DISTRIBUTION CONTROL LIST

Document Name: EMER PLAN

CC_NAME NAME	DEPT	LOCATION
1 PLANT MANAGER'S OFFICE	UNIT 3 /ADMINISTRATION	45-3-B
2 EP/TRAINING ADMINISTRATOR	TRAINING	#48
3 RES DEPARTMENT MANAGER	RES DEPARTMENT	45-4-A
4 REFERENCE LIBRARY	RECORDS(TRNG BLDG)	#48
9 JOINT NEWS CENTER	EMERGENCY PLANNING	EOF
10 SHIFT MGR.(LUB-001-GEN)	OPERATIONS	IP3
11 CONTROL ROOM & MASTER	OPS(3PT-D001-D006 ONLY)	IP3
14 EOF	E-PLAN	EOF
16 AEOF/A.GROSJEAN	E-PLAN (EOP'S ONLY)	WPO-12D
19 NUC ENGINEERING LIBRARY	WPO DOCUMENT CONTROL	WPO/7A
22 RESIDENT INSPECTOR	US NRC	45-2-B
23 MCNAMARA N	NRC	OFFSITE
24 MCNAMARA N	NRC	OFFSITE
25 DOCUMENT CONTROL DESK	NRC	OFFSITE
28 AVRAKOTOS N	J A FITZPATRICK	OFFSITE
29 E-PLAN STAFF	E-PLAN	EOF
30 E-PLAN STAFF	E-PLAN	EOF
31 BARANSKI J(VOLUME I ONLY)	ST. EMERG. MGMT. OFFICE	OFFSITE
32 MURPHY L -(VOLUME I ONLY)	DISASTER & EMERGENCY	WESTCHESTR
33 LONGO N (VOLUME I ONLY)	EMERGENCY SERVICES	ROCKLAND
34 GREENE D (VOLUME I ONLY)	DISASTER & CIVIL DEFENSE	ORANGE
35 RAMPOLLA M(VOLUME I ONLY)	OFFICE OF EMERG MANAGE	PUTNAM
41 SIMULATOR	TRAINING	48-2-A
319 C.STELLATO	NRQ-OPS / TRAINING	#48
354 L.GRANT	LRQ-OPS / TRAINING	#48
376 E-PLAN STAFF	E-PLAN	EOF
424 OPS-INSTR (LL'S 1 COPY)	J. CHIUSANO/TRAINING	#48
510 L.GRANT	LRQ-OPS / TRAINING	#48
511 L.GRANT	LRQ-OPS / TRAINING	#48
512 C.STELLATO	NRQ-OPS / TRAINING	#48
513 C.STELLATO	NRQ-OPS / TRAINING	#48
517 PLANT MANAGER'S OFFICE	ADMIN/(IPEC ONLY)	IP2
518 DOCUMENT ROOM	TSC (IPEC ONLY)	UNIT 2
519 TSC	UNIT 2 (IPEC ONLY)	IP2
520 CONTROL ROOM (UNIT 2)	OPERATIONS (IPEC ONLY)	IP2
521 SIMULATOR (UNIT 2)	TRAIN/CENTER (IPEC ONLY)	48-2-A
522 NRC RESIDENT (UNIT2)	US NRC (IPEC ONLY)	IP2
523 ROBERT VOGLE (UNIT 2)	TRAINING LIBRARY	OFFSITE
524 JOHN MCCANN (UNIT 2)	NUC SAFETY/LICENSING	IP2

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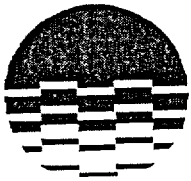
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Indian Point 3

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AFFECTED DOCUMENT: **UNIT 2 E-PLAN**

DOC #	REV #	TITLE	INSTRUCTIONS

****************** **SEE ATTACHED FOR INSTRUCTIONS** *********************

<u>*PLEASE NOTE EFFECTIVE DATES**</u>

RECEIPT OF THE ABOVE LISTED DOCUMENT(S) IS HEREBY ACKNOWLEDGED. I CERTIFY THAT ALL SUPERSEDED, VOID, OR INACTIVE COPIES OF THE ABOVE LISTED DOCUMENT(S) IN MY POSSESSION HAVE BEEN REMOVED FROM USE AND ALL UPDATES HAVE BEEN PERFORMED IN ACCORDANCE WITH EFFECTIVE DATE(S) (IF APPLICABLE) AS SHOWN ON THE DOCUMENT(S).

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SUBJECT: Emergency Planning Document Update

Date: 8/1/02

Please update your controlled copy of the documents listed below as specified with the copy(s) attached.

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Document #	Document Name	New Rev. #/ Date	Old Rev. #/ Date	Instructions
U2	EP Implementing Procedures			
TOC	Emergency Plan Implementing Procedures Table of Contents	8/1/02	7/11/02	Replace entire document
IP-1002	Emergency Notification and Communication	27 8/1/02	26 5/30/02	Remove entire document
IP-1010	Central Control Room (CCR)	6 8/1/02	5 5/30/02	Remove entire document

Update completed as specified: _____   _____

                                 Signature of Controlled Copy Holder   Date

Unit 2 Emergency Plan Implementing Procedures
Table of Contents

Procedure No.	Procedure Title	Rev. No.	Effective Date
IP-1001	Mobilization of Onsite Emergency Organization	13	5/25/01
IP-1002	Emergency Notification and Communication	27	8/1/02
IP-1003	Planned Discharge of Containment Atmosphere During Accident Conditions	7	4/16/01
IP-1004	Post Accident Offsite Environmental Surveys, Sampling and Counting	5	9/1/99
IP-1007	**Cancelled – Replaced by IP-EP-310**	-	-
IP-1008	Personnel Radiological Check and Decontamination	7	4/29/02
IP-1009	Radiological Check and Decontamination of Vehicles	7	9/1/99
IP-1010	Central Control Room	6	8/1/02
IP-1011	Joint News Center	7	6/402
IP-1012	Onsite Medical Emergency	10	5/25/01
IP-1013	**Cancelled – Replaced by IP-EP-410**	-	-
IP-1014	Radiological Check of Equipment Before It Leaves the Site	6	9/1/99
IP-1015	Radiological Surveys Outside the Protected Area (Title Change)	9	3/26/01
IP-1016	**Cancelled – Replaced by IP-EP-510**	-	-
IP-1019	Coordination of Corporate Response	10	9/6/01
IP-1020	Airborne Activity Determination	8	01/12/01
IP-1021	Manual Update, Readout and Printout of Proteus Plant Parameter Data	6	4/29/02
IP-1022	**Cancelled – Replaced by IP-EP-510**	-	-
IP-1023	Operations Support Center (OSC)	18	4/11/02
IP-1024	Emergency Classification	11	7/11/02
IP-1025	Cancelled	-	-
IP-1026	Emergency Data Acquisition	0	01/12/01
IP-1027	Personnel Accountability and Evacuation	16	4/11/02
IP-1030	Emergency Operations Facility (EOF)	6	7/11/02
IP-1033	**Cancelled – Replaced by IP-EP-520**	-	-

Unit 2 Emergency Plan Implementing Procedures
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Procedure No.	Procedure Title	Rev. No.	Effective Date
IP-1035	Technical Support Center (TSC)	16	2/20/01
IP-1036	**Cancelled – Replaced by IP-EP-620**	-	-
IP-1037	**Cancelled – Replaced by IP-EP-510**	-	-
IP-1039	Offsite Contamination Checks	9	01/12/01
IP-1045	**Cancelled – Replaced by IP-EP-251**	-	-
IP-1047	**Cancelled – Replaced by IP-EP-510**	-	-
IP-1048	**Cancelled – Replaced by IP-EP-610**	-	-
IP-1050	Security	3	4/11/02

As of 8/1/02

CONTROLLED

CENTRAL CONTROL ROOM (CCR)

COPY # _25_

Prepared by:	Bryant Pergerson	_[signature]_	7/23/02
	Print Name	Signature	Date
Technical Reviewer:	Steve Hook	_[signature]_	7/23/02
	Print Name	Signature	Date
Reviewer:	E Primrose	_[signature]_	7-30-02
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SNSC Review:	Previous SNSC 2871 on 3/5/02	_[signature]_	
	Meeting Number	Signature Secretary	Date
Approval:	Frank Inzirillo	_[signature]_	7/31/02
	Print Name	Signature	Date

Reference Use

Effective Date: _8-1-02_

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8.0 ADDENDUM

   None

CENTRAL CONTROL ROOM (CCR)

1.0 PURPOSE

To describe emergency response activities and operations of the Central Control Room (CCR).

To provide guidance for the response to emergencies declared at Unit 3.

2.0 DISCUSSION

None

3.0 PRECAUTIONS AND LIMITATIONS

None

4.0 EQUIPMENT AND MATERIALS

The following types of equipment and materials are utilized for emergency response in the CCR:

4.1 PICS for accessing plant data.

4.2 MEANS Computer program for performing dose assessment, protective action recommendations and preparing Part I and II NYS Radiological Data Forms.

4.3 Plant Procedures

4.4 Plant Drawings

4.5 Emergency Communication Systems (in addition to normally available systems)

   4.5.1 Emergency Management Hotline (SM-EPM-ED)

   4.5.2 CCR/TSC/EOF 3-way Ring-down line (CCR-TSC Communicator)

   4.5.3 Radiological Emergency Communications System (RECS)

   4.5.4 FTS-2001 Emergency Notification System - (NRC)

   4.5.5 Local Government Radio (backup to RECS)

   4.5.6 Emergency Plan pre-programmed facsimile machine

5.0 INSTRUCTIONS

5.1 For a Unit 2 emergency, the Shift Manager (SM) shall follow the instructions outlined in Attachment 1, Shift Manager (Emergency Director) Checklist.

5.2 For a Unit 3 emergency, the Shift Manager (SM) shall follow the instructions outlined in Attachment 6, Unit 2 Response to a Unit 3 Emergency Checklist.

5.3 For a Security emergency, the Shift Manager (SM) shall follow the instructions outlined in Attachment 7, Shift Manager (Emergency Director) Security Event Checklist.

5.4 The CCR Communicator shall follow the instructions outlined in Attachment 2, CCR Communicator Checklist.

5.5 The CCR-TSC Communicator shall follow the instructions outlined in Attachment 3, CCR-TSC Communicator Checklist.

5.6 The CCR Data Logger shall follow the instructions outlined in Attachment 4, CCR Data Logger Checklist.

5.7 The Watch Health Physics Technician shall follow the instructions outlined in Attachment 5, Watch Health Physics Technician Checklist.

