

CATAWBA NUCLEAR STATION JOB PERFORMANCE MEASURE

JPM 1R1S ADMIN

Calculate Reactor Vessel Head Venting Time

CANDIDATE

EXAMINER

READ TO OPERATOR

DIRECTION TO TRAINEE:

I will explain the initial conditions, and state the task to be performed. All control room steps shall be performed for this JPM, including any required communications. I will provide initiating cues and reports on other actions when directed by you. Ensure you indicate to me when you understand your assigned task. To indicate that you have completed your assigned task return the handout sheet I provided you.

SIMULATOR SETUP

Insert the following malfunctions:

XMT-VV012 (1VVP5090 LOWER CNT AIR TEMP A METER), VALUE=140
XMT-VV013 (1VVP5110 LOWER CNT AIR TEMP B METER), VALUE=140
XMT-VV014 (1VVP5170 LOWER CNT AIR TEMP C METER), VALUE=140
XMT-VV015 (1VVP5190 LOWER CNT AIR TEMP D METER), VALUE=140
IND-VV030 (1MIP5320 CNT TRN A H2 ANAL METER), VALUE=1.5
IND-VV032 (1MIP5330 CNT TRN B H2 ANAL METER), VALUE=1.5
IND-CNT003 (1NSP5070 CNT PRESS METER PI-937 METER), VALUE=3.0
IND-CNT004 (1NSP5060 CNT PRESS METER PI-936 METER), VALUE=3.0
IND-CNT005 (1NSP5050 CNT PRESS METER PI-935 METER), VALUE=3.0
IND-CNT006 (1NSP5040 CNT PRESS METER PI-934 METER), VALUE=3.0
IND-NC036 (1NCP5120 LOOP B HOT LEG W/R PRESS METER PI-405 METER), VALUE=1000
IND-NC037 (1NCP5140 LOOP C HOT LEG W/R PRESS METER PI-403 METER), VALUE=1000

Take digital photographs of the gauges listed above or provide control board mimics from the instructor station.

INITIATING CUE:

A LOCA is in progress on Unit 1. Calculate and record the maximum reactor vessel head venting time per Enclosure 5 of EP/1/A/5000/FR-I.3 (Response to Voids in Reactor Vessel).

Start Time: _____

<p>1 EP/1/A/5000/FR-I.3, Enclosure 5, Step 1</p> <p>Calculate A where $A = 9500 \times \frac{(P + 14.7)}{14.7} \times \frac{492}{(T+460)}$</p> <p>Where: P = Containment pressure (PSIG) T = Lower Containment temperature (°F)</p> <p>STANDARD</p> <p>Calculate A</p> <p>Determined containment pressure to be 3.0 psig to 3.2 psig based on pictures provided.</p> <p>Determine Lower Containment Temperature to be 135 °F - 145 °F based on pictures provided</p> <p>Using 3.0, 135 $A = 9500 \times \frac{(3.0 + 14.7)}{14.7} \times \frac{492}{(135+460)} = 9458.6$</p> <p>Using 3.0, 145 $A = 9500 \times \frac{(3.0 + 14.7)}{14.7} \times \frac{492}{(145+460)} = 9302.3$</p> <p>Using 3.2, 135 $A = 9500 \times \frac{(3.2 + 14.7)}{14.7} \times \frac{492}{(135+460)} = 9565.5$</p> <p>Using 3.2, 145 $A = 9500 \times \frac{(3.2 + 14.7)}{14.7} \times \frac{492}{(145+460)} = 9407.4$</p> <p>Using 3.1, 140 $A = 9500 \times \frac{(3.1 + 14.7)}{14.7} \times \frac{492}{(140+460)} = 9432.8$</p> <p>(A = 9302 to 9566 is acceptable)</p> <p>COMMENTS</p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
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<p>2 EP/1/A/5000/FR-I.3, Enclosure 5, Step 2</p> <p>Calculate B where $B = (3 - H) \times A$</p> <p>Where H = Containment Hydrogen Concentration (%)</p> <p>STANDARD</p> <p>Determine H2 concentration from pictures provided to be between 1.25 and 1.75.</p> <p>Using bounding values of A (9302 to 9566):</p> <p>$B = (3 - 1.25) \times 9566 = 16740.5$</p> <p>$B = (3 - 1.75) \times 9302 = 11627.5$</p> <p>Using middle value of 9483 $B = (3 - 1.5) \times 9483 = 14224.5$</p> <p>(B range of 11627 to 16741 is acceptable)</p> <p>COMMENTS</p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
<p>3 EP/1/A/5000/FR-I.3, Enclosure 5, Step 3</p> <p>Determine C from the curve for the current NC system pressure.</p> <p>STANDARD</p> <p>Determines NC pressure from pictures to be 950 psig to 1050 psig.</p> <p>Reads approximately 3250 SCFM from graph.</p> <p>(range of 3000-3500 SCFM is acceptable)</p> <p>COMMENTS</p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>

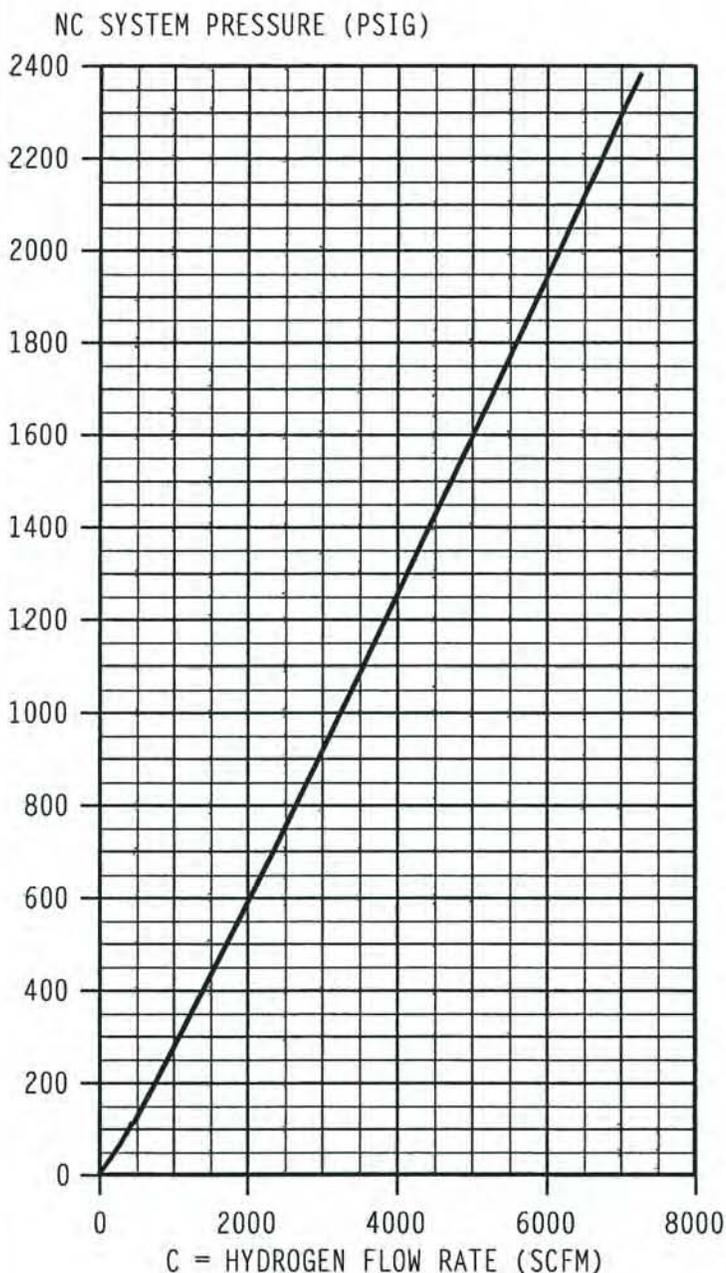
<p>4 EP/1/A/5000/FR-I.3, Enclosure 5, Step 4</p> <p>Calculate T</p> <p>$T = B/C =$ Venting time in minutes</p> <p>STANDARD</p> <p>Using bounding values for B and C:</p> <p>$T = 11627/ 3500 = 3.32$ minutes</p> <p>$T = 16741/ 3000 = 5.58$ minutes</p> <p>(3.3 – (3 minutes, 18 seconds) to 5.60 (5 minutes, 36 seconds) is acceptable)</p> <p>Using actual values: $T = 14224/ 3250 = 4.37$ minutes = 4 minutes, 23 seconds</p> <p>COMMENTS</p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
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TIME STOP: _____

CANDIDATE CUE SHEET
(TO BE RETURNED TO EXAMINER UPON COMPLETION OF TASK)

INITIATING CUE:

A LOCA is in progress on Unit 1. Calculate and record the maximum reactor vessel head venting time per Enclosure 5 of EP/1/A/5000/FR-1.3 (Response to Voids in Reactor Vessel).



CALCULATION OF MAXIMUM
ALLOWABLE VENTING TIME

STEP 1: Calculate A

$$A = 9,500 \times \frac{(P + 14.7)}{14.7} \times \frac{492}{(T + 460)}$$

where: P = Containment pressure (PSIG)

T = Lower containment temperature (deg F)

STEP 2: Calculate B

$$B = (3 - H) \times A$$

where: H = Containment hydrogen concentration (%)

STEP 3: Determine C from the curve for the current NC system pressure.

STEP 4: Calculate T

$$T = B/C = \text{Venting time in minutes}$$

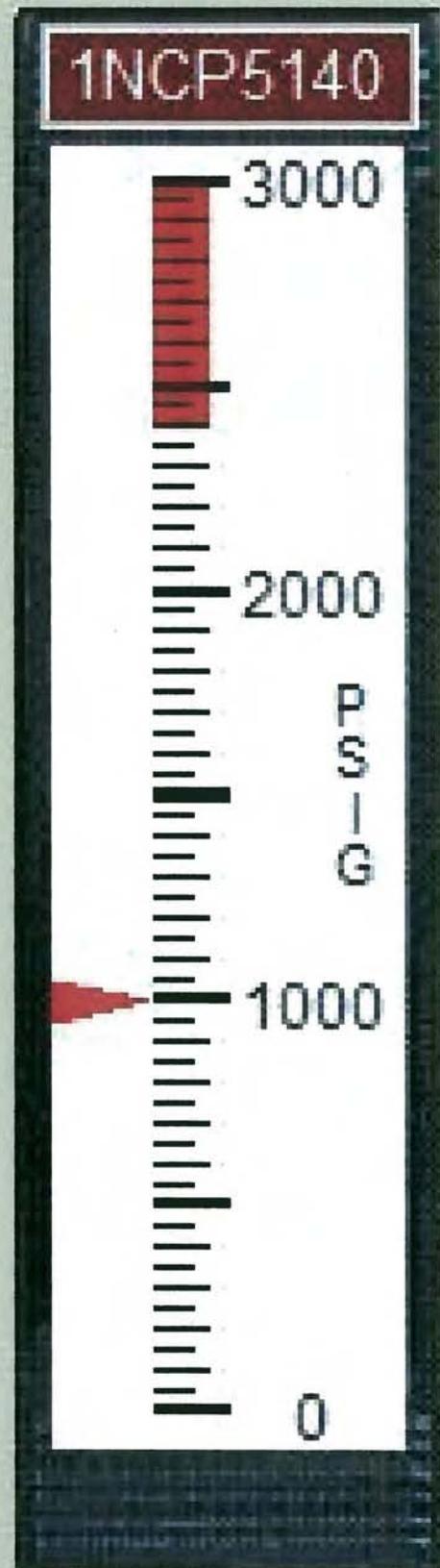
NC pressure _____ PSIG. Maximum allowable venting time _____ minutes.

LOOP B
HOT LEG
W/R PRESS



PAM CH1

LOOP C
HOT LEG
W/R PRESS



PAM CH4

CONTAINMENT TRN A

CONTAINMENT TRN B

SUMP LVL

H2 ANAL

PRESS

SUMP LVL

H2 ANAL

PRESS

1NIP5260

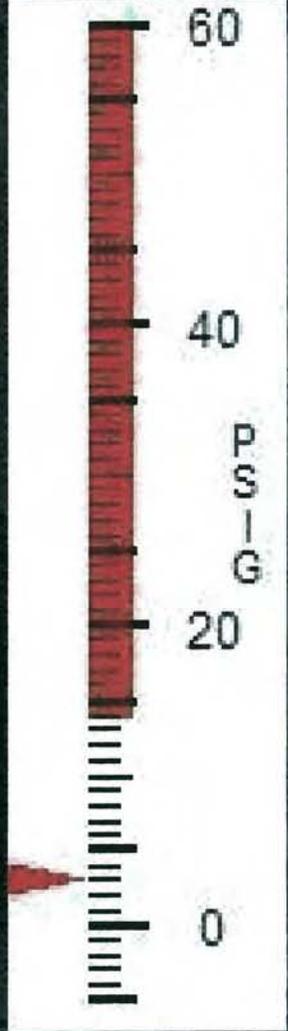
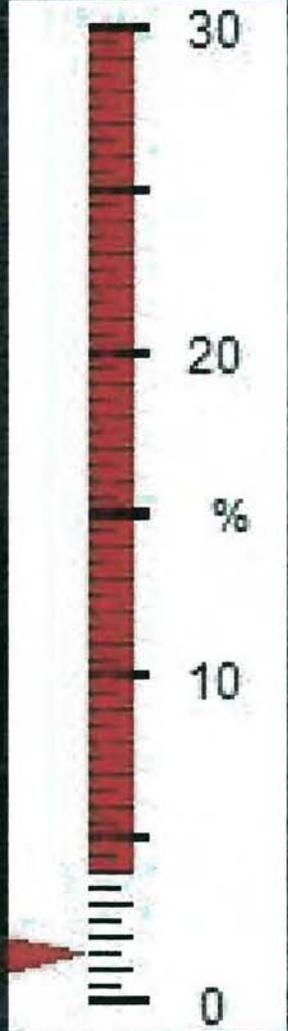
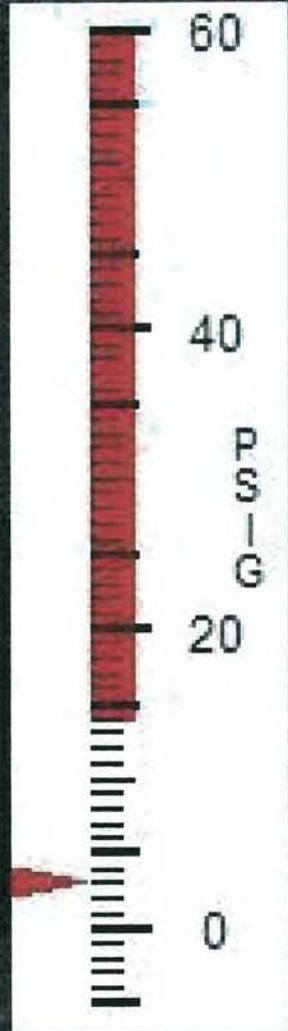
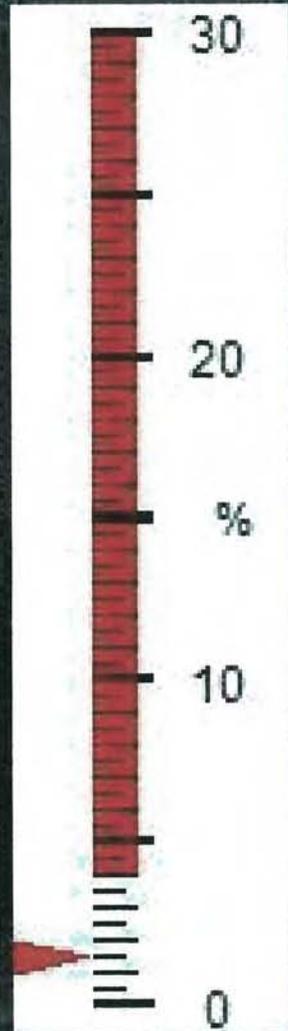
1MIP5320

1NSP5370

1NIP5270

1MIP5330

1NSP5380



PAM

PAM

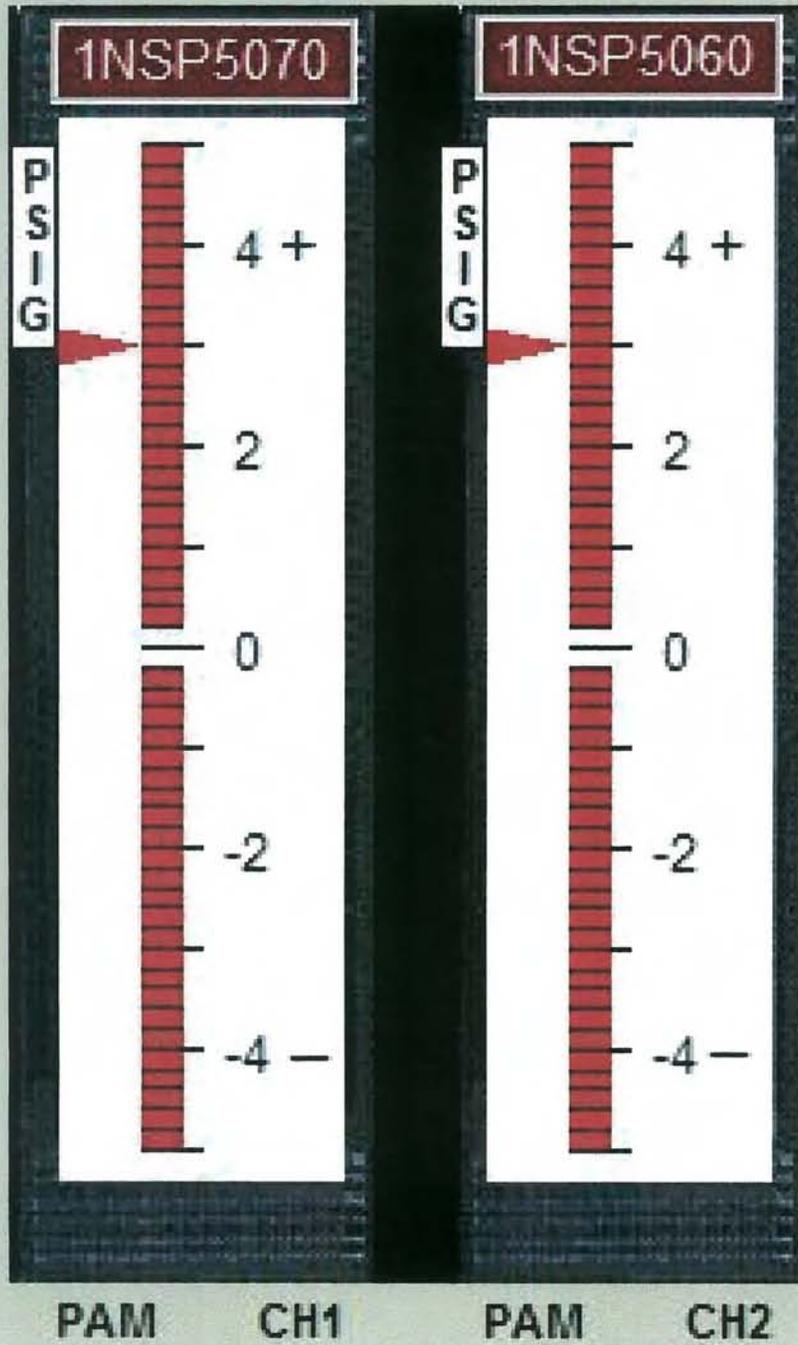
PAM

PAM

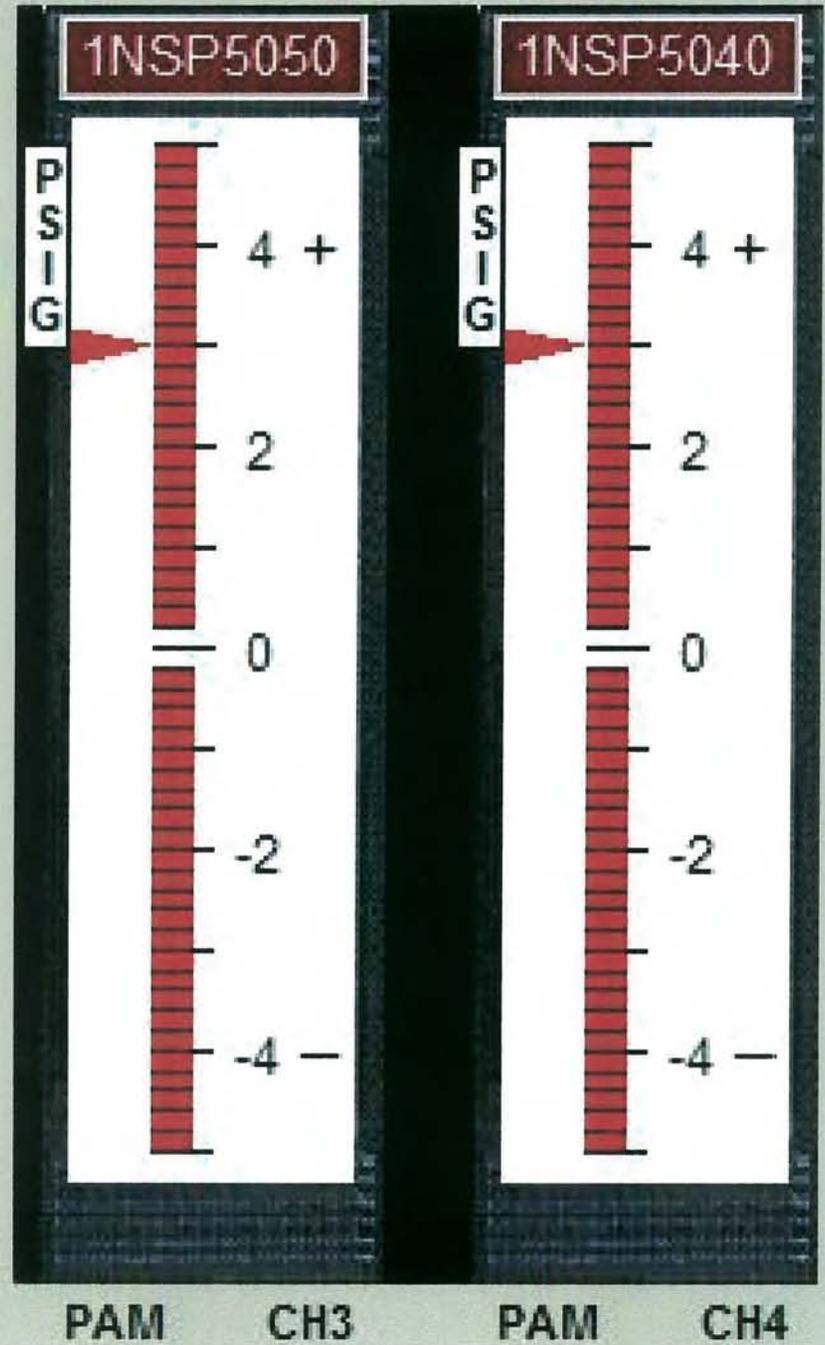
PAM

PAM

CONT PRESS



CONT PRESS

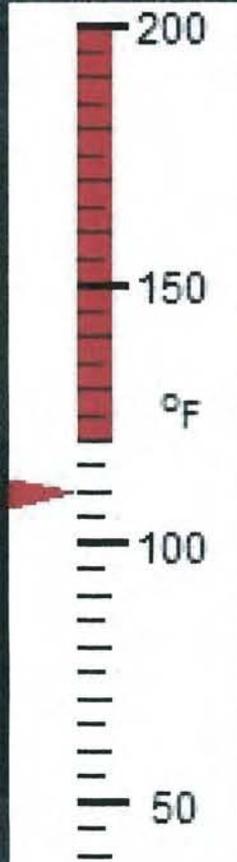


INCORE
INST RM
TEMP A

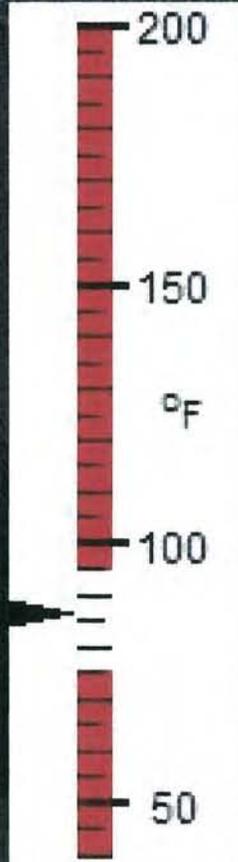
UPPER CONT AIR
TEMP
A B

LOWER CONT AIR TEMP
A B C D

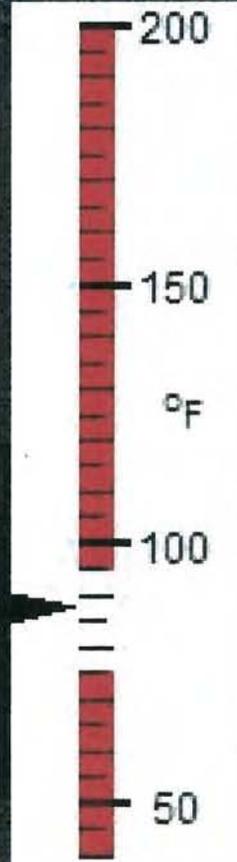
1VVP5080



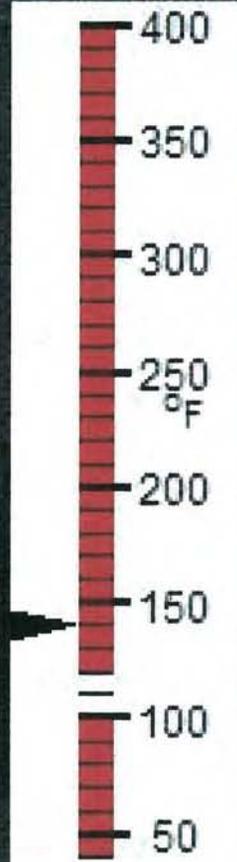
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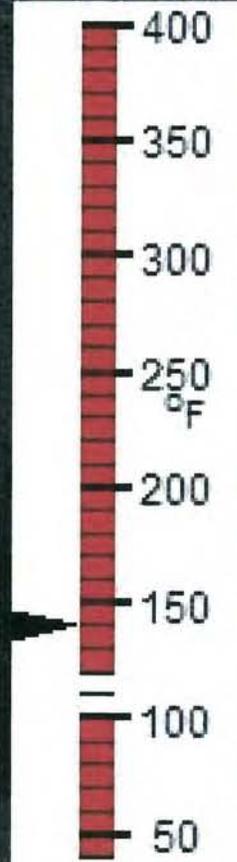
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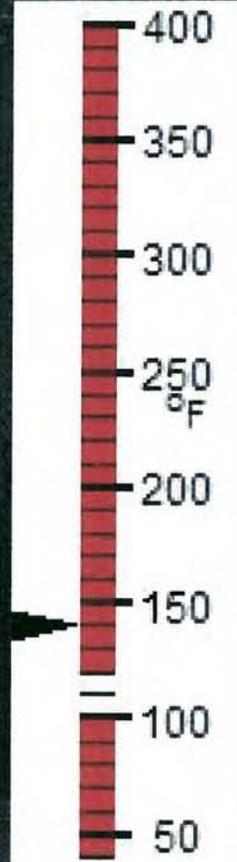
1VVP5090



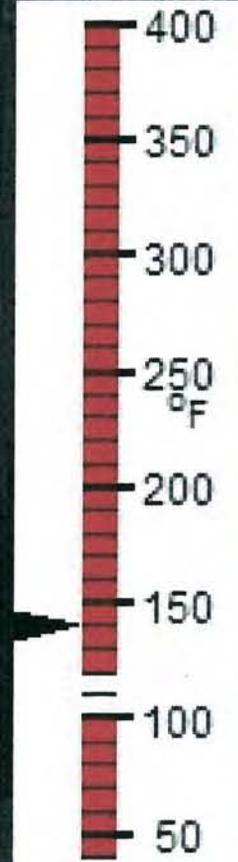
1VVP5110



1VVP5170



1VVP5190



CATAWBA NUCLEAR STATION JOB PERFORMANCE MEASURE

JPM 2R2S ADMIN

**Determine the amount of boric acid required to get
Control Bank D above the Rod Insertion Limits**

CANDIDATE _____

EXAMINER _____

READ TO OPERATOR

DIRECTION TO TRAINEE:

I will explain the initial conditions, and state the task to be performed. All control room steps shall be performed for this JPM, including any required communications. I will provide initiating cues and reports on other actions when directed by you. Ensure you indicate to me when you understand your assigned task. To indicate that you have completed your assigned task return the handout sheet I provided you.

INITIAL CONDITIONS:

Unit 1 has been operating at 100% power for the past 15 days.
Core burnup is 25 EFPD.
Boron concentration is 1360 ppm

CURRENT CONDITIONS:

- At 1030 today, Unit 1 CF Pump 1A tripped. The crew entered AP/1/A/5500/003, Load Rejection.
- At 1040, plant stabilization is in progress with the following conditions:
 - Reactor power is 56%
 - No dilutions are in progress
 - 1AD-2, B/9 "Control Rod Bank Lo-Lo Limit" is LIT
 - Control rods are in manual
 - Control Bank Positions:
 - A = 226 steps
 - B = 226 steps
 - C = 110 steps
 - D = 0 steps
- The OAC is unavailable

INITIATING CUE:

Perform step 1.b of Enclosure 3, Rod Insertion Limit Boration, of AP/1/A/5500/003, Load Rejection.

