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 SERRA, P.L. Iowa Electric Light & Power Co.
 RECIP. NAME RECIPIENT AFFILIATION

Revised 7/21/90 m.m.

SUBJECT: Rev 9 to CPIP CPIP 5.2, "Radiological & EOF Manager."
 W/900731 ltr.

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 TITLE: OR Submittal: Emergency Preparedness Plans, Implement'g Procedures, c

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Iowa Electric Light and Power Company

July 3, 1990
NEP-90-0293

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

Project: Duane Arnold Energy Center
Subject: Transmittal of Emergency Planning Documents
File: A-304

To Whom It May Concern:

We are forwarding, in accordance with Appendix E to 10CFR50, three controlled copies (one to NRR and two to NRC Region III) of our

- | | | |
|-------------------------------------|--|-------------------|
| <input type="checkbox"/> | Duane Arnold Energy Center Emergency Plan | Revision _____ |
| <input type="checkbox"/> | Emergency Plan Implementing Procedure | Revision _____ |
| <input type="checkbox"/> | Iowa Electric Light & Power Co. Corporate
Emergency Response Plan | Revision _____ |
| <input checked="" type="checkbox"/> | Corporate Plan Implementing Procedure 5.2,
which replaces copy sent 6/29/90 with NEP-90-0289 | Revision <u>9</u> |
| <input type="checkbox"/> | Duane Arnold Energy Center Emergency Telephone Book
The Emergency Telephone Book is considered to be
proprietary to Iowa Electric. | Revision _____ |

Insert the revised document(s) in your files and discard the obsolete one(s). Please acknowledge the receipt of the enclosed documents by signing and dating the section below and returning a copy of this letter to me.

9007100279 900621
PDR ADOCK 05000331
F PDC

ACAS
11

No proprietary information is contained in these revisions.

The Emergency Telephone Book is, in total, considered to be proprietary to Iowa Electric.

Very truly yours,



Paul L. Serra
Manager, Emergency Planning

- cc: IE Group Leader, Emergency Planning
IE Manager, Nuclear Licensing
IE Emergency Planner - Procedures
NRC Region III (2)
NRC Resident Inspector

The document(s) listed above have been received by the NRC.

1. Headquarters, NRR, _____, _____
Control Copy #91 Date
2. NRC Region III, _____, _____
Control Copy #161-162 Date

PLS/kdb

Summary of Changes (CPIP 5.2)

Pg 4, 4.3.4

Corrected Attach 2 to Attach 2, 3, 4 or 5.

Pg 4, 4.3.

Corrected Attach 2 to Attach 2, 3, 4 or 5.

Pg 4, 4.3.7

Corrected Attach 3 to Attach 6

Pg 4, Note

Corrected Attach 2 to Attach 2, 3, 4 or 5.

Pg 5, 4.4.5

Corrected Attach 4 to Attach 7

Pg 6, 6.0

Added new attachments 2 - 5.

Pg 9, #1

Added to Attach 2, 3, 4, or 5.

Pgs 10 - 16

Added new Attachments:

Attach 2 "Offsite Agency Notification Form - Unusual Event"

Attach 3 "Offsite Agency Notification Form - Alert"

Attach 4, "Offsite Agency Notification Form - Site Area Emergency"

Attach 5, "Offsite Agency Notification Form - General Emergency"

Pg 17,

Renumbered from Attach 3 to Attach 6.

Pg 18,

Renumbered from Attach 4 to Attach 7.

IOWA ELECTRIC LIGHT AND POWER
DUANE ARNOLD ENERGY CENTER
TRANSMITTAL/ACKNOWLEDGEMENT
MEMORANDUM

NRC-NRR/DOC. CONTROL # 91
DESK, WASHINGTON, DC

DATE: July 2, 1990

SUBJECT: Corporate Plan Implementing Procedures

Revisions to your controlled copy of the Corporate Plan Implementing Procedures are attached. As indicated below, please remove and discard the superseded material and insert the revised material.

MANUAL CONTENTS	REMOVE		INSERT	
	REV.	DATE	REV	DATE
CPIP 5.2			9	6/27/90

Please acknowledge that the above action has been taken by signing below and returning this memo to P. Tillman, 14th floor, IE Tower, Box 351 Cedar Rapids, IA 52406.