6.0 REFERENCES

6.1 IP-1001, "Mobilization of Onsite Emergency Organization"

6.2 IP-1002, "Emergency Notification and Communication

6.3 IP-1024 "Emergency Classification"

6.4 IP-1027 "Personnel Accountability and Evacuation"

6.5 IP-EP-310 "Dose Assessment"

6.6 IP-EP-410 "Protective Action Recommendations"

6.7 IP-EP-610 "Termination and Recovery"

7.0 ATTACHMENTS

7.1 Attachment 1, Shift Manager (Emergency Director) Checklist.

7.2 Attachment 2, CCR Communicator Checklist

7.3 Attachment 3, CCR-TSC Communicator Checklist

7.4 Attachment 4, CCR Data Logger Checklist

7.5 Attachment 5, Watch Health Physics Technician Checklist

7.6 Attachment 6, Unit 2 Response to a Unit 3 Emergency Checklist

7.7 Attachment 7, Shift Manager (Emergency Director) Security Event Checklist

8.0 ADDENDUM

NONE

Attachment 1
Shift Manager (Emergency Director) Checklist
Sheet 1 of 9

Initial Responsibility/Activity	Notes
1.0 Classification of the Emergency	
Authority to classify and declare an emergency is reserved solely for the Emergency Director and may not be delegated. The SM in the role of Emergency Director makes the initial emergency classification.	
1.1 Classify the emergency condition in accordance with IP-1024 "Emergency Classification".	
1.2 IF a General Emergency is declared, THEN protective action recommendations must be made in accordance with IP-EP-410, Protective Action Recommendations.	
1.3 Declare the emergency and announce the classification to Control Room personnel.	
1.4 Ensure Unit 3 Control Room is notified of the emergency classification.	
1 5 At an Alert or higher classification, ensure the Unit 3 Site Assembly alarm is sounded.	
2.0 Notification – Unusual Event	
State and local authorities shall be notified within 15 minutes of emergency declaration.	
2.1 IF the initial emergency classification is an Alert or higher THEN proceed to step 3.0.	
2.2 Ensure CCR Communicator to available. IF CCR Communicator is unavailable THEN direct a qualified individual to serve as CCR Communicator.	
2.3 Complete (or have completed) and sign a Form IP-1030-1 "NYS Radiological Emergency Data Form, Part I."	
2 4 Direct notification of offsite authorities by providing the completed and signed NYS Radiological Data Form Part I to the CCR Communicator.	
2 5 Determine if Emergency Response Organization mobilization is needed or if Emergency Response Organization should receive event notification only:	
A. IF based on Shift Manager (Emergency Director) judgment the Emergency Response Organization should be activated, THEN direct the CCR Communicator use **Envelope B** "Unit 2 ERO Mobilization" envelope as indicated on Form IP-1002-1 "CCR NUE Notification Checklist."	
B. IF based on Shift Manager (Emergency Director) judgment the Emergency Response Organization should be called and notified only, THEN direct the CCR Communicator use **Envelope C** "Unit 2 ERO Event Notification" envelope as indicated on Form IP-1002-1 "CCR NUE Notification Checklist."	

Attachment 1
Shift Manager (Emergency Director) Checklist
Sheet 2 of 9

<u>Initial Responsibility/Activity(cont.)</u>	<u>Notes</u>
3.0 **Notification & Mobilization -** **Alert, Site Area or General Emergency** Once the EOF is activated, all offsite communications shall be performed by the EOF staff. The following steps are for initial classification at the Alert level or higher. State and local authorities shall be notified within 15 minutes of emergency declaration.	
3.1 Ensure CCR Communicator to available. **IF** CCR Communicator is unavailable **THEN** direct a qualified individual to serve as CCR Communicator.	
3.2 Complete (or have completed) and sign a Form IP-1030-1 "NYS Radiological Emergency Data Form, Part I."	
NOTE IP-1027 "Personnel Accountability and Evacuation" provides guidance for the suspension of personnel accountability under certain conditions.	
3 3 **IF** personnel assembly is suspended, **THEN** inform the CCR Communicator prior to directing personnel mobilization and instruct him **NOT** to sound the site assembly alarm.	
NOTE **IF** adverse conditions exist onsite to an extent impacting safety of Emergency Response Organization personnel responding from outside the Protected Area, **THEN** consider having Security direct responding personnel to the Emergency Operations Facility rather than reporting directly to their assigned emergency facility.	
3.4 Determine if this is a Unit 2 ERO mobilization or a Station ERO mobilization (both Unit 2 and Unit 3).	
3.5 **IF** based on Shift Manager judgment the Emergency Response Organization is needed for both Unit 2 and Unit 3, **THEN** direct the CCR Communicator to use **Envelope A** "Station ERO Mobilization" envelope as indicated on Form IP-1002-2 "CCR Alert/SAE/GE Initial Notification Checklist".	
3.6 **IF** based on Shift Manager judgment the Emergency Response Organization mobilization is needed for Unit 2, **THEN** direct the CCR Communicator to use **Envelope B** "Unit 2 ERO Mobilization" envelope as indicated on Form IP-1002-2 "CCR Alert/SAE/GE Initial Notification Checklist".	

Attachment 1
Shift Manager (Emergency Director) Checklist
Sheet 3 of 9

Initial Responsibility/Activity(cont.)	Notes
4.0 Establish Personnel Accountability **NOTES** Accountability rosters are located in the Shift Manager Position Binder. The Shift Manager may call for accountability to be completed any time conditions (hazards in the plant such as fire, toxic gas high radiation levels, earthquake etc.) are present where personnel safety may be in question. 4.1 **IF** a Site Area Emergency or General Emergency has been declared, and personnel accountability has not already been established, **THEN** initiate site personnel accountability per IP-1027, Personnel Accountability and Evacuation. 4.2 **IF** any individuals are missing, **THEN** direct available personnel and Security to conduct search and rescue operations to locate the missing individuals. **5.0 Assess Any Radiological Release** The MEANS computer program is available for the performance of dose projections and the formulation of protective action recommendations. 5.1 **IF** any indications exist of abnormal radiological release as a result of the emergency, **THEN** assess offsite consequences in accordance with IP-EP-310, Dose Assessment. 5.2 **IF** dose assessment results indicate offsite consequences in excess of the EPA Protective Action Guidelines **THEN** declaration of a General Emergency is required. Evaluate the need to modify the General Emergency PARs as specified in Attachment 10.2 of IP-EP-410, Protective Action Recommendations.	

Continuous Responsibility/Activity (Emergency Director)	Notes
NOTES IF while performing the Continuous Responsibility/Activity steps as Emergency Director, you are relieved of Emergency Director duties by the EPM or On-Call ED, **THEN** exit this section and enter the Continuous Responsibility/Activity (Shift Manager) section at step 11.0.	

6.0   Re-Classify the Emergency if Necessary

6.1   IF plant conditions change or other events occur which may warrant upgrade of the emergency classification, **THEN** re-classify the emergency condition in accordance with IP-1024 "Emergency Classification".

6.2   IF a General Emergency is declared, **THEN** protective action recommendations must be made in accordance with IP-EP-410, Protective Action Recommendations.

6.3   Declare the emergency and announce the classification to Control Room personnel.

6.4   Complete (or have completed) and sign a Form IP-1030-1 "NYS Radiological Emergency Data Form, Part I."

6.5   Direct the CCR Communicator to perform notifications using Form IP-1002-3 "Upgrade/Update Notification Alert/SAE/GE Initial Notification Checklist".

7.0   Establish Radiological Controls and Maintain Onsite Personnel Safety

7.1   Keep the Security Supervisor at the Command Guard House informed of emergency classification, plant status and any radioactive releases which may effect Security Personnel.

7.2   Once established, maintain personnel accountability.

7.3   IF the potential for abnormal radiological conditions in-plant or onsite exists, **THEN**:

   A. Direct the Watch Health Physics Technician to establish radiological controls for the Central Control Room and initiate habitability monitoring for the Central Control Room.

Attachment 1
Shift Manager (Emergency Director) Checklist
Sheet 5 of 9

Continuous Responsibility/Activity (Emergency Director)	Notes
B. Evaluate the need to perform a site evacuation per IP-1027, Personnel Accountability and Evacuation. C. Authorize emergency exposure, if necessary, per Form IP-1023-6, Emergency Exposure Authorization. 7.4 IF an on-site medical emergency occurs, THEN implement IP-1012, On-site Medical Emergency.	
8.0 Perform Periodic Update Notifications 8.1 Periodic update notifications to offsite authorities should be made approximately every 30 minutes or more frequently when plant conditions change. 8.2 For each update notification, complete (or have completed) and sign a Form IP-1030-1 "NYS Radiological Emergency Data Form, Part I." 8.3 IF there has been a radiological release to the environment, THEN complete (or have completed) and sign a Form IP-1030-1 "NYS Radiological Data Form, **Part II.** 8.4 For periodic update notifications during an **Unusual Events**, direct the CCR Communicator to perform update notifications using Form IP-1002-1 "CCR NUE Notification Checklist". 8.5 For periodic update notifications during an **Alert or higher** classifications, direct the CCR Communicator to perform update notifications using Form IP-1002-3 "Upgrade/Update Notification Alert/SAE/GE Initial Notification Checklist".	

Central Control Room

IP-1010
Rev. 6

Attachment 1
Shift Manager (Emergency Director) Checklist
Sheet 6 of 9

Continuous Responsibility/Activity (Emergency Director)	Notes
9.0 Turnover Emergency Director Responsibilities ┌───┐ **NOTE:** For Unusual Events, the Shift Manager will normally maintain the Emergency Director responsibilities until the classification is terminated per IP-EP-610, Emergency Termination & Recovery. For Alert and higher classifications, the Emergency Plant Manager will relieve the Shift Manager of Emergency Director duties in the Control Room. The On-Call Emergency Director in the EOF at his discretion may assume Emergency Director duties directly from the Shift Manager via telephone turnover. └───┘ 9.1 Provide a status briefing to the Emergency Plant Manager upon his arrival in the Central Control Room. The Emergency Plant Manager will request status on all of the information specified on Form IP-1035-2, Essential Information Checklist. 9.2 Provide copies of all completed NYS radiological Emergency Data forms to the Emergency Plant Manager. 9.3 Resume duties as Shift Manager and proceed to step 11.0 in the Continuous Responsibility/Activity (Shift Manager) section.	
10.0 Terminate the Emergency (Unusual Event Only) 10.1 When conditions warrant termination of the Unusual Event, enter IP-EP-610 Emergency Termination & Recovery and terminate the emergency per section 6.1 "Transition and Recovery Following an Unusual Event." 10.2 Exit this section after termination of the emergency and enter the Closeout Responsibility/Activity section at step 16.0.	

Attachment 1
Shift Manager (Emergency Director) Checklist
Sheet 7 of 9

Continuous Responsibility/Activity (Shift Manager)	Notes
11.0 **Evaluate Emergency Action Levels** 11 1 Continue to evaluate current plant condition and events relative to the emergency action levels as specified in IP-1024, Emergency Classification. 11.2 Make recommendations to the Emergency Director and Emergency Plant Manager for upgrading of the emergency classification as appropriate.	
12.0 **Maintain Communications with the Emergency Plant Manager and Emergency Director** 12.1 Keep the Emergency Plant Manager and Emergency Director informed of current plant status and planned operations 12.2 Discuss tasks and procedures the Control Room is currently performing and review priorities on a regular basis. 12.3 IMMEDIATELY inform the Emergency Plant Manager and Emergency Director of any plant condition or event that has the potential to change the emergency classification or affect radiological release status.	
13.0 **Coordinate In-Plant Team Activities with the Operations Coordinator in the OSC** **NOTE:** Once the OSC is activated, the dispatch of personnel into the field for emergency operations is controlled from the OSC. Communications and directions can be provided to the teams from the Control Room, however, the OSC must retain team control for personnel safety and continuous accountability. 13.1 Once the OSC is activated, coordinate the dispatch and control of NPOs assigned to perform in-plant operations with the Operations Coordinator located in the OSC.	Operations Coordinator telephone # in OSC: 734-5556

Attachment 1
Shift Manager (Emergency Director) Checklist
Sheet 8 of 9

Continuous Responsibility/Activity (Shift Manager)	Notes
13.2 For operations teams already dispatched and in the field prior to the OSC being activated, coordinate the transfer of team control to the OSC with the Operations Coordinator.	
13.3 Direct requests for in-plant operational support IMMEDIATELY to the Operations'Coordinator in the OSC to facilitate prompt response to Control Room needs. Keep the Emergency Plant Manager informed of all requests.	
13.4 Re-enforce Control Room priorities and needs with the Emergency Plant Manager if in-plant team support is not being provided in a timely and effective manner.	
14.0 Request Technical Support as Needed to Mitigate the Emergency	
14.1 Request the TSC Manager to provide forward-looking technical support as needed to assist the Control Room staff in responding to the emergency.	
14.2 Provide the Emergency Plant Manager and TSC Manager with periodic briefs on current mitigation strategies and emergency procedures currently being implemented.	
15.0 Exit to Recovery Phase	
15.1 Upon notification from the Emergency Director that the emergency has been terminated, exit this section and enter the Closeout Responsibility/Activity section at step 16.0.	