Without considering the effects of the change in Xenon due to the runback, calculate the MINIMUM gallons of boric acid addition required to meet Rod Insertion Limits (if any).

Start Time: _____

<p>1 AP/1/5500/003, Enclosure 3, Step 1.b</p> <p>CAUTION: Failure to initiate boration within one hour of exceeding rod insertion limits may violate Tech Spec 3.1.6.</p> <p>NOTE: OAC point C1L4409 (Ctrl Bank Tech Spec Insertion Lmt Reached) and ROD Book (Section 2.2) provide rod insertion limit indication.</p> <p>b. Borate NC system as required, to restore rods above insertion limits.</p> <p><u>STANDARD</u></p> <p>Student reads the caution and note in step 1.b and determines that ROD Book section 2.2 is needed.</p> <p><u>EXAMINER NOTE:</u> The procedure says to use Section 2.2 of the ROD book; however some students may use Figure 3 of the COLR. This is equally acceptable. If the student uses the COLR, the RIL could be based on the calculation included with the graph. If they use the ROD Book, it will be based solely on reading a graph.</p> <p>If COLR is used: $2.3 \times 56 - 69 = 59.8$ steps on Bank D.</p> <p>If Rod Book Section 2.2 is used, range of 58-62 steps on Bank D is acceptable.</p> <p><u>COMMENTS</u></p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
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<p>2 AP/1/5500/003, Enclosure 3, Step 1.b</p> <p>b. Borate NC system as required, to restore rods above insertion limits.</p> <p><u>STANDARD</u></p> <p>Using 60 steps withdrawn on Bank D:</p> <p>Uses R.O.D. book section 5.6.3 pg 2 of 6 for IRW HFP, Eq Xe, Eq Sm, and uses data from the 4 EFPD column (0-50 EFPD), and determines:</p> <ul style="list-style-type: none"> • Bank C @ 110 step, rods are worth 1212 pcm • Bank D 58-62 steps, rods are worth 653 to 685 pcm for a difference of -559 to -527 pcm of reactivity. <p>Uses R.O.D. book section 5.5 for HFP ARO and determines differential boron worth is -6.04 pcm/ppmb.</p> <ul style="list-style-type: none"> • Calculates $-559/-6.04 = 93$ ppm • $-527/-6.04 = 87$ ppm (87-93 ppm is acceptable) <p>Calculates final required boron concentration:</p> <ul style="list-style-type: none"> • 1360 ppm current [B] + 87 ppm = 1447 ppm final [B] • 1360 ppm current [B] + 93 ppm = 1453 ppm final [B] <p>(1447-1453 ppm is acceptable)</p> <p>Uses table 4.1 in the R.O.D. book for Hot RCS (Modes 1,2 and 3) to determine the gallons of boric acid to go from 1360 to the range of 1447-1453 ppm</p> <p>1360 ppm to 1440 ppm = 888 gals</p> <p>1440 to 1447 = $(224/20)*7 = 78.4$</p> <p>78.4+888 = <u>966.4</u></p> <p>1440 to 1453 = $(224/20)*13 = 145.6$</p> <p>145.6+888 = <u>1033.6</u></p> <p>(966 - 1034) gallons is acceptable</p> <p><u>COMMENTS</u></p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
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TIME STOP: _____

**CANDIDATE CUE SHEET
(TO BE RETURNED TO EXAMINER UPON COMPLETION OF TASK)**

INITIAL CONDITIONS:

Unit 1 has been operating at 100% power for the past 15 days.
Core burnup is 25 EFPD.
Boron concentration is 1360 ppm

CURRENT CONDITIONS:

- At 1030 today, Unit 1 CF Pump 1A tripped. The crew entered AP/1/A/5500/003, Load Rejection.

- At 1040, plant stabilization is in progress with the following conditions:
 - Reactor power is 56%
 - No dilutions are in progress
 - 1AD-2, B/9 "Control Rod Bank Lo-Lo Limit" is LIT
 - Control rods are in manual
 - Control Bank Positions:
 - A = 226 steps
 - B = 226 steps
 - C = 110 steps
 - D = 0 steps

- The OAC is unavailable

INITIATING CUE:

Perform step 1.b of Enclosure 3, Rod Insertion Limit Boration, of AP/1/A/5500/003, Load Rejection.

Without considering the effects of the change in Xenon due to the runback, calculate the MINIMUM gallons of boric acid addition required to meet Rod Insertion Limits (if any).

1. **IF the control rods cannot be maintained above the rod insertion limits, THEN:**

- a. Stop any dilutions in progress.

CAUTION Failure to initiate boration within one hour of exceeding rod insertion limits may violate Tech Spec 3.1.6.

NOTE OAC point C1L4409 (Ctrl Bank Tech Spec Insertion Lmt Reached) and R.O.D Book (Section 2.2) provide rod insertion limit indication.

- b. Borate NC system as required, to restore rods above insertion limits.
- c. Ensure compliance with Tech Spec 3.1.6 (Control Bank Insertion Limits).



**CANDIDATE CUE SHEET
(TO BE RETURNED TO EXAMINER UPON COMPLETION OF TASK)**

INITIAL CONDITIONS:

Unit 2 is in Mode 1. You were an extra operator on shift and assisting the Operation Test Group in a scheduled surveillance test of the 2B Emergency Diesel Generator. The test was conducted using procedure PT/2/A/4350/002B (D/G Operability Test). Prior to completing the scheduled surveillance test, the 2B D/G tripped due to a malfunction of the low-low lube oil pressure switch at 0905. PT/2/A/4350/002B has been completed up to step 12.65.

INITIATING CUE:

Given a copy of PT/2/A/4350/002B (D/G Operability Test):

Classify the test and fill in all available Diesel Generator Logbook data on Attachments 10.1 and 10.2 of OMP 2-28 and submit to the CRS for review.

Attachment 10.1
Diesel Generator Log Sheet

DIESEL GENERATOR _____ RECORDED BY _____

START ATTEMPT NUMBER _____ DATE _____

PROCEDURE USED: REASON FOR D/G OPERATION:

- PT/1(2)/A/4350/002A(B) (D/G Operability Test)
OP/1(2)/A/6350/002 (D/G Operation)
Other, Specify:
Scheduled Surveillance
Opposite Train Inoperable
Functional Verification (Maintenance)
Other, Specify:

TYPE OF START:

- Turbo Prelube
Non-Prelube

TEST CLASSIFICATION:

- (See OMP 2-28, Sect. 6.)
VALID SUCCESS
Time required to achieve a frequency of >= 57 Hz
Time required to achieve a voltage of >= 3950 volts
Time Load >= 2875 KW
Steady state voltage and frequency of 3950-4580 volts and 58.8 to 61.2 Hz.
INVALID TEST
INVALID FAILURE
VALID FAILURE

OPERATING DATA:

D/G Engine Start Date/Time _____

D/G Engine Shutdown Date/Time _____

Run Time (hrs) _____

*Total D/G Engine Yearly Run Time _____ Hrs.

Explain in detail the reason D/G operation was not a VALID SUCCESS/failed to meet acceptance criteria.

Four horizontal lines for handwritten explanation.

MCE ROTATING EQUIPMENT

SUPERVISOR OR DESIGNEE _____ Required if Valid or Invalid Failure

PIP # (Refer to 8.1.K for PIP applicability) _____

REVIEW (CRS) _____

ROUTE COPY to MCE Rotating Equipment Supervisor or Designee

* Notify Environmental Management if Total Run Time exceeds 260 hours per calendar year for any D/G.

Duke Energy
Catawba Nuclear Station
Diesel Generator 2B Operability Test

Procedure No.
PT/2/A/4350/002 B

Revision No.
091

Electronic Reference No.
CN005GIA

Continuous Use

PERFORMANCE

***** UNCONTROLLED FOR PRINT *****

(ISSUED) - PDF Format

Diesel Generator 2B Operability Test

1. Purpose

The purpose of this procedure is to verify the operability of Diesel Generator 2B.

2. References

2.1 Catawba Technical Specifications:

- 3.8.1
- 3.8.2
- 3.8.3

2.2 Catawba Technical Specifications Surveillance Requirements:

- SR 3.8.1.2
- SR 3.8.1.3
- SR 3.8.1.4
- SR 3.8.1.5
- SR 3.8.1.6
- SR 3.8.1.7
- SR 3.8.3.1
- SR 3.8.3.2
- SR 3.8.3.4

2.3 Catawba Selected Licensee Commitments and Testing Requirements SLC 16.8-5, TR 16.8-5-1

2.4 OP/2/A/6350/002 (Diesel Generator Operation)

2.5 Duke commitment (H. B. Tucker to H. R. Denton - July 16, 1984)

2.6 Design Review Quality Revalidation Program

3. Time Required

- 3.1 Manpower
 - 3.1.1 Two operators
 - 3.1.2 IAE Support
- 3.2 Time - 6 to 10 hours {PIP 97-2400}
- 3.3 Frequency - This PT includes the TS Surveillance Requirements referenced in Steps 2.2 and 2.3 and should be performed in accordance with the frequencies specified in those Surveillance Requirements

4. Prerequisite Tests

None

5. Test Equipment

- ✓5.1 Two calibrated stop watches (if being used to record start data)
- ✓5.2 Indicator cock T-handle wrench
- ✓5.3 Manual test start key #757 (for manual starts only)
- ✓5.4 Fuel oil catchment container
- ✓5.5 If an oil sample is required:
 - Lube oil sample bottles properly labeled with MSDS labels.
 - Oil sampling rig (available in OTG office).
 - Waste Oil Container
- ✓5.6 Infrared temperature detector

6. Limits and Precautions

- ✓ 6.1 Maximum exhaust temperature on turbochargers is 1200°F.
- ✓ 6.2 Do **NOT** operate the D/G at no load or light loads for long periods of time to prevent buildup of carbon and sludge in the engine.
- ✓ 6.3 Whenever the diesel engine is started, it should be loaded and run until temperatures are stabilized to eliminate carbon buildup and sludge buildup.
- ✓ 6.4 Starting a D/G will trip the FD Recirc Pump if it is running. Plans should be made to restart the pump if required after the D/G is secured (e.g. Open Item).
- ✓ 6.5 If loading the D/G on to an isolated bus (D/G only on the bus), the voltage control button has no effect on power factor, only voltage.
- ✓ 6.6 Normal D/G lube oil usage is < 1 gal/hr.
- ✓ 6.7 A two minute wait is necessary after D/G shutdown before attempting a restart to allow the pneumatic controls to reset.
- ✓ 6.8 If a step calls for a parameter to be taken on the scanner or chart recorder, and the same parameter is also measured in the 2B D/G Alarm Monitor Panel (2ELMC0030), the Alarm Monitor Panel may be used to satisfy the intent of the step.
- ✓ 6.9 This surveillance shall be performed on only one D/G at a time
- ✓ 6.10 When an inoperable D/G is aligned to supply 1EMXG, A-Train of RN, VA, and VC/YC is inoperable on both Units and the 1A D/G will also be inoperable due to A RN loop being inoperable. When an inoperable D/G is aligned to supply 2EMXH, B-Train of RN, VA, and VC/YC is inoperable on both Units and the 1B D/G will also be inoperable due to B RN loop being inoperable. {PIP 97-2009}
- ✓ 6.11 Starting an RN Pump while its associated D/G is paralleled to the grid may result in an overcurrent trip of the D/G breaker. {PIP 99-1648}
- ✓ 6.12 If loading the D/G onto an isolated bus (D/G only on the bus), loading one or more pumps onto the bus helps to stabilize the D/G.
- ✓ 6.13 When paralleling a D/G to the Essential Switchgear, the in-service KC and/or NV Pumps should be aligned to the opposite train to prevent the simultaneous loss of NC Pump Seal Injection and Thermal Barrier Cooling if a D/G failure results in the loss of the Essential Switchgear. If both KC and NV in-service Pumps are powered from the same bus as the D/G being tested, KC should be swapped to the opposite train. {PIP 99-3510}

- ✓6.14 The Gould TA11 Chart Recorder is programmed to store the previous 12 minutes of run data and 4 minutes of post trigger data any time the "Power" switch is "ON" and the recorder is armed. If the D/G trips or a problem occurs, depress the "Trig" push button to store the previous 12 minutes of data and the following 4 minutes of data. Do **NOT** turn the "Power" switch "OFF". Contact IAE to download the data to assist in troubleshooting.
- ✓6.15 Do **NOT** operate D/G parallel to the bus during inclement weather (e.g. lightning or heavy winds) when run can be postponed to prevent jeopardizing operability.

7. Required Unit Status

None

8. Prerequisite System Conditions

N/A/T

- 8.1 **IF** an oil sample is required, obtain the oil sampling rig from the Service Building Office Area.
- 8.2 Ensure the following checklists have been completed per OP/2/A/6350/002 (Diesel Generator Operation):
- 8.2.1 D/G 2B Checklist for ES Actuation
- 8.2.2 D/G 2B Separate Verification Checklist for ES Actuation.
- 8.3 Verify D/G 2A is shutdown.

NOTE: The following step is met if both VG Tanks are being pressurized by a single compressor per the applicable Crosstie Enclosure.

- 8.4 Verify the D/G Starting Air System (VG) is in normal alignment per OP/2/A/6350/002 (Diesel Generator Operation).
- 8.5 Determine from the Daily Operating Schedule if a 5 hour run (required every 6 months) at full load is required. {PIP 97-2400}

- Yes
- No

NOTE: When an inoperable D/G is aligned to supply 1EMXG, A-Train of RN, VA, and VC/YC is inoperable on both Units and the 1A D/G will also be inoperable due to A RN loop being inoperable. When an inoperable D/G is aligned to supply 2EMXH, B-Train of RN, VA, and VC/YC is inoperable on both Units and the 1B D/G will also be inoperable due to B RN loop being inoperable. {PIP 97-2009}

N/A/B
SRO

8.6 **IF** all of the following are true, perform a Tech Spec assessment for the D/G inoperability in preparation for barring and rolling the D/G with air: {PIP 96-1185}

D/G 2B has been shutdown for greater than 4 hours.

N/A/B D/G 2B has **NOT** been barred and rolled on air within the last 12 hours. {PIP 00-324}

D/G 2A is operable.

Assess the following:

- Opposite train safety related systems, components, and devices which depend on the D/G.
- Compliance with TS 3.7.8 (Nuclear Service Water System).
- Nuclear Service Water System alignment.
- Opposite Unit D/G status.
- Shared Motor Control Center alignments.
- VC/YC System alignment.
- Available Power Source Operability PT requirements.

8.7 Verify standby conditions exist: {PIP 96-1185}

T 8.7.1 Verify LD and KD temperatures 120°-190°F. {PIP 96-1321}

T 8.7.2 **IF** the D/G has been loaded within the previous 4 hours, verify the D/G has been shutdown 1 hour for every hour it was loaded up to a maximum of 4 hours.

9. Test Method

- 9.1 After the D/G starts it will be paralleled to the grid and loaded to ≥ 5600 but ≤ 5750 KW for a minimum of one hour.
- 9.2 At least once every 6 months the D/G will be loaded to ≥ 5600 but ≤ 5750 KW for a minimum of 5 hours. {PIP 97-2400}
- 9.3 At least once every 18 months the D/G will be loaded to ≥ 5600 but ≤ 5750 KW at a power factor ≤ 0.9 for ≥ 24 hours. {PIP 00-92}
- 9.4 The D/G operating parameters shall be recorded on Enclosure 13.3 (D/G Operating Parameter Data).

10. Data Required

Complete the following enclosures as required:

- Enclosure 13.1 (Start Data)
- Enclosure 13.2 (Shutdown Data)
- Enclosure 13.3 (D/G Operating Parameter Data)
- Enclosure 13.4 (D/G Leak Identification Sheet)

11. Acceptance Criteria

- ✓11.1 The total fuel oil volume in Fuel Oil Storage Tanks 2B1 and 2B2 combined is greater than or equal to 77,100 gallons. (SR 3.8.3.1)
- ✓11.2 The fuel oil in Fuel Oil Day Tank 2B is ≥ 1.96 psig with the level being maintained by one of the following valves: {PIP 96-0535} (SR 3.8.1.4 & 3.8.1.6)
 - 2FD-62 (D/G Eng Fuel Oil Day Tank 2B Fill)
 - 2FD-63 (D/G Eng Fuel Oil Day Tank 2B Fill Vlv Byp).

✓ NOTE: 1. The acceptance ranges specified on Enclosure 13.1 (Start Data) for frequency and voltage are 58.8 – 61.2 Hz and 3950 – 4580 V due to more restrictive Surveillance Requirements for the D/G.

2. Voltage and frequency shall be verified to remain in the required range within the allowable time.

- ✓11.3 D/G 2B starts from standby condition and achieves a voltage ≥ 3950 volts and a frequency ≥ 57 Hz in ≤ 11 seconds. (SR 3.8.1.7)
- ✓11.4 D/G 2B steady state voltage and frequency shall be ≥ 3950 volts and ≤ 4580 volts and ≥ 58.8 Hz and ≤ 61.2 Hz. (SR 3.8.1.2 & 3.8.1.7)
- ✓11.5 Following a successful start (meeting Acceptance Criteria 11.3) D/G 2B is synchronized and loaded to ≥ 5600 KW and ≤ 5750 KW and operates for ≥ 60 minutes. (SR 3.8.1.3)
- ✓11.6 Diesel Fuel Oil Day Tank 2B has been checked for accumulated water and if found, water has been removed. (SR 3.8.1.5 & SLC 16.8-5, TR 16.8-5-1)
- ✓11.7 VG tanks 2B1 & 2B2 indicate a pressure ≥ 210 psig. (SR 3.8.3.4)
- ✓11.8 LD tank inventory ≥ 400 gals (76%). (SR 3.8.3.2)
- ✓11.9 If performing the 24-hour run, D/G 2B is synchronized and loaded to ≥ 5600 KW and ≤ 5750 KW at a power factor ≤ 0.9 and operates for ≥ 24 hours. (SR 3.8.1.14)

12. Procedure

- NOTE:**
- Additional information on the Gould TA11 Chart Recorder may be obtained from the Owner's Manual, CNM-1301.00-0143.
 - Steps 12.1, 12.14, 12.19, 12.20, 12.21, and 12.55 may be N/A'd if stop watches and meters are being used instead of the Gould TA11 Chart Recorder. If the Gould TA11 Chart Recorder is available, it should be used to obtain the start data.

I 12.1 Perform a Gould TA11 Chart Recorder checkout as follows:

- 12.1.1 Raise Gould TA11 Chart Recorder display panel to allow access to the control panel.
- 12.1.2 Turn the "Power" switch "ON".
- 12.1.3 Allow at least 2 minutes for the recorder to boot up.

NOTE: If any of the indications listed in the following step are **NOT** illuminated, the associated push button may be depressed to illuminate it. All buttons not specified should be DARK.

12.1.4 Ensure the following are illuminated:

- "ID"
- 
- "Text"
- Chart Speed "25"
- 12.1.5 Depress the Chart On/Off "" push button (top right on the Chart Speed Panel).
- 12.1.6 Verify the paper chart drive feeds the paper.
- 12.1.7 Depress the Chart On/Off "" push button (top right on the Chart Speed Panel) to stop the paper advance.

NOTE: When less than 50 sheets of paper remain in the recorder, "Alarm" will appear on the touch screen in place of "Page:". Touching the touch screen will result in a "Paper Low" alarm. When the "Paper Low" alarm is in, the number of sheets may be determined by opening the paper drawer and counting the remaining sheets or by viewing the red number on the paper. The red number on the paper corresponds to the number of remaining sheets.

N/A/6

12.1.8 **IF** there are less than 10 sheets, replace the paper as follows:

- Turn the "Power" switch off.
- Lift the "Load Paper" lever.
- Open the door.
- Remove the metal shelf.
- Remove the unused paper.
- Install the new paper with the highest red number on the top left side.
- Insert the paper under the rubber roller.
- Install the metal shelf.
- Position the "Load Paper" lever down.
- Close the door.
- Turn the "Power" switch on.

NOTE: At least two minutes should be allowed for the recorder to boot up.

- Ensure the following:
 - "ID"
 - 
 - "Text"
 - Chart Speed "25"

- Depress Form Feed "" push button for 3 seconds and verify paper advances properly and gridlines are printed.
- Reset the paper counter on the touch screen as follows:
 - Touch "System".
 - Touch "Page #".
 - Touch "Key".
 - Enter the number of the last page of paper exiting Recorder.
 - Touch "Enter".
 - Verify "Page:" (upper right on touch screen) is value entered.
 - Touch "Exit".

✓ **NOTE:** Additional information on the D/Gs "Westronics DDR10" Chart Recorder may be obtained from the Owner's Manual, CNM-1346.03-0041.

- T 12.2 **IF** the Chart Recorder on Diesel Generator Control Panel 2B (2DGCPB) is **NOT** in service, turn it on as follows:
- 12.2.1 Depress the "PRINTER OFF/ON" key.
 - 12.2.2 **WHEN** "PRINTER ON ?" appears on the display, depress the "ACCEPT/YES" button on the arrow keypad.
 - 12.2.3 Date, time and initial chart recorder to indicate when recorder was placed in service.
- T 12.3 **IF** it is desired to have a continual visual scan of the points monitored by the chart recorder, perform the following:
- 12.3.1 Depress the "DISP" pushbutton.
 - 12.3.2 **WHEN** "POINT ?" appears on the display, depress "01" on the arrow keypad.
 - 12.3.3 **WHEN** "01" appears on the display, press "ENTER" on the key directly below the arrow keypad.
 - 12.3.4 **WHEN** the point value appears on the display, depress "AUTO" on the arrow keypad.

12.4 Perform the following:

- † • Perform the following to test the D/G Engine Control Panel annunciators:
- Notify the Control Room SRO that 2AD-11, E/7 "D/G B PANEL TROUBLE" will be received.
 - Test annunciators on Diesel Engine Control Panel 2B (2DECPB) by depressing the "TEST" pushbutton.
 - Verify all annunciators on Diesel Engine Control Panel 2B (2DECPB) test satisfactorily.
 - Acknowledge annunciators on Diesel Engine Control Panel 2B (2DECPB) by depressing the "ACK" pushbutton.
 - Reset annunciators on Diesel Engine Control Panel 2B (2DECPB) by depressing the "RESET" pushbutton.
- † • Verify jacket water inlet temperature is 120 - 190°F per one of the following: {PIP 97-2085, 96-1321}
- Channel 17 data.
- OR
- IF** Channel 17 data is out of range, use a calibrated temperature detector to read temperatures of the KD supply and discharge piping near the engine flanges.
IAE instrument # _____
- † • Verify lube oil inlet temperature is 120 - 190°F per one of the following: {PIP 97-2085, 96-1321}
- Channel 19 data.
- OR
- IF** Channel 19 data is out of range, use a calibrated temperature detector to read the temperature of the LD piping at the prelube strainer inlet to D/G 2B.
IAE instrument # _____
- † • Verify D/G 2B Annunciator Panel, D/3 "LOW LEVEL JACKET WATER" is dark.
- † • Record KD Standpipe Level (prestart check) (2KDLG5270) in Enclosure 13.2 (Shutdown Data).

T • Verify the "Diesel Generator Fuel Oil Booster Pump 2B Starter" breaker is off.

T • Record LD Pre-Lube Filter D/P (prestart check) (2LDPG5360) (2LDPG5370) in Enclosure 13.2 (Shutdown Data).

T • Verify the Diesel Room Sump Pumps are in "AUTO":

2B1

2B2

N/A/T

12.5 **IF** all of the following are true, bar and roll D/G with air per OP/2/A/6350/002 (Diesel Generator Operation): {PIP 96-1185}

D/G 2B has been shutdown for greater than 4 hours.

D/G 2B has **NOT** been barred and rolled on air within the last 12 hours. {PIP 00-324}

D/G 2A is operable.

Tech Spec assessment will allow D/G 2B inoperability.

NOTE: The following will ensure forward flow is verified through each LD Strainer check valve every 18 months as required per the current IST testing requirements. {PIP C-05-0030}

N/A/T

12.6 **IF** this is the first start of D/G 2B in the month of March, swap D/G 2B lube oil strainers per OP/2/A/6350/002 (Diesel Generator Operation).

Lube Oil Strainer placed in service _____

T 12.7 Verify the lube oil strainer discharge check valves do **NOT** indicate back leakage as follows: {PIP 00-3598}

12.7.1 Measure and record the temperature of the piping approximately 6" upstream and downstream of each of the following:

2LD-47 (2B D/G Eng Lube Oil Strainer 2B1 Check)

Upstream 125 °F Downstream 137 °F

2LD-48 (2B D/G Eng Lube Oil Strainer 2B2 Check)

Upstream 126 °F Downstream 138 °F

12.7.2 Verify the delta T across each is $> 5^{\circ}\text{F}$.

2LD-47 delta T 12 $^{\circ}\text{F}$

2LD-48 delta T 12 $^{\circ}\text{F}$

N/A/T

12.7.3 **IF** the delta T across 2LD-47 **OR** 2LD-48 is $\leq 5^{\circ}\text{F}$, contact MSE for an operability determination.

Person notified _____

N/A/T

12.7.4 **IF** the delta T across either valve is $\leq 5^{\circ}\text{F}$, initiate a PIP for tracking.

T

12.8 **IF** Step 12.5 was **NOT** performed, verify the Fuel Pump Linkage Auto Shutdown Cylinder Shaft is retracted.

T

12.9 Perform the following:

Verify 2B1 and 2B2 VG Compressors maintain VG Tank pressure at 235 - 255 psig.

Verify "CONTROL AIR PRESS" on 2DECPB is 58 - 62 psig.

Close 2VN-2 (2B D/G Exhaust Silencer Drain) (DB-559, BB-75).

T

12.10 Perform the following at the Alarm Monitor Panel (2ELMC0030):

~~12.10.1~~ Depress and hold the "Alarm Ack" button for 1 second.

~~12.10.2~~ Verify that any "A" or "B" alarm lights that were flashing are now lit solid.

CAUTION: If the D/G run is aborted prior to completion of Step 12.42, the Unit/WCC SRO shall be immediately notified and a determination of operability made. Any subsequent restart attempts shall only be performed after reverifying that Steps 12.1 through 12.10 are valid.

T

12.11 Direct the Control Room Operator to transfer starting control to the local control panel by placing the "D/G 2B Ctrl Location" Switch on 2MC11 in the "LOCAL" position.

T

12.12 Have the Control Room Operator verify 2SI-15, A/4 "2ETB INCOMING BKRS CONTROL LOCAL" is lit.

✓ **CAUTION:** The "Turbo Oil Sol Vlv" should **NOT** be open for more than 5 minutes to prevent oil overflowing from the turbocharger bearing to the exhaust manifold potentially causing a turbocharger fire.

✓ **NOTE:**

- The "Turbo Oil Sol Vlv" will automatically close at 95% D/G speed
- The following step will result in D/G 2B Annunciator Panel, B/6 "TURBO OIL SOL VLV OPEN".

† 12.13 3-5 minutes prior to engine start, place "Turbo Oil Sol Vlv" in the "OPEN" position.
Record time 0815

✓ **NOTE:** The Gould TA11 Chart Recorder will be armed and started prior to the D/G start. The actual D/G start (VG Starting Air Valves opening) will mark the exact start time on the chart paper.

† 12.14 Approximately 10 seconds prior to initiating a D/G start, perform the following to arm the Gould TA11 Chart Recorder:

- ✓ 12.14.1 Depress "Arm" on the Memory Panel (once only) and verify that it illuminates.
- ✓ 12.14.2 Depress the Chart On/Off "" push button (top right on Chart speed Panel).
- ✓ 12.14.3 Verify gridlines are printing on the paper.

N/A/T 12.15 **IF** using stop watches to obtain start data, refer to guidance provided on Enclosure 13.1 (Start Data).

N/A/T
OTG 12.16 **IF** starting D/G 2B for Aux Safeguards Testing, start D/G 2B per PT/2/A/4200/009A (Auxiliary Safeguards Test Cabinet Periodic Test) to simulate an emergency signal.

† 12.17 **IF** performing a manual start, start D/G 2B by placing the key in the "Manual Test Start" switch and turning to the "START" position.

† 12.18 Verify D/G 2B starts.
Record time 0820

N/A/T 12.19 **IF** the Gould TA11 Chart Recorder paper jams or stops advancing such that the start data is **NOT** printed, obtain a printout of the start data as follows:

- Clear the paper jam
- Depress "Trig"
- Depress "Play"

T 12.20 Approximately 20 seconds following the start, depress the Gould TA11 Chart Recorder Chart On/Off "" push button (top right on the Chart Speed Panel) to stop the paper.

NOTE: If the D/G trips or a problem occurs during the start attempt, do **NOT** perform step 12.21 and do **NOT** turn the Gould TA11 Chart Recorder "Power" switch "OFF". Performance of Step 12.21 will clear the memory stored for the start attempt.

T 12.21 **IF** no problems were encountered during the start, rearm the Gould TA11 Chart Recorder as follows:

- 12.21.1 **IF** "Data Stored" appears on the screen (4 minute timer), touch "OK" to restore normal operation.
- 12.21.2 Depress "Trig" and verify the push button goes dark to abort the start time.
- 12.21.3 Depress "Arm" on the memory panel and verify it illuminates.

T 12.22 **IF** the D/G trips **OR** a problem occurs during the run, perform the following to save the data:

- Depress the Gould TA11 Chart Recorder "Trig" push button to store the previous 12 minutes of data and the following 4 minutes of data.
- Contact IAE to download the data to assist in troubleshooting.

