TURKEY POINT PLANT UNIT 4

1993 INSERVICE INSPECTION REPORT

Executive Summary

The inservice inspection examinations performed during this outage and the cumulative total of exams meet the requirements of ASME Section XI. No unacceptable conditions or reportable indications were found.

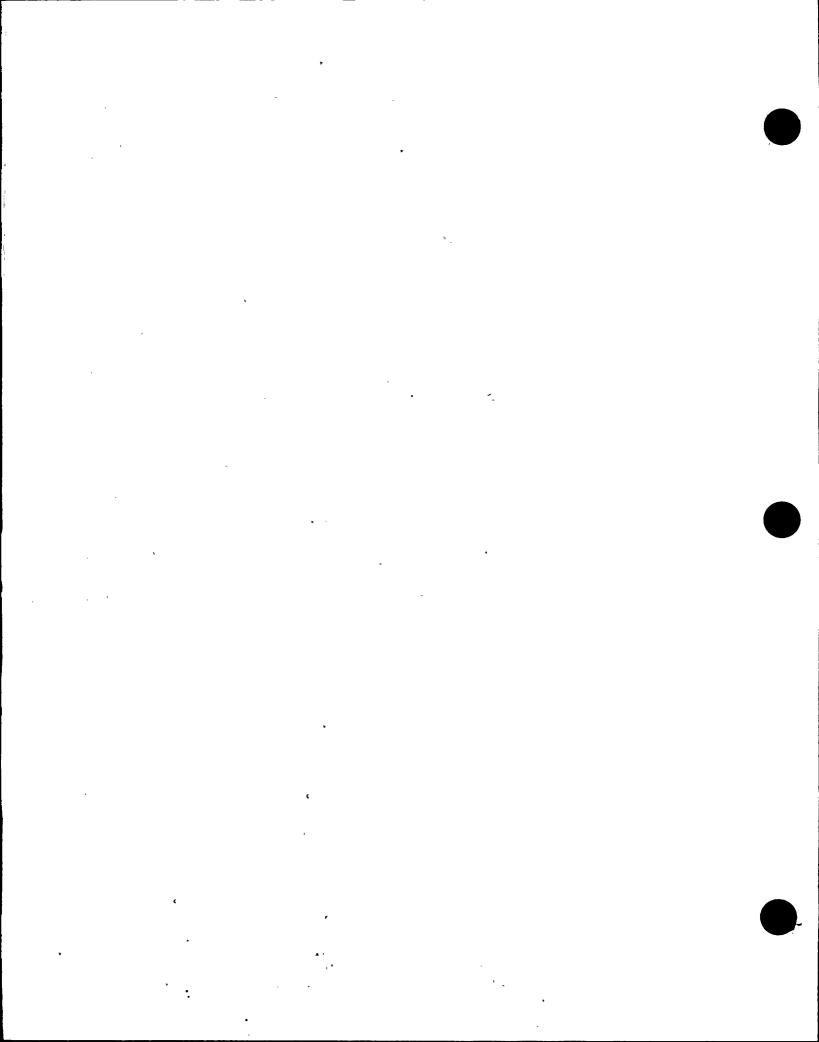
100% of the A, B, and C steam generator tubes were eddy current tested. No tubes were plugged during this outage.

The NIS-2 forms discuss the repairs and replacements which took place during the 1993 refueling/maintenance outage.

Visual examination and functional testing of snubbers was completed in accordance with ASME Section XI and Technical Specifications. Visual examinations did not reveal any failures. There were three snubber failures in the functional test sample, and no failures in the expanded samples.

The inservice inspection summary tables detail the examinations performed during the second outage of the third period of the second interval.

Selected class 2 and 3 piping were hydrostatically tested in accordance with Section XI of the ASME Boiler and Pressure Vessel Code. All leakage found during the testing was from mechanical joints. Each leak was addressed by repair or adjustment under the control of a Plant Work Order.



TURKEY POINT UNIT 4 1993 REFUELING OUTAGE

Form NIS-1 Owners' Data Report for Inservice Inspections

FORM NIS-1 OWNERS' DATA REPORT FOR INSERVICE INSPECTIONS Page 1 of 13

1. Owner: Florida Power and Light Company, P.O. Box 029100, Miami, Florida 33102

2. Plant: Turkey Point Nuclear Power Plant, P.O. Box 3088, Florida City, Florida 33034

3. Plant Unit: 4

4. Owner Certificate of Authorization (if required) N/A_

5. Commercial Service Date : September 7, 1973

6. National Board Number for Unit: N/A

7. Components Inspected:

Component or Appurtenance	manuracturer	Manufacturer or Installer Serial No.	Province	National Board No.
Steam Generator C	Westinghouse	16A-6341-3 FSGT-2993 4E210C	N/A	N-776
Reactor Coolant Pump A	Westinghouse	5-618J713	n/A	n/a
Reactor Coolant Pump B	Westinghouse	6-618J713	n/A	n/A
Regenerative Heat Exchanger	Sentry Equipment	4E200	n/A	n/a ~
Residual Heat Exchanger A	Bechtel	4E206A	n/A	N/A
Excess Letdown Heat Exchanger	Bechtel	4E202	N/A	n/A
Residual Heat Removal Pump A	Bechtel	4P210A	N/A	N/A
Residual Heat Removal Pump B	Bechtel	4P210B	N/A	n/A

.

Owner:

Florida Power and Light Company, P.O. Box 029100, Hiami, Florida 33102 Turkey Point Nuclear Power Plant, P.O. Box 3088, Florida City, Florida 33034 2. Plant:

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 Owner Certificate of Authorization (if required)
 Commercial Service Date: September 7, 1973
 National Board Number for Unit: N/A N/A

			1	
Component or Appurtenance	Manufacturer or Installer	Manufacturer or Installer Serial No.	State or Province No.	National Board No.
Reactor Coolant System Piping	Bechtel	n/a	N/A	n/a
4"-RC-1401 4"-RC-1402 4"-RC-1405 4"-RC-1406 12"-RC-1401 27.5"-RCS-1406 27.5"-RCS-1407 27.5"-RCS-1409	•			
Residual Heat Removal Piping	Bechtel	n/A	N/A	N/A
6"-SI-2402 6"-SI-2403 8"-RHR-1401 8"-RHR-1404 8"-SI-2403 8"-SI-2407 8"-SI-2408 10"-SI-1402 10"-RHR-2401 10"-RHR-2402 10"-RHR-2402 10"-RHR-2403 12"-RHR-2402 14"-RHR-2402 14"-RHR-2405 14"-RHR-2405 14"-RHR-2405				

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Florida Power and Light Company, P.O. Box 029100, Miami, Florida 33102 Turkey Point Nuclear Power Plant, P.O. Box 3088, Florida City, Florida 33034 1. Owner:

1. Owner: Florida Power and Light Company, P.O.
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Component or Appurtenance	Manufacturer or Installer	Manufacturer or Installer Serial No.	State or Province No.	National Board No.
Safety Injection Piping	Bechtel	n/A	N/A	N/A
2"-SI-1401 2"-SI-1402 2"-SI-1406 8"-SI-2401 8"-SI-2405 10"-SI-2401 10"-SI-2402				
Chemical and Volume Control Piping	Bechtel	N/A ·,	N/A	N/A
1.5"-CH-1401 2"-CH-1402 2"-CH-1404 2"-CH-1405 3"-CH-1401 3"-CH-1402 3"-CH-1403		•		
Steam Generator Blowdown Piping 6"-BDA-2401 6"-BDB-2402 6"-BDC-2403	Bechtel	N/A	n/A	N/A
Main Steam Piping 26"-MSA-2401 26"-MSB-2402	Bechtel	n/A	N/A	N/A
Containment Spray Piping 6"-CS-2402 6"-CS-2404	Bechtel	N/A	n/A	N/A

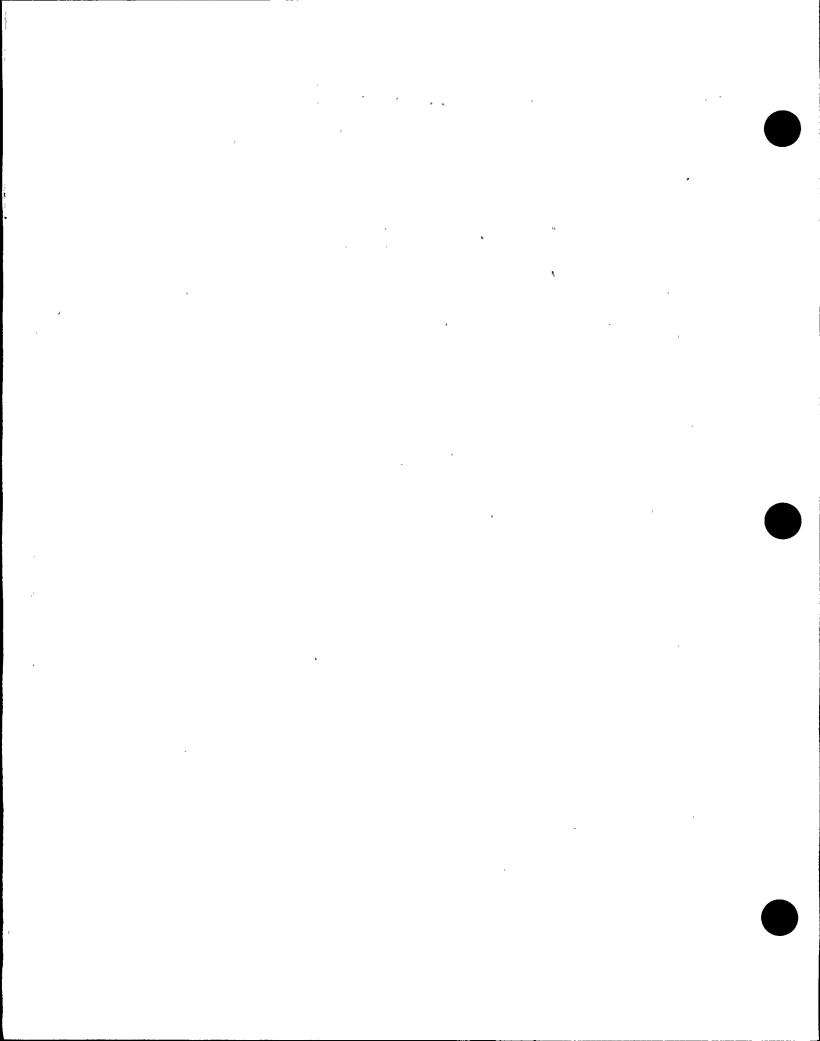
Florida Power and Light Company, P.O. Box 029100, Hiami, Florida 33102 Turkey Point Nuclear Power Plant, P.O. Box 3088, Florida City, Florida 33034

2. Plant: 3. Plant Unit:

4. Owner Certificate of Authorization (if required)
5. Commercial Service Date: September 7, 1973
6. National Board Number for Unit: N/A

N/A

Component or Appurtenance	manuracturer	Manufacturer or Installer Serial No.	State or Province No.	National Board No.
Feedwater Piping	Bechtel	N/A ·	n/A	N/A
6"-FW-2401 6"-FW-2402 6"-FW-2403 14"-FW-2401 14"-FW-2402 14"-FW-2403 18"-FW-2401 18"-FW-2402				
Component Cooling Water Piping	Bechtel	n/a	N/A	n/a
Zone 120 Zone 121 Zone 123 Zone 125 Zone 126 Zone 127 Zone 129 Zone 131 Zone 132 Zone 133 Zone 134 Zone 136 Zone 137 Zone 140 Zone 141 Zone 151 Zone 154	·			
Spent Fuel Pool Cooling Water	Bechtel	N/A	n/a	n/A
Intake Cooling Water	Bechtel	n/a	N/A	n/a



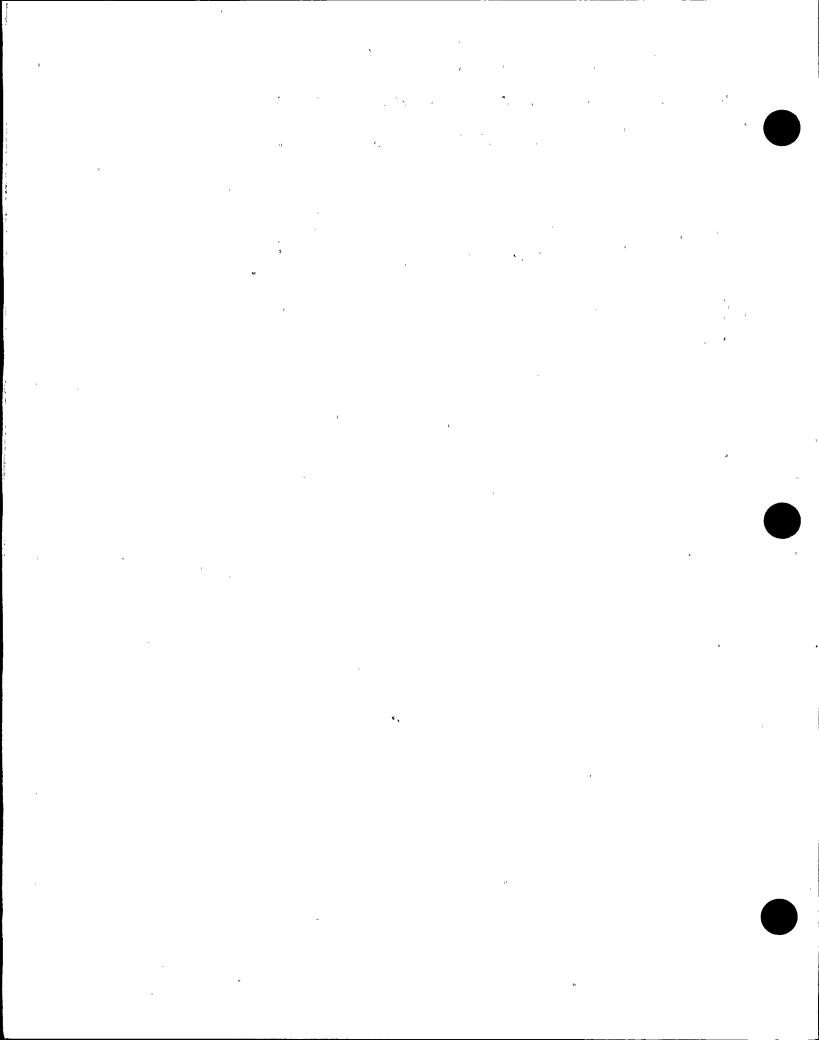
NIS-1 OWNERS DATA REPORT FOR INSERVICE INSPECTIONS

Page 5 of 13

Florida Power and Light Company, P.O. Box 029100, Hiami, Florida 33102 Turkey Point Nuclear Power Plant, P.O. Box 3088, Florida City, Florida 33034 Owner: Plant:

 Plant Unit: 4
 Owner Certificate of Authorization (if required)
 Commercial Service Date: September 7, 1973
 National Board Number for Unit: N/A N/A

	manuracturer or Installer	or Installer	State or Province No.	National Board No.
Auxiliary Feedwater Piping Zone 160	Bechtel	N/A	N/A	N/A
Zone 160 Zone 161 Zone 163				



1. Owner: Florida Power and Light Company, P.O. Box 029100, Miami, Florida 33102

2. Plant: Turkey Point Nuclear Power Plant, P.O. Box 3088, Florida City, Florida 33034

3. Plant Unit: _4

4. Owner Certificate of Authorization (if required) N/A

5. Commercial Service Date : September 7, 1973

6. National Board Number for Unit: N/A

8. Examination Dates: April 11, 1993 to June 2, 1993

9. Inspection Interval: from <u>4/14/84</u> to <u>4/13/94</u>
Inspection Period: from <u>11/25/90</u> to <u>4/13/94</u>

10. Abstract of Examinations and Statement Concerning Status of Work Required for Current Interval:

The Inservice Examination of selected Class 1, 2, and 3 components and piping systems of Florida Power and Light's Turkey Point Unit 4 was performed during the 1993 Refuel Outage. This outage began on April 11, 1993 and ended on June 2, 1993. This was the second outage of the third period of the second interval.

