

Dominion Nuclear Connecticut, Inc.
Millstone Power Station
Rope Ferry Road
Waterford, CT 06385



AUG 31 2001

Docket Nos. 50-245
50-336
50-423
B18472

RE: 10 CFR 50, Appendix E
10 CFR 50.47(b)(5)

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

Millstone Power Station, Unit Nos. 1, 2 and 3
Revised Emergency Plan Procedures

The purpose of this letter is to inform the Nuclear Regulatory Commission that the following Emergency Plan Procedures have been implemented:

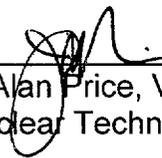
- MP-26-EPI-FAP01-001, "Control Room - Director of Station Emergency Operations (CR-DSEO)," Major Revision 0, Minor Revision 2, and
- MP-26-EPI-FAP07-003, "NRC Event Notification Form," Major Revision 0, Minor Revision 2.

There are no regulatory commitments contained within this letter.

If you have any additional questions concerning this submittal, please contact Mr. David A. Smith at (860) 437-5840.

Very truly yours,

DOMINION NUCLEAR CONNECTICUT, INC.



J. Alan Price, Vice President
Nuclear Technical Services - Millstone

cc See next page

A045

Attachments (2)

cc: H. J. Miller, Region I Administrator (2 copies)
R. J. Conte, Chief, Operational Safety Branch, Region I

cc: w/o attachments

J. B. Hickman, NRC Project Manager, Millstone Unit No. 1
T. J. Jackson, NRC Inspector, Region I, Millstone Unit No. 1
J. T. Harrison, NRC Project Manager, Millstone Unit No. 2
NRC Senior Resident Inspector, Millstone Unit No. 2
V. Nerses, NRC Senior Project Manager, Millstone Unit No. 3
NRC Senior Resident Inspector, Millstone Unit No. 3

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Attachment 1

Millstone Power Station, Unit Nos. 1, 2 and 3

Emergency Procedures Implementing (EPI) Functional Administrative Procedure (FAP)
MP-26-EPI-FAP01-001, "Control Room - Director of Station Emergency Operations
(CR-DSEO)," Major Revision 0, Minor Revision 2

6/28/01
Approval Date

6/29/01
Effective Date

Document Action Request

SPG#
010807 - 074003

Initiated By: K. Burgess Date 8/3/01 Department: EPSD Ext.: 2490

Document No.: MP-26-EP^{#101 KB}-FAP01-001 Rev. No.: 000 Minor Rev.: 02

Title: Control Room - Director of Station Emergency Operations (CR-DSEO)

Reason for Request/Action (attach commitments, CRs, ARs, OEs etc)
Editorial Correction - Section Numbers in Section A #1 are incorrect

Continued

Select one (See MP-05-DC-SAP01 sect 2.3 to determine type of change)

Intent Change (SQR Independent, RCD, Env Screen Required)
Other reviews may be required. See MP-05-DC-FAP 01.1 att 3

Edit Corr.:

Non-Intent Change

(Only SQR Independent Review and Env. screen Required)

Editorial Correction Approval

Steve Mazzola 8-7-01
Plant Mgmt Staff Member - Approval

TPC Interim Approval

(1) Plant Mgmt Staff Member Print/Sign/Date

(2) SM/SRO/CFH Print/Sign/Date

Procedure Request/Feedback Disposition

Priority: Perform Now Perform Later

Activity: Revision Minor Revision Cleanup Rev Biennial Review Cancellation Supercedure
See DC-GDL01 for guidance

TPC OTC Place in VOID

Reviews continued <input type="checkbox"/>	Print	Sign	Date	SQR Qualified			If Comments
				Yes	No	Dept.	
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<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>		
Licensing Basis				<input type="checkbox"/>	<input type="checkbox"/>		
Independent	<input checked="" type="checkbox"/>	<u>N/A</u>		<input type="checkbox"/>	<input type="checkbox"/>		

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1. SQR Program Final Review and Approval

Approval Disapproval

SQR Qualified Independent Reviewer / Date

Process Owner /
Responsible Individual

Approval Date

2. SORC RI/PO Final Review and Approval

Process Owner / Responsible Individual Sign
Meeting No.:

SORC Approval Signature

Approval Date

Effective Date: 8-10-01

8/7/01

Approval Date

8/10/01

Effective Date

Control Room - Director of Station Emergency Operations (CR-DSEO)

NOTE

If the applicable unit is Unit 1, the Unit 2 SM will classify the event and become the CR-DSEO after being briefed by the Unit 1 SM on the initiating conditions and Unit 1 Emergency Action Level (EAL).

