

UNITED STATES NUCLEAR REGULATORY COMMISSION REGION IV 1600 E. LAMAR BLVD ARLINGTON, TX 76011-4511

September 13, 2017

Mr. G. T. Powell Executive Vice President and Chief Nuclear Officer STP Nuclear Operating Company South Texas Project Electric Generating Station P.O. Box 289 Wadsworth, TX 77483

SUBJECT: SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION – NRC RADIATION SAFETY AND EMERGENCY PREPAREDNESS INSPECTION REPORT 05000498/2017010 AND 05000499/2017010

Dear Mr. Powell:

On August 3, 2017, the U.S. Nuclear Regulatory Commission (NRC) completed a radiation safety inspection at your South Texas Project Electric Generating Station, Units 1 and 2, facility. On September 7, 2017, the NRC inspectors discussed the results of this inspection with Mr. D. Rencurrel, Senior Vice President of Operations, and other members of your staff. The results of this inspection are documented in the enclosed report.

NRC inspectors documented one finding of very low safety significance (Green) in this report. This finding involved a violation of NRC requirements. Additionally, NRC inspectors documented one Severity Level IV violation. The NRC is treating these violations as non-cited violations (NCVs) consistent with Section 2.3.2.a of the Enforcement Policy.

If you contest the violations or significance of the NCVs, you should provide a response within 30 days of the date of this inspection report, with the basis for your denial, to the U.S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, DC 20555-0001; with copies to the Regional Administrator, Region IV; the Director, Office of Enforcement; and the NRC resident inspector at the South Texas Project Electric Generating Station.

If you disagree with a cross-cutting aspect assignment in this report, you should provide a response within 30 days of the date of this inspection report, with the basis for your disagreement, to the U.S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, DC 20555-0001; with copies to the Regional Administrator, Region IV; and the NRC resident inspector at the South Texas Project Electric Generating Station.

G. Powell

This letter, its enclosure, and your response (if any) will be made available for public inspection and copying at <u>http://www.nrc.gov/reading-rm/adams.html</u> and at the NRC Public Document Room in accordance with 10 CFR 2.390, "Public Inspections, Exemptions, Requests for Withholding."

Sincerely,

/**RA**/

Heather J. Gepford, Ph.D., CHP, Branch Chief Plant Support Branch 2 Division of Reactor Safety

Docket Nos. 50-498 and 50-499 License Nos. NPF-76 and NPF-80

Enclosure: NRC Inspection Report 05000498/2017010 and 05000499/2017010 w/Attachments: 1. Supplemental Information

2. Request for Information

cc: Electronic Distribution

U.S. NUCLEAR REGULATORY COMMISSION

REGION IV

Docket:	05000498 and 05000499
License:	NPF-76 and NPF-80
Report:	05000498/2017010 and 05000499/2017010
Licensee:	STP Nuclear Operating Company
Facility:	South Texas Project Electric Generating Station, Units 1 and 2
Location:	FM 521 – 8 miles west of Wadsworth Wadsworth, Texas 77483
Dates:	May 8 through September 7, 2017
Inspectors:	 L. Carson, Senior Health Physicist S. Money, Health Physicist P. Elkmann, Senior Emergency Preparedness Inspector S. Hedger, Emergency Preparedness Inspector
Approved By:	Heather J. Gepford, Ph.D., CHP Chief, Plant Support Branch 2 Division of Reactor Safety

SUMMARY

IR 05000498/2017010; 05000499/2017010; 05/08/2017 – 08/03/2017; South Texas Project Electric Generating Station, Units 1 and 2; Emergency Preparedness, Radiation Safety, 71114.05

The report covers an inspection by health physics and emergency preparedness inspectors from Region IV. Two findings, both of which were non-cited violation, were documented. The significance of inspection findings is indicated by their color (i.e., Green, White, Yellow, or Red) and determined using Inspection Manual Chapter 0609, "Significance Determination Process," dated April 29, 2015. Cross-cutting aspects are determined using Inspection Manual Chapter 0310, "Aspects within the Cross-Cutting Areas," dated December 4, 2014. All violations of NRC requirements are dispositioned in accordance with the NRC's Enforcement Policy, dated November 1, 2016. The NRC's program for overseeing the safe operation of commercial nuclear power reactors is described in NUREG-1649, "Reactor Oversight Process," Revision 6.

A. NRC-Identified and Self-Revealed Findings

Cornerstone: Emergency Preparedness

• <u>Green</u>. The inspectors identified a non-cited violation of 10 CFR 50.54(q)(2) associated with the licensee's failure to conduct correctly scoped drills as required by the site emergency plan in 2015 and 2016. Annually, the licensee was required to conduct a radiological monitoring drill involving taking samples on-site and offsite of air, vegetation, soil, and water samples. Semiannually, the licensee was required to conduct health physics drills which involved response to and analysis of simulated elevated airborne and liquid samples. During these years, the licensee failed to evaluate emergency response personnel demonstrating abilities addressing all of these criteria. This violation is not an immediate safety concern because drills were conducted involving the site health physics staff during the time period. This issue was entered into the licensee's corrective action program in Condition Reports 17-15971 and 17-15974.

The performance deficiency was more than minor because it was associated with the emergency response organization performance (drills and exercises) cornerstone attribute and adversely affected the Emergency Preparedness cornerstone objective of being capable of implementing adequate measures to protect the health and safety of the public in the event of a radiological emergency. The finding was evaluated using Inspection Manual Chapter 0609, Appendix B, "Emergency Preparedness Significance Determination Process," dated September 22, 2015. The finding was determined to be of very low safety significance (Green) because it was a failure to comply with NRC requirements, was not associated with the risk-significant planning standards, and was not a loss of a planning standard function. The finding had a cross-cutting aspect in the area of human performance associated with resources because the licensee's procedure defining drill objectives and demonstration criteria did not address the entire scope of the drill types in question [H.1]. (Section 1EP5)

 <u>Severity Level IV</u>. The NRC identified a Severity Level IV violation of 10 CFR 50.54(q)(3) for the failure to perform analyses demonstrating that changes to the emergency plan did not reduce the effectiveness of the plan before implementing the changes without prior NRC approval. The failure to perform required evaluations did not have any safety consequences; the inspectors verified that the changes did not reduce the effectiveness of the emergency plan. The issue was entered into the licensee's corrective action program as Condition Report 2017-15956.