PLEASE RETURN WITHIN 20 DAYS.

I have made the above revisions as indicated.

Print Name

Signature/Date

<u>DOCUMENT NUMBER</u>	<u>TITLE</u>	<i>SUPERSEDED PER REV TO CPIP PROCEDURE</i>	<u>REV.</u>	<i>50-331 LTR STD. 6/21/90 sect 900 7/00 279</i> <u>DATE</u>
1.2	Corporate Notification		9	03/27/90
1.3	Activation and Operation of the EOF		7	09/23/88
1.4	Release of Emergency-Related Information		5	10/03/89
1.5	Building Security Implementation		4	12/07/89
1.6	Communication and Data Transmission Systems Coordination		1	07/27/83
2.1	Dose Assessment and Protective Action Recommendations		9	09/29/89
2.2	Technical Support Coordination		2	07/13/83
2.3	Administrative Services and Corporate Response Coordination		3	12/31/84
2.4	Quality Assurance and Quality Control Activities		2	10/06/89
2.5	Insurance and Claims		2	06/11/90
2.6	Legal Assistance		1	08/17/83
4.1	Maintenance of Emergency Preparedness		6	09/29/89
4.2	Training, Drills and Exercises		4	09/29/89
4.3	Public Information Program		3	11/04/88
5.1	Emergency Response and Recovery Director		4	10/09/89
5.2	Radiological and EOF Manager		9	06/27/90

CORPORATE PLAN IMPLEMENTING PROCEDURE	No. CPIP - 5.2 Rev. 9
RADIOLOGICAL AND EOF MANAGER	PAGE 1 of 18 EFFECTIVE DATE: JUN 27 1990

1.0 PURPOSE

1.1 This procedure describes the actions required by the Radiological and EOF Manager during an emergency situation at the Duane Arnold Energy Center (DAEC).

2.0 APPLICABILITY

2.1 This procedure applies to the Radiological and EOF Manager.

3.0 RESPONSIBILITIES

3.1 General Responsibilities

3.1.1 The Radiological and EOF Manager is accountable to the Emergency Response and Recovery Director and is responsible for coordinating all offsite radiological monitoring and dose assessment activities and providing protective action recommendations to State and County authorities to protect the general public.

3.1.2 The Radiological and EOF Manager shall supervise the activation of the Emergency Operations Facility (EOF) and coordinate the efforts of the Radiological Assessment Coordinator.

3.2 Specific Responsibilities

3.2.1 Determine from the Emergency Response and Recovery Director the extent to which the Corporate Emergency Response Organization is to be activated.

3.2.2 Supervise the activation of the EOF and ensure that the security area is set-up with the items listed in CPIP 1.5, Attachment 3 "Security Post Equipment and Supplies".

3.2.3 Complete the notification of designated personnel.

3.2.4 Ensure that communications are established with the Technical Support Center (TSC) to obtain plant information.

3.2.5 Provide County, State and Federal officials information on radiological conditions, plant status, response actions taken, and any reclassifications.

3.2.6 Coordinate the offsite radiological monitoring and dose assessment program.

3.2.7 Ensure that radiological status reports are periodically developed and displayed.

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RADIOLOGICAL AND EOF MANAGER	PAGE 2 of 18 EFFECTIVE DATE: JUN 27 1990

- 3.2.8 Evaluate radiological survey results and projected doses for consistency.
- 3.2.9 Recommend that the County EOCs activate the Prompt Alert Notification System within fifteen (15) minutes of a declaration of a SITE EMERGENCY or a GENERAL EMERGENCY.
- 3.2.10 Analyze all information for significant trends while developing protective action recommendations. Review the recommendations with the Emergency Response and Recovery Director and, when authorized provide them to the State and County officials.
- 3.2.11 Advise the Emergency Support Manager of radiological considerations related to technical engineering and support services.
- 3.2.12 Evaluate the need for and solicit guidance and assistance from, industry contacts and outside support agencies in radiological matters.
- 3.2.13 Coordinate with the Site Radiation Protection Coordinator and local, State, and Federal agency representatives in the development and implementation of a long term environmental monitoring program as an element of recovery.