Attachment 1
Shift Manager (Emergency Director) Checklist
Sheet 9 of 9

	Closeout Responsibility/Activity	Notes
16.0	Direct the Control Room staff to return all equipment utilized in the response to proper storage locations	
17.0	Review all documentation the Control Room staff generated during the emergency:	
17.1	Ensure all logs, forms and other documentation are complete.	
17.2	Ensure all temporary procedures used and/or developed are properly documented for use by the Recovery Organization so that necessary actions can be taken for long-term restoration.	
17.3	Collect all computer printouts and strip charts.	
18.0	Provide all logs and records to the Recovery Manager upon termination of the emergency and entry into the Recovery Phase.	

Attachment 2
CCR Communicator Checklist
Sheet 1 of 4

Initial Responsibility/Activity	Notes
1.0 **Assume the Duties of CCR Communicator** State and local authorities shall be notified within 15 minutes of emergency declaration. 1.1 Upon being notified to fulfill the CCR Communicator role, IMMEDIATELY report to the Control Room. 1.2 IF site accountability has been directed, THEN sign the CCR accountability roster. 1.3 Inform the Shift Manager (Emergency Director) and the Control Room staff that you have assumed the duties of CCR Communicator. 1.4 IF the emergency classification is an Unusual Event, THEN, proceed to step 2.0. 1.5 IF the emergency classification is an Alert or higher, THEN, proceed to step 3.0.	
2.0 **Perform Initial Unusual Event Notifications** 2.1 Obtain the completed NYS Radiological Emergency Data Form Part I from the Shift Manager. 2.2 Review form to ensure all required information is completed, including Shift Manager (Emergency Director) signature. 2.3 Using Form IP-1002-1, "CCR NUE Notification Checklist", start the initial roll call to State and counties within 15 minutes of the declaration of the Unusual Event. 2.4 Complete Section 1 of the NYS Radiological Data Form Part I, by recording the date and time the message is being transmitted as well as checking the appropriate communication method (RECS or Other). 2.5 Request direction from Shift Manger (Emergency Director) if Emergency Response Organization mobilization is needed or if Emergency Response Organization should receive event notification only. 2.6 Complete the remaining notifications as specified on the Form IP-1002-1 checklist.	Fax numbers can be found in the Emergency Telephone Directory

Attachment 2
CCR Communicator Checklist
Sheet 2 of 4

Initial Responsibility/Activity	Notes
2.7 **Fax copies** of the NYS Radiological Data Form to State/counties/ EOF.	Fax numbers can be found in the Emergency Telephone Directory
3.0 Perform Initial Alert/SAE/GE Notifications 3.1 Determine if personnel accountability is being suspended from the Shift Manager. <table><tr><td>**NOTE:** Form IP-1002-2, CCR Alert/SAE/GE Initial Notification Checklist is used <u>only</u> once. After notifications are complete using this form, all subsequent upgrade and update notifications shall be made using Form IP-1002-3, Upgrade/Update Notification Alert/SAE/GE Checklist.</td></tr></table> 3.2 Using Form IP-1002-2, CCR Alert/SAE/GE Initial Notification Checklist, initiate notification of personnel located in the Protected Area and the Emergency Response Organization. 3.3 Obtain the completed NYS Radiological Emergency Data Form Part I from the Shift Manager. Review form to ensure all required information is completed, including Shift Manager (Emergency Director) signature. 3.4 Using Form IP-1002-2, CCR Alert/SAE/GE Initial Notification Checklist, start the initial roll call to State and counties within 15 minutes of the declaration of the Alert, SAE or GE. 3.5 Complete Section 1 of the NYS Radiological Data Form Part I, by recording the date and time the message is being transmitted as well as checking the appropriate communication method (RECS or Other). 3.6 Complete the remaining notifications as specified on the Form 1002-2 checklist. 3.7 **Fax copies** of the NYS Radiological Data Form to State/counties/ EOF.	 Fax numbers can be found in the Emergency Telephone Directory

Attachment 2
CCR Communicator Checklist
Sheet 3 of 4

Continuous Responsibility/Activity	Notes
4.0 Perform Periodic Update Notifications – Unusual Event	
NOTE: Periodic Update Notifications to offsite authorities shall be made approximately every 30 minutes or whenever conditions change.	
4.1 Obtain the completed NYS Radiological Emergency Data Form Part I from the Shift Manager. A. Review form to ensure all required information is completed, including Shift Manager (Emergency Director) signature.	
4.2 Using Form IP-1002-1, CCR NUE Notification Checklist, perform **ONLY the circled items**, to make the periodic update notifications.	
4.3 Complete Section 1 of the NYS Radiological Data Form Part I, by recording the date and time the message is being transmitted as well as checking the appropriate communication method (RECS or Other).	Fax numbers can be found in the Emergency Telephone Directory
4.4 **Fax copies** of the NYS Radiological Data Form to State/counties/ EOF.	
5.0 Perform Periodic Update Notifications – Alert/SAE/GE	
NOTE: Periodic Update Notifications to offsite authorities shall be made approximately every 30 minutes or whenever conditions change.	
5.1 Obtain the completed NYS Radiological Emergency Data Form Part I (Part II if a radiological release has occurred or is in progress) from the Shift Manager. A. Review form to ensure all required information is completed, including Shift Manager (Emergency Director) signature.	
5.2 Using Form IP-1002-3, Upgrade/Update Alert/SAE/GE Checklist, start the initial roll call to State and counties.	Fax numbers can be found in the Emergency Telephone Directory
5.3 Complete Section 1 of the NYS Radiological Data Form Part I, by recording the date and time the message is being transmitted as well as checking the appropriate communication method (RECS or Other).	

Attachment 2
CCR Communicator Checklist
Sheet 4 of 4

Continuous Responsibility/Activity		Notes
5.4	Complete the remaining notifications as specified on the Form 1002-3 checklist.	
6.0	**IF the Emergency Classification is Upgraded, THEN Perform Upgrade Notifications**	
6.1	Using Form IP-1002-3, Upgrade/Update Alert/SAE/GE Checklist, initiate notification of personnel located in the Protected Area and the Emergency Response Organization.	
6.2	Obtain the completed NYS Radiological Emergency Data Form Part I from the Shift Manager.	
	A. Review form to ensure all required information is completed, including Shift Manager (Emergency Director) signature.	
6.3	Using Form IP-1002-3, Upgrade/Update Alert/SAE/GE Checklist, start the initial roll call to State and counties within 15 minutes of upgrade of the emergency classification.	
6.4	Complete Section 1 of the NYS Radiological Data Form Part I, by recording the date and time the message is being transmitted as well as checking the appropriate communication method (RECS or Other).	Fax numbers can be found in the Emergency Telephone Directory
6.5	Complete the remaining notifications as specified on the checklist.	
7.0	**When directed by the Shift Manager, return all equipment utilized in the response to proper storage locations**	
8.0	**Review all documentation the generated during the emergency:**	
8.1	Ensure all logs, forms and other documentation are complete.	
8.2	Collect all forms, logs and other documentation.	
9.0	**Provide all logs and records to the Shift Manager upon termination of the emergency and entry into the Recovery Phase.**	

Attachment 3
CCR-TSC Communicator Checklist
Sheet 1 of 2

Initial Responsibility/Activity	Notes
1.0 Assume the Duties of CCR-TSC Communicator	
1.1 Upon being notified to fulfill the CCR-TSC Communicator role, IMMEDIATELY report to the Control Room.	
1.2 IF site accountability has been directed, THEN sign the CCR accountability roster.	
1.3 Inform the Shift Manager and the Control Room staff that you are assuming the duties of CCR-TSC Communicator.	
1.4 If not already established, establish an open line of communications with the TSC Communicator and EOF (EOF may not always be on line) over the 3-way ring down phone: A. Remove handset from cradle (may use headset if available). B. Press button labeled "TSC-CCR-EOF" C. Press SIGNAL button to ring other locations. D. Listen to ensure other parties pick up (it may take additional time for the TSC Communicator to arrive in TSC) E. Inform other parties that you are establishing an open line from the CCR. F. Stay on line or inform other parties any time you will be offline.	
1.5 Inform the Shift Manager that you have established communications with the TSC and EOF.	

Continuous Responsibility/Activity	Notes
2.0 Maintain Communications with the TSC and EOF	
NOTE: The primary responsibility of the CCR-TSC Communicator is to provide an open line of communication between the CCR and TSC, however, the Technical Advisor to the Emergency Director in the EOF will periodically monitor the communications line or will request information from the CCR and TSC.	
2.1 Transmit information as requested by the TSC and EOF.	

Attachment 3
CCR-TSC Communicator Checklist
Sheet 2 of 2

Continuous Responsibility/Activity (cont.)		Notes
2.2	Use Form IP-1023-4, ERO Log Sheet, to maintain a log. A. Log the time when you assumed the duties of CCR-TSC Communicator B. Log significant communications pertaining to plant operations and emergency events.	
Closeout Responsibility/Activity		**Notes**
3.0	**When directed by the Shift Manager, return all equipment utilized in the response to proper storage locations**	
4.0	**Review all documentation the generated during the emergency:**	
4.1	Ensure all logs, forms and other documentation are complete.	
4.2	Collect all forms, logs and other documentation..	
5.0	**Provide all logs and records to the Shift Manager upon termination of the emergency and entry into the Recovery Phase.**	

Attachment 4
CCR Data Logger Checklist
Sheet 1 of 3

Initial Responsibility/Activity	Notes
1.0 **Assume the Duties of CCR-Data Logger** 1.1 Upon being notified to fulfill the CCR-Data Logger role, IMMEDIATELY report to the Control Room. 1.2 **IF** site accountability has been directed, **THEN** sign the CCR accountability roster. 1.3 Inform the Shift Manager and the Control Room staff that you are assuming the duties of CCR Data Logger.	

2.0   **Initiate Data Acquisition**
 	
 2.1   Begin manual data collection and entry into EDDS:
 	
     A.   Activate the manual overlay functions of EDDS as specified in Step 5.3.1 of IP-1026, Emergency Data Acquisition.
 	
     B.   Begin manual data collection and entry into EDDS as specified in Step 5.3.2 of IP-1026, Emergency Data Acquisition
 	
 2.2   **IF** EDDS is not functional, **THEN**:
 	
     A.   Begin collection and manual entry of plant parameter data into Proteus as specified in Step 5.1.5 of IP-1021, Manual Update, Readout and Printout of Proteus Plant Parameter Data.
 	
     B.   Begin manual collection of Form IP-1026-2, Equipment Status – 42B data for manual transmittal to the TSC.
 	
     C.   Completed Form 1026-2 should be faxed or physically delivered to the TSC.
 	
 2.3   **IF BOTH EDDS AND** Proteus are not functional, **THEN** begin manual collection of data for the following forms for manual transmission to the TSC:
 	
     A.   Form IP-1026-1, Plant Parameters – 42A
 	
     B.   Form IP-1026-2, Equipment Status – 42B
 	
     C.   Form IP-1026-3, Radiological Data – 42C
 	
 Completed forms should be faxed or physically delivered to the TSC.	

