

LICENSEE EVENT REPORT

CONTROL BLOCK: _____ (PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

0	1	M	I	D	C	C	2	0	0	0	0	0	0	0	0	0	0	0	0	4	1	1	1	1	5				
7	8	9	14					15						25						26		30				57		58	8
LICENSEE CODE LICENSE NUMBER LICENSE TYPE CAT 58																													

0	1	L	0	5	0	0	0	3	1	6	0	1	1	7	7	9	0	2	1	3	7	9						
7	8	60		61	68						69	74				75				80								
REPORT SOURCE DOCKET NUMBER EVENT DATE REPORT DATE																												

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

0 2 DURING A ROUTINE SURVEILLANCE TEST OF THE SOLID STATE PROTECTION

0 3 SYSTEM (TRAIN B), A LOGIC TEST POSITION TESTED UNSATISFACTORILY.

0 4 THIS AFFECTED THE TURBINE TRIP AND FEEDWATER PORTION OF THE

0 5 AUTOMATIC ACTUATION LOGIC, T.S. TABLE 3.3-3 ITEM 1.b. THE

0 6 REQUIREMENTS OF ACTION ITEM 13 WERE MET.

0 7

0 8

7 8 9

0	9	I	B	E	G	I	N	S	T	R	U	X	Z															
7	8	9		10	11	12		13				18		19		20												
SYSTEM CODE CAUSE CODE CAUSE SUBCODE COMPONENT CODE COMP. SUBCODE VALVE SUBCODE																												

17	21	22	23	24	25	26	27	28	29	30	31	32
7	8	9	10	11	12	13	14	15	16	17	18	19
LER/RO REPORT NUMBER EVENT YEAR SEQUENTIAL REPORT NO. OCCURRENCE CODE REPORT TYPE REVISION NO.												

A	B	Z	Z	0	0	0	0	N	Y	N	W	I	2	0
7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
ACTION TAKEN FUTURE ACTION EFFECT ON PLANT SHUTDOWN METHOD HOURS ATTACHMENT SUBMITTED NPRD-4 FORM SUB. PRIME COMP. SUPPLIER COMPONENT MANUFACTURER														

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

1 0 UNIVERSAL LOGIC CARD A-214 (WESTINGHOUSE PART No. 6056D21G01) WAS

1 1 FOUND TO HAVE FAILED. THIS LOGIC CARD WAS REPLACED WITH THE

1 2 SURVEILLANCE TEST PROCEDURE PERFORMED ON TRAIN "B" TO VERIFY

1 3 SYSTEM OPERABILITY. NO FURTHER ACTION IS PLANNED.

1 4

7 8 9

1	5	E	0	0	NA	B	SURVEILLANCE TEST
7	8	9	10	11	12	13	14
FACILITY STATUS % POWER OTHER STATUS METHOD OF DISCOVERY DISCOVERY DESCRIPTION							

1	6	Z	Z	NA	NA	NA
7	8	9	10	11	12	13
ACTIVITY RELEASED CONTENT OF RELEASE AMOUNT OF ACTIVITY LOCATION OF RELEASE						

1	7	0	0	0	Z	NA
7	8	9	10	11	12	13
PERSONNEL EXPOSURES NUMBER TYPE DESCRIPTION						

1	8	0	0	0	NA
7	8	9	10	11	12
PERSONNEL INJURIES NUMBER DESCRIPTION					

1	9	Z	NA
7	8	9	10
LOSS OF OR DAMAGE TO FACILITY TYPE DESCRIPTION			

2	0	N	NA
7	8	9	10
PUBLICITY ISSUED DESCRIPTION			

NAME OF PREPARER J. L. Rischling

PHONE: 616-465-5901