The failure to perform analyses of the effect of changes in processes supporting emergency preparedness is a performance deficiency. The performance deficiency is more than minor because it affected the procedure quality (plan changes) cornerstone attribute and adversely affected the Emergency Preparedness cornerstone objective of being capable of implementing adequate measures to protect the health and safety of the public in the event of a radiological emergency. The performance deficiency was assessed using traditional enforcement because the licensee's failure to perform a required analysis impacted the regulatory process. The issue was evaluated using the NRC's Enforcement Policy, dated November 1, 2016, Section 6.6(d), and was determined to be a Severity Level IV violation because the violation did not affect radiological assessment or offsite notification. Traditional enforcement violations are not assessed for cross-cutting aspects. (Section 1EP5)

B. <u>Licensee-Identified Violations</u>

None

REPORT DETAILS

1. REACTOR SAFETY

Cornerstone: Emergency Preparedness

1EP2 Alert and Notification System Evaluation (71114.02)

a. Inspection Scope

The inspectors verified the adequacy of the licensee's methods for testing the primary and backup alert and notification system. The inspectors also reviewed the licensee's program for identifying emergency planning zone locations requiring tone alert radios and for distributing the radios, and reviewed audits of distribution records. The inspectors interviewed licensee personnel responsible for the maintenance of the primary and backup alert and notification system and reviewed a sample of corrective action program reports written for alert and notification system problems. The inspectors compared the licensee's alert and notification system testing program with criteria in NUREG-0654, "Criteria for Preparation and Evaluation of Radiological Emergency Response Plans and Preparedness in Support of Nuclear Power Plants," Revision 1; FEMA Report REP-10, "Guide for the Evaluation of Alert and Notification Systems for Nuclear Power Plants;" and the licensee's current FEMA-approved alert and notification system design report, "Updated Prompt Notification System Design Report," Revisions 1 and 2, dated 2010 and 2013.

These activities constitute completion of one alert and notification system evaluation sample as defined in Inspection Procedure 71114.02.

b. Findings

No findings were identified.

1EP3 Emergency Response Organization Staffing and Augmentation System (71114.03)

a. Inspection Scope

The inspectors verified the licensee's emergency response organization on-shift and augmentation staffing levels were in accordance with the licensee's emergency plan commitments. The inspectors reviewed documentation and discussed with licensee staff the operability of primary and backup systems for augmenting the on-shift emergency response staff to verify the adequacy of the licensee's methods for staffing emergency response facilities, including the licensee's ability to staff pre-planned alternate facilities. The inspectors also reviewed records of emergency response organization augmentation tests and events to determine whether the licensee had maintained a capability to staff emergency response facilities within emergency plan timeliness commitments.

These activities constitute completion of one emergency response organization staffing and augmentation testing sample as defined in Inspection Procedure 71114.03.

b. Findings

No findings were identified.

1EP5 Maintenance of Emergency Preparedness (71114.05)

a. Inspection Scope

The inspectors reviewed the following for the period of November 2015 to April 2017:

- After-action reports for emergency classifications and events
- After-action evaluation reports for licensee drills and exercises
- Independent audits and surveillances of the licensee's emergency preparedness program
- Self-assessments of the emergency preparedness program conducted by the licensee
- Licensee evaluations of changes made to the emergency plan and emergency plan implementing procedures
- Drill and exercise performance issues entered into the licensee's corrective action program
- Emergency preparedness program issues entered into the licensee's corrective action program
- Maintenance records for equipment supporting the emergency preparedness program
- Emergency response organization and emergency planner training records

The inspectors reviewed summaries of 154 corrective action program reports associated with emergency preparedness and selected 21 to review against program requirements, to determine the licensee's ability to identify, evaluate, and correct problems in accordance with planning standard 10 CFR 50.47(b)(14) and 10 CFR Part 50, Appendix E, IV.F. The inspectors verified that the licensee accurately and appropriately identified and corrected emergency preparedness weaknesses during critiques and assessments.

The inspectors reviewed summaries of 50 licensee evaluations of the impact of changes to the emergency plan and implementing procedures, and selected 10 to review against program requirements to determine the licensee's ability to identify reductions in the effectiveness of the emergency plan in accordance with the requirements of 10 CFR 50.54(q)(3) and 50.54(q)(4). The inspectors verified that evaluations of proposed changes to the licensee emergency plan appropriately identified the impact of the changes prior to being implemented.

The inspectors reviewed summaries of 200 records pertaining to the maintenance of equipment and facilities used to implement the emergency plan, and selected 11 to review against program requirements to determine the licensee's ability to maintain equipment in accordance with the requirements of 10 CFR 50.47(b)(8) and 10 CFR Part 50, Appendix E, IV.E. The inspectors verified that equipment and facilities were maintained in accordance with the commitments of the licensee's emergency plan.

These activities constitute completion of one sample of the maintenance of the licensee's emergency preparedness program as defined in Inspection Procedure 71114.05.

b. Findings

1. Failure to Conduct Drills in Accordance with the Site Emergency Plan

Introduction. The inspectors identified a Green non-cited violation of 10 CFR 50.54(q)(2) associated with the licensee's failure to follow their emergency plan. Specifically, the licensee failed to follow South Texas Project Electric Generating Station Emergency Plan, ICN 20-18, Section N, Addendum N-1, which requires that drills involving radiological monitoring and health physics be conducted on an annual and semi-annual basis, respectively, covering a specified scope of evaluations. The licensee failed to conduct a correctly scoped radiological drill in 2015 and 2016, and one of the health physics drills in 2016.

<u>Description</u>. The inspectors reviewed drills and exercises conducted by the licensee between November 2015 and May 2017, and compared the drill and exercise evaluation reports to the requirements of the licensee emergency plan.

The inspectors determined that South Texas Project Electric Generating Station Emergency Plan, ICN 20-18, Section N, Addendum N-1, Sections 6.0 and 7.0, required the following for radiological monitoring and health physics drills:

 Radiological monitoring drills shall be conducted at the station annually. These drills shall provide for the monitoring of plant environs and radiological monitoring on-site and offsite. At least once every year collection and analysis will also include air, vegetation, soil, and water. • Health physics drills shall be conducted semiannually, which involve response to and analysis of simulated elevated airborne and liquid samples and direct radiation measurements in the environment.

