those individuals to place a return call to you to verify the notification.

5.2.11 **IF** commercial telephone lines must be used to complete the notifications, **THEN** call each of the following agencies as appropriate, repeating Steps 5.2.7 through Step 5.2.10. (ref Emergency Telephone Directory).

- Manitowoc County Sheriff Dispatcher
- Kewaunee County Sheriff Dispatcher
- State of Wisconsin Emergency Management (WEM)

**NOTE:** **IF** unable to remain at the callback number, **THEN** ensure an alternate person has assumed your responsibilities at that location.

5.2.12 Fax Attachment B, Nuclear Accident Reporting Form, to the following agencies using the pre-programmed keys or referencing the Emergency Telephone Directory.

- State of Wisconsin Emergency Management (WEM)
- Manitowoc County Emergency Management
- Kewaunee County Emergency Government
- Emergency Response Facilities (If Activating)

5.2.13 Remain at the callback number until the callback verifications have been received from the three agencies, recording the time and name of each caller on Attachment B, Nuclear Accident Reporting Form.

5.2.14 Return Attachment B, Nuclear Accident Reporting Form, to the Emergency Director.

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5.3 Notification to KNPP Control Room

5.3.1 Obtain an approved copy of Attachment B, Nuclear Accident Reporting Form.

5.3.2 Contact the Kewaunee Nuclear Power Plant Control Room at (920) 388-2560 ext. 8235 and relay the event information on Attachment B, Nuclear Accident Reporting Form.

Contact Name: \_\_\_\_\_ Time: \_\_\_\_\_

Classification Transmitted: \_\_\_\_\_

5.3.3 Return this procedure section and all attachments used to the Emergency Director.

Performed By:	
_____	_____ / _____
Performer (Print and Sign)	Date / Time

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5.4 Notifications to the NRC

**NOTE:** The notification to the NRC shall be completed immediately following the notifications to the state and counties and not exceeding 60-minutes from event classification, event termination, or change in protective action recommendations.

5.4.1 Emergency Director shall provide this procedure and the completed Attachment B, Nuclear Accident Reporting Form (or a copy), from Step 5.2.1 to the person designated to make the notification. A verbal review of the information will be conducted, if necessary.

**NOTE 1:** If the FTS-ENS phone is out-of-service, use commercial telephones (ref. Emergency Telephone Directory) to make the notification.

**NOTE 2:** The NRC may request a continuous open line of communication be maintained without regard to event classification. This request shall be honored if at all possible.

5.4.2 Fax the Nuclear Accident Reporting Form to the NRC using the pre-programmed fax key or referencing the Emergency Telephone Directory.

5.4.3 Contact the NRC Operations Center via the FTS-ENS phone by dialing the number exactly as listed on the phone. If number is busy, try the next number listed (ref. Emergency Telephone Directory).

5.4.4 Record the time and name of the NRC Duty Officer on Attachment B, Nuclear Accident Reporting Form, you are transmitting.

5.4.5 Communicate the event information clearly and concisely.

5.4.6 Make an entry into the appropriate NRC log.

- Control Room NOMS Narrative Log
- Technical Support Center ENS Log Book

5.4.7 **IF** not previously notified,  
**THEN** contact the NRC resident inspector.

Contact Name: \_\_\_\_\_ Time: \_\_\_\_\_

Classification Transmitted: \_\_\_\_\_

5.4.8 Return or fax Attachment B, Nuclear Accident Reporting Form, to the Emergency Director.

5.5 Status Updates to State and Counties

**NOTE 1:** Status updates should be made to State and County Emergency agencies approximately hourly, upon a major change in plant/radiological status, or at their request.

**NOTE 2:** Use status boards Attachment C, Plant Status Update, Attachment D, Radiological Status Update, and/or Attachment E, Status Reports on Plant Systems and Control for Affected Unit as a verbal guideline for communicating status updates.

**NOTE 3:** **IF** unable to contact a specific agency, **THEN** continue with the notification to other agencies, attempt to contact those agencies which have not been contacted.

**NOTE 4:** **IF** the Two-Digit Dial-Select is out-of-service, **THEN** use commercial telephones (preferably via conference call referring to the Emergency Telephone Directory) to make the status update.