- T 12.23 Verify the following after D/G 2B starts:
- "Lube Oil Press" increases to 40-60 psig.
 - The "L.O. Pump & Heater" light indicates "OFF".
 - "Jacket Water Press" increases to 10-30 psig.
 - The "J.W. Pump & Heater" light indicates "OFF".
 - 2RN-292B (D/G 2B Hx Inlet Isol) opens.
 - Notify Unit 2 Control Room Operator to verify flow indicated on 2RNP5980 (2B D/G Hx Oilt Flow). {PIP 96-1185}
- T 12.24 Ensure the following after D/G 2B starts:
- Diesel Generator Building Vent Fan 2B1 starts.
 - Diesel Generator Building Vent Fan 2B2 starts.
- N/A/T 12.25 IF D/G 2B was started by Operations Test Group for Aux Safeguard Testing per Step 12.16, perform the following:
- OTG 12.25.1 Operations Test Group shall verify the Sequencer is no longer in "TEST" and the emergency signal is removed.
- _____ 12.25.2 Depress the "Enable Non-Emerg Trip" "RESET" pushbutton on 2DECPB to reset the D/G non-emergency trips.
- _____ 12.25.3 Verify the "RESET" light is lit.
- T 12.26 Ensure the "Shutdown System Active" light is lit on 2DECPB.

NOTE: The "Turbo Oil Sol Valve" actually closes at 95% D/G speed but the switch shall manually be placed in the closed position to prevent reopening when the D/G stops.

- T 12.27 WHEN the engine reaches normal speed, place the "Turbo Oil Sol Vlv" switch in the "CLOSE" position.

12.28 Record the following data on Enclosure 13.1 (Start Data):

- Time required for D/G to reach ≥ 58.8 Hz (equates to a minimum speed of 441 RPM) and remain within the allowable range of 58.8 - 61.2 Hz..
- Time required for D/G to reach ≥ 3950 V and remain within the allowable range of 3950 - 4580 V.
- Diesel Generator Bldg. Emergency Vent fans 2B1 and 2B2 status.

NOTE: If this procedure is being performed to satisfy SR 3.8.1.2 for determining if this D/G is NOT inoperable due to a common cause failure and the D/G is NOT required to be loaded, Steps 12.29 through 12.48, 12.57, 12.61, and 12.69 may be N/A'd.

 12.29 Adjust voltage using "Voltage Control" to allow "D/G Voltage" to be one half to two divisions (50 - 200 volts) higher than "Line Voltage".

 12.30 Place the "Synchroscope Selector Switch" in the "ON" position.

 12.31 Adjust the governor using "Speed Control" to allow the Synchroscope to move slowly in the "FAST" direction (approximately 1 revolution per 30 seconds).

✓ **CAUTION:** Step 12.32.2 shall be performed immediately after closing "Diesel Gen Bkr 2ETB18" to reduce the likelihood of a reverse power D/G Breaker trip. Closing the D/G Breaker is an "IV Required" step.

✓ **NOTE:** 1. Steps 12.32 and 12.33 will allow D/G load to be varied in support of functional verifications following maintenance activities. If any maintenance is performed during the run which could affect the start data, this PT **CANNOT** be used to satisfy the associated surveillance.
2. If this PT is being performed to satisfy the surveillance only, Step 12.33 does **NOT** apply.

✓ 12.32 Increase generator load to one of the following:

2500 KW (2400-2600 KW) {PIP 97-2796}

OR

_____ KW (record value required by the Maintenance procedure, **NOT** to exceed 2500 KW)

Record time 0830

12.32.1 While the Synchroscope pointer is rotating slowly in the "FAST" direction and is less than 1.5 min. before vertical ("Synchronized" light lit) position, close "Diesel Gen Bkr 2ETB18".

12.32.2 Increase generator load to the value specified in Step 12.32 using "Speed Control" only. {PIP 00-2323}

12.32.3 Adjust power factor to 0.98 lagging ($\leq .9$ lagging for 24 hr run) by adjusting "Voltage Control".

12.32.4 Place the "Synchroscope Selector Switch" in the "OFF" position.

✓ **CAUTION:** Do **NOT** exceed 5750 KW generator load.

 12.33 **IF** desired to increase load, after 15 minutes increase generator load to the desired value as follows:

Record time 0846

- Maintain 0.98 lagging ($\leq .9$ lagging for 24 hr run) power factor by adjusting "Voltage Control".
- Increase generator load using "Speed Control".

- † 12.34 **WHEN** ready to begin the loaded run in support of the surveillance, increase generator load to ≥ 5600 KW but ≤ 5700 KW as follows:
Record time 0846
- Ensure at least 15 minutes has elapsed since initial loading of the generator.
 - Maintain 0.98 lagging ($\leq .9$ lagging for 24 hr run) power factor by adjusting "Voltage Control".
 - Increase generator load using "Speed Control".
- † 12.35 Verify the starting air manifold pressure gauge reads approximately "0" psig (located on the right bank engine catwalk).
- ✓12.36 Record data on the Enclosure 13.4 (D/G Leak Identification Sheet) throughout the run.
- † 12.37 Approximately 15 minutes after the D/G is fully loaded, record the D/G 2B Lube Oil Sump Tank initial level (L_i) on Enclosure 13.2 (Shutdown Data).
Record time 0901
- † 12.38 Approximately 15 minutes after the D/G is fully loaded, record the initial set of data on Enclosure 13.3 (D/G Operating Parameter Data). {PIP 97-2400}
- † 12.39 Approximately 30 minutes after initial level is taken, record Lube Oil Sump Tank final level (L_f) on Enclosure 13.2 (Shutdown Data)

✓ **NOTE:** The D/G Operating Parameter Data shall be obtained with the D/G fully loaded. To prevent unnecessarily extending the time fully loaded for one hour runs, the second set of data may be recorded less than one hour after recording the initial set of data.

- ✓12.40 Record running data on Enclosure 13.3 (D/G Operating Parameter Data) as follows:
- Once per hour for the duration of the run
 - Record final set of data just prior to reducing D/G load

T 12.41 Verify Fuel Oil Day Tank Level is being maintained ≥ 1.96 psig via supply from either of the following valves: {PIP 96-0535}

2FD-62 (D/G Eng Fuel Oil Day Tank 2B Fill)

2FD-63 (D/G Eng Fuel Oil Day Tank 2B Fill Vlv Byp).

NOTE: The remaining steps secure the D/G.

ITEM #1

12.42 **IF** this is a 1 hour run, verify D/G 2B has run for ≥ 60 minutes at ≥ 5600 KW but ≤ 5750 KW.

12.43 **IF** this is a 5 hour run (required once every 6 months), verify D/G 2B has run for ≥ 5 hours at ≥ 5600 KW but ≤ 5750 KW. {PIP 97-2400}

12.44 **IF** this is a 24 hour run, verify D/G 2B has run at a power factor ≤ 0.9 for ≥ 24 hours at ≥ 5600 KW but ≤ 5750 KW. {PIP 00-92}

12.45 Verify another power source is available to the 4160V Bus.

12.46 While maintaining power factor at approximately .95 lagging using "Voltage Control", adjust generator load using "Speed Control" per the following:

12.46.1 Reduce D/G load to 4800 KW (4700-4900 KW). {PIP 97-2796}
Record time _____

12.46.2 After 5 minutes, reduce load to 3800 KW (3700-3900 KW).
Record time _____

12.46.3 After 5 minutes, reduce load to 2900 KW (2800-3000 KW).
Record time _____

ITEM #1

12.46.4 After 5 minutes, reduce load to 2000 KW (1900-2100 KW).
Record time _____

✓ **NOTE:** When using the D/G to transfer Essential Bus power supplies, the 5 minute time limit specified in the following step may be extended as needed.

✓ **CAUTION:** Step 12.46.5.2 shall be performed immediately after performing step 12.46.5.1 to reduce the likelihood of a reverse power D/G Breaker trip. Step 12.46.5.1 is **NOT** required to be signed off until step 12.46.5.2 is completed.

12.46.5 After 5 minutes, perform the following within 5 minutes:

ITEM #1

12.46.5.1 Reduce D/G load to 200 KW.

ITEM #1

12.46.5.2 Trip (Diesel Gen Bkr 2ETB18).
Record time _____

N/A/T

12.47 **IF** this is the first performance of this PT for the quarter **OR** an oil sample is requested by the OWPM staff, ensure an oil sample is taken within 15 minutes of but prior to D/G shutdown as follows:

12.47.1 Determine which LD filter is in service:

2B1 LD Filter

OR

2B2 LD Filter

12.47.2 Install the oil sampling rig previously obtained on the vent for the LD filter in service:

2LD-43 (2B1 Lube Oil Filt Vent) (DB-564, AA-75)

OR

2LD-44 (2B2 Lube Oil Filt Vent) (DB-564, AA-75)

12.47.3 Place the waste oil container under the outlet of the sampling rig.

12.47.4 Throttle open the Lube Oil Filter Vent valve selected in Step 12.47.2.

12.47.5 After collecting approximately 1 gallon of lube oil in the waste oil container, close the Lube Oil Filter Vent valve.

12.47.6 Collect the lube oil sample by performing the following:

- 12.47.6.1 Place sample bottle under the oil sampling rig.
- 12.47.6.2 Throttle open the Lube Oil Filter Vent valve selected in Step 12.47.2..
- 12.47.6.3 After filling the 1000 milliliter sample bottle, close the Lube Oil Filter Vent valve:

2LD-43 (2B1 Lube Oil Filt Vent) (DB-564, AA-75)

OR

2LD-44 (2B2 Lube Oil Filt Vent) (DB-564, AA-75)

12.47.7 Remove the oil sampling rig which was installed per step 12.47.2.

12.47.8 Label sample bottle as "D/G 2B Sample".

12.47.9 Date and time sample bottle.

12.47.10 Record engine "Total Hours" meter reading on sample bottle.

ITEM #1

12.48 Allow diesel to idle unloaded for a minimum of 5 minutes or until the following conditions are met:

- Jacket water outlet temperature is $\leq 170^{\circ}\text{F}$.
- Lube oil outlet temperature is $\leq 170^{\circ}\text{F}$.
- Turbocharger exhaust temperatures have stabilized.

ITEM #1

12.49 Depress the "STOP" pushbutton on 2DECPB.
Record time _____

T 12.50 **IF** used, remove the key from the "Manual Test Start" Keyswitch.

T 12.51 **WHEN** the diesel stops ensure the following occurs:

- The "L.O. Pump & Heater" light indicates "ON".
- The "J.W. Pump & Heater" light indicates "ON".
- 2RN-292B (D/G 2B Hx Inlet Isol) closes.

T 12.52 Start the Diesel Building Normal Vent Fan 2B.

- T 12.53 Remove the chart recorder on 2DGCPB from service:
- 12.53.1 Depress the "PRINTER OFF/ON" pushbutton on the WESTRONICS DDR10 module.
 - 12.53.2 WHEN "PRINTER OFF ?" appears on the display, depress "ACCEPT/YES" on the arrow keypad.
- T 12.53.3 Date, time and initial chart recorder to indicate when recorder was taken out of service.
- T 12.54 IF it is desired to return the Westronics display to a single point, perform the following:
- 12.54.1 Depress the "DISP" pushbutton.
 - 12.54.2 WHEN "POINT ?" appears on the display, select the desired point on the arrow keypad.
 - 12.54.3 WHEN the selected number appears on the display, press "ENTER" on the key directly below the arrow keypad.

✓ **NOTE:** Do **NOT** turn the Gould TA11 Chart Recorder "Power" switch "OFF" if data acquisition from the D/G run will be needed for troubleshooting purposes. The Gould TA11 Chart Recorder stores the last 12 minutes of data internally. Turning the Gould TA11 Chart Recorder off will result in the loss of this data.

N/A/T 12.55 **IF** the D/G run was normal and the D/G did **NOT** trip, perform the following at the Gould TA11 Chart Recorder:

- 12.55.1 **IF** there are less than 10 sheets, replace the paper as follows:
- Turn the "Power" switch off.
 - Lift the "Load Paper" lever.
 - Open the door.
 - Remove the metal shelf.
 - Remove the unused paper.
 - Install the new paper with the highest red number on the top left side.
 - Insert the paper under the rubber roller.
 - Install the metal shelf.
 - Position the "Load Paper" lever down.
 - Close the door.
 - Turn the "Power" switch on.

✓ **NOTE:** At least two minutes should be allowed for the recorder to boot up.

- Ensure the following:

"ID"



"Text"

Chart Speed "25"

- Depress Form Feed "" push button for 3 seconds and verify paper advances properly and grid lines are printed.
 - Reset the paper counter on the touch screen as follows:
 - Touch "System".
 - Touch "Page #".
 - Touch "Key".
 - Enter the number of the last page of paper exiting Recorder.
 - Touch "Enter".
 - Verify "Page:" (upper right on touch screen) is value entered.
 - Touch "Exit".
 - 12.55.2 Turn the "Power" switch "OFF".
 - 12.55.3 Rotate the display panel down to protect the control panel.
- I 12.56 Have the Control Room Operator place the "D/G 2B Ctrl Location" Switch in the "CTRL RM" position on 2MC11.

T 12.57 Verify that the D/G Fuel Oil Day Tank 2B contains no water as follows:

- ✓ **NOTE:**
1. Steps 12.57.1 through 12.57.6.2 shall be repeated until the drained fuel oil is free of water.
 2. All used oil shall be disposed of per CNS Environmental Work Practice 2.8 (Used Oil).

- ✓ 12.57.1 Place a container downstream of 2FD-98 (D/G Fuel Oil Day Tank 2B Sample Outside Isol).
- ✓ 12.57.2 Open 2FD-97 (D/G Eng Fuel Oil Day Tank 2B Sample Inside Isol).
- ✓ 12.57.3 Slowly open 2FD-98 (D/G Eng Fuel Oil Day Tank 2B Sample Outside Isol) to obtain the sample.
- ✓ 12.57.4 **WHEN** the sample has been obtained, close 2FD-98 (D/G Fuel Oil Day Tank 2B Sample Outside Isol).
- ✓ 12.57.5 Inspect container for water.
- ✓ 12.57.6 **IF** water is present, perform the following:
 - 12.57.6.1 Place a container at D/G Eng Fuel Oil Day Tank 2B Drain Outlet.
 - 12.57.6.2 Open 2FD-64 (D/G Eng Fuel Oil Day Tank 2B Drain Outlet) to fill container and then close.
- ✓ 12.57.7 Close 2FD-97 (D/G Eng Fuel Oil Day Tank 2B Sample Inside Isol).

T 12.58 Open 2VN-2 (2B D/G Exhaust Silencer Drain) (DB-559, BB-75).

I 12.59 Drain any accumulated oil out of the crankcase vent drip leg as follows:

- 12.59.1 Verify 2ZD-2 (2B D/G Engine Crankcase Vent Drip Leg Drain) (DB-557, BB-75) is closed.
- 12.59.2 Remove pipe cap downstream of 2ZD-2 (2B D/G Engine Crankcase Vent Drip Leg Drain).
- 12.59.3 Place the waste oil container downstream of 2ZD-2 (2B D/G Engine Crankcase Vent Drip Leg Drain).
- 12.59.4 Open 2ZD-2 (2B D/G Engine Crankcase Vent Drip Leg Drain) to drain any accumulated oil.
- 12.59.5 **WHEN** oil has drained, close 2ZD-2 (2B D/G Engine Crankcase Vent Drip Leg Drain).
- 12.59.6 Replace pipe cap downstream of 2ZD-2 (2B D/G Engine Crankcase Vent Drip Leg Drain).

N/A/T 12.60 **IF** the D/G run was normal **AND** the D/G did **NOT** trip, perform the following at the Alarm Monitor Panel (2ELMC0030):

- 12.60.1 Depress and hold the "Alarm Ack" button for 1 second.
- 12.60.2 Verify that any "A" or "B" alarm lights that were flashing are now illuminated solid.

NOTE: Steps 12.61 through 12.68 may be performed in any order.

I 12.61 Record shutdown data on Enclosure 13.2 (Shutdown Data).

12.62 Perform the following checklists per OP/2/A/6350/002 (Diesel Generator Operation):

I 12.62.1 D/G 2B Checklist for ES Actuation

I 12.62.2 D/G 2B Separate Verification Checklist for ES Actuation.

- T 12.63 **WHEN** the D/G has been shutdown for at least 45 minutes, verify the lube oil strainer discharge check valves do **NOT** indicate back leakage as follows: {PIP 00-3598}
- 12.63.1 Measure and record the temperature of the piping approximately 6" upstream and downstream of each of the following:
- 2LD-47 (2B D/G Eng Lube Oil Strainer 2B1 Check)
Upstream 130 °F Downstream 146 °F
- 2LD-48 (2B D/G Eng Lube Oil Strainer 2B2 Check)
Upstream 152 °F Downstream 160 °F
- 12.63.2 Verify the delta T across each is > 5°F.
- 2LD-47 delta T 16 °F
- 2LD-48 delta T 8 °F
- N/A/T 12.63.3 **IF** the delta T across 2LD-47 **OR** 2LD-48 is ≤ 5°F, contact MSE for an operability determination.
Person notified _____
- N/A/T 12.63.4 **IF** the delta T across either valve is ≤ 5°F, initiate a PIP for tracking.
- 12.64 **WHEN** the D/G has been shutdown for at least 45 minutes, perform the following to verify proper movement of 2KD-21 (2B D/G Eng Driven Jacket Water Circulation Pump Disch Check): {PIP 03-4656}
- T 12.64.1 Verify open indication per an increase in jacket water pressure when the D/G was started. (successful completion of Step 12.23)
- T 12.64.2 Verify closed indication per jacket water outlet temperature > 140°F. (measured ≥ 45 minutes following D/G shutdown)
- N/A/T 12.64.3 **IF** proper movement of 2KD-21 (2B D/G Eng Driven Jacket Water Circulation Pump Disch Check) **CANNOT** be verified, contact MSE for an operability determination.
Person notified _____
- _____ 12.65 Complete Diesel Generator Logbook entries per OMP 2-28.
- _____ 12.66 **IF** a manual start was performed, return the "Manual Test Start" key to the Key Locker.
- _____ 12.67 **IF** an oil sample was taken, forward it to the OWPM Group.

NOTE: All used oil shall be disposed of per CNS Environmental Work Practice 2.8 (Used Oil).

_____ 12.68 Ensure any used oil generated during this test (as a result of sampling, etc.) is properly disposed of.

_____ 12.69 Forward the following to the System Engineering Group (Mail Code CN03SE):

Gould TA11 Chart Recorder printout (if used)

AND a copy of each of the following enclosures:

Enclosure 13.1 (Start Data)

Enclosure 13.2 (Shutdown Data)

Enclosure 13.3 (D/G Operating Parameter Data)

Enclosure 13.4 (D/G Leak Identification Sheet)

12.70 Evaluate the acceptance criteria by performing one of the following:

_____ 12.70.1 Verify the acceptance criteria per one of the following:

IF this procedure was performed to satisfy SR 3.8.1.2 for determining if a common cause failure exists, verify Acceptance Criteria 11.3 and 11.4 are met.

IF this procedure was performed to verify the operability of D/G 2B, verify Acceptance Criteria specified in Section 11 is met.

OR

_____ 12.70.2 **IF** the acceptance criteria is **NOT** met, perform the following:

Notify the Unit/WCC SRO that the acceptance criteria is **NOT** met.

_____/_____/_____
Unit/WCC SRO Contacted Date Time

Remove D/G 2B from service per OP/2/A/6350/002 (Diesel Generator Operation).

Initiate a PIP to document the test failure.

Document all issues on a procedure discrepancy sheet.

- _____ 12.71 **IF** any discrepancy is noted during the performance of this test that does **NOT** keep the test from meeting the acceptance criteria, it shall be given to the Unit/WCC SRO for evaluation via a discrepancy sheet.
- _____ 12.72 Submit PT/2/A/4350/002B (Diesel Generator 2B Operability Test) to the Unit/WCC SRO.

13. Enclosures

- 13.1 Start Data
- 13.2 Shutdown Data
- 13.3 D/G Operating Parameter Data
- 13.4 D/G Leak Identification Sheet

Enclosure 13.1

PT/2/A/4350/002B

Start Data

Page 1 of 2

DATE: _____

PARAMETER	ACCEPTABLE RANGE	OBSERVED VALUE		INITIALS
Time required for D/G 2B to achieve a frequency ≥ 58.8 Hz and ≤ 61.2 Hz	≤ 11 seconds	7.3 sec		T
Time required for D/G 2B to achieve a voltage ≥ 3950 V and ≤ 4580 V	≤ 11 seconds	7.3 sec		T
Diesel Generator Bldg. Emergency Vent Fans 2B1 and 2B2 operating.	N/A	YES	NO	T
		T		

If stop watches are being used, the following guidelines should be followed:

- Record below the stop watch ID numbers and calibration due dates:

Stop Watch ID Number

Calibration Due Date

Stop Watch ID Number

Calibration Due Date

- The stop watches shall be started upon the D/G start signal actuation.
- Additional manpower will be required if stop watches are being used.

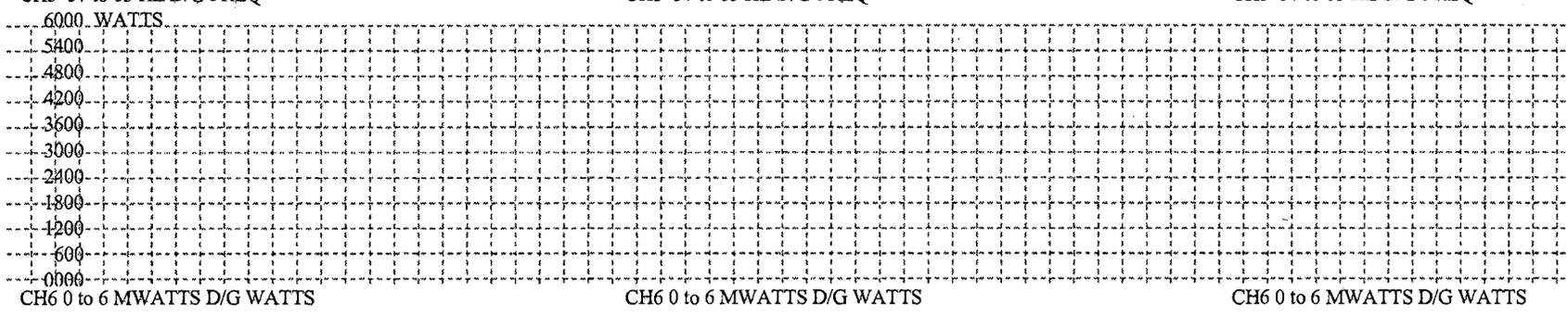
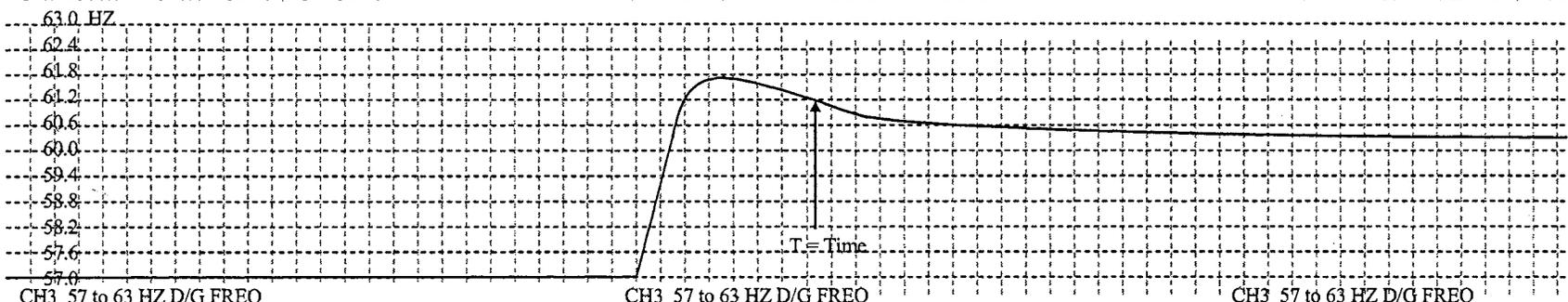
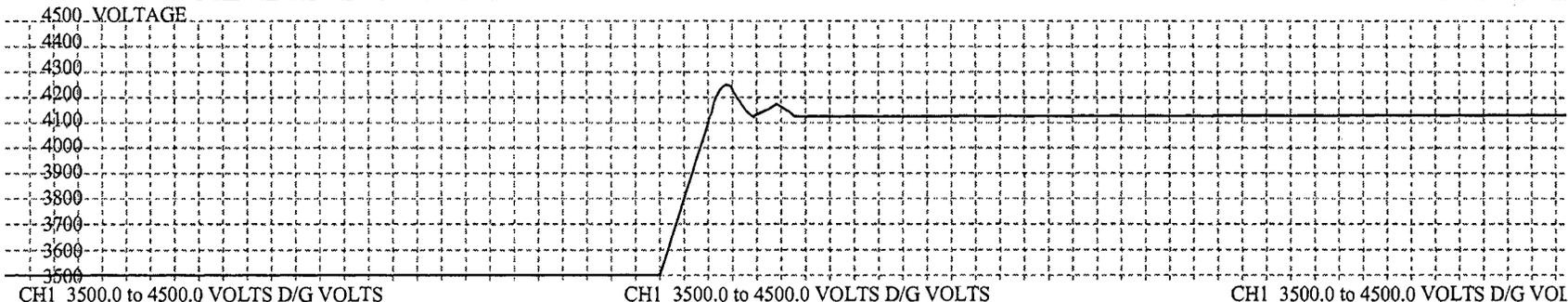
D/G Hz and voltage will be verified to remain in the required range within the allowable time. The observed value is the time at which the voltage/frequency range is entered and does **NOT** go back out of the range specified.

When reading the Gould TA11 Chart Recorder printout with chart speed set at 25 mm/sec, 5 blocks on the chart recorder printout equals one second. Count lines from the bottom of the trace to determine appropriate values; refer to the chart recorder trace on the following page.

Start Data

EXAMPLE

T=0
↓



Enclosure 13.2
Shutdown Data

PT/2/A/4350/002B
Page 1 of 2

DATE: _____

PARAMETER	OBSERVED READING		INITIALS
DIESEL LUBE OIL USAGE (Read gauge to nearest half percent)			
(L _i) Initial Sump Tank Level (2LDPG5540) ***	84	%	T
(L _f) Final Sump Tank Level (2LDPG5540) ***	84	%	T
(L _i - L _f) = Level change (ΔL)	0	%	T
2 × (ΔL × 7) = Gallons used (ACCEPTABLE USAGE ≤ 1 gal/hour)*	0	gal	T
Lube Oil Sump Tank Level ≥ 76% (2LDPG5540) ***		%	T
LD Pre-Lube Filter D/P (prestart check) (2LDPG5360) (2LDPG5370)		Psid	T
KD Standpipe Level (prestart check) (2KDLG5270)		Inches	T
Time Diesel Shutdown			T
Diesel Building Normal Vent Fan Operating	YES	NO	T
	T		
Diesel Fuel Oil Day Tank Level ≥ 1.96 psig (~470 gallons) {PIP 96-0535}		psig	T
D/G Sump Free of Oil and Excess Water	YES	NO	T
	T		
Diesel Fuel Oil Day Tank Free of Water	YES	NO	T
	T		
DIESEL FUEL OIL STORAGE SYSTEM			
Diesel Fuel Oil Storage Tank 2B1	Level	85 %	T
	Volume	40,000 gal**	
Diesel Fuel Oil Storage Tank 2B2	Level	85 %	T
	Volume	40,000 gal**	
Diesel Fuel Oil Storage Total Volume (2B1 + 2B2)		80,000 gal	T

- * For 1-hour, 5-hour, and 24-hour runs. Notify Systems Engineering if this is NOT met. {PIP 97-2400}
- ** Reference Data Book curve on the OAC.
- *** Located under grating next to D/G Lube Oil Sump Tank.

Enclosure 13.2
Shutdown Data

PT/2/A/4350/002B
Page 2 of 2

PARAMETER	OBSERVED READING	INITIALS
DIESEL STARTING AIR SYSTEM		
2B1 VG Tank Pressure \geq 210 psig (2VGPG5230)	240 psig	T
2B2 VG Tank Pressure \geq 210 psig (2VGPG5240)	240 psig	T

Enclosure 13.3
D/G Operating Parameter Data

PT/2/A/4350/002B
Page 1 of 8

PARAMETER		NOMINAL VALUES	TAKE DATA (R) or CHECKMARK (✓)	DATA						
Date / Time		-	R	0903						
NOTE: The following items are obtained from 2DGCPB (Diesel Generator Control Panel 2B).										
1. Frequency		60 Hz	✓	✓						
2. Power Factor		.98 LAGGING (≤ .9 LAGGING)***	R	.98 LAG						
3. Kilowatts		5750 KW MAX	R	5700						
4. Kilovars		400 - 2000 Kilovars *	R	1000						
5. AC Amperes		180 - 900 Amps*	R	800						
6. D/G Voltage		4160 - 4600 Volts*	R	4250						
7 Meter Stator Winding Temperatures(°C)	Pos 1	**	R	79						
	Pos 2	**	R	77						
	Pos 3	**	R	75						
	Pos 4	**	R	78						
	Pos 5	**	R	79						
8. Field Voltage		60 - 90 Volts*	R	75						
9. Field Current		180 - 220 Amps*	R	200						

* These ranges are based on data from previous tests. Actual values may be outside the range based on plant/grid conditions, or when power factor is reduced for the 24 hr run.