The inspectors evaluated drill reports for environmental monitoring drills held on March 16, 2015, and February 9, 2016. For the semi-annual health physics drill requirement, combined functional drill reports from 2015 and 2016 were reviewed. Based on this review, the inspectors determined that the following drill requirements were not met:

- For the years 2015 and 2016, environmental monitoring was evaluated at only one location. Therefore, the scope of the evaluation did not provide for the requirement to monitor on-site and offsite.
- The 2015 and 2016 environmental monitoring drills included evaluating collection and analysis of a vegetation sample. However, collection and analysis of soil and water samples were not evaluated.
- One of the two semiannual health physics drills, held on August 17, 2016, did not include situational analysis and response actions by health physics staff as part of the demonstration criteria.

The inspectors reviewed the licensee's documentation describing how emergency preparedness drills were developed, and what demonstration criteria were used to evaluate the emergency response staff's proficiency. Licensee document ZV-0027, "Drill and Exercise Performance Objectives and Demonstration Criteria," Revision 3, stated the demonstration criteria for drill objectives related to these two drills. However, it did not capture all of the requirements of the emergency plan. Examples included:

- The drill objective for the environmental monitoring drill (HP Environmental Release Monitoring, OBJ-I-6) did not include demonstration criteria to evaluate the taking of both on-site and offsite samples.
- The same environmental monitoring drill objective did not specify the specific samples that were necessary.
- The drill objective for the health physics drill (HP In Plant Monitoring, OB-J-I-5) did not state that response actions based on the analysis of presented radiological conditions needed to be demonstrated.

The inspectors determined that the licensee did not conduct these drills in a manner that ensured that all of the required demonstration criteria were evaluated at the specified frequency. Therefore, the inspectors concluded that the licensee did not follow the requirements of the site emergency plan. The inspectors determined that all other drills required by the emergency plan were conducted in 2015 and 2016.

Analysis. The failure to conduct drills required by the emergency plan is a performance deficiency within the licensee's ability to foresee and correct. The performance deficiency was more than minor because it was associated with the emergency response organization performance (drills and exercises) cornerstone attribute and adversely affected the Emergency Preparedness Cornerstone objective of being capable of implementing adequate measures to protect the health and safety of the public in the event of a radiological emergency. The licensee's ability to take adequate measures to protect the health and safety of the public is degraded when the licensee does not perform drills and exercises to ensure emergency response organization proficiency. The finding was evaluated using Inspection Manual Chapter 0609, Appendix B, "Emergency Preparedness Significance Determination Process," dated September 22, 2015. The finding was determined to be of very low safety significance (Green) because it was a failure to comply with NRC requirements, was not associated with the risk significant planning standards, and was not a loss of planning standard function. The planning standard function was not lost because the licensee did conduct drills that addressed portions of the related emergency plan commitments.

The inspectors determined that the finding had a resources cross-cutting aspect in the human performance area because the licensee's organization failed to ensure that procedures were adequate to support nuclear safety. Specifically, licensee procedures on drill objectives and demonstration criteria failed to cover the full scope of these drills as described in the emergency plan [H.1].

<u>Enforcement</u>. Title 10 CFR 50.54(q)(2) requires, in part, that a power reactor licensee follow an emergency plan which meets the requirements of Appendix E to 10 CFR Part 50 and the standards of 10 CFR 50.47(b). Planning standard 10 CFR 50.47(b)(14) requires, in part, that the licensee conduct periodic drills to maintain key skills. South Texas Project Electric Generating Station Emergency Plan, ICN 20-18, Section N, Addendum N-1, Sections 6.0 and 7.0, requires, in part, that:

- Radiological monitoring drills shall provide for the monitoring of plant environs and radiological monitoring on-site and offsite. At least once every year collection and analysis will also include vegetation, soil, and water.
- Health physics drills shall involve response to and analysis of simulated elevated airborne and liquid samples and direct radiation measurements in the environment.

Contrary to the above, between January 1, 2016, and May 10, 2017, South Texas Project Electric Generating Station failed to follow an emergency plan which met the requirements of Appendix E and the Standards of 10 CFR 50.47(b). Specifically, the licensee failed to conduct annual and semi-annual drills involving the radiological monitoring and health physics respectively with the scope of evaluation required by the South Texas Project Electric Generating Station Emergency Plan, ICN 20-18, Section N, Addendum N-1, to maintain key emergency response organization skills. The inspectors determined that all other drills required to be conducted by the emergency plan were conducted in 2015 and 2016. This issue was entered into the licensee's corrective action program as Condition Reports 17-15971 and 17-15974. Because this violation was determined to be of very low safety significance and was entered into the licensee's corrective action program, this violation is being treated as an NCV, consistent with Section 2.3.2.a of the Enforcement Policy: NCV 05000498, 05000499/2017010-01, "Failure to Conduct Drills In Accordance With the Site Emergency Plan."

2. <u>Failure to Perform Required 50.54(q) Evaluations Prior to Implementing Changes to the</u> <u>Emergency Plan</u>

<u>Introduction</u>. The inspectors identified a Severity Level IV non-cited violation of 10 CFR 50.54(q)(3) for the failure to perform analyses demonstrating that changes to the emergency plan did not reduce the effectiveness of the emergency plan before implementing those changes without prior NRC approval.

<u>Description</u>. The inspectors identified four licensee 50.54(q) screenings performed between November 2, 2015, and September 7, 2016, which did not result in the licensee performing an evaluation against the requirements of 10 CFR 50.54(q)(3) as required by Procedure 0PGP05-ZV-0010, "Emergency Plan Change." The licensee concluded in the initial screening that a full analysis was not required when the procedure required the analysis. The proposed changes were subsequently implemented without the prior approval of the NRC.

The inspectors reviewed the 0PGP05-ZV-0010, "Emergency Plan Change, Screen Evaluation Form," prepared for:

- 0ERP01-ZV-EF02, Deputy EOF Director, Revision 15, dated November 2, 2015
- 0ERP01-ZV-EF08, Licensing Director, Revision 9, dated May 9, 2016
- 0ERP01-ZV-IN07, Protective Action Recommendations, Revision 17, dated August 8, 2016
- 0ERP01-ZV-SH01, Shift Manager, Revision 31, dated September 7, 2016

The inspectors compared the 50.54(q) screening evaluations for 0ERP01-ZV-EF02, 0ERP01-ZV-EF08, 0ERP01-ZV-IN07, and 0ERP01-ZV-SH01 against the requirements of Procedure 0PGP05-ZV-0010, Revisions 16 and 17. In each screening, the licensee concluded in Block 3 that "The change is not editorial or typographical," and in Block 4 that "The change does not conform to an activity that has prior approval," and concluded that the change affected at least one 10 CFR 50.47(b) planning standard.