5.5.1 Using the Two-Digit Dial-Select telephone:

- Pick up the handset and ask if the line is clear. (Similar to Gai-tronics)
- **IF** the line is busy, **THEN** inform them of your Priority 3 notification.
- They will clear the line, unless a Priority 1 or 2 discussion is in progress.
- When the line is clear, continue with the notification.

**NOTE:** **IF** unable to contact a specific agency after five (5) rings, **THEN** press the # key to stop the ringing. Contact those agencies by commercial telephone after completing the status update.

5.5.2 Dial "53, 43, and 83" consecutively to contact the following agencies simultaneously:

- 53 - Manitowoc County EOC
- 43 - Kewaunee County EOC
- 83 - State of Wisconsin Emergency Management (WEM) EOC

5.5.3 Request each agency remain on the line while you communicate the status update event information and answer questions.

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- 5.5.4 **IF** commercial telephone lines must be used to complete the notifications, **THEN** call the following agencies (ref. Emergency Telephone Directory):
- Manitowoc County EOC
  - Kewaunee County EOC
  - State of Wisconsin Emergency Management (WEM) EOC
- 5.5.5 **IF** a request has been made by the State or County for a written update **THEN** complete the appropriate section(s) of Attachment C, D, or E, obtain the Emergency Director approval, and fax using the pre-programmed fax keys or referencing the Emergency Telephone Directory.
- State of Wisconsin Emergency Management (WEM)
  - Manitowoc County Emergency Management
  - Kewaunee County Emergency Government
  - Emergency Response Facilities (If Activating)
- 5.5.6 Repeat Steps 5.5.1 through 5.5.5 each time a status update is required.
- 5.5.7 **IF** a written update of Attachment C, D, or E was faxed to the State or County, **THEN** return the appropriate completed attachment(s) to the Emergency Director.

5.6 Status Updates to the NRC

**NOTE 1:** The NRC should receive status updates approximately hourly, upon a major change in plant/radiological status, or at their request.

**NOTE 2:** **IF** the FTS-ENS phone is out-of-service, **THEN** use commercial telephones (ref. Emergency Telephone Directory) to make the notification.

**NOTE 3:** The NRC may request that a continuous open line of communication be maintained without regard to event classification.

5.6.1 Contact the NRC Operations Center via the FTS-ENS phone by dialing the number exactly as listed on the NRC phone. If number is busy, try the next number listed (ref. Emergency Telephone Directory).

5.6.2 Fax written status updates received from the EOF to the NRC, **THEN** send confirmatory fax to the Emergency Director.

5.6.3 Request TSC Manager approval to fax other information requested from the NRC. Fax the information subsequently to the Emergency Director. This may include, but is not limited to, procedure changes, completed procedures, PPCS printouts, equipment status information, non-emergency 50.72 notifications, logs regarding LCO entries/exits, safety evaluations, etc.

6.0 REFERENCES

- 6.1 WE to NRC letter May 19, 1983, Staffing Levels for Emergency Situations, Point Beach Nuclear Plant
- 6.2 NRC letter to WE, December 20, 1985, Inspection Report Nos. 50-266/83-01 and 50-301/83-01
- 6.3 Emergency Plan, EP 5.0, Organizational Control of Emergencies

7.0 BASES

- B-1 10 CFR 50.47(b), Emergency Plans
- B-2 10 CFR 50.72, Immediate Notification Requirements for Operating Nuclear Power Reactors
- B-3 NUREG-1022, Event Reporting Guidelines, 10 CFR 50.72 and 50.73, Rev 1, January 1998

ATTACHMENT A  
ERO NOTIFICATION SYSTEM  
SCENARIO SELECTION MATRIX

<b>Scenario Number</b>	<b>Emergency Class</b>
<b>100</b>	<b>Unusual Event.</b>
<b>210</b>	<b>Alert</b>
<b>320</b>	<b>Site Emergency</b>
<b>420</b>	<b>General Emergency</b>
<b>555</b>	<b>Disregard previous page.</b>
<b>556</b>	<b>Disregard previous page. Standby for corrected information. Do not call.</b>

Determine the 3-digit scenario number by choosing the appropriate classification and approach message from the matrix above. Record here \_\_\_\_\_

NOTIFICATIONS - ERO, STATE & COUNTIES, AND NRC

ATTACHMENT B  
NUCLEAR ACCIDENT REPORTING FORM

**NOTE: Direct state and counties to record the information on the State of Wisconsin Nuclear Accident Reporting System (NARS form).**

