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PASSPORT DOCUMENT

TRANSMITTAL

Page: 1



Item	Facility	Type	Sub	Document Number / Title	Sheet	Revision	Doc Date	Copy #	Media	Copies
* 0001	MP	PROC	HP	RPM 4.8.5 EMERGENCY RADIOLOGICAL EQUIPMENT MAINTENANCE INSPECTION ]REF. 6.2!		010			P	01
* 0002	MP	PROC	HP	RPM 4.8.5-001 EMERGENCY RESPONSE FACILITY READINESS CHECK REPORT		009			P	01
* 0003	MP	PROC	HP	RPM 4.8.5-013A EMERGENCY OPERATIONS FACILITY SPARE RMT KIT		010			P	01
* 0004	MP	PROC	HP	RPM 4.8.5-029 BUILDING 532 OVER WATER MONITORING LOCKER		001			P	01

Please check the appropriate response and return form to NDS Bldg 475/3  
 Millstone Power Station or Fax to 860-440-2057.

- All documents received.
- Documents noted above not received (identify those not received).
- I no longer require distribution of these documents.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

AX45  
 NKR



# Technical Procedure Approval

AD-AA-100 - Attachment 2

Page 1 of 1

Instructions for completing this form are included in AD-AA-100.

1. Procedure Number RPM 4.8.5	2. Revision 010	3. Change Type & No.	4. Page 1 of	5. Effective Date (If not approval date) 03/02/17
6. Procedure Title Emergency Radiological Equipment Maintenance and Inspection [Ref. 6.2]				7. Expiration Date
8. Type of Request Change: <input type="checkbox"/> New Procedure <input checked="" type="checkbox"/> Revision <input type="checkbox"/> Deletion <input type="checkbox"/> Vendor Procedure <input type="checkbox"/> Minor Revision <input type="checkbox"/> OTO - Permanent Revision Required <input type="checkbox"/> OTO - No Permanent Revision Required				
9. Has a Condition Report (CR) Been Submitted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				CR No.:
10. Reason and Description of Change The Spare RMT Kit, formerly located in the EOF, was moved to Building 532 where the Over Water Monitoring Locker is located. The information in RPM 4.8.5-013A, "Emergency Operations Facility Spare RMT Kit," was subsumed into RPM 4.8.5-029, "Building 532, Over Water Monitoring Locker," allowing RPM 4.8.5-013A to be superseded. In this procedure, RPM 4.8.5-013A was removed from the Table of Contents.				

### Fleet and Virginia Common Technical Procedures Require Peer Group (CFAM) Approval

11. CFAM, If Required (Print Name)	12. CFAM, If Required (Signature)	13. Date
------------------------------------	-----------------------------------	----------

### FSRC Approval Determination - If "Yes" to any of the following, FSRC approval required. Check item 28 and skip items 17 through 23.

14. Does this change involve a Temporary Modification that affects nuclear safety as documented in CM-AA-TCC-204?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
15. Does this procedure require a 50.59 / 72.48 Evaluation (Form No. 730947)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Is this a "Special Test" procedure, an EPIP procedure or a FCA, a FSG, an EOP, required by RP-AA-274, or is it an ICCE designated procedure that requires a 50.59 / 72.48 Screen (Form No. 730943)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

### Change of Intent Checklist - If "Yes" to any of the following questions, Cognizant Management "B" approval required. Check item 30. If "No" to all of the following questions, Cognizant Management "A" approval required. Check item 31.

17. A new procedure or procedure deletion?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
18. Change or addition to any of the following: <input type="checkbox"/> Purpose <input type="checkbox"/> Initial Conditions <input type="checkbox"/> The method for meeting a commitment <input type="checkbox"/> Acceptance Criteria or Tolerances <input type="checkbox"/> Scaling or Setpoints <input type="checkbox"/> "Level of Use" <input type="checkbox"/> System/Component As-Left Condition(s) <input type="checkbox"/> Reactivity Management	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
19. A change that adds or deletes a subsection, deletes a step verification (IV, CV, or PC), adds an alternative method for performing a task, involves a less conservative method for performing a task, or affects equipment qualification?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
20. A change that decreases personnel safety or fire protection effectiveness?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
21. A change that modifies, relocates, deletes, or adds a hold point? (Review by the QIC or certified discipline QC Level II/III Inspector is required. For OTOs and MRs, QIC or Level II/III Inspector initial here _____.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
22. A change to CAUTION or WARNING statements? This does not include adding CAUTION or WARNING statements.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
23. A change to a procedure marked "Infrequently Conducted or Complex Test or Evolution"?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
24. Requestor/Writer (Printed Name) Paul G. Tardiff / Jean B. Olsen	25. Date 11/02/2016	26. Reviewed By (Printed Name) N/A	27. Date

If FSRC approval is required for a Procedure Change, it is not necessary for SRO to approve the Procedure Change. Place N/A in blocks 35 and 36.