The inspectors determined that Procedure 0PGP05-ZV-0010, Addendum 1, Section 7.0, provided criteria for concluding that a proposed change did not require a full evaluation and could be implemented without the prior approval of the NRC. Specifically, Section 7.0 permitted implementation without an evaluation only if it affected one or more 10 CFR 50.47(b) planning standards or a plant commitment and either the proposed change was editorial, corrected typographical errors, or was bounded by

an existing NRC approval. The inspectors concluded that the four screening evaluations did require full 50.54(q) evaluations according to the requirements of Procedure 0PGP05-ZV-0010 because the screenings identified the changes as not editorial or typographical, and not conforming to an activity that has prior NRC approval.

The licensee's screening evaluations inappropriately concluded for these four changes that a full evaluation was not required and thus the evaluations were not performed. Therefore, the inspectors concluded the licensee did not comply with the requirements of 10 CFR 50.54(q)(3) in implementing the four changes to the emergency plan because they did not perform an analysis demonstrating that the changes did not reduce the effectiveness of the emergency plan.

Analysis. The licensee's failure to perform required 50.54(g) evaluations is a performance deficiency within the licensee's ability to foresee and correct. The performance deficiency is more than minor because it affected the procedure quality (plan changes) cornerstone attribute and adversely affected the cornerstone objective. The ability of the licensee to ensure that adequate measures are taken to protect the health and safety of the public may be degraded when evaluations are not performed to ensure that changes made to the emergency plan do not reduce the plan's effectiveness. The performance deficiency was assessed using traditional enforcement because the licensee's failure to perform a required analysis impacted the regulatory process because a licensee evaluates changes affecting emergency preparedness to determine whether those changes require NRC approval before being implemented. The performance deficiency was evaluated using the NRC's Enforcement Policy, dated November 1, 2016, Section 6.6(d). The issue was determined to be a Severity Level IV violation of NRC requirements because the licensee's ability to implement regulatory requirements related to radiological assessment and offsite notification were not affected by the violation. Traditional enforcement violations are not assessed for cross-cutting aspects.

Enforcement. Title 10 CFR 50.54(g)(3) states, in part, that a licensee may make changes to its emergency plan without NRC approval only if the licensee performs and retains an analysis demonstrating that the changes do not reduce the effectiveness of the plan. Contrary to the above, between November 2, 2015, and September 7, 2016, South Texas Project made changes to its emergency plan without NRC approval and did not perform and retain an analysis demonstrating that the changes did not reduce the effectiveness of the plan. Specifically, on November 2, 2015; May 9, 2016; August 8, 2016; and September 7, 2016, the licensee determined that proposed changes to the emergency plan did not require a 50.54(q) evaluation and could be implemented without NRC approval. The failure to perform required evaluations did not have any safety consequences; the inspectors verified that the changes did not reduce the effectiveness of the emergency plan. The issue was entered into the licensee's corrective action program as Condition Report 2017-15956. This violation is being treated as an NCV, consistent with Section 2.3.2.a of the Enforcement Policy: NCV 05000498, 05000499/2017010-02, "Failure to Perform Required 50.54(g) Evaluations prior to Implementing Changes to the Emergency Plan."

2. RADIATION SAFETY

Cornerstones: Public Radiation Safety and Occupational Radiation Safety

2RS2 Occupational ALARA Planning and Controls (71124.02)

a. Inspection Scope

The inspectors assessed licensee performance with respect to maintaining individual and collective radiation exposures as low as is reasonably achievable (ALARA). The inspectors performed this portion of the attachment as a post-outage review. During the inspection, the inspectors interviewed licensee personnel, reviewed licensee documents, and evaluated licensee performance in the following areas:

- Radiological work planning, including work activities of exposure significance, and radiological work planning ALARA evaluations, initial and revised exposure estimates, and exposure mitigation requirements. The inspectors also verified that the licensee's planning identified appropriate dose reduction techniques, reviewed any inconsistencies between intended and actual work activity doses, and determined if post-job (work activity) reviews were conducted to identify lessons learned.
- Verification of dose estimates and exposure tracking systems, including the basis for exposure estimates, and measures to track, trend, and if necessary reduce occupational doses for ongoing work activities. The inspectors evaluated the licensee's method for adjusting exposure estimates and reviewed the licensee's evaluations of inconsistent or incongruent results from the licensee's intended radiological outcomes.
- Problem identification and resolution for ALARA planning. The inspectors reviewed audits, self-assessments, and corrective action program documents to verify problems were being identified and properly addressed for resolution.

These activities constitute completion of three samples of the five required samples of occupational ALARA planning and controls program, as defined in Inspection Procedure 71124.02, and completes the inspection.

b. Findings

No findings were identified.

2RS4 Occupational Dose Assessment (71124.04)

a. Inspection Scope

The inspectors evaluated the accuracy and operability of the licensee's personnel monitoring equipment, verified the accuracy and effectiveness of the licensee's methods for determining total effective dose equivalent, and verified that the licensee was appropriately monitoring occupational dose. The inspectors interviewed licensee personnel, walked down various portions of the plant, and reviewed licensee performance in the following areas:

- Source term characterization, including characterization of radiation types and energies, hard-to-detect isotopes, and scaling factors.
- External dosimetry including National Voluntary Laboratory Accreditation Program (NVLAP) accreditation, storage, issue, use, and processing of active and passive dosimeters.
- Internal dosimetry, including the licensee's use of whole body counting, use of in vitro bioassay methods, dose assessments based on airborne monitoring, and the adequacy of internal dose assessments.
- Special dosimetric situations, including declared pregnant workers, dosimeter placement and assessment of effective dose equivalent for external exposures (EDEX), shallow dose equivalent, and neutron dose assessment.
- Problem identification and resolution for occupational dose assessment. The inspectors reviewed audits, self-assessments, and corrective action program documents to verify problems were being identified and properly addressed for resolution.

These activities constitute completion of the five required samples of occupational dose assessment program, as defined in Inspection Procedure 71124.04.

b. Findings

No findings were identified.