<p><b>1. Status</b> (A) Actual (C) Drill (B) Exercise (D) Termination</p>	<p><b>2. Station</b> (T) Point Beach U1 - U2 - Both</p>	<p><b>3. On-site Incident Classification</b> (A) Unusual Event (D) General Emergency (B) Alert (E) Recovery (C) Site Emergency (F) Not Applicable</p>																																
<p><b>4. Incident Classification/Termination</b> Time: _____ / _____ Date: _____ / _____ EAL # _____</p>	<p><b>5. Release to Environment</b> (A) None (B) Potential (C) Occurring (D) Terminated</p>	<p><b>6. Type of Release</b> (A) Not Applicable (B) Radioactive Gas (C) Radioactive Liquid</p>																																
<p><b>7. Wind Direction</b> Degrees From: _____ Downwind Sector: _____</p>	<p><b>8. Wind Speed</b> (B) Miles/hr: _____</p>																																	
<p><b>9. Protective Actions Recommended</b> (A) None (B) Evacuate 0-2 mile radius (C) Evacuate 0-5 miles radius (D) Evacuate 2-5 miles for Sectors _____ (E) Evacuate 5-10 miles for Sectors _____ (F) Other _____</p>																																		
<p><b>10. Additional Information From EAL Table:</b> _____ _____ _____ Emergency Director Approval: _____ Date / Time _____ / _____</p>																																		
<p><b>11. Immediately upon Emergency Director approval, relay information to Emergency Managements (EM) listed.</b> Request the answering parties to have the appropriate EM personnel call 920/____-____ for notification verification. State/County message transmitted by _____ in the Point Beach Nuclear Plant _____ (Name) (CR/TSC/EOF/AEOF)</p>																																		
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Duty Officer	_____	_____	_____																															
<p><b>13. NRC ANSWERED - Callback Verification Not Required</b> Duty Officer Name _____ Time _____ Continuous phone link requested: ___No ___Yes NRC message transmitted by _____ in the Point Beach Nuclear Plant _____ (Name) (CR/TSC/EOF/AEOF)</p>																																		

ATTACHMENT B  
NUCLEAR ACCIDENT REPORTING FORM  
AFFECTED SECTORS BASED ON WIND DIRECTION

**NOTE:** If wind speed is less than three (3) mph or lake breeze conditions exist, then recommend protective actions for all sectors (360°) 0-5 miles. Lake breeze conditions exist if the difference between actual wind direction values for inland and near shore meteorological towers is greater than 90°.

<u>Wind Direction* (Degrees From)</u>	<u>Sectors in Downwind Area</u>
0 - 11	H, J, K
> 11 - 34	J, K, L
> 34 - 56	K, L, M
> 56 - 79	L, M, N
> 79 - 101	M, N, P
> 101 - 124	N, P, Q
> 124 - 146	P, Q, R
> 146 - 169	Q, R, A
> 169 - 191	R, A, (B)
> 191 - 214	A, (B), (C)
> 214 - 236	(B), (C), (D)
> 236 - 259	(C), (D), (E)
> 259 - 281	(D), (E), (F)
> 281 - 304	(E), (F), (G)
> 304 - 326	(F), (G), H
> 326 - 349	(G), H, J
> 349 - 360	H, J, K
> 360 - 371 **	H, J, K
> 371 - 394 **	J, K, L
> 394 - 416 **	K, L, M
> 416 - 434 **	L, M, N
> 434 - 461 **	M, N, P
> 461 - 484 **	N, P, Q
> 484 - 506 **	P, Q, R
> 506 - 520 **	Q, R, A

\* As read on PPCS or control room instruments.

\*\* As read on chart recorder.

( ) Denotes sectors over Lake Michigan.

ATTACHMENT C  
PLANT STATUS UPDATE

Check One:  Actual  Drill  Exercise

NOTE: Cross-out section(s) not being communicated.