The components and piping systems examined were selected per the Second Ten Year Inspection Plan, which was prepared in accordance with the requirements of the 1980 Edition of ASME Section XI with addenda through Winter 1981.

Eddy Current examinations were conducted by FPL personnel from April, 1993 through May, 1993 on Steam Generators A, B, and C. A total of 9,610 tubes were examined. See the attached NIS-BB report for the summary of examination results.

The augmented Feedwater Nozzle piping examination program was conducted during this outage on all three Feedwater lines. The entire area from the nozzle ramp to a point one pipe diameter out on the far side of the elbow was examined with ultrasonics. Cracking was detected on all three nozzle to reducer welds. The reducers were replaced.

An augmented examination was performed on the upper shell to transition piece weld of Steam Generator A. This was in response to industry concerns on cracking in this weld that has been found at other plants. No reportable indications were found.

Snubber functional testing and visual examinations were conducted in accordance with Turkey Pt. 4 Plant Technical Specifications. Examination and testing services were supplied by Siemens Nuclear Power Services, Inc. during the period of April 21,1993 through May 18, 1993.

System Pressure testing was conducted by plant personnel to applicable Plant Technical Specifications and Procedures.

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- Commercial Service Date: <u>September 7, 1973</u>
 National Board Number for <u>Unit</u>: <u>N/A</u>

System Hydrostatic Testing were performed by plant personnel during the period of April 13, 1993 through May 13, 1993 in accordance with Code requirements and Code Case N-498.

The number of examinations performed during this outage and the cumulative total of exams exceed the requirements of Program B of ASME Section XI.

- Abstract of Conditions Noted 11.
- Abstract of Corrective Measures Recommended and Taken

Non-destructive examinations were performed on selected welds in class 1, 2, and 3 systems. Volumetric examination methods included Eddy Current, Ultrasonic, and Radiography methods. Surface examinations were conducted with Penetrant and Magnetic Particle methods. Visual techniques were utilized on component supports and other areas where required.

Class 1

Steam Generator "C"

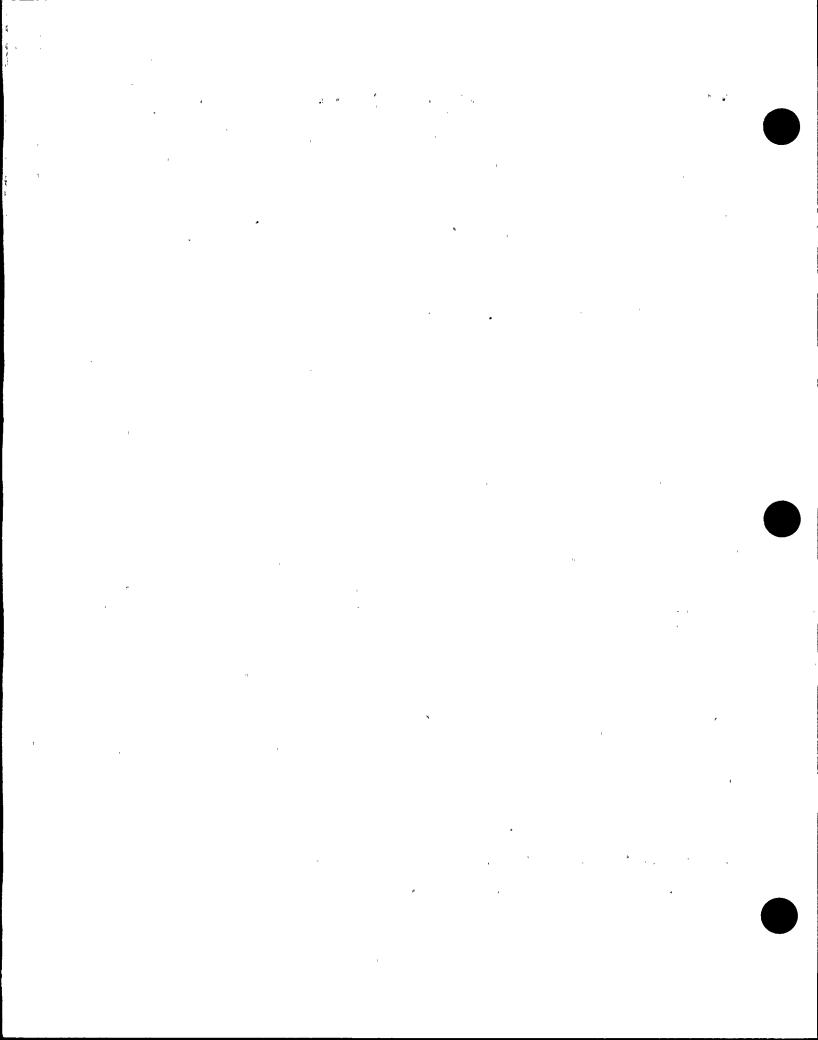
The inlet and outlet manway bolting was examined. Several bolts showed minor corrosion, dents, and other mechanically induced These bolts were replaced.

Regenerative Heat Exchanger

FPL conducted a visual (VT-3) examination on the Regenerative Heat Exchanger at the beginning of the outage, and a VT-2 during the RCS over pressure test. These examinations were conducted in accordance with Relief Request No. 3. No evidence of leakage or boric acid accumulation from the Regenerative Heat Exchanger was noted.

Reactor Coolant Piping

The elbow to nozzle welds on the RPV inlets were examined using surface techniques. Volumetric requirements were satisfied during the previous outage. No recordable indications were noted.



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Commercial Service Date: <u>September 7, 1973</u>
 National Board Number for Unit: <u>N/A</u>

The spring hanger on the pressurizer surge line was replaced and the associated integral attachment was permanently removed. baseline examination was performed. There were no reportable indications.

Flange bolting and component supports on several lines were examined with Visual techniques. No reportable indications were noted. One weld was examined with radiography. There were no reportable indications.

Residual Heat Removal Piping

Several welds were examined using ultrasonic and/or penetrant Normal weld geometry was recorded. No reportable indications were noted.

Component supports were examined with Visual techniques. No reportable conditions were noted.

Safety Injection Piping

Several welds were examined using ultrasonic and/or penetrant techniques. Normal weld geometry was recorded. One penetrant indication was noted. An engineering evaluation determined it to be a surface anomaly, present since the plant went on line. It was removed and the area was re-examined. No other reportable indications were noted.

Component supports were examined with Visual techniques. support tag was missing. The support tag will be replaced. reportable indications were noted.

Chemical and Volume Control Piping

Surface and volumetric examinations were conducted on selected welds. No reportable indications were noted.

Other Class 1 Information

FPL has recently reviewed the plant Piping and Instrumentation Drawings in an effort to incorporate, to the extent practical, the current guidelines on Section XI Code boundaries.

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3. Plant Unit:

N/A

4. Owner Certificate of Authorization (if required)

Commercial Service Date: <u>September 7, 1973</u>
 National Board Number for Unit: <u>N/A</u>

resulted in several areas being reclassified to either higher or lower Quality Groups. The Seal Leakoff from the Reactor Coolant Pumps was reclassified from Class 1 to Class 2. This resulted in the elimination of these lines from volumetric and surface examination requirements due to current Class 2 exemptions.

In accordance with IWB-2420(a), examinations performed during the first interval were repeated to the extent practical. The following examination areas were substituted:

Zone 040 - Weld 2"-SI-1401-3 was substituted for weld 2"-SI-1401-2. A non-removable support was interfering with cleaning of the examination area. Instead of having limitations, the weld next to this one was selected.

Zone 044 - Weld 2"-SI-1406-3 was substituted for weld 2"-SI-1406-2. A non-removable support was interfering with cleaning of the examination area. Instead of having limitations, the weld next to this one was selected.

Zone 047 - Weld 3"-CH-1403-7 was substituted for weld 3"-CH-1403-2. Weld 7 is located in an exclusion area (high radiation) and was not available for examination. A weld down the line was selected.

Class 2

Residual Heat Removal Pumps

During the previous outage on Unit 3, a leak was found in one of the RHR Pump bodies. The flaw was removed and weld repaired. Examinations were performed on the Unit 4 pumps to assure that leaks had not developed in the other unit. No reportable indications were noted.

Residual Heat Removal

Volumetric and/or surface examinations were performed on selected welds. No reportable indications were noted. Visual examinations selected component supports. were conducted on The supports were accepted as-is by discrepancies were noted. engineering evaluation. The drawings will be updated to reflect field conditions. A loose lock nut was noted on one support. was tightened under a Plant Work Order.

NIS-1 OWNERS DATA REPORT FOR INSERVICE INSPECTIONS Page 10 of 13

- Florida Power and Light Company, P.O. Box 029100, Miami, Florida 33102 Turkey Point Nuclear Power Plant, P.O. Box 3088, Florida City, Florida 33034 2. Plant:
- Plant Unit:
- 4. Owner Certificate of Authorization (if required) N/A
- Commercial Service Date: <u>September 7, 1973</u>
 National Board Number for <u>Unit</u>: <u>N/A</u>

Safety Injection

Surface examinations were performed on selected welds. No reportable indications were noted.

Containment Spray

Surface examinations were performed on selected welds. No reportable indications were noted.

Main Steam

Surface examinations were performed on selected welds. No reportable indications were noted.

Steam Generator Blowdown

Volumetric and/or surface examinations were performed on selected Acceptable indications were noted. Visual examinations were conducted on selected component supports. No reportable indications were noted.

Feedwater Bypass

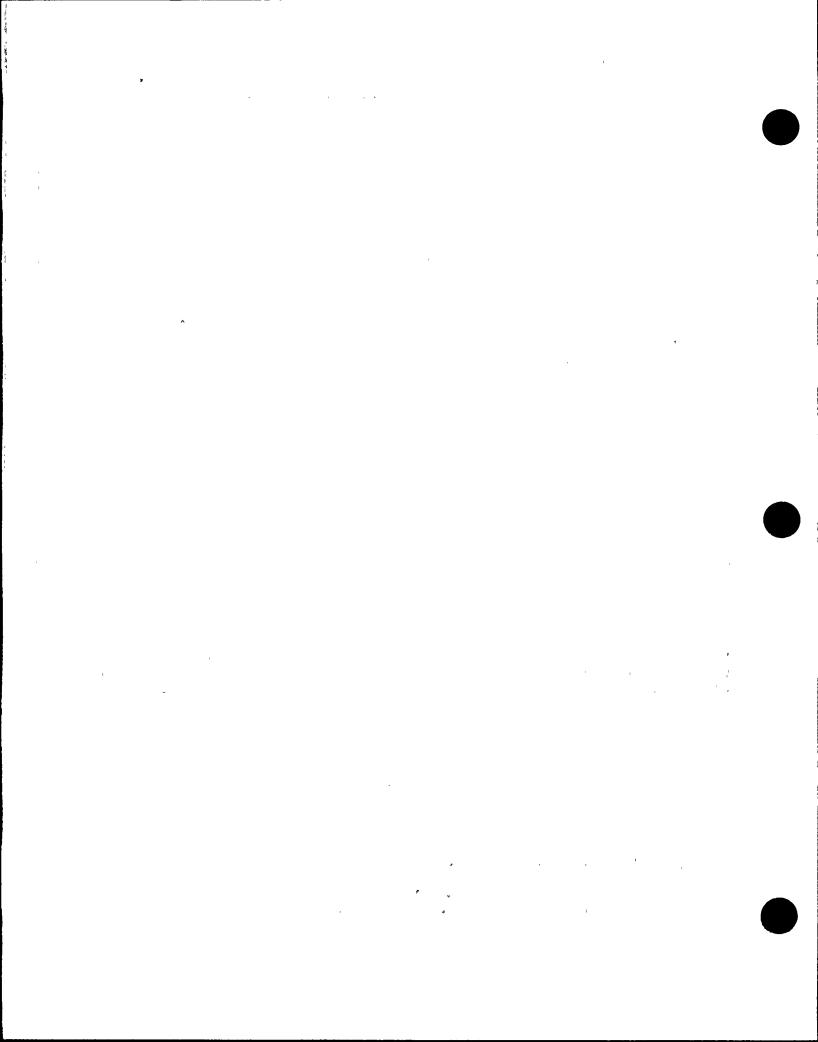
Visual examinations were performed on selected component supports. Chipped concrete was found on one support. It was accepted as-is by engineering evaluation. It will be corrected under a Plant Work Order. No other reportable indications were noted.

Excess Letdown Heat Exchanger

Volumetric examinations were performed on a circumferential weld. A long seam was discovered during this examination. Both welds were examined with no reportable indications.

Residual Heat Removal Heat Exchangers

Surface or volumetric examinations were performed on selected welds. No reportable indications were noted.



NIS-1 OWNERS DATA REPORT FOR INSERVICE INSPECTIONS Page 11 of 13

- Florida Power and Light Company, P.O. Box 029100, Hiami, Florida 33102 Turkey Point Nuclear Power Plant, P.O. Box 3088, Florida City, Florida 33034
- 2. Plant:
- 3. Plant Unit:
- 4. Owner Certificate of Authorization (if required) N/A
- 5. Commercial Service Date: September 7, 1973
 6. National Board Number for Unit: N/A

Class_3

Component Cooling Water

Visual examinations were performed on selected supports and integral attachments. Indications found included paint on spherical bearings, drawings discrepancies, improper spring can settings, and one partially dislodged spherical bearing. These were all accepted by engineering evaluation as performing their intended function. The spherical bearings will be cleaned under a Plant Work Order.

Auxiliary Feedwater

Visual examinations of selected component supports and integral attachments were conducted. Damaged insulation was noted on an adjacent line next to one support. This was accepted as-is by engineering evaluation. The insulation will be modified to provide more clearance for the support.

Augmented Examinations

Reactor Coolant Flywheel Examinations

The 4A Reactor Coolant Pump Motor was replaced during this outage. The removed pump motor will have routine maintenance on it in accordance with Turkey Point procedures. The pump motor placed in service is serial no. 15-76P499. The flywheel of this motor was examined by Surface and Volumetric techniques by Westinghouse in their Pittsburgh facilities in accordance with Reg. Guide 1.14. No indications were noted.

The flywheel on Reactor Coolant Pump 4B was volumetrically examined. No indications were reported.

Main Feedwater System Piping

An augmented Feedwater Nozzle examination program was conducted during this outage on all three Steam Generators. An ultrasonic examination was performed from the nozzle taper to one pipe diameter beyond the elbow to pipe weld. The examinations detected cracking in the reducer side of the reducer to feedwater nozzles on

NIS-1 OWNERS DATA REPORT FOR INSERVICE INSPECTIONS Page 12 of 13

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2. Plant:

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Commercial Service Date: <u>September 7, 1973</u>
 National Board Number for Unit: <u>N/A</u>

The reducers were replaced and baseline all three lines. examinations were performed on the new welds.

Steam Generators

The secondary side of all three Steam Generators were visually examined. No reportable indications were noted.

The "CL" weld on Steam Generator A (transition cone to upper shell) was examined. This examination was performed as part of an ongoing program by FPL to monitor this weld in the Turkey Point Steam Generators. This is due to concern with cracking that has been detected in this weld at other plants. No reportable indications were found.