4. OTHER ACTIVITIES

4OA1 Performance Indicator Verification (71151)

.1 Drill/Exercise Performance (EP01)

a. Inspection Scope

The inspectors reviewed the licensee's evaluated exercises, emergency plan implementation, and selected drill and training evolutions that occurred between July 2016 and March 2017 to verify the accuracy of the licensee's data for classification, notification, and protective action recommendation (PAR) opportunities. The inspectors reviewed a sample of the licensee's completed classifications, notifications, and PARs to verify their timeliness and accuracy. The inspectors used Nuclear Energy Institute Document 99-02, "Regulatory Assessment Performance Indicator Guideline," Revision 7, to determine the accuracy of the reported data. The specific documents reviewed are described in the attachment to this report.

These activities constitute verification of the drill/exercise performance indicator as defined in Inspection Procedure 71151.

b. Findings

No findings were identified.

.2 Emergency Response Organization Drill Participation (EP02)

a. Inspection Scope

The inspectors reviewed the licensee's records for participation in drill and training evolutions between July 2016 and March 2017 to verify the accuracy of the licensee's data for drill participation opportunities. The inspectors verified that all members of the licensee's emergency response organization (ERO) in the identified key positions had been counted in the reported performance indicator data. The inspectors reviewed the licensee's basis for reporting the percentage of ERO members who participated in a drill. The inspectors reviewed drill attendance records and verified a sample of those reported as participating. The inspectors used Nuclear Energy Institute Document 99-02, "Regulatory Assessment Performance Indicator Guideline," Revision 7, to determine the accuracy of the reported data. The specific documents reviewed are described in the attachment to this report.

These activities constitute verification of the emergency response organization drill participation performance indicator as defined in Inspection Procedure 71151.

b. Findings

No findings were identified.

.3 <u>Alert and Notification System Reliability (EP03)</u>

a. Inspection Scope

The inspectors reviewed the licensee's records of alert and notification system tests conducted between July 2016 and March 2017 to verify the accuracy of the licensee's data for siren system testing opportunities. The inspectors reviewed procedural guidance on assessing alert and notification system opportunities and the results of periodic alert and notification system operability tests. The inspectors used Nuclear Energy Institute Document 99-02, "Regulatory Assessment Performance Indicator Guideline," Revision 7, to determine the accuracy of the reported data. The specific documents reviewed are described in the attachment to this report.

These activities constitute verification of the alert and notification system reliability performance indicator as defined in Inspection Procedure 71151.

b. Findings

No findings were identified.

40A6 Meetings, Including Exit

Exit Meeting Summary

On May 12, 2017, the emergency preparedness inspectors presented the results of the inspection of the licensee's emergency preparedness program to Mr. A. Capristo, Executive Vice President and Chief Administrative Officer, and other members of the licensee staff. The licensee acknowledged the issues presented. The licensee confirmed that any proprietary information reviewed by the inspectors had been returned or destroyed.

On August 3, 2017, the health physics inspectors presented the radiation safety inspection results to Mr. D. Koehl, President and Chief Executive Officer, and other members of the licensee staff. The licensee acknowledged the issues presented. The licensee confirmed that any proprietary information reviewed by the inspectors had been returned or destroyed.

On September 7, 2017, the inspectors presented the results of the inspection to Mr. D. Rencurrel, Senior Vice President of Operations, and other members of the licensee staff. The licensee acknowledged the issues presented. The licensee confirmed that any proprietary information reviewed by the inspectors had been returned or destroyed.

SUPPLEMENTAL INFORMATION

KEY POINTS OF CONTACT

Licensee Personnel

R. Aguilera, Manager, Plant Protection/Emergency Response

- A. Capristo, Executive Vice President and Chief Administrative Officer
- R. Gonzales, Staff Engineer, Licensing
- D. Koehl, President and Chief Executive Officer
- D. Rencurrel, Senior Vice President, Operations
- J. Connolly, Vice President, Site
- D. Hubernak, Supervisor, General Health Physics
- K. Kawabata, Health Physicist
- J. Pointon, Supervisor, ALARA
- B. Scarborough, Manager, Nuclear Oversight
- C. Stone, Manager, Radiation Protection/Health Physics
- M. Pilgreen, Supervisor, Technical Support
- L. Kauffman, RPT Outage Planner
- M. Murray, Manager, Regulatory Affairs/Licensing
- J. Enoch, Supervisor, Emergency Response
- D. Rencurrel, Senior Vice President of Operations

LIST OF ITEMS OPENED, CLOSED, AND DISCUSSED

Opened and Closed

05000498/2017010-01, 05000499/2017010-01	NCV	Failure to Conduct Drills In Accordance with the Site Emergency Plan (Section 1EP5)
05000498/2017010-02, 05000499/2017010-02	NCV	Failure to Perform Required 50.54(q) Evaluations prior to Implementing Changes to the Emergency Plan (Section 1EP5)

LIST OF DOCUMENTS REVIEWED

Section 1EP2: Alert and Notification System Testing

Procedures Title Revision Number ZV-0013 Alert Radio Maintenance and Distribution 1 ZV-0021 Prompt Notification System Changes 0 0PGP05-ZV-**Prompt Notification System** 11 0007 0PGP05-ZV-Prompt Notification System Implementing Procedure 11 0016 **STP PNS Preventative Maintenance Instructions** 0 **Miscellaneous Document** <u>Title</u> Revision Updated Prompt Notification System Design Report 1, 2

Section 1EP3: Emergency Response Organization Staffing and Augmentation System

Procedures		
<u>Number</u>	Title	<u>Revision</u> Date
0ERP01-ZV-IN03	Emergency Response Organization Notification	18
0PGP05-ZV- 0006	Emergency Response and Notification System	3
0PGP05-AV- 0014, Form 19	ENRS Test – 4 th Quarter 2015	November 30, 2015
0PGP05-AV- 0014, Form 19	ENRS Test – 1 st Quarter 2016	February 24, 2016
0PGP05-AV- 0014, Form 19	ENRS Test – 2nd Quarter 2016	June 13, 2016
0PGP05-AV- 0014, Form 19	ENRS Test – 3 rd Quarter 2016	August 26, 2016
0PGP05-AV- 0014, Form 19	ENRS Test – 4 th Quarter 2016	November 18, 2016

Procedures

<u>Number</u>	Title	<u>Revision</u> <u>Date</u>
0PGP05-AV- 0014, Form 19	ENRS Test – 1 st Quarter 2017	February 28, 2017