** Stator Temperature average should be < 100°C .

*** Only applicable during the 24 hr run to meet SR 3.8.1.14

D/G Operating Parameter Data

PARAMETER	NOMINAL VALUES	TAKE DATA (R) or CHECKMARK (✓)	DATA						
Date / Time	-	R	0903						
<p>NOTE: The following items are obtained from the chart recorder on 2DGCPB. The numbers in parenthesis correspond to the point I.D. number.</p>									
10. Cylinder Exhaust Temp	LB 1 (01)		R	890					
	LB 2 (02)		R	885					
	LB 3 (03)		R	889					
	LB 4 (04)		R	884					
	LB 5 (05)		R	889					
	LB 6 (06)		R	863					
	LB 7 (07)	400°F		R	910				
	LB 8 (08)	AT IDLE		R	945				
	RB 1 (09)	1000°F		R	863				
	RB 2 (10)	AT 5750 KW		R	895				
	RB 3 (11)			R	947				
	RB 4 (12)			R	927				
	RB 5 (13)			R	890				
	RB 6 (14)			R	962				
	RB 7 (15)			R	929				
	RB 8 (16)			R	883				
11. Jacket Water Inlet Temp (17)	140 - 175 °F		R	153					
12. Jacket Water Outlet Temp (18)	140 - 190 °F		R	160					
13. Engine Lube Oil Inlet Temp (19)	140 - 175 °F		R	155					

D/G Operating Parameter Data

PARAMETER	NOMINAL VALUES	TAKE DATA (R) or CHECKMARK (✓)	DATA						
Date / Time	-	R	0903						
14. Engine Lube Oil Outlet Temp (20)	140 - 190 °F	R	174						
15. LB Aftercooler Air In Temp (21)	230 - 290 °F	R	268						
16. LB Air Header Temp (22)	130 - 170 °F	R	161						
17. RB Aftercooler Air In Temp (23)	230 - 290 °F	R	275						
18. RB Air Header Temp (24)	130 - 170 °F	R	156						
19. Exhaust Temp Out (Right Bank) (25)	< 1000 °F	R	835						
20. Exhaust Temp Out (Left Bank) (26)	< 1000 °F	R	807						
21. Turbo Exh In (Left Bank) (27)	< 1200 °F	R	1029						
22. Turbo Exh In (Right Bank) (28)	< 1200 °F	R	1067						
NOTE: The following items are obtained from 2DECPB (Diesel Engine Control Panel 2B).									
23. Starting Air Press (Left Front)* (red needle)	> 235 psig	✓	✓						
24. Starting Air Press (Right Front)* (black needle)	> 235 psig	✓	✓						

* If starting air pressure is less than 235 psig but greater than 210 psig, the VG System is operable. Steps should be taken to repressurize the tank by either starting the compressor or cross-tying to an operable compressor. If the pressure is low from a recent engine start and the compressor is in service, there are no operability questions.

D/G Operating Parameter Data

PARAMETER	NOMINAL VALUES	TAKE DATA (R) or CHECKMARK (✓)	DATA						
Date / Time	-	R	0903						
25. Starting Air Press (Left Rear)* (red needle)	> 235 psig	✓	✓						
26. Starting Air Press (Right Rear)* (black needle)	> 235 psig	✓	✓						
27. Control Air Pressure	58 - 62 psig	R	60.5						
28. Turbo Oil Press (Left Front) (red needle)	20 - 35 psig	R	27						
29. Turbo Oil Press (Right Front) (black needle)	20 - 35 psig	R	24						
30 Lube Oil Press**	40 - 60 psig	R	53						
31. Fuel Oil Press	25 - 45 psig	R	34						
32. Differential Press Fuel Oil Filter	< 20 PSID	R	7						
33. Differential Press Lube Oil Filter	< 20 PSID	R	12						
34. Combustion Air Press (LB) (In Hg)	APPROX	R	38						
35. Combustion Air Press (RB) (In Hg)	EQUAL	R	38						
36. Jacket Water Press	10 - 30 psig	R	12.5						

** Lube oil strainer on inlet to pressure regulating valve 2LD-34 and 2LD-57 should be cleaned if lube oil pressure is > 60 psig.

Enclosure 13.3

D/G Operating Parameter Data

PARAMETER	NOMINAL VALUES	TAKE DATA (R) or CHECKMARK (✓)	DATA						
Date / Time	-	R	0903						
✓ NOTE: The left side of the D/G panel manometer is connected to D/G crankcase. Left side fluid higher than right side fluid indicates negative crankcase pressure. Right side fluid higher than left side fluid indicates positive crankcase pressure. {PIP 98-0441}									
37. Crankcase Press	(-) 5 – (+) 5 In H ₂ O	R	-0.1						
38. Engine Hours (Total Hours)	N/A	R	20.5						
39. Engine Speed	450 RPM	✓	✓						
✓ NOTE: The following items are obtained from 2ELMC0030. After obtaining readings, return the recorder to the scan mode as follows: depress "ENTER", use the up/down arrow keys to highlight "SYSTEM MENU" and depress "ENTER", use the up/down arrow keys to highlight "DISPLAY SCANNING" and depress "ENTER", use the up/down arrow keys to highlight "SELECT CHANNELS" and depress "ENTER", depress the "SCAN" key, wait about 10 seconds and verify scanning begins.									
40. 2LDRD5680 FMB (Brg #1)	140-185°F	R	174.2						
41. 2LDRD5690 MB#1 (Brg #2)	140-185°F	R	161.5						
42. 2LDRD5700 MB#2 (Brg #3)	140-185°F	R	168.9						
43. 2LDRD5710 MB#3 (Brg #4)	140-185°F	R	163.3						
44. 2LDRD5720 MB#4 (Brg #5)	140-185°F	R	165.9						
45. 2LDRD5730 MB#5 (Brg #6)	140-185°F	R	163.7						
46. 2LDRD5740 MB#6 (Brg #7)	140-185°F	R	170.7						
47. 2LDRD5750 MB#7 (Brg #8)	140-185°F	R	162.8						
48. 2LDRD5760 RMB#1 (Brg #9)	140-185°F	R	170.4						
49. 2LDRD5770 RMB#2 (Brg #10)	140-185°F	R	170.8						

Enclosure 13.3

D/G Operating Parameter Data

PARAMETER	NOMINAL VALUES	TAKE DATA (R) or CHECKMARK (✓)	DATA						
Date / Time	-	R	0903						
NOTE: The following items are obtained from local indications.									
50. Room Thermometer	80 -105 °F	R	95						
51. Generator Pedestal Bearing Oil Level	> 3/4 IN THE SIGHTGLASS	✓	✓						
52. Generator Brushes and Slip Rings	NO SMOKING OR EXCESSIVE SPARKING	✓	✓						
53. KD Hx RN Inlet Temp (°F) 2RNTH5940*	DEPENDS ON LAKE TEMP	R	74						
54. LD Hx KD Outlet Temp 2KDTH5060	140 - 175 °F	R	154						
55. KD Hx RN Outlet Temp (°F) 2RNTH5970*	LESS THAN INLET + 25°F	R	88						
56. Left Bank Combustion Air Manifold Drain	NOT BLOCKED	✓	✓						
57. KD Hx KD Inlet Temp 2KDTH5150*	140 - 190 °F	R	162						
58. KD Hx KD Outlet Temp (°F) 2KDTH5140*	< 175 °F	R	85						
59. LD Hx KD Inlet Temp 2KDTH5120	140 - 175 °F	R	149						

* Test instrumentation installed for performance of PT/2/A/4400/006 F (KD Heat Exchanger 2B Heat Capacity Test) may be used to obtain data.

Enclosure 13.3

PT/2/A/4350/002B
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D/G Operating Parameter Data

PARAMETER	NOMINAL VALUES	TAKE DATA (R) or CHECKMARK (✓)	DATA						
Date / Time	-	R	0903						
60. Governor Oil Level	≥ FULL LINE	✓	✓						
61. Lube Oil Sump Tank Level (%)	76 - 100%	R	84%						
62. Starting Air Header Press	APPROX. 0 psig	✓	✓						
63. Right Bank Combustion Air Manifold Drain	NOT BLOCKED	✓	✓						
64. DG Engine VG Aftercooler B1 YD Flow 2YDPS7990	18-20 gpm †	R	N/A/T						
65. DG Engine VG Aftercooler B2 YD Flow 2YDPS8050	18-20 gpm *	R	N/A/T						
66. Check D/G Room door AX-308	SECURELY CLOSED	✓	✓						
67. Check door between D/G cable tunnel and switchgear room AX-394C	SECURELY CLOSED	✓	✓						
68. Fuel Rack Plunger Position Cylinders 8L	0-33 mm	R	31						
69. Fuel Rack Plunger Position Cylinders 8R	0-33 mm	R	31						
70. Fuel Oil Day Tank Level	>1.96 psig	R	2.25						
71. Operator Taking Data in D/G Room	INITIALS	R	T						

† YD flow is only indicated during compressor run and 60 seconds following the run.

Enclosure 13.3

PT/2/A/4350/002B

D/G Operating Parameter Data

Page 8 of 8

PARAMETER	NOMINAL VALUES	TAKE DATA (R) or CHECKMARK (✓)	DATA						
Date / Time	-	R	0603						
✓ NOTE: The following item is obtained from Control Room indication.									
72. D/G Hx Oilt Flow	> 600 gpm	R	1250						
✓ NOTE: The following items are NOT required unless the D/G is in an extended run and the in-service FD Tank level drops to 38%. If the D/G is in extended run, and the low fuel oil tank alarm is received (at 38% level), it is recommended that the fuel oil level for the tank in service be monitored until the level reaches 5%. At that time the D/G fuel supply should be swapped to the full FD tank per OP/2/A/6550/001 (Diesel Generator Fuel Oil System).									
73. Fuel Oil Tank Level of In-Service FD Tank	> 38 %	R	N/A/T						
74. Operator Taking FD Tank Level Data	INITIALS	R	N/A/T						

Enclosure 13.4
D/G Leak Identification Sheet

PT/2/A/4350/002B
Page 1 of 1

ITEM #	LEAK LOCATION	LEAK TYPE (OIL, WATER, ETC.)	LEAK RATE (DRIP OR STREAM)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

CHECK HERE IF NO LEAKAGE IS DETECTED

CATAWBA NUCLEAR STATION JOB PERFORMANCE MEASURE

JPM 3R ADMIN

Classify a D/G Start and Complete a Logbook Entry

CANDIDATE

EXAMINER

SIMULATOR SETUP

N/A

READ TO OPERATOR

DIRECTION TO TRAINEE:

I will explain the initial conditions, and state the task to be performed. All control room steps shall be performed for this JPM, including any required communications. I will provide initiating cues and reports on other actions when directed by you. Ensure you indicate to me when you understand your assigned task. To indicate that you have completed your assigned task return the handout sheet I provided you.

EXAMINER NOTE:

If JPM is done in a group setting, explain to examinees that if they have a question to raise their hand and not speak. If they need additional information, they are to indicate to examiner what is needed when the examiner arrives at their desk. Examiner will provide the needed information. The applicant may ask for a name for the MCE Rotating Equipment Supervisor and a PIP # when completing the logbook entries. If necessary, this may be done in another room to prevent the possible compromise of the exam.

INITIAL CONDITIONS:

Unit 2 is in Mode 1. You were an extra operator on shift and assisting the Operation Test Group in a scheduled surveillance test of the 2B Emergency Diesel Generator. The test was conducted using procedure PT/2/A/4350/002B (D/G Operability Test). Prior to completing the scheduled surveillance test, the 2B D/G tripped due to a malfunction of the low-low lube oil pressure switch at 0905. PT/2/A/4350/002B has been completed up to step 12.65.

INITIATING CUE:

Given a copy of PT/2/A/4350/002B (D/G Operability Test):

Classify the test and fill in all available Diesel Generator Logbook data on Attachments 10.1 and 10.2 of OMP 2-28 and submit to the CRS for review.

START TIME: _____

1	<p>Based on initial conditions, candidate refers to OMP section 6 to determine the TEST CLASSIFICATION.</p> <p><u>STANDARD</u></p> <p>Candidate determines that the test is a VALID FAILURE based on criteria 6.4 A</p> <p><u>EXAMINER NOTE:</u> When student is ready to fill out the logbook provide a blank copy of enclosure 10.1 and a filled out copy of enclosure 10.2 as provided.</p> <p><u>COMMENTS</u></p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
---	--	---

2

Operator enters appropriate information on Attachment 10.1 using information from the initial conditions.

CRITICAL STEP*

STANDARD

***Enters 2B D/G**

Enters his name

***Enters start attempt based on last entry on 10.2 (2009-12)**

Enters today's date

Marks PT/1(2)/4350/002A(B) as procedure used

Marks SCHEDULED SURVEILLANCE as Reason for D/G Operation

Enters TURBO PRELUBE for type of start

Enters engine start time 0820

Enters engine shutdown time 0905

Enters run time as 0.75 hours

Calculates total run time as 20.55 hours (19.8+0.75)

*** Enters classification (VALID FAILURE)**

***Enters reason D/G start was not a valid success: (2B D/G tripped on a malfunction of the LOLO Lube Oil Pressure switch prior to being loaded > 2875 KW for > 1 hour)**

Marks MCE Rotating Equipment supervisor or designee

EXAMINER CUE: CRS will contact MCE Rotating Equipment supervisor.

Marks PIP block since a PIP is required for this start

EXAMINER CUE: PIP # C-09-0001

*** DENOTES CRITICAL ITEMS - These items are critical because all other entries are required regardless of classification.**

COMMENTS

_____ SAT

_____ UNSAT

3	CRITICAL STEP*
Logs the start into the Index Sheet (Enclosure 10.2)	
<u>STANDARD</u>	
*Enters Start # as 2009-12	
Enters Date as todays date	
*Enters Test Classification as "VALID FAILURE"	
Enters run time as 0.75 hrs	
Enters yearly run time as 20.55 hrs	
Indicates PIP # will be written in space provided	
* DENOTES CRITICAL ITEMS - These items are critical based on OMP 2-28 section 3 criteria.	
<u>COMMENTS</u>	
<input type="checkbox"/> SAT <input type="checkbox"/> UNSAT	

TIME STOP: _____

KEY 3R

Attachment 10.1 Diesel Generator Log Sheet

*Critical DIESEL GENERATOR 2B RECORDED BY APPLICANT START ATTEMPT NUMBER 2009-12 DATE TODAY PROCEDURE USED: *Critical REASON FOR D/G OPERATION:

- PT/1(2)/A/4350/002A(B) (D/G Operability Test) Scheduled Surveillance
OP/1(2)/A/6350/002 (D/G Operation) Opposite Train Inoperable
Other, Specify: Functional Verification (Maintenance)
Other, Specify:

TYPE OF START:

- Turbo Prelube
Non-Prelube

TEST CLASSIFICATION:

(See OMP 2-28, Sect. 6.)

VALID SUCCESS

Time required to achieve a frequency of >= 57 Hz sec.
Time required to achieve a voltage of >= 3950 volts sec.
Time Load >= 2875 KW hrs.

OPERATING DATA:

D/G Engine Start Date/Time TODAY 0820
D/G Engine Shutdown Date/Time TODAY 0905
Run Time (hrs) 0.75
*Total D/G Engine Yearly Run Time 20.55 Hrs.

Steady state voltage and frequency of 3950-4580 volts and 58.8 to 61.2 Hz.

- INVALID TEST
INVALID FAILURE
VALID FAILURE *Critical

Explain in detail the reason D/G operation was not a VALID SUCCESS/failed to meet acceptance criteria.

2B D/G tripped on a malfunction of the lo-lo lube oil pressure switch prior to being loaded >1 hour at >2875 KW.
WORDING DOES NOT NEED TO BE EXACT. *Critical

MCE ROTATING EQUIPMENT SUPERVISOR OR DESIGNEE

Should note notification is required

Required if Valid or Invalid Failure

PIP # (Refer to 8.1.K for PIP applicability)

Should note that a PIP is required.

REVIEW (CRS)

ROUTE COPY to MCE Rotating Equipment Supervisor or Designee

* Notify Environmental Management if Total Run Time exceeds 260 hours per calendar year for any D/G.

**CATAWBA NUCLEAR STATION
JOB PERFORMANCE MEASURE**

JPM 3S ADMIN

**Determine SLC requirements and complete a Unit
Vent Flow Manual Calculation per PT/1/A/4450/017**

CANDIDATE _____

EXAMINER _____

SIMULATOR SETUP

Use SNAP _____

Fail VFP 5310 to 0

Place OOS sticker on VFP 5310 (1A VF Flow)

SET VA FLOW TO 56000

Provide digital pictures of applicable control boards or mimics from the instructor station. This can also be done as a static simulator JPM.

READ TO OPERATOR

DIRECTION TO TRAINEE:

I will explain the initial conditions, and state the task to be performed. All control room steps shall be performed for this JPM, including any required communications. I will provide initiating cues and reports on other actions when directed by you. Ensure you indicate to me when you understand your assigned task. To indicate that you have completed your assigned task return the handout sheet I provided you.

INITIAL CONDITIONS:

- Both Units are operating at 100% power.
- No VQ release is in progress.
- No GWRs are in progress.
- The Waste Evaporator and Recycle Evaporator are secured.
- All systems are in normal alignment.
- The RO performing the Unit 1 Mode 1 Periodic Surveillance notified you that flow on OAC point C1A1104 was 94000 scfm during the Unit Vent Stack Flow Rate Meter Channel Check

INITIATING CUE:

Determine what actions (if any) are required to comply with SLCs and perform those actions based on the surveillance requirements.

START TIME: _____

	<p>EXAMINER NOTE: Provide examinee with a copy of PT/1/A/4600/002 Enc13.1 page 31 of 35.</p>	
<p>1</p>	<p>Determine actions, if any, per given surveillance.</p> <p>STANDARD</p> <p>Operator determines, from surveillance, that PT/1/A/4450/017 (Unit Vent Flow Manual Calculation) must be performed. Determines directly or through reference to Daily Surveillance PT that SLC 16.11-7 applies. This requires performance every 4 hours and the instrument returned to operable within 30 days or issue a report after 30 days.</p> <p>EXAMINER NOTE</p> <p>Once student has determined a need to complete the surveillance, if they do not start it, state "OSM requests that you complete PT/1/A/4450/017".</p> <p>EXAMINER NOTE: Provide candidate with a copy of JPM handouts provided which includes digital pictures of control board and PT/1/A/4450/017 (Unit Vent Flow Manual Calculation). .</p> <p>COMMENTS</p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
<p>2</p>	<p>Operator locates and records VA System flow.</p> <p>STANDARD</p> <p>Operator locates 1VAP5280 on 1MC-3 and records 56,500 scfm.</p> <p>EXAMINER NOTE: Range of 56000 to 57000 scfm is acceptable.</p> <p>COMMENTS</p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
<p>3</p>	<p>Operator locates and records VE 1A flow to stack.</p> <p>STANDARD</p> <p>Based on information provided, VE 1A is shutdown and records 0 scfm.</p> <p>EXAMINER NOTE: Normal alignment (in the initiating cue) is OFF for VE.</p> <p>COMMENTS</p>	<p>_____ SAT</p> <p>_____ UNSAT</p>

<p>4</p>	<p>Operator locates and records VE 1B flow to stack.</p> <p><u>STANDARD</u></p> <p>Based on information provided, VE 1B is shutdown and records 0 scfm.</p> <p><u>EXAMINER NOTE:</u> Normal alignment (in the initiating cue) is OFF for VE.</p> <p><u>COMMENTS</u></p>	<p>_____ SAT</p> <p>_____ UNSAT</p>
<p>5</p>	<p>Operator locates and records VF 1A flow to stack.</p> <p><u>STANDARD</u></p> <p>Locates 1VFP5310, notes VF reading is OOS and uses <u>33130 scfm</u> from enclosure 13.2.</p> <p><u>COMMENTS</u></p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
<p>6</p>	<p>Operator locates and records VF 1B flow to stack.</p> <p><u>STANDARD</u></p> <p>Locates 1VFP5340, notes VF 1B is shutdown and records 0 scfm.</p> <p><u>COMMENTS</u></p>	<p>_____ SAT</p> <p>_____ UNSAT</p>

7	<p>Determines need to get 1ABUX-AFMD-1 flow reading locally.</p> <p><u>STANDARD</u></p> <p>Based on information provided, determines that 1ABUX-AFMD-1 reads <u>27000 scfm</u></p> <p><u>COMMENTS</u></p>	<p>_____ SAT</p> <p>_____ UNSAT</p>
8	<p>Records 1ABUX-AFMD-1 flow.</p> <p><u>STANDARD</u></p> <p>Records <u>27000 scfm</u> based on operator report (provided in student handout).</p> <p><u>COMMENTS</u></p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
9	<p>Operator records VP flows.</p> <p><u>STANDARD</u></p> <p>Based on initial cues VP is secured. Flows recorded as <u>0 scfm or N/A.</u></p> <p><u>COMMENTS</u></p>	<p>_____ SAT</p> <p>_____ UNSAT</p>
10	<p>Operator records WG flow and VQ flow.</p> <p><u>STANDARD</u></p> <p>Based on initial cues records flow as <u>0 scfm or N/A</u></p> <p><u>COMMENTS</u></p>	<p>_____ SAT</p> <p>_____ UNSAT</p>

11	<p>Operator records TL flow</p> <p><u>STANDARD</u></p> <p>Based on initial cue and procedure notes records <u>1260 scfm</u>.</p> <p><u>COMMENTS</u></p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
12	<p>Operator records NB and WL flows.</p> <p><u>STANDARD</u></p> <p>Based on initial cues records flow as <u>0 scfm or N/A</u>.</p> <p><u>COMMENTS</u></p>	<p>_____ SAT</p> <p>_____ UNSAT</p>
13	<p>Operator records ZJ flow to stack.</p> <p><u>STANDARD</u></p> <p>Based on initial cue and procedure notes records <u>60 scfm</u>.</p> <p><u>COMMENTS</u></p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>

<p>14</p> <p>Calculate total vent flow.</p> <p><u>STANDARD</u></p> <p>Calculates total vent flow to stack as <u>117950 scfm.</u></p> <p>$(56000)+(33130)+(27000)+(1260)+(60) = 117450$</p> <p><u>EXAMINER NOTE</u></p> <p>Due to reading instruments, <u>117450 -118450 scfm</u> is acceptable.</p> <p><u>COMMENTS</u></p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
<p>15</p> <p>Complete PT and submit to WCCSRO.</p> <p><u>STANDARD</u></p> <p>Records that acceptance criteria is met and signs off remaining procedure steps.</p> <p><u>EXAMINER NOTE</u></p> <p>Candidate may create a Discrepancy Sheet based on gauge VFP5310 having an OOS sticker on it. Although not required, it is <u>not</u> incorrect to submit one. If examinee wants a Discrepancy Sheet, give the following cue:</p> <p><u>EXAMINER CUE:</u> Another operator will fill out the Discrepancy Sheet as needed.</p> <p><u>COMMENTS</u></p>	<p>_____ SAT</p> <p>_____ UNSAT</p>

TIME STOP: _____

<p style="text-align: center;">Duke Power Company Catawba Nuclear Station</p> <p>Unit Vent Flow Manual Calculation</p> <p style="text-align: center;">Continuous Use</p>	Procedure No. PT/ 1/A/4450/017	
	Revision No. 012	
	Electronic Reference No. CN005G80	
<table border="1" style="width: 100%;"> <tr> <td data-bbox="172 680 516 716" style="text-align: center;">PERFORMANCE</td> </tr> </table> <p style="text-align: center;">***** UNCONTROLLED FOR PRINT *****</p> <p style="text-align: center;">(ISSUED) - PDF Format</p>		PERFORMANCE
PERFORMANCE		

KEY 35

Unit Vent Flow Manual Calculation

1. Purpose

To provide a means to calculate the flow to the Unit Vent when the Unit Vent Stack Flow Rate Meter is inoperable or flow is less than 97,500 scfm.

2. References

- 2.1 SLC 16.11-7
- 2.2 UFSAR Section 11.5.1.2.2.1

3. Time Required

- 3.1 Manpower - One NLO
- 3.2 Time - 30 minutes
- 3.3 Frequency - Every four hours

4. Prerequisite Tests

None

5. Test Equipment

None

6. Limits and Precautions

None

7. Required Unit Status

None

8. Prerequisite System Conditions

- CTK 8.1 The Unit Vent Stack Flow Rate Meter is inoperable or flow is less than 97,500 scfm.
- CTK 8.2 The Unit Vent is in service.

9. Test Method

- 9.1 The various systems exhaust flow to the Unit Vent will be obtained using local indication and recorded on Enclosure 13.1 (Total Unit Vent Flow Calculation Sheet).
- 9.2 The individual exhaust flows will be added to obtain total exhaust flow to the Unit Vent and recorded on Enclosure 13.1 (Total Unit Vent Flow Calculation Sheet).

10. Data Required

- Complete Enclosure 13.1 (Total Unit Vent Flow Calculation Sheet).

11. Acceptance Criteria

- The Unit Vent Stack Flow Rate is estimated at least once per four hours. (SLC 16.11-7)

12. Procedure

- 12.1 Complete Enclosure 13.1 (Total Unit Vent Flow Calculation Sheet) as follows:
 - 12.1.1 Record the individual systems exhaust flows.
 - 12.1.2 Calculate the total Unit Vent exhaust flow by adding together the individual systems exhaust flows.
 - 12.1.3 Record the date and time the calculation was completed.

NOTE: Additional copies of Enclosure 13.1 (Total Unit Vent Flow Calculation Sheet) may be made as necessary and attached.

- 12.2 Repeat Step 12.1 every four hours until the Unit Vent Stack Flow Rate Meter is declared operable and flow is greater than or equal to 97,500 scfm.

CTK

- 12.3 Ensure any additional copies of Enclosure 13.1 (Total Unit Vent Flow Calculation Sheet) used are attached.

12.4 Evaluate the acceptance criteria by performing one of the following:

CTK 12.4.1 Verify the acceptance criteria specified in Section 11 is met.

OR

CTK **N/A** 12.4.2 **IF** the acceptance criteria is **NOT** met, perform the following:

Notify the Unit/WCC SRO that the acceptance criteria is **NOT** met.

Unit/WCC SRO Contacted Date Time

Initiate a PIP to document the test failure.

Document all issues on a procedure discrepancy sheet.

CTK **N/A** 12.5 **IF** any discrepancy is noted during the performance of this test that does **NOT** keep the test from meeting the acceptance criteria, it shall be given to the Unit/WCC SRO for evaluation via a discrepancy sheet.

CTK 12.6 Submit PT/1/A/4450/017 (Unit Vent Flow Manual Calculation) to the Unit/WCC SRO.

13. Enclosures

✓ 13.1 Total Unit Vent Flow Calculation Sheet

✓ 13.2 Systems Design Flow Rates

Total Unit Vent Flow Calculation Sheet

SYSTEM	FLOW INSTRUMENT	LOCATION	READING (CFM)	INITIALS
VA	1VAP5280 ABFXU-1 Air Flow	1MC3	56K - 57K	
VE	1VEP5180 VE 1A Flow To Stack	1MC5	0	
VE	1VEP5200 VE 1B Flow To Stack	1MC5	0	
VF	1VFP5310 VF Oflt Air Flow Trn A	1MC5	33,130	
VF	1VFP5340 VF Oflt Air Flow Trn B	1MC5	0	
VA	1ABUXF Discharge Air Flow (1ABUX-AFMD-1)	1ELCP0111 (1AB-ECP-1) AB-594, HH-55	27,000	
VP	1VPP5200 VP Exhaust Air Flow	1ELCP0110 (1RB-CP-1) AB-594, LL-52	0	
VP	1VPP5180 Incore Instrument Room Exhaust Air Flow	1ELCP0110 (1RB-CP-1) AB-594, LL-52	0	
WG	0WGP5941 WG Discharge Flow To Unit Vent	AB-543, QQ-59 (On wall beside WG Panel)	0	
VQ	(1)	N/A	N/A	
TL	(2)	N/A	1260	
NB	(3)	N/A	N/A	
WL	(3)	N/A	N/A	
ZJ	(4)	N/A	60	
TOTAL UNIT VENT FLOW (sum of all readings)			117450 - 118450	
DATE/ TIME COMPLETED			Current date & time	

- (1) ✓ If a VQ release is in progress, use 350 CFM; otherwise, N/A.
- (2) ✓ If the TL System is in operation, use 1260 CFM; otherwise, N/A.
- (3) ✓ If the Waste Evaporator or Recycle Evaporator is operating, use 92 CFM; otherwise, N/A.
- (4) ✓ If the ZJ System is in operation, use 60 CFM; otherwise, N/A.

NOTE: ✓ If an instrument is out of service, enter the design flow at the exhaust line if exhausting to the Unit Vent, or enter '0' if isolated from the Unit Vent. Design flows are listed on Enclosure 13.2 (Systems Design Flow Rates).

Enclosure 13.2
Systems Design Flow Rates

PT/1/A/4450/017
Page 1 of 1

System	Flow Rate
VA Filtered Exhaust (two trains in service)	60,000 cfm
VA Filtered Exhaust (one train in service)	30,000 cfm
VE	9000 cfm
VF	33,130 cfm
VA Unfiltered Exhaust (two trains in service)	40,700 cfm
VA Unfiltered Exhaust (one train in service)	20,350 cfm
VP Containment Purge Exhaust	25,000 cfm
VP Incore Instrument Room Purge Exhaust	1000 cfm
WG	20 cfm



CANDIDATE CUE SHEET
(TO BE RETURNED TO EXAMINER UPON COMPLETION OF TASK)

INITIAL CONDITIONS:

- Both Units are operating at 100% power.
- No VQ release is in progress.
- No GWRs are in progress.
- The Waste Evaporator and Recycle Evaporator are secured.
- All systems are in normal alignment.
- The RO performing the Unit 1 Mode 1 Periodic Surveillance notified you that flow on OAC point C1A1104 was 94000 scfm during the Unit Vent Stack Flow Rate Meter Channel Check

INITIATING CUE:

Determine what actions (if any) are required to comply with SLCs and perform those actions based on the surveillance requirements.