### Required Approval Authority - Determination From Above

<input checked="" type="checkbox"/> 28. FSRC	<input type="checkbox"/> 29. Peer Group (CFAM)	<input type="checkbox"/> 30. Cognizant Management B	<input checked="" type="checkbox"/> 31. Cognizant Management A
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### Procedure Approvals Millstone North Anna Surry

32. Required Approval Authority (Print Name) Michael C. Wynn	33. Required Approval Authority (Signature) 	34. Date 2/2/17
35. SRO Approval For Changes (Print Name) N/A	36. SRO Approval For Changes (Signature)	37. Date
38. Site Vice President Approval, If Required (Print Name) N/A	39. Site Vice President Approval, If Required (Signature)	40. Date

### The individual(s) posting a new or revised document to EDMS are responsible for ensuring Nuclear E-Forms is updated.

41. Nuclear E-Forms Updated for Site(s)? <input type="checkbox"/> MP <input type="checkbox"/> NA <input type="checkbox"/> SU <input checked="" type="checkbox"/> N/A	42. Nuclear E-Forms Updated Print Name/Signature	43. Date
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**Key:** FSRC-Facility Safety Review Committee; EPIP-Emergency Plan Implementing Procedures; EOP-Emergency Operating Procedure; OTO-One Time Only; MR-Minor Revision; ICCE-Infrequently Conducted or Complex Evolutions; FCA-Fire Contingency Action; FSGs-FLEX Support Guideline; SRO-Senior Reactor Operator; QIC-Quality Inspection Coordinator; CFAM-Corporate Functional Area Manager

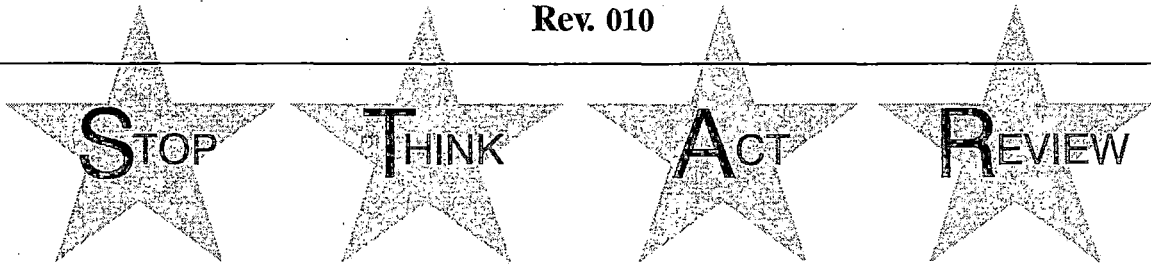
MILLSTONE POWER STATION  
HEALTH PHYSICS OPERATIONS PROCEDURE



**Emergency Radiological Equipment Maintenance  
and Inspection [Ref. 6.2]**

RPM 4.8.5

Rev. 010



Approval Date: 02/02/17

Effective Date: 03/02/17

Level of Use  
Information

**Millstone All Units  
Health Physics Operations Procedure**

**Emergency Radiological Equipment Maintenance and Inspection [Ref. 6.2]**

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	ATTACHMENTS AND FORMS	
	RPM 4.8.5-001, "Emergency Response Facility Readiness Check Report"	
	RPM 4.8.5-003, "Emergency Operations Facility, Team 3"	
	RPM 4.8.5-004, "Emergency Operations Facility, Team 4"	
	RPM 4.8.5-005, "Emergency Operations Facility, Team 5"	
	RPM 4.8.5-009, "Emergency Operations Facility"	
	RPM 4.8.5-011, "Unit 2 Control Room"	
	RPM 4.8.5-015, "Unit 2 Personnel Decon Room Emergency Personnel Decon Kit"	
	RPM 4.8.5-016, "SAP"	
	RPM 4.8.5-019, "OCA Checkpoint and Off-Site Emergency Responder Dosimetry"	
	RPM 4.8.5-020, "Unit 3 Control Room"	
	RPM 4.8.5-021, "Technical Support Center Locker"	
	RPM 4.8.5-022A, "Technical Support Center TSC Kit"	
	RPM 4.8.5-022B, "OSC Assembly Area Kit and Locker Building 475, 1st floor"	

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ATTACHMENTS AND FORMS, CONT'D