Section A: Emergency Response Immediate Actions

1. Evaluate the conditions using EPI-FAP06, "Classification and PARs."

Notify the SDO and Shift Technician (ST) to report to the control room and provide a briefing. | ①

Review the EAL tables.

IF the event involves Unit 1, Unit 1 SM perform the following:

- Notify the Unit 2 SM of the event in progress.
- Refer To EPI-FAP15-001, "DSEO/ADTS Briefing Sheet," and provide initial briefing on the following items:

Section 1, Event Classification - level and basis

Section 5, Unit Status (EOPs and Security are N/A) | ②

Section 7, Radiological Release

Evaluate the status of the fission product barriers.

2. Declare the emergency.

Announce the emergency declaration level and time to the CR staff and assume the role of CR-DSEO.

NOTE

Offsite notification shall be accomplished within 15 minutes of an emergency event classification. | ①

Direct the ST to initiate offsite notifications per EPI-FAP07, "Notifications and Communications."

3. Go To the applicable section and perform the immediate actions.

Unusual Event Section B

Alert..... Section C

Site Area Emergency..... Section D

General Emergency Section E

Section B: Unusual Event Immediate Actions

NOTE

During a security event, it may be advisable **NOT** to sound an alarm or make a PA announcement.

1. Station Notification

- Notify the unaffected unit control rooms of the event.
- Activate the outside speakers.
- Review the wording for the station notification message and announce the following over the station PA system:

Attention all personnel; attention all personnel. An Unusual Event has been declared at (Unit # _____) due to (brief description of event _____). All members of the SERO stand by for further instructions. All other personnel continue with your present duties.

- Repeat the PA message.
- Log time of announcement.

2. SERO Activation/State Notification

- Review and approve the Incident Report Form (IRF) for transmittal.

3. NRC Notification

- Direct the SDO to notify the NRC via the ENS.
- Verify the ST or SDO has contacted the resident inspector.

Section C: Alert Immediate Actions

NOTE

Hazardous conditions may impact the ability to move personnel. If hazardous conditions exist, it may be better to shelter non-essential personnel onsite.

During a security event, it may be advisable **NOT** to sound an alarm or make a PA announcement.

1. Station Notification

- Notify the unaffected unit control rooms of the event.
- Request Security to restrict site access.
- Activate the outside speakers.
- Review the wording for the station notification message and announce the following over the station PA system:

Attention all personnel; attention all personnel. An Alert has been declared at (Unit # _____) due to (brief description of event _____). All SERO members report to your designated emergency response facility.

- Repeat the PA message.
- Log time of announcement.

2. SERO Activation/State Notification

- Review and approve the Incident Report Form (IRF) for transmittal.

3. NRC Notification

- Direct the SDO to notify the NRC via the ENS.
- Verify the ST or SDO has contacted the resident inspector.

4. Precautionary Dismissal

- Refer to EPI-FAP08, "Evacuation and Assembly," and conduct a precautionary dismissal as events warrant.

Section D: Site Area Emergency Immediate Actions

NOTE

Hazardous conditions may impact the ability to move personnel. If hazardous conditions exist, it may be better to shelter non-essential personnel onsite.

During a security event, it may be advisable **NOT** to sound an alarm or make a PA announcement.

1. Station Notification

- Notify the unaffected unit control rooms of the event.
- Request Security to restrict site access.
- Activate the outside speakers.

▽ CAUTION ▽

Implementation of evacuation shall not be delayed once the station notification has been made.