Enclosure 13.1

Periodic Surveillance Items Data

#	SURVEILLANCE ITEM (Tech Spec Reference)	ACCEPTANCE CRITERIA	QUALIFYING CONDITIONS	COMPUTER POINT ID	DAY SHIFT INITIALS	NIGHT SHIFT INITIALS
85	Unit Vent Stack Flow Rate Meter Channel Check (TR 16.11-7-4)	Instrument in service with > 0 SCFM indicated with any systems exhausting to the unit vent. Circle method used to determine flow rate Local/Computer (%) x 195,000 cfm = _____ cfm	(58)(59)	C1A1104		

-
- (58) The unit vent stack flow rate meter is **NOT** accurate below a flowrate of 97,500 scfm because the loop is **NOT** calibrated below that flowrate. This is due to the inaccuracy of the loop at low flows which is induced by the square root extractor. If the flowrate is below 97,500 scfm determine if this is being caused by ventilation system alignments. If the low flow is due to ventilation system alignments then consider the instrument operable, otherwise consider the instrument inoperable. If the unit vent stack flow rate meter is inoperable or reading less than 97,500 scfm, refer to PT/1/A/4450/017 (Unit Vent Flow Manual Calculation).
- (59) If C1A1104 is **NOT** in service, determine unit vent flow rate by multiplying 195,000 cfm by reading on local meter 1VAP8300 (AB-594, HH-52) and record in space provided above.

Duke Power Company
Catawba Nuclear Station

Procedure No.

PT/ 1/A/4450/017

Revision No.

012

Unit Vent Flow Manual Calculation

Electronic Reference No.

CN005G80

Continuous Use

PERFORMANCE

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(ISSUED) - PDF Format

Unit Vent Flow Manual Calculation

1. Purpose

To provide a means to calculate the flow to the Unit Vent when the Unit Vent Stack Flow Rate Meter is inoperable or flow is less than 97,500 scfm.

2. References

- 2.1 SLC 16.11-7
- 2.2 UFSAR Section 11.5.1.2.2.1

3. Time Required

- 3.1 Manpower - One NLO
- 3.2 Time - 30 minutes
- 3.3 Frequency - Every four hours

4. Prerequisite Tests

None

5. Test Equipment

None

6. Limits and Precautions

None

7. Required Unit Status

None

8. Prerequisite System Conditions

- 8.1 The Unit Vent Stack Flow Rate Meter is inoperable or flow is less than 97,500 scfm.
- 8.2 The Unit Vent is in service.

9. Test Method

- 9.1 The various systems exhaust flow to the Unit Vent will be obtained using local indication and recorded on Enclosure 13.1 (Total Unit Vent Flow Calculation Sheet).
- 9.2 The individual exhaust flows will be added to obtain total exhaust flow to the Unit Vent and recorded on Enclosure 13.1 (Total Unit Vent Flow Calculation Sheet).

10. Data Required

Complete Enclosure 13.1 (Total Unit Vent Flow Calculation Sheet).

11. Acceptance Criteria

The Unit Vent Stack Flow Rate is estimated at least once per four hours. (SLC 16.11-7)

12. Procedure

- 12.1 Complete Enclosure 13.1 (Total Unit Vent Flow Calculation Sheet) as follows:
 - 12.1.1 Record the individual systems exhaust flows.
 - 12.1.2 Calculate the total Unit Vent exhaust flow by adding together the individual systems exhaust flows.
 - 12.1.3 Record the date and time the calculation was completed.

<p>NOTE: Additional copies of Enclosure 13.1 (Total Unit Vent Flow Calculation Sheet) may be made as necessary and attached.</p>

- 12.2 Repeat Step 12.1 every four hours until the Unit Vent Stack Flow Rate Meter is declared operable and flow is greater than or equal to 97,500 scfm.
- 12.3 Ensure any additional copies of Enclosure 13.1 (Total Unit Vent Flow Calculation Sheet) used are attached.

12.4 Evaluate the acceptance criteria by performing one of the following:

_____ 12.4.1 Verify the acceptance criteria specified in Section 11 is met.

OR

_____ 12.4.2 **IF** the acceptance criteria is **NOT** met, perform the following:

Notify the Unit/WCC SRO that the acceptance criteria is **NOT** met.

_____ / _____
Unit/WCC SRO Contacted Date Time

Initiate a PIP to document the test failure.

Document all issues on a procedure discrepancy sheet.

_____ 12.5 **IF** any discrepancy is noted during the performance of this test that does **NOT** keep the test from meeting the acceptance criteria, it shall be given to the Unit/WCC SRO for evaluation via a discrepancy sheet.

_____ 12.6 Submit PT/1/A/4450/017 (Unit Vent Flow Manual Calculation) to the Unit/WCC SRO.

13. Enclosures

13.1 Total Unit Vent Flow Calculation Sheet

13.2 Systems Design Flow Rates

Total Unit Vent Flow Calculation Sheet

SYSTEM	FLOW INSTRUMENT	LOCATION	READING (CFM)	INITIALS
VA	1VAP5280 ABFXU-1 Air Flow	1MC3		
VE	1VEP5180 VE 1A Flow To Stack	1MC5		
VE	1VEP5200 VE 1B Flow To Stack	1MC5		
VF	1VFP5310 VF Oflt Air Flow Trm A	1MC5		
VF	1VFP5340 VF Oflt Air Flow Trm B	1MC5		
VA	1ABUXF Discharge Air Flow (1ABUX-AFMD-1)	1ELCP0111 (1AB-ECP-1) AB-594, HH-55		
VP	1VPP5200 VP Exhaust Air Flow	1ELCP0110 (1RB-CP-1) AB-594, LL-52		
VP	1VPP5180 Incore Instrument Room Exhaust Air Flow	1ELCP0110 (1RB-CP-1) AB-594, LL-52		
WG	0WGP5941 WG Discharge Flow To Unit Vent	AB-543, QQ-59 (On wall beside WG Panel)		
VQ	(1)	N/A		
TL	(2)	N/A		
NB	(3)	N/A		
WL	(3)	N/A		
ZJ	(4)	N/A		
TOTAL UNIT VENT FLOW (sum of all readings)				
DATE/ TIME COMPLETED				

- (1) If a VQ release is in progress, use 350 CFM; otherwise, N/A.
- (2) If the TL System is in operation, use 1260 CFM; otherwise, N/A.
- (3) If the Waste Evaporator or Recycle Evaporator is operating, use 92 CFM; otherwise, N/A.
- (4) If the ZJ System is in operation, use 60 CFM; otherwise, N/A.

NOTE: If an instrument is out of service, enter the design flow at the exhaust line if exhausting to the Unit Vent, or enter '0' if isolated from the Unit Vent. Design flows are listed on Enclosure 13.2 (Systems Design Flow Rates).

Enclosure 13.2
Systems Design Flow Rates

PT/1/A/4450/017
Page 1 of 1

System	Flow Rate
VA Filtered Exhaust (two trains in service)	60,000 cfm
VA Filtered Exhaust (one train in service)	30,000 cfm
VE	9000 cfm
VF	33,130 cfm
VA Unfiltered Exhaust (two trains in service)	40,700 cfm
VA Unfiltered Exhaust (one train in service)	20,350 cfm
VP Containment Purge Exhaust	25,000 cfm
VP Incore Instrument Room Purge Exhaust	1000 cfm
WG	20 cfm

VF OTLT AIR FLOW | VF INLT
TRN A | TRN B | AIR FLOW



TORNADO
ISOL TRN A

INITIATE
RESET
INIT
RESET

1 VF-3A
VF FILTER B
MINIFLOW INLT

OPEN
CLOSE OPEN
CLOSE
TEMKA-F03D



1 VF-1A
VF FILTER A
MINIFLOW OTLT

CLOSE AUTO OPEN
TEMKA-F03E



VF FILT A
MODE SEL

BYPASS FILT
TEMKA-F03F

VF EXH
TRN A

ON
OFF
TEMKI-R05A

VF EXH
FAN 1A1

ON
OFF
TEMKI-R05A

VF EXH
FAN 1A2

ON
OFF
TEMKI-R05B

VF TRAIN A
X-TRN INTLK

BYPASS NORM
TEMKA-F03G



VF
SUP UNIT

OFF AUTO
TEMKA-F03H

VF TRAIN B
X-TRN INTLK

BYPASS NORM
TEMKA-F03I

TORNADO
ISOL TRN B

INITIATE
RESET
INIT
RESET

1 VF-4B
VF FILTER A
MINIFLOW INLT

OPEN
CLOSE OPEN
CLOSE
TEMKA-F03E



1 VF-2B
VF FILTER B
MINIFLOW OTLT

CLOSE AUTO OPEN
TEMKA-F03D



VF FILT B
MODE SEL

BYPASS FILT
TEMKA-F03F

VF EXH
TRN B

ON
OFF
TEMKI-R05A

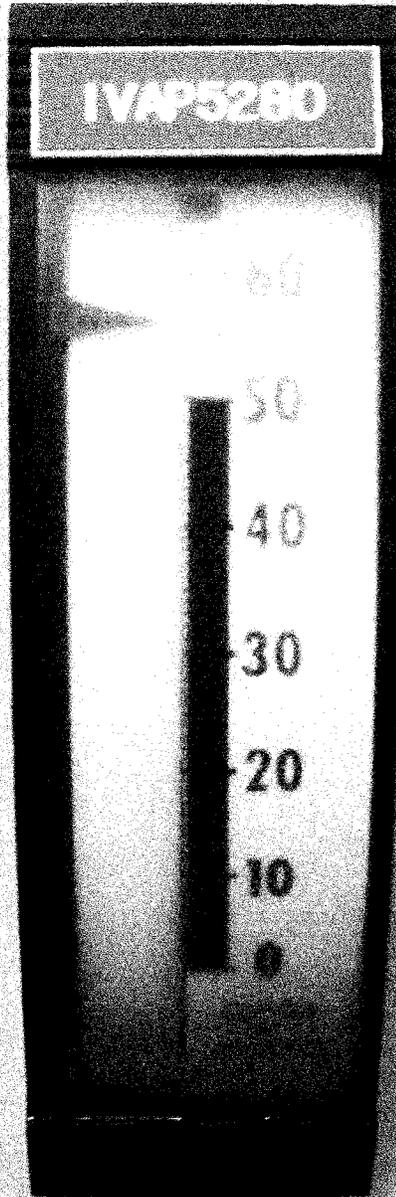
VF EXH
FAN 1B1

ON
OFF
TEMKI-R05A

VF EXH
FAN 1B2

ON
OFF
TEMKI-R05B

ABFXU-1
AIR
FLOW



CAUTION INSTRUMENT
WILL READ INACURATE
DURING SINGLE TRAIN
OPERATION

An NLO in the field reports
that the flow reading on
1ABUX-AFMD-1 reads
27000 scfm.

CATAWBA NUCLEAR STATION JOB PERFORMANCE MEASURE

JPM 4S ADMIN

**Determine Reporting per RP/0/B/5000/013 (NRC
Notification Requirements)**

CANDIDATE

EXAMINER

READ TO OPERATOR

DIRECTION TO TRAINEE:

I will explain the initial conditions, and state the task to be performed. All control room steps shall be performed for this JPM, including any required communications. I will provide initiating cues and reports on other actions when directed by you. Ensure you indicate to me when you understand your assigned task. To indicate that you have completed your assigned task return the handout sheet I provided you.

INITIAL CONDITIONS:

- A vendor was performing work activities in the S/G bowl area during No Mode.
- The latest RP survey of the S/G bowl area indicated removable surface contamination was 42,000 dpm/100 square cm.
- The vendor was overcome with heat exhaustion and fell into the S/G bowl area.
- The fall caused a compound fracture on his right leg that pierced his bubble suit.
- Due to congested conditions and other delays in lifesaving activities, the injured individual received an estimated exposure of 16 Rem.
- Due to the nature of his injury, he was immediately transferred to Piedmont Medical Center.
- A news van is parked at the access road and site personnel are preparing a press release for immediate delivery to the media.

INITIATING CUE:

Determine all applicable NRC notifications of 24 hours or less per RP/0/B/5000/013 (NRC Reporting Requirements) Step 2.1. Record your answers on the attached page.

Start Time: _____

EXAMINER NOTE: Area into which the vendor fell would be considered a Contaminated Area (i.e. $> 5000 \text{ dpm}/100\text{cm}^2$) per NSD507 Radiation Protection, but not Highly Contaminated ($> 50,000 \text{ dpm}/100\text{cm}^2$).

EXAMINER NOTE: Normal exit from the plant requires going through a whole body counter. If contamination is detected, the monitor will alarm, but the individual is allowed a second try. If the monitor alarms twice, RP must be called. Anyone coming out of the RCA, which cannot get through the Personnel Contamination Monitors without alarm are held until they can get through the monitor without an alarm. NSD 507 states that medical attention takes precedence over decontamination, and if an individual is contaminated and injured, the individual will be transported offsite with RP accompaniment.

<p>1 RP/0/B/5000/013 Step 2.1</p> <p>Determine the appropriate NRC notifications from the following sources:</p> <ul style="list-style-type: none"> • Enclosure 4.1, "Events Requiring Immediate NRC Notification" • Enclosure 4.2, "Events Requiring 1-Hour NRC Notification" • Enclosure 4.3, "Events Requiring 4-Hour NRC Notification" • Enclosure 4.4, "Events Requiring 8-Hour NRC Notification" • Enclosure 4.5, "Events Requiring 24-Hour NRC Notification" • Enclosure 4.6, "Events Requiring 30 Day NRC Notification" • Enclosure 4.7, "Events Requiring 60 Day NRC Notification" • Enclosure 4.8, "List of System (ESF) Actuations for Catawba" • NSD 201, "Reporting Requirements" • NSD 202, "Reportability" <p>STANDARD: Both of the following notifications are required and critical items:</p> <p><u>4 hour notification</u> *10CFR50.72(b)(2)(xi) Offsite Notification (News Release) Any event or situation related to the health and safety of the public or onsite personnel, or protection of the environment, for which a news release is planned or notification to other government agencies has been or will be made. Such an event may include an on-site fatality, transport of an injured or ill employee to a hospital by ambulance, or an inadvertent release of radioactively contaminated materials.</p> <p><u>8 hour notification</u> *10CFR50.72(b)(3)(xii) Offsite Medical (Contaminated Injury) Any event requiring the transport of a radioactively contaminated person to an off-site medical facility for treatment.</p>	<p>CRITICAL STEP *</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
<p>COMMENTS:</p>	

TIME STOP: _____



**CANDIDATE CUE SHEET
(TO BE RETURNED TO EXAMINER UPON COMPLETION OF TASK)**

INITIAL CONDITIONS:

- A vendor was performing work activities in the S/G bowl area during No Mode.
- The latest RP survey of the S/G bowl area indicated removable surface contamination was 42,000 dpm/100 square cm.
- The vendor was overcome with heat exhaustion and fell into the S/G bowl area.
- The fall caused a compound fracture on his right leg that pierced his bubble suit.
- Due to congested conditions and other delays in lifesaving activities, the injured individual received an estimated exposure of 16 Rem.
- Due to the nature of his injury, he was immediately transferred to Piedmont Medical Center.
- A news van is parked at the access road and site personnel are preparing a press release for immediate delivery to the media.

INITIATING CUE:

Determine all applicable NRC notifications of 24 hours or less per RP/0/B/5000/013 (NRC Reporting Requirements) Step 2.1. Record your answers on the attached page.

CANDIDATE CUE SHEET
(TO BE RETURNED TO EXAMINER UPON COMPLETION OF TASK)

CANDIDATE NAME: _____

IMMEDIATE NOTIFICATION(S)

1 HOUR NOTIFICATION(S)

4 HOUR NOTIFICATION(S)

8 HOUR NOTIFICATION(S)

24 HOUR NOTIFICATION(S)

Duke Energy Catawba Nuclear Station Hazardous Materials Spill Response	Procedure No. RP/0/B/5000/008	
	Revision No. 031	
	Electronic Reference No. CN005GO3	
Reference Use		
<table border="1" style="width: 100%;"> <tr> <td style="width: 20%;">PERFORMANCE</td> </tr> </table>		PERFORMANCE
PERFORMANCE		
***** UNCONTROLLED FOR PRINT ***** (ISSUED) - PDF Format		

KEY 5R

Hazardous Materials Spill Response

1. Symptoms

- 1.1 ✓ An unplanned or uncontrolled release of a chemical product, oil, or hazardous waste from a container or system in excess of normal drips and splatters.
- ✓ The release of water from a plant system to the environment may also be considered a spill, especially for chemically treated water systems such as the fire protection system or drinking water system which both contain chlorine.
- ✓ A spill to the "environment" means soil, water, or air that is not under the direct control of mankind. For CNS the environment includes all ground/soil/gravel areas that are not protected by a liner such as concrete or asphalt (in good condition - not broken or cracked), the air outside any building or air that is discharged from a vent to the outside, and all exterior waters including the Standby Nuclear Service Water Pond, (SNSWP), wetlands (environmentally sensitive areas), and Lake Wylie.

NOTE:

- ✓ 1. On-site is defined as inside the Owner Controlled Area.
- ✓ 2. Off-site is defined as outside the Owner Controlled Area.
- ✓ 3. Navigable Waters is defined as Lake Wylie and the Standby Nuclear Service Water Pond.

2. Immediate Actions

- 2.1 For On-site Spill Response, go to Enclosure 4.1.
- 2.2 For Off-site Spill Response, go to Enclosure 4.2.
- ✓ 2.3 For Oil Spills to Navigable Waters (Lake Wylie OR SNSW Pond), go to Enclosure 4.3.

3. Subsequent Actions

- 3.1 On-site, go to Enclosure 4.1.
- 3.2 Off-site, go to Enclosure 4.2.
- ✓ 3.3 Oil Spills to Navigable Waters (Lake Wylie OR SNSW Pond), go to Enclosure 4.3.

4. Enclosures

- 4.1 On-site Spill Response
- 4.2 Off-site Spill Response
- ✓ 4.3 Oil Spills to Navigable Waters (Lake Wylie OR SNSW Pond)
- 4.4 HazMat Emergency Response Team Activation
- 4.5 HazMat Emergency Response Team Activation for Oil Spills
- 4.6 Courtesy Notification to States and Counties for a Non-emergency Plant Event
- 4.7 Corrective Actions or Commitments

Enclosure 4.1
On-site Spill Response

RP/0/B/5000/008
Page 1 of 5

1. Immediate Actions

1.1 Record the following information taken from the caller:

- Name/group of person reporting incident: _____

- Location of spill/leak: _____
Elevation: _____ Column Line: _____
- Name of product/material spilled: _____
- Is the product flammable and/or a gas? _____
- Equipment/components affected: _____

- Are there any injured people? _____ How many? _____
- Are there people in the immediate area who need to be relocated to a safer area?

- Is the source of the spill/leak isolated/secured? _____
- Is the spill/leak continuing? _____
- Is the spill/leak confined/contained? _____
- Call back number: _____
- Time of call: _____

NOTE: Spills or leaks involving flammable products or gases may require the response of the entire Fire Brigade as determined by the responding Fire Brigade Leader.

_____ 1.2 Dispatch Fire Brigade Leader to investigate the spill/leak and determine the appropriate response.

_____ 1.3 Announce the following over the plant PA system:

“Attention all plant personnel. Attention all plant personnel. This is the Control Room. A chemical spill/leak involving _____ has been reported.
(name of product)

This spill/leak is occurring at _____. Please stay clear of this area
(provide plant location)
until further notice.”

On-site Spill Response

- _____ 1.4 Determine staging area/command post established by responding Fire Brigade Leader.
- 1.5 **IF** the Fire Brigade Leader requests immediate support, perform the following:
- _____ • Dispatch the on-site Fire Brigade (RP/0/B/5000/029, Fire Brigade Response).
 - _____ • Notify Security (CAS-5364 or SAS-3377) to perform the following:
 - _____ • Assist the Fire Brigade with securing the spill area.
 - _____ • Initiate a MERT response for actual or potential injuries.
 - _____ • Report to staging area/command post (provide location).

NOTE: The Fire Brigade Leader's evaluation of the spill/leak determines the need for a HazMat Emergency Response Team activation. The activation is a two phase response. An initial pager activation has the duty HazMat technician respond to assist the Fire Brigade Leader with the evaluation of the spill/leak. The Fire Brigade Leader assisted by the duty HazMat technician determines the need to call out the entire HazMat Emergency Response Team (second phase) with a second pager activation.

- 1.6 **WHEN** the Fire Brigade Leader reports the status of the spill/leak, determine the appropriate procedural guidance as follows:

NOTE: Oil spills consisting of non-flammable/combustible material which: 1.) are not a threat to navigable waters, **OR** 2.) are not from a transformer, **DO NOT** require any action by the HazMat Emergency Response Team.

- _____ 1.6.1 **IF** the spill/leak involves oil from a transformer, go to Environmental Work Practice 5.1, Enclosure 3.11, for PCB content and guidance.
- _____ 1.6.2 **IF** the spill/leak involves oil released to navigable water (Lake Wylie or SNSW Pond), or any imminent potential of such, go to Enclosure 4.3.
- _____ 1.6.3 **IF** the spill/leak involves insulating materials/asbestos, or water from RF, RY or YD systems, go to step 2.6, exit procedure and go to Environmental Work Practice 5.1.
- _____ 1.6.4 **IF** any of the following conditions exist, activate the HazMat pagers to obtain the assistance of the duty HazMat technician. Refer to Enclosure 4.4:
 - A. Spill/leak Status: (spills involving insulating material/asbestos or designated system waters [RF, RY, or YD] do not require a HazMat response)
 - _____ • Source of spill/leak has **NOT** been secured/isolated, **OR**

Enclosure 4.1
On-site Spill Response

RP/0/B/5000/008
Page 3 of 5

_____ • Release of product/substance is still occurring, **OR**

_____ • Spill/leak has **NOT** been confined/contained, **OR**

B. Product/substance Composition:

_____ • Unknown composition, **OR**

_____ • Labeled/known HAZARDOUS WASTE, **OR**

C. Response Complications:

_____ • Potential risk of fire or explosion, **OR**

_____ • Personnel exposure hazard created (includes additional PPE requirements beyond any currently in use at the spill/leak site), **OR**

_____ • Special equipment needed to contain the spill/leak is **NOT** available.

1.6.5 **IF** the spilled/leaked product/substance can be safely cleaned up by personnel responsible for the spill with absorbent materials or flushed to an appropriate site wastewater treatment system, perform the following:

_____ A. Direct the personnel responsible for the spill/leak to perform the cleanup.

_____ B. Make a copy of this completed procedure and send it to Emergency Planning (CN01EP).

_____ C. **IF** spill/leak areas involved are served by VA, VC, VE, VF or VP Systems, make a copy of this completed procedure and send to MCE Engineering (CN03SE).

_____ D. Send the completed procedure to Document Management.

_____ E. Exit this procedure and go to Environmental Work Practice 5.1.

_____ 1.6.6 **IF** the Fire Brigade Leader and HazMat technician determine that additional HazMat support is required, initiate a full HazMat Emergency Response Team callout by performing a second HazMat pager activation. Refer to Enclosure 4.4.

2. Subsequent Actions

NOTE: Lines in left margin are for place-keeping. Subsequent Actions may be performed simultaneously.

- _____ 2.1 Refer to RP/0/A/5000/001 (Classification of Emergency).
- _____ 2.2 Contact Environmental, Health and Safety (EHS), ext. 3333, for assistance in reporting to state, local, or federal authorities. After hours, contact the EHS Duty person by phone or pager. **IF** no answer, use the EHS group page 777-3333, which will page all EHS personnel.
- 2.3 **IF** an emergency has **NOT** been declared, perform the following:
 - _____ 2.3.1 **IF** the entire HazMat Emergency Response Team has been called out from off-site, notify York County Emergency Management about the event through the York County Telecommunicator (selective signal phone number 513) and, as necessary, request additional support from the County HazMat Technicians. {PIP 0-C00-01689}

NOTE:

1. A request for emergency response support (except an ambulance) from an off-site agency requires a 4-hour notification of the NRC as an "Off-site Notification" per RP/0/B/5000/013 (NRC Notification Requirements).
2. A request for ambulance support for a "contaminated injury" is an 8-hour notification and the request for transport of a "clean injury" does not require a NRC notification.

- _____ 2.3.2 **IF** the assistance of the York County HazMat Technicians is requested **AND** they respond, notify the NRC under the 4-hour notification requirement for off-site notifications.
- _____ 2.3.3 **IF** the NRC will **NOT** be notified of this event per RP/0/B/5000/013, perform the following:
 - A. Notify the duty Emergency Planner.
 - B. Notify the Public Affairs duty person.
 - C. Make a courtesy notification to states and counties per Enclosure 4.6.
- _____ 2.4 **IF** additional information is desired, refer to the Hazardous Materials Response Plan located in the Catawba Nuclear Station Emergency Plan manual (green tabbed).

On-site Spill Response

- _____ 2.5 Refer to the Environmental Work Practice Manual 5.1, Spill Response, Enclosure 3.2, for actions to take after the spill has been neutralized or stabilized.

- 2.6 **WHEN** this procedure has been completed, perform the following actions:
 - _____ 2.6.1 Send a copy of the completed procedure to Emergency Planning (CN01EP).
 - _____ 2.6.2 **IF** spill/leak areas involved are served by VA, VC, VE, VF or VP Systems, send a copy of the completed procedure to MCE Engineering (CN03SE).
 - _____ 2.6.3 Send the completed procedure to Document Management.

1. Immediate Actions

- _____ 1.1 Upon receiving a call from EHS or RP involving the release of a hazardous substance or material (hazardous materials, hazardous wastes or radiological materials) shipped from CNS, discuss reporting requirements under NSD 202 (Reportability) and off-site notification per RP/0/B/5000/013 (NRC Notification Requirements).

2. Subsequent Actions

<p>NOTE: Lines in left margin are for place keeping. Subsequent actions may be performed simultaneously.</p>

- 2.1 Hazardous Materials/Hazardous Waste Incidents/Radiological Materials
- _____ 2.1.1 Notify Community Relations of the incident (pager 777-7388).
- _____ 2.1.2 **IF** incident occurred in York County, South Carolina, notify York County EOC of the incident at 803-329-1110 and provide the caller's name and phone number. {PIP #C-00-1689}
- _____ 2.1.3 Notify Duke Power Risk Management at (704) 382-8186 (24-hour phonemail service).
- _____ 2.1.4 Notify American Nuclear Insurers (ANI) at (860) 682-1301.
- 2.2 **WHEN** this procedure has been completed, perform the following actions:
- _____ 2.2.1 Send a copy of the completed procedure to Emergency Planning (CN01EP).
- _____ 2.2.2 Send the completed procedure to Document Management.

**Oil Spills to Navigable Waters (Lake Wylie
OR SNSW Pond)**

1. Immediate Actions

- CTK** 1.1 Upon receiving notification of a spill of oil (petroleum products, synthetic oils, hydraulic oils, etc.) to Lake Wylie or the Standby Nuclear Service Water Pond which requires clean-up, request the caller's name and phone number:

Name: Jim Barnes Phone: 3038

- CTK** 1.2 Dispatch the Fire Brigade Leader to investigate and report status of the spill.

NOTE: CNS HazMat Emergency Response Team will call the Control Room upon arrival on site.

- CTK** 1.3 Activate the CNS HazMat Emergency Response Team pagers to obtain the assistance of the duty HazMat Team technician. Refer to Enclosure 4.5 to initiate a response.

2. Subsequent Actions

- _____ 2.1 Contact EHS at extension 3333 for assistance in reporting to state, local, or federal authorities. After hours, contact the EHS Duty person by phone or pager. **IF** no answer, use the EHS group page 777-3333, which will page all EHS personnel.

- 2.2 **IF** an emergency has **NOT** been declared, perform the following:

- _____ 2.2.1 Notify York County Emergency Management about the event through the York County Telecommunicator (selective signal phone number 513) and, as necessary, request additional support from the county. {PIP # C-00-1689}

NOTE:

1. A request for emergency response support (except an ambulance) from an off-site agency requires a 4-hour notification of the NRC as an "Off-site Notification" per RP/0/B/5000/013 (NRC Notification Requirements).
2. A request for ambulance support for a "contaminated injury" is an 8-hour notification and the request for transport of a "clean injury" does not require a NRC notification.

- _____ 2.2.2 **IF** the assistance of the York County HazMat Technicians is requested **AND** they respond, notify the NRC under the 4-hour notification requirement for off-site notifications.

Oil Spills to Navigable Waters (Lake Wylie
OR SNSW Pond)

- _____ 2.2.3 **IF** the NRC will **NOT** be notified of this event per RP/0/B/5000/013, perform the following:
- A. Notify the duty Emergency Planner.
 - B. Notify the Public Affairs duty person.
 - C. Make a courtesy notification to states and counties per Enclosure 4.6.
- _____ 2.3 In the event that a responsible group is not identified, the Operations Shift Manager (or designee) shall initiate a PIP. Refer to Environmental Work Practice 5.1 for information to include in the PIP.
- 2.4 **WHEN** this procedure has been completed, perform the following actions:
- _____ 2.4.1 Send a copy of the completed procedure to Emergency Planning (CN01EP).
- _____ 2.4.2 Send the completed procedure to Document Management.