RPM 4.8.5-024, "Unit 3 Personnel Decon Room Emergency Personnel Decon Kit"

RPM 4.8.5-025, "NAP"

RPM 4.8.5-027, "Security Station Emergency Dose Rate Equipment"

RPM 4.8.5-029, "Building 532, Over Water Monitoring Locker and Spare RMT Kit" ■

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## 1. PURPOSE

### 1.1 Objective

This procedure ensures that the emergency radiological monitoring and protection equipment and other specified supplies at the Emergency Response Facilities are available when needed. It also ensures that the equipment is found in appropriate quantities, and is maintained in its proper operating condition, as required by Unit 2 Technical Specification 6.12 and Unit 3 Technical Specification 6.8.4 (b).

### 1.2 Discussion

This procedure is provided to ensure that:

- The minimum quantity of equipment is found at the locations specified on the inventory forms. [Ref. 6.7 and 6.9]
- Radiological equipment is found to be in satisfactory working condition.
- Respiratory equipment has been inspected using guidance from RP-AA-163, "Inspection and Inventory of Respiratory Protection Equipment."

Inventory seals are placed on kits by the Calibration Laboratory Technicians solely as an indication to them if the kits have been broken open between inventories.

This procedure impacts aspects of the Millstone Emergency Plan. Any changes to this procedure require evaluation under 10 CFR 50.54(q) to ensure that the effectiveness of the Emergency Plan has *not* been impacted.

### 1.3 Frequency

This procedure is to be completed in first, second, third, and fourth quarter of each year. The intent is to be as consistent as possible in the time frame of each inspection; avoid scheduling in January of the first quarter and June of the second quarter. This procedure shall also be completed on a post drill and on an as needed basis. [Ref. 6.7 and Ref. 6.8]

## 2. PREREQUISITES

### 2.1 **General**

N/A

### 2.2 **Documents**

2.2.1 RP-AA-163, "Inspection and Inventory of Respiratory Protection Equipment"

### 2.3 **Responsibilities**

2.3.1 Supervisor EC&I approves and makes changes to RPM 4.8.5-001 through 4.8.5-029.

2.3.2 Emergency Preparedness Specialist approves changes to RPM 4.8.5-001 through 4.8.5-029. [Ref. 6.7]

### 2.4 **Definitions**

2.4.1 Emergency Response Facility (ERF)– Facilities containing emergency equipment (including radiological monitoring and protection equipment) which are activated in the event of an incident class ALERT or above classification. The station ERFs include:

- Emergency Operations Facility
- Technical Support Center
- Control Rooms
- North Access Point Assembly Area
- South Access Point Assembly Area

2.4.2 EC&I – Exposure Control and Instrumentation

## 3. PRECAUTIONS

N/A

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#### 4. INSTRUCTIONS

##### 4.1 **Inventory Package Preparation**

4.1.1 RECORD the following on RPM 4.8.5-001:

- Date
- Reason for Inventory
- Kits to be Inventoried

4.1.2 For each kit or locker to be inventoried, **SELECT** and **DATE** the corresponding form from RPM 4.8.5-003 through 4.8.5-028.

##### 4.2 **Kit or Locker Inventories [Ref. 6.8 and 6.10]**

4.2.1 **SELECT** a kit or locker and **PERFORM** inventory as follows:

- **CHECK** and **RECORD** quantity found.
- Where indicated on form, **RECORD** instrument serial numbers and calibration due dates.
- **IF** kit or locker contains potassium iodide tablets, silver zeolite cartridges, or emergency lantern batteries **AND** items will expire prior to the next quarterly inventory, **REPLACE** items and **RECORD** expiration date where indicated on form.
- **REPLACE** the following on dates indicated on form:
  - Batteries
  - TLD badges
  - Finger rings
- **IF** kit or locker contains respirators, Refer To RP-AA-163, "Inspection and Inventory of Respiratory Protection Equipment," and **ENSURE** respiratory equipment tags are correct and **RECORD** inspection date where indicated on form.



- IF kit or locker contains equipment with batteries or sources, ENSURE the following:
  - Equipment is operable
  - Calibration due dates are current
  - Battery condition is satisfactory
  - Source response is satisfactory
- IF any equipment is found missing OR is removed, RECORD the following information on RPM 4.8.5–001:
  - Kit and, if applicable, section title
  - Description of deficiency
  - Actions to be taken to correct deficiency

### 4.3 Equipment Restoration

- 4.3.1 WHEN all items have been checked, RESTORE equipment as follows:
- a. ENSURE all Ludlum 177 meters are on and plugged in.
  - b. ENSURE all equipment other than Ludlum 177 meters are off.
  - c. PLACE stop watches in “RUN” mode to relieve spring tension.
  - d. REPLACE equipment neatly in storage location.
- 4.3.2 RESTORE any missing or removed equipment within 24 hours. [Ref. 6.10]
- 4.3.3 IF any equipment can *not* be restored within 24 hours, NOTIFY Supervisor EC&I.