Report Number	Organization	Description of Services
N/A	FPL	Summary Report of Hydrostatic Testing Program Turkey Point Unit No. 4 Refuel Outage
N/A	FPL	Summary Report Visual Examination and Functional Testing of Snubbers

NIS-1 OWNERS DATA REPORT FOR INSERVICE INSPECTIONS Page 13 of 13

- Florida Power and Light Company, P.O. Box 029100, Miami, Florida 33102 Turkey Point Nuclear Power Plant, P.O. Box 3088, Florida City, Florida 33034
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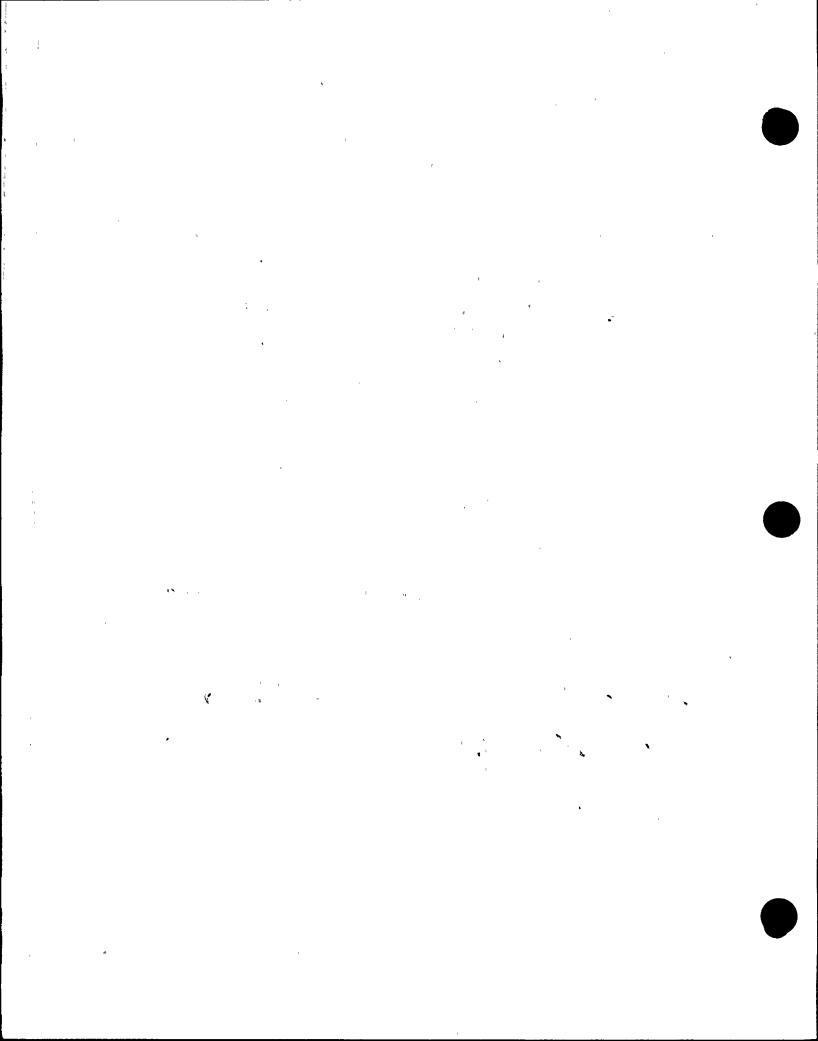
We certify that the statements made in this report are correct and the examinations and corrective measures taken conform to the rules of the ASME Code, Section XI.

Owner : Florida Power and Light Company Certificate of (Authorization No. (if Applicable): N/A Expiration Date: N/A

Certificate of Inservice Inspection

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and/ or the State or Province of Dade County and employed by Arkwright Mutual Insurance Company of Norwood, Massachusetts have inspected the components described in this Owners' Data Report during the period 04/11/93 to 06/02/93, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in the Owners' Data Report in accordance with the requirements of the ASME Code, Section XI. By signing this certificate, neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations, and neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or loss of any kind arising from or connected with this inspection.

National Board, State, Province, and No.



TURKEY POINT UNIT 4 1993 REFUELING OUTAGE

Form NIS-BB Owners' Data Report for Eddy Current Examinations



Page 1 of 1

FORM NIS-BB OWNERS' DATA REPORT FOR EDDY CURRENT EXAMINATION RESULTS As required by the provisions of the ASME CODE RULES

EDDY CURRENT EXAMINATION RESULTS

PLANT: Turkey Point Unit 4

EXAMINATION DATES: APRIL 24, 1993 thru APRIL 28, 1993

STEAM	TOTAL TUBES	1	OTAL IBES	TUBES PLUGGED AS PREVENTIVE	TUBES PLUGGED THIS	TOTAL PLUGGED TUBES
GENERATOR	INSPECTED	20% - 39% 40% - 100%		MAINTENANCE	OUTAGE	IN S/G
4E210A	3198	2	NONE	NONE	NONE	16
4E210B	3206	9	NONE	NONE	NONE	8
4E210C	3205	19	NONE	NONE	NONE	9

LOCATION OF INDICATIONS

(20% - 100%)

STEAM	AVB	SUPPORT L	OCATIONS	TOP OF TU		1	OTAL CATIONS
GENERATOR	BARS	COLD LEG	HOT LEG	20% - 39%	40% TO 100%		
4E210A	NONE	2	1	NONE	NONE	3	NONE
4E210B	3	1	2	1	2	9	NONE
4E210C	4	12	7	NONE	NONE	23	NONE

Remarks:

CERTIFICATION OF RECORD

We certify that the statements in this report are correct and the tubes inspected were tested in accordance with the requirements of Section XI of the ASME Code.

		Floriga Power & Light Ço.
DATE:	6-4-93	PREPARED BY: L. Yllon I L. SIG EDDY CURRENT COORDINATOR
		S/G EDDY CURRENT COORDINATOR
DATE:	6-4-93	BEVIEWED BY: Clan California
		INSPECTIONS SUPERVISOR
DATE:	6-14-93	APPROVED BY: 1/ Charg
		S/G PROGRAM MANAGER

forms Il/nisbbs12 drw

CUMULATIVE EXAMINATION REPORT

PTN-4 OUTAGE: 04/93

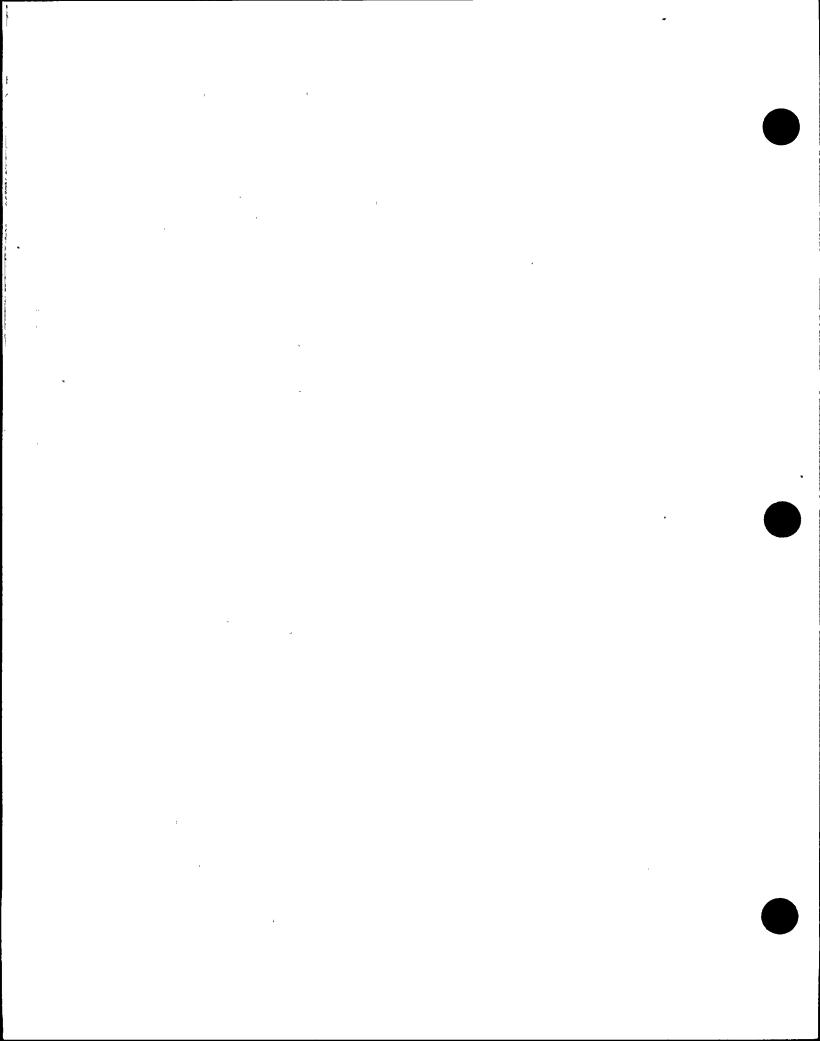
COMPONENT : S/G A

DESCRIPTION : 20% TO 100%

Page: 1 of 1 Date: 6/4/93 Time: 9:35 AM

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Extent	I	1	04/93	1 1	N/A	1
Row Col Leg Req Tst/Note	Reel Probe	Location	Volts Deg Ch	% Diff	Location Vol	ts Deg Ch %
+						
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	AC006-02 A-720-M/UL		.8 146 1		i	iiii
	AH004-02 A-720-M/UL	•	.8 157 1		i	i i i i
·	jii	j	jjj	ii		

Number of RECORDS Selected from Current Outage: 3
Number of TUBES Selected from Current Outage: 2



CUMULATIVE EXAMINATION REPORT PTN-4

OUTAGE : 04/93

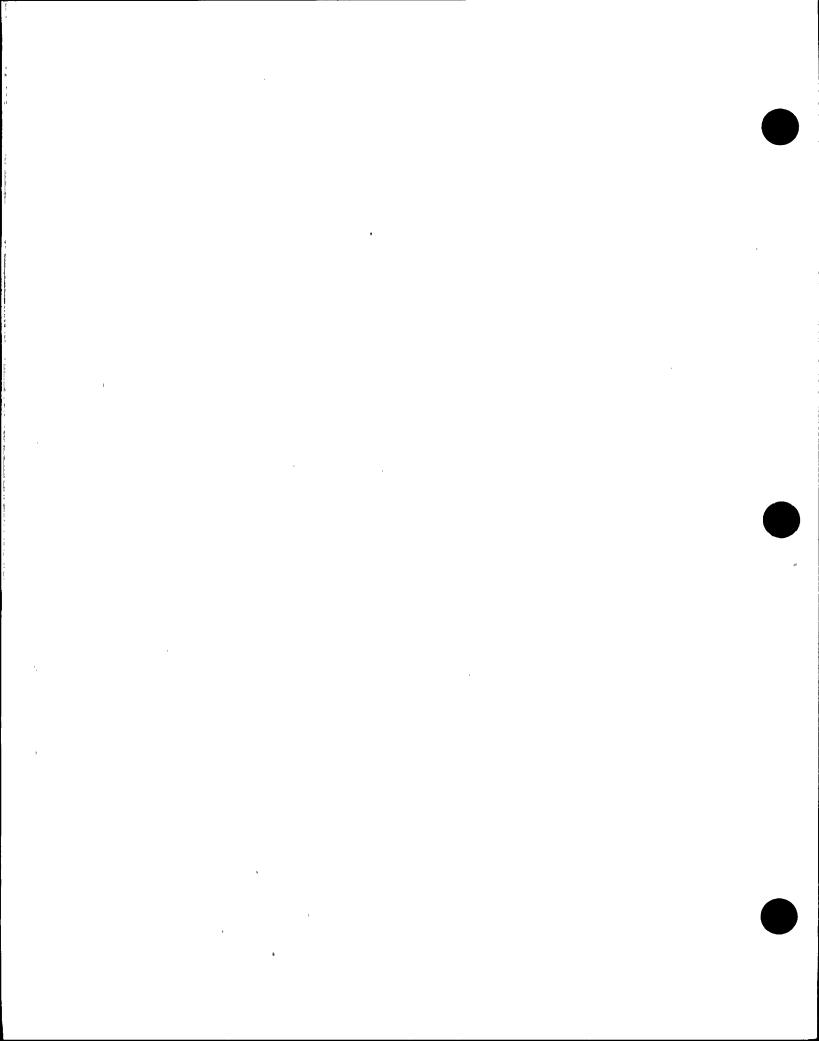
COMPONENT : S/G B

DESCRIPTION : 20% TO 100%

Page: 1 of 1 Date: 6/4/93 Time: 9:35 AM

				Ex	tent						04/93			 		N/A		••••		
			-	•	•	/Note	Reel	Probe	Lo	cation	Volts	Deg	Ch	×	Diff	Location	Vol ts	Deg	Ch	x
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			•	106C	•			A-720-H/ULC	•		•	140 150	•	30 28	! !		! 	1 		!
i	22	37	Н	TEC	TEC			A-720-H/ULC	•	.0	j .4	143	1	32	i i		i	i	i	i
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Number of RECORDS Selected from Current Outage:
Number of TUBES Selected from Current Outage:
9



CUMULATIVE EXAMINATION REPORT PIN-4

OUTAGE : 04/93

COMPONENT : S/G C

DESCRIPTION : 20% TO 100%

Page: 1 of 1 Date: 6/4/93 Time: 9:35 AM

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I				Ext	tent	1		1		04/93			l	1	N/A				- 1
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2	6	37	C	TEH	TEH	CC014-03	A-720-H/ULC	05C	31.5	8.	157	1	20	1	1	i i	1		1
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2	4	56	Н	TEC	TEC PS	CH023-06	A-720-SF/RM	03C	38.7	6.	135	1	25	1				1	1 1
4	2	56	H	TEC	TEC SS	CH022-05	A-720-H/ULC	06C	6	1.2	120	P 1	24	l				1	1 1
-	-	ı	Н	TEC	TEC SS	СН022-05	A-720-H/ULC	05C	32.3	.5	141	1	31		ī		١,		1
	-		H	TEC	TEC SS	CH022-05	A-720-M/ULC	05C	13.2	6.	143	1	30	1			'	1	
3	3	61	C	TEH	TEH SS	CC021-05	A-720-H/ULC	03C	26.1	.3	144	1	33			1	1	1	
2	4	62	H	TEC	TEC PS	сн024-06	A-720-H/ULC	02C	35.3	.6	162	1	21				1	1	
3	7	69	C	TEH		•	A-720-H/ULC	•	.1	.5	150	1	25			1 1	l	۱ ,۱	1
3	2	70	H	TEC	TEC PS	[сноов-оз	A-720-H/ULC	AV1	.0	.5		P 2	52				l		1
10	6	72	H	TEC	TEC	CH002-01	A-720-H/ULC	05H	43.0	.4	147	1	30					1 1	
1 3	o į	72	H	TEC	TEC SC	СН006-02	A-720-M/ULC	04C	21.1	.3	152	1	26			1			
3	7	72	H	TEC	TEC PS	сноов-оз	A-720-M/ULC	05H	45.0	.5	139	1	36			i			
1	-	-	H	TEC	TEC	сноо8-оз	A-720-H/ULC	AV3	2	.5	148	P 2	23			1 1	}	1 1	1
2	3	77	H	TEC		•	A-720-H/ULC	•	50.6	•	148		28			!!		i i	1
3	1 [80	H	TEC		•	A-720-H/ULC	•	2.3	.4	142			•			l		i I
2	7	81	H	TEC	TEC SC	СН007-02	A-720-H/ULC	AV1	.0	.3		P 2	20	1		! !	i	1 1	
2	6	82	H	TEC	TEC SC	CH007-02	A-720-H/ULC	AV1	.0	.3		P 2	20	1			Ì		1
+	-																	JI	+