1. Point Beach Nuclear Plant

2. Date/Time: \_\_\_\_/\_\_\_\_/\_\_\_\_

3. Description of Event: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Emergency Action Level(s): \_\_\_\_\_  
\_\_\_\_\_

5 Major Equipment Affected: (LIST)

- |          |          |
|----------|----------|
| a. _____ | b. _____ |
| c. _____ | d. _____ |
| e. _____ | f. _____ |

6. Reactor Status: (Check one)

- a. \_\_\_\_\_ Critical  
b. \_\_\_\_\_ Shutdown

7. Radiological boundaries Lost(L) or Challenged (C):  
(Indicate all that apply)

- a. \_\_\_\_\_ Fuel Cladding  
b. \_\_\_\_\_ Reactor Coolant System  
c. \_\_\_\_\_ Containment

8. Plant Personnel Status (Enter # or N/A for each type incident):

- |  |   |
|--|---|
| a. # _____ Deaths                            | b. # _____ Overexposure to Personnel          |
| c. # _____ Injured Personnel Treated On-Site | d. # _____ Injured Personnel Treated Off-Site |
| e. # _____ Contaminated Personnel On-Site    | f. # _____ Contaminated Personnel Off-Site    |
| g. Other (explain): _____                    |   |

9. Areas Affected by A Radiological Release

- a. Plume Path (Downwind Sectors): \_\_\_\_\_: \_\_\_\_\_: \_\_\_\_\_: \_\_\_\_\_ Distance \_\_\_\_\_ (mi)  
b. Deposition (Describe Location): \_\_\_\_\_

10. News Statement from the JPIC or Established Media Center

- a. The Next News Statement is Scheduled for: Date: \_\_\_\_\_ Time: \_\_\_\_\_

11. State or Local Assistance Requested by the Plant

\_\_\_\_\_  
\_\_\_\_\_

-----  
Emergency Director Approval: \_\_\_\_\_ Date / Time \_\_\_\_/\_\_\_\_/\_\_\_\_  
-----

Manitowoc Co. \_\_\_\_\_ Kewaunee Co. \_\_\_\_\_ Wisconsin WEM \_\_\_\_\_ NRC \_\_\_\_\_  
(Time) (Time) (Time) (Time)

Communicated By: \_\_\_\_\_

ATTACHMENT D  
RADIOLOGICAL STATUS UPDATE

Page 1 of 3

Check One:  Actual  Drill  Exercise

NOTE 1: { } denotes PPCS screen for obtaining data.

NOTE 2: Cross-out section(s) not being communicated.

1. Point Beach Nuclear Plant

2. Date/Time: \_\_\_\_/\_\_\_\_/\_\_\_\_

3. Plant Status:

a. General: \_\_\_\_\_ Improving \_\_\_\_\_ Stable \_\_\_\_\_ Degrading  
b. Electrical Power: \_\_\_\_\_ Satisfactory \_\_\_\_\_ Problems

If problems, describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Offsite Radiological Conditions:

a. Release Prognosis:

\_\_\_\_\_ No Release is expected  
\_\_\_\_\_ Release is expected at the start time listed in 4b.  
\_\_\_\_\_ Release is in progress

b. Event Times (Complete all applicable times):

\_\_\_\_\_ Reactor Trip  
\_\_\_\_\_ Start of release to containment  
\_\_\_\_\_ Start of release to environment  
\_\_\_\_\_ \*Release Stop  
\*(Actual / Estimated / Default) Line out inappropriate word(s)

c. Type of Release:

\_\_\_\_\_ Liquid \_\_\_\_\_ Controlled \_\_\_\_\_ Monitored  
\_\_\_\_\_ Airborne \_\_\_\_\_ Uncontrolled \_\_\_\_\_ Unmonitored

Release Path: \_\_\_\_\_

d. Plume Path (Downwind Sectors): \_\_\_\_: \_\_\_\_: \_\_\_\_: \_\_\_\_ Distance \_\_\_\_ (mi)

e. Downwind Doses at the Plume Centerline:

Based on: \_\_\_\_\_ Projections \_\_\_\_\_ Field Measurement

1 Mi (SBCC)	_____ rem TEDE	_____ rem CDE Thyroid
2 Mi.	_____ rem TEDE	_____ rem CDE Thyroid
5 Mi.	_____ rem TEDE	_____ rem CDE Thyroid
10 Mi.	_____ rem TEDE	_____ rem CDE Thyroid