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- 4.3.4 IF any missing or removed items are restored prior to sending RPM 4.8.5-001 to Supervisor EC&I, **PERFORM** the following:
- a. **RECORD** date deficiency was corrected on RPM 4.8.5-001.
  - b. **RECORD** date equipment was returned on the applicable kit or locker inventory form.
  - c. **RECORD** quantity of equipment returned on applicable kit or locker inventory form.

**4.4 Documentation**

- 4.4.1 **RECORD** any inventory comments on RPM 4.8.5-001.
- 4.4.2 **SIGN** and **DATE** completed kit or locker inventory form.
- 4.4.3 IF there are more kits or lockers to be inventoried, **Go To** Section 4.2.
- 4.4.4 WHEN all kits or lockers have been inventoried, **SIGN** and **DATE** RPM 4.8.5-001.
- 4.4.5 **COMPILE** completed kit or locker inventory form(s) and RPM 4.8.5-001 and **SUBMIT** package to Supervisor EC&I for review.
- 4.4.6 **REVIEW** RPM 4.8.5-001 and inventory forms for inventory deficiencies.
- 4.4.7 WHEN any missing or removed item is restored, **PERFORM** the following:
- a. **RECORD** date deficiency was corrected on RPM 4.8.5-001.
  - b. **RECORD** date equipment was returned on the applicable kit or locker inventory form.
  - c. **RECORD** quantity of equipment returned on applicable kit or locker inventory form.

Supervisor  
EC&I

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d. IF missing or removed item will take greater than 24 hours to resolve, NOTIFY EP of the following:

- the discrepancy
- the compensatory actions
- the date when the item will be restored

4.4.8 REVIEW and SIGN inventory form(s).

4.4.9 REVIEW and SIGN RPM 4.8.5–001.

4.4.10 SEND a copy of RPM 4.8.5–001 to Station Emergency Preparedness Specialist.[Ref. 6.7 and 6.8]

4.4.11 SEND inventory forms to HP Calibration Laboratory to be filed.

Calibration  
Technician

4.4.12 Refer To the following and MAINTAIN original inventory forms and RPM 4.8.5–001 as instructed:

- RM–AA–101, “Record Creation, Transmittal and Retrieval”
- Health Physics Nuclear Records Retention Schedule (NRRS)

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5. REVIEW AND SIGNOFF

5.1 The review and signoff for this procedure is located on RPM 4.8.5-001 through 4.8.5-029, of this procedure.

6. REFERENCES

- 6.1 NUREG-0654, FEME-REP-1, Rev. 1, "Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants," Section II, Part H
- 6.2 NUREG-0737, "Supplement 1 to NUREG-0737 - Requirements for Emergency Response Capability (Generic Letter No. 82-33)," dated December 17, 1982.
- 6.3 Millstone Nuclear Power Station Emergency Plan, Appendix E, "Emergency Equipment," Rev.17, June 1995.
- 6.4 EPPCR-94-22, "Emergency Planning and Health Physics Improvements"
- 6.5 EPPCR-95-05, "Silver Zeolite Cartridges"
- 6.6 EP-95-023, "Operational Support Center Change," T. J. Dembek dated January 6, 1995.
- 6.7 NOV VIO 50-245, 336, 423/97-81-02 and CR M3-97-4483
- 6.8 NU Letter A02567, Combined Inspection No. 50-245; 50-336; 50-423, "MNPS, Unit Nos. 1, 2, & 3 Response to Notice of Violation," dated September 18, 1982, specifies frequencies of inventories, operations checks, change out and replacement schedule for items having limited shelf life. It also specifies replacement for instruments taken for calibration and collectively states that finger rings will be provided in the on-site emergency monitoring team kits and at the EOF.
- 6.9 NU Letter, dated 12/27/76. Emergency Plan equipment is on an inventory list.
- 6.10 NU Letter, dated 12/27/76. Emergency Plan equipment is replaced in a timely manner.
- 6.11 Unit 2 Technical Specification 6.12
- 6.12 Unit 3 Technical Specification 6.8.4(b)

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- 6.13 Memo EP-98-127, "Implementation of Millstone Emergency Plan Revision #24," from Mark White to Millstone HP Management Personnel
- 6.14 USNRC *Emergency Preparedness Position (EPPOS<sup>1</sup>) on Emergency Plan and Implementing Procedures Changes*
- 6.15 MP-HPO-99081, "Closure of A/R 99006430-01," from A. S. Klotz to H. W. Siegrist, dated May 21, 1999.