**HazMat Emergency Response Team
Activation****1. HazMat Emergency Response Team Notification During an Emergency**

_____ 1.1 **IF** the HazMat Emergency Response Team is being called out for a drill, go to Step 2.

1.2 Activate the off-site emergency pager system Quiktel Key Pad located in the Control Room.

_____ 1.2.1 Press the <EXIT> key to assure the key pad is cleared.

_____ 1.2.2 Type in "SPILL"

1.2.3 Press <ENTER>

_____ 1.2.4 Press <M> key (for Message)

_____ 1.2.5 Type the following message:

"CNS Hazardous Materials Spill; All Team Members Respond. Duty Person call 803-701-5164."

_____ 1.2.6 Press <ENTER>

NOTE: Pager activation can be delayed up to 5 minutes depending on pager system status.
--

_____ 1.2.7 Monitor the confirmation pagers located at the Quiktel Key Pad to verify proper pager activation.

_____ 1.3 **IF** the Quiktel Key Pad is unavailable, dial 9-999-777-8091 and enter your phone number (e.g., 803-701-3250), and press #. The HazMat Emergency Response Team duty person will return your call and make additional call-outs as necessary to ensure team response.

**HazMat Emergency Response Team
Activation****2. HazMat Emergency Response Team Notification During a Drill**

2.1 Activate the off-site emergency pager system Quiktel Key Pad located in the Control Room.

_____ 2.1.1 Press the <EXIT> key to assure the key pad is cleared.

_____ 2.1.2 Type in "SPILL"

2.1.3 Press <ENTER>

_____ 2.1.4 Press <M> key (for Message)

_____ 2.1.5 Type in the following message:

"This is a Drill. CNS Hazardous Materials Spill; All Team Members Respond. Duty Person call 803-701-5164. This is a Drill."

_____ 2.1.6 Press <ENTER>

NOTE: Pager activation can be delayed up to 5 minutes depending on pager system status.
--

_____ 2.1.7 Monitor the confirmation pagers located at the Quiktel Key Pad to verify proper pager activation.

_____ 2.2 **IF** the Quiktel Key Pad is unavailable, dial 9-999-777-8091 and enter your phone number (e.g., 803-701-3250), and press #. The HazMat Emergency Response Team duty person will return your call and make additional call-outs as necessary to ensure team response.

**HazMat Emergency Response Team
Activation**

3. HazMat Emergency Response Team

John Bailes

Doug Gates

Ronnie Bangle

James Hambright

Doug Baysinger

Roy Hembree

Eddie Benfield

David Hord

Cleve Brown

Ann Kitts

Jon Cain

Ken McKown

Robin Caskey

Andy Miller

Tom Christensen

Ed Miller

Steve Cooper

Jason Nettles

Tim Daniels

Margot Rott

Gene Dial

Jeremy Sistare

Jim Faile

Rick Tack

Richard Flowers

**HazMat Emergency Response Team
Activation for Oil Spills**

- NOTES:**
1. ✓ The HazMat Emergency Response Team will call the Control Room to determine any personnel or radiological safety hazards associated with their response to the site.
 2. ✓ The HazMat Emergency Response Team will respond to warehouse #9 unless the Control Room advises them otherwise.
 3. ✓ Pager activation can be delayed up to 5 minutes depending on pager system status.

1. HazMat Emergency Response Team Notification for an Actual Oil Spill

N/A

1.1 **IF** the HazMat Emergency Response Team is being called out for a drill, go to Step 2.

1.2 ✓ Activate the off-site emergency pager system Quiktel Key Pad located in the Control Room.

CTK 1.2.1 Press the <EXIT> key to assure the key pad is cleared.

CTK 1.2.2 Type "SPILL"

CTK 1.2.3 Press <ENTER>

CTK 1.2.4 Press <M> key (for Message)

CTK 1.2.5 Type in the following message:

"Oil spill to water at CNS. HazMat members respond. Duty person call 803-701-5164."

CTK 1.2.6 Press <ENTER>

CTK 1.2.7 Monitor the confirmation pagers located at the Quiktel Key Pad to verify proper pager activation.

N/A

1.3 **IF** the Quiktel Key Pad is unavailable, dial 9-999-777-8091 and enter your phone number (e.g., 803-701-5164), and press #. The HazMat Emergency Response Team duty person will return your call.

HazMat Emergency Response Team
Activation for Oil Spills

2. HazMat Emergency Response Team Notification for a Drill

2.1 Activate the off-site emergency pager system Quiktel Key Pad located in the Simulator.

_____ 2.1.1 Press the <EXIT> key to assure the key pad is cleared.

_____ 2.1.2 Type "SPILL"

_____ 2.1.3 Press <ENTER>

_____ 2.1.4 Press <M> key (for Message)

_____ 2.1.5 Type the following message:

**"This is a Drill. Oil spill to water at CNS. HazMat members respond.
Duty person call 803-701-5164. This is a Drill."**

_____ 2.1.6 Press <ENTER>

_____ 2.2 **IF** the Quiktel Key Pad is unavailable, dial 9-999-777-8091 and enter your phone number (e.g., 803-701-5164), and press #. The HazMat Emergency Response Team duty person will return your call.

**Courtesy Notification to States and Counties
for a Non-emergency Plant Event**

NOTE: This enclosure provides instruction for notifying state and county emergency preparedness management agencies (primary WP/EOCs) and EnergyQuest of **non-emergency** plant events by completing a Courtesy Notification Form (page 4 of 4) and faxing it to each agency, then verifying its receipt with a follow-up phone call.
{PIP 0-C00-01689}

1. Complete the Courtesy Notification Form as follows:

- _____ 1.1 Provide the time and date of:
- Notification
 - Event
- _____ 1.2 Mark the event(s) that describes the reason for the notification.
- _____ 1.3 Describe the event briefly, especially any impact to the site (damage, impact on operations, and any requested support received from off-site agencies).

NOTE:

1. The confirmation code number is randomly assigned to each message. This provides a method for authenticating an off-site agency official that calls the site over normal phone lines requesting additional information about the reported event. Knowing the confirmation code number shall be the authorization for site personnel to provide information about the event to the caller.
2. Calls received over selective signal lines are considered to be secure and do not require knowledge of the confirmation code number to receive additional information about the event.

- _____ 1.4 Assign a 2-digit confirmation number to the notification form.
- _____ 1.5 Print the name and title of the individual reporting the notification.

**Courtesy Notification to States and Counties
for a Non-emergency Plant Event**

NOTE: Step 2 sends a group fax and step 3 sends the fax to agencies individually.

2. Notification by Group Fax

- _____ 2.1 Notify the states and county agencies (primary WP/EOCs) of a **non-emergency** plant event(s) by completing a Courtesy Notification Form (page 4 of 4) and transmitting it to the states and counties as follows:

NOTE:

1. Performing steps 2.1.1 through 2.1.3 sends the Courtesy Notification Form (page 4 of 4) to multiple locations in sequence.
2. Failure to press the pre-programmed buttons in a rapid sequence will result in sending the fax to only an individual agency.

- _____ 2.1.1 Place the completed form (page 4 of 4) face down into the fax machine.

- _____ 2.1.2 Press the pre-programmed one-touch speed dial pushbutton for each of the following agencies in quick succession (i.e., press each button in approximately 1 second intervals until completed):

- _____ York Co WP/EOC
- _____ Gaston Co. WP/EOC
- _____ Meck Co. WP
- _____ NC WP/EOC
- _____ SC WP/EOC
- _____ EnergyQuest
- _____ Duke ECOC

- _____ 2.1.3 Press START

- _____ 2.2 Verify by one of the following means that the form (page 4 of 4) was received by each of the agencies:

- _____ Selective Signal (Enclosure 1.5, Emergency Response Telephone Directory)
- _____ Duke or Commercial Telephone (Enclosures 1.12 – 1.20, Emergency Response Telephone Directory)

- _____ 2.3 **IF** any agency did not receive the group fax, then go to step 3.

- _____ 2.4 Fax a copy of the Courtesy Notification Form (page 4 of 4) to Emergency Planning at 3151.

- _____ 2.5 Report any communications equipment failures to the duty Emergency Planner. {1}

**Courtesy Notification to States and Counties
for a Non-emergency Plant Event**

3. Notification by Individual Fax

- _____ 3.1 Notify the states and county agencies (primary WP/EOCs) of a **non-emergency** plant event(s) by completing a Courtesy Notification Form (page 4 of 4) and transmitting it to the states and counties as follows:

NOTE: Performing steps 3.1.1 through 3.1.3 sends the Courtesy Notification Form (page 4 of 4) to individual agencies one at a time.

- _____ 3.1.1 Place the completed form (page 4 of 4) face down into the fax machine.

NOTE: SC WP/EOC and EnergyQuest list two fax numbers. Use the fax number for sending Emergency Notifications.

- _____ 3.1.2 Enter the individual fax phone number (Enclosures 1.12 through 1.16 in the Emergency Response Phone Book) for the desired individual agency (WP/EOC). The Duke ECOE is listed in Enclosure 1.18. EnergyQuest fax number is listed in Enclosure 1.19.
- _____ 3.1.3 Press START.
- _____ 3.1.4 Repeat steps 3.1.1 through 3.1.3 until all of the desired agencies have been faxed the form (page 4 of 4).
- _____ 3.2 Verify by one of the following means that the form (page 4 of 4) was received by the agency(s):
- _____ Selective Signal (Encl. 1.5, Emergency Response Telephone Directory)
 - _____ Duke or Commercial Telephone (Enclosures 1.12 – 1.20, Emergency Response Telephone Directory)
- _____ 3.3 Fax a copy of the completed Courtesy Notification Form (page 4 of 4) to Emergency Planning at 3151.
- _____ 3.4 Report any communications equipment failures to the duty Emergency Planner. {1}

Courtesy Notification to States and Counties
for a Non-emergency Plant Event

DUKE POWER COMPANY
CATAWBA NUCLEAR STATION

COURTESY NOTIFICATION FORM
NON-EMERGENCY EVENTS

Time/Date Of Notification: _____ / _____

Time/Date Of Event: _____ / _____

Event (X):

- | | | |
|-------------------------------------|--|---|
| <input type="checkbox"/> Earthquake | <input type="checkbox"/> Toxic Gases | <input type="checkbox"/> Fatality |
| <input type="checkbox"/> Flood | <input type="checkbox"/> Civil Disturbance | <input type="checkbox"/> Fire Response by
Bethel/Newport |
| <input type="checkbox"/> Hurricane | <input type="checkbox"/> Bomb Threat | <input type="checkbox"/> Medical Response
by Ambulance |
| <input type="checkbox"/> Ice/Snow | <input type="checkbox"/> Vehicle Crash | <input type="checkbox"/> HazMat /Spill
Response |
| <input type="checkbox"/> Tornado | <input type="checkbox"/> Explosion | <input type="checkbox"/> Other Events |

Description:

Confirmation Code Number: _____ (This number is authentication for any off-site
agency caller to be given information about the event).

Confirmation Phone Number: (803) 831-8185

Reported By: _____ Title: _____

Enclosure 4.7
Corrective Actions or Commitments

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Page 1 of 1

- {1} PIP C03-05581, CA #2
- {2} PIP C03-04430, (Revision #23)
- {3} PIP C04-03229, CA #4
- {4} PIP C06-08120, CA#2

CATAWBA NUCLEAR STATION JOB PERFORMANCE MEASURE

JPM 5R ADMIN

Notify the HazMat Emergency Response Team

CANDIDATE

EXAMINER

READ TO OPERATOR

DIRECTION TO TRAINEE:

I will explain the initial conditions, and state the task to be performed. All control room steps shall be performed for this JPM, including any required communications. I will provide initiating cues and reports on other actions when directed by you. Ensure you indicate to me when you understand your assigned task. To indicate that you have completed your assigned task return the handout sheet I provided you.

SIMULATOR SETUP

CAUTION:

THIS KEYPAD IS CAPABLE OF ACTIVATING THE EMERGENCY BEEPERS AND IS USED FOR DRILLS. ENSURE QUIKTEL KEYPAD OUTPUT JACK IS UNPLUGGED PRIOR TO STARTING JPM.

INITIATING CUE:

The control room received a 4911 call from Jim Barnes at extension 3038 stating that there was an oil spill on the Standby Nuclear Service Water Pond and it requires cleanup. The Control Room Supervisor has implemented RP/0/B/5000/008 (Hazardous Materials Spill Response).

You are directed to perform step 1.3 of Enclosure 4.3 of RP/0/B/5000/008 (Hazardous Materials Spill Response) to activate the HazMat Emergency Response Team.

Start Time: _____

<p>1 RP/0/B5000/008 Enclosure 4.3, Step 1.3</p> <p>Activate the CNS HazMat Emergency Response Team pagers to obtain the assistance of the duty HazMat Team technician. Refer to Enclosure 4.5 to initiate a response.</p> <p>STANDARD</p> <p>Refers to Enclosure 4.5 to initiate the pagers.</p> <p>COMMENTS</p>	<p>_____ SAT</p> <p>_____ UNSAT</p>
<p>2 RP/0/B5000/008 Enclosure 4.5, Step 1.1</p> <p>If the HazMat Emergency Response Team is being called out for a drill, go to Step 2.</p> <p>STANDARD</p> <p>Determines from the Initial Conditions that this is not a drill and an actual spill has occurred. Step 1.1 is N/A.</p> <p>COMMENTS</p>	<p>_____ SAT</p> <p>_____ UNSAT</p>

<p>3</p>	<p>RP/0/B5000/008 Enclosure 4.5, Step 1.2</p> <p>Activate the off-site emergency pager system Quiktel Key Pad located in the Control Room.</p> <p>1.2.1 Press the <EXIT> key to assure the key pad is cleared.</p> <p>1.2.2 Type "SPILL"</p> <p>1.2.3 Press <ENTER></p> <p>1.2.4 Press <M> key (for Message)</p> <p>1.2.5 Type in the following message:</p> <p>"Oil spill to water at CNS. HazMat members respond. Duty person call 803-701-5164."</p> <p>1.2.6 Press <ENTER></p> <p>STANDARD</p> <p>Candidate locates the Quiktel Key Pad and enters information and transmits.</p> <p>EXAMINER NOTE: The keypad will display an error condition since it is unplugged (to avoid an actual transmission).</p> <p>COMMENTS</p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
<p>4</p>	<p>RP/0/B5000/008 Enclosure 4.5, Step 1.2</p> <p>1.2.7 Monitor the confirmation pagers located at the Quiktel Key Pad to verify proper pager activation</p> <p>STANDARD</p> <p>Candidate locates the confirmation pagers. When located give the following cue.</p> <p><u>CUE:</u> "Message has been sent."</p> <p>COMMENTS</p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
<p>5</p>	<p>RP/0/B5000/008 Enclosure 4.5, Step 1.3</p> <p>If the Quiktel Key Pad is unavailable, dial 9-999-777-8091 and enter your phone number (e.g., 803-701-5164), and press #. The HazMat Emergency Response Team duty person will return your call.</p> <p>STANDARD</p> <p>Determines this step is N/A.</p> <p>COMMENTS</p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>

TIME STOP: _____

CANDIDATE CUE SHEET
(TO BE RETURNED TO EXAMINER UPON COMPLETION OF TASK)

INITIATING CUE:

The control room received a 4911 call from Jim Barnes at extension 3038 stating that there was an oil spill on the Standby Nuclear Service Water Pond and it requires cleanup. The Control Room Supervisor has implemented RP/0/B/5000/008 (Hazardous Materials Spill Response).

You are directed to perform step 1.3 of Enclosure 4.3 of RP/0/B/5000/008 (Hazardous Materials Spill Response) to activate the HazMat Emergency Response Team.

Duke Energy Catawba Nuclear Station Hazardous Materials Spill Response Reference Use	Procedure No. RP/0/B/5000/008	
	Revision No. 031	
	Electronic Reference No. CN005GO3	
<table border="1" style="width: 100%;"> <tr> <td style="width: 20%;">PERFORMANCE</td> </tr> </table> <p style="text-align: center;">***** UNCONTROLLED FOR PRINT *****</p> <p style="text-align: center;">(ISSUED) - PDF Format</p>		PERFORMANCE
PERFORMANCE		

Hazardous Materials Spill Response

1. Symptoms

- 1.1 ✓ An unplanned or uncontrolled release of a chemical product, oil, or hazardous waste from a container or system in excess of normal drips and splatters.

✓ The release of water from a plant system to the environment may also be considered a spill, especially for chemically treated water systems such as the fire protection system or drinking water system which both contain chlorine.

✓ A spill to the "environment" means soil, water, or air that is not under the direct control of mankind. For CNS the environment includes all ground/soil/gravel areas that are not protected by a liner such as concrete or asphalt (in good condition - not broken or cracked), the air outside any building or air that is discharged from a vent to the outside, and all exterior waters including the Standby Nuclear Service Water Pond, (SNSWP), wetlands (environmentally sensitive areas), and Lake Wylie.

<p>NOTE:</p> <ul style="list-style-type: none">✓ 1. On-site is defined as inside the Owner Controlled Area.✓ 2. Off-site is defined as outside the Owner Controlled Area.✓ 3. Navigable Waters is defined as Lake Wylie and the Standby Nuclear Service Water Pond.
--

2. Immediate Actions

N/A 2.1 For On-site Spill Response, go to Enclosure 4.1.

N/A 2.2 For Off-site Spill Response, go to Enclosure 4.2.

2.3 ✓ For Oil Spills to Navigable Waters (Lake Wylie **OR** SNSW Pond), go to Enclosure 4.3.

3. Subsequent Actions

3.1 On-site, go to Enclosure 4.1.

3.2 Off-site, go to Enclosure 4.2.

3.3 ✓ Oil Spills to Navigable Waters (Lake Wylie **OR** SNSW Pond), go to Enclosure 4.3.

4. Enclosures

- 4.1 On-site Spill Response
- 4.2 Off-site Spill Response
- ✓4.3 Oil Spills to Navigable Waters (Lake Wylie OR SNSW Pond)
- 4.4 HazMat Emergency Response Team Activation
- 4.5 HazMat Emergency Response Team Activation for Oil Spills
- 4.6 Courtesy Notification to States and Counties for a Non-emergency Plant Event
- 4.7 Corrective Actions or Commitments

Enclosure 4.1
On-site Spill Response

RP/0/B/5000/008
Page 1 of 5

1. Immediate Actions

1.1 Record the following information taken from the caller:

- Name/group of person reporting incident: _____

- Location of spill/leak: _____
Elevation: _____ Column Line: _____
- Name of product/material spilled: _____
- Is the product flammable and/or a gas? _____
- Equipment/components affected: _____

- Are there any injured people? _____ How many? _____
- Are there people in the immediate area who need to be relocated to a safer area?

- Is the source of the spill/leak isolated/secured? _____
- Is the spill/leak continuing? _____
- Is the spill/leak confined/contained? _____
- Call back number: _____
- Time of call: _____

NOTE: Spills or leaks involving flammable products or gases may require the response of the entire Fire Brigade as determined by the responding Fire Brigade Leader.

_____ 1.2 Dispatch Fire Brigade Leader to investigate the spill/leak and determine the appropriate response.

_____ 1.3 Announce the following over the plant PA system:

“Attention all plant personnel. Attention all plant personnel. This is the Control Room. A chemical spill/leak involving _____ has been reported.
(name of product)

This spill/leak is occurring at _____. Please stay clear of this area
(provide plant location)
until further notice.”

Enclosure 4.1
On-site Spill Response

RP/0/B/5000/008
Page 2 of 5

_____ 1.4 Determine staging area/command post established by responding Fire Brigade Leader.

1.5 **IF** the Fire Brigade Leader requests immediate support, perform the following:

- _____ • Dispatch the on-site Fire Brigade (RP/0/B/5000/029, Fire Brigade Response).
- _____ • Notify Security (CAS-5364 or SAS-3377) to perform the following:
 - _____ • Assist the Fire Brigade with securing the spill area.
 - _____ • Initiate a MERT response for actual or potential injuries.
 - _____ • Report to staging area/command post (provide location).

NOTE: The Fire Brigade Leader's evaluation of the spill/leak determines the need for a HazMat Emergency Response Team activation. The activation is a two phase response. An initial pager activation has the duty HazMat technician respond to assist the Fire Brigade Leader with the evaluation of the spill/leak. The Fire Brigade Leader assisted by the duty HazMat technician determines the need to call out the entire HazMat Emergency Response Team (second phase) with a second pager activation.

1.6 **WHEN** the Fire Brigade Leader reports the status of the spill/leak, determine the appropriate procedural guidance as follows:

NOTE: Oil spills consisting of non-flammable/combustible material which: 1.) are not a threat to navigable waters, **OR** 2.) are not from a transformer, **DO NOT** require any action by the HazMat Emergency Response Team.

_____ 1.6.1 **IF** the spill/leak involves oil from a transformer, go to Environmental Work Practice 5.1, Enclosure 3.11, for PCB content and guidance.

_____ 1.6.2 **IF** the spill/leak involves oil released to navigable water (Lake Wylie or SNSW Pond), or any imminent potential of such, go to Enclosure 4.3.

_____ 1.6.3 **IF** the spill/leak involves insulating materials/asbestos, or water from RF, RY or YD systems, go to step 2.6, exit procedure and go to Environmental Work Practice 5.1.

_____ 1.6.4 **IF** any of the following conditions exist, activate the HazMat pagers to obtain the assistance of the duty HazMat technician. Refer to Enclosure 4.4:

A. Spill/leak Status: (spills involving insulating material/asbestos or designated system waters [RF, RY, or YD] do not require a HazMat response)

- _____ • Source of spill/leak has **NOT** been secured/isolated, **OR**

Enclosure 4.1
On-site Spill Response

RP/0/B/5000/008
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_____ • Release of product/substance is still occurring, **OR**

_____ • Spill/leak has **NOT** been confined/contained, **OR**

B. Product/substance Composition:

_____ • Unknown composition, **OR**

_____ • Labeled/known HAZARDOUS WASTE, **OR**

C. Response Complications:

_____ • Potential risk of fire or explosion, **OR**

_____ • Personnel exposure hazard created (includes additional PPE requirements beyond any currently in use at the spill/leak site), **OR**

_____ • Special equipment needed to contain the spill/leak is **NOT** available.

1.6.5 **IF** the spilled/leaked product/substance can be safely cleaned up by personnel responsible for the spill with absorbent materials or flushed to an appropriate site wastewater treatment system, perform the following:

_____ A. Direct the personnel responsible for the spill/leak to perform the cleanup.

_____ B. Make a copy of this completed procedure and send it to Emergency Planning (CN01EP).

_____ C. **IF** spill/leak areas involved are served by VA, VC, VE, VF or VP Systems, make a copy of this completed procedure and send to MCE Engineering (CN03SE).

_____ D. Send the completed procedure to Document Management.

_____ E. Exit this procedure and go to Environmental Work Practice 5.1.

_____ 1.6.6 **IF** the Fire Brigade Leader and HazMat technician determine that additional HazMat support is required, initiate a full HazMat Emergency Response Team callout by performing a second HazMat pager activation. Refer to Enclosure 4.4.

2. Subsequent Actions

NOTE: Lines in left margin are for place-keeping. Subsequent Actions may be performed simultaneously.

- _____ 2.1 Refer to RP/0/A/5000/001 (Classification of Emergency).
- _____ 2.2 Contact Environmental, Health and Safety (EHS), ext. 3333, for assistance in reporting to state, local, or federal authorities. After hours, contact the EHS Duty person by phone or pager. **IF** no answer, use the EHS group page 777-3333, which will page all EHS personnel.
- 2.3 **IF** an emergency has **NOT** been declared, perform the following:
 - _____ 2.3.1 **IF** the entire HazMat Emergency Response Team has been called out from off-site, notify York County Emergency Management about the event through the York County Telecommunicator (selective signal phone number 513) and, as necessary, request additional support from the County HazMat Technicians. {PIP 0-C00-01689}

NOTE:

1. A request for emergency response support (except an ambulance) from an off-site agency requires a 4-hour notification of the NRC as an "Off-site Notification" per RP/0/B/5000/013 (NRC Notification Requirements).
2. A request for ambulance support for a "contaminated injury" is an 8-hour notification and the request for transport of a "clean injury" does not require a NRC notification.

- _____ 2.3.2 **IF** the assistance of the York County HazMat Technicians is requested **AND** they respond, notify the NRC under the 4-hour notification requirement for off-site notifications.
- _____ 2.3.3 **IF** the NRC will **NOT** be notified of this event per RP/0/B/5000/013, perform the following:
 - A. Notify the duty Emergency Planner.
 - B. Notify the Public Affairs duty person.
 - C. Make a courtesy notification to states and counties per Enclosure 4.6.
- _____ 2.4 **IF** additional information is desired, refer to the Hazardous Materials Response Plan located in the Catawba Nuclear Station Emergency Plan manual (green tabbed).

On-site Spill Response

- _____ 2.5 Refer to the Environmental Work Practice Manual 5.1, Spill Response, Enclosure 3.2, for actions to take after the spill has been neutralized or stabilized.

- 2.6 **WHEN** this procedure has been completed, perform the following actions:
 - _____ 2.6.1 Send a copy of the completed procedure to Emergency Planning (CN01EP).
 - _____ 2.6.2 **IF** spill/leak areas involved are served by VA, VC, VE, VF or VP Systems, send a copy of the completed procedure to MCE Engineering (CN03SE).
 - _____ 2.6.3 Send the completed procedure to Document Management.

1. Immediate Actions

- _____ 1.1 Upon receiving a call from EHS or RP involving the release of a hazardous substance or material (hazardous materials, hazardous wastes or radiological materials) shipped from CNS, discuss reporting requirements under NSD 202 (Reportability) and off-site notification per RP/0/B/5000/013 (NRC Notification Requirements).

2. Subsequent Actions

<p>NOTE: Lines in left margin are for place keeping. Subsequent actions may be performed simultaneously.</p>

- 2.1 Hazardous Materials/Hazardous Waste Incidents/Radiological Materials
- _____ 2.1.1 Notify Community Relations of the incident (pager 777-7388).
- _____ 2.1.2 **IF** incident occurred in York County, South Carolina, notify York County EOC of the incident at 803-329-1110 and provide the caller's name and phone number. {PIP #C-00-1689}
- _____ 2.1.3 Notify Duke Power Risk Management at (704) 382-8186 (24-hour phonemail service).
- _____ 2.1.4 Notify American Nuclear Insurers (ANI) at (860) 682-1301.
- 2.2 **WHEN** this procedure has been completed, perform the following actions:
- _____ 2.2.1 Send a copy of the completed procedure to Emergency Planning (CN01EP).
- _____ 2.2.2 Send the completed procedure to Document Management.

**Oil Spills to Navigable Waters (Lake Wylie
OR SNSW Pond)**

1. Immediate Actions

- CTK** 1.1 Upon receiving notification of a spill of oil (petroleum products, synthetic oils, hydraulic oils, etc.) to Lake Wylie or the Standby Nuclear Service Water Pond which requires clean-up, request the caller's name and phone number:

Name: Jim Barnes Phone: 3038

- CTK** 1.2 Dispatch the Fire Brigade Leader to investigate and report status of the spill.

NOTE: CNS HazMat Emergency Response Team will call the Control Room upon arrival on site.

- _____ 1.3 Activate the CNS HazMat Emergency Response Team pagers to obtain the assistance of the duty HazMat Team technician. Refer to Enclosure 4.5 to initiate a response.

2. Subsequent Actions

- _____ 2.1 Contact EHS at extension 3333 for assistance in reporting to state, local, or federal authorities. After hours, contact the EHS Duty person by phone or pager. **IF** no answer, use the EHS group page 777-3333, which will page all EHS personnel.

- 2.2 **IF** an emergency has **NOT** been declared, perform the following:

- _____ 2.2.1 Notify York County Emergency Management about the event through the York County Telecommunicator (selective signal phone number 513) and, as necessary, request additional support from the county. {PIP # C-00-1689}

NOTE:

1. A request for emergency response support (except an ambulance) from an off-site agency requires a 4-hour notification of the NRC as an "Off-site Notification" per RP/0/B/5000/013 (NRC Notification Requirements).
2. A request for ambulance support for a "contaminated injury" is an 8-hour notification and the request for transport of a "clean injury" does not require a NRC notification.

- _____ 2.2.2 **IF** the assistance of the York County HazMat Technicians is requested **AND** they respond, notify the NRC under the 4-hour notification requirement for off-site notifications.

Oil Spills to Navigable Waters (Lake Wylie
OR SNSW Pond)

_____ 2.2.3 **IF** the NRC will **NOT** be notified of this event per RP/0/B/5000/013, perform the following:

- A. Notify the duty Emergency Planner.
- B. Notify the Public Affairs duty person.
- C. Make a courtesy notification to states and counties per Enclosure 4.6.

_____ 2.3 In the event that a responsible group is not identified, the Operations Shift Manager (or designee) shall initiate a PIP. Refer to Environmental Work Practice 5.1 for information to include in the PIP.