4.0 INSTRUCTIONS

- 4.1 Actions Required upon Activation of the Corporate Emergency Response Plan
 - 4.1.1 When notified by the Emergency Response and Recovery Director that the Corporate Emergency Response Plan has been invoked, complete the notification requirement of CIP 1.2, "Corporate Notification."
 - 4.1.2 Proceed to the EOF as soon as possible and report to the Emergency Response and Recovery Director to receive instructions and a briefing on the latest conditions and projected trends at DAEC.
- 4.2 Actions Required to Activate the Emergency Operations Facility
 - 4.2.1 Ensure that the EOF log has been initiated by the Event Historian.
 - 4.2.2 Ensure that the security area is set-up with the items listed in CIP 1.5, Attachment 3 "Security Post Equipment and Supplies".
 - 4.2.3 Ensure that communications are established between:

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- a. The Radiological Assessment Coordinator and the Site Radiation Protection Coordinator
 - b. The Radiological Assessment Coordinator and the Offsite Radiological Monitoring Teams
 - c. The EOF Communicator (White TSC Hotline) and the TSC Communicator
 - d. The EOF Communicator (Red Hotline) and the NRC
 - e. The EOF and the EOCs
- 4.2.4 Ensure that a functional test of all equipment (e.g., MIDAS terminal and printer, VAX computer, overhead projectors, telephones) is performed and that any problems or malfunctions are resolved. Refer to CIP 1.3, Section 4.3.
- 4.2.5 Brief the Radiological Assessment Coordinator on current and projected plant conditions, actual or potential radiological releases, meteorological conditions, the status of offsite radiological monitoring teams, any actions taken by plant personnel that relate to offsite radiological conditions, and any significant trends.
- 4.2.6 When the Emergency Support Manager reports that all key positions are manned and sufficient personnel are present to constitute a level of operational readiness and the Radiological Assessment Coordinator reports that he is ready to assume responsibility for performing dose assessment and controlling the offsite radiological monitoring teams, notify the Emergency Response and Recovery Director that the EOF is fully manned and operationally ready. County, State, and Federal EOCs should be so notified.
- 4.2.7 Ensure that the EOF is secure by contacting the Security Director concerning his activities to secure the building.
- 4.3 Actions Required to Coordinate the Radiological Assessment Program
- 4.3.1 When authorized by the Emergency Response and Recovery Director assume responsibility for offsite agency follow-up contact.
 - 4.3.2 Contact the Linn County, Benton County, and the State of Iowa Emergency Operations Centers (EOCs). Advise them that the EOF is being activated. Provide them with the current plant conditions, actual or potential radiological releases, meteorological conditions and forecasts, and any other information as required by the current situation. Request that their representatives be dispatched to the EOF.

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- 4.3.3 When the County and State EOC representatives arrive at the EOF, brief them on current and projected plant conditions, meteorological conditions, actual or potential offsite radiological releases, and any significant trends.
- 4.3.4 As dose projection information becomes available, develop protective action recommendations in accordance with CPIP 2.1, "Dose Assessment and Protective Action Recommendations." Review the recommendations with the Emergency Response and Recovery Director and upon his approval, record them on Attachment 2, 3, 4, or 5 "Offsite Agency Notification - Unusual Event/Alert/Site Emergency/General Emergency," as appropriate and then notify the following personnel:
- a. Emergency Coordinator (through the Emergency Response and Recovery Director)
 - b. County and State representatives at the EOF
 - c. County and State EOC officials
 - d. Radiological Assessment Coordinator
 - e. Offsite radiological field monitoring teams (through the Radiological Assessment Coordinator)
- 4.3.5 Any changes to protective action recommendations, or Emergency Classifications, should be recorded on Attachment 2, 3, 4, or 5.
- 4.3.6 Continuously review information on plant conditions and dose projections. Modify protective action recommendations based on a trend analysis of the available data.
- 4.3.7 Ensure appropriate Emergency Response Organization personnel, State officials, and county officials are advised of any significant changes in status or any significant trends, and that they receive an update of the situation every hour at a minimum. The EOF PA system shall be used for this purpose. All such notifications of offsite agencies shall be documented on Attachment 6, "Offsite Agency Supplemental Information Form."

NOTE

Any changes to protective action recommendations, or Emergency Classifications, should be recorded on Attachment 2, 3, 4, or 5, as appropriate.