Section 1EP5: Maintenance of Emergency Preparedness

Procedures

<u>Number</u>	Title	Revision
ZV-0006	Letters of Agreement	18
0PGP05-ZV- 0002	Emergency Response Activities Schedule	12
0PGP05-ZV- 0014	Emergency Response Activities	15
0ERP01-ZV- EF01	EOF Director	18
0ERP01-ZV- EF18	Offsite Agency Communicator	6
0ERP01-ZV- IN01	Emergency Classification	9, 10
0ERP01-ZV-IN02	Notifications to Offsite Agencies	34
0ERP01-ZV- IN04	Assembly and Accountability	16
0ERP01-ZV-IN05	Site Evacuation	16
0ERP01-ZV-IN07	Offsite Protective Action Recommendations	17
0PGP03-ZT- Emergency Preparedness Training Program 0139		21
0PGP05-ZV- 0001	Emergency Response Exercises and Drills	17
0PGP03-ZX- 0002	Condition Reporting Process	52
0PGP03-ZX- 0002A	CAQ Resolution Process	6

Procedures

<u>Number</u>	Title			Re	<u>vision</u>
0PGP03-ZX- 0002B	Station Cause Analysis Program			7	
0PGP03-ZX- 0008	Condition Not Adve Process	erse to Quality (CNA	AQ) Resolution	2	
0PGP05-ZV- 0009	Emergency Facility	Inventories and In	spections	17	
0PGP03-ZV- 0005	Equipment Importa	int to Emergency R	esponse	5	
0PGP05-ZV- 0012	Emergency Facility	Inventories		17	
0ERP01-ZV- TP01	Offsite Dose Calculations			27	
0ERP01-ZV- EF15	Dose Assessment Specialist			4	
ZV-0023	10 CFR 50.54(q) Screening Reference Document			0	
0PGP05-ZV- 0010	Emergency Plan Change			17	
ZV-0001	STAMPEDE User's Manual			8	
ZV-0002	Public Address Announcements			7	
ZV-0019	Scenario Design and Development			3	
Condition Reports	<u>(CR)</u>				
15-25192	15-25322	15-25371	15-25466		16-01160
16-01775	16-01781	16-01903	16-02715		16-02973

16-01775	16-01781	16-01903	16-02715	16-02973
16-02982	16-02984	16-02994	16-03678	16-03681
16-04737	16-04794	16-05603	16-06955	16-08816
16-08861	16-08915	16-09135	16-10092	16-10119
16-13558	16-15481	17-11761	17-11834	17-13152
17-15175	17-15639	17-15868	17-15956	17-15971
17-15974	17-16023			

Number	<u>Title</u>	<u>Revision</u> Date
	South Texas Project Electric Generating Station Emergency Plan	ICN 20-18
STI 34418977	Combined Functional Drill, Final Report, Blue Team, February 2, 2016	April 7, 2016
	Environmental Sampling Drill, Final Report, February 9, 2016	March 14, 2016
	Environmental Sampling Drill, Final Report, March 2, 2017	March 7, 2017
STI 34344213	South Texas Project After Action Report/Improvement Plan, Drill Date – February 18, 2016, Radiological Emergency Preparedness Plan	
STI 34390788	Owner Controlled Area Sweep Mini Drill, Final Report, March 4, 2017	March 8, 2017
	Owner Controlled Area Sweep Mini Drill, Final Report, September 16, 2016	October 5, 2016
STI 34397796	Combined Functional Drill, Final Report, Red Team, August 17, 2016	March 9, 2017
STI 34342357	April 20, 2016 White Team Combined Functional Drill Management Critique	May 11, 2016
	2016 South Texas Project On-site Medical Drill, In Conjunction with the FEMA MS-1 Medical Exercise	February 18, 2016
	June 1, 2016 White Team Dress Rehearsal Management Critique	June 15, 2016
	NRC/FEMA Evaluated Exercise, Final Report, White Team	July 13, 2016
Condition Sequence # 15- 22278	Snapshot Self-Assessment	December 12, 2015
Condition Sequence # 16- 6944	Snapshot Self-Assessment	July 14, 2016

Number	Title	<u>Revision</u> <u>Date</u>
Audit Report Number 16-01 (EP)	STP Nuclear Operating Company Emergency Preparedness Quality Audit Report	March 10, 2016
Audit Report Number 17-01 (EP)	STP Nuclear Operating Company Emergency Preparedness Quality Audit Report	March 2, 2017
STI 34330520	Triannual Quality Performance Assessment Report 1 st Cycle 2016, Revision1	May 25, 2016
STI 34365273	Triannual Quality Performance Assessment Report 2nd Cycle 2016	August 31, 2016
KLD TR-880	South Texas Project Electric Generating Station 2016 Population Update Analysis	October 9, 2016
ST-HL-AE-3782	South Texas Project Electric Generating Station, Units 1 and 2, Docket Nos. STN 50-498 and 50- 499, Extension of Emergency Response Qualification	May 21, 1991
ST-HL-AE-92776	Letter from United States Nuclear Regulatory Commission, Region IV, to Mr. D. Hall, Houston Lighting and Power Company	June 17, 1991
	Plan of Action, Primary & Backup Meteorological System, CR 16-884	February 9, 2016
0PGP05-ZV- 0014, Form 16	State of Texas/Matagorda County Annual Review of the STPEGS Emergency Action Levels	August 8, 2016
FS # FS16-03144	Quarterly Siren PM On Sirens, Quadrant 1	October 20, 2016
FS # FS16-03246	Quarterly Siren PM On Sirens, Quadrant 2	October 26, 2016
FS # FS16-03360	Quarterly Siren PM On Sirens, Quadrant 3	November 3, 2016
FS # FS16-02941	Quarterly Siren PM On Sirens, Quadrant 4	November 29, 2016
WAN # 514630	Component Description: TSC Diesel Generator, Activity Description: Inspect/Test/Clean Generator	November 1, 2016
WAN # 425758	Component Description: Technical Support Center Make-up Air Supply Fan, Activity Description: Clean/Inspect	January 31, 2012
16-08816	Tier 2 Apparent Cause Evaluation, Green Non- Cited Violation of 10 CFR 50.47(b)(10) for Failure	0, 1