ATTACHMENT D  
RADIOLOGICAL STATUS UPDATE

Page 2 of 3

- f. Surface Deposition: Based on: \_\_\_\_\_ Projection \_\_\_\_\_ Field Measurement  
dpm/100 cm<sup>2</sup> - Ci/m<sup>2</sup> \_\_\_\_\_ Location: \_\_\_\_\_  
dpm/100 cm<sup>2</sup> - Ci/m<sup>2</sup> \_\_\_\_\_ Location: \_\_\_\_\_  
dpm/100 cm<sup>2</sup> - Ci/m<sup>2</sup> \_\_\_\_\_ Location: \_\_\_\_\_  
(Line out inappropriate unit)
- g. Recommended protective actions were made at (Time: \_\_\_\_\_) on the Wisconsin Nuclear Accident Reporting System form.
5. Meteorological Conditions: {Releases/Met Summary 9-C}
- a. Wind Speed: \_\_\_\_\_ MPH
  - b. Wind Direction: \_\_\_\_\_ Degrees
  - c. Stability Class (circle one):    A    B    C    D    E    F    G
  - d. Mixing Layer Height: \_\_\_\_\_ Ft.
  - e. Precipitation (check one):  
\_\_\_\_\_ Light Rain    \_\_\_\_\_ Moderate Rain    \_\_\_\_\_ Heavy Rain    \_\_\_\_\_ None  
\_\_\_\_\_ Light Snow    \_\_\_\_\_ Moderate Snow    \_\_\_\_\_ Heavy Snow
6. Reactor Status:    \_\_\_\_\_ At Power (\_\_\_\_\_ Megawatts Thermal)  
{Core}    \_\_\_\_\_ Tripped (Power Level at trip \_\_\_\_\_ Megawatts Thermal)  
\_\_\_\_\_ Hot Shutdown (Current RCS Temperature \_\_\_\_\_ deg. F.)  
\_\_\_\_\_ Cold Shutdown (RCS is less than 200°F.)
7. Core Status:    \_\_\_\_\_ No Damage Expected  
\_\_\_\_\_ Core Damage sequence in progress    (Est. Time: \_\_\_\_\_)  
\_\_\_\_\_ Gap Release    (Est. Time: \_\_\_\_\_)  
\_\_\_\_\_ In-Vessel Severe Core Damage    (Est. Time: \_\_\_\_\_)  
\_\_\_\_\_ Vessel Melt Through    (Est. Time: \_\_\_\_\_)
- Core Exit Temperature:    \_\_\_\_\_ Increasing    \_\_\_\_\_ Stable    \_\_\_\_\_ Decreasing  
{SAS Trend-Core Cooling}
8. Containment Status:
- a. Containment Spray:  
\_\_\_\_\_ ON  
\_\_\_\_\_ OFF
  - b. Containment Leak Rate  
\_\_\_\_\_ None  
\_\_\_\_\_ Calculated (\_\_\_\_\_ cc/sec)  
\_\_\_\_\_ Design Rate (0.1% per day)  
\_\_\_\_\_ 100% per Day  
\_\_\_\_\_ 100% per Hour
  - c. Pressure: {SAS Trends-Cont PPR}  
\_\_\_\_\_ Increasing  
\_\_\_\_\_ Stable  
\_\_\_\_\_ Decreasing
  - d. Temperature: {SAS Trends-Cont HHT}  
\_\_\_\_\_ Increasing  
\_\_\_\_\_ Stable  
\_\_\_\_\_ Decreasing



ATTACHMENT E  
STATUS REPORT ON PLANT SYSTEMS AND CONTROLS FOR AFFECTED UNIT  
Page 1 of 2

Check One:  Actual  Drill  Exercise

NOTE 1: { } denotes PPCS screen for obtaining data.

NOTE 2: Cross-out section(s) not being communicated.

1. Basic Accident Information (Unit \_\_\_\_\_)

- a. Status Report Date/Time: \_\_\_\_\_ / \_\_\_\_\_; Report # \_\_\_\_\_  
(Date) (Time-24 Hours)
- b. Emergency Classification: \_\_\_\_\_
- c. (If applicable) Time of Reactor Shutdown: \_\_\_\_\_ hrs.
- d. (If applicable) Time of Radiological Release to Containment: \_\_\_\_\_ hrs.
- e. (If applicable) Time of Radiological Release from Plant: \_\_\_\_\_ hrs.