- Review the wording for the station notification message and announce the following over the station PA system:

Attention all personnel; attention all personnel. A Site Area Emergency has been declared at (Unit # _____) due to (brief description of event _____). All on-duty SERO members report to your designated emergency response facility. All off-duty SERO members report to your designated Assembly Area.

- Repeat the PA message.
- Refer To EPI-FAP08, "Evacuation and Assembly," and conduct evacuation.
- Log time of announcement.

2. SERO Activation/State Notification

- Review and approve the Incident Report Form (IRF) for transmittal.

3. NRC Notification

- Direct the SDO to notify the NRC via the ENS.
- Verify the ST or SDO has contacted the resident inspector.

Section E: General Emergency Immediate Actions

NOTE

Hazardous conditions may impact the ability to move personnel. If hazardous conditions exist, it may be better to shelter non-essential personnel onsite.

During a security event, it may be advisable **NOT** to sound an alarm or make a PA announcement.

1. Station Notification

- Notify the unaffected unit control rooms of the event.
- Request Security to restrict site access.
- Activate the outside speakers.

▽ CAUTION ▽

Implementation of evacuation shall not be delayed once the station notification has been made.

- Review the wording for the station notification message and announce the following over the station PA system:

Attention all personnel; attention all personnel. A General Emergency has been declared at (Unit # _____) due to (brief description of event _____). All on-duty SERO members report to your designated emergency response facility. All off-duty SERO members report to your designated Assembly Area.

- Repeat the PA message.
- Refer To EPI-FAP08, "Evacuation and Assembly," and conduct evacuation.
- Log time of announcement.

2. SERO Activation/State Notification

- Review and approve the Incident Report Form (IRF) for transmittal.
- Review and develop PARs in accordance with EPI-FAP06, "Classification and PARs."

Section E: General Emergency Immediate Actions

3. NRC Notification

- Direct the SDO to notify the NRC via the ENS.
- Verify the ST or SDO has contacted the resident inspector.

Section F: Routine and Follow-up Activities

NOTE

The initial stages of any emergency may require CR personnel to perform several required tasks. If necessary, the CR-DSEO has the authority to reassign tasks (other than classification, PARs, and emergency exposure dose extensions) to other available CR individuals.

- 1. Log all activities and decisions.
- 2. IF a release of radioactive material is in progress or is imminent, direct the Chemistry Technician to perform initial on-shift dose assessment.
- 3. Continuously evaluate or direct the evaluation of the EAL tables and fission product barriers for changes in event status.
- 4. Ensure the NRC is notified within 60 minutes of any event classification and whenever significant changes in conditions occur during the emergency.
- 5. Ensure follow-up notifications are routinely provided to the State and local agencies as appropriate.
- 6. IF the status of the fission product barriers or offsite radiological or meteorological conditions change, perform the following:
 - Evaluate the impact on PARs per EPI-FAP06, "Classification and PARs."
 - Provide changes to PARs to the State, as appropriate (non-delegable).
- 7. IF necessary, authorize extended emergency exposure limits (dose > 5 Rem is expected) and log any extensions.
- 8. IF suspension of safeguards and §50.54(x) action is invoked, ensure that the NRC is notified of the departure as soon as possible (but within one hour) using the ENS.
- 9. Direct the RMT #1 to perform control room and plant habitability surveys and sampling.
- 10. IF necessary, issue KI tablets and log time of issue.
- 11. Conduct periodic briefings with the control room staff.
- 12. IF events have been controlled to the point where termination of the emergency can be considered, Refer To EPI-FAP06, "Classification and PARs," for guidance.

Section G: Transfer of Command and Control

NOTE

Activation of the EOF and TSC/OSC should occur within 60 minutes of SERO notification.

The control room may transfer certain response functions (such as team dispatch, notification, etc.) to TSC or EOF individuals before the facilities are declared activated, provided command and control is maintained by the CR-DSEO.

Briefings to the ADTS and the on-call DSEO shall be conducted at the same time.