Number	Title	<u>Revision</u> Date
	to Develop Procedures for Making Protective Action Recommendations (PARs) Consistent with Federal Guidance	
15-25192	November 13, 2015 Emergency Response Summary Report	December 3, 2015
	2015 Environmental Sampling Drill Final Report, March 16, 2015	October 5, 2015
	2015 Blue Combined Facility Drill Documentation, February 11, 2015	
	2015 Combined Facility Drill Documentation, July 22, 2015	
ST-AE-HL-94477	Letter from Mr. T. Gwynn, U.S. Nuclear Regulatory Commission, to Mr. W. Cottle, Houston Lighting & Power. Subject: Changes to the South Texas Project Emergency Plan	April 10, 1996
ST-HL-AE-5278	Letter from Mr. P. Serra, South Texas Project, to U.S. Nuclear Regulatory Commission. Emergency Plan, Revision 17	January 15, 1996
STI 34252696	Monthly Quality Performance Assessment Report	December 10, 2015
STI 34268642	Quality Tri-Annual Performance Assessment Report	January 26, 2016
STI 34289740	Monthly Quality Performance Assessment Report	March 10, 2016
STI 34295030	Monthly Quality Performance Assessment Report	March 22, 2016
STI 34306011	Monthly Quality Performance Assessment Report	April 18, 2016
STI 34347115	Monthly Quality Performance Assessment Report	July 19, 2016
STI 34419767	Monthly Quality Performance Assessment Report	December 13, 2016
STI 34441823	Monthly Quality Performance Assessment Report	February 8, 2017
	Evaluation Report for the April 20, 2016, On-site Medical Drill	May 11, 2016
0PGP05-ZV-0010 Emergency Plan Change, Form 1	Screen Evaluation Form for 0ERP01-ZV-EF02, Deputy EOF Director, Revision 15	November 2, 2015

Number	Title	<u>Revision</u> <u>Date</u>
0PGP05-ZV-0010 Emergency Plan Change, Form 1	Screen Evaluation Form for 0ERP01-ZV-EF08, Licensing Director, Revision 9	May 9, 2016
0PGP05-ZV-0010 Emergency Plan Change, Form 1	Screen Evaluation Form for 0ERP01-ZV-SH01, Shift Manager, Revision 31	August 8, 2016
0PGP05-ZV- 0010, Emergency Plan Change, Form 1	Screen Evaluation Form for 0ERP01-ZV-IN07, Revision 17	September 7, 2016
0PGP05-ZV- 0010, Emergency Plan Change, Forms 1 and 2	Screen Evaluation and Effectiveness Evaluation Forms, 0PGP05-ZV-0014, Emergency Response Activities, Revision 15	August 3, 2016
0PGP05-ZV- 0010, Emergency Plan Change, Forms 1 and 2	Screen Evaluation and Effectiveness Evaluation Forms, 0PGP03-ZA-0106, Emergency Medical Response Plan, Revision 9	June 8, 2016
0PGP05-ZV- 0010, Emergency Plan Change, Forms 1 and 2	Screen Evaluation and Effectiveness Evaluation Forms, 0PGP05-ZV-0014, Emergency Response Activities, Revision 15	August 3, 2016
0PGP05-ZV- 0010, Emergency Plan Change, Forms 1 and 2	Screen Evaluation and Effectiveness Evaluation Forms, Physical Modifications to the East Gate House	April 28, 2016
0PGP05-ZV- 0010, Emergency Plan Change, Forms 1 and 2	Screen Evaluation and Effectiveness Evaluation Forms, 0PGP05-ZV-0014, Emergency Response Activities, Revision 16	May 3, 2017
	Tier 1 Apparent Cause Investigation, Unusual Event Due to CVCS Demin Drain Valve Leak	February 17, 2016
WAN # 482133	Component Description: TSC Diesel Generator, Activity Description: Implement DCP 12-31926-3 for the Technical Support Center (TSC) HK (Class-1E) Breaker Replacement	May 17, 2016

Section 2RS2: Occupational ALARA Planning and Controls

Procedures

<u>Number</u>	<u>Title</u>			<u>Revision</u>
0PGP03-ZR-0050	Radiation Prote	ction Program		14
0PGP03-ZR-0051	Radiological Ac	cess Controls/ S	tandards	33
0PGP03-ZR-0052	ALARA Program	n		17
0PRP07-ZR-0001	ALARA Engine	ering and Proced	ure Review	3
0PRP07-ZR-0004	Shielding			20
0PRP07-ZR-0010	Radiation Work ALARA Review	: Permits / Radiol s	ogical Work	37
Condition Reports				
17-12861	17-13545	17-13942	17-14053	17-14780
ALARA Review Pa	ackages			
Number	<u>Title</u>			<u>Date</u>
17-1078-4	NI Detector Repla	acement		March 14, 2017
17-1078-6	Room 003 Activit	ies		March 14, 2017
17-1078-7	Non-Rapid Refue	9		March 15, 2017
16-4031-2	NI Detector Repla	VI Detector Replacement		October 6, 2016
Radiation Work Pe	<u>ermits</u>			
Number	<u>Title</u>			<u>Revision</u>
2017-1-0115	1RE 20 O-Ring	Groove Cleaning	9	0
2017-1-0125	1RE 20 Replace	e Power Range [Detectors	2
2016-2-0148	2 RE 18 Replac Detectors	2 RE 18 Replace Source/Intermediate Range Detectors		1
2017-1-0121	Retract/Re-inse	Retract/Re-insert Thimble Tubes		2
ALARA Review Clo	ose out Package			
Number	<u>Title</u>			<u>Date</u>
17-1078-7	Non-Rapid Refu	uel		June 8, 2017
17-1078-4	NI Detector Rep	placement		May 25, 2017
16-4031-2	NI Detector Rep	NI Detector Replacement		

ALARA Review	<u>Close out Package</u>		
<u>Number</u>	<u>ber Title</u>		
17-1078-6	Room 003 Activities	May 25, 2017	
Audits, Self-Ass	essments, and Surveillances		
Number	<u>Title</u>	<u>Date</u>	
16-002	STPNOC Radiological Controls Quality Audit Report	April 13, 2016	
Miscellaneous [Documents		
<u>Title</u>		<u>Date</u>	
1RE19 Refueling Outage ALARA Report		June 1, 2016	
2RE18 Refueling Outage ALARA Report		May 18, 2017	
ALARA Review Committee Meeting Minutes		June 15, 2017	
ALARA Review Committee Meeting Minutes		April 12, 2017	
ALARA Review Committee Meeting Minutes		March 23, 2017	
ALARA Review Committee Meeting Minutes		January 19, 2017	
STPNOC ALAR	July 24, 2016		