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- 4.3.8 Ensure that radiological status reports are developed and displayed in a timely manner and that they indicate current trends.
- 4.3.9 Ensure that the efforts undertaken by DAEC field monitoring teams, State field monitoring teams and other groups are being coordinated by the Radiological Assessment Coordinator.
- 4.3.10 Evaluate the radiological survey results and revise protective action recommendations as required.
- 4.3.11 Ensure that the Radiological Assessment Coordinator and the field teams are kept informed of pertinent information regarding the event.
- 4.4 Actions Required to Activate the Johnson County Responders and the Emergency Worker Monitoring and Decontamination Station (EWMS) Set-Up Leader
- 4.4.1 The Johnson County Responders should be placed on standby (assembled in the 6th floor cafeteria) at an Alert or greater classification during normal working hours unless otherwise directed by the ER&RD. During off hours, Johnson County Responders are notified by Teleconnect.
- 4.4.2 Complete the message form in Attachment 7 of CPIP 1.2, "Page Message for Johnson County Responders" and designate whether the message is or is not a drill.
- 4.4.3 Submit the message to the ER&RD for authorization.
- 4.4.4 Deliver the message to the Switchboard Operator on the 5th floor of the IE Tower via an EOF messenger.
- 4.4.5 When authorized by the ER&RD, dispatch the Johnson County Responders as follows:
- Assure that the Support Services Coordinator has unlocked the access to the 6th floor cafeteria page system.
 - Complete Attachment 7, "Dispatch Message for Johnson County Responders," with the appropriate message for dispatching the Responders.
 - Instruct the EOF messenger to read the message over the 6th floor cafeteria page system.
 - Instruct the EOF messenger to determine the total number of Johnson County Responders dispatched and report back to the Radiological & EOF manager.

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4.4.6 When authorized by the ER&RD, direct the EWMDS Set-Up Leader to proceed to the EWMDS to set up that facility.

5.0 REFERENCES

- 5.1 Corporate Emergency Response Plan
- 5.2 Corporate Plan Implementing Procedures
- 5.3 Emergency Plan Implementing Procedures

6.0 ATTACHMENTS

- 6.1 Attachment 1, "Radiological and EOF Manager Checklist"
- 6.2 Attachment 2, "Offsite Agency Notification Form - Unusual Event"
- 6.3 Attachment 3, "Offsite Agency Notification Form - Alert"
- 6.4 Attachment 4, "Offsite Agency Notification Form - Site Emergency"
- 6.5 Attachment 5, "Offsite Agency Notification Form - General Emergency"
- 6.6 Attachment 6, "Offsite Agency Supplemental Information Form"
- 6.7 Attachment 7, "Dispatch Message for Johnson County Responders"

Approved by: *David L. Hayden* Date: 6/5/90
Group Leader, Emergency Planning

Approved by: *Tom Sena* Date: 6/11/90
Manager, Emergency Planning

Approved by: *K. E. Puck* Date: 6/16/90
Manager, Quality Assurance

Approved by: *David M. Munn* Date: 6-21-90
Manager, Nuclear Division

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ATTACHMENT 1

RADIOLOGICAL AND EOF MANAGER CHECKLIST

INITIAL ACTIONS

1. Receive briefing from ER&RD _____
2. Corporate notification complete (CPIP 1.2) _____
 - a. Notify EWMS set-up Leader if an ALERT or greater has been declared _____
 - b. Ensure Security has notified the 5th floor operator with announcement for activating Johnson Co. Responders _____
3. Initiate EOF Log _____
4. Security area set-up complete (CPIP 1.5, Attachment 3) _____
5. Functional tests of EOF equipment complete (CPIP 1.3) _____
6. Communication channels established:
 - a. Radiological Assessment Coordinator (RAC) with Site Radiological Protection Coordinator _____
 - b. RAC with Field Monitoring Team(s) _____
 - c. EOF with TSC _____
 - d. EOF with NRC _____
 - e. EOF with State and County EOC's _____
7. EOF set-up complete and reported to ER&RD (CPIP 1.3) _____
8. RAC briefed _____
9. Obtain weather forecast _____