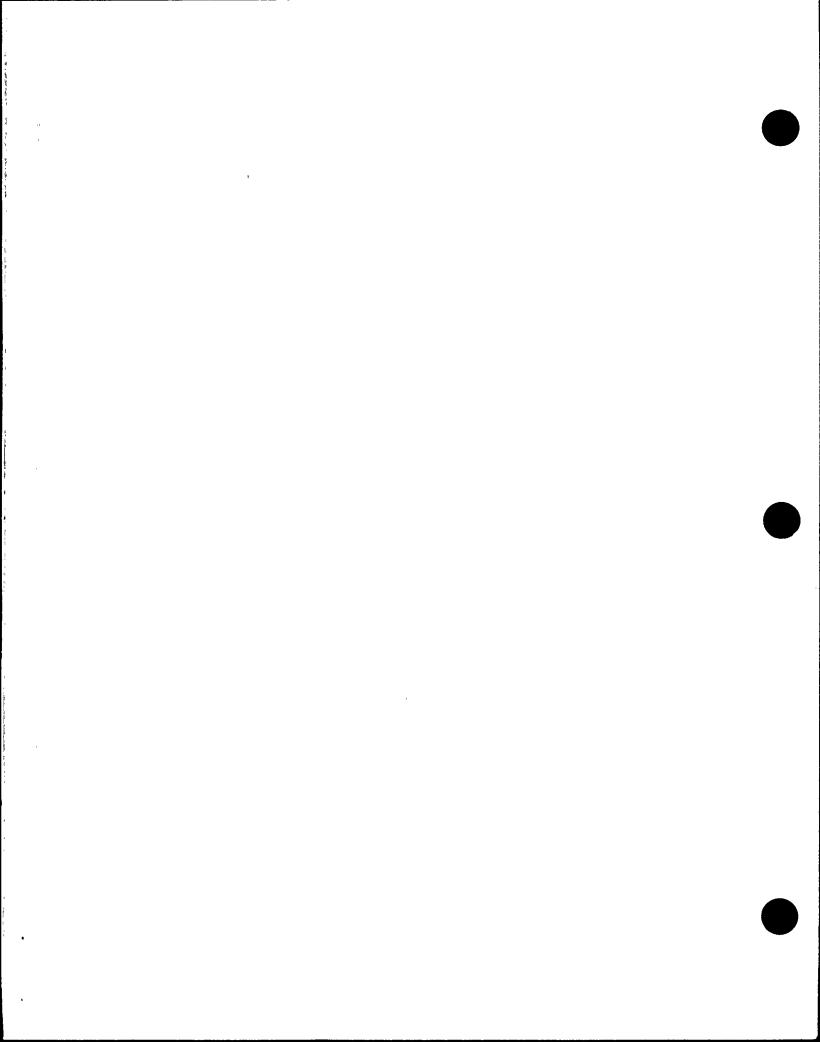
Number of RECORDS Selected from Current Outage: 23
Number of TUBES Selected from Current Outage: 19

CUMMULATIVE DISTRIBUTION SUMMARY TURKEY POINT UNIT # 4 04/93

0 1, 0 0				
COMPONENT : S/G A		Date	:	1 of 1 06/14/93 1:30 PM
Examination Dates: 04/24/93 thru 04/28/93 Total Number of Tubes Inspected: 31				
Total Indications Between 20% and 39% Greater than or equal to 40%:	3	•		
Total Tubes Plugged as Preventive Maint : Total Tubes Plugged	0 16			

Location Of Indications 20% to 100%

Hot Leg						Cold Leg									
	TSH5	to	01H	-2.1	:	0	TSC	5	to	01C	-2.1	:	0		
	01H -2.0	to	06H	+2.0	:	1	01C	-2.0	to	06C	+2.0	:	2		
	06H +2.1	to	AV1	-3.1	:	0	06C	+2.1	to	AV4	-3.1	:	0		
	ΔV/1 -3 0	to	Δ774	-3 0		0									

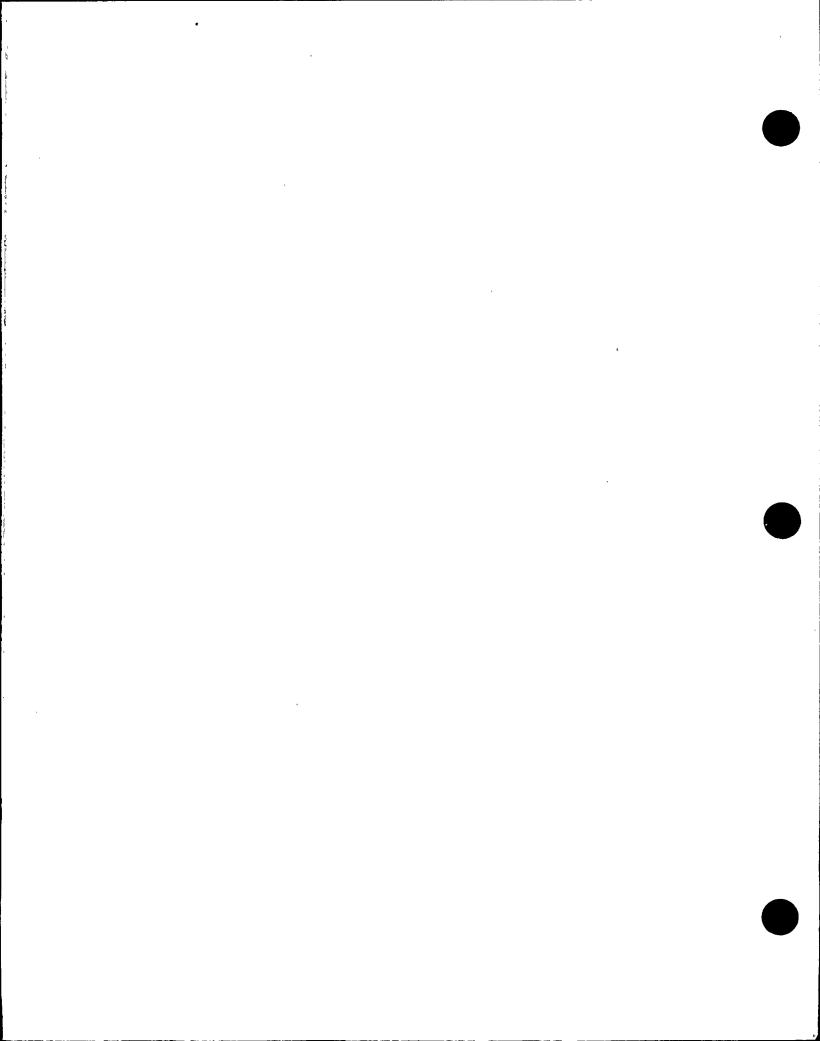


CUMMULATIVE DISTRIBUTION SUMMARY TURKEY POINT UNIT # 4 04/93

•			
COMPONENT : S/G B	Date	:	1 of 1 06/14/93 1:30 PM
Examination Dates: 04/24/93 thru 04/28/93			
Total Number of Tubes Inspected: 3206			
Total Indications			
Between 20% and 39% 9			
Greater than or equal to 40%: 0			
Total Tubes Plugged as Preventive Maint : (0		
	8		

Location Of Indications 20% to 100%

Hot Leg						Cold Leg							
TSH	5	to	01H	-2.1	:	2	TSC	5	to	01C	-2.1	:	1
01H	-2.0	to	06H	+2.0	:	2	01C	-2.0	to	06C	+2.0	:	1
06H	+2.1	to	AV1	-3.1	:	0	06C	+2.1	to	AV4	-3.1	:	1
Δ7/1	-3 0	to	Δ1/4	-3.0	•	2							

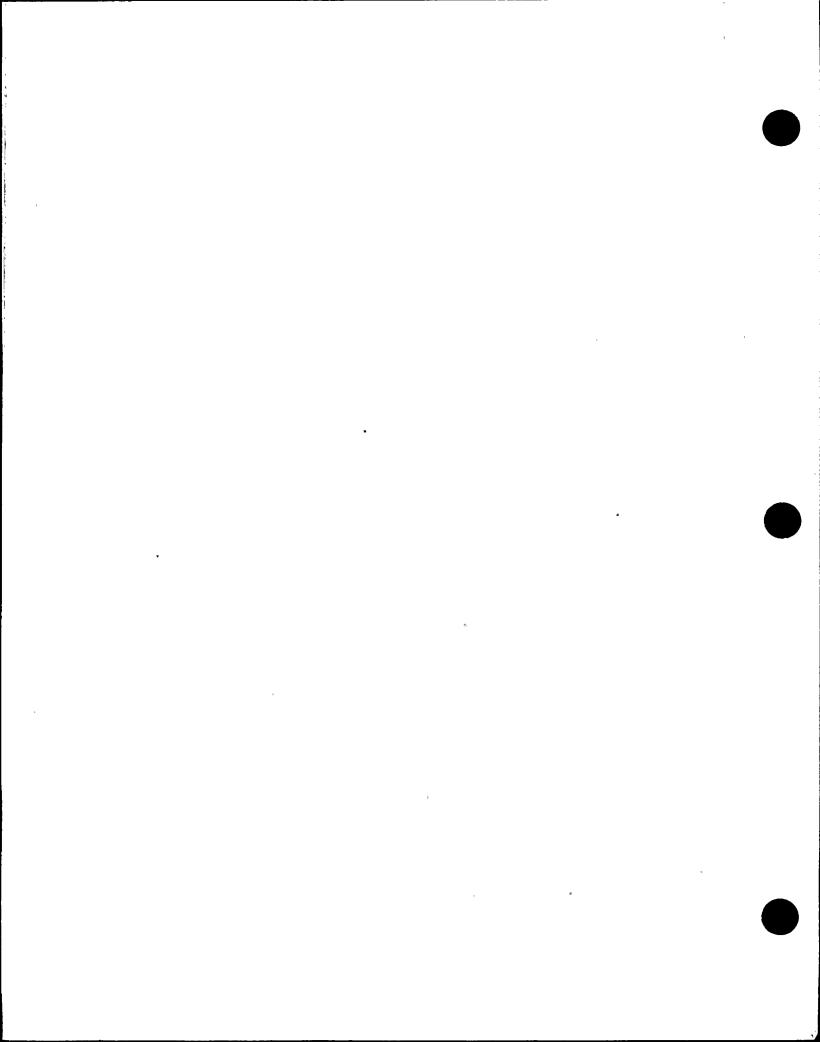


CUMMULATIVE DISTRIBUTION SUMMARY TURKEY POINT UNIT # 4 04/93

04	793		
COMPONENT : S/G C		Date :	1 of 1 06/14/93 1:30 PM
Examination Dates : 04/24/93 thru 0	4/28/93		
Total Number of Tubes Inspected	: 3205		
Total Indications Between 20% and 39% Greater than or equal to 40%			
Total Tubes Plugged as Preventive Mai			

Location Of Indications 20% to 100%

	Hot	Lec	3					Cold	d Le	∍g			
TSH	5	to	01H	-2.1	:	0	TSC	5	to	01C	-2.1	:	0
01H	-2.0	to	06H	+2.0	:	6	01C	-2.0	to	06C	+2.0	:	12
06H	+2.1	to	AV1	-3.1	:	4	06C	+2.1	to	AV4	-3.1	:	0
AV1	-3.0	to	AV4	-3.0	:	1							



TURKEY POINT UNIT 4 1993 REFUELING OUTAGE

Form NIS-2 Owners' Data Report of Repairs and Replacements

As Required by the Provisions of the ASME Code Section XI

FLORU	DA DOWED & LIGHT		Data	JANUA	RY 9, 19	92	*****
1. OwnerFLORII	DA POWER & LIGHT Name		Dale			-	
P.O. B0	OX 029100, MIAMI, FL	. 33152	Sheet		of	2	1
2. PlantTURKE	Y POINT		linit _	4			
	Name		C	WO: 200099,	PC/M: 88	8-541, PS: 90-15	
P.O. BO	OX 3088, FLORIDA CI Address	TY, FL 33034	<u>N</u>	191-0581, N91- Repair Organization F	0734, N	<u>191-0196</u> b No., etc.	
3. Work Performed by	BECHTEL CONST	FRUCTION, INC.		Code Symbol Sta			
·	Name		Author	ization No.——		N/A	
P.O. B	OX 3218, FLORIDA C Address	TY. FL 33034	Expirat	tion Date		N/A	
4. Identification of Sys	tem	MAIN ST	EAM			Quality Group	В
5. (a) Applicable Const	truction Codet n of Section XI Utilized	for Renairs or Re	olacements 1	1980. Edition, V	Add Vinter 198	enda, <u> </u>	_ Code Cas
(o) Applicação Collida		, 10, 110paile e. 110	piacomonio	,			
6. Identification of Con	nponents Repaired or	Replaced and Rep	olacement Co	mponents			
			National	Other	.,	Repaired,	ASME Code
Name of Component	Name of Manufacturer	Manufacturer Serial No.	Board No.	Other Identification	Year Built	Replaced, or Replacement	Stamped I
			100.			or Deplacement	(Yes or No)
GLOBE VALVE	N/A	N/A	N/A	CV-4-1606	Est. 1970	REPLACED	NO
	ANCHOR/DARLING						
GLOBE VALVE	VALVE CO.	DB089-4-4	N/A	CV-4-1606	1990	REPLACEMENT	YES
GLOBE VALVE	N/A	N/A	N/A	CV-4-1607	Est.	REPLACED	NO
OLOGE VILEYE	1,,,,				1970		
GLOBE VALVE	ANCHOR/DARLING	DB089-4-5	N/A	CV-4-1607	1990	REPLACEMENT	YES
	VALVE CO.			-		<u> </u> -	
GLOBE VALVE	N/A	N/A	N/A	CV-4-1608	Est. 1970	REPLACED	МО
	ANGUED O ARUNO				1370		
GLOBE VALVE	ANCHOR/DARLING VALVE CO.	DB089-4-6	N/A	CV-4-1608	1990	REPLACEMENT	YES
	VALVE OO.				Est.		-
GATE VALVE	N/A	N/A	N/A	4-10-001	1970	REPLACED	NO
	REPLACED AT	MOSPHERIC DU	IMP VALVES	CV-4-1606, CV	-4-1607.	CV-4-1608, AND	
7. Description of Work							
£	THE ASSOCIA	TED UPSTREAM	STOP VALV	/ES 4-10-001, 4	-10-002 A	ND 4-10-003.	
	* 1					[] e	SYSTEM
8. Tests Conducted:	Hydrostatic X I	Pneumatic	Nominal Op	erating Pressure	· 🔲	Other X II	N SERVICE
	*	50 / 852 <u> </u>	_•	Took Torre	AMRIF	NT / 500 Degr	I- F
	Pressure163	po / 652 p	osi	Test Temp	VIAIDIC	Deg	ree's F

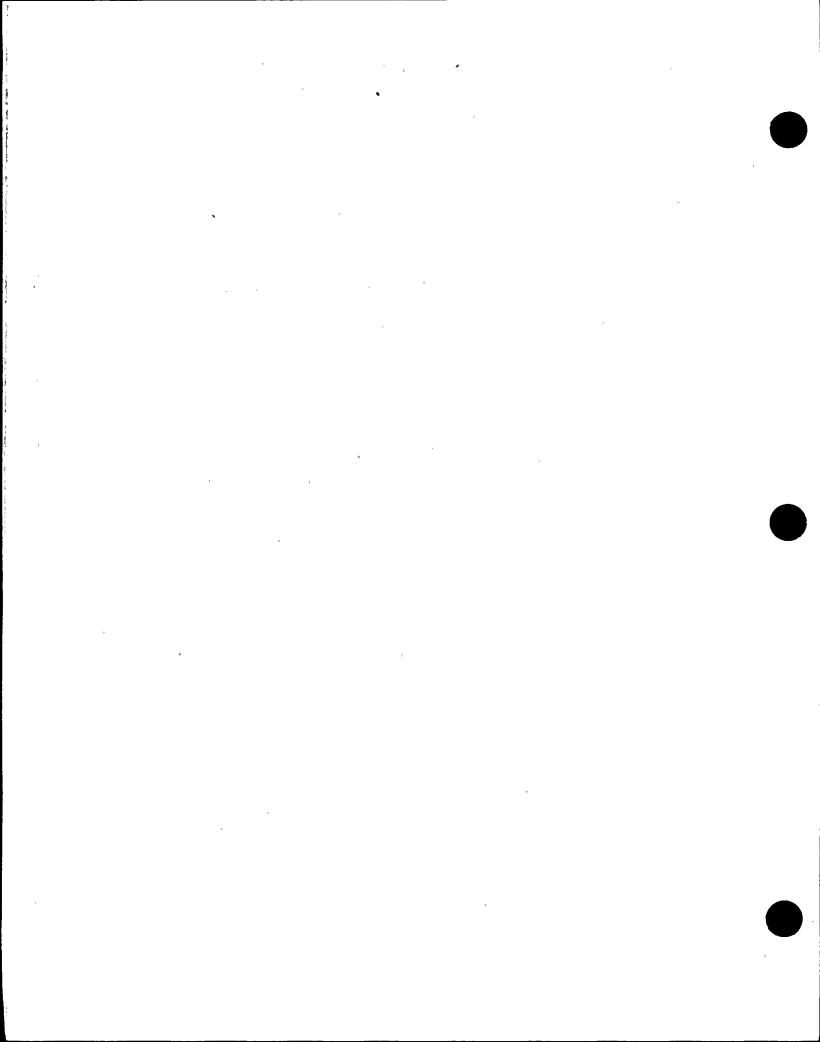
NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