Section 2RS4: Occupational Dose Assessment

Procedures

<u>Number</u>	Title	Revision
0PGP03-ZR-0050	Radiation Protection Program	14
0PRP02-ZR-0014	Biological Sample Collection	5
0PRP07-ZR-0034	Radiological Risk Assessment	4
0PRP07-ZR-0033	Radiological Briefings	7
0PRP04-ZR-0016	Radiological Air Sample Analysis	28
0PGP03-ZR-0048	Personnel Dosimetry Program	19
0PRP02-ZR-0007	Evaluation of Intakes	13
0PRP02-ZR-0010	Personnel Exposure Investigation	11
0PRP02-ZR-0011	Calibration of WBC System	6
0PRP02-ZR-0013	Determination of Skin Dose	8
0PRP02-ZR-0017	Dose to Embryo/Fetus	2
0PRP02-ZR-0005	Operation of the Canberra WBC System	22

Audits and Self-Assessments

<u>Number</u>	Title	<u>Date</u>
RC 16-02	Radiological Controls Quality Audit Report	April 13, 2016
15-1000001	Self-Assessment Dosimetry Program	January 28, 2016
	External Dosimetry (TLD) Program Annual Report 2016	July 20, 2016

Condition Reports (CR)

17-14172	17-12225	17-11653	16-13950	16-12804
16-12720	16-01841	16-01820	16-01819	15-24080

Section 4OA1: Performance Indicator Verification

Procedure

<u>Number</u>	Title	<u>Revision</u>
ZV-0027	Drill and Exercise Performance Objectives and Demonstration Criteria	3

Condition Report (CR) 17-15639

A1-11

The following items are requested for the

Occupational Radiation Safety Inspection SOUTH TEXAS PROJECT

Inspection Dates July 31 – August 4, 2017 Integrated Report 2017003

Inspection areas are listed in the attachments below.

Please provide the requested information on or before July 21, 2017

Please submit this information using the same lettering system as below. For example, all contacts and phone numbers for Inspection Procedure 71124.01 should be in a file/folder titled "1- A," applicable organization charts in file/folder "1- B," etc.

If information is placed on *ims.certrec.com*, please ensure the inspection exit date entered is at least 30 days later than the onsite inspection dates, so the inspectors will have access to the information while writing the report.

In addition to the corrective action document lists provided for each inspection procedure listed below, please provide updated lists of corrective action documents at the entrance meeting. The dates for these lists should range from the end dates of the original lists to the day of the entrance meeting.

If more than one inspection procedure is to be conducted and the information requests appear to be redundant, there is no need to provide duplicate copies. Enter a note explaining in which file the information can be found.

If you have any questions or comments, please contact Louis Carson at (817)200-1221, Louis.Carson@nrc.gov or Shawn Money at (817)200-1466, Shawn.Money@nrc.gov

PAPERWORK REDUCTION ACT STATEMENT

This letter does not contain new or amended information collection requirements subject to the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.). Existing information collection requirements were approved by the Office of Management and Budget, control number 3150-0011.

- 2. Occupational ALARA Planning and Controls (71124.02) Date of Last Inspection: March 18, 2017
- A. List of contacts and telephone numbers for ALARA program personnel
- B. Applicable organization charts
- C. Copies of audits, self-assessments, and LERs, written since date of last inspection, focusing on ALARA
- D. Procedure index for ALARA Program
- E. Please provide specific procedures related to the following areas noted below. Additional Specific Procedures may be requested by number after the inspector reviews the procedure indexes.
 - 1. ALARA Program
 - 2. ALARA Committee
 - 3. Radiation Work Permit Preparation
- F. A summary list of corrective action documents (including corporate and sub-tiered systems) written since date of last inspection, related to the ALARA program. In addition to ALARA, the summary should also address Radiation Work Permit violations, Electronic Dosimeter Alarms, and RWP Dose Estimates

NOTE: The lists should indicate the <u>significance level</u> of each issue and the <u>search</u> <u>criteria</u> used. Please provide in document formats which are "searchable" so that the inspector can perform word searches.

- G. List of work activities greater than 1 rem, since date of last inspection Include original dose estimate and actual dose.
- H. Site dose totals and 3-year rolling averages for the past 3 years (based on dose of record)
- I. Outline of source term reduction strategy
- J. If available, provide a copy of the ALARA outage report for the *most recently* completed outages for each unit
- K. Please provide your most recent Annual ALARA Report.
- 4. Occupational Dose Assessment (Inspection Procedure 71124.04) Date of Last Inspection: June 30, 2015
- A. List of contacts and telephone numbers for the following areas:1. Dose Assessment personnel
- B. Applicable organization charts
- C. Audits, self-assessments, vendor or NUPIC audits of contractor support, and LERs written since date of last inspection, related to:
 1. Occupational Dose Assessment
- D. Procedure indexes for the following areas
 - 1. Occupational Dose Assessment

- E. Please provide specific procedures related to the following areas noted below. Additional Specific Procedures will be requested by number after the inspector reviews the procedure indexes.
 - 1. Radiation Protection Program
 - 2. Radiation Protection Conduct of Operations
 - 3. Personnel Dosimetry Program
 - 4. Radiological Posting and Warning Devices
 - 5. Air Sample Analysis
 - 6. Performance of High Exposure Work
 - 7. Declared Pregnant Worker
 - 8. Bioassay Program
- F. List of corrective action documents (including corporate and sub-tiered systems) written since date of last inspection, associated with:
 - 1. NVLAP
 - 2. Dosimetry (TLD/OSL, etc.) problems
 - 3. Electronic alarming dosimeters
 - 4. Bioassays or internally deposited radionuclides or internal dose
 - 5. Neutron dose

NOTE: The lists should indicate the <u>significance level</u> of each issue and the <u>search</u> <u>criteria</u> used. Please provide in document formats which are "searchable" so that the inspector can perform word searches.

- G. List of positive whole body counts since date of last inspection, names redacted if desired
- H. Part 61 analyses/scaling factors
- I The most recent NVLAP accreditation report or, if dosimetry is provided by a vendor, the vendor's most recent results

PAPERWORK REDUCTION ACT STATEMENT

This letter does not contain new or amended information collection requirements subject to the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.). Existing information collection requirements were approved by the Office of Management and Budget, control number 3150-0011.

SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION - NRC RADIATION SAFETY AND EMERGENCY PREPAREDNESS INSPECTION REPORT 05000498/2017010 AND 05000499/2017010 - September 13, 2017

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