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ONE TIME TASKS

1. Responsibility for control of offsite monitoring teams and dose projections assumed by RAC (CPIP 2.1) _____
2. State and County EOC's notified that Rad and EOF Manager has assumed responsibility for follow-up notification _____
3. EOF State and County representatives briefed _____
4. Dispatch the Johnson County Responders when authorized by the ER&RD _____
5. Dispatch the EWMDS Set-up Leader when authorized by the ER&RD _____
6. NRC Site Team briefed as follows:
 - a. Offsite radiological monitoring activities and results _____
 - b. Dose projection results and protective action recommendations made _____
 - c. Protective actions that have been implemented by off-site authorities in the EPZ _____
 - d. Media briefings and press release status _____
 - e. Response actions in progress at the EOF to assist in mitigating/terminating the event _____
 - f. Local and State interfaces established _____

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REPETITIVE TASKS

1. Protective action recommendations approved by ER&RD and disseminated (document on Attachment 2, 3, 4 or 5)
 - a. Prior to official announcement of protective action recommendations, initiate pre-conference call with State to discuss potential recommendations.
2. Recommend activation of the Prompt Alert and Notification System within 15 minutes of declaration of a SITE or GENERAL EMERGENCY
3. Review updates of weather forecasts.

NOTE

If Sector H is evacuated, notify the Emergency Public Information Manager to evacuate the ENC to the Alternate ENC.

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ATTACHMENT 2
OFFSITE AGENCY NOTIFICATION FORM - UNUSUAL EVENT

NOTE

Offsite agencies must be notified within 15 MINUTES of declaration of an Emergency Classification. NRC, notified after offsite agencies, must be notified within 1 HOUR after declaration or reclassification of Emergency Classification.

DATE: _____ TIME EAL DECLARED: _____

OSS on Duty: _____ MESSAGE NO. _____

1. This is _____ at Iowa Electric Light & Power Company calling from the
 ___ Control Room ___ TSC ___ EOF.
2. This is ___ A DRILL ___ A REAL EMERGENCY
3. An UNUSUAL EVENT has been ___ DECLARED ___ CANCELED.

TYPE: _____ DESCRIPTION: _____

4. Protective Actions for the public ARE NOT recommended.
5. Direct assistance at DAEC by your agency ___ IS ___ IS NOT requested.
6. This is a _____ DRILL _____ REAL EMERGENCY.

Notification conducted by: _____

INITIAL NOTIFICATION:

Emergency Coordinator: _____ Time: _____
ER&RD: _____ Time: _____
Linn County: _____ Time: _____
Benton County: _____ Time: _____
State DSD: _____ Time: _____
NRC: _____ Time: _____

CANCELLATION NOTIFICATION:

Emergency Coordinator: _____ Time: _____
ER&RD: _____ Time: _____
Linn County: _____ Time: _____
Benton County: _____ Time: _____
State DSD: _____ Time: _____
NRC: _____ Time: _____

CORPORATE PLAN IMPLEMENTING PROCEDURE	No. CPIP - 5.2 Rev. 9
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**ATTACHMENT 3
OFFSITE AGENCY NOTIFICATION FORM - ALERT**

NOTE

Offsite agencies must be notified within 15 MINUTES of declaration of an Emergency Classification. NRC, notified after offsite agencies, must be notified within 1 HOUR after declaration or reclassification of Emergency Classification.

DATE: _____ TIME EAL DECLARED: _____

OSS on Duty: _____ MESSAGE NO. _____

1. This is _____ at Iowa Electric Light & Power Company calling from the
 Control Room TSC EOF.
2. This is A DRILL A REAL EMERGENCY
3. An ALERT has been DECLARED CANCELED.

TYPE: _____ DESCRIPTION: _____

-
4. Protective Actions for the public ARE NOT recommended.
 5. Abnormal radiological releases ARE ARE NOT occurring.
 If occurring: Wind is out of _____ degrees at _____ mph. Population of concern is located in sector(s) _____.
 6. Offsite radiological monitoring IS IS NOT planned.
 If planned: Radiological Monitoring Teams ARE BEING HAVE BEEN dispatched.
 7. Direct assistance at DAEC by your agency IS IS NOT requested.
 IF assistance is desired, explain: _____
 8. This is A DRILL A REAL EMERGENCY
-

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ATTACHMENT 3(Continued)
OFFSITE AGENCY NOTIFICATION FORM - ALERT

Notification conducted by: _____

INITIAL NOTIFICATION:

Emergency Coordinator: _____ Time: _____

ER&RD: _____ Time: _____

Linn County: _____ Time: _____

Benton County: _____ Time: _____

State DSD: _____ Time: _____

NRC: _____ Time: _____

From TSC/EOF:

INPO _____ Time: _____

CANCELLATION NOTIFICATION:

Emergency Coordinator: _____ Time: _____

ER&RD: _____ Time: _____

Linn County: _____ Time: _____

Benton County: _____ Time: _____

State DSD: _____ Time: _____

NRC: _____ Time: _____

INPO _____ Time: _____

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ATTACHMENT 4
OFFSITE AGENCY NOTIFICATION FORM - SITE AREA EMERGENCY

NOTE

Offsite agencies must be notified within 15 MINUTES of declaration of an Emergency Classification. NRC, notified after offsite agencies, must be notified within 1 HOUR after declaration or reclassification of Emergency Classification.

DATE: _____ TIME EAL DECLARED: _____

OSS on Duty: _____ MESSAGE NO. _____

1. This is _____ at Iowa Electric Light & Power Company calling from the
___ Control Room ___ TSC ___ EOF.
2. This is ___ A DRILL ___ A REAL EMERGENCY
3. A Site Area Emergency has been ___ DECLARED ___ CANCELED.

TYPE: _____ DESCRIPTION: _____

NOTE

Evaluate the need for precautionary protective actions for the general public. Activate the Prompt Notification System. Recommend placing milk animals within 2 miles on stored feed.

4. Protective Actions for the public ___ ARE ___ ARE NOT recommended.

(Consider weather forecast & evacuation time estimates for PAR decision-making.)

CURRENT RECOMMENDATIONS ARE:

___ Activate public warning system.

___ Evacuate in ___ mile radius and downwind sector(s) ___ to ___ miles or to EPZ edge.

___ Shelter in ___ mile radius and downwind sector(s) ___ to ___ miles or to EPZ edge.

___ Dairy/feed in ___ mile radius and downwind sector(s) ___ to ___ miles or to EPZ edge.

5. Abnormal radiological releases ___ ARE ___ ARE NOT occurring.

___ If occurring: Wind is out of the _____ degrees at _____ mph. Population of concern is located in sector(s) _____.

6. Offsite radiological monitoring _____ IS _____ IS NOT planned.

___ If planned: Radiological Monitoring Teams ___ ARE BEING ___ HAVE BEEN dispatched.

7. Direct assistance at DAEC by your agency ___ IS ___ IS NOT requested.

___ IF assistance is desired, explain: _____

8. This is ___ A DRILL ___ A REAL EMERGENCY

CORPORATE PLAN IMPLEMENTING PROCEDURE	No. IP - 5.2 Rev. 9
RADIOLOGICAL AND EOF MANAGER	PAGE 14 of 18 EFFECTIVE DATE: JUN 27 1990

ATTACHMENT 4 (Continued)
OFFSITE AGENCY NOTIFICATION FORM - SITE AREA EMERGENCY

Notification conducted by: _____

INITIAL NOTIFICATION:

Emergency Coordinator: _____ Time: _____

ER&RD: _____ Time: _____

Linn County: _____ Time: _____

Benton County: _____ Time: _____

State DSD: _____ Time: _____

NRC: _____ Time: _____

From TSC/EOF:

INPO _____ Time: _____

CANCELLATION NOTIFICATION:

Emergency Coordinator: _____ Time: _____

ER&RD: _____ Time: _____

Linn County: _____ Time: _____

Benton County: _____ Time: _____

State DSD: _____ Time: _____

NRC: _____ Time: _____

INPO _____ Time: _____

CORPORATE PLAN IMPLEMENTING PROCEDURE	No. PIP - 5.2 Rev. 9 PAGE 15 of 18
RADIOLOGICAL AND EOF MANAGER	EFFECTIVE DATE: JUN 27 1990

ATTACHMENT 5
OFFSITE AGENCY NOTIFICATION FORM - GENERAL EMERGENCY

NOTE

Offsite agencies must be notified within 15 MINUTES of declaration of an Emergency Classification. NRC, notified after offsite agencies, must be notified within 1 HOUR after declaration or reclassification of Emergency Classification.

DATE: _____ TIME EAL DECLARED: _____

OSS on Duty: _____ MESSAGE NO. _____

1. This is _____ at Iowa Electric Light & Power Company calling from the
 ___ Control Room ___ TSC ___ EOF.
2. This is ___ A DRILL ___ A REAL EMERGENCY
3. A GENERAL EMERGENCY has been ___ DECLARED ___ CANCELED.

TYPE: _____ DESCRIPTION: _____

NOTE

GENERAL EMERGENCY requires the minimum protective action recommendations of - shelter the general public within the 2 mile radius and to 5 miles in the three (3) downwind sectors. Activate the Prompt Notification System. Recommend placing milk animals within 10 miles on stored feed.

4. Protective Actions for the public ___ ARE ___ ARE NOT recommended.
(Consider weather forecast & evacuation time estimates for PAR decision-making.)

CURRENT RECOMMENDATIONS ARE:

- _____ Activate public warning system.
- ___ Evacuate in ___ mile radius and downwind sector(s) ___ to ___ miles or to EPZ edge.
- ___ Shelter in ___ mile radius and downwind sector(s) ___ to ___ miles or to EPZ edge.
- ___ Dairy/feed in ___ mile radius and downwind sector(s) ___ to ___ miles or to EPZ edge.

Other Recommendations: _____

Basis for Recommendations: _____

5. Abnormal radiological releases ___ ARE ___ ARE NOT occurring.
 ___ If occurring: Wind is out of _____ degrees at _____ mph. Population of concern is located in sector(s) _____.
6. Offsite radiological monitoring _____ IS _____ IS NOT planned.
 ___ If planned: Radiological Monitoring Teams ___ ARE BEING ___ HAVE BEEN dispatched.
7. Direct assistance at OAEC by your agency ___ IS ___ IS NOT requested.
 ___ If assistance is desired, explain: _____
8. This is ___ A DRILL ___ A REAL EMERGENCY

CORPORATE PLAN IMPLEMENTING PROCEDURE	No. CPIP - 5.2 Rev. 9 PAGE 16 of 18
RADIOLOGICAL AND EOF MANAGER	EFFECTIVE DATE: JUN - 7 - 1990

**ATTACHMENT 5(Continued)
OFFSITE AGENCY NOTIFICATION FORM - GENERAL EMERGENCY**

Notification conducted by: _____

INITIAL NOTIFICATION:

Emergency Coordinator: _____ Time: _____

ER&RO: _____ Time: _____

Linn County: _____ Time: _____

Benton County: _____ Time: _____

State DSO: _____ Time: _____

NRC: _____ Time: _____

From TSC/EOF:

INPO _____ Time: _____

CANCELLATION NOTIFICATION:

Emergency Coordinator: _____ Time: _____

ER&RD: _____ Time: _____

Linn County: _____ Time: _____

Benton County: _____ Time: _____

State DSD: _____ Time: _____

NRC: _____ Time: _____

INPO _____ Time: _____

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RADIOLOGICAL AND EOF MANAGER	EFFECTIVE DATE: _____

ATTACHMENT 6

OFFSITE AGENCY SUPPLEMENTAL INFORMATION FORM

NOTE

This form shall not be used for EMERGENCY CLASS or PROTECTIVE ACTION RECOMMENDATION notifications; use Attachment 2, "Offsite Agency Notification Form," for those notifications.

Date: _____ Time: _____ SIF NO.: _____

This is: _____
Name/Title

Message: _____

Message Approval: ER&RD _____ RAD/EOF MGR _____

Please acknowledge receipt of this information:

State DSD _____

Benton County _____

Linn County _____

Other _____

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ATTACHMENT 7

DISPATCH MESSAGE FOR JOHNSON COUNTY RESPONDERS

To EOF Messenger,

Please read the following message over the 6th floor cafeteria page system and repeat it once. (The page microphones are mounted on the south wall in the food preparation room and the dishwashing room.)

"May I have your attention, please.

This IS / IS NOT a drill.
(circle one)

Attention all Johnson County Responders: Proceed immediately to your designated relocation center in Johnson County. You should drive south on Interstate 380 and then east on Interstate 80 before exiting as appropriate. Drive carefully and obey the posted speed limits.

(add further instructions here)

This IS / IS NOT a drill.
(circle one)

Thank you for your attention."

Authorized by: _____
ER&RD

Date: _____
Time: _____