7. SUMMARY OF CHANGES

- 7.1 The Spare RMT Kit, formerly located in the EOF, was moved to Building 532 where the Over Water Monitoring Locker is located. The information in RPM 4.8.5-013A, "Emergency Operations Facility Spare RMT Kit," was subsumed into RPM 4.8.5-029, "Building 532, Over Water Monitoring Locker," allowing RPM 4.8.5-013A to be superseded. In this procedure, RPM 4.8.5-013A was removed from the Table of Contents.
- 7.2 RPM 4.8.5-001 was also revised to reflect this revision.

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# Technical Procedure Approval

Instructions for completing this form are included in AD-AA-100.

1. Procedure Number RPM 4.8.5-001	2. Revision 009	3. Change Type & No.	4. Page 1 of 1	5. Effective Date (If not approval date) 03/02/17
6. Procedure Title Emergency Response Facility Readiness Check Report				7. Expiration Date
8. Type of Request <input type="checkbox"/> New Procedure <input type="checkbox"/> Revision <input checked="" type="checkbox"/> Deletion <input type="checkbox"/> Vendor Procedure Change: <input type="checkbox"/> Minor Revision <input type="checkbox"/> OTO - Permanent Revision Required <input type="checkbox"/> OTO - No Permanent Revision Required				
9. Has a Condition Report (CR) Been Submitted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				CR No.:
10. Reason and Description of Change RPM 4.8.5-013A has been superseded by RPM 4.8.5-029. RPM 4.8.5-001 was revised to reflect this deletion				

**Fleet and Virginia Common Technical Procedures Require Peer Group (CFAM) Approval:**

11. CFAM, If Required (Print Name)	12. CFAM, If Required (Signature)	13. Date
------------------------------------	-----------------------------------	----------

**FSRC Approval Determination - If "Yes" to any of the following, FSRC approval required. Check item 28 and skip items 17 through 23:**

14. Does this change involve a Temporary Modification that affects nuclear safety as documented in CM-AA-TCC-204?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
15. Does this procedure require a 50.59 / 72.48 Evaluation (Form No. 730947)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Is this a "Special Test" procedure, an EPIP procedure or a FCA, a FSG, an EOP, required by RP-AA-274, or is it an ICCE designated procedure that requires a 50.59 / 72.48 Screen (Form No. 730943)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Change of Intent Checklist - If "Yes" to any of the following questions, Cognizant Management "B" approval required. Check item 30. If "No" to all of the following questions, Cognizant Management "A" approval required. Check item 31.**

17. A new procedure or procedure deletion?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
18. A change or addition to any of the following: <input type="checkbox"/> Purpose <input type="checkbox"/> Acceptance Criteria or Tolerances <input type="checkbox"/> "Level of Use" <input type="checkbox"/> Initial Conditions <input type="checkbox"/> Scaling or Setpoints <input type="checkbox"/> System/Component As-Left Condition(s) <input type="checkbox"/> The method for meeting a commitment <input type="checkbox"/> Reactivity Management	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
19. A change that adds or deletes a subsection, deletes a step verification (IV, CV, or PC), adds an alternative method for performing a task, involves a less conservative method for performing a task, or affects equipment qualification?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
20. A change that decreases personnel safety or fire protection effectiveness?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
21. A change that modifies, relocates, deletes, or adds a hold point? (Review by the QIC or certified discipline QC Level II/III Inspector is required. For OTOs and MRs, QIC or Level II/III Inspector initial here _____.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
22. A change to CAUTION or WARNING statements? This does not include adding CAUTION or WARNING statements.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
23. A change to a procedure marked "Infrequently Conducted or Complex Test or Evolution"?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
24. Requestor/Writer (Printed Name) Paul G. Tardiff / Jean B. Olsen	25. Date 11/02/2016	26. Reviewed By (Printed Name) N/A	27. Date

If FSRC approval is required for a Procedure Change, it is not necessary for SRO to approve the Procedure Change. Place N/A in blocks 35 and 36.