Attachment 4
CCR Data Logger Checklist
Sheet 2 of 3

Continuous Responsibility/Activity	Notes
3.0 Maintain Up-to-Date Plant Data Transmissions <table><tr><td>**NOTE:** The primary responsibility of the CCR-Data Logger is to provide constant updates of manually acquired plant data for input into EDDS. If EDDS is not functional the CCR-Data Logger is responsible for manual acquisition and transmission of plant data as needed. However, additional requests for plant information may be made by the TSC or EOF.</td></tr></table> 3.1 Maintain EDDS manual input data up-to-date: A. Update manual data points at least every **15 minutes** and any time there is a significant change in value or status. B. If there is any important qualifying information that may be important or useful for the TSC or EOF to be aware of regarding data being manually entered into EDDS, pass that information on via the CCR-TSC Communicator. 3.2 **IF** EDDS is not functional, **THEN** continue manual data entry into Proteus and manual completion of Form IP-1026-2 as specified in Step 2.2. 3.3 **IF BOTH** EDDS **AND** Proteus are not functional, **THEN** continue manual collection of data for the following forms for manual transmission to the TSC: A. Form IP-1026-1, Plant Parameters – 42A B. Form IP-1026-2, Equipment Status – 42B C. Form IP-1026-3, Radiological Data – 42C Completed forms should be faxed or physically delivered to the TSC.	
4.0 Use Form IP-1023-4, ERO Log Sheet, to maintain a log. A. Log the time when you assumed the duties of CCR-TSC Communicator B. Log significant communications pertaining to plant operations and emergency events.	

Attachment 4
CCR Data Logger Checklist
Sheet 3 of 3

Closeout Responsibility/Activity	Notes
5.0 **When directed by the Shift Manager, return all equipment utilized in the response to proper storage locations**	
6.0 Review all documentation the generated during the emergency: 6.1 Ensure all logs, forms and other documentation are complete. 6.2 Collect all forms, logs and other documentation..	
7.0 **Provide all logs and records to the Shift Manager upon termination of the emergency and entry into the Recovery Phase.**	

Attachment 5
Watch Health Physics Technician Checklist
Sheet 1 of 3

Initial Responsibility/Activity	Notes
1.0 **Assume the Duties of Watch Health Physics Technician**	
1.1 Upon being notified of a classified emergency, IMMEDIATELY report to the Control Room.	
A. IF the declared emergency is an Alert or higher, THEN first proceed to HP1 and determine who has NOT signed out of the RCA by accessing the computer (Option 3 main menu, option 1 sub-menu).	
B. Report list of personnel still in RCA to the Shift Manager.	
1.2 IF site accountability has been directed, THEN sign the CCR accountability roster.	
1 3 Inform the Shift Manager and the Control Room staff that you are assuming the duties of Watch Health Physics Technician.	
2.0 **Establish Initial CCR Radiological Protection**	
2.1 Evaluate the need and make a recommendation to establish radiological access control for the Control Room	
A. Ask the Shift Manager if there is potential for abnormal radiological conditions outside of the RCA.	
B. Evaluate PRM-ARM instrumentation.	
2.2 IF the Shift Manager directs that Control Room radiological controls be established, THEN:	
A. Set up step off pad (SOP) requiring shoe check and frisker at the entrance from the turbine floor to SFS Office and at the side entrance.	
B. Place SOPs in a position that does not preclude opening the door while standing on the SOP.	
C. Perform periodic contamination surveys on both sides of the SOP	
D. Perform periodic airborne contamination checks.	
E. Record results on applicable forms.	

Attachment 5
Watch Health Physics Technician Checklist
Sheet 2 of 3

Continuous Responsibility/Activity	Notes

3.0 Provide Radiological Protection
 	
┌───┐
NOTE:
The actions and responsibilities listed in this procedure are intended to assist the Watch Health Physics Technician in the performance of his/her duties. While some items are performed once, others are repeated over the duration of the event.
└───┘
 	
3.1   Provide radiological support, such as issuance of dosimetry, determination of respiratory and protective clothing requirements, and performance of radiological surveys for the following activities, as directed by the Shift Manager:
 	
    A. Search and rescue
 	
    B. Repair and corrective actions
 	
    C. Response to fires by Fire Brigade (includes survey /decontamination of Fire Department personnel and equipment)
 	
    D. Personnel and equipment decontamination
 	
    E. As requested by the Shift Manager
 	
3.2   Conduct outside surveys per IP-1015, Radiological Surveys Outside the Protected Area as requested by the Shift Manager
 	
3.3   Provide Radiological Support for Personnel Medical Emergencies
 	
    A. Upon notification that a personnel medical emergency has occurred onsite, report to the scene with the HP Plant Medical Emergency Kit (stored in the HPT Office/Counting Room Area).
 	
    B. Implement Step 5.4 of IP-1012, On-Site Medical Emergency.	

4.0 Use Form IP-1023-4, ERO Log Sheet, to maintain a log.
 	
    A. Log the time when you assumed the duties of Watch Health Physics Technician.
 	
    B. Log significant communications pertaining to personnel radiological conditions and actions.	

Attachment 5
Watch Health Physics Technician Checklist
Sheet 3 of 3

Continuous Responsibility/Activity (Cont)	Notes
5.0 Turnover to OSC Radiation Protection Coordinator **5.1** Once the OSC has been activated, upon direction from the Shift Manager, report to the OSC Radiation Protection Coordinator in the OSC.	
Closeout Responsibility/Activity	Notes
6.0 When directed by the Shift Manager, return all equipment utilized in the response to proper storage locations	
7.0 Review all documentation the generated during the emergency: **7.1** Ensure all logs, forms and other documentation are complete. **7.2** Collect all forms, logs and other documentation..	
8.0 Provide all logs and records to the Shift Manager upon termination of the emergency and entry into the Recovery Phase.	

Attachment 6
Unit 2 Response to a Unit 3 Emergency Checklist

Sheet 1 of 4

Initial Responsibility/Activity	
1.0 Notification of the Emergency Upon notification from Unit 3 Control Room that an event has been declared at Indian Point 3: A. Announce the information to Control Room personnel. B. Based upon the Unit 3 emergency conditions, evaluate the need to declare an emergency at Unit 2 in accordance with IP-1024. If you determine that an EAL is met for current Unit 2 conditions, notify the Emergency Director in Unit 3. **2.0 Notification of ERO Personnel** **2.1 UNUSUAL EVENT** 2.1.1 Make an announcement providing information regarding the Unit 3 event and any additional information as required restricting access to Unit 3 areas affected by the emergency. 2.1.2 Request direction from Unit 3 Shift Manger (Emergency Director) if Unit 3 ERO mobilization is needed or if Emergency Response Organization should receive event notification only. 2.1.3 Ensure CCR Communicator to available. **IF** CCR Communicator is unavailable **THEN** direct a qualified individual to serve as CCR Communicator. 2.1.4 **IF** based on Unit 3 Shift Manager (Emergency Director) judgment the Emergency Response Organization is needed, **THEN** direct the CCR Communicator to use **Envelope D** "Unit 3 ERO Mobilization" envelope to contact the Unit 3 ERO members. 2.1.5 **IF** based on Unit 3 Shift Manager (Emergency Director) judgment the Emergency Response Organization should be notified only, **THEN** direct the CCR Communicator to use **Envelope E** "Unit 3 ERO Event Notification" envelope to contact the appropriate ERO members.	**Notes**

Attachment 6
Unit 2 Response to a Unit 3 Emergency Checklist

Sheet 2 of 4	
Initial Responsibility/Activity(cont.)	**Notes**

2.2. **ALERT**

2.2.1 <u>IF</u> personnel are in jeopardy due to a Unit 3 emergency, <u>THEN</u> sound the Site Assembly Alarm for 30 seconds and instruct personnel to move to safety immediately.

2.2.2 <u>IF</u> there is no hazard for Unit 2 personnel, <u>THEN</u> sound the Site Assembly Alarm for 30 seconds and make the following · announcement 3 times over the public address system:

> *"Attention all personnel, Attention all personnel, an Alert has been declared at Unit 3, all essential personnel report to your assigned emergency facility. All other personnel assemble at the Energy Education Center."*

2.2.3 Determine if this is a Unit 3 ERO mobilization or a Station ERO mobilization (both Unit 2 and Unit 3).

2.2.4 Ensure CCR Communicator to available. <u>IF</u> CCR Communicator is unavailable <u>THEN</u> direct a qualified individual to serve as CCR Communicator.

2.2.5 <u>IF</u> the Emergency Response Organization is needed for both Unit 2 and Unit 3, <u>THEN</u> direct the CCR Communicator to use **Envelope A** "Station ERO Mobilization" envelope to contact Unit 2 and Unit 3 ERO.

2.2.6 <u>IF</u> only the Unit 3 the Emergency Response Organization is needed, <u>THEN</u> direct the CCR Communicator to use **Envelope D** "Unit 3 ERO Mobilization" envelope to contact the Unit 3 ERO.

Attachment 6
Unit 2 Response to a Unit 3 Emergency Checklist

Sheet 3 of 4	
Initial Responsibility/Activity	**Notes**
2.3 SITE AREA EMERGENCY or GENERAL EMERGENCY 2.3.1 <u>IF</u> personnel are in jeopardy due to a Unit 3 emergency, <u>THEN</u> sound the Site Assembly Alarm for 30 seconds and instruct personnel to move to safety immediately. 2.3.2 <u>IF</u> there is no hazard for Unit 2 personnel, <u>THEN</u> sound the Site Assembly Alarm for 30 seconds and make the following announcement 3 times over the public address system: *"Attention all personnel, Attention all personnel, a (Site Area Emergency / General Emergency) has been declared at Unit 3, All essential personnel report to your assigned emergency facility. All other personnel assemble at the Energy Education Center."* 2.3.3 Determine if this is a Unit 3 ERO mobilization or a Station ERO mobilization (both Unit 2 and Unit 3). 2.3.4 Ensure CCR Communicator to available. <u>IF</u> CCR Communicator is unavailable <u>THEN</u> direct a qualified individual to serve as CCR Communicator. 2.3.5 <u>IF</u> the Emergency Response Organization is needed for both Unit 2 and Unit 3, <u>THEN</u> direct the CCR Communicator to use **Envelope A** "Station ERO Mobilization" envelope to contact the Unit 2 and Unit 3 ERO. 2.3.6 <u>IF</u> only the Unit 3 the Emergency Response Organization is needed, <u>THEN</u> direct the CCR Communicator to use **Envelope D** "Unit 3 ERO Mobilization" envelope to contact the Unit 3 ERO. 2.3.7 Perform Personnel Accountability per IP-1027.	

Attachment 6
Unit 2 Response to a Unit 3 Emergency Checklist

Sheet 4 of 4	
Initial Responsibility/Activity	**Notes**
3.0 Provide Support to Unit 3 3.1 Upon request from the Unit 3 Emergency Director, provide a Shift HP Technician to support Unit 3 response. 3.2 Upon request from the Unit 3 Emergency Director, call-out and dispatch Offsite Field Monitoring Teams to support Unit 3 field monitoring activities. Direct offsite monitoring personnel to report to the EOF and inform the Unit 3 Emergency Director of their availability. Refer to the Emergency Telephone Directory for names and telephone numbers of qualified individuals.	
Continuous Responsibility/Activity	**Notes**
4.0 Provide Support to Unit 3 as Requested Upon request from the Unit 3 Emergency Director, provide Unit 2 personnel, equipment and resources available to you.	
5.0 Provide updates to personnel in Unit 2 with information provided by the Unit 3 Emergency Director When information is provided to you, use the public address system to disseminate that information to the personnel within the Unit 2 fence line.	
6.0 Evaluate Emergency Action Levels Continue to evaluate current plant condition and events relative to the Emergency Action Levels as specified in IP-1024, "Emergency Classification."	

