

25675N

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CONTROLLED DOCUMENT TRANSMITTAL

Transmittal#: 25675N

Date: 10/09/2002

Initiator: TRACY NELSON

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Description:

ISSUE OF 1 SUPERCEDED EMERGENCY PLAN PROCEDURE

Distribution Group(s):

Procedures: EPP: PMP-2080-EPP.112

Section/Name	Mail Zone	Copies	Comments
Emergency Planning Coord	11	3C	
Maint: MTIS, M. Lower	10	1C	
MI Dept Environ Quality	P29	1C	
NDM: Library	1*	1C	
NGH: EOF (via EDCC)	22*	3C	
NGH: JPIC (via EDCC)	22*	1C	
NRC: On Site	4A	1C	
NRC: Region III		2C	
NRC: Washington	P16	2C	
Operations Library	5B*	1C	
OSC	1*	1C	
S.S. Office	29*	1C	
Simulator	11	2C	
Site Protective Services	8B	1C	
State of Michigan	P2	1C	
Training Cart 1, T. Ott	11	1C	
Training Cart 2, D. Terry	11	1C	
Training Cart 4, S. Stiger	11	1C	
Training Cart 5, M. McKeel	11	1C	
Training Cart 6, D. Terry	11	1C	
Training Lib:Master Copy	11	1U	
Training Library	11	1C	
TSC	1*	3C	Include 1C Index Only
Unit 1 Control Room	29*	2C	
Unit 2 Control Room	29*	2C	

Transmitted Controlled Document Listing: (1)

Document	Revision	Status	Title
PMP-2080-EPP-112	002	Superceded	PERSONNEL INJURY

Controlled Document Transmittal Receipt and File Acknowledgement:

CONTROLLED DOCUMENTS ONLY

Signature _____

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A045

Please sign and return within 14 calendar days to: C. Cook Nuclear Plant
Nuclear Documents Mgmt (Mail Zone #1) - Document Control
Bridgman, MI. 49106

REVIEW AND APPROVAL TRACKING FORM

Procedure Information:	
Number: <u>PMP 2080-EPP.112</u>	Rev. <u>02</u> Change: <u>0</u>
Title: <u>Personnel Injury</u>	
Category (Select One Only):	
<input type="checkbox"/> Correction (Full Procedure)	<input type="checkbox"/> Change (Full Procedure) with Review of Change Only
<input type="checkbox"/> Correction (Page Substitution)	<input type="checkbox"/> Change (Page Substitution) with Review of Change Only
<input type="checkbox"/> Cancellation	<input type="checkbox"/> New Procedure or Change with Full Review
Supersedes (List superseding procedures): <u>Safety and Health Standard, "Occupational Injury, Illness, and</u> <u>Personal Safety Incident Reporting and Investigation"</u>	
Associated Configuration Item Assessments:	
Change Driver/CDM (Check all that apply):	<input checked="" type="checkbox"/> N/A
Required Reviews:	
Cross-Discipline Reviews:	Programmatic Reviews:
<input type="checkbox"/> Chemistry	<input type="checkbox"/> ALARA
<input type="checkbox"/> Maintenance	<input type="checkbox"/> Bus. S. Proc Grp
<input type="checkbox"/> NDM	<input type="checkbox"/> Component Engineering
<input type="checkbox"/> Operations	<input type="checkbox"/> Design Engineering
<input type="checkbox"/> PA/PV	<input type="checkbox"/> Quality Proc Grp
<input type="checkbox"/> Reg Affairs	<input type="checkbox"/> Environmental
<input type="checkbox"/> RP	<input type="checkbox"/> ISM/T Coordinator
<input checked="" type="checkbox"/> Training	<input type="checkbox"/> Performance Assurance
<input type="checkbox"/> Work Cont.	<input type="checkbox"/> Reactivity Mgmt Team
<input checked="" type="checkbox"/> None Required	<input type="checkbox"/> SPS (Safety & Health)
	<input type="checkbox"/> Surveillance Section
	<input type="checkbox"/> System Engineering
	<input checked="" type="checkbox"/> None Required
<input checked="" type="checkbox"/> Cognizant Org Review: <u>Cindy Shaffer</u>	Date: <u>7/13/02</u>
<input checked="" type="checkbox"/> Technical Review: <u>B. K. Miller</u>	Date: <u>9/26/02</u>
Concurrence:	
<input type="checkbox"/> Ops Mgr Concurrence: <u>N/A</u>	Date: <u>1/1</u>
<input checked="" type="checkbox"/> Owner Concurrence: <u>Cindy Shaffer</u>	Date: <u>7/13/02</u>
Package Check:	
Updated Revision Summary attached?	<input checked="" type="checkbox"/> Yes
10 CFR 50.59 Requirements complete? Tracking No.: <u>2002-1421</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
Implementation Plan developed? (Ref. Step 3.4.18)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
Package Complete: <u>C. Shaffer</u>	Date: <u>9/17/02</u>
Approvals:	
PORC Review Required: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Mtg. No.: <u>27</u>
Administrative Hold Status: <input type="checkbox"/> Released <input type="checkbox"/> Reissued <input checked="" type="checkbox"/> N/A	CR No.: _____
Approval Authority Review/Approval: <u>M. Miller</u>	Date: <u>10/1/02</u>
Expiration Date/Ending Activity: <u>N/A</u>	Effective Date: <u>10/9/02</u>
Periodic Review:	
Periodic Review conducted? (Data Sheet 5 Complete)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Follow-up Actions:	
Commitment Database Updated?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
NDM notified of new records or changes to records that could affect record retention?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A

NDM Use Only	Office Information For Form Tracking Only – Not Part of Form
	<p>This form is derived from the information in PMP-2010-PRC-002, Procedure Correction, Change, and Review, Rev. 9a, Data Sheet 1, Review and Approval Tracking Form.</p> <p align="right">Page <u>1</u> of <u>2</u></p>

REVISION SUMMARY

Number: PMP 2080-EPP.112 Revision: 02 Change: 0
Title: Personnel Injury

Section or Step	Change/Reason For Change
Entire Procedure	Change: Cancellation of procedure. Reason: Safety and Health Standard, "Occupational Injury, Illness, and Industrial Safety Incident Reporting and Investigation", Rev. 0 was issued 7/12/02 to replace this procedure (see also CR 01250021).

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This is a free-form as called out in PMP-2010-PRC-002, Procedure Correction, Change, and Review, Rev. 9a.

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