**Required Approval Authority - Determination From Above**

28. FSRC     29. Peer Group (CFAM)     30. Cognizant Management B     31. Cognizant Management A

**Procedure Approvals**    Millstone     North Anna     Surry

32. Required Approval Authority (Print Name) Michael C. Wynn	33. Required Approval Authority (Signature) 	34. Date 2/2/17
35. SRO Approval For Changes (Print Name) N/A	36. SRO Approval For Changes (Signature)	37. Date
38. Site Vice President Approval, If Required (Print Name) N/A	39. Site Vice President Approval, If Required (Signature)	40. Date

**The individual(s) posting a new or revised document to EDMS are responsible for ensuring Nuclear E-Forms is updated.**

41. Nuclear E-Forms Updated for Site(s)? <input type="checkbox"/> MP <input type="checkbox"/> NA <input type="checkbox"/> SU <input checked="" type="checkbox"/> N/A	42. Nuclear E-Forms Updated Print Name/Signature	43. Date
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02/02/17

Approval Date

03/02/17

Effective Date

### Emergency Response Facility Readiness Check Report

Date: \_\_\_\_\_ Reason for Inventory:  Quarterly  Post Drill  Other: \_\_\_\_\_

Kit Or Locker To Be Inventoried	Form No.	√ For Kits To Be Inventoried
All	N/A	
Emergency Operations Facility, Team 3	3	
Emergency Operations Facility, Team 4	4	
Emergency Operations Facility, Team 5	5	
Emergency Operations Facility	9	
Unit 2 Control Room	11	
Unit 2 Personnel Decon Room Emergency Personnel Decon Kit	15	
SAP	16	
OCA Checkpoint and Off-Site Emergency Responder Dosimetry	19	
Unit 3 Control Room	20	
Technical Support Center	21	
Technical Support Center TSC Kit	22A	
OSC Assembly Area, Building 475, 1st Floor	22B	
Unit 3 Personnel Decon Room Emergency Personnel Decon Kit	24	
NAP	25	
Security Station Emergency Dose Rate Equipment	27	
Building 532, Over Water Monitoring Locker and Spare RMT Kit	29	

Kit / Locker Section Title	Description of Deficiency	Actions to be Taken to Correct Deficiency	Date Corrected

Comments: \_\_\_\_\_

Completed By: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_



Instructions for completing this form are included in AD-AA-100.

1. Procedure Number RPM 4.8.5-013A	2. Revision 010	3. Change Type & No.	4. Page 1 of	5. Effective Date (If not approval date) 03/02/17
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6. Procedure Title Emergency Operations Facility Spare RMT Kit	7. Expiration Date
---	--------------------

8. Type of Request Change:	<input type="checkbox"/> New Procedure <input type="checkbox"/> Minor Revision	<input checked="" type="checkbox"/> Revision <input type="checkbox"/> OTO - Permanent Revision Required	<input type="checkbox"/> Deletion <input type="checkbox"/> OTO - No Permanent Revision Required	<input type="checkbox"/> Vendor Procedure
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9. Has a Condition Report (CR) Been Submitted?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	CR No.:
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10. Reason and Description of Change  
The Spare RMT Kit, formerly located in the EOF, was moved to Building 532 where the Over Water Monitoring Locker is located. The information in RPM 4.8.5-013A, "Emergency Operations Facility Spare RMT Kit," was subsumed into RPM 4.8.5-029, "Building 532, Over Water Monitoring Locker," allowing RPM 4.8.5-013A to be superseded. In this procedure, RPM 4.8.5-013A was removed from the Table of Contents.

**Fleet and Virginia Common Technical Procedures Require Peer Group (CFAM) Approval**

11. CFAM, If Required (Print Name)	12. CFAM, If Required (Signature)	13. Date
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**FSRC Approval Determination - If "Yes" to any of the following, FSRC approval required. Check item 28 and skip items 17 through 23.**

14. Does this change involve a Temporary Modification that affects nuclear safety as documented in CM-AA-TCC-204?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
15. Does this procedure require a 50.59 / 72.48 Evaluation (Form No. 730947)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Is this a "Special Test" procedure, an EPIP procedure or a FCA, a FSG, an EOP, required by RP-AA-274, or is it an ICCE designated procedure that requires a 50.59 / 72.48 Screen (Form No. 730943)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Change of Intent Checklist - If "Yes" to any of the following questions, Cognizant Management "B" approval required. Check item 30. If "No" to all of the following questions, Cognizant Management "A" approval required. Check item 31.**