. Remarks _	Examinations performed	by FPL Construction Qu	ality Control p	ersonnel.	
		ole Manufacturer's Data Repor		DI WELD CONTROL	
	ALL WELDING WAS PERF	OHMED IN ACCORDANC	EWITH THE P	PL WELD CONTROL	
	MANUAL AND SITE PROC	EDURES.			***************************************
	INVOKED ASME CODE C	ASE N-416 FOR THE HYD	ROTEST FOLL	OWING THE INSTALLAT	ION.
	HATORIED MONIE GODE OF	NOCTIVITIES OF THE STATE OF THE			
			10,14,105		
	CI	ERTIFICATION OF COM	IPLIANCE		
We certify	that the statements made in t s of the ASME Code, Section	the report are correct and XI.	d this	REPLACEMENT epair or replacement	conforms
				и	
Type Cod	e Symbol Stamp	_	N/A		
1700 000	o cymbor clamp			•	
Certificate	e of Authorization No.	N/A	E	xpiration Date	N/A
Ì	Chai 1.			1,,	-
Signed _	Marchese			Date <i> 6</i>	, 1972
		er's Designee, Title			
L		· · · · · · · · · · · · · · · · · · ·		1	
	CEI	RTIFICATE OF INSERV	ICE INSPECT	ION	
	1				
I, the	undersigned, holding a valid o	commission issued by th	e National Bo	ard of Boiler and Press	
Inspe	ctors and the State or Province				mployed by
hovo	Arkwright Mutual Insurance	coribed in this Owner's	01 Benort during:	the period Ownser	1991
to	November 1991	and s	tate that to the	best of my knowledge	and belief,
	wner has performed examina				
	cordance with the requirement				
	By signing this certificate n	either the inspector nor	his employer n	nakes any warranty, ex	pressed or
	ed, concerning the examinatio				
	er the inspector nor his emplo				operty
dama	ge or a loss of any kind arisin	g from or connected with	n this inspection	on.	
160	hungh All I		900	Factory Mutual Sys	tem
I SHI	Inspector's Signature	Commiss	sions 823	onal Board, State, Province,	and Endorsements
Davie.	MERIL 17 19 97	· ·			
7507		-			

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As Required by the Provisions of the ASME Code Section XI

FI 0	DIDA DOMED A LIGHT			JANUA	RY 9, 19	92	
1. OwnerFLO	RIDA POWER & LIGHT Name						
P.O.	BOX 029100, MIAMI, FL Address	33152	Sheet	2	of	2	
. PlantTURK	KEY POINT Name	 .	Unit -	4 2WO: 200099	PC/M·	88-541, PS: 90-	1544
P.O.	BOX 3088, FLORIDA CI	TY, FL 33034	N	191-0581, N91 lepair Organization F	-0734,	N91-0196	
. Work Performed b	y BECHTEL CONSTI	BUCTION, INC.		ode Symbol Sta			
			Authori	zation No			
	BOX 3218. FLORIDA CI Address			lion Date		N/A	
	rstem					. N/A	
 (a) Applicable Cor (b) Applicable Edit 	struction CodeB tion of Section XI Utilized	for Repairs or Re	9 <u>55 </u>	dition,N/A_ 1980, Edition, \	Add Vinter 19	enda, <u> </u>	- Code
	omponents Repaired or I	•	•				
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
GATE VALVE	ANCHOR/DARLING VALVE CO.	EB089-1-4	N/A	4-10-001	1990	REPLACEMENT	•
GATE VALVE	N/A	N/A	N/A	4-10-002	Est. 1970	REPLACED	NO
GATE VALVE	ANCHOR/DARLING VALVE CO.	EB089-1-5	N/A	4-10-002	1990	REPLACEMENT	YES
GATE VALVE	N/A	N/A	N/A	4-10-003	Est. 1970	REPLACED	NO
GATE VALVE	ANCHOR/DARLING VALVE CO.	EB089-1-6	N/A	4-10-003	1990	REPLACEMENT	YES
	اجرد در در داری الی		.l	-			-
7. Description of Wo	rk ———	-	· · · · · ·	· · · · · · · · · · · · · · · · · · ·	 		
				ii.			



As Required by the Provisions of the ASME Code Section XI

							
1. Owner FLORID	DA POWER & LIGHT		Date	JANUA	RY 14, 19	992	
P.O. BO	OX 029100, MIAMI, FL Address	. 33152	Sheet	1	of	1	
2. PlantTURKE	Y POINT Name		Unit	4 CWO: 300137			
P.O. B0	OX 3088, FLORIDA CI	TY, FL 33034		MPIL: 90-205	M		<u> </u>
	Address		R	epair Organization F	.O. No., Job	No., etc.	-
3. Work Performed by.	BECHTEL CONST	RUCTION, INC.	Туре С	ode Symbol Sta	mp	N/A	
0, 1101111 0110111100 0,	Name					N/A	
0.0.0	0V 0040 ELODIDA O	TD/ EL 00004					
<u> </u>	OX 3218, FLORIDA C Address	11 Y. PL 33034	Expirat	ion Date		19//	
	V						
4. Identification of Syst	tem	RESIDUAL HEA	T REMOVAL	1		Quality Group	В
•							
5. (a) Applicable Const	ruction Code	331.1 1	9 <u>55</u> Ed	ition. N/A	Adde	enda, N/A	_ Code Cas
(h) Applicable Edition	of Section XI Utilized	for Benairs or Be	nlacements 1	980. Edition, V	linter 198	31 Addenda	
(b) Applicable Edition	1 Of Section At Onlized	ioi riepais oi rie	piaconnonio i	200, 20	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	77710001100	
Identification of Con	ponents Repaired or	Replaced and Rep	placement Co	mponents			
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
							No)
BUTTERFLY VALVE	N/A	N/A	N/A	4-887	Est. 1970	REPLACED	NO
GLOBE VALVE	ANCHOR/DARLING VALVE CO.	EA993-1-1	N/A	4-887	1990	REPLACEMENT	NO
RHR PIPING	N/A	N/A	N/A	4-SIH-15	Est. 1970	REPLACEMENT	МО
RHR PIPING	N/A	N/A	N/A	А	Est. 1970	REPLACEMENT	МО
RHR PIPING	N/A	N/A	N/A	SR-633	Est. 1970	REPLACEMENT	МО
RHR PIPING	N/A	N/A	N/A	4-SIH-25	Est. 1970	REPLACEMENT	МО
RHR PIPING	N/A	N/A	N/A	4-SIH-19	Est. 1970	REPLACEMENT	МО
				- DUE - C.		OCATICALACE	AND
7. Description of Work						SEAT LEAKAGE,	
	ASSOCIATED	PIPING. ALSO M T "A" TO MEET D		PPORTS 4-SIH	-15, 4-SI	H-19, 4-SIH-25, SF	1-633
8. Tests Conducted:	Hydrostatic X	Pneumatic	Nominal Ope	erating Pressure	, 🗌	Other	
!	Pressure250	0 / 750 p	osi	Test Temp	AMi	BIENT Deg	ree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

92-006-4

Remarks	Examinations performed by FPL Constru	uction Quality Cor	ntrol personnel.	·
	Applicable Manufacturer's			
	ALL WELDING WAS PERFORMED IN ACC	ORDANCE WITH T	THE FPL WELD CONTROL	
	MANUAL AND SITE PROCEDURES.			
•	CERTIFICATION	OF COMPLIANC	E	
-	that the statements made in the report are coof the ASME Code, Section XI.	orrect and this _	REPLACEMENT repair or replacement	conform
Type Code	Symbol Stamp	N/A		
	N/A		Expiration Date	N/A
			-	· · · · · · · · · · · · · · · · · · ·
Signed	Marchese Owner's Designee,	Tillo	Date	, ₁₉ 9_
	Owner or Owner's Designee,	Tiue	· · · · · · · · · · · · · · · · · · ·	
	CERTIFICATE OF	INSERVICE INSI	PECTION	
1.41		und hu tha Nation	al Board of Poilor and Press	ura Vaccal
	undersigned, holding a valid commission issistors and the State or Province of		Florida and em	
mspec	Arkwright Mutual Insurance Company			
have i	nspected the components described in this (Owner's Report de	uring the period	1991
to _9	March 1991	_, and state that	to the best of my knowledge	and belief,
	vner has performed examinations and taken		res described in this Owner's	Report
in acco	ordance with the requirements of ASME Coo			•
	By signing this certificate neither the inspe			
•	d, concerning the examinations and correcti			
	r the inspector nor his employer shall be liab			perty
damag	ge or a loss of any kind arising from or conne	ectea with this ins	pecuon.	
h	with the		Factory Mutual Syste	em
LAM	Inspector's Signature	Commissions _	8230 (N) (1) National Board, State, Province, ar	nd Endorsements

Bh

As Required by the Provisions of the ASME Code Section XI

							
1. OwnerFLORIC	DA POWER & LIGHT		Date	JANUA	RY 14, 19	992	
P.O. BO	OX 029100, MIAMI, FL	_ 33152	Sheet		of	2	
2. PlantTURKE	Y POINT Name		Unit _	4			
P.O. P.C	OX 3088, FLORIDA C	ITV EL 22024		CWO: 200093 PS: 90-1590,	-		
	Address		R	epair Organization f	2.O. No., Jo	b No., etc.	
3. Work Performed by-	BECHTEL CONST	TRUCTION, INC.		ode Symbol Sta			
	Name		Authori	zation No		N/A	
P.O. B0	OX 3218, FLORIDA C Addross	ITY. FL 33034	Expirat	ion Date	· · · · · · ·	N/A	
4. Identification of Syst	em	REACTOR C	OOLANT			Quality Group	A
5. (a) Applicable Const (b) Applicable Edition	ruction Code n of Section XI Utilized						_ Code Cas
6. Identification of Com	ponents Repaired or	Replaced and Rep	olacement Co	mponents			
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
RCS PIPING LOOP "A"	N/A	N/A	N/A	N/A	Est. 1970	REMOVED	NO
RCS PIPING LOOP "B"	N/A	N/A	N/A	N/A	Est. 1970	REMOVED	МО
RCS PIPING LOOP "C"	N/A	N/A	N/A	N/A	Est. 1970	REMOVED	МО
MECHANICAL SHOCK ARRESTOR	PACIFIC SCIENTIFIC	33630	N/A	4-1023	N/A	REMOVED	YES
MECHANICAL SHOCK ARRESTOR	PACIFIC SCIENTIFIC	29446	N/A	4-1024	N/A	REMOVED	YES
MECHANICAL SHOCK ARRESTOR	PACIFIC SCIENTIFIC	11988	N/A	4-1025	N/A	REMOVED	YES
MECHANICAL SHOCK ARRESTOR	PACIFIC SCIENTIFIC	33629	N/A	4-1026	N/A	REMOVED	YES
7. Description of Work	REMOVED EX	KISTING RESISTA	NCE TEMPE	RATURE DETE	CTOR (F	RTD) BYPASS MA	NIFOLD
	PIPING, VALV	ES, SUPPORTS A	ND MECHA	NICAL SHOCK	ARRESTO	ORS.	
8. Tests Conducted:	Hydrostatic	Pneumatic	Nominal Ope	erating Pressure	•	Other	N/A
F	Pressure	p	osi	Test Temp		Deg	ree's F
MOTE: Compleme		af linta alvataban	مماسيمان	a mau ha uaa	d ====:	dad (1) piza ia 0	1/2 in

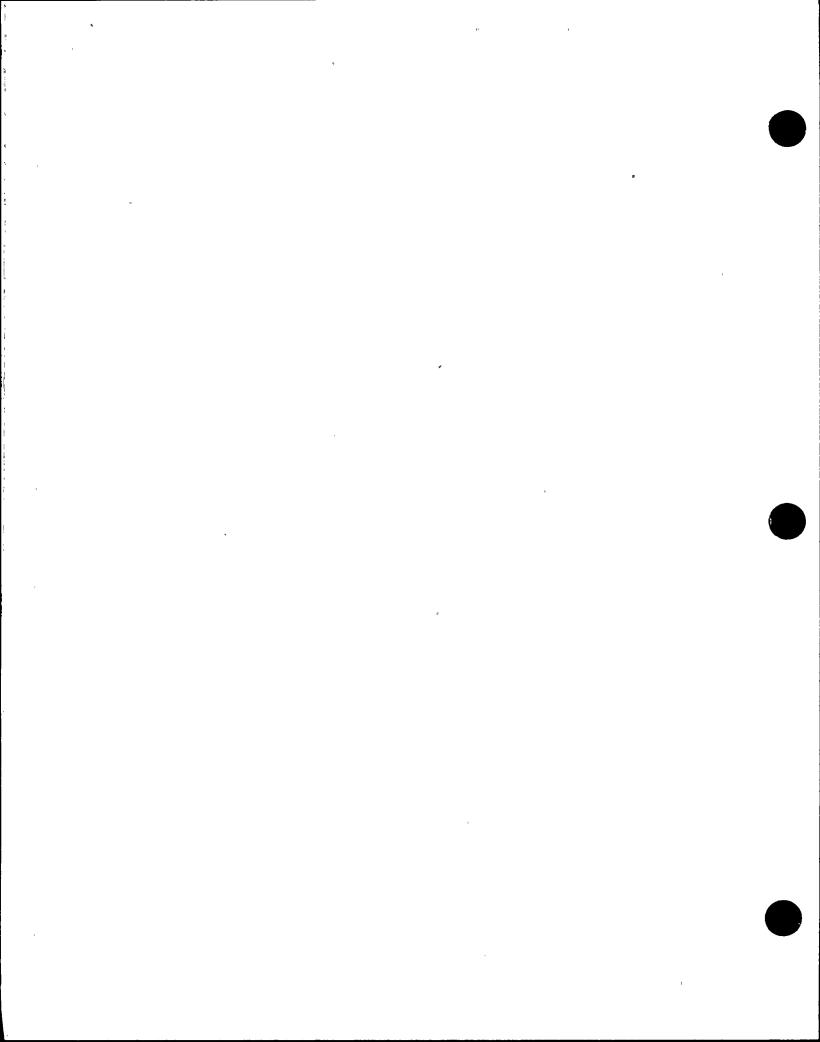
NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

emarks	Examinations performed	I by FPL Construction Quality Co	ontroi personnei.	
	Арриса	ible Manufacturer's Data Reports to be a	macieu	
 			1	.
				-
				
		ERTIFICATION OF COMPLIAN	ICF	
We certify t	that the statements made in	the report are correct and this	REMOVAL	conform
	of the ASME Code, Section		repair or replacement	
		•		
Type Code	Symbol Stamp	N/	Α	
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, o,	·		
Cortificate	of Authorization No	N/A	Expiration Date	N/A
Certificate				
	Can Manhelia	ner's Designee, Title	- 1/16	109
Signed _	Que rung cure	ner's Designee Title	Date	, 19 <u>-</u>
(Owner or Own	let 3 Designee, Title		
•				
	CE	RTIFICATE OF INSERVICE IN	SPECTION	
، مطلا	andornianod holding o volid	commission issued by the Natio	anal Roard of Roiler and Press	sure Vessel
I, lile t	undersigned, nothing a valid	ce of Dade Count	v Florida and e	mployed by
mspec		e Company of		
have i	nonceted the components d	escribed in this Owner's Report	during the period Docem her	1990
to	May 1991	ed ateta has	at to the best of my knowledge	and belief.
		ations and taken corrective meas		
	=	nts of ASME Code, Section XI.	,	о ттор тто
	•		alassa makaa anuurrantu av	proceed or
III acc		neither the inspector nor his emp		
			schoed in this Owners neport.	rumennore.
implie	d, concerning the examinati			
implie neithe	r the inspector nor his emplo	oyer shall be liable in any manne	er for any personal injury or pr	
implie neithe	r the inspector nor his emplo		er for any personal injury or pr	
implie neithe	r the inspector nor his emplo	oyer shall be liable in any manne	er for any personal injury or prospection. Factory Mutual Syst	operty
implie neithe	er the inspector nor his employee or a loss of any kind arisi	oyer shall be liable in any mannering from or connected with this in	er for any personal injury or prospection. Factory Mutual System 8230 (N) (1)	operty
implie neithe	r the inspector nor his emplo	oyer shall be liable in any mannering from or connected with this in	er for any personal injury or prospection. Factory Mutual Systems	operty

BB

As Required by the Provisions of the ASME Code Section XI

1. OwnerFLORI	DA POWER & LIGHT		Date	JANUA	RY 14, 1	992	<u> </u>
	X 029100, MIAMI, FL		Sheet	2	of	2	
2. PlantTURKE	Address POINT		Unit _	4 WO: 200093,		,	
	Name OX 3088, FLORIDA C	ITY, FL 33034	P	S: 90-1590, N	MPIL: 90	-255M	
3. Work Performed by	Address RECHTEL CONST	BUCTION, INC.		epair Organization Foods Symbol Sta	_		
	Mania		Authoria	zation No	· · · · · · · · · · · · · · · · · · ·	N/A	
	DX 3218, FLORIDA C Address		•	ion Date		N/A	
4. Identification of Syste							
(a) Applicable Constr (b) Applicable Edition	ruction Code	B31.1 1 d for Repairs or Re	9 <u>55</u> Ed placements 1	ition, N/A 1980, Edition, V	Add Vinter 19	enda, <u>N/A</u> 81 Addenda	- Code Cas
6. Identification of Com	ponents Repaired or	Replaced and Rep	olacement Co	mponents			
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
MECHANICAL SHOCK ARRESTOR	PACIFIC SCIENTIFIC	16726	N/A	4-1027	N/A	REMOVED	YES
MECHANICAL SHOCK ARRESTOR	PACIFIC SCIENTIFIC	35899	N/A	4-1028	N/A	REMOVED	YES
MECHANICAL SHOCK ARRESTOR	PACIFIC SCIENTIFIC	29447	N/A	4-1029	N/A	REMOVED	YES
MECHANICAL SHOCK ARRESTOR	PACIFIC SCIENTIFIC	29582	N/A	4-1030	N/A	REMOVED	YES
MECHANICAL SHOCK ARRESTOR	PACIFIC SCIENTIFIC	11990	N/A	4-1031	N/A	REMOVED	YES
				<u> </u>			
7. Description of Work							
• *							
· · · · · · · · · · · · · · · · · · ·							



					بح		
1. Owner FLO	RIDA POWER & LIG	HT	_ 1	Date January 14	, 199 x	rir	
P.0.	Name . BOX 029100, MIA	MI, FL 33102	9	Sheet 1 of	1		
THE	Address						
2. Plont	KEY POINT			Unit <u>4</u>			
P.0	BOX 3088, FLORI	DA CITY, FL 330	34			M# 87-225	
3 Work Parform	ed by FLORIDA P	OWER & LIGHT	,	•			
	Name			Type Code Symbol Sto Authorization No.			·
P.0	BOX 3088, FLORI	DA CITY, FL 330		Expiration Date			
4. Identification	of System	Feedwater	·			Quality Gr	oup B
5. (a) Applicable	Construction Code	ANSI B31.1	19 55 E	dition, N/A A	ddenda.	N/A Cod	de Case
(b) Applicable	Edition of Section	XI Utilized for Re	pairs or	Replacements 1980,	Edition,		
6. Identification	of Components Rep	aired or Replaced	d and Re	placement Componen	ts	<u></u>	
Name of	Name of	Manufacturer	National	Other	Year	Repaired,	ASME Code
Component	Manufacturer	Serial No.	Board No.	Identification	Built	Replaced, or Replacement	Stamped (Yes or No)
Gate Valve	N/A	N/A	N/A	4-20-706	EST. 1970	Replaced	No
Gate Valve	Henry Vogt	6-215547	N/A	4-20-706	1987	Replacement	No
					 		
,							
,							
	-l		.!	l	1		!
7. Description of	Work Replaced v	alve at tag loca	ation 4-	20-706, due to exc	essive	seat leakage.	
·							
		<u></u> .	_				1
8. Tests Conduc	ted: Hydrostatic	X Pneumatic	Nom	inal Operating Pressu	re	Other	
	Pressure	2000 psi	Test	Temp88_ D	egree's	F	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

92-008-4

procedures.	Applicable Manufacturer's Data Reports to be attached
, , , , , , , , , , , , , , , , , , ,	
	
	CERTIFICATE OF COMPLIANCE
We certify	that the statements made in the report are correct and this replacement conform
	s of the ASME Code, Section XI.
· ·	Symbol Stamp N/A
Type Code	Symbol Stamp N/A
0 1111 - 1	N/A N/A
Certificate	of Authorization No. N/A Expiration Date N/A
Signed	The Mont Soft Services Soft Date 1/22 , 19 52
	Owner or Owner's Designee, Title
	CERTIFICATE OF INSERVICE INSPECTION
, the undersign	ed, holding a valid commission issued by the National Board of Boiler and Pressure Vesse
Inspectors and	the State or Province of Dade County, Florida and employed by
Arkwi	right Mutual Insurance Company of Norwood, MA.
have inspected	the components described in this Owner's Report during the period September 17, 1986
	october 6, 1991 , and state that to the best of my knowledge and belief,
	performed examinations and taken corrective measures described in this Owner's Report
	with the requirements of ASME Code, Section XI.
	·
by signing	this certificate neither the inspector nor his employer makes any warranty, expressed or
	ning the examinations and corrective measures described in this Owners Report. Furthermo
neither the insp	pector nor his employer shall be liable in any manner for any personal injury or property
neither the insp	
neither the insp	pector nor his employer shall be liable in any manner for any personal injury or property

1. OwnerFLOR	RIDA POWER & LIG	нт	{	Date March 2, 1	992		
P.0.	BOX 029100, MIAI	MI, FL 33102	_	Sheet 1 of _	1		
TURI	Address KEY POINT						
2. Plant	Name			Jnit 4	3/54 0.4	074240405	
P.0.	BOX 3088, FLORII	DA CITY, FL 330	34			No., Job No. etc.	
7 World Davidson	d by FLORIDA PO	OWER & LIGHT	-	•		N7./4	
3. Work Performe	Name	ondia w biditi		Type Code Symbol St Authorization No			
P.0.	BOX 3088, FLORII	DA CITY, FL 330	<u>34</u>	Expiration Date			
4 1d-a191-a11-a	Address of System	Intake Co					oup C
							
(b) Applicable	Edition of Section	XI Utilized for Re	pairs or	dition, N/A A Replacements 1980,	Edition,		
6. Identification o	f Components Rep	aired or Replaced	and Re	olacement Componen	ts		
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board `No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Gate Valve	N/A	N/A	N/A	4-50-377	EST. 1970	Replaced	No
Gate Valve	Jenkins	N/A	N/A	4-50-377	1991	Replacement	No
			i				
					-		
	,	ı					
7. Description of	Work Replaced v	alve at tag loca	ation 4-	50-377 due to exce	essive s	seat leakage.	
8. Tests Conduct	•			inal Operating Pressu		Other	
	Pressure	6 psi	Test	Temp. 78 [egree's	۲	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form. 92-009-4

Mechanical connection, No welding performed.

9. Remarks_

Applicable Mandiactar a 3 atta Reparts to 55 attained
CERTIFICATE OF COMPLIANCE
We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
Type Code Symbol StampN/A
Certificate of Authorization NoN/A Expiration DateN/A
Certificate of Authorization No.
Signed Job Man Man Seph Servin Seph Date 4// 19 52
Owner or Owner's Designee, Title
CERTIFICATE OF INSERVICE INSPECTION
I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel
Inspectors and the State or Province of <u>Dade County, Florida</u> and employed by
Arkwright Mutual Insurance Company of Norwood, MA.
have inspected the components described in this Owner's Report during the period July 12, 1991
to February 27, 1992 , and state that to the best of my knowledge and belief,
the Owner has performed examinations and taken corrective measures described in this Owner's Report
in accordance with the requirements of ASME Code, Section XI.
By signing this certificate neither the inspector nor his employer makes any warranty, expressed or
implied, concerning the examinations and corrective measures described in this Owners Report. Furthermor
neither the inspector nor his employer shall be liable in any manner for any personal injury or property
damage or a loss of any kind arising from or connected with the inspection.
Factory Mutual System
Commissions 8230 (N) (I)
Inspector's Signature National Board, State, Province, and Endorsemen
X6dref 1/1972

1. Owner F	LORIDA POWER & LIG	HT		Date	Marc	ch 23,	1992		
P	Name .O. BOX 029100, MIA	MI, FL 33102		Sheet_	1	of _	1		
m	Address		_	_				1	
2. PlantT	URKEY POINT		_	Unit .		4			
P	.o. BOX 3088, FLORII	A CITY, FL 330	34	PWO:				141716	
	Address				Repo	air Organi	zation P.O.	No., Job No. etc.	
3. Work Perfor	med by FLORIDA PO	WER & LIGHT					amp _		
p	.o. Box 3088, FLORII	A CITY, FI. 330	4.4					N/A N/A	
	Address	0111, 12 000		Expirati	on Dat	e	· .	N/A	
4. Identification	n of System	Spent Fu	el Pool (Cooling				Quality Gr	oup C
5 (a) Apolica	ble Construction Code_	ANSI B31.1	10 55 5	dition	N/A	٨	ddonda	N/A Co	da Casa
	ole Edition of Section								
	n of Components Rep							,	301100
		T .	<u> </u>	· · · · · · · · · · · · · · · · · · ·		·	1		ASME
Name of	Name of	Manufacturer	National Board	l	Other		Year	Repaired,	Code Stamped
Component	Manufacturer	Serial No.	No.	lde	entificat	ion	Built	Replaced, or Replacement	(Yes or
		<u> </u>							No)
Butterfly Val	ve Continental	N/A	N/A	4	-820		N/A	Replaced	No
Butterfly Val	ve Posi-Seal	56943-1B	N/A	4.	-820		1991	Replacement	No
					P	*			
м			 			· · · · · · · · · · · · · · · · · · ·	-		
				İ			İ		
··		<u> </u>		-					
	1	a					,		
			^						
			<u> </u>				1		
7. Description	of Work Replaced va	alve at tag loca	tion 4-	820 du	e to e	xcessiv	e seat	leakage.	
						 	· · · · · · · · · · · · · · · · · · ·		
	1						,	,	
8. Tests Cond	ucted: Hydrostatic	Pneumatic _	Nom	inal Op	erating	Pressu	re 🔼	Other	
	Pressure	65psi	Test	Temp	79	n	egree's	F	
	, 1 00001 C	γ31	163(. I campe			cyi ce s	•	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 1 lin., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form. 92-010-4

Remarks_	Mechanical connection, No welding performed. Applicable Manufacturer's Data Reports to be attached
	Applicable Manufacturer's Data Reports to be ditached
	
	CERTIFICATE OF COMPLIANCE
	uenla com on t
	ertify that the statements made in the report are correct and this replacement conforms
to th	e rules of the ASME Code, Section XI.
Type	Code Symbol Stamp N/A
.,,,,	
Certi	ficate of Authorization No. N/A Expiration Date N/A
Sign	Owner or Owner's Designee, Title Date 3/36, 19 92
	Owner or Owner's Designee, little
	CERTIFICATE OF INSERVICE INSPECTION
	lersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel
Inspector	s and the State or Province of <u>Dade County, Florida</u> and employed by
	Arkwright Mutual Insurance Company of Norwood, MA.
have insp	
	ected the components described in this Owner's Report during the period November 21, 1991
to	D 1 40 4004
the Owner	December 18, 1991 , and state that to the best of my knowledge and belief,
the Owner	December 18, 1991 , and state that to the best of my knowledge and belief, has performed examinations and taken corrective measures described in this Owner's Report ance with the requirements of ASME Code, Section XI.
the Owner in accord By si	December 18, 1991 , and state that to the best of my knowledge and belief, has performed examinations and taken corrective measures described in this Owner's Report ance with the requirements of ASME Code, Section XI. gning this certificate neither the inspector nor his employer makes any warranty, expressed or
the Owner in accord By si implied, c	December 18, 1991 , and state that to the best of my knowledge and belief, has performed examinations and taken corrective measures described in this Owner's Report ance with the requirements of ASME Code, Section XI. In a state that to the best of my knowledge and belief, and state that to the best of my knowledge and state that to the best of my knowledge and state that to the best of my knowledge and state that to the best of my knowledge and
in accord By si implied, c neither th	December 18, 1991 , and state that to the best of my knowledge and belief, has performed examinations and taken corrective measures described in this Owner's Report ance with the requirements of ASME Code, Section XI. In a state that to the best of my knowledge and belief, and bel
the Owner in accord By si implied, c	December 18, 1991 , and state that to the best of my knowledge and belief, has performed examinations and taken corrective measures described in this Owner's Report ance with the requirements of ASME Code, Section XI. In a state that to the best of my knowledge and belief, and state that to the best of my knowledge and state that to the best of my knowledge and state that to the best of my knowledge and state that to the best of my knowledge and

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Page 1 of 2

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner FLOR	RIDA POWER & LIGH	rr		Date _	March 23,	1992		
P.0.	BOX 029100, MIAM	I, FL 33102		Sheet	1 of	1		
2. PlantTUR	Address KEY POINT		:	Unit _	4			
P.0.	BOX 3088, FLORIDA	A CITY, FL 330	<u>34</u>	PWO:	9057 WA#			
	Address	WDD A LIGITA			Repair Organiz	ation P.O.	No., Job No. etc.	
3. Work Performe	ed by FLORIDA PO	WER & LIGHT			de Symbol Sto			
P.0.	BOX 3088, FLORIDA	A CITY, FL 330			ation No n Date			
4. Identification of	of System	Chemical	and Vol	ume Co	ntrol		Quality Gr	oup B
(b) Applicable	Construction Code_ Edition of Section X of Components Repa	I Utilized for Re	pairs or	Replace	ments 1980,	Edition		
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	(Other Itification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Cylinder Block	Union Pump	N/A	N/A	4P	201A	N/A	Replaced	No
Cylinder Block	Union Pump	MC35800	N/A	4P	201A	1991	Replacement	No
							=	
		•				1		
					<u> </u>			
7. Description of	Work Replaced Cy	linder Block o	n Charg	ing Pun	np 4P201A			
8. Tests Conduct	, .	Pneumatic 2350 psi		-	rating Pressur		Other	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form. 92-011-4

CERTIFICATE OF COMPLIANCE We certify that the statements made in the report are correct and this replacement to the rules of the ASME Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Expiration Date N/A Signed N/A Certificate of Authorization No. N/A Expiration Date N/A Signed N/A CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vess Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period December 20, 199 to December 26, 1991 , and state that to the best of my knowledge and belief the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage, or a loss of any kind crising from or connected with the inspection.		Mechanical connection, No	anufacturer's Data Reports to be atta	ched
We certify that the statements made in the report are correct and this replacement to the rules of the ASME Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Expiration Date N/A Signed Owner or Owner's Designee, Title CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vess Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period December 20, 199 to December 26, 1991, and state that to the best of my knowledge and belief the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property	<u></u> .			
We certify that the statements made in the report are correct and this replacement to the rules of the ASME Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Expiration Date N/A Signed Owner or Owner's Designee, Title CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vess Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period December 20, 199 to December 26, 1991, and state that to the best of my knowledge and belief the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property				
We certify that the statements made in the report are correct and this replacement to the rules of the ASME Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Expiration Date N/A Signed Owner or Owner's Designee, Title CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vess Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period December 20, 199 to December 26, 1991, and state that to the best of my knowledge and belief the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property				
We certify that the statements made in the report are correct and this replacement to the rules of the ASME Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Expiration Date N/A Signed Owner or Owner's Designee, Title CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vess Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period December 20, 199 to December 26, 1991, and state that to the best of my knowledge and belief the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property		•		
Type Code Symbol Stamp		C	CERTIFICATE OF COMPLIANCE	
Certificate of Authorization No			_	and this replacement conforms
CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vess Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. There inspected the components described in this Owner's Report during the period December 20, 199 to December 26, 1991, and state that to the best of my knowledge and belief the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property	Туре	Code Symbol Stamp	N/A	
Inspectors and the State or Province of		o Off Mail 2,	1118erva Sifa	Expiration Date -
Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period December 20, 199 to December 26, 1991, and state that to the best of my knowledge and belief the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property		C	ERTIFICATE OF INSERVICE INSF	PECTIÓN
Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period December 20, 199 to December 26, 1991 , and state that to the best of my knowledge and belief the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property	l, the unde	rsigned, holding a valid comm	ission issued by the Natio	nal Board of Boiler and Pressure Vessel
have inspected the components described in this Owner's Report during the period	Inspectors	and the State or Province of	Dade County, I	Florida and employed by
the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property				
the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property	have inspe	cted the components describe	d in this Owner's Report dur	ing the period December 20, 1991
in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property	to	December 26, 1991	, and state that to	the best of my knowledge and belief,
By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property	the Owner	has performed examinations o	and taken corrective measur	es described in this Owner's Report
implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property	in accorda	nce with the requirements of /	ASME Code, Section XI.	
neither the inspector nor his employer shall be liable in any manner for any personal injury or property	By sig	ning this certificate neither the	e inspector nor his employer	r makes any warranty, expressed or
neither the inspector nor his employer shall be liable in any manner for any personal injury or property	implied, co	oncerning the examinations and	d corrective measures descr	ibed in this Owners Report. Furthermor
·				
		•	Ψ.	
Summer State Commissions Factory Mutual System 8230 (N) (I)		· · · · · · · · · · · · · · · · · · ·		f.

1. Owner FLOR	RIDA POWER & LIGH	TT .		Date	March 24,	1992		
P.0.	BOX 029100, MIAM	I, FL 33102		Sheet	1 of	1		
2. Plant	Address KEY POINT Name BOX 3088, FLORID	A CITY EL 330		Unit	4 1014 WA# !	000724	102752	
	Address	a cirr, FE 330		PHO: 1			No., Job No. etc.	
3. Work Performe	d by FLORIDA PO	WER & LIGHT		Type Code	e Symbol Sto	amo	N/A	
	BOX 3088, FLORIDA	A CITY, FL 330	34	Authoriza	tion No	_		
4. Identification o	Address of System	Reactor C	oolant S	System			Quality Gr	oup A
(b) Applicable	Construction Code_ Edition of Section X f Components Repo	Utilized for Re	pairs or	Replacen	nents 1980,	Edition		
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	j o	ther ification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Pzr.Safety Valve	Crosby	N/A	. N/A	RV-	4-551A	N/A	Replaced	No
Pzr.Safety Valve	Crosby	N/A	N/A	RV-	4-551A	N/A	Replacement	No
•	•					•		F
7. Description of	Work Replaced (8)	Studs and (1	6) Nuts.					
8. Tests Conducte	ed: Hydrostatic	Pneumatic [ating Pressur		Other X	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form. 92-012-4

	Mechanical connection, No welding performed.
	Applicable Manufacturer's Data Reports to be attached
· · · · · · · · · · · · · · · · · · ·	
	CERTIFICATE OF COMPLIANCE
	ertify that the statements made in the report are correct and this replacement conform repair or replacement
Туре	Code Symbol Stamp N/A
Certi	ficate of Authorization NoN/AExpiration DateN/A
	- O. //
Signe	od Owner or Owner's Designee, Title Date 3/21 . 19 52
	7 7 Gwina or Gwina's Designee, Itale
	p.
	CERTIFICATE OF INSERVICE INSPECTION .
, the und	•
	•
nspectors	ersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse
nspectors	ersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.
nspectors	ersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse and the State or Province of <u>Dade County, Florida</u> and employed by Arkwright Mutual Insurance Company of <u>Norwood, MA.</u> ected the components described in this Owner's Report during the period <u>July 24, 1990</u>
nspectors nave inspe	ersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse and the State or Province of
nspectors nave inspe o	ersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse and the State or Province of
nspectors nave inspe o he Owner	and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA ected the components described in this Owner's Report during the period July 24, 1990 , and state that to the best of my knowledge and belief, has performed examinations and taken corrective measures described in this Owner's Report ance with the requirements of ASME Code, Section XI.
nspectors nave inspe o he Owner n accordo	and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA ected the components described in this Owner's Report during the period July 24, 1990 , and state that to the best of my knowledge and belief, has performed examinations and taken corrective measures described in this Owner's Report ance with the requirements of ASME Code, Section XI.
nave inspectors o he Owner n accordo By sig	and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA
nave inspe to he Owner n accordo By sig	and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA ected the components described in this Owner's Report during the period July 24, 1990 , and state that to the best of my knowledge and belief, has performed examinations and taken corrective measures described in this Owner's Report ance with the requirements of ASME Code, Section XI.
nave inspectors nave inspector he Owner n accordo By signature	ersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse and the State or Province of
have inspetto to the Owner in accorda By sig	ersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse and the State or Province of

BB

I. Owner FLOF	RIDA POWER & LIGH	T.		Date _	March 30,	1992		
P.0.	Name BOX 029100, MIAM	I, FL 33102	_	Sheet	1 of	1		
2. Plant TURI	Address KEY POINT			Unit _	4			
	BOX 3088, FLORIDA	A CITY, FL 330	_	-	2270 WA#			
	Address	WED . LIGHT			•		No., Job No. etc.	
3. Work Performe	d by FLORIDA PO	WER & LIGHT			de Symbol S			
P.0.	BOX 3088, FLORIDA	A CITY, FL 330	34	Expiration	ation No on Date		N/A	
4, Identification o	Address of System	Intake Co		-			Quality Gr	oup C
	Construction Code_				N/A	Addenda	N/A Co.	de Cosa
	Edition of Section X							
	of Components Repa							
Name of Component	Name of Manufacturer	Manufacturer Serial No.	Nationa Board No.	i	Other ntification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Gate Valve	Jenkins Valve	N/A	N/A	3-	-50-364	1989	Replaced	Ио
Gate Valve	Jenkins Valve	N/A	N/A	3-	-50-364	1991	Replacement	No
					1			
7. Description of	Work Replaced va	lve at tag loca	ation 3-	50-364	due to exc	essive s	eat leakage.	
								
8. Tests Conduct	ed: Hydrostatic (Pneumatic (ŕ	erating Press 78		Other	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form. 92-013-4

RemarksMe	echanical connection,				
		Manufacturer's Data Repo			
			у		
	<u> </u>				
					F
		CERTIFICATE OF CO	MPLIANCE		
	y that the statements mo les of the ASME Code, So		correct and th	is replacer	nent conform
Type Cod	e Symbol Stamp		N/A	1	
Certificate Signed	e of Authorization No	Int Seurce Sefer	Expiro		N/A 19_ 92
					
1 46 - 1		CERTIFICATE OF INSE			
	ned, holding a valid com				
	the State or Province o				
	vright Mutual Insuranc				
	I the components describ				
	February 24, 1992				
	performed examinations			ribed in this O	vner's Report
n accordance	with the requirements of	ASME Code, Section	XI.		
By signing	this certificate neither t	he inspector nor his	employer makes	any warranty,	expressed or
mplied, concer					
,,	rning the examinations a	nd corrective measu	res described in	this Owners Re	port. Furthermor
	rning the examinations a pector nor his employer				
neither the ins		shall be liable in any	manner for any	personal inju	
neither the ins	pector nor his employer	shall be liable in any rom or connected wi	manner for any th the inspection	personal injunt. Factory Mi 8230 (N) (1	

Hy

As Required by the Provisions of the ASME Code Section XI

1. OwnerFLORI	DA POWER & LIGHT Name		Date	April 29	, 1992		
P.O. B	OX 029100, MIAMI, F	33152	Sheet	1	of	1	
2. PlantTURKE	Y POINT Name		Unit _	4 CWO: 500820	PC/M: 8	39-059	
P.O. B	OX 3088, FLORIDA C	ITY, FL 33034	N	MPIL NO. 92-036 Repair Organization F	5M, N-8	8-0165	
3. Work Performed by		TRUCTION, INC.				o no., etc. N/A	
	Name		Author	ization No		N/A	
P.O. B	OX 3218, FLORIDA C Address	ITY. FL 33034	Expirat	ion Date		N/A	
4. Identification of Sys	tem	RESIDUAL HEA	T REMOVAL			Quality Group	В
5. (a) Applicable Const	truction Code	B31.1 1	9 <u>55</u> Ed	lition, N/A	Add	enda, N/A	Code Ca
(b) Applicable Edition	n of Section XI Utilized	i for Hepairs or He	placements 1	1980, Edition, V	Vinter 198	31 Addenda	
6. Identification of Con	nponents Repaired or	Replaced and Rep	lacement Co	mponents		• 4	
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
PIPING RHR	N/A	N/A	N/A	TB-1	Est. 1970	REPLACEMENT	МО
<u> </u>	ŧ		1				
,	•			v			
		r					
						-	
ı	·						
	DEDLACED III	NIDENTIFIED SUF	DODT WITH	L	TTD 4	l	l
7. Description of Work	NEPLACED OF	VIDENTIFIED SUP	PORT WITH	INEW SUPPOR	11 16-1		
8. Tests Conducted:	Hydrostatic F	Pneumatic	Nominal Ope	erating Pressure		Other	I/A
F	Pressure	р	si 7	Test Temp. —		Degr	ee's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

ฯษmarks	Examinations performed by FPL Construction Quality Control personnel.
•	Applicable Manufacturer's Data Reports to be attached
	ALL WELDING WAS PERFORMED IN ACCORDANCE WITH THE FPL WELD CONTROL
	MANUAL AND SITE PROCEDURES.
	CERTIFICATION OF COMPLIANCE
	that the statements made in the report are correct and this of the ASME Code, Section XI. REPLACEMENT conforms repair or replacement
Type Code	Symbol StampN/A
Certificate Signed	of Authorization No. N/A Expiration Date N/A Sitie const. Stavices MGA. Date 4/30, 19 92 Owner or Owner's Designee, Title
	CERTIFICATE OF INSERVICE INSPECTION
1	tors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA
to CG	,,,
	rner has performed examinations and taken corrective measures described in this Owner's Report ordance with the requirements of ASME Code, Section XI.
	By signing this certificate neither the inspector nor his employer makes any warranty, expressed or
l .	I, concerning the examinations and corrective measures described in this Owners Report. Futhermore,
	the inspector nor his employer shall be liable in any manner for any personal injury or property
damag	e or a loss of any kind arising from or connected with this inspection.
13111	Commissions 8230 Factory Mutual System (N) (1)
Date &	Inspector's Signature National Board, State, Province, and Endorsements (4) 19 92

13/3

1. Owne <u>r</u>	FLO	RIDA POWER & LIGH	-1 τ →	,	Date August 18,	1992		
	P.O.	Name BOX 029100, MIAI	MI, FL 33102		Sheet 1 of	1		
		Address		_				
2. Plant		KEY POINT .			Unit <u>4</u>		-	
	P.O.	BOX 3088, FLORIC	OA CITY, FL 3303	4_	PWO: 2343 WA# 9	205301	257 10	
		Address			Repair Organi	zation P.C). No., Job No. etc.	
3. Work Pe	rform	ed by FLORIDA PO	OWER & LIGHT		Type Code Symbol S	lamp	N/A	
	P.O.	Name BOX 3088, FLORIC	A CITY FL 3303.		Authorization No			
		Address	× 0111, 1E 3303.	*	Expiration Date		N/A	
4. Identific	ation	of System	Intake Coo	ling Wat	er		Quality Gr	oup C
5. (a) Appl	licable	Construction Code	e ANSI B31.1	1955 E	difion, N/A	ddendo	. N/A c	nda Casa
(b) Appl	icable	Edition of Section	XI Utilized for F	Repairs o	rReplacements 1980,	Edition	Winter 1981 Ac	denda
					Replacement Compon			
				r		1	1	ASME
Name o		Name of	Manufacturer	National Board	Oiner	Year	Repaired,	Code Stamped
Compone	ent	Manufacturer	Serial No.	No.	Identification	Built	Replaced, or Replacement	(Yes or
		,				-	·	No)
Gate VIv		Jenkins	R92-0704	N/A	4-50-377	Unk.	Replaced	No
Gate VIv		Jenkins	R92-0412	N/A	4-50-377	Unk.	Replacement	No
	,		¥				·	
Υ						 		Æ
	,					 		
							· · · · · · · · · · · · · · · · · · ·	
7. Descripti	on of	Work Replaced va	live at tag locatio	on 4-50-	-377 due to excessiv	e seat	leakage	
, i bosciipii	011 01			•	***************************************			
				-				
								
8. Tests Co	nduci	ed: Hydrostatic	Pneumatic	Nom	inal Operatingressur	X	Other	₹ -1
		Pressure	6 psi	Test	Temp, 89 " D	egree's	F	•

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

92-015-4

Remarks <u>Mechanical connection no welding</u> Applicable Manufacturer's D	performed. ala Reports to be altached
	2
CERTIFICATE	S OF COMPLIANCE
We certify that the statements made in the rep to the rules of the ASME Code, Section XI.	ort are correct and this <u>replacement</u> conforms repair or replacement
Type Code Symbol Stamp	N/A
Certificate of Authorization No. N/A Signed May S Owner or Owner's Designee, Title	Expiration Date N/A Date 8/17 , 19 93
CERTIFICATE	OF INYERVICE INYPEÇIION
l, the undersigned, holding a valid commission issue	ed by the National Board of Boiler and Pressure Vessel
Inspectors and the State or Province of	
Arkwright Mutual Insurance Company	of Norwood, MA.
have inspected the components described in this Ow	The state of the s
to, ar	nd state that to the best of my knowledge and belief,
the Owner has performed examinations and taken co	orrective measures describeth this Owner's Report
in accordance with the requirements of ASME Code,	Section XI.
By signing this certificate neither the inspector r	nor his employer makes anywarraniy, expressed or
implied, concerning the examinations and corrective	measures described in thisOwners Report. Furthermore
neither the inspector nor his employer shall be liable	in any manner for anypersonal injury or properly
damage or a loss of any kind arising from or conne	1 -
Service Signature	Factory Mutual System 8230 (N) (I) National Board, State, Province, and Endorsement

1. OwnerFLOI	RIDA POWER & LI	CHT	0<	ote	SEP	7 1992	
P:0.	BOX 029100, MIA	MI, FL 33102	SI	neetiof			
2. PlantTUR	KEY POINT		Ur	nit <u> </u>			
P.0.	BOX 3088, FLOR	IDA CITY, FL 330	34 -	pwo 990 Repair Org	1/64 anization P.C	WO 91058	735
	BOX 3088, FLORIDA		Ty	pe Code Symbol	Stamp _	•	
	Address	DA CILL, IB GOO	<u>•</u> Ex	piration Date			
4. Identification of	of System	INTAKE		CING WAT	TER	Quality Gr	oup 👅
(b) Applicable	Construction Code Edition of Section of Components Rep	XI Utilized for Re	pairs or R	eplacements 198	0, Edition		
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
20 INCH SPOOL PIECE	นกระกรก	עאאאטאא	2/2	NONE	עאג.	REPLACED	' 100
20 INCH SPOOL PIECE	SOUTH EASTERN MUNICIPAL	んりんと	2/4	אהסנת	unk,	REPLACEMENT	ನಿಂ
							
					<u> </u>		
				-			
	Work	REPAIR OF	ocs	5800L P1E	cë p	ÍAILEB REQU	1121.26
A REPL	ACEMENT			-			····
8. Tests Conduct	ed: Hydrostatic Pressure	Pneumatic					
NOTE: Supplemen	tal sheets in form	of lists, sketches	, or drawin	ngs may be used	d, provide	d (1) size is 8 1,	/2 in.

X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is

numbered and the number of sheets is recorded at the top of this form.

	MECHANICAL CONNECTION, NO WEZDING PERFORMED Applicable Manufacturer's Data Reports to be attached
•	
•	
	CERTIFICATE OF COMPLIANCE
We cer to the	tify that the statements made in the report are correct and this <u>REPLACEMENT</u> conformation of the ASME Code, Section XI.
Type C	ode Symbol Stamp N/A
Certific — Signed	Mate of Authorization No. N/A Expiration Date N/A Michael & Walni Mar Date 9/30 . 19 92 Owner/or Owner's Designee, Title
	CERTIFICATE OF INSERVICE INSPECTION
	signed, holding a valid commission issued by the National Board of Boiler and Pressure Vesse
	the State or Province of <u>Dade County, Florida</u> and employed by the State or Province of <u>Dade County, Florida</u> and employed by the State or Province of <u>Norwood, MA.</u>
have inspect	ted the components described in this Owner's Report during the period 21 Nov 1991 13 And 1992 , and state that to the best of my knowledge and belief,
he Owner h	as performed examinations and taken corrective measures described in this Owner's Report
n accordan	ce with the requirements of ASME Code, Section XI.
By signi	ing this certificate neither the inspector nor his employer makes any warranty, expressed or
mplied, con	cerning the examinations and corrective measures described in this Owners Report. Furthermore
	inspector nor his employer shall be liable in any, manner for any personal injury or property
neither the i	more to the me of property
	a loss of any kind arising from or connected with the inspection.

· OwnerFLO	ORIDA POWER & LI	GHT	00	ite 10/2	0/92		
P.0). BOX 029100, MI	AMI. FL 33102	Sn	eet { of	t		
2. PlantTU	Address RKEY POINT		Ur	nit	ı		
P.0). BOX 3088, FLOR	IDA CITY. FL 330	<u>34</u> v	109205208 Repor Orgo	5 NC	2 92-0243	
3. Work Perform	ned by FLORIDA	POWER & LIGHT		pe Code Symbol	Stamp <u>J</u>	J/A	
P.C). BOX 3088, FLOR	IDA CITY, FL 330		ithorization No piration Date			
4 Identification	of System Rus	Ζ				Quality Gro	us (B
(b) Applicable	e Construction Code Edition of Section of Components Re	XI Utilized for Re	_ 19 55 Edi epairs or R	eplacements 198	0. Edition		
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired. Replaced. or Replacement	ASME Code Stamped (Yes or No)
RIRPUMPHA	INCERSOLL RAND	0967 - 67	NA	12/4	EST. 1970	REPAIRED	NO
		,					
						,	
							, ,
ı							
7, Description o	of Work REPAIR	ed by Me	LDING			·	
8. Tests Condu		c Pneumatic		al Operating Pres		Other S	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is $8 \, 1/2$ in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9 Remarks ALL WELDING WAS PERFORMED Applicable Manufacturer's Data Report	IN ACCORDANCE WITH THE FOL
WELD CONTROL MANUAL AND DIT	
HUDOSTATIC TEST # 04-RHZ-5025	•
* RIMP BUILT TO OWNERS DESIGN	J SPECIFICATIONS
CERTIFICATE OF CO	MPLIANCE
We certify that the statements made in the report or to the rules of the ASME Code, Section XI.	e correct and this REPAIR conforms
Type Code Symbol Stamp	N/A
Signed War or Owner's Designee, Title	Expiration Date
CERTIFICATE OF INSI	ERVICE INSPECTION
I, the undersigned, holding a valid commission issued by t	ne National Board of Boiler and Pressure Vessel
inspectors and the State or Province of	County, Florida and employed by
Arkwright Mutual Insurance Company	of Norwood, MA.
have inspected the components described in this Owner's	Report during the period OCTOBER 14, 1992
to OCTOBER 19, 1992 . and st	ate that to the best of my knowledge and belief.
the Owner has performed examinations and taken correcti	ive measures described in this Owner's Report
in accordance with the requirements of ASME Code, Section	on XI.
By signing this certificate neither the inspector nor hi	is employer makes any warranty, expressed or
implied, concerning the examinations and corrective meas	sures described in this Owners Report. Furthermore.
neither the inspector nor his employer shall be liable in a	ny manner for any personal injury or property
damage or a loss of any kind arising from or connected	with the inspection.
Busi K. Shu fin	Factory Mutual System 8230 (N) (I)
Inserictor's Signature	National Board, State, Province, and Endorsements

				·		· · · · · · · · · · · · · · · · · · ·	
1. Owner FLO	RIDA POWER & LIGH	iT		Date May 7, 1993	3		
P.0	Name . BOX 029100, MIA1	MI, FL 33102		Sheet <u>1</u> of	1		
THR	Address KEY POINT			 _			
Z. Flani	Name		_	Jnit4	.		
P.0	BOX 3088, FLORIC	OA CITY, FL 33034	1	W0# 920348		0# 5461	
3. Work Perform	had had FLORIDA PO	OWER & LIGHT		•			
	Name			Type Code Symbol St Authorization No			
P.0	BOX 3088, FLORID	A CITY, FL 33034	7	Expiration Date		11 / 1	
4. Identification	of System	Spent Fuel	Pool Co	oling	·-·	Quality Gr	oup C
5. (a) Applicable	e Construction Cod	e ANSI 831.1	19 55 E	dition. N/A A	ddenda	, N/A Co	de Case
(b) Applicable	Edition of Section	XI Utilized for R	Repairs o	r Replacements 1980	. Editio		
6. Identification	of Components Re	paired or Replace	ed and R	eplacement Compone	nts		
Name of	Name of	 Manufacturer	National	Other	Year	Repaired,	ASME Code
Component	Manufacturer	Serial No.	Board No.	Identification	Built	Replaced, or Replacement	Stamped (Yes or
	g≇ _s .	<u> </u>				or Replacement	No)
Butterfly Valve	Posi-Seal	56943-18	N/A	4-820	1991	Replaced	No
Butterfly Valve	Posi-Seal	56943-1A	N/A	4-820	1991	Replacement	No
		7					
4							
		····			4		
7. Description of	Work Repl	aced valve at tag	location	4-820 due to exces	sive se	at leakage.	
						······································	
8. Tests Conduc	ted: Hydrostatic	X Pneumatic	Nomi	nal Operating Pressu	re	Other	
	Pressure	168 psi	Tact	Temp. 76.6 D	earee's	: F	
		P31	1 9 3 1		-91 00 3	•	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-001-4

. Remarks_	
	Applicable Manufacturer's Data Reports to be attached
	used to meet pressure test requirements
-·	
	CERTIFICATE OF COMPLIANCE
	ertify that the statements made in the report are correct and this <u>replacement</u> conforms e rules of the ASME Code, Section XI.
Туре	Code Symbol StampN/A
Certif Signe	icate of Authorization No. N/A Expiration Date N/A Owner or Owner's Designee, Title
	CERTIFICATE OF INSERVICE INSPECTION
	ersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel
	and the State or Province of <u>Dade County, Florida</u> and employed by
	Arkwright Mutual Insurance Company of of Norwood, MA.
have inspe	ected the components described in this Owner's Report during theperiod March 11, 1993
to	April 2, 1993, and state that to the best of my knowledge and belief,
	has performed examinations and taken corrective measures described in this Owner's Report
	ince with the requirements of ASME Code, Section XI.
	ning this certificate neither the inspector nor his employer makes any warranty, expressed or
	oncerning the examinations and corrective measures described in this Owners Report. Furthermore
	inspector nor his employer shall be liable in any manner for anypersonal injury or property
damage of	r a loss of any kind arising from or connected with the inspection.
June	Commissions Factory Mutual Engineering Assoc. NB 8230 (N) (1)
/	Inspector's Signature · National Board, State, Province, and Endorsement

As Required by the Provisions of the ASME Code Section XI

	·						
1. OwnerFLOR	IDA POWER & LIGHT	<u> </u>	Date	April 20,	1993		
P.O. BO	Sheet	1	of	2			
2. PlantTURKE	Address Y POINT	· · · · · · · · · · · · · · · · · · ·	Unit _	4			
	Name DX 3088, FLORIDA C		C1	NO: 300567		91-200	
F.O. BC	Address	111, FC 33034		PIL: 92-141M Repair Organization F	2.O. No., Jo	92050608 b No., etc.	
3. Work Performed by-	BECHTEL CONST Name	RUCTION INC.		ode Symbol Sta			
Authorization No.— P.O. BOX 3218 FLORIDA CITY, FL 33034 Address Address							
4. Identification of System	emREA	ACTOR COOLANT S	YSTEM				
5. (a) Applicable Const	ruction Code	B31.1 1 d for Repairs or Re	9 <u>55</u> Ed	1980, Edition, V	— Add Vinter 19	enda, <u>N/A</u> 81 Addenda	— Code Cas
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
SUPPORT ON RCS SYSTEM	NA .	на	IVA	SR-400	EST 1970	REPLACEMENT	но
	,						
				•			
				<i>y</i> '			
			,				
			d				
7. Description of Work	REPLACED	SPRING CAN SUI	PPORT MARK	#SR-400 I/A/I	H PC/H	91-200	1
	1 t					•	

Remarks	EXAMINATIONS PERFORMED	BY FPL CONSTRUCTION QUALITY	CONTROL PERSONNEL
_	Appli	cable Manufacturer's Data Reports to be	attached
Applicable Manufacturer's Data Reports to be attached CERTIFICATION OF COMPLIANCE			
CERTIFICATION OF COMPLIANCE We certify that the statements made in the report are correct and this repair or replacement Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Signed CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vess Inspectors and the State or Province of Dade County, Florida and employed it Arkwright Mutual Insurance Company of Norwood, MA have inspected the components described in this Owner's Report during the period 4/13/93 to 4/20/93 and state that to the best of my knowledge and belie the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.			
•			
		CERTIFICATION OF COMPLIAN	VCE
We certify	that the statements made in	n the report are correct and this	
to the rule	s of the ASME Code, Section	on XI.	repair or replacement
	*		
Type Cod	a Symbol Stoma	N/	/A
Type Cou	e Symbol Stamp		
Certificate	of Authorization No.	N/A	Eugination Data N/A
Certificate	O Addionzador No.	1	Expiration Date
	David M	11: 1/4	1/ 27
Signed _	Owner or Ow	yper's Designee Title	Date
	C	EDTIFICATE OF INCEDVICE INC	SOCION
	, Ci	ENTIFICATE OF INSERVICE INS	SPECTION
I, the ι	undersigned, holding a valid	commission issued by the Natio	nal Board of Boiler and Pressure Vessel
have i	nspected the components d	escribed in this Owner's Report o	during the period 4/13/93
			sures described in this Owner's Report
in acco	ordance with the requiremen	nts of ASME Code, Section XI.	
damag	je or a loss of any kind arisi	ng from or connected with this in:	spection.
	"/////	1	CAPTION METHAL CHOTHECOTHE ACC
13/1	mil B. Mas L	Commissions C	FACTORY MUTUAL ENGINEERING ASS (N) (1)
	Inspector's Signature		National Board, State, Province, and Endorsement
يے Date /	4NU/23 19 93	_	

P.O. B	OX 029100, MIAMI, FI	33152	Sheet		of2	:	
2. PlantTURKE	Address		Unit _				
	Name OX 3088, FLORIDA C	ITV EL 32024		: 501016 PI			
	Address		F	lepair Organization (P.O. No., Jo	b No., etc.	 ,
3. Work Performed by-	BECHTEL CONST Name	RUCTION INC.	Type C			N/A N/A	
P.O. B	OX 3218, FLORIDA C	ITY. FL 33034	Expira	tion Date		N/A	
I. Identification of Syst	•	OLANT_SYSTEM_			·		
i. (a) Applicable Const (b) Applicable Editio	truction Code	B31.1 1 d for Repairs or Re	9 <u>55</u> Eo	lition, N/A 1980, Edition, V	Adde	enda, <u>N/A</u> 81 Addenda	- Code
6. Identification of Con	nponents Repaired or	Replaced and Rep	olacement Co	mponents			
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stampe (Yes o No)
SGC4E210C	WESTINGHOUSE	NA	NA .	ITEM # 651B293	EST 1970	REPLACED	NO
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•							
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1					<u> </u>		
,						,	
	DEDIACED E DOT	MART_MAN_WAY_BO	חודכ מש כדר	AM CENEDATOR	MCM	OLD LEG	
. Description of Work	KEPLACED 5 PKI	IMIT PHIL WAT BO	icio un ole	ANT DEHEKATUK	<u> </u>	VLD LEG	

Remarks EXAMINATIONS PERFORMED BY FPL CONSTRUCTION QUALITY CONTROL PERSONNEL Applicable Manufacturer's Data Reports to be attached CERTIFICATION OF COMPLIANCE We certify that the statements made in the report are correct and this REPLACEMENT conformation to the rules of the ASME Code, Section XI. repair or replacement Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Expiration Date N/A Signed Owner or Owner's Designee, Title CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA have inspected the components described in this Owner's Report during the period 4/28/93 to 5/1/93 to 5/1/93 to 5/1/93 to 5/1/93 to Signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and take no corrective measures described in this Owner's Report. Futhermor neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.					
					
	,	CERTIFICATIO	N OF COMPLIAN	ICE	····
			correct and this		conform
				ч	
Type Code	Symbol Stamp	· · · · · · · · · · · · · · · · · · ·	N/.	Α	
($\bigcirc n$			-	N/A (
Signed	Owner o	r Owner's Designee	, Title	Date	, 19 2
· · · · · · · · · · · · · · · · · · ·		CERTIFICATE O	F INSERVICE INS	SPECTION	
I, the un	dersigned, holding a	valid commission is	sued by the Nation	nal Board of Boiler and Press	ure Vessel
Inspecto	ors and the State or F	rovince of	Dade County	, Florida and er	
have ins	Arkwright Mutual Insuspected the compone	rance Company onts described in this	Owner's Report of	Norwood, MA during the period4/28/93	
	5/1/93				
				ures described in this Owner's	s Report
in accor	dance with the requir	ements of ASME Co	ode, Section XI.		
		-		· · · · · · · · · · · · · · · · · · ·	
				•	-
					perty
damage	or a loss of any kind	arising from or conf	nected with this ins	spection.	
Jamago					
131111	inspector's Sign		Commissions _	8230 (N) (1) National Board, State, Province, a.	

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner FLOR	RIDA POWER & LIGH	ıT		Date _	05/03/93			
P.O.	Name BOX 029100, MIA	AI, FL 33102		Sheet	1 of	1		
THE	Address KEY POINT							
Z. Plant	Name			Unit _	4	<u> </u>		
P.O.	BOX 3088, FLORID	A CITY, FL 33034	<u>4</u>	CW0:5			84, CR93-0341	·
3. Work Perform	ed by BECHTEL Co	ONSTRUCTION. IN	c. ·	Tuna Con	de Symbol Si			
	Nam∙				ation No		N/A	
	BOX 3218, FLORIDA	CIII, FL 33034			n Date			
4. Identification	of System	RESIDUAL	HEAT REA	AOVAL			Quality Gr	oup 8
(b) Applicable	Construction Code Edition of Section of Components Rep	XI Utilized for R	Repairs o	rReplace	ments 1980,	Edition		
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	_	ther tification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
MSA	. , N/A	N/A	N/A	MS/	A 4-1016	N/A	Replaced	No
MSA	PSA	N/A	* N/A	MSA	4-1016	N/A	Replacement	No
1								
						4		1
							ı	
7. Description of	Worle REPLACED P	SA-10 TRANSITIO	N TUBE	TO SNUB	BER BOLTS (4 BOLTS	S) ON SNUBBER 4	- 10 16
8. Tests Conduct	ed: Hydrostatic Pressure	Pneumatic