2.4 **WHEN** this procedure has been completed, perform the following actions:

_____ 2.4.1 Send a copy of the completed procedure to Emergency Planning (CN01EP).

_____ 2.4.2 Send the completed procedure to Document Management.

**HazMat Emergency Response Team
Activation****1. HazMat Emergency Response Team Notification During an Emergency**

_____ 1.1 **IF** the HazMat Emergency Response Team is being called out for a drill, go to Step 2.

1.2 Activate the off-site emergency pager system Quiktel Key Pad located in the Control Room.

_____ 1.2.1 Press the <EXIT> key to assure the key pad is cleared.

_____ 1.2.2 Type in "SPILL"

1.2.3 Press <ENTER>

_____ 1.2.4 Press <M> key (for Message)

_____ 1.2.5 Type the following message:

"CNS Hazardous Materials Spill; All Team Members Respond. Duty Person call 803-701-5164."

_____ 1.2.6 Press <ENTER>

NOTE: Pager activation can be delayed up to 5 minutes depending on pager system status.
--

_____ 1.2.7 Monitor the confirmation pagers located at the Quiktel Key Pad to verify proper pager activation.

_____ 1.3 **IF** the Quiktel Key Pad is unavailable, dial 9-999-777-8091 and enter your phone number (e.g., 803-701-3250), and press #. The HazMat Emergency Response Team duty person will return your call and make additional call-outs as necessary to ensure team response.

**HazMat Emergency Response Team
Activation****2. HazMat Emergency Response Team Notification During a Drill**

2.1 Activate the off-site emergency pager system Quiktel Key Pad located in the Control Room.

_____ 2.1.1 Press the <EXIT> key to assure the key pad is cleared.

_____ 2.1.2 Type in "SPILL"

2.1.3 Press <ENTER>

_____ 2.1.4 Press <M> key (for Message)

_____ 2.1.5 Type in the following message:

"This is a Drill. CNS Hazardous Materials Spill; All Team Members Respond. Duty Person call 803-701-5164. This is a Drill."

_____ 2.1.6 Press <ENTER>

NOTE: Pager activation can be delayed up to 5 minutes depending on pager system status.
--

_____ 2.1.7 Monitor the confirmation pagers located at the Quiktel Key Pad to verify proper pager activation.

_____ 2.2 **IF** the Quiktel Key Pad is unavailable, dial 9-999-777-8091 and enter your phone number (e.g., 803-701-3250), and press #. The HazMat Emergency Response Team duty person will return your call and make additional call-outs as necessary to ensure team response.

**HazMat Emergency Response Team
Activation**

3. HazMat Emergency Response Team

John Bailes

Doug Gates

Ronnie Bangle

James Hambright

Doug Baysinger

Roy Hembree

Eddie Benfield

David Hord

Cleve Brown

Ann Kitts

Jon Cain

Ken McKown

Robin Caskey

Andy Miller

Tom Christensen

Ed Miller

Steve Cooper

Jason Nettles

Tim Daniels

Margot Rott

Gene Dial

Jeremy Sistare

Jim Faile

Rick Tack

Richard Flowers

**HazMat Emergency Response Team
Activation for Oil Spills**

- NOTES:**
1. The HazMat Emergency Response Team will call the Control Room to determine any personnel or radiological safety hazards associated with their response to the site.
 2. The HazMat Emergency Response Team will respond to warehouse #9 unless the Control Room advises them otherwise.
 3. Pager activation can be delayed up to 5 minutes depending on pager system status.

1. HazMat Emergency Response Team Notification for an Actual Oil Spill

- _____ 1.1 **IF** the HazMat Emergency Response Team is being called out for a drill, go to Step 2.
- 1.2 Activate the off-site emergency pager system Quiktel Key Pad located in the Control Room.
- _____ 1.2.1 Press the <EXIT> key to assure the key pad is cleared.
- _____ 1.2.2 Type “**SPILL**”
- _____ 1.2.3 Press <ENTER>
- _____ 1.2.4 Press <M> key (for Message)
- _____ 1.2.5 Type in the following message:
- “Oil spill to water at CNS. HazMat members respond. Duty person call 803-701-5164.”**
- _____ 1.2.6 Press <ENTER>
- _____ 1.2.7 Monitor the confirmation pagers located at the Quiktel Key Pad to verify proper pager activation.
- _____ 1.3 **IF** the Quiktel Key Pad is unavailable, dial 9-999-777-8091 and enter your phone number (e.g., 803-701-5164), and press #. The HazMat Emergency Response Team duty person will return your call.

**HazMat Emergency Response Team
Activation for Oil Spills**

2. HazMat Emergency Response Team Notification for a Drill

2.1 Activate the off-site emergency pager system Quiktel Key Pad located in the Simulator.

_____ 2.1.1 Press the <EXIT> key to assure the key pad is cleared.

_____ 2.1.2 Type “**SPILL**”

_____ 2.1.3 Press <ENTER>

_____ 2.1.4 Press <M> key (for Message)

_____ 2.1.5 Type the following message:

**“This is a Drill. Oil spill to water at CNS. HazMat members respond.
Duty person call 803-701-5164. This is a Drill.”**

_____ 2.1.6 Press <ENTER>

_____ 2.2 **IF** the Quiktel Key Pad is unavailable, dial 9-999-777-8091 and enter your phone number (e.g., 803-701-5164), and press #. The HazMat Emergency Response Team duty person will return your call.

**Courtesy Notification to States and Counties
for a Non-emergency Plant Event**

NOTE: This enclosure provides instruction for notifying state and county emergency preparedness management agencies (primary WP/EOCs) and EnergyQuest of **non-emergency** plant events by completing a Courtesy Notification Form (page 4 of 4) and faxing it to each agency, then verifying its receipt with a follow-up phone call.
{PIP 0-C00-01689}

1. Complete the Courtesy Notification Form as follows:

- _____ 1.1 Provide the time and date of:
- Notification
 - Event
- _____ 1.2 Mark the event(s) that describes the reason for the notification.
- _____ 1.3 Describe the event briefly, especially any impact to the site (damage, impact on operations, and any requested support received from off-site agencies).

NOTE:

1. The confirmation code number is randomly assigned to each message. This provides a method for authenticating an off-site agency official that calls the site over normal phone lines requesting additional information about the reported event. Knowing the confirmation code number shall be the authorization for site personnel to provide information about the event to the caller.
2. Calls received over selective signal lines are considered to be secure and do not require knowledge of the confirmation code number to receive additional information about the event.

- _____ 1.4 Assign a 2-digit confirmation number to the notification form.
- _____ 1.5 Print the name and title of the individual reporting the notification.

**Courtesy Notification to States and Counties
for a Non-emergency Plant Event**

NOTE: Step 2 sends a group fax and step 3 sends the fax to agencies individually.

2. Notification by Group Fax

- _____ 2.1 Notify the states and county agencies (primary WP/EOCs) of a **non-emergency** plant event(s) by completing a Courtesy Notification Form (page 4 of 4) and transmitting it to the states and counties as follows:

NOTE:

1. Performing steps 2.1.1 through 2.1.3 sends the Courtesy Notification Form (page 4 of 4) to multiple locations in sequence.
2. Failure to press the pre-programmed buttons in a rapid sequence will result in sending the fax to only an individual agency.

- _____ 2.1.1 Place the completed form (page 4 of 4) face down into the fax machine.

- _____ 2.1.2 Press the pre-programmed one-touch speed dial pushbutton for each of the following agencies in quick succession (i.e., press each button in approximately 1 second intervals until completed):

- _____ York Co WP/EOC
- _____ Gaston Co. WP/EOC
- _____ Meck Co. WP
- _____ NC WP/EOC
- _____ SC WP/EOC
- _____ EnergyQuest
- _____ Duke ECOC

- _____ 2.1.3 Press START

- _____ 2.2 Verify by one of the following means that the form (page 4 of 4) was received by each of the agencies:

- _____ Selective Signal (Enclosure 1.5, Emergency Response Telephone Directory)
- _____ Duke or Commercial Telephone (Enclosures 1.12 – 1.20, Emergency Response Telephone Directory)

- _____ 2.3 **IF** any agency did not receive the group fax, then go to step 3.

- _____ 2.4 Fax a copy of the Courtesy Notification Form (page 4 of 4) to Emergency Planning at 3151.

- _____ 2.5 Report any communications equipment failures to the duty Emergency Planner. {1}

**Courtesy Notification to States and Counties
for a Non-emergency Plant Event**

3. Notification by Individual Fax

- _____ 3.1 Notify the states and county agencies (primary WP/EOCs) of a **non-emergency** plant event(s) by completing a Courtesy Notification Form (page 4 of 4) and transmitting it to the states and counties as follows:

NOTE: Performing steps 3.1.1 through 3.1.3 sends the Courtesy Notification Form (page 4 of 4) to individual agencies one at a time.

- _____ 3.1.1 Place the completed form (page 4 of 4) face down into the fax machine.

NOTE: SC WP/EOC and EnergyQuest list two fax numbers. Use the fax number for sending Emergency Notifications.

- _____ 3.1.2 Enter the individual fax phone number (Enclosures 1.12 through 1.16 in the Emergency Response Phone Book) for the desired individual agency (WP/EOC). The Duke ECOE is listed in Enclosure 1.18. EnergyQuest fax number is listed in Enclosure 1.19.
- _____ 3.1.3 Press START.
- _____ 3.1.4 Repeat steps 3.1.1 through 3.1.3 until all of the desired agencies have been faxed the form (page 4 of 4).
- _____ 3.2 Verify by one of the following means that the form (page 4 of 4) was received by the agency(s):
- _____ Selective Signal (Encl. 1.5, Emergency Response Telephone Directory)
 - _____ Duke or Commercial Telephone (Enclosures 1.12 – 1.20, Emergency Response Telephone Directory)
- _____ 3.3 Fax a copy of the completed Courtesy Notification Form (page 4 of 4) to Emergency Planning at 3151.
- _____ 3.4 Report any communications equipment failures to the duty Emergency Planner. {1}

Courtesy Notification to States and Counties
for a Non-emergency Plant Event

DUKE POWER COMPANY
CATAWBA NUCLEAR STATION
COURTESY NOTIFICATION FORM
NON-EMERGENCY EVENTS

Time/Date Of Notification: _____ / _____

Time/Date Of Event: _____ / _____

Event (X):

- | | | |
|-------------------------------------|--|---|
| <input type="checkbox"/> Earthquake | <input type="checkbox"/> Toxic Gases | <input type="checkbox"/> Fatality |
| <input type="checkbox"/> Flood | <input type="checkbox"/> Civil Disturbance | <input type="checkbox"/> Fire Response by
Bethel/Newport |
| <input type="checkbox"/> Hurricane | <input type="checkbox"/> Bomb Threat | <input type="checkbox"/> Medical Response
by Ambulance |
| <input type="checkbox"/> Ice/Snow | <input type="checkbox"/> Vehicle Crash | <input type="checkbox"/> HazMat /Spill
Response |
| <input type="checkbox"/> Tornado | <input type="checkbox"/> Explosion | <input type="checkbox"/> Other Events |

Description:

Confirmation Code Number: _____ (This number is authentication for any off-site
agency caller to be given information about the event).

Confirmation Phone Number: (803) 831-8185

Reported By: _____ Title: _____

Enclosure 4.7
Corrective Actions or Commitments

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- {1} PIP C03-05581, CA #2
- {2} PIP C03-04430, (Revision #23)
- {3} PIP C04-03229, CA #4
- {4} PIP C06-08120, CA#2

CATAWBA NUCLEAR STATION JOB PERFORMANCE MEASURE

JPM 5S ADMIN

**Make Emergency Classification and Complete the
Initial Emergency Notification Form**

CANDIDATE

EXAMINER

READ TO OPERATOR

DIRECTION TO TRAINEE:

I will explain the initial conditions, and state the task to be performed. All control room steps shall be performed for this JPM, including any required communications. I will provide initiating cues and reports on other actions when directed by you. Ensure you indicate to me when you understand your assigned task. To indicate that you have completed your assigned task return the handout sheet I provided you.

SIMULATOR SETUP

N/A

INITIAL CONDITIONS:

A Unit 1 transient initially caused an OP Delta T Reactor Trip signal, but the reactor failed to trip. The crew successfully completed a manual reactor trip. Almost immediately, the unit safety injected and the crew entered emergency procedure EP/1/A/5000/E-0 (Reactor Trip or Safety Injection). 1C Steam Generator has been diagnosed with a stuck open S/G safety and the crew is transitioning to EP/1/A/5000/E-2 (Faulted Steam Generator Isolation).

The transition brief yields the following additional information:

- NC pumps had to be tripped due to a loss of subcooling
- NC pressure is 600 psig and stable
- 1ETB has an unknown fault and is currently de-energized
- EMF Trip 2 alarms are in on EMFs 33, 72, 73, and 28.

Current meteorological data:

- Clear conditions
- Wind speed is 5 MPH
- Wind direction is 270°

INITIATING CUE:

Classify the event and fill out the initial Emergency Notification form through the date and time you approve it.

This JPM is time critical.

Start Time: _____

<p>1</p> <p>Classify the event using RP/0/A/5000/001, Classification of Emergency.</p> <p>STANDARD</p> <p>*Classify the event as a "Site Area Emergency" due to: Event #4.1.C.4 and #4.1.N.2 or 3.</p> <p>3 points - 4.1.C.4 (SG Secondary Side Release With Primary to Secondary Leakage)</p> <p>AND</p> <p>5 points - 4.1.N.2 (Greater than available makeup capacity as indicated by a loss of NCS Subcooling)</p> <p>OR</p> <p>5 points - 4.1.N.3 (Indication that a SG is ruptured and has a Non-Isolable secondary side fault.)</p> <p>IT IS CRITICAL THAT THE CLASSIFICATION BE MADE AND THE EMERGENCY BE DECLARED WITHIN 15 MINUTES OF THE RECORDED START TIME.</p> <p>TIME EMERGENCY DECLARED _____.</p> <p>COMMENTS</p>	<p>*CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>
<p>2</p> <p>Obtain Emergency Notification form.</p> <p>STANDARD</p> <p>Identifies the correct Emergency Notification form for 4.1.S.3 from the notebook of forms provided.</p> <p>4.1.S.3 (Loss of Containment AND Loss OR Potential Loss of Any Other Barrier)</p> <p>COMMENTS</p>	<p>CRITICAL STEP</p> <p>_____ SAT</p> <p>_____ UNSAT</p>

3 Complete the Emergency Notification Form.

***CRITICAL STEP**

STANDARD

Lines 1, 3, 4, 5, 6, 9, 10 and 11 are critical entries based on the NRC Performance Indicator, but Line 9 is not required for this initial notification.

_____ SAT

_____ UNSAT

1, 3, 4 and 5 are already marked on all forms and are not critical for performance of this JPM.

Line 1: "Drill" is already marked on all pre-printed forms.

Line 2: Marks "Initial"

Line 3: Line 3 is already populated on all pre-printed forms.

Line 4: Line 4 is already populated on all pre-printed forms.

Line 5: "None" marked, unless classified as a General Emergency

Line 6: Emergency release "is occurring" due to 1EMF-33 indication of S/G tube leakage

Line 7: "Under evaluation" marked

EXAMINER CUE: "RP is determining release significance."

Line 8: "Stable " marked per definition of RP/06A, step2.11, and based on current plant conditions

Line 9: Per RP/06A, this is not required for initial notifications, but to record if data is known and time allows. This will be based on the applicant's judgment and since it is NOT required it is not critical.

If entered, wind direction 270° and wind speed 5 MPH

Line 10: "Declaration" marked and enters current date and time.

Line 11: Marks Affected Unit(s) as "1"

Line 12: Marks box "A" and 0% power

EXAMINER CUE: "The reactor was tripped 10 minutes ago."

Enters time minus 10 minutes and enters today's date

Line 13: Includes information on the loss of power and the ATWS.

Lines 14,15 and 16

IF ASKED,

EXAMINER CUE: "RP has not determined any release data."

EXAMINER NOTE: These steps are not required for initial notifications.

Line 17: Signs as OSM. Date and time on line 17 is based on time of approval

See attached, completed, Emergency Notification sheet for a key.

NOTE: Entries made in lines other than the critical entries shall be evaluated as weaknesses but are not necessarily grounds for failure.

TIME EMERGENCY NOTIFICATION SHEET IS COMPLETED _____

IT IS CRITICAL THAT THE TOTAL TIME FROM THE DECLARATION TIME RECORDED IN STEP 1 TO COMPLETING THIS SHEET IS ≤ 15 MINUTES.

COMMENTS

TIME STOP: _____

55 KEY

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE # 1
2. [X] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.1.S.3 EAL DESCRIPTION Loss of Containment AND Loss OR Potential Loss of Any Other Barrier. This EAL poses no threat to the safety of the general public.

- 5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [X] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [X] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from 270 degrees Wind Speed* 5 mph
Precipitation* none Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time CURRENT Date CURRENT

11. AFFECTED UNIT(S): [X] 2 [3] [All]

12. Unit Status: [X] U1 0 % Power Shutdown at: Time T-10 Date CURRENT
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS: Loss of power to 1ETB, ATWS

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: STUDENT SIGNATURE Title: Emergency Coordinator Time: CURRENT Date: CURRENT

NOTIFIED BY: RECEIVED BY: Time: Date: / /

**CANDIDATE CUE SHEET
(TO BE RETURNED TO EXAMINER UPON COMPLETION OF TASK)**

INITIAL CONDITIONS:

A Unit 1 transient initially caused an OP Delta T Reactor Trip signal, but the reactor failed to trip. The crew successfully completed a manual reactor trip. Almost immediately, the unit safety injected and the crew entered emergency procedure EP/1/A/5000/E-0 (Reactor Trip or Safety Injection). 1C Steam Generator has been diagnosed with a stuck open S/G safety and the crew is transitioning to EP/1/A/5000/E-2 (Faulted Steam Generator Isolation).

The transition brief yields the following additional information:

- NC pumps had to be tripped due to a loss of subcooling
- NC pressure is 600 psig and stable
- 1ETB has an unknown fault and is currently de-energized
- EMF Trip 2 alarms are in on EMFs 33, 72, 73, and 28.

Current meteorological data:

- Clear conditions
- Wind speed is 5 MPH
- Wind direction is 270°

INITIATING CUE:

Classify the event and fill out the initial Emergency Notification form through the date and time you approve it.

This JPM is time critical.

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

BASED ON EAL# 4.1.U.1 EAL DESCRIPTION: Potential Loss of Containment. This EAL poses no threat to the safety of plant personnel or the general public.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE

- [B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] All

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications) [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec

MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

BASED ON EAL# 4.1.U.2 EAL DESCRIPTION: Loss of Containment. This EAL poses no threat to the safety of plant personnel or the general public.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE

- [B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications) [A] U1 % Power Shutdown at: Time Date
[B] U2 % Power Shutdown at: Time Date
[C] U3 % Power Shutdown at: Time Date

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec

MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: [A] Airborne Start Time: Date: Stop Time: Date:

[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours

Projection performed: Time Date

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)

Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date:

NOTIFIED BY: RECEIVED BY: Time: Date:

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.1.A.1 EAL DESCRIPTION: Loss OR Potential Loss of Nuclear Coolant System (Reactor Coolant System). This EAL poses no threat to the safety of plant personnel or the general public.

- 5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

- 10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

BASED ON EAL# 4.1.A.2 EAL DESCRIPTION: Loss OR Potential Loss of Fuel Clad. This EAL poses no threat to the safety of plant personnel or the general public.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE

- [B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications) [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec

MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.1.S.1 EAL DESCRIPTION: Loss OR Potential Loss of Both Nuclear Coolant System (Reactor Coolant System) AND Fuel Clad. This EAL poses no threat to the safety of the general public.

- 5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

- 10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] All
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: / / Stop Time: Date: / /
[B] Liquid Start Time: Date: / / Stop Time: Date: / /

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

BASED ON EAL# 4.1.S.2 EAL DESCRIPTION: Loss AND Potential Loss Combinations of Both Nuclear Coolant System (Reactor Coolant System) AND Fuel Clad. This EAL poses no threat to the safety of the general public.

- 5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] µCi/sec

MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: [A] Airborne Start Time: Date: / / Stop Time: Date / /

[B] Liquid Start Time: Date: / / Stop Time: Date / /

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours

Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)

Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.1.S.3 EAL DESCRIPTION: Loss of Containment AND Loss OR Potential Loss of Any Other Barrier. This EAL poses no threat to the safety of the general public.

- 5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

- 10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.1.G.1 EAL DESCRIPTION: Loss of All Three Fission Product Barriers. Plant operators will recommend protective actions for the public.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: [A] U1 % Power Shutdown at: Time Date
[B] U2 % Power Shutdown at: Time Date
[C] U3 % Power Shutdown at: Time Date

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] µCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date:
NOTIFIED BY: RECEIVED BY: Time: Date:

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

1. [A] DRILL [B] ACTUAL EVENT MESSAGE # _____
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME _____ DATE _____ / _____ / _____ AUTHENTICATION # _____
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

BASED ON EAL# 4.1.G.2 EAL DESCRIPTION: Loss of Any Two Fission Product Barriers AND the Potential Loss of the Third. Plant operators will recommend protective actions for the public.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE

[B] EVACUATE _____

[C] SHELTER _____

[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.

[E] OTHER _____

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from _____ degrees Wind Speed* _____ mph

(* May not be available for Initial Notifications) Precipitation* _____ Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time _____ Date _____ / _____ / _____

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications) [A] U1 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
[B] U2 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
[C] U3 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____

13. REMARKS: _____

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec

MAGNITUDE: Noble Gases: _____ Iodines: _____ Particulates: _____ Other: _____

FORM: [A] Airborne Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date _____ / _____ / _____

[B] Liquid Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date _____ / _____ / _____

15. PROJECTION PARAMETERS: Projection Period: _____ Hours Estimated Release Duration: _____ Hours

Projection performed: Time _____ Date _____ / _____ / _____

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)

Site boundary _____

2 Miles _____

5 Miles _____

10 Miles _____

17. APPROVED BY: _____ Title: Emergency Coordinator Time: _____ Date: _____ / _____ / _____

NOTIFIED BY: _____ RECEIVED BY: _____ Time: _____ Date: _____ / _____ / _____

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

BASED ON EAL# 4.2.U.1 EAL DESCRIPTION: The plant was not shut down within the time required by plant Technical Specifications. This EAL poses no threat to the safety of plant personnel or the general public.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE

- [B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications) [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec

MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.2.U.2 EAL DESCRIPTION: Many of the Control Room alarms and indications (>50%) have been lost for greater than 15 minutes. This EAL poses no threat to the safety of plant personnel or the general public.

- 5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

- 10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] All
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. DRILL ACTUAL EVENT MESSAGE #
2. INITIAL FOLLOW-UP NOTIFICATION: TIME DATE AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

- 4. EMERGENCY CLASSIFICATION: UNUSUAL EVENT ALERT SITE AREA EMERGENCY GENERAL EMERGENCY

BASED ON EAL# 4.2.U.3 EAL DESCRIPTION Nuclear coolant (Reactor Coolant) samples indicate measurable damage has occurred to the metal tubes (fuel cladding) that hold uranium fuel pellets. This EAL poses no threat to the safety of plant personnel or the general public.

- 5. PROTECTIVE ACTION RECOMMENDATIONS: NONE

- B EVACUATE
C SHELTER
D CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
E OTHER

- 6. EMERGENCY RELEASE: None Is Occurring Has Occurred

- 7. RELEASE SIGNIFICANCE: Not applicable Within normal operating limits Above normal operating limits Under Evaluation

- 8. EVENT PROGNOSIS: Improving Stable Degrading

- 9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* A B C D E F G

- 10. DECLARATION TERMININATION Time Date

- 11. AFFECTED UNIT(S): 1 2 3 All

- 12. Unit Status: U1 % Power Shutdown at: Time Date
U2 % Power Shutdown at: Time Date
U3 % Power Shutdown at: Time Date

- 13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: Elevated Mixed Ground UNITS: Ci Ci/sec uCi/sec

MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: Airborne Start Time: Date: Stop Time: Date:

Liquid Start Time: Date: Stop Time: Date:

- 15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours

Projection performed: Time Date

- 16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)

Site boundary
2 Miles
5 Miles
10 Miles

- 17. APPROVED BY: Title: Emergency Coordinator Time: Date:

NOTIFIED BY: RECEIVED BY: Time: Date:

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
CLASSIFICATION:
BASED ON EAL# 4.2.U.4 EAL DESCRIPTION Water is leaking from the nuclear coolant system (reactor coolant system) in excess of allowed limits. This EAL poses no threat to the safety of plant personnel or the general public.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

- 10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: / / Stop Time: Date: / /
[B] Liquid Start Time: Date: / / Stop Time: Date: / /
15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /
16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

- 17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. DRILL ACTUAL EVENT MESSAGE #
2. INITIAL FOLLOW-UP NOTIFICATION: TIME DATE AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: UNUSUAL EVENT ALERT SITE AREA EMERGENCY GENERAL EMERGENCY
BASED ON EAL# 4.2.U.5 EAL DESCRIPTION Unplanned loss of all onsite or offsite communications.
This EAL poses no threat to the safety of plant personnel or the general public.

5. PROTECTIVE ACTION RECOMMENDATIONS: NONE
EVACUATE
SHELTER
CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
OTHER

6. EMERGENCY RELEASE: None Is Occurring Has Occurred

7. RELEASE SIGNIFICANCE: Not applicable Within normal operating limits Above normal operating limits Under Evaluation
8. EVENT PROGNOSIS: Improving Stable Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* A B C D E F G

10. DECLARATION TERMININATION Time Date

11. AFFECTED UNIT(S): 1 2 3 All

12. Unit Status: U1 % Power Shutdown at: Time Date
(U unaffected Unit(s) Status Not Required for Initial Notifications)
U2 % Power Shutdown at: Time Date
U3 % Power Shutdown at: Time Date

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: Elevated Mixed Ground UNITS: Ci Ci/sec uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: Airborne Start Time: Date: Stop Time: Date:
Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid-CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date:

NOTIFIED BY: RECEIVED BY: Time: Date:

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. A DRILL B ACTUAL EVENT MESSAGE #
2. A INITIAL B FOLLOW-UP NOTIFICATION: TIME DATE AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: A UNUSUAL EVENT B ALERT C SITE AREA EMERGENCY D GENERAL EMERGENCY
BASED ON EAL# 4.2.A.1 EAL DESCRIPTION Many of the Control Room alarms or indicators have been lost and other events call for increased surveillance. This EAL poses no threat to the safety of plant personnel or the general public.

- 5. PROTECTIVE ACTION RECOMMENDATIONS: A NONE
B EVACUATE
C SHELTER
D CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
E OTHER

6. EMERGENCY RELEASE: A None B Is Occurring C Has Occurred

- 7. RELEASE SIGNIFICANCE: A Not applicable B Within normal operating limits C Above normal operating limits D Under Evaluation
8. EVENT PROGNOSIS: A Improving B Stable C Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* A B C D E F G

- 10. A DECLARATION B TERMINATION Time Date
11. AFFECTED UNIT(S): 1 2 3 All
12. Unit Status: A U1 % Power Shutdown at: Time Date
B U2 % Power Shutdown at: Time Date
C U3 % Power Shutdown at: Time Date

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: A Elevated B Mixed C Ground UNITS: A Ci B Ci/sec C uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: A Airborne Start Time: Date: Stop Time: Date:
B Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date:

NOTIFIED BY: RECEIVED BY: Time: Date:

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
CLASSIFICATION:
BASED ON EAL# 4.2.S.1 EAL DESCRIPTION: Many Control Room indicators have been lost in combination with another severe plant operating problem. This condition by itself poses no immediate threat to public safety.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]
10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
(B) U2 % Power Shutdown at: Time Date / /
(C) U3 % Power Shutdown at: Time Date / /
13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: / / Stop Time: Date / /
[B] Liquid Start Time: Date: / / Stop Time: Date / /
15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /
16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles
17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
CLASSIFICATION:
BASED ON EAL# 4.3.U.1 EAL DESCRIPTION: Radioactive gases or liquids are being released at rates at least two times (2x) those allowed by the station's operating license limits over a designated period of time (i.e. 60 minutes or longer). This EAL poses no threat to the safety of plant personnel or the general public.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]
10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /
13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: / / Stop Time: Date / /
[B] Liquid Start Time: Date: / / Stop Time: Date / /
15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /
16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles
17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

1. A DRILL B ACTUAL EVENT MESSAGE # _____
2. A INITIAL B FOLLOW-UP NOTIFICATION: TIME _____ DATE ____ / ____ / ____ AUTHENTICATION # _____
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: A UNUSUAL EVENT B ALERT C SITE AREA EMERGENCY D GENERAL EMERGENCY

BASED ON EAL# 4.3.U.2 EAL DESCRIPTION Either the water level in the spent fuel pool or the reactor refueling cavity is low or increased levels of radiation have been detected inside the plant. This EAL poses no threat to the safety of plant personnel or the general public.