Attachment 7
Shift Manager (Emergency Director) Security Event Checklist
Sheet 1 of 9

Initial Responsibility/Activity	Notes
1.0 **Activating the Emergency Response Organization during a Security Event**	
1.1 IF an emergency is declared due to a security event, **THEN** the ERO will be mobilized to backup locations until conditions can be established for safe site access.	
1.2 Security and Operations will take steps as directed by Safeguard instructions to protect the safety of site employees and the integrity of plant equipment.	
1.3 Site access and egress will be controlled per Security procedures.	
2.0 **Classification of the Emergency**	
Authority to classify and declare an emergency is reserved solely for the Emergency Director and may not be delegated. The SM in the role of Emergency Director makes the initial emergency classification.	
2.1 Classify the emergency condition in accordance with IP-1024 "Emergency Classification".	
2.2 IF a General Emergency is declared, **THEN** protective action recommendations must be made in accordance with IP-EP-410, Protective Action Recommendations.	
2.3 Declare the emergency and announce the classification to Control Room personnel.	
2.4 Ensure Unit 3 Control Room is notified of the emergency classification.	
2.5 If a Security Event is in progress, determine if Site Assembly alarm should be sounded based on what is best for the safety of onsite personnel. Notify Unit 3 to take the same actions.	
3.0 **Notification – Unusual Event**	
State and local authorities shall be notified within 15 minutes of emergency declaration.	
3.1 IF the initial emergency classification is an Alert or higher **THEN** proceed to step 4.0.	
3.2 Ensure CCR Communicator to available. **IF** CCR Communicator is unavailable **THEN** direct a qualified individual to serve as CCR Communicator.	
3.3 Complete (or have completed) and sign a Form IP-1030-1 "NYS Radiological Emergency Data Form, Part I."	
3.4 Direct notification of offsite authorities by providing the completed and signed NYS Radiological Data Form Part I to the CCR Communicator.	

Attachment 7
Shift Manager Security Event Checklist

Sheet 2 of 9

Initial Responsibility/Activity(cont.)	Notes

3.5 Determine if Emergency Response Organization mobilization is needed.
 	
IF based on Shift Manager (Emergency Director) judgment the Emergency Response Organization should be directed to report to backup locations, **THEN** direct the CCR Communicator to use **Envelope F** "Station ERO Mobilization to Backup Locations".
 	
3.6 IF the ERO is not needed **THEN** notify the appropriate ERO of the event:
 	
   A.   IF the Unit 2 Emergency Response Organization should be notified only, **THEN** direct the CCR Communicator use **Envelope C** "Unit 2 ERO Event Notification."
 	
   B.   IF the Unit 3 Emergency Response Organization should be notified only, **THEN** direct the CCR Communicator use **Envelope E** "Unit 3 ERO Event Notification."
 	
   C. IF the Unit 2 and Unit 3 Emergency Response Organizations should be notified, **THEN** direct the CCR Communicator use both **Envelope C** "Unit 2 ERO Event Notification" and **Envelope E** "Unit 3 ERO Event Notification."	

4.0 Notification & Mobilization - **Alert, Site Area or General Emergency** Once the EOF is activated, all offsite communications shall be performed by the EOF staff. The following steps are for initial classification at the Alert level or higher. State and local authorities shall be notified within 15 minutes of emergency declaration. 4.1 Ensure CCR Communicator to available. **IF** CCR Communicator is unavailable **THEN** direct a qualified individual to serve as CCR Communicator. 4.2 Complete (or have completed) and sign a Form IP-1030-1 "NYS Radiological Emergency Data Form, Part I." 4.3 IF personnel assembly is suspended, **THEN** inform the CCR Communicator prior to directing personnel mobilization and instruct him **NOT** to sound the site assembly alarm. 4.4 Direct the CCR Communicator to use **Envelope F** "Station ERO Mobilization to Backup Locations".	

Attachment 7
Shift Manager Security Event Checklist
Sheet 3 of 9

Initial Responsibility/Activity(cont.)	Notes
5.0 Establish Personnel Accountability	

> **NOTE**
> IP-1027 "Personnel Accountability and Evacuation" provides guidance for the suspension of personnel accountability under certain conditions.

> **CAUTION**
> Security and Operations will take steps as directed by Safeguard Instructions to protect the safety of site personnel. Accountability should be suspended until conditions can be established for safe site access.

> **NOTES**
> Accountability rosters are located in the Shift Manager Position Binder.
> The Shift Manager may call for accountability to be completed any time conditions (hazards in the plant such as fire, toxic gas high radiation levels, earthquake etc.) are present where personnel safety may be in question.

5.1 **IF** a Site Area Emergency or General Emergency has been declared, and personnel accountability has not already been established, **THEN** initiate site personnel accountability per IP-1027, Personnel Accountability and Evacuation.

5.2 **IF** any individuals are missing, **THEN** direct available personnel and Security to conduct search and rescue operations to locate the missing individuals as conditions allow.

6.0 Assess Any Radiological Release

The MEANS computer program is available for the performance of dose projections and the formulation of protective action recommendations.

6.1 **IF** any indications exist of abnormal radiological release as a result of the emergency, **THEN** assess offsite consequences in accordance with IP-EP-310, Dose Assessment.

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Attachment 7
Shift Manager Security Event Checklist
Sheet 4 of 9

Initial Responsibility/Activity(cont.)	Notes
6.2 IF dose assessment results indicate offsite consequences in excess of the EPA Protective Action Guidelines THEN declaration of a General Emergency is required. Evaluate the need to modify the General Emergency PARs as specified in Attachment 10.2 of IP-EP-410, Protective Action Recommendations.	

Continuous Responsibility/Activity (Emergency Director)	Notes
NOTES IF while performing the Continuous Responsibility/Activity steps as Emergency Director, you are relieved of Emergency Director duties by the EPM or On-Call ED, THEN exit this section and enter the Continuous Responsibility/Activity (Shift Manager) section at step 12.0. 7.0 **Re-Classify the Emergency if Necessary** 7.1 IF plant conditions change or other events occur which may warrant upgrade of the emergency classification, THEN re-classify the emergency condition in accordance with IP-1024 "Emergency Classification". 7.2 IF a General Emergency is declared, THEN protective action recommendations must be made in accordance with IP-EP-410, Protective Action Recommendations. 7 3 Declare the emergency and announce the classification to Control Room personnel. 7.4 Complete (or have completed) and sign a Form IP-1030-1 "NYS Radiological Emergency Data Form, Part I." 7.5 Direct the CCR Communicator to perform notifications using Form IP-1002-3 "Upgrade/Update Notification Alert/SAE/GE Initial Notification Checklist". 8.0 **Establish Radiological Controls and Maintain Onsite Personnel Safety** 8.1 Keep the Security Supervisor at the Command Guard House informed of emergency classification, plant status and any radioactive releases which may effect Security Personnel. 8.2 Once established, maintain personnel accountability.	

Attachment 7
Shift Manager Security Event Checklist
Sheet 5 of 9

Continuous Responsibility/Activity (Emergency Director)	Notes
8.3 IF the potential for abnormal radiological conditions in-plant or onsite exists, THEN:	
A. Direct the Watch Health Physics Technician to establish radiological controls for the Central Control Room and initiate habitability monitoring for the Central Control Room.	
B. Evaluate the need to perform a site evacuation per IP-1027, Personnel Accountability and Evacuation.	
C. Authorize emergency exposure, if necessary, per Form IP-1023-6, Emergency Exposure Authorization.	
8.4 IF an on-site medical emergency occurs, THEN implement IP-1012, On-site Medical Emergency.	
9.0 Perform Periodic Update Notifications	
9.1 Periodic update notifications to offsite authorities should be made approximately every 30 minutes or more frequently when plant conditions change.	
9.2 For each update notification, complete (or have completed) and sign a Form IP-1030-1 "NYS Radiological Emergency Data Form, Part I."	
9.3 IF there has been a radiological release to the environment, THEN complete (or have completed) and sign a Form IP-1030-1 "NYS Radiological Data Form, Part II.	
9.4 For periodic update notifications during an **Unusual Events**, direct the CCR Communicator to perform update notifications using Form IP-1002-1 "CCR NUE Notification Checklist".	
9.5 For periodic update notifications during an **Alert or higher** classifications, direct the CCR Communicator to perform update notifications using Form IP-1002-3 "Upgrade/Update Notification Alert/SAE/GE Initial Notification Checklist".	

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Attachment 7
Shift Manager Security Event Checklist
Sheet 6 of 9

Continuous Responsibility/Activity (Emergency Director)	Notes
10.0 Turnover Emergency Director Responsibilities **NOTE:** For Unusual Events, the Shift Manager will normally maintain the Emergency Director responsibilities until the classification is terminated per IP-EP-610, Emergency Termination & Recovery. For Alert and higher classifications, the Emergency Plant Manager will relieve the Shift Manager of Emergency Director duties in the Control Room. However, the On-Call Emergency Director in the EOF may, at his discretion, assume Emergency Director duties directly from the Shift Manager via telephone turnover. 10.1 Provide a status briefing to the Emergency Plant Manager upon his arrival in the Central Control Room. The Emergency Plant Manager will request status on all of the information specified on Form IP-1035-2, Essential Information Checklist. 10.2 Provide copies of all completed NYS radiological Emergency Data forms to the Emergency Plant Manager. 10.3 Resume duties as Shift Manager and proceed to step 12.0 in the Continuous Responsibility/Activity (Shift Manager) section.	
11.0 Terminate the Emergency (Unusual Event Only) 11.1 When conditions warrant termination of the Unusual Event, enter IP-EP-610 Emergency Termination & Recovery and terminate the emergency per section 6.1 "Transition and Recovery Following an Unusual Event." 11.2 Exit this section after termination of the emergency and enter the Closeout Responsibility/Activity section at step 17.0.	

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Attachment 7
Shift Manager Security Event Checklist
Sheet 7 of 9

Continuous Responsibility/Activity (Shift Manager)	Notes
12.0 Evaluate Emergency Action Levels 12.1 Continue to evaluate current plant condition and events relative to the emergency action levels as specified in IP-1024, Emergency Classification. 12.2 Make recommendations to the Emergency Director and Emergency Plant Manager for upgrading of the emergency classification as appropriate.	
13.0 Maintain Communications with the Emergency Plant Manager and Emergency Director 13.1 Keep the Emergency Plant Manager and Emergency Director informed of current plant status and planned operations. 13.2 Discuss tasks and procedures the Control Room is currently performing and review priorities on a regular basis. 13.3 IMMEDIATELY inform the Emergency Plant Manager and Emergency Director of any plant condition or event that has the potential to change the emergency classification or affect radiological release status.	
14.0 Coordinate In-Plant Team Activities with the Operations Coordinator in the OSC **NOTE:** Once the OSC is activated, the dispatch of personnel into the field for emergency operations is controlled from the OSC. Communications and directions can be provided to the teams from the Control Room, however, the OSC must retain team control for personnel safety and continuous accountability. 14.1 Once the OSC is activated, coordinate the dispatch and control of NPOs assigned to perform in-plant operations with the Operations Coordinator located in the OSC.	Operations Coordinator telephone # in OSC: 734-5556

Attachment 7
Shift Manager Security Event Checklist
Sheet 8 of 9

Continuous Responsibility/Activity (Shift Manager)	Notes
14.2　For operations teams already dispatched and in the field prior to the OSC being activated, coordinate the transfer of team control to the OSC with the Operations Coordinator. 14.3　Direct requests for in-plant operational support IMMEDIATELY to the Operations Coordinator in the OSC to facilitate prompt response to Control Room needs. Keep the Emergency Plant Manager informed of all requests. 14.4　Re-enforce Control Room priorities and needs with the Emergency Plant Manager if in-plant team support is not being provided in a timely and effective manner.	
15.0　Request Technical Support as Needed to Mitigate the Emergency 15.1　Request the TSC Manager to provide forward-looking technical support as needed to assist the Control Room staff in responding to the emergency. 15.2　Provide the Emergency Plant Manager and TSC Manager with periodic briefs on current mitigation strategies and emergency procedures currently being implemented.	
16.0　Exit to Recovery Phase 16.1　Upon notification from the Emergency Director that the emergency has been terminated, exit this section and enter the Closeout Responsibility/Activity section at step 17.0.	