2. Status of Reactivity Control

Subcritical Yes \_\_\_\_\_ No \_\_\_\_\_

3. Status of Core Cooling {Core}

- a. Highest Th \_\_\_\_\_ °F Coldest Tc \_\_\_\_\_ °F
- b. Incore Thermocouples: Average Temperature \_\_\_\_\_ °F
- c. Pressurizer Heaters Available Yes \_\_\_\_\_ No \_\_\_\_\_
- d. Subcooling Margin: \_\_\_\_\_ °F

4. Status of Reactor Coolant System Integrity {Core}

- a. Pressurizer or Reactor System Pressure \_\_\_\_\_ psig
- b. Pressurizer Level \_\_\_\_\_ %
- c. Primary System Relief Valves Closed Yes \_\_\_\_\_ No \_\_\_\_\_
- d. Letdown Flow \_\_\_\_\_ gpm
- e. Charging Pump Flow \_\_\_\_\_ gpm

5. Status of Secondary Systems {Secondary}

- a. Steam Generator Pressure "A" \_\_\_\_\_ psig "B" \_\_\_\_\_ psig
- b. Steam Generator Level "A" \_\_\_\_\_ % "B" \_\_\_\_\_ %
- c. Feedwater Flow, Auxiliary "A" \_\_\_\_\_ gpm "B" \_\_\_\_\_ gpm  
Main "A" \_\_\_\_\_ klbm/h "B" \_\_\_\_\_ klbm/h

6. Containment {Containment}

- a. Pressure WR \_\_\_\_\_ psig NR \_\_\_\_\_ psig
- b. Containment Spray Flow \_\_\_\_\_ gpm
- c. NaOH Addition Yes \_\_\_\_\_ No \_\_\_\_\_ Time \_\_\_\_\_ Level \_\_\_\_\_ %
- d. Containment Recirculation Coolers Running (Circle) 1 2 3 4
- e. Sump B Level \_\_\_\_\_ inches
- f. H<sub>2</sub> Concentration \_\_\_\_\_ %
- g. Containment Isolation Valves (Note any not closed) \_\_\_\_\_

**ATTACHMENT E**  
**STATUS REPORT ON PLANT SYSTEMS AND CONTROLS FOR AFFECTED UNIT**  
Page 2 of 2

**7. Safeguards Systems {Core}**

a.	Safety Injection	<u>Train A</u>	<u>Train B</u>
	High Head	_____ gpm	_____ gpm
	Low Head	_____ gpm	_____ gpm
b.	Accumulators		
	Level	_____ %	_____ %
	Pressure	_____ psig	_____ psig
	Isolation Valve Open	Yes/No	Yes/No
c.	Refueling Water Storage Tank Level	_____ %	{Core}
d.	Component Cooling Water		
	Temperature	inlet _____ °F	outlet _____ °F
	Flow	_____ gpm	
e.	Service Water No. of pumps running	_____	Temp. _____ °F
f.	ESF pump (SI, RHR, AFW, CS) recirculation status, enter in remarks.		

**8. State of Meteorology {Releases/Net summary}** **Primary Tower** **Inland Tower**

		10M	45M	
a.	Wind Direction (avg.)	_____ °	_____ °	_____ °
b.	Wind Speed	_____ mph	_____ mph	_____ mph
c.	$\sigma\theta$	_____ °	_____ °	_____ °
d.	$\Delta T/\Delta H$	_____ °F		
e.	Atmospheric Stability Class	_____		
f.	Lake Breeze Conditions Exist? (circle)	Yes / No		

**9. Status of Power Supplies**

a.	Offsite Power	Unit 1	Y / N	Unit 2	Y / N	Gas Turbine	Y / N		
b.	Diesel Running	G01	Y / N	G02	Y / N	G03	Y/N	G04	Y/N
	Diesel Loaded	G01	Y / N	G02	Y / N	G03	Y/N	G04	Y/N

**10. Other Equipment Remarks:**

-----  
Emergency Director Approval: \_\_\_\_\_ Date / Time \_\_\_\_\_ / \_\_\_\_\_  
-----  
Manitowoc Co. \_\_\_\_\_ Kewaunee Co. \_\_\_\_\_ Wisconsin WEM \_\_\_\_\_ NRC \_\_\_\_\_  
(Time) (Time) (Time) (Time)  
Communicated By: \_\_\_\_\_