5. PROTECTIVE ACTION RECOMMENDATIONS: A NONE

B EVACUATE _____

C SHELTER _____

D C _____

E OTHER _____

6. EMERGENCY RELEASE: A None B Is Occurring C Has Occurred

7. RELEASE SIGNIFICANCE: A Not applicable B Within normal operating limits C Above normal operating limits D Under Evaluation
8. EVENT PROGNOSIS: A Improving B Stable C Degrading
9. METEOROLOGICAL DATA: Wind Direction* from _____ degrees Wind Speed* _____ mph
- (* May not be available for Initial Notifications) Precipitation* _____ Stability Class* A B C D E F G

10. A DECLARATION B TERMINATION Time _____ Date ____ / ____ / ____
11. AFFECTED UNIT(S): 1 2 3 All
12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
- A U1 _____ % Power Shutdown at: Time _____ Date ____ / ____ / ____
- B U2 _____ % Power Shutdown at: Time _____ Date ____ / ____ / ____
- C U3 _____ % Power Shutdown at: Time _____ Date ____ / ____ / ____

13. REMARKS: _____

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: A Elevated B Mixed C Ground UNITS: A Ci B Ci/sec C μ Ci/sec
- MAGNITUDE: Noble Gases: _____ Iodines: _____ Particulates: _____ Other: _____
- FORM: A Airborne Start Time: _____ Date: ____ / ____ / ____ Stop Time: _____ Date ____ / ____ / ____
- B Liquid Start Time: _____ Date: ____ / ____ / ____ Stop Time: _____ Date ____ / ____ / ____
15. PROJECTION PARAMETERS: Projection Period: _____ Hours Estimated Release Duration: _____ Hours
- Projection performed: Time _____ Date ____ / ____ / ____
16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
- Site boundary _____
- 2 Miles _____
- 5 Miles _____
- 10 Miles _____

17. APPROVED BY: _____ Title: Emergency Coordinator Time: _____ Date: ____ / ____ / ____
- NOTIFIED BY: _____ RECEIVED BY: _____ Time: _____ Date: ____ / ____ / ____

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

1. [A] DRILL [B] ACTUAL EVENT MESSAGE # _____
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME _____ DATE _____ / _____ / _____ AUTHENTICATION # _____
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.3.A.1 EAL DESCRIPTION Radioactive gases or liquids are being released at rates at least two hundred (200) times those allowed by the station's operating license limits over a designated period of time (i.e.: >= 15 minutes). Current plant conditions DO NOT threaten public safety.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from _____ degrees Wind Speed* _____ mph
(* May not be available for Initial Notifications) Precipitation* _____ Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time _____ Date _____ / _____ / _____
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
(Unaffected Unit(s) Status Not Required for Initial Notifications)
[B] U2 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
[C] U3 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____

13. REMARKS: _____

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: _____ Iodines: _____ Particulates: _____ Other: _____
FORM: [A] Airborne Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date: _____ / _____ / _____
[B] Liquid Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date: _____ / _____ / _____

15. PROJECTION PARAMETERS: Projection Period: _____ Hours Estimated Release Duration: _____ Hours
Projection performed: Time _____ Date _____ / _____ / _____

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary _____
2 Miles _____
5 Miles _____
10 Miles _____

17. APPROVED BY: _____ Title: Emergency Coordinator Time: _____ Date: _____ / _____ / _____

NOTIFIED BY: _____ RECEIVED BY: _____ Time: _____ Date: _____ / _____ / _____

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

1. [A] DRILL [B] ACTUAL EVENT MESSAGE # _____
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME _____ DATE _____ / _____ / _____ AUTHENTICATION # _____
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.3.A.2 EAL DESCRIPTION Indication of possible damage to or uncovering of the spent fuel. This EAL poses no threat to the safety of the general public.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from _____ degrees Wind Speed* _____ mph
(* May not be available for Initial Notifications) Precipitation* _____ Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time _____ Date _____ / _____ / _____
11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
[B] U2 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
[C] U3 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____

13. REMARKS: _____

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: _____ Iodines: _____ Particulates: _____ Other: _____
FORM: [A] Airborne Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date: _____ / _____ / _____
[B] Liquid Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date: _____ / _____ / _____

15. PROJECTION PARAMETERS: Projection Period: _____ Hours Estimated Release Duration: _____ Hours
Projection performed: Time _____ Date _____ / _____ / _____

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary _____
2 Miles _____
5 Miles _____
10 Miles _____

17. APPROVED BY: _____ Title: Emergency Coordinator Time: _____ Date: _____ / _____ / _____

NOTIFIED BY: _____ RECEIVED BY: _____ Time: _____ Date: _____ / _____ / _____

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

BASED ON EAL# 4.3.A.3 EAL DESCRIPTION Radiation levels in one or more vital area(s) of the plant are very high and impedes operation of safety systems required to maintain safe operations or to establish/maintain cold shutdown. This EAL poses no threat to the safety of the general public.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE

- [B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec

MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: [A] Airborne Start Time: Date: / / Stop Time: Date: / /

[B] Liquid Start Time: Date: / / Stop Time: Date: / /

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours

Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)

Table with 3 columns: Distance (Site boundary, 2 Miles, 5 Miles, 10 Miles), TEDE (mrem), and Adult Thyroid CDE (mrem).

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

BASED ON EAL# 4.3.S.1 EAL DESCRIPTION Low level radiation doses have been measured at or projected for areas beyond the immediate station area. This condition, by itself, poses no immediate threat to public safety.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE

- [B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec

MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: [A] Airborne Start Time: Date: / / Stop Time: Date: / /

[B] Liquid Start Time: Date: / / Stop Time: Date: / /

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours

Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)

Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
CLASSIFICATION:
BASED ON EAL# 4.3.G.1 EAL DESCRIPTION: Radiation doses exceeding federal guidelines that specify protective measures be taken have been measured in or projected for areas beyond the immediate station area. Plant operators will recommend protective actions for the public.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]
10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
(Unaffected Unit(s) Status Not Required for Initial Notifications) [B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /
13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: / / Stop Time: Date / /
[B] Liquid Start Time: Date: / / Stop Time: Date / /
15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /
16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles
17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.4.A.1 EAL DESCRIPTION: The reactor control rods failed to automatically shut down the reactor when required. Current plant conditions DO NOT threaten public safety.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE [B] EVACUATE [C] SHELTER [D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY. [E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]
10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] All
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /
13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:
15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /
16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles
17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.4.A.2 EAL DESCRIPTION: Equipment needed to maintain the reactor water temperature below the boiling point (i.e. cold shutdown) has been lost. This EAL poses no threat to the safety of the general public.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE [B] EVACUATE [C] SHELTER [D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY. [E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]
10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications) [A] U1 % Power Shutdown at: Time Date / / [B] U2 % Power Shutdown at: Time Date / / [C] U3 % Power Shutdown at: Time Date / /
13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: / / Stop Time: Date / / [B] Liquid Start Time: Date: / / Stop Time: Date / /
15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /
16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary 2 Miles 5 Miles 10 Miles
17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. DRILL ACTUAL EVENT MESSAGE #
2. INITIAL FOLLOW-UP NOTIFICATION: TIME DATE AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: UNUSUAL EVENT ALERT SITE AREA EMERGENCY GENERAL EMERGENCY
BASED ON EAL# 4.4.S.1 EAL DESCRIPTION The reactor control rods have failed to automatically or manually shut down the reactor. This condition, by itself, poses no immediate threat to public safety.

5. PROTECTIVE ACTION RECOMMENDATIONS: NONE
EVACUATE
SHELTER
CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
OTHER

6. EMERGENCY RELEASE: None Is Occurring Has Occurred

7. RELEASE SIGNIFICANCE: Not applicable Within normal operating limits Above normal operating limits Under Evaluation
8. EVENT PROGNOSIS: Improving Stable Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* A B C D E F G

10. DECLARATION TERMINATION Time Date

11. AFFECTED UNIT(S): 1 2 3 All

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
A U1 % Power Shutdown at: Time Date
B U2 % Power Shutdown at: Time Date
C U3 % Power Shutdown at: Time Date

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: Elevated Mixed Ground UNITS: Ci Ci/sec uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: Airborne Start Time: Date: Stop Time: Date:
Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date:

NOTIFIED BY: RECEIVED BY: Time: Date:

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

BASED ON EAL# 4.4.S.2 EAL DESCRIPTION The plant operators have lost the ability to establish or maintain the plant in hot shutdown. This condition, by itself, poses no immediate threat to public safety.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE

- [B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec

MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: [A] Airborne Start Time: Date: / / Stop Time: Date: / /

[B] Liquid Start Time: Date: / / Stop Time: Date: / /

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

1. [A] DRILL [B] ACTUAL EVENT MESSAGE # _____
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME _____ DATE _____ / _____ / _____ AUTHENTICATION # _____
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
CLASSIFICATION:
BASED ON EAL# 4.4.S.3 EAL DESCRIPTION The plant operators have lost the ability to maintain water level in the reactor vessel above the reactor core while the plant is in cold shutdown. This condition, by itself, poses no immediate threat to public safety.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from _____ degrees Wind Speed* _____ mph
(* May not be available for Initial Notifications) Precipitation* _____ Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time _____ Date _____ / _____ / _____
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
(Unaffected Unit(s) Status Not Required for Initial Notifications)
[B] U2 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
[C] U3 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____

13. REMARKS: _____

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: _____ Iodines: _____ Particulates: _____ Other: _____
FORM: [A] Airborne Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date _____ / _____ / _____
[B] Liquid Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date _____ / _____ / _____

15. PROJECTION PARAMETERS: Projection Period: _____ Hours Estimated Release Duration: _____ Hours
Projection performed: Time _____ Date _____ / _____ / _____

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary _____
2 Miles _____
5 Miles _____
10 Miles _____

17. APPROVED BY: _____ Title: Emergency Coordinator Time: _____ Date: _____ / _____ / _____

NOTIFIED BY: _____ RECEIVED BY: _____ Time: _____ Date: _____ / _____ / _____

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
CLASSIFICATION:
BASED ON EAL# 4.4.G.1 EAL DESCRIPTION The reactor control rods failed to shut down the reactor and adequate core cooling cannot be maintained. Plant operators will recommend protective actions for the public.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

- 10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: / / Stop Time: Date / /
[B] Liquid Start Time: Date: / / Stop Time: Date / /

- 15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

- 16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
CLASSIFICATION:
BASED ON EAL# 4.5.U.1 EAL DESCRIPTION: AC electrical power from all offsite sources has been lost for more than 15 minutes. Power is still available from onsite sources. This EAL poses no threat to the safety of plant personnel or the general public.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]
10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /
13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:
15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /
16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles
17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

BASED ON EAL# 4.5.U.2 EAL DESCRIPTION: DC electrical power in the plant has been lost for greater than 15 minutes while the plant is in cold shutdown or refueling mode. This EAL poses no threat to the safety of the general public.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE

- [B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications) [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

1. [A] DRILL [B] ACTUAL EVENT MESSAGE # _____
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME _____ DATE _____ / _____ / _____ AUTHENTICATION # _____
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.5.A.1 EAL DESCRIPTION All AC electrical power from offsite and onsite sources has been lost for more than 15 minutes with the plant in cold shutdown or refueling mode. This EAL poses no threat to the safety of the general public.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from _____ degrees Wind Speed* _____ mph
(* May not be available for Initial Notifications) Precipitation* _____ Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time _____ Date _____ / _____ / _____

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
[B] U2 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
[C] U3 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____

13. REMARKS: _____

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: _____ Iodines: _____ Particulates: _____ Other: _____
FORM: [A] Airborne Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date: _____ / _____ / _____
[B] Liquid Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date: _____ / _____ / _____

15. PROJECTION PARAMETERS: Projection Period: _____ Hours Estimated Release Duration: _____ Hours
Projection performed: Time _____ Date _____ / _____ / _____

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary _____
2 Miles _____
5 Miles _____
10 Miles _____

17. APPROVED BY: _____ Title: Emergency Coordinator Time: _____ Date: _____ / _____ / _____

NOTIFIED BY: _____ RECEIVED BY: _____ Time: _____ Date: _____ / _____ / _____

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
CLASSIFICATION:
BASED ON EAL# 4.5.A.2 EAL DESCRIPTION Many sources of AC electrical power have been lost for greater than 15 minutes. Only one source of power to the vital busses is still available. This EAL poses no threat to the safety of the general public.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

- 10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:
15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /
16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
CLASSIFICATION:
BASED ON EAL# 4.5.S.1 EAL DESCRIPTION All AC electrical power to the vital busses (Offsite and Onsite) has been lost for more than 15 minutes. This condition, by itself, poses no immediate threat to public safety.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]
10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
(B) U2 % Power Shutdown at: Time Date / /
(C) U3 % Power Shutdown at: Time Date / /
13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: / / Stop Time: Date: / /
[B] Liquid Start Time: Date: / / Stop Time: Date: / /
15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /
16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles
17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

1. [A] DRILL [B] ACTUAL EVENT MESSAGE # _____
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME _____ DATE _____ / _____ / _____ AUTHENTICATION # _____
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.5.S.2 EAL DESCRIPTION All sources of DC electrical power to vital equipment has been lost for more than 15 minutes. This condition, by itself, poses no immediate threat to public safety.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from _____ degrees Wind Speed* _____ mph
(* May not be available for Initial Notifications) Precipitation* _____ Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time _____ Date _____ / _____ / _____
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
(Unaffected Unit(s) Status Not Required for Initial Notifications)
[B] U2 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
[C] U3 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____

13. REMARKS: _____

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: _____ Iodines: _____ Particulates: _____ Other: _____
FORM: [A] Airborne Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date: _____ / _____ / _____
[B] Liquid Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date: _____ / _____ / _____

15. PROJECTION PARAMETERS: Projection Period: _____ Hours Estimated Release Duration: _____ Hours
Projection performed: Time _____ Date _____ / _____ / _____

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary _____
2 Miles _____
5 Miles _____
10 Miles _____

17. APPROVED BY: _____ Title: Emergency Coordinator Time: _____ Date: _____ / _____ / _____

NOTIFIED BY: _____ RECEIVED BY: _____ Time: _____ Date: _____ / _____ / _____

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
CLASSIFICATION:
BASED ON EAL# 4.5.G.1 EAL DESCRIPTION: All AC electrical power from offsite and onsite sources has been lost and it is not expected to be turned on for an extended period of time. Plant operators will recommend protective actions for the public.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]
10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[Unaffected Unit(s) Status Not Required for Initial Notifications]
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /
13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: / / Stop Time: Date / /
[B] Liquid Start Time: Date: / / Stop Time: Date / /
15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /
16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid-CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles
17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.6.U.1.1 EAL DESCRIPTION: A fire, lasting more than 15 minutes, has occurred within the protected area of the plant. This EAL poses no threat to the safety of the general public.

- 5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] All

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.6.U.1.2 EAL DESCRIPTION: There has been an explosion within the plant's protected area. This EAL poses no threat to the safety of the general public.

- 5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

- 10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

BASED ON EAL# 4.6.U.2 EAL DESCRIPTION There has been a confirmed security threat directed toward the plant. This EAL poses no threat to the safety of the general public.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE

- [B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec

MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: [A] Airborne Start Time: Date: / / Stop Time: Date: / /

[B] Liquid Start Time: Date: / / Stop Time: Date: / /

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours

Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)

Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.6.A.2 EAL DESCRIPTION A fire or explosion has caused damage to permanent plant equipment necessary to keep spent fuel cooled. This EAL poses no threat to the safety of the general public.

- 5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

- 10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: / / Stop Time: Date: / /
[B] Liquid Start Time: Date: / / Stop Time: Date: / /

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.6.A.3 EAL DESCRIPTION The Safeguards Contingency Plan was implemented for an event within the Protected Area. This EAL poses no threat to the safety of the general public.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE [B] EVACUATE [C] SHELTER [D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY. [E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]
10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /
13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: / / Stop Time: Date: / /
[B] Liquid Start Time: Date: / / Stop Time: Date: / /
15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /
16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

BASED ON EAL# 4.6.A.4 EAL DESCRIPTION A valid notification of an airliner attack threat has been received. This EAL poses no threat to the safety of the general public.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE

- [B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec

MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: [A] Airborne Start Time: Date: / / Stop Time: Date: / /

[B] Liquid Start Time: Date: / / Stop Time: Date: / /

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours

Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)

Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. DRILL ACTUAL EVENT MESSAGE #
2. INITIAL FOLLOW-UP NOTIFICATION: TIME DATE AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: UNUSUAL EVENT ALERT SITE AREA EMERGENCY GENERAL EMERGENCY
BASED ON EAL# 4.6.A.5 EAL DESCRIPTION Hostile action is occurring or has occurred within the site
Owner Controlled Area (OCA). This EAL poses no threat to the safety of the general public.

5. PROTECTIVE ACTION RECOMMENDATIONS: NONE
EVACUATE
SHELTER
CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
OTHER

6. EMERGENCY RELEASE: None Is Occurring Has Occurred

7. RELEASE SIGNIFICANCE: Not applicable Within normal operating limits Above normal operating limits Under Evaluation
8. EVENT PROGNOSIS: Improving Stable Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* A B C D E F G

10. DECLARATION TERMINATION Time Date

11. AFFECTED UNIT(S): 1 2 3 All

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
A U1 % Power Shutdown at: Time Date
B U2 % Power Shutdown at: Time Date
C U3 % Power Shutdown at: Time Date

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: Elevated Mixed Ground UNITS: Ci Ci/sec uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: Airborne Start Time: Date: Stop Time: Date:
Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date:

NOTIFIED BY: RECEIVED BY: Time: Date:

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

1. [A] DRILL [B] ACTUAL EVENT MESSAGE # _____
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME _____ DATE _____ / _____ / _____ AUTHENTICATION # _____
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.6.S.1.1 EAL DESCRIPTION Unauthorized hostile personnel have entered a vital area of the plant. This condition, by itself, poses no immediate threat to public safety.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from _____ degrees Wind Speed* _____ mph
(* May not be available for Initial Notifications) Precipitation* _____ Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time _____ Date _____ / _____ / _____

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
[B] U2 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
[C] U3 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____

13. REMARKS: _____

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: _____ Iodines: _____ Particulates: _____ Other: _____
FORM: [A] Airborne Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date: _____ / _____ / _____
[B] Liquid Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date: _____ / _____ / _____

15. PROJECTION PARAMETERS: Projection Period: _____ Hours Estimated Release Duration: _____ Hours
Projection performed: Time _____ Date _____ / _____ / _____

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary _____
2 Miles _____
5 Miles _____
10 Miles _____

17. APPROVED BY: _____ Title: Emergency Coordinator Time: _____ Date: _____ / _____ / _____

NOTIFIED BY: _____ RECEIVED BY: _____ Time: _____ Date: _____ / _____ / _____

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.6.S.1.2 EAL DESCRIPTION Confirmed bomb has been discovered and/or exploded in a vital area of the plant. This condition, by itself, poses no immediate threat to public safety.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: / / Stop Time: Date: / /
[B] Liquid Start Time: Date: / / Stop Time: Date: / /

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

BASED ON EAL# 4.6.S.1.3 EAL DESCRIPTION Confirmed act of sabotage has been discovered in a vital area of the plant. This condition, by itself, poses no immediate threat to public safety.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE

- [B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications) [A] U1 % Power Shutdown at: Time Date / / [B] U2 % Power Shutdown at: Time Date / / [C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec

MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: [A] Airborne Start Time: Date: / / Stop Time: Date: / /

[B] Liquid Start Time: Date: / / Stop Time: Date: / /

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. DRILL ACTUAL EVENT MESSAGE #
2. INITIAL FOLLOW-UP NOTIFICATION: TIME DATE AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: UNUSUAL EVENT ALERT SITE AREA EMERGENCY GENERAL EMERGENCY
BASED ON EAL# 4.6.S.1.4 EAL DESCRIPTION The Safeguards Contingency Plan was implemented for an event within a Vital Area. This condition, by itself, poses no immediate threat to public safety.

5. PROTECTIVE ACTION RECOMMENDATIONS: NONE
EVACUATE
SHELTER
CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
OTHER

6. EMERGENCY RELEASE: None Is Occurring Has Occurred

7. RELEASE SIGNIFICANCE: Not applicable Within normal operating limits Above normal operating limits Under Evaluation
8. EVENT PROGNOSIS: Improving Stable Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* A B C D E F G

10. DECLARATION TERMININATION Time Date

11. AFFECTED UNIT(S): 1 2 3 All

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
A U1 % Power Shutdown at: Time Date
B U2 % Power Shutdown at: Time Date
C U3 % Power Shutdown at: Time Date

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: Elevated Mixed Ground UNITS: Ci Ci/sec uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: Airborne Start Time: Date: Stop Time: Date:
Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date:

NOTIFIED BY: RECEIVED BY: Time: Date:

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.6.S.2 EAL DESCRIPTION Hostile action is occurring or has occurred within the Protected Area. This condition, by itself, poses no immediate threat to public safety.

- 5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] [All]

- 12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. DRILL ACTUAL EVENT MESSAGE #
2. INITIAL FOLLOW-UP NOTIFICATION: TIME DATE AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: UNUSUAL EVENT ALERT SITE AREA EMERGENCY GENERAL EMERGENCY
BASED ON EAL# 4.6.G.1 EAL DESCRIPTION A security event has occurred which resulted in a loss of physical control of the plant. Plant operators will recommend protective actions for the public.

5. PROTECTIVE ACTION RECOMMENDATIONS: NONE
EVACUATE
SHELTER
CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
OTHER

6. EMERGENCY RELEASE: None Is Occurring Has Occurred

7. RELEASE SIGNIFICANCE: Not applicable Within normal operating limits Above normal operating limits Under Evaluation
8. EVENT PROGNOSIS: Improving Stable Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* A B C D E F G

10. DECLARATION TERMININATION Time Date

11. AFFECTED UNIT(S): 1 2 3 All

12. Unit Status: U1 % Power Shutdown at: Time Date
(U unaffected Unit(s) Status Not Required for Initial Notifications)
U2 % Power Shutdown at: Time Date
U3 % Power Shutdown at: Time Date

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: Elevated Mixed Ground UNITS: Ci Ci/sec uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: Airborne Start Time: Date: Stop Time: Date:
Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date:

NOTIFIED BY: RECEIVED BY: Time: Date:

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.7.U.1 EAL DESCRIPTION: A natural or other destructive event has occurred onsite.
This EAL poses no threat to the safety of plant personnel or the general public.

- 5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

- 10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.7.U.2 EAL DESCRIPTION: A (toxic / flammable) gas has been released (near-site/ onsite) which could affect plant operations. This EAL poses no threat to the safety of plant personnel or the general public.

- 5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] All

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.7.U.3 EAL DESCRIPTION Conditions in the plant exist which call for the heightened awareness and notifications associated with the Unusual Event classification. This EAL poses no threat to the safety of plant personnel or the general public.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]
10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /
13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: / / Stop Time: Date: / /
[B] Liquid Start Time: Date: / / Stop Time: Date: / /
15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /
16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles
17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

1. [A] DRILL [B] ACTUAL EVENT MESSAGE # _____
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME _____ DATE _____ / _____ / _____ AUTHENTICATION # _____
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.7.A.1 EAL DESCRIPTION A natural disaster or other destructive event has impacted a plant vital area. This EAL poses no threat to the safety of plant personnel or the general public.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE [B] EVACUATE [C] SHELTER [D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY. [E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from _____ degrees Wind Speed* _____ mph
(* May not be available for Initial Notifications) Precipitation* _____ Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time _____ Date _____ / _____ / _____
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
[B] U2 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____
[C] U3 _____ % Power Shutdown at: Time _____ Date _____ / _____ / _____

13. REMARKS: _____

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: _____ Iodines: _____ Particulates: _____ Other: _____
FORM: [A] Airborne Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date: _____ / _____ / _____
[B] Liquid Start Time: _____ Date: _____ / _____ / _____ Stop Time: _____ Date: _____ / _____ / _____

15. PROJECTION PARAMETERS: Projection Period: _____ Hours Estimated Release Duration: _____ Hours
Projection performed: Time _____ Date _____ / _____ / _____

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary _____
2 Miles _____
5 Miles _____
10 Miles _____

17. APPROVED BY: _____ Title: Emergency Coordinator Time: _____ Date: _____ / _____ / _____

NOTIFIED BY: _____ RECEIVED BY: _____ Time: _____ Date: _____ / _____ / _____

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

BASED ON EAL# 4.7.A.2 EAL DESCRIPTION A (toxic / flammable) gas has been released into or near a vital area of the plant. This EAL poses no threat to the safety of the general public.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE

- [B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec

MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: [A] Airborne Start Time: Date: / / Stop Time: Date / /

[B] Liquid Start Time: Date: / / Stop Time: Date / /

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours

Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)

Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.7.A.3 EAL DESCRIPTION The control room is being evacuated. Control of plant systems is being established from another location within the plant. This EAL poses no threat to the safety of the general public.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

- 10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: [A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: / / Stop Time: Date: / /
[B] Liquid Start Time: Date: / / Stop Time: Date: / /
15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /
16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

- 17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.7.A.4 EAL DESCRIPTION Conditions in the plant exist which call for the kind of response associated with the Alert classification. This EAL poses no threat to the safety of the general public.

- 5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE
[B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] [All]

- 12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: Stop Time: Date:
[B] Liquid Start Time: Date: Stop Time: Date:

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

- 16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY

BASED ON EAL# 4.7.S.1 EAL DESCRIPTION Upon evacuation of the control room, operators have been unable to establish control of plant systems from remote locations. This condition, by itself, poses no immediate threat to public safety.

5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE

- [B] EVACUATE
[C] SHELTER
[D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY.
[E] OTHER

6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation

8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading

9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]

10. [A] DECLARATION [B] TERMINATION Time Date / /

11. AFFECTED UNIT(S): [1] [2] [3] [All]

12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications)
[A] U1 % Power Shutdown at: Time Date / /
[B] U2 % Power Shutdown at: Time Date / /
[C] U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] uCi/sec

MAGNITUDE: Noble Gases: Iodines: Particulates: Other:

FORM: [A] Airborne Start Time: Date: / / Stop Time: Date: / /

[B] Liquid Start Time: Date: / / Stop Time: Date: / /

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. [A] DRILL [B] ACTUAL EVENT MESSAGE #
2. [A] INITIAL [B] FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: [A] UNUSUAL EVENT [B] ALERT [C] SITE AREA EMERGENCY [D] GENERAL EMERGENCY
BASED ON EAL# 4.7.S.2 EAL DESCRIPTION: Conditions in the plant exists which call for the kind of response associated with a Site Area Emergency. This condition, by itself, poses no immediate threat to public safety.
5. PROTECTIVE ACTION RECOMMENDATIONS: [A] NONE [B] EVACUATE [C] SHELTER [D] CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH STATE PLANS AND POLICY. [E] OTHER
6. EMERGENCY RELEASE: [A] None [B] Is Occurring [C] Has Occurred

- 7. RELEASE SIGNIFICANCE: [A] Not applicable [B] Within normal operating limits [C] Above normal operating limits [D] Under Evaluation
8. EVENT PROGNOSIS: [A] Improving [B] Stable [C] Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* [A] [B] [C] [D] [E] [F] [G]
10. [A] DECLARATION [B] TERMINATION Time Date / /
11. AFFECTED UNIT(S): [1] [2] [3] [All]
12. Unit Status: (Unaffected Unit(s) Status Not Required for Initial Notifications) [A] U1 % Power Shutdown at: Time Date / / [B] U2 % Power Shutdown at: Time Date / / [C] U3 % Power Shutdown at: Time Date / /
13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

- 14. RELEASE CHARACTERIZATION: TYPE: [A] Elevated [B] Mixed [C] Ground UNITS: [A] Ci [B] Ci/sec [C] µCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: [A] Airborne Start Time: Date: / / Stop Time: Date / / [B] Liquid Start Time: Date: / / Stop Time: Date / /
15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /
16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles
17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /
NOTIFIED BY: RECEIVED BY: Time: Date: / /

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

- 1. DRILL ACTUAL EVENT MESSAGE #
2. INITIAL FOLLOW-UP NOTIFICATION: TIME DATE / / AUTHENTICATION #
3. SITE: Catawba Nuclear Site Confirmation Phone # (803) 701-3807 (Simulator)

4. EMERGENCY CLASSIFICATION: UNUSUAL EVENT ALERT SITE AREA EMERGENCY GENERAL EMERGENCY
BASED ON EAL# 4.7.G.1 EAL DESCRIPTION A condition exists which indicates an actual or imminent release of radioactivity as large as that associated with a General Emergency. Plant operators will recommend protective actions for the public.
5. PROTECTIVE ACTION RECOMMENDATIONS: NONE
6. EMERGENCY RELEASE: None Is Occurring Has Occurred

7. RELEASE SIGNIFICANCE: Not applicable Within normal operating limits Above normal operating limits Under Evaluation
8. EVENT PROGNOSIS: Improving Stable Degrading
9. METEOROLOGICAL DATA: Wind Direction* from degrees Wind Speed* mph
(* May not be available for Initial Notifications) Precipitation* Stability Class* A B C D E F G

10. DECLARATION TERMINATION Time Date / /
11. AFFECTED UNIT(S): 1 2 3 All
12. Unit Status: U1 % Power Shutdown at: Time Date / /
U2 % Power Shutdown at: Time Date / /
U3 % Power Shutdown at: Time Date / /

13. REMARKS:

FOLLOW-UP INFORMATION (Lines 14 through 16 Not Required for Initial Notifications)

EMERGENCY RELEASE DATA. NOT REQUIRED IF LINE 6A IS SELECTED.

14. RELEASE CHARACTERIZATION: TYPE: Elevated Mixed Ground UNITS: Ci Ci/sec uCi/sec
MAGNITUDE: Noble Gases: Iodines: Particulates: Other:
FORM: Airborne Start Time: Date: / / Stop Time: Date: / /
Liquid Start Time: Date: / / Stop Time: Date: / /

15. PROJECTION PARAMETERS: Projection Period: Hours Estimated Release Duration: Hours
Projection performed: Time Date / /

16. PROJECTED DOSE: DISTANCE TEDE (mrem) Adult Thyroid CDE (mrem)
Site boundary
2 Miles
5 Miles
10 Miles

17. APPROVED BY: Title: Emergency Coordinator Time: Date: / /

NOTIFIED BY: RECEIVED BY: Time: Date: / /