- 1. Simultaneously brief the DSEO and the ADTS using EPI-FAP15-001, "DSEO/ADTS Briefing Sheet" as a guide.
- 2. IF a Unit 1 event, ensure the Unit 1 SM is part of the turnover, and simultaneously brief the DSEO and ADTS using EPI-FAP15-001, "DSEO/ADTS Briefing Sheet." ①

NOTE

For a Unit 1 event, the Unit 1 SM becomes the MCRO after a final turnover has been performed with the Unit 2 SM. The Unit 2 SM will have no further responsibilities in the event.

- 3. IF a Unit 1 event, perform a final turnover with the Unit 1 SM.
- 4. Upon formal relief by the DSEO, record turnover date and time in the logbook.
- 5. Go To EPI-FAP01-002, "Manager of Control Room Operations."

Prepared by: _____
Signature Print Date

Docket Nos. 50-245

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Attachment 2

Millstone Power Station, Unit Nos. 1, 2 and 3

Emergency Procedures Implementing (EPI) Functional Administrative Procedure (FAP)

MP-26-EPI-FAP07-003, "NRC Event Notification Form"

Major Revision 0, Minor Revision 2



Document Action Request				SPG # 010801-074536			
Initiated By: Kathleen Burgess		Date: 07/31/2001	Department: EP		Ext: 2490		
Document No: MP-26-EPI-FAP07-003		Rev. No: 000		Minor Rev No: 02			
Title: NRC Event Notification Form							
Reason for Request (attach commitments, CRs, ARs, etc) Update 10CFR50.72(b)(1) reporting criteria to new guidelines.							
Select One <small>See MP-05-DC-SAP01, sect 2.3 to determine type of change</small>				Continued <input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/> Intent Change (SQR Independent, RCD, ENV Screen Required) <small>(Other reviews may be required. See MP-05-DC-FAP01.1 Att 3)</small>		<input type="checkbox"/> Edit Corr		<input type="checkbox"/> Non-Intent Change <small>(Only SQR Independent Review and Env. screen Required)</small>			
Editorial Correction Approval _____ Plant Mngt Staff Member - Approval / Date			TPC Interim Approval / (1) Plant Mngt Staff Member Print/Sign/Date / (2) SM/SRO/CFH on Unit Print/Sign/Date				
Procedure Request/Feedback Disposition							
Priority: <input checked="" type="checkbox"/> Perform Now <input type="checkbox"/> Perform Later - See Comments							
Activity: <input type="checkbox"/> Revision <input checked="" type="checkbox"/> Minor Revision <input type="checkbox"/> Cleanup Rev <input type="checkbox"/> Biennial Review <input type="checkbox"/> Cancellation <input type="checkbox"/> Supercedure <small>See DC-GDI.01 for guidance</small>							
<input type="checkbox"/> TPC <input type="checkbox"/> OTC <input type="checkbox"/> Place in Void							
Reviews <small>continued</small>	Print	Sign	Date	SQR Qualified			If Com- ments
				Yes	No	Dept.	
<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
50.54g <input checked="" type="checkbox"/>	K Burgess	KBurgess	8/2/01	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EP/SD	<input type="checkbox"/>
RAC 06 <input checked="" type="checkbox"/>	K Burgess	KBurgess	8/1/01	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EP/SD	<input type="checkbox"/>
Environmental <input checked="" type="checkbox"/>	K Burgess	KBurgess	8/1/01	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EP/SD	<input type="checkbox"/>
Licensing Basis <input checked="" type="checkbox"/>	NA			<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Independent <input checked="" type="checkbox"/>	T. Gilbert	<i>[Signature]</i>	8/2/01	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EP/SD	<input type="checkbox"/>
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1. <input checked="" type="checkbox"/> SQR Program Final Review and Approval Approval <input checked="" type="checkbox"/> Disapproval <input type="checkbox"/> K Burgess 18/3/01 SQR Qualified Independent Reviewer / Date Steve M... for P. Blasoli Department Head/Responsible Individual 8-3-01 Approval Date				2. <input type="checkbox"/> SORC <input checked="" type="checkbox"/> RI/DH Final Review and Approval N/A _____ Department Head/Responsible Individual Sign Meeting No. _____ _____ SORC Approval Signature _____ Approval Date			
Effective Date 8-09-01							