Attachment 7
Shift Manager Security Event Checklist

Sheet 9 of 9

Closeout Responsibility/Activity	Notes
17.0 Direct the Control Room staff to return all equipment utilized in the response to proper storage locations	
18.0 Review all documentation the Control Room staff generated during the emergency: 18.1 Ensure all logs, forms and other documentation are complete. 18.2 Ensure all temporary procedures used and/or developed are properly documented for use by the Recovery Organization so that necessary actions can be taken for long-term restoration. 18.3 Collect all computer printouts and strip charts.	
19.0 Provide all logs and records to the Recovery Manager upon termination of the emergency and entry into the Recovery Phase.	

CONTROLLED

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Emergency Notification and Communication

Prepared by:	Bryant Pergerson	_[signature]_	7/23/02
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SNSC Review:	PREVIOUS SNSC 2836 ON 5/17/01	_[signature]_	
	Meeting Number	Signature Secretary	Date
Approval:	Frank Inzirillo	_[signature]_	7/31/02
	Print Name	Signature	Date

Effective Date: __8-1-02__

Reference Use

Table of Contents

EMERGENCY NOTIFICATION AND COMMUNICATION

1.0   PURPOSE

To prescribe the responsibilities and methods for:

1.1   Initial notification and periodic updates made from the Central Control Room (CCR) in the event of a declared emergency at Indian Point Unit 1, 2 & 3.

1.2   Provides checklists for the performance of notifications and activation of the Emergency Response Organization.

2.0   DISCUSSION

2.1   The Shift Manager will assign a CCR Communicator. The CCR Communicator will have no other emergency duties.

2.2   The CCR Communicator shall perform his duties in the Control Room under the SM's direction. These duties shall entail implementing the notification checklists and use of RECS, radio, and other telephones (Section 4.0) to notify on-site personnel as well as the off-site authorities of the accident conditions and to pass along directions and recommendations as appropriate from the SM. The Communicator shall also maintain himself ready to supply updates to the offsite authorities.

2.3   Notifications made from the EOF are described in IP-1030, Emergency Operations Facility.

3.0   PRECAUTIONS AND LIMITATIONS

3.1   Initial and Upgrade notifications to the State and counties shall be initiated within 15 minutes of the emergency classification declaration or initial Protective Action Recommendations or modifications to the Protective Action Recommendations.

3.2   Periodic Update Notifications should be performed approximately every 30 minutes or more frequent when conditions change.

4.0   EQUIPMENT AND MATERIALS

4.1   Central Radio (System Operations) - see Addendum 1 for call letters.

4.2   Area Radio (Monitoring Teams) - see Addendum 1 for call letters.

4.3   Local Government Radio (LGR) - see Addendum 1 for call letters. For backup notifications IF RECS is out of service.

4.4   "Contingency" Phone - see Emergency Telephone Directory for unlisted number to be used only for receiving incoming calls from New York State AND the four EPZ counties.

4.5   Radiological Emergency Communications System (RECS) - party line phone for initial notification AND updates to NYS AND counties.

4.6   ENS Phone - dial-up telephone circuits used to contact NRC headquarters for initial notification of emergency AND continuing updates.   (See Emergency Telephone Directory for listed numbers).

4.7   CR-EOF - direct line, with bell annunciation by means of push button.

4.8   CR-TSC direct line, automatic ringing phone.

4.9   Peekskill Police - direct line, automatic ringing phone.

4.10   NYS Police - direct line, automatic ringing phone.

4.11   Phone – Peekskill (914) 737 Exchange (see Emergency Telephone Directory).

4.12   Phone - Indian Point (914) 734 Exchange (see Emergency Telephone Directory).

4.13   Microwave (see Emergency Telephone Directory) - provides connection to the 212 exchange in NYC via microwave to the Empire State Building.

4.14   Dialogic Notification System - primary notification system to mobilize the ERO.

5.0 INSTRUCTIONS

> **NOTE:**
> All phone numbers not provided within this procedure can be found in the Emergency Telephone Directory.

5.1 Notification of Unusual Event (NUE) Initial Notification - CCR Communicator

   5.1.1 Obtain the completed and approved Radiological Emergency Data Form PART I from the Shift Manager. THEN

   A. Review form for completeness.

   B. Determine if the Shift Manager wants full ERO activation at the NUE level (not normally required).

   C. ALWAYS refer to the form as NYS Radiological Emergency Data Form PART I when talking to the State and County authorities.

   5.1.2 Start the initial notification roll call to state and counties within 15 minutes of the declaration of an Unusual Event.

   5.1.3 Use a CCR NUE Notification Checklist, Addendum 2 (Form IP-1002-1) to make and document the initial notifications.

   5.1.4 Once the CCR NUE Notification Checklist is complete, IF the SM requests additional staffing level THEN perform the following:

   A. Contact the on-call Emergency Director (ED) (refer to the Emergency Response Team On-call Schedule for duty ED.)

   B. Request the activation of desired portions of the Emergency Response Organization On-Call Team to provide plant support.

5.2 NUE Update Notifications - CCR Communicator

   5.2.1 Make periodic updates approximately every 30 minutes throughout the event.

   5.2.2 Obtain the completed and approved Radiological Emergency Data Form PART I from the Shift Manager. THEN:

   A. Review form for completeness.

   B. ALWAYS refer to the form as Radiological Emergency Data Form PART I when talking to the State and County authorities.

5.2.3   Use a CCR NUE Notification Checklist, Addendum 2 (Form IP-1002-1) and perform **ONLY the circled items,** to make the periodic Update Notifications.

NOTE:

The CCR Alert/ SAE/GE Initial Notification Checklist, Addendum 3 (form IP-1002-2) is used <u>only</u> once. After notifications are completed using this form, all subsequent upgrade and update notifications shall be made using the <u>Upgrade/Update</u> Notification Alert/SAE/GE Checklist, Addendum 4 (form IP-1002-3)

5.3   Alert, Site Area Emergency AND General Emergency Initial Notification – CCR Communicator

     5.3.1   Use a CCR Initial Notification Checklist Alert/SAE/GE, Addendum 3 (Form IP-1002-2) to make and document the initial notifications.

     5.3.2   Obtain the completed and approved Radiological Emergency Data Form PART I from the Shift Manager.

         A.   Review form for completeness.

         B.   Verify that the Shift Manager wants the Assembly Alarm Sounded

         C.   <u>ALWAYS</u> refer to the form as Radiological Emergency Data Form PART I when talking to the State <u>AND</u> the county authorities.

     5.3.3   Start the initial notification roll call to State and counties within 15 minutes of the declaration of an Alert, Site Area Emergency (SAE) or General Emergency (GE).

5.4   Alert / SAE / GE Upgrade/Update Notifications – CCR/EOF Communicator

     5.4.1   Upgrade/Update notifications are made for EAL upgrades and for periodic updates during an Alert, Site Area Emergency (SAE) or General Emergency (GE).

     5.4.2   Use an Upgrade/Update Notification Alert/SAE/GE Checklist, Addendum 4 (Form IP-1002-3) to make and document the emergency classification upgrade or update notifications.

     5.4.3   Obtain the completed Radiological Emergency Data Form Part I (and Part II, if provided) from the Shift Manager/Emergency Director <u>AND</u> notify NY State and counties within 15 minutes of any emergency classification change or approximately every 30 minutes otherwise.

6.0 <u>**REFERENCES**</u>

6.1 Development Documents

6.1.1 Emergency Plan for Indian Point Unit Nos. 1 & 2

6.1.2 SAO-804, "Emergency Response Organization"

6.2 Interface Documents

6.2.1 SOP-CG-7-1, "Notification During Nuclear Emergency Involving IP No. 2"

6.2.2 IP-1001, "Mobilization of Onsite Emergency Organization"

6.2.2 IP-1018, "Media Relations Mobilizing During Emergency"

6.2.4 IP-1027, "Personnel Accountability and Evacuation"

6.3 Commitments

NONE

7.0 <u>**ATTACHMENTS**</u>

NONE

8.0 **8.0** <u>**ADDENDUM**</u>

8.1 Addendum 1, Indian Point Emergency Radio Systems

8.2 Addendum 2, CCR NUE Notification Checklist (Form IP-1002-1)

8.3 Addendum 3, CCR Initial Notification Checklist Alert/SAE/GE (Form IP-1002-2)

8.4 Addendum 4, Upgrade/Update Notification Alert/SAE/GE Checklist (Form IP-1002-3)

8.5 Addendum 5, Backup - ERO Activation Checklist (Form IP-1002-4)

8.6 Addendum 6, Primary - ERO Activation Checklist (Form IP-1002-5)

[Proprietary Information]

Addendum 1
INDIAN POINT EMERGENCY RADIO SYSTEMS
Sheet 1 of 1

Area Radio   [Freq. 1 = 456.100 /Freq. 2 = 451.100/MHZ]

Base Station Location	Call Letters Freq. 1	Call Letters Freq. 2
CR 1-2	[WAY-744]	[WAY-424]
CR 3	[WAY-744]	[KGS-757]
EOF	[WAY-744]	[KYA-424]
AEOF	[KNEB-805]	[KYA-615]
CGH (SAS)	[WAD-498]	[KMF-617]
CAS	[WAD-498]	[KYA-424]

Mobile Station	Call Letters Freq. 1	Call Letters Freq. 2
Mobile 1	[KU-3575]	[KU-3575]
Mobile 2	[KU-3575]	[KU-3575]
Mobile 3	[KU-3575]	[KU-3575]

Central Radio   [456.050 MHZ]

Base Station Location	Call Letters
CR 1-2	[WAE-277]
EOF	[WAE-277]
AEOF	[WGQ-993]

LOCAL GOVERNMENT RADIO   [45.16 MHZ]

Base Station Location	Call Letters
CR, EOF, AEOF	[KNFM-394]
So. Dist. Office	[WZM-947]
Westchester W.P.	[WRU-873]
Orange W.P.	[WAU-720]
Rockland W.P.	[KRH-269]
Putnam W.P.	[KFC-781]
Peekskill W.P.	(NONE)

Addendum 2
CCR NUE Notification Checklist (Form IP-1002-1)
Sheet 1 of 2

CCR NUE Notification Checklist

Note: Perform only circled items for NUE periodic Update Notifications

Notify State and Counties:

(1.) Pick up the console handset and depress the "RECS" button THEN press the number "7" button on the keypad

(2) When you hear the message *"You have initiated a conference . ."* state
"This is to report an incident at Indian Point 2. Standby for roll call"

(3) IF you did not hear the above message within 5 seconds of pressing the number "7" button THEN press "Clear" to hang up, wait 5 seconds and repeat steps 1 and 2.

(4) IF unable to contact any station via RECS THEN use Local Government Radio (LGR) (instructions on back)
IF both RECS and LGR fail THEN contact listed locations one at a time via telephone, attempting to contact the Warning Point first (phone numbers on back)

(5) Enter time you are starting the initial roll call in the space provided below

(6) Initiate roll call by asking "*(location title)* are you on the line?" for each of the following stations, stopping after each name is read to allow station to identify itself   Check off "Initial Roll Call" for each location as they answer the roll call

Location	Initial Roll Call	Final Roll Call
Westchester County	☐	☐
Peekskill City	☐	☐
Rockland County	☐	☐
Orange County	☐	☐
Putnam County	☐	☐
New York State	☐	☐

Time Initial Roll Call Started

Time Final Roll Call Completed

(7) SLOWLY read all of the information from the completed and approved Radiological Emergency Data Form Part I After reading the form say "Stay on line for final roll call "

(8) Perform a final roll call by asking "*(location title)* did you copy?" for each location. Check off "Final Roll Call" for each location as they answer the roll call IF any location did not copy the message THEN instruct them to call the State for clarification or, if requested, repeat the form information.

(9) End notification by saying "Indian Point No. 2 out at *(time)*". Enter the time in the space provided above when final roll call is completed

(10) IF any location did not answer the initial roll call THEN contact the missing location via telephone and direct them to either call the State to obtain the notification information or read them the information over the telephone Record the location and time of this notification in the comment section of this form.

Notify Unit 2 Emergency Response Organization: **Time**

11   Ask the Shift Manger (Emergency Director) if Emergency Response Organization mobilization is needed or if Emergency Response Organization should receive Event Notification only

IF Emergency Response Organization mobilization is needed, THEN use Envelope B "Unit 2 ERO Mobilization" envelop to mobilize the ERO (Form IP-1002-5, Primary – ERO Activation Checklist)

IF event notification only, THEN use Envelope C "Unit 2 ERO Event Notification" envelop to contact the appropriate ERO members to notify them of the event (Form IP-1002-5, Primary – ERO Activation Checklist)

IF Emergency Response Organization mobilization is needed for a Security Event, THEN use Envelope F "Station ERO Mobilization to Backup Locations" envelop to mobilize the ERO (Form IP-1002-5, Primary – ERO Activation Checklist)

Notify Media Relations: **Time**

12   Call Indian Point Communications Representative at 914-271-7031

Read the following statement to individual answering or into answering machine
"This is the Unit 2 Control Room, an Unusual Event was declared at _____ (time) on Emergency Action Level number _____ " (EAL)

Obtain and enter name of individual contacted. _____

Go to page 2 (back)

Proprietary Information   Page 1 of 2   Form IP-1002-1 Rev 8

Addendum 2
CCR NUE Notification Checklist (Form IP-1002-1)
Sheet 2 of 2

CCR NUE Notification Checklist

Note: Perform only circled items for NUE periodic Update Notifications

Notify Security and Unit 3 :	Time
13 Call the Secondary Alarm Station at 734-5330 and provide them with Date/Time of NUE classification	
14 Contact the Unit No 3 Control Room (ext 5059) and provide them with Date/Time of NUE classification, EAL # and brief description of event. Obtain and enter name of individual contacted _____	

Notify NRC:	Time
16. IF it is during normal working hours THEN notify the NRC Senior Resident Inspector at 914-739-9361 or x 5347 IF during off-hours THEN call or page the NRC Senior Resident Inspector using phone numbers provided in the Emergency Telephone Directory Provide the Inspector with Date/Time of NUE classification, EAL # and brief description of event.	
(16) Contact NRC by calling main number listed on ENS phone (IF main number does not work THEN use 1st, 2nd or 3rd backup number, or region 4 alternate number listed) Inform them that this is a 50 72 notification and provide them with Date/Time of emergency classification, EAL # and brief description of event	

(17) Record any Comments _____

(18) Date and sign this form

Date.	Signature:

(19) Inform the Shift Manager that you have completed NUE notifications

(20) Fax copies of the NYS Radiological Emergency Data Form, Part I to State, counties, TSC and EOF and provide originals to the Shift Manager.

Use of Local Government Radio

A. Depress the "LGR" button on the communications console
B   Pickup the handset and depress the handset button.
C. Announce "This is KNFM394 to report an incident at Indian Point No. 2 - Standby for Roll Call"
D   Return to step 4 on page 1 of this checklist

Warning Point and EOC phone numbers

Location	Warning Point Phone #	EOC Phone #
Westchester County	914-864-7890	914-995-3026 or -3027
Peekskill City	914-737-8000	914-737-8000
Rockland County	845-364-8600	845-364-8800 or 364-8900
Orange County	845-294-3303	845-291-3199
Putnam County	845-225-4300	845-225-3896 or 225-9376
New York State	518-457-2200 or 457-6811	518-457-9900

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Addendum 3
CCR Alert/SAE/GE Initial Notification Checklist (Form IP-1002-2)
Sheet 1 of 2

CCR Initial Notification Checklist - Alert/SAE/GE

Notify Protected Area Personnel:	Time

Note: If a Security Event is in progress or the Shift Manager does not feel it is safe to relocate personnel at this time **DO NOT** sound the Site Assembly Alarm or call for personnel to report to the Energy Education Center.

1. Sound the Site Assembly Alarm for 30 seconds

2. Announce the following message over the P A System three (3) times

   "Attention all personnel, a (*Alert / Site Area Emergency / General Emergency*) has been declared"

   "All Essential Personnel report to your assigned emergency facility"

   "All other personnel report to the Energy Education Center"

Notify Emergency Response Organization:	Time

3. Request direction from Shift Manger (Emergency Director) as to ERO mobilization needed Unit 2, Unit 3 or Station activation (both Unit 2 and Unit 3) using From IP-1002-5, Primary – ERO Activation Checklist from the appropriate envelope
   - **IF** a Security Event, **THEN** use Envelope F "Station ERO Mobilization to Backup Locations" envelope to mobilize both EROs
   - **IF** both Unit 2 AND Unit 3, **THEN** use Envelope A "Station ERO Mobilization" envelope to mobilize both EROs
   - IF only Unit 2 ERO, THEN use Envelope B "Unit 2 ERO Mobilization" envelope to mobilize the Unit 2 ERO
   - IF only Unit 3 ERO, THEN use Envelope D "Unit 3 ERO Mobilization" envelop to mobilize the Unit 3 ERO

Notify State and Counties:

4. Pick up the console handset and depress the "RECS" button **THEN** press the number "7" button on the keypad

5. When you hear the message *"You have initiated a conference ..."* state
   "This is to report an incident at Indian Point 2. Standby for roll call"

6. **IF** you did not hear the above message within 5 seconds of pressing the number "7" button **THEN** press "Clear" to hang up, wait 5 seconds and repeat steps 4 and 5

7. **IF** unable to contact any station via RECS **THEN** use Local Government Radio (LGR) (instructions on back)
   IF both RECS and LGR fail **THEN** contact listed locations one at a time via telephone, attempting to contact the Warning Point first (phone numbers on back).

8. Enter time you are starting the initial roll call in the space provided below

9. Initiate roll call by asking "*(location title)* are you on the line?" for each of the following stations, stopping after each name is read to allow station to identify itself. Check off "Initial Roll Call" for each location as they answer the roll call

	Location	Initial Roll Call	Final Roll Call
Time Initial Roll Call Started	Westchester County	☐	☐
	Peekskill City	☐	☐
	Rockland County	☐	☐
Time Final Roll Call Completed	Orange County	☐	☐
	Putnam County	☐	☐
	New York State	☐	☐

10. SLOWLY read all of the information from the completed and approved Radiological Emergency Data Form Part 1 After reading form say "Stay on line for final roll call."

11. Perform a final roll call by asking "*(location title)* did you copy?" for each location. Check off "Final Roll Call" for each location as they answer the roll call **IF** any location did not copy the message **THEN** instruct them to call the State for clarification or, if requested, repeat the information

12. End notification by saying "Indian Point No. 2 out at *(time)*". Enter the time in the space provided above when final roll call is completed

13. **IF** any location did not answer the initial roll call **THEN** contact the missing location via telephone and direct them to either call the State to obtain the notification information or read form information over the telephone Record the location and time of this notification in the comment section of this form

Addendum 3
CCR Alert/SAE/GE Initial Notification Checklist (Form IP-1002-2)
Sheet 2 of 2

CCR Initial Notification Checklist Alert/SAE/GE	
NotifySecurity, Unit 3 and Media Relations:	**Time**
14 Call the Secondary Alarm Station at 734-5330 and provide them with the classification and Date/Time of emergency classification	
15 Contact the Unit No 3 Control Room (ext 5059) and provide them with Date/Time of emergency classification, EAL # and brief description of event. Obtain and enter name of individual contacted _____	

16 Call Indian Point Communications Representative at 914-271-7031
 	
    IF individual answers THEN read the following statement:
 	
    "This is the Unit 2 Control Room, a(n) (Alert, Site Area Emergency, General Emergency)
                                                        (circle proper classification)
    was declared at _____ on Emergency Action Level number _____ "
                            (time)   (EAL #)
        Obtain and enter name of individual contacted _____
                    OR
    IF after 2-5 rings the machine picks up THEN read the above message into machine after beep	

Notify NRC:	**Time**

17. IF it is during normal working hours THEN notify the NRC Senior Resident Inspector at 914-739-9361 or x5347
 	
    IF during off-hours THEN call or page the NRC Senior Resident Inspector using phone numbers provided in the Emergency Telephone Directory
 	
    Provide the Inspector with Date/Time of emergency classification, EAL # and brief description of event	

18 Contact NRC by calling main number listed on ENS phone (IF main number does not work THEN use 1st, 2nd or 3rd backup number, or region 4 alternate number listed) Inform them that this is a 50 72 notification and provide them with Date/Time of emergency classification, EAL # and brief description of event	
19 Record any Comments _____ _____	
20 Date and sign this form	Date Signature·
21 Inform the Shift Manager that you have completed emergency notifications	
22 Fax copies of the NYS Radiological Data Form, Part I to State, counties, TSC and EOF and provide originals to the Shift Manager	

Use of Local Government Radio

A Depress the "LGR" button on the communications console
B Pickup the handset and depress the handset button
C Announce "This is KNFM394 to report an incident at Indian Point No. 2 - Standby for Roll Call"
D Return to step 7 on page 1 of this checklist

Warning Point and EOC phone numbers

Location	Warning Point Phone #	EOC Phone #
Westchester County	914-864-7890	914-995-3026 or 995-3027
Peekskill City	914-737-8000	914-737-8000
Rockland County	845-364-8600	845-364-8800 or 364-8900
Orange County	845-294-3303	845-291-3199
Putnam County	845-225-4300	845-225-3896 or 225-9376
New York State	518-457-2200 or 457-6811	518-457-9900

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Addendum 4
Upgrade/Update Notification Alert/SAE/GE Checklist (Form 1002-3)
Sheet 1 of 2

Upgrade/Update Notification Alert/SAE/GE Checklist

Notes: Use the CCR Alert/SAE/GE Initial Notification Checklist (Form IP-1002-2) for upgrade from NUE to Alert.

Upgrade notifications shall be made within **15 minutes** of classification change Periodic Update Notifications should be done approximately **every 30 minutes** or more frequent when conditions change

Notify Protected Area Personnel and Emergency Response Organization

IF initial accountability has not been completed <u>THEN</u> Sound or have CCR sound the Site Assembly Alarm

1   IF the emergency classification changes <u>THEN</u> perform the following

A   Announce (or have the CCR announce) the applicable message over the P.A System three (3) times

"**Attention all personnel, a** *(Site Area Emergency / General Emergency)* **has been declared**"
    <u>OR</u> if emergency classification is terminated <u>THEN</u> announce:

"**Attention all personnel, the emergency has been terminated**"

B   Call the Secondary Alarm Station (phone 734-5330) and inform them of the new classification

Notify State and Counties:

2   Pick up the console handset and depress the "RECS" button <u>THEN</u> press the number "7" button on the keypad

3   When you hear the message "*You have initiated a conference ..*" state:
"**This is to report an incident at Indian Point 2. Standby for roll call**"

4.   IF you did not hear the above message within 5 seconds of pressing the number "7" button <u>THEN</u> press "Clear" to hang up, wait 5 seconds and repeat steps 2 and 3

5   IF unable to contact any station via RECS <u>THEN</u> use Local Government Radio (LGR) (instructions on back)
IF both RECS and LGR fail <u>THEN</u> contact listed locations one at a time via telephone,
(phone numbers on back)

6   Enter time you are starting the initial roll call in the space provided below

7   Initiate roll call by asking "*(location title)* **are you on the line?**" for each of the following stations, stopping after each name is read to allow station to identify itself Check off "Initial Roll Call" for each location as they answer the roll call:

	Location	Initial Roll Call	Final Roll Call
Time Initial Roll Call Started	Westchester County	☐	☐
	Peekskill City	☐	☐
	Rockland County	☐	☐
Time Final Roll Call Completed	Orange County	☐	☐
	Putnam County	☐	☐
	New York State	☐	☐

8   SLOWLY read all of the information from the completed and approved Radiological Emergency Data Form Part I (and Part II if required) After reading form say "**Stay on line for final roll call **"

9   Perform a final roll call by asking "*(location title)* **did you copy?**" for each location. Check off "Final Roll Call" for each location as they answer the roll call IF any location did not copy the message <u>THEN</u> instruct them to call the State for clarification or, if requested, repeat the form information.

10   End notification by saying "**Indian Point No. 2 out at** *(time)*" Enter the time in the space provided above when final roll call is completed

11   IF any location did not answer the initial roll call <u>THEN</u> contact the missing location via telephone and direct them to either call the State to obtain the notification information or read them the form information over the telephone. Record the location and time of this notification in the comment section of this form.

Go to page 2 (back)

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Addendum 4
Upgrade/Update Notification Alert/SAE/GE Checklist (Form 1002-3)
Sheet 2 of 2

Upgrade/Update Notification Alert/SAE/GE Checklist

Note: Use the CCR Alert/SAE/GE Initial Notification Checklist for upgrade from NUE to Alert.

Notify Unit 3 and Local Facilities:	Time

12 IF the emergency classification changed **THEN** perform the following:
  A Contact the Unit No. 3 Control Room (ext. 5059) and provide them with Date/Time of classification, EAL # and brief description of event
  Obtain and enter name of individual contacted. _____	

13. IF the emergency is classified as a Site Area or General Emergency THEN notify the plant manager of Lafarge Gypsum (Georgia Pacific) via telephone (numbers in Emergency Telephone Directory)	

Notify NRC:	Time
14. Contact NRC by calling main number listed on ENS phone. (IF main number does not work THEN use 1st, 2nd or 3rd backup number, or region 4 alternate number listed) Inform them that this is a 50.72 notification and provide them with Date/Time of classification, EAL # and brief description of event	

15 Record any Comments _____

_____

_____

16 Date and sign this form	Date.	Signature

17 Inform the Shift Manager that you have completed emergency notifications.

18 Fax copies of the form 30a and 30b (if completed) to State, counties, TSC and EOF and provide originals to the Shift Manager (or EOF Manger)

Use of Local Government Radio

  A Depress the "LGR" button on the communications console
  B. Pickup the handset and depress the handset button
  C. Announce "This is KNFM394 to report an incident at Indian Point No. 2 - Standby for Roll Call"
  D Return to step 5 on page 1 of this checklist

Warning Point and EOC phone numbers

Location	Warning Point Phone #	EOC Phone #
Westchester County	914-864-7890	914-995-3026 or 995-3027
Peekskill City	914-737-8000	914-737-8000
Rockland County	845-364-8600	845-364-8800 or 364-8900
Orange County	845-294-3303	845-291-3199
Putnam County	845-225-4300	845-225-3896 or 225-9376
New York State	518-457-2200 or 457-6811	518-457-9900

Addendum 5
Backup - Emergency Response Organization Activation Checklist (Form IP-1002-4)
Sheet 1 of 2

Backup - ERO Activation Checklist

A.   Backup Notification System Activation:

1.   Use the Backup Notification System ONLY if the Primary Dialogic system fails to activate

2   Verify Control Room Pagers are on

3   Call   9-1-866-521-7099

4   Upon hearing the following message "*This is the DCC Service Bureau   Please enter your company ID number followed by the pound (#) sign*"

5. Enter Company ID and Press #	4732 #

6   Upon hearing the following message· "*Please enter Scenario Activation Password followed by the pound (#) sign* "

7 Enter Activation Password found in Dialogic Envelope and Press #.	_ _ _ _ _ #

8   After entering the Activation Password you will hear the following message "*To start a scenario, enter the Scenario ID Number followed by the pound (#) sign, or press pound alone for more options.*"

9 Enter Scenario ID Number found in Dialogic Envelope and Press #	_ _ _ _ _ #

10 After entering the Scenario ID Number you will hear the following message "*To start a scenario press 1, to stop a scenario press 2, to check scenario information press 3, to enter a different scenario activation password press 4, to end this call press pound (#)* **Press**	3 #

NOTE: Press pound (#) to end the call

11   <u>WHEN</u> you hear the following message "*Goodbye*" <u>THEN</u> Hang-up

12 Enter the time you completed Dialogic activation.	Time:

NOTE: Continue on with offsite notifications while waiting for verification of pager activation

13   Verify the backup notification system successfully activated by either Control Room pager sounding <u>IF</u> the pager did not activate, <u>THEN</u> go to Part B

14   Inform the Shift Manager that you have completed ERO activation using the Backup System

15 Date and sign this form when complete	Date:	Signature:

Continue <u>ONLY</u> If Control Room Pagers Did Not Activate

16   Contact Security SAS at 734-5330 and ask if the Security pager activated

17   <u>IF</u> Security pager activated <u>THEN</u> go to step 14

18   <u>IF</u> Security pager did not activate <u>THEN</u> repeat steps 3 through 11 one additional time

> <u>IF</u> during the 2nd attempt, on step 10, you hear "*The scenario is currently active Do you wish to stop the scenario* " <u>THEN</u> do not stop the scenario. **Press: 6** You will then hear. "*To start a scenario press 1, to stop a scenario press 2, to check scenario information press 3, to enter a different scenario activation password press 4, to end this call press pound (#)*   **Press: #**

19   <u>IF</u> a Control Room or Security pager does not sound after the 2nd attempt <u>THEN</u> manually activate the Group Page using Part B of this form

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Addendum 5
Backup - Emergency Response Organization Activation Checklist (Form IP-1002-4)
Sheet 2 of 2

Backup - ERO Activation Checklist

B. Manual Group Page Activation:

1. Use the Manual Group Page Activation ONLY if the Primary AND Backup Dialogic systems both fail to activate.

2. Request direction from Shift Manger (Emergency Director) as to ERO mobilization needed Unit 2, Unit 3 or Station activation (Unit 2 and Unit 3)

3. Depending on mobilization needed, call each Group Page phone number:

4. To Activate UNIT 2 ERO:
   Dial Unit 2 Plant Group Page number: 9-1-917-457-8432
   Enter Event Code ___ ___ ___ (In Dialogic Envelop)

5. To Activate UNIT 3 ERO:
   Dial Unit 2 Plant Group Page number.   9-1-800-436-2732
   Enter PIN number 714 1973
   Enter Event Code ___ ___ ___ (In Dialogic Envelop)

6. To Activate JNC ERO (JNC is activated for either Unit 2 or Unit 3 Event):
   Dial JNC ant Group Page number: 9-1-917-649-1901
   Enter Event Code ___ ___ ___ (In Dialogic Envelop)

7. Upon hearing one or more beeps, enter the three digit Pager Event Code number found in the Dialogic Envelop. **Press:** | ___ ___ ___ #

8. Upon entering the three digit Event Code you will hear a series of short, rapid beeps, indicating that the message has been sent. Hang up.

9. Enter time you completed activating pagers **Time:** |

10. Verify that the correct message was sent by confirming the pager message received on the Control Room or Security pager is same as the three digit Event Code.

11. **IF** the Event Code is incorrect on the Control Room pager **THEN** immediately call the Group Page Phone Number (above) and send the "Disregard Last Message" code as listed below. **Press:** | 999 #

12. Upon entering the three digit Event Code you will hear a series of short, rapid beeps, indicating that the message has been sent. Hang up

13. **IF** Control Room and Security pagers fail to activate **THEN** inform Shift Manager that you are unable to mobilize the ERO.

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Addendum 6
Primary - Emergency Response Organization Activation Checklist (Form IP-1002-5)
Sheet 1 of 1

Primary - ERO Activation Checklist
Dialogic Notification Systems Activation:

1. Verify that Shift Manager has determined that ERO mobilization is needed.

2. Verify Control Room Pagers are on.

3. Call **9-788-7771**

4. You will hear: "*This is the remote activation module Please enter scenario activation password followed by the pound (#) sign*"

5. **Enter Activation Password and Press #.**   ` _ _ _ _ _ #`

6. After entering the activation password you will hear the following message: "*To start a scenario, enter the scenario ID number followed by the pound (#) sign, or press pound alone to enter more options.*"

7. **Enter Scenario Number and Press #**   ` _ _ _ _ _ #`

8. After entering the Scenario Number you will hear: "*The pager event code is* (three digit number). *Press 1 to change the pager event code. Press 2 to continue.*"

NOTE: Do NOT change the three digit event code regardless of what code is given.   **Press:** | **2** |

9. After entering "2" you will hear "*To start the scenario, press 3, followed by the pound sign (#).*

                                                          Press: | **3 #** |

10 **WHEN** you hear. "*Goodbye*" **THEN** Hang-up.

11 Enter the time you completed Dialogic activation | **Time:** |

    NOTE: Continue on with offsite notifications while waiting for verification of pager activation

12 Verify the notification system successfully activated by either Control Room pager sounding. **IF** neither pager activates within 3 minutes, **THEN** go to Step 15.

13. Inform the Shift Manager that you have completed ERO activation.

14. Date and sign this form when complete: | **Date:** | **Signature:** |

Continue ONLY if Control Room Pagers Did Not Activate

15 Contact Security SAS at **734-5330** and ask if the Security pager activated

16. **IF** Security pager activated **THEN** go to step 13.

17. **IF** Security pager did not activate **THEN** repeat steps 3 through 10 one additional time.

    IF during the 2nd attempt, on step 8, you hear: "*The scenario is currently active. Do you wish to stop the scenario.*" **THEN** do not stop the scenario. **Press: 6** You will then hear. "*To start a scenario press 1, to stop a scenario press 2, to check scenario information press 3, to enter a different scenario activation password press 4, to end this call press pound (#).* **Press: #**

18 **IF** a Control Room or Security pager does not sound after the 2nd attempt **THEN** activate the Backup Notification System per Form IP-1002-4, Backup - Emergency Response Organization Activation Checklist.