U. S. NUCLEAR REGULATORY COMMISSION
REGION I

Report Nos. 50-220/90-13
50-410/90-14

Docket Nos. 50-220
50-410

License Nos. DPR-63
NPF-69

Licensee: Niagara Mohawk Power Corporation

Facility Name: Nine Mile Point Nuclear Station Units 1&2

Inspection At: Scriba, New York and Salina Meadows -
Corporate Office, New York

Inspection Conducted: February 20-23, 1990 and February 26- March 2, 1990

Inspectors: Roy K Mathew — 3-28-90
R. K. Mathew, Reactor Engineer, PSS, EB — date

Robert A. Mc Brearty — March 28, 1990
R. McBrearty, Reactor Engineer, Materials & Processes Section, EB — date

Approved by: C J Anderson — 3/28/90
C. J. Anderson, Chief, Plant Systems Section, EB, DRS — date

Inspection Summary: Inspection on February 20-23, 1990 and February 26 - March 2, 1990 (Combined Report Nos. 50-220/90-13 and 50-410/90-14)

Areas Inspected: 1. Routine inspection of the Fire Protection/Prevention Program including: program administration and organization; administrative control of combustibles; administrative control of ignition sources; other administrative controls; equipment maintenance, inspection and tests; fire brigade training; periodic inspections and quality assurance audits; and facility tours. 2. Routine Engineering inspection to review the licensee's control of design, design changes, modifications and temporary modifications. Also included in the scope of this inspection were organization, staffing, communications, quality assurance, training and management support.

Results: Of the areas inspected, no violations were identified.

DETAILS

1.0 Persons Contacted

Niagara Mohawk Power Corporation

*R. A. Dahlberg, Station Superintendent, Unit 1
*R. B. Abott, Station Superintendent, Unit 2
*M. A. Balduzzi, Supervisor Operations Support, Unit 1
*A. N. Barnhart, Supervisor, Fire Protection, Unit 1
*D. Stein, Regulatory Compliance
*A. Anderson, Site Fire Protection Coordinator
*N. Chambers, Auditor, Quality Assurance
*J. Dillon, Audit Supervisor, Quality Assurance
*B. Beller, Fire Protection Program Manager
*G. Sanford, Regulatory Compliance
*D. J. Pringle, Supervisor, Fire Protection, Unit 2
*D. J. Mcnally, Operations Support Training
+I. Weakley, Audit Coordinator
+W. Hansen, Manager, Corporate Quality Assurance
+J. Spadafore, Superintendent, Technical Services
J. Buckley, Engineer, Quality Assurance Site
+B. Weaver, Asst. Superintendent, Nuclear Training
D. Williams, Training Coordinator
+S. Wilezack, Jr., Manager, Nuclear Technology
R. Pasternak, Manager, Site Engineering
+L. Klosowski, Manager, Nuclear Design, Unit 1
+K. Ward, Manager, Nuclear Design, Unit 2
+J. Sullivan, Asst. Manager, Modifications, Unit 2
+R. Estham, Asst. Manager, Modifications, Unit 1
+E. Dunn, Jr. Modifications, Unit 2
+W. Baker, Project Manager, Licensing, Unit 2
J. Conway, Superintendent, System Support and Test
+G. Gresock, Manager, Nuclear Engineering
+W. B. Davey, Assistant to Vice President, Nuclear
+B. D. Wolken, Project Manager, Licensing

U.S. Nuclear Regulatory Commission

*B. Cook, Senior Resident Inspector

*Denotes those present at the exit meeting conducted at Nine Mile Point 1 and 2, Scriba.

+Denotes those present at the exit meeting conducted at Salina Meadows, Syracuse.

2.0 Fire Protection Prevention Program (64704)

The inspector reviewed several documents in the following areas of the program to verify that the licensee had developed and implemented adequate procedures consistent with the Fire Hazard Analysis (FHA), Final Safety Analysis Report (FSAR), and Technical Specifications (TS). The documents reviewed, the scope of review, and the inspection findings for each area of the program are described in the following sections.

2.1 Program Administration and Controls for Ignition Sources and Combustible Materials

The inspector reviewed the procedures in Attachment I to verify that the Fire Protection Program, as described in the FSAR and other licensing documents, is properly implemented.

The scope of the review was to ascertain that:

- Personnel were designated for implementing the program at the site;
- Qualifications were delineated for personnel designated to implement the program;
- Special authorization is required for the use of combustible, flammable or explosive hazardous material in safety-related areas;
- Prohibition on the storage of combustible, flammable or explosive hazardous material is required in safety-related areas;
- All wastes, debris, rags, oil spills or other combustible materials resulting from the work activity have been removed;
- There are periodic inspection for accumulation of combustibles;
- Transient combustibles are restricted and controlled in safety-related areas;
- Housekeeping is properly maintained in areas containing safety-related equipment and components;
- Requirements have been established for special authorization (work permit) for activities involving welding, cutting, grinding, open flame or other ignition sources and that they are properly safeguarded in areas containing safety-related equipment and components;

- Smoking in safety-related areas is prohibited, except where "smoking permitted" areas have been specifically designated by plant management;
- Work authorization, construction permit or similar arrangements are provided for review and approval of modification, construction and maintenance activities which could adversely affect the safety of the facility;
- Fire brigade organization and qualifications of brigade members are delineated;
- Fire reporting instructions for general plant personnel are developed;
- Periodic audits are conducted on the entire fire protection program; and
- Fire protection/prevention program is included in the licensee's QA Program.

The review of these documents and the inspection of the areas described did not identify any unacceptable conditions.

2.2 Equipment Maintenance, Inspection and Test

The inspector reviewed several surveillance and testing procedures to determine whether the licensee had developed adequate procedures which established maintenance, inspection, and testing requirements for the plant fire protection equipment. In addition, the inspector reviewed test records for the carbon dioxide (Co_2) functional test, halon puff test, fire detection channel function tests and fire pump operability tests to verify compliance with the Technical Specifications and established procedures.

No unacceptable conditions were noted.

2.3 Fire Brigade Training

2.3.1 Procedure Review

The inspector reviewed the Fire Brigade Training Program to verify that this program includes:

a. Requirements for announced and unannounced drills;

b. Requirements for fire brigade training and retraining at prescribed frequencies;

c. Requirements for at least one drill per year to be performed on backshift for each brigade.

d. Requirements for maintenance training records

e. Requirements for a minimum of 2 drills for each brigade member per year.

No unacceptable conditions were identified.

2.3.2 Records Review

The inspector reviewed 1989 training records of fire brigade members to verify that they had attended the required quarterly training, participated in a quarterly drill, and yearly hands-on training on fire extinguishing practice.

The inspector could not witness the scheduled fire drill during this inspection since it was conducted on the backshift. However, the fire drill scenario and the drill critique reports were reviewed to assure that the drill was performed satisfactorily.

No unacceptable conditions were identified.

During the fire brigade training review, the inspector noted that the control room operators participating in the fire drills were not required to dress up in the full fire fighting turnout gear since they are not part of the fire brigade. At Nine Mile 1 and 2, each fire brigade team consists of 5 permanently staffed fire fighters. The inspector raised a concern that if there was a fire and if they needed the operator's assistance in isolating the systems in fighting the fire, the operators may not be able to support the fire brigade due to the lack of training in wearing the fire fighting turnout gear. The licensee acknowledged the inspector's concern and agreed to train the operators in wearing full fire fighting turnout gear. No violations were identified.

2.4 Periodic Inspections and Quality Assurance Audits

The inspector reviewed QA audit No. 89-015 and internal audits of the Fire Protection Program. The scope of the review was to ascertain that the audits were conducted in accordance with the technical specifications and, that audit findings were being resolved in a timely and satisfactory manner. The inspector noted that the audit report findings and observations were comprehensive and were found to be adequate to meet the requirements specified in the Technical Specifications and the FSAR.

No unacceptable conditions were identified.

3.0 Facility Tour

The inspector examined fire protection water systems, including fire pumps, fire water piping and distribution systems, post indicator valves, hydrants and contents of hose houses. The inspector toured accessible vital and non-vital plant areas and examined fire detection and alarm systems, automatic and manual fixed suppression systems, interior hose stations, fire barrier penetration seals, and fire doors. The inspector observed general plant housekeeping conditions and randomly checked tags of portable extinguishers for evidence of periodic inspections. No deterioration of equipment was noted. The inspection tags attached to extinguishers indicated that monthly inspections were performed.

During the plant tour, the inspector observed that the fire doors at the 261 ft. elevation of the administration building in Unit 1 and the auxiliary relay room at Unit 2 were not latching properly. This was brought to the licensee's attention and the problems were corrected promptly. The inspector noted that the licensee did not breach the fire barrier at any time due to this problem and no violations of Technical Specifications were identified.

4.0 Design Change and Modifications (37700 and 37828)

The objective of this inspection was to ascertain that design changes and modifications are in conformance with the requirements of the Technical Specifications (TS), 10 CFR, the Safety Analysis Report, and the licensee's Quality Assurance program.

This objective was accomplished by performing a detailed review of selected modifications listed in Attachment B. In addition to the design modifications, temporary modifications listed in Attachment B were also selected for review. The modification packages and installation of plant design changes were reviewed and the following was verified:

- Modifications were reviewed and approved by onsite and offsite review organizations.
- Design changes and modifications were controlled by Approved Procedures.
- Post Modification Test Procedures and Results were adequately reviewed.
- Station Procedure modifications were made prior to the modification being declared operable.
- Operator training was conducted prior to declaring the modification operable.
- Marked up copies of as-built drawings were distributed prior to declaring the modification operable. Also, administrative controls were established to maintain as-built drawings.

- Modifications selected were listed in the 10 CFR 50.59(b) annual report to the NRC when appropriate.
- Preventive maintenance and inservice inspection and test programs were properly updated.
- Changes to the FSAR were properly controlled and updated.
- Installation of modifications conformed with Design Change Package.

During this inspection, the inspectors verified installation and tests of modifications which were completed or in progress.

Temporary modifications were also selected for review. These modifications were reviewed for the following additional factors:

- A formal record was maintained for temporary modifications.
- Independent verification of temporary modification installation and removal was established.
- Functional tests were performed following installation or removal, if required.
- Periodic reviews of outstanding temporary modifications were performed.

4.1 Inspection Findings

Plant major modifications and minor modifications are performed in accordance with the licensee modification procedures ND-100 and ND-100E. Minor modifications do not require a detailed review process. However a safety evaluation and an independent review is performed for each modification. It is reviewed by the technical evaluation review group and is then submitted to the Safety Operations Review Committee (SORC) if required.

Procedures listed in Attachment A were reviewed in detail for adherence to requirements, clarity of instructions and levels of responsibility and authority assigned to various groups and positions. The following randomly selected modification packages were reviewed to verify the implementation and adequacy of the design and the procedures.

(1) Modification No. NI-89-184 - Replace Emergency Generator Starting Air Pressure Regulators PCV 96-28 and PCV 96-52.

(2) Modification No. PNSY88MX102 - Position Indicators on RCIC Valves

(3) Modification No. NI-88-121 - Shutdown Cooling System Pump Pressure Switch Removal

(4) Modifications No. PNZY89MXD63 - Revise Circuit Breaker Trip Setting on HPCS Motor Control Center

(5) Modification No. NI-89-06 - Pressure Safety Valve Design Setpoint Change for Control Rod Drive Water Pump Suction Lines

The modifications reviewed were found to be well organized, complete and in accordance with the applicable procedures. Materials, processes, parts and equipment were identified properly and were suitable for application. The applicable design inputs were correctly incorporated into the design. The design consideration checklist which served to identify potential safety hazards and system interactions with the design of the modifications was found to be adequate. The safety evaluation was descriptive and supported the conclusions. The required independent review was performed by other than the original designer. The applicable modifications were reviewed and approved by SORC. The design drawings were updated and training was completed for the completed work packages. The required annual report of modifications was done in accordance with 10CFR 50.59(b).

The inspector verified the installation and post modification test documents for modification package no. PNZY89MX063. The installation and tests were performed correctly and in accordance with the procedures and installation plans as described in the modification package. The inspector reviewed the operational acceptance review sheets and assured that the preventive maintenance program had been changed to include the selected modifications.

No unacceptable conditions were noted.

During the course of this phase of the inspection it was noted that the procedure governing minor modifications, NEL-100.E, Revision 1, contained an expiration date which would be exceeded during the inspection. A detailed review of the department's procedure index revealed that a note had been inserted to substitute "validate by" in place of "expiration" on procedure cover sheets. The index note served as the change mechanism and it was not necessary to change individual procedure cover sheets.

A number of procedures in the manual were found to contain validation dates which were exceeded. Notes relating to those procedures indicated that each was in the process of being superseded by a different series procedure. None of the new procedures had been issued at the time of this inspection, but, were in various stages of development and review, as evidenced by the licensee's computer based tracking system. The licensee stated that if a major revision or superseding procedure has been properly authorized when the validation process is due to start,

the process will be waived. Procedure No. NEL-101, Revision 2, entitled "Nuclear Engineering & Licensing (NE&L) Department Procedure Program" described the validation process but it was not clear regarding when validation was not necessary. The licensee stated that its intent was as stated above regarding waiving the process in the event of a major revision or superseding procedure. NEL-101, Revision 3 was prepared by the licensee to clarify the validation process. Validation of procedures within an established period of time is still required by the licensee.

The reference to validation will be removed from procedure cover sheets, control of the process will be by procedure issue date and will be tracked by the licensee's computer based tracking system. Additional guidance is provided to NE&L department procedure users by the Nuclear Division Standards of Performance. After discussing the item with licensee representatives and reviewing the revised section of NEL-101, the inspector had no further questions regarding this matter.

No violations were identified.

The inspector also observed that the Nuclear Engineering and Licensing Procedure, NEL-027, for design verification, did not provide a clear criteria for determining the need for design verification review. The procedure states that the Manager of the Nuclear Design determines the need for verification of design review. The design review verification checklist gives certain criteria for this determination. However, it does not specify which criteria have to be met for not having a design verification. The inspector noted that the design verification is also accomplished through their document change review process. However, the licensee acknowledged the inspector's concern and agreed to review this procedure to clarify the existing requirement. During this review, the inspectors did not identify any deficient modification packages due to this problem.

4.2 Temporary Modification

The inspector's reviewed the licensee's temporary modification program to assure that temporary installations are performed and controlled by approved procedures. During the review, the inspector noted that two modification packages, Numbers 790 and 791 for the installation of Unit 1 condenser vacuum recorder were nine years old and several other modifications were at least 2-3 years old. These modifications were neither properly reviewed nor any measures taken to install a permanent modification until the problems were identified by INPO and a Quality Assurance Audit. The temporary modifications reviewed for both units are shown on Attachment B. The inspector noted that all the temporary modifications at Units 1 and 2 are now properly reviewed and the existing temporary modifications that were long standing are

being replaced by permanent modifications. The existing procedure, AP6.1 for temporary modification is revised and the technical staff at the site is being trained to correct this problem. During the field walkdown, the inspector verified the control room logs and temporary modification installations and tags.

No discrepancies were identified.

The inspector noted that the existing procedure for temporary modification does not specify how long a temporary modification can remain in the system as temporary. The licensee defines any modification greater than 6 months as long standing modifications. The inspector expressed concern for not requiring a specific time period before which they have to resolve a longstanding temporary modification. The licensee stated that the periodic review of the temporary modification program would identify any problem area in the future and appropriate actions will be taken. The inspector had no further questions at this time.

4.3 Engineering Input to Nonconformance Reports (NCR)

Selected inservice inspection related nonconformance reports were inspected to ascertain that engineering was involved in the dispositions and that the dispositions were technically correct and based on an understanding of the applicable ASME Code Section XI requirements. The following NCRs were included in the inspection:

- NCR# 1-89-0274 - rejectable visual inspection results
- NCR# 1-89-0393 - rejectable magnetic particle examination results
- NCR# 1-89-0452 - visual inspection results requiring evaluation and disposition

The disposition associated with NCR# 1-89-0393 required the removal of defects. The repair provided by engineering identified the minimum required wall thickness and included the precautions necessary to preclude violating the minimum required thickness and the method to ascertain that the required thickness was maintained. Additionally, the requirement was included to notify engineering prior to reducing the wall thickness below the minimum in the event that the defect remained when the minimum required thickness was reached.

The disposition provided by engineering for each of the above listed NCRs was determined to be technically correct and demonstrated a good understanding of the applicable ASME Code Section XI requirements.

No violations were identified.

In addition to the review of modifications and nonconformance reports, the inspectors reviewed the licensee's engineering organization, staffing, Quality Assurance Audits, Technical Training, Management Support and Communications.

4.4 Organization/Staffing/Management Support

Nine Mile Point receives engineering/technical support from the off-site engineering group at Salina Meadows, the site engineering and the site system engineering groups. The offsite engineering group at Salina Meadows is responsible for performing the design work. The design authority is not delegated to any on-site organization.

The site engineering is responsible for coordinating engineering design, preparing installation plans for modifications, performing the Inservice Inspection (ISI) and the Inservice Testing (IST) Programs, performing technical evaluations and handling all aspects of material engineering. The licensee stated that management has approved additional vacancies to expedite the modification process for the coming Unit 2 refueling outage. Presently, the site engineering is staffed with 31 engineers for each unit. The Site Engineering is headed by the Manager, Site Engineering and reports directly to the Vice President of Nuclear Engineering and Licensing.

During this inspection, the licensee's engineering/technical support area was improved by the addition of the new system engineering group. Presently, this group is staffed with approximately 17 engineers in each Unit. The objective of the system engineers is to improve overall plant performance and reliability. An individual system engineer will be considered the station's expert for his assigned systems or subject area. The system engineer is also responsible for the implementation of modifications, post modification functional testing and assists in resolving any operational problems. The System Engineering group is headed by the Superintendent of Technical Services and directly reports to the General Superintendent of Nuclear Generation.

The off-site design engineering group at Salina Meadows is staffed with approximately 83 engineers for Unit 1 and 74 engineers for Unit 2. The licensee supplements the permanent engineering staff with contract engineering support. Approximately 100 contract engineers for Unit 1 and 95 contract engineers for Unit 2 presently support the engineering group. The contract engineers are hired on an as needed basis. Each contract engineer is supervised by the cognizant Niagara Mohawk engineering supervisor. This group is headed by respective design managers for each unit and handles all aspects of design and design modifications.

A review of open modification requests for Units 1 and 2 showed that approximately 800 open modification requests exist. There are approximately 13 design modifications still needed to be completed for the April, 1990 Unit 1 restart. The design modifications needed for the next Unit 2 refueling outage appeared to be on schedule.

To enhance plant safety and provide better direct plant support, Niagara Mohawk has established the Integrated Priority System (IPS). The IPS applies to planned work in the nuclear division and support organization. It is assigned with six levels of priority. All safety significant projects are priority 1, and other work which affects safety systems are priority 2. The effectiveness of the system is evidenced by the fact that all priority projects are on schedule and are reviewed on a weekly basis. For priorities 3 through 6, work is assigned a merit score indicative of the value of its outcome. The merit score within a priority level is a secondary measure used for planning and completing work in the nuclear division. Work activities for Unit 1 are presently prioritized as before restart or after restart to expedite the completion of restart design modifications.

The licensee management's effort to improve engineering support to the plant was evidenced by the addition of the system engineering groups at the site for both units and approval of more positions in the site engineering group.

Engineering is staffed with experienced and degreed engineers. Their attitude towards resolving technical issues is positive. Even though the corrective actions for the design deficiencies for 125 vdc electrical issues and Regulatory Guide 1.97 restart issues for Unit 1 were slow, the engineering analysis and modifications were found to be technically sound.

4.5 Communications

An effective interface between the station and the engineering personnel exists at Nine Mile Point 1 and 2. This was evidenced by the staffing of the site engineering and the system engineers at the site to support the engineering/technical needs of the plant. This provides a close working relationship between the engineering and operations personnel. In order to improve the communications between the engineering staff at Salina Meadows and on-site engineering, the licensee has established daily morning meetings and subsequent telephone conference calls to discuss the plant status and design modifications of each unit. The active participation of management representatives from different organizations provide effective communications between the engineering and the plant staff.

5.0 Quality Assurance (QA) Audits

The licensee's Quality Assurance department conducted audits of various aspects of the modification process at Salina Meadows and at the Nine Mile Point facilities. Reports of the following audits were selected for inspection:

- Audit 89005 - Modification Installation, Pre-Operational Testing and Design Verification (NMP-1)
- Audit 89008 - Special Audit for the Contractor Qualification Program (NMP-1&2)
- Audit 89010 - Inservice Inspection (NMP 1&2)
- Audit 89012 - Modification Design & Closeout (NMP 1&2)

The inspection was performed to ascertain that QA audits were performed of the engineering department, and that findings were closed out in a timely manner.

The audits covered a number of activities in each of the areas that were audited and arrived at findings that were clearly documented. A finding of Audit 89005 in regard to the control of field changes to design output documents resulted in the issuance of Corrective Action Request (CAR) No. 89.3037. Closeout actions for CAR 89.3037 included procedure revision to clarify the processing of field changes regarding verification. The actions were verified by QA prior to closeout of the audit finding. Each of the remaining audits resulted in the issuance of CARs of which some are still open. During the week of March 4, 1990 a Corrective Action Audit was conducted by the licensee's QA department to verify that the remaining six open CARs associated with Audit 89008 were completed and ready for closeout. A request for an extension of the due date for open CARs associated with Audit 89010 has been made by QA to allow the responsible department to respond to the findings. At the time of this inspection no CARs had exceeded the due date or the extended date.

No violations were identified.

6.0 Technical Training

The Nuclear Engineering and Licensing Department training program has been identified as a programmatic weakness by the NRC, INPO, and the licensee's Quality Assurance organization. The present version of the training program manual was established in late 1986 when the former program was determined by the licensee to be impracticable to be implemented with the available resources. The program provides requirements for classroom instruction and on-the-job training for the various engineering disciplines, and is organized according to engineering level (experience). The program appears to be an excellent one, but implementation problems are still prevalent. Neither the classroom instruction nor the on-the-job training is being fully implemented by the licensee.

In response to weaknesses identified by the NRC, INPO, and NMP QA the Critical Training Program for Nuclear Engineering and Licensing was established by the licensee in March 1989. The program covered 13 areas selected by the licensee based on its experience and on guidelines recommended by INPO. This program, which provides a short term resolution to the weaknesses identified in the technical training, will end in March 1990.

Following this training, a broader based training was planned for 1990 and beyond. Procedure NTP-17, "Training for Technical Staff and Technical Staff Management Personnel," was prepared by the licensee to delineate training provided to technical staff personnel responsible for providing engineering and technical support to Nine Mile Point Nuclear Station. The program involves initial training for technical staff new hires and continuing training for more experienced staff members. The initial training must be completed within three years from the date of enrollment in the program. Current staff members who were on the staff prior to March 1, 1988 are not required to complete the initial program, but are required to participate in the continuing program. The program is based on NRC Regulatory Guide 1.8, ANSI documents (ANSI/ANS 3.1-1978 and ANSI N45.2.6-1978), INPO 88-022, "Technical Development Programs for Technical Staff and Managers," and INPO 88-007, "Job Related Training Needs for Technical Staff personnel." The NTP-17 program is expected to be implemented at the training center in April 1990, and at the Salina Meadows facility for the Nuclear Engineering and Licensing staff later in the year. In addition, the licensee is expanding the classroom space at Salina Meadows and increasing its instructional staff at the training center.

7.0 Exit Meeting

The inspectors met with the licensee representatives at the conclusion of the inspections on February 23, 1990, and March 2, 1990, as denoted in Section 1.0. The inspectors summarized the scope and findings of the inspection at that time. No written material was given to the licensee during this inspection.

Attachment A

Procedures and Documents Reviewed for Engineering Inspection

NEL-014-A, Revision 1, Unit 1 Configuration document change control

NEL-018, Revision 1, Problem report program

NEL-028, Revision 2, Detailed guidelines for design calculation

NEL-026, Revision 2, Engineering training program implementation

NEL-017, Control of non-conforming items

NEL-027, Design verification

NEL-350, Design change control program

NEL-301, Design changes to plant configuration

NEL-405, Determination of 10 CFR 50, Appendix B application

ND-100, Revision 3, Plant modifications

ND-100E, Revision 1, Minor modifications

ND-130, Design input

ND-160, Drawing change control for nuclear design

AP-3.4.3, Technical review

AP-6.1, Control of equipment temporary modifications

AP-6.1.1, Procedure for modification

AP-8.6, Procedure for service and pre-op test

Attachment B

Design Modification Reviewed

1. Modification No. NI-7-89-184
2. Modification No. PN2-488-MX102
3. Modification No. NI-88-121
4. Modification No. PN2-489-MX063
5. Modification No. NI-89-06
6. Modification No. NI-89-020
7. Modification No. NI-85-092

Temporary Modifications Reviewed

1. 5206 - Removal of thermocouple leads from RBCLC pump motor
2. 0790 - Install 10-50 ma signal on chart recorder for condenser vacuum
3. 0791 - Install 10-50 ma signal on chart recorder for condenser vacuum
4. 5222 - Install jumper for RSSB supply breaker lower limit switch to allow tripping and closing
5. 89-206 - Lift lead B4 from relay 551 and 552 in panel 2CEC*IPNL406

Attachment I

Procedures and Documents Reviewed for Fire Protection/Prevention Inspection

NMPC-FDQAP-1, Fire Protection QA program

AP-3.5, Revision 2, Station Fire Protection Program

AP-7.2, Revision 4, Control of Material Storage areas

AP-8.5, Revision 2, Housekeeping and cleanliness control

NI-ST-W14, Revision 14, Weekly operation of the fire pumps - Unit 1

N2-FSP-FPP-R002, Fire damper operation and inspection

N2-FSP-FPM-SA001, Channel functional test operability test of fire detection zones

N2-FSP-FPL-W001, Co_2 valve position and storage tank level verification

NI-OP-21A, Fire protection water system

NL-FSP-FPP-SA-001, Fire door operation

N2-FSP-FPW-SA001, Fire hydrant inspection and system flush

N2-FSP-FPP-R002, Fire damper operation and inspection

N2-FSP-FPM-SA001, Channel functional test/operability test of fire detection zones

S-FDP-2, Cutting, welding, grinding permit

S-FDP-6, Fire watch/patrol

NTP-5, Nuclear fire chief and nuclear fire fighter training program

FDD-7, Control of Combustible materials

NI-FST-FPP-C001, Fire barrier/penetration sealing inspection

NI-FST-FPG-H001, Puff test of Halon hazards

NI-FPM-LOG-M001, Emergency lighting inspection

AP-6.0, Procedure for Modifications

AP-9.0, Administration of training

Technical Specifications, Unit 1

FSAR, Appendix 9A, Unit 2