A
B
C
D
E
G
H
I

8-03-01

Approval Date

8-09-01

Effective Date

NRC Event Notification Form

NRC EVENT NUMBER: _____ NRC CONTACT (NAME) _____

NOTIFICATION TIME	FACILITY OR ORGANIZATION	UNIT	NAME OF CALLER	TELEPHONE NUMBER ()
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EVENT TIME (EST OR EDT)	EVENT DATE or IRF#	POWER (%) and MODE BEFORE	POWER (%) and MODE AFTER
-------------------------	--------------------	---------------------------	--------------------------

EVENT CLASSIFICATION	1-Hr Non-Emergency 10 CFR 50.72 (b)(1)	4-Hr Non-Emergency 10 CFR 50.72 (b)(2)	8-Hr Non-Emergency 10 CFR 50.72 (b)(3)
GENERAL EMERGENCY	Not Applicable Below This Line	Not Applicable Below This Line	Not Applicable Below This Line
SITE AREA EMERGENCY	TS Deviation		(ii)(A) Degraded Condition
ALERT		(i) TS Required Shutdown	(ii)(B) Unanalyzed Condition that Degrades Safety
UNUSUAL EVENT	60 Day Optional 10 CFR 50.73 (a)(1)	(iv)(A) ECCS Discharge to RCS	(iv)(A) Specified System Actuation
Not Applicable Below This Line	Invalid Specified System Actuation	(iv)(B) RPS Actuation (Scram)	(v)(A) Safe Shutdown Capability
50.72 NON-EMERGENCY		(xi) Offsite Notification	(v)(B) RHR Capability
PHYSICAL SECURITY (73.71)			(v)(C) Control of Rad Release
MATERIAL/EXPOSURE			(v)(D) Accident Mitigation
FITNESS FOR DUTY			(xii) Offsite Medical
OTHER UNSPECIFIED REQUIREMENT (IDENTIFY)			(xiii) Lost ENS
INFORMATION ONLY			(xiii) Lost Other Assessment/Offsite Comms
			(xiii) Emergency Siren INOP

OTHER UNSPECIFIED REQUIREMENT (IDENTIFY):

DESCRIPTION: (Fill in as available)

1. SYSTEM(S) AFFECTED:

2. ACTUATIONS & THEIR INITIATION SIGNALS:

3. CAUSES (IF KNOWN):

4. EFFECT OF EVENT ON PLANT:

5. ACTIONS TAKEN OR PLANNED:

6. ADDITIONAL INFORMATION:

NRC Event Notification Form

NOTIFICATIONS	YES	NO	WILL BE	ANYTHING UNUSUAL OR NOT UNDERSTOOD?	YES <input type="checkbox"/> (EXPLAIN SHEET 1)	NO <input type="checkbox"/>
NRC RESIDENT				DID ALL SYSTEMS FUNCTION AS REQUIRED?	YES <input type="checkbox"/>	NO <input type="checkbox"/> (EXPLAIN SHEET 1)
STATE				MODE OF OPERATION UNTIL CORRECTED:		
LOCAL				ESTIMATED RESTART DATE:		
OTHER GOV AGENCIES				ADDITIONAL INFO ON BACK: YES <input type="checkbox"/> NO <input type="checkbox"/>		
MEDIA/PRESS RELEASE						

RADIOLOGICAL RELEASES: CHECK OR FILL IN APPLICABLE ITEMS

	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)
Noble Gas					0.1 Ci/sec	
Iodine					10 µCi/sec	
Particulate					1 µCi/sec	
Liquid (excluding tritium & dissolved noble gases)					10 µCi/min	
Liquid (tritium)					0.2 Ci/min	
Total Activity						

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

RCS OR SG TUBE LEAKS: CHECK OR FILL IN APPLICABLE ITEMS:

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

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

LIST OF SAFETY RELATED EQUIPMENT NOT OPERATIONAL:

SM/DSEO Signature : _____ Time: _____