17. A new procedure or procedure deletion?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Change or addition to any of the following:			
<input type="checkbox"/> Purpose	<input type="checkbox"/> Acceptance Criteria or Tolerances	<input type="checkbox"/> "Level of Use"	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Initial Conditions	<input type="checkbox"/> Scaling or Setpoints	<input type="checkbox"/> System/Component As-Left Condition(s)	
<input type="checkbox"/> The method for meeting a commitment		<input type="checkbox"/> Reactivity Management	
19. A change that adds or deletes a subsection, deletes a step verification (IV, CV, or PC), adds an alternative method for performing a task, involves a less conservative method for performing a task, or affects equipment qualification?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
20. A change that decreases personnel safety or fire protection effectiveness?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
21. A change that modifies, relocates, deletes, or adds a hold point? (Review by the QIC or certified discipline QC Level II/III Inspector is required. For OTOs and MRs, QIC or Level II/III Inspector initial here _____.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
22. A change to CAUTION or WARNING statements? This does not include adding CAUTION or WARNING statements.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
23. A change to a procedure marked "Infrequently Conducted or Complex Test or Evolution"?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

24. Requestor/Writer (Printed Name) Paul G. Tardiff / Jean B. Olsen	25. Date 11/02/2016	26. Reviewed By (Printed Name) N/A	27. Date
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If FSRC approval is required for a Procedure Change, it is not necessary for SRO to approve the Procedure Change. Place N/A in blocks 35 and 36.

**Required Approval Authority - Determination From Above**

<input type="checkbox"/> 28. FSRC	<input type="checkbox"/> 29. Peer Group (CFAM)	<input type="checkbox"/> 30. Cognizant Management B	<input checked="" type="checkbox"/> 31. Cognizant Management A
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**Procedure Approvals**

Millstone <input type="checkbox"/>		North Anna <input type="checkbox"/>		Surry <input type="checkbox"/>	
32. Required Approval Authority (Print Name) Michael C. Wynn	33. Required Approval Authority (Signature)		34. Date 2/2/17		
35. SRO Approval For Changes (Print Name) N/A	36. SRO Approval For Changes (Signature)		37. Date		
38. Site Vice President Approval, If Required (Print Name) N/A	39. Site Vice President Approval, If Required (Signature)		40. Date		

The individual(s) posting a new or revised document to EDMS are responsible for ensuring Nuclear E-Forms is updated.

41. Nuclear E-Forms Updated for Site(s)? <input type="checkbox"/> MP <input type="checkbox"/> NA <input type="checkbox"/> SU <input checked="" type="checkbox"/> N/A	42. Nuclear E-Forms Updated Print Name/Signature	43. Date
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# Technical Procedure Approval

Instructions for completing this form are included in AD-AA-100.

1. Procedure Number RPM 4.8.5-029	2. Revision 001	3. Change Type & No.	4. Page 1 of	5. Effective Date (If not approval date) 03/02/17
6. Procedure Title Building 532, Over Water Monitoring Locker and RMT Spare Kit				7. Expiration Date
8. Type of Request Change: <input type="checkbox"/> New Procedure <input type="checkbox"/> Revision <input checked="" type="checkbox"/> Deletion <input type="checkbox"/> Vendor Procedure <input type="checkbox"/> Minor Revision <input type="checkbox"/> OTO - Permanent Revision Required <input type="checkbox"/> OTO - No Permanent Revision Required				
9. Has a Condition Report (CR) Been Submitted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				CR No.:
10. Reason and Description of Change The Spare RMT Kit, formerly located in the EOF, was moved to Building 532 where the Over Water Monitoring Locker is located. The information in RPM 4.8.5-013A, "Emergency Operations Facility Spare-RMT Kit," was subsumed into RPM 4.8.5-029, "Building 532, Over Water Monitoring Locker," allowing RPM 4.8.5-013A to be superseded.				

**Fleet and Virginia Common Technical Procedures Require Peer Group (CFAM) Approval**

11. CFAM, If Required (Print Name)	12. CFAM, If Required (Signature)	13. Date
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**FSRC Approval Determination - If "Yes" to any of the following, FSRC approval required. Check item 28 and skip items 17 through 23.**

14. Does this change involve a Temporary Modification that affects nuclear safety as documented in CM-AA-TCC-204?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
15. Does this procedure require a 50.59 / 72.48 Evaluation (Form No. 730947)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Is this a "Special Test" procedure, an EPIP procedure or a FCA, a FSG, an EOP, required by RP-AA-274, or is it an ICCE designated procedure that requires a 50.59 / 72.48 Screen (Form No. 730943)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Change of Intent Checklist - If "Yes" to any of the following questions, Cognizant Management "B" approval required. Check item 30. If "No" to all of the following questions, Cognizant Management "A" approval required. Check item 31.**

