

INDIANA & MICHIGAN POWER COMPANY
DONALD C. COOK NUCLEAR PLANT

PLANT MANAGER PROCEDURE

Index

Identification Number	Title	Revision No. And Date	Comments
PMP 2080 EPP.001	Emergency Plan Activation and Condition Classification	Revision 3 10-12-82	
EPP.002	Unusual Event	CANCELLED 10-29-81	
EPP.003	Alert	CANCELLED 10-29-81	
EPP.004	Site Emergency	CANCELLED 10-29-81	
EPP.005	General Emergency	CANCELLED 10-29-81	
EPP.006	Initial Dose Assessment (Gaseous)	Revision 3 8-27-82	
EPP.007	Initial Release Assessments (Liquid)	Revision 0 4-1-81	TP-1,2-23-82 Exp NA
EPP.008	Initiating Manning of Emergency Response Facilities & Calling Off-Duty Personnel	Revision 3 10-12-82	
EPP.009	Fire Emergency Guidelines	Revision 1 6-15-82	
EPP.010	Toxic Gas Release Guidelines	Revision 1 6-2-82	
EPP.011	Natural Emergency Guidelines	Revision 0 4-1-81	
EPP.012	Initial Off-Site Notification	Revision 2 10-19-82	

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Rev. Date 10-20-82

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INDIANA & MICHIGAN
ELECTRIC COMPANY
DONALD C. COOK NUCLEAR PLANT

PROCEDURE COVER SHEET

Procedure No. PMP 2080 EPP.012

Revision No. 2

TITLE INITIAL OFF-SITE NOTIFICATIONS

SCOPE OF REVISION

Rev. 1: Incorporated Temporary Sheets. Revised Exhibit A and B.

Rev. 2: Incorporated temporary sheet. Established a goal of reporting Unusual Events within fifteen (15) minutes.

SIGNATURES

	ORIGINAL	Rev. 1	REV. 2	Rev. 3
PREPARED BY	J.P. NFFY ^{NWB}	Michael Beane	Michael Beane	
QUALITY ASSURANCE REVIEW	<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>	
INTERFACING DEPARTMENT HEAD CONCURRENCE	N.A.	N.A.	NA	
DEPARTMENT HEAD APPROVAL	N.A.	N.A.	NA	
PLANT NUCLEAR SAFETY COMMITTEE	RL Keid	E. Townley	<i>[Signature]</i>	
PLANT MANAGER APPROVAL	<i>[Signature]</i>	W. Smith	W. Smith	
DATE OF ISSUE	3-31-81	4-27-82	10-19-82	



LIST OF EFFECTIVE PAGES

<u>Page Number</u>	<u>Revision Number And Date</u>
Page 1 of 3	Revision 2, 10-19-82
Page 2 of 3 EXHIBIT A	Revision 2, 10-19-82
Page 3 of 3 EXHIBIT B	Revision 2, 10-19-82

INDIANA & MICHIGAN ELECTRIC COMPANY
DONALD C. COOK NUCLEAR PLANT

1.0 OBJECTIVE

This procedure provides guidance to the Plant Manager or Shift Supervisor regarding initial information supplied to off-site support groups. This information is to be supplied upon declaration of an Unusual Event, Alert, Site Emergency, or General Emergency condition.

2.0 RESPONSIBILITIES

- 2.1 The Plant Manager is responsible for the accomplishment of initial off-site notifications to individuals or agencies specified in this procedure.
- 2.2 The Shift Supervisor is responsible for the initial notifications to individuals or agencies specified in this procedure if:
 - a. In the Shift Supervisor's judgement, the Plant Manager will be unable to complete the notifications in a timely manner, or
 - b. The Shift Supervisor is delegated this responsibility by the Plant Manager.

3.0 LIMITATIONS

- 3.1 Initial notification to the Berrien County Sheriff's Department and the Michigan State Police of an Unusual Event is expected to be completed within fifteen (15) minutes of event classification.
- 3.2 Initial notifications to the Michigan State Police and the Berrien County Sheriffs Department shall be immediate upon classification of an Alert, Site Emergency or General Emergency Condition and notification of the NRC and appropriate AEP personnel.

4.0 INSTRUCTIONS

- 4.1 Upon declaration of an Unusual Event, Alert, Site Emergency or General Emergency the Plant Manager or SS shall provide all immediately available information from EXHIBIT A, 'ACCIDENT INFORMATION REPORTING DATA SHEET', to those listed on EXHIBIT B, INITIAL OFF-SITE NOTIFICATION LIST.

NOTE: EXHIBIT A AND EXHIBIT B SHOULD BE COMPLETED AND ROUTED TO THE PLANT MANAGER'S OFFICE UPON EVENT CLOSE-OUT.

NOTE: PHONE NUMBERS FOR ALL PERSONNEL ARE CONTAINED IN APPENDIX A OF THESE EMERGENCY PLAN PROCEDURES.

NOTE: IF PUBLIC AFFAIRS AND NRC AGREE A NEWS RELEASE IS TO BE MADE, THE NUCLEAR CENTER WILL PROVIDE THE RELEASE TO THE MICHIGAN STATE POLICE, THE BERRIEN COUNTY SHERIFF'S DEPARTMENT AND THE NEWS MEDIA.



ACCIDENT INFORMATION REPORTING DATA SHEET

D.C. Cook Unit _____ Date _____ Time Classified _____

Classification _____

Description of Event _____

Release Involved: Yes _____ No _____ Estimated Duration (Time) _____

Release Rate _____ Ci/sec Noble Gas Height: Ground Level

Wind Speed (mph) _____ Wind Direction (From) _____

ΔT _____ °C Pascal Category _____ Precipitation _____

Site Boundary Dose Rate _____ Projected _____ Measured _____

Injured Personnel _____ Radioactively Contaminated _____

Recommended Off-Site Emergency Protective Actions _____

Off-Site Support Requested and Type _____

Prognosis For Termination Or Worsening _____

Prepared By _____ SS/OSEC _____

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INITIAL OFF-SITE NOTIFICATION LIST

Event Classification: Unusual Event _____
Alert _____
Site Emergency _____
General Emergency _____

	<u>Event Notification Initials/Time</u>	<u>Event Closed-Out Or Upgraded Initials/Time</u>
Berrien County Sheriff's Department REQUEST CALL BACK VERIFICATION	_____	_____
Michigan State Police, Benton Harbor REQUEST CALL BACK VERIFICATION	_____	_____
Assistant V.P. and Chief Nuclear Engineer Alternate: Assistant Chief Nuclear Engineer Alternate: Executive V.P. - Construction and New York Engineering	* _____	_____
Executive Assistant to the I&MECo President Alternate: I&MECo President Alternate: I&MECo V.P.	* _____	_____
NRC Resident Inspector Alternate: Assistant NRC Resident Inspector	_____	_____
NRC Region III/Washington	_____	_____
Energy Information Center Manager Alternate: Public Affairs Director Alternate: Information Services Manager	_____	_____

*Optional For Unusual Event