17. A new procedure or procedure deletion?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
18. A change or addition to any of the following: Purpose <input type="checkbox"/> Acceptance Criteria or Tolerances <input type="checkbox"/> "Level of Use" <input type="checkbox"/> Initial Conditions <input type="checkbox"/> Scaling or Setpoints <input type="checkbox"/> System/Component As-Left Condition(s) <input type="checkbox"/> The method for meeting a commitment <input type="checkbox"/> Reactivity Management	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
19. A change that adds or deletes a subsection, deletes a step verification (IV, CV, or PC), adds an alternative method for performing a task, involves a less conservative method for performing a task, or affects equipment qualification?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
20. A change that decreases personnel safety or fire protection effectiveness?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
21. A change that modifies, relocates, deletes, or adds a hold point? (Review by the QIC or certified discipline QC Level II/III Inspector is required. For OTOs and MRs, QIC or Level II/III Inspector initial here _____.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
22. A change to CAUTION or WARNING statements? This does not include adding CAUTION or WARNING statements.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
23. A change to a procedure marked "Infrequently Conducted or Complex Test or Evolution"?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

24. Requestor/Writer (Printed Name) Paul G. Tardiff / Jean B. Olsen	25. Date 11/02/2016	26. Reviewed By (Printed Name) N/A	27. Date
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If FSRC approval is required for a Procedure Change, it is not necessary for SRO to approve the Procedure Change. Place N/A in blocks 35 and 36.

**Required Approval Authority - Determination From Above**

28. FSRC     29. Peer Group (CFAM)     30. Cognizant Management B     31. Cognizant Management A

Procedure Approvals: Millstone <input checked="" type="checkbox"/> North Anna <input type="checkbox"/> Surry <input type="checkbox"/>		
32. Required Approval Authority (Print Name) Michael C. Wynn	33. Required Approval Authority (Signature) 	34. Date 2/2/17
35. SRO Approval For Changes (Print Name) N/A	36. SRO Approval For Changes (Signature)	37. Date
38. Site Vice President Approval, If Required (Print Name) N/A	39. Site Vice President Approval, If Required (Signature)	40. Date

**NOTE: The individual(s) posting a new or revised document to EDMS are responsible for ensuring Nuclear E-Forms is updated.**

41. Nuclear E-Forms Updated for Site(s) MP <input type="checkbox"/> NA <input type="checkbox"/> SU <input checked="" type="checkbox"/> N/A	42. Nuclear E-Forms Updated Print Name/Signature	43. Date
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02/02/17

Approval Date

03/02/17

Effective Date

**Building 532, Over Water Monitoring Locker and Spare RMT Kit**

Date: \_\_\_\_\_

Item Description	Quantity		Returned	
	Required	As Found	Quantity	Date
<b>Over Water Monitoring Locker</b>				
Respirators with Charcoal Cartridges Date Inspection Due: _____	6			
Complete set of PCs	6			
All Weather Suit	2			
Flashlight	2			
Source Plaque	1			
Spare Batteries for Flashlights	2 sets			
Emergency Lantern (Expiration Date: _____)	1			

Item Description	Quantity		Returned	
	Required	As Found	Quantity	Date
<b>Spare RMT Kit</b>				
Ludlum 2241-2 or equivalent Serial No. _____ Date Due _____	1			
RO-2A or Equivalent Serial No. _____ Date Due _____	1			
ASP-1/HP-270 or Equivalent Serial No. _____ Date Due _____	1			
Portable Air Sampler (12 Volts) Serial No. _____ Date Due _____	1			
Batteries, Spares For Survey Meters and Dosimeter Charger Batteries Replaced (4th quarter)	4 Sets			
Dosimeters (Low Range) Date Due _____	2			
Dosimeters (High Range) Date Due _____	2			
Dosimeter Charger - Batteries Replaced (4th quarter)	1			
TLD Badges (Replace Semi-annually) Date Due _____	2			
Stopwatch	1			
Forceps	1			
Smears (Pkg of 25)	1			
Filters, Particulate (Pkg of 50)	1			
Bags, Clear Plastic 4x6	12			

Item Description	Quantity		Returned	
	Required	As Found	Quantity	Date
Bags, Clear Plastic 6x12	6			
Duct Tape, roll	1			
Silver Zeolite Cartridges Expiration Date: _____	4			
Calculator, (Solar Powered)	1			
Disposable Gloves (Pairs)	6			
Coin Envelopes	12			
Rain Gear (Sets)	2			
Ballpoint Pens	2			
Markers, Felt Tip	2			
Screwdriver	1			
Stapler	1			
Box of Staples	1			
Scissors	1			
Clipboard With Paper	1			
Spare Team EPP Notebook	1			
Map of Sample Locations	1			
Pkg of Potassium Iodide Tablets (Expiration Date: _____ )	1			

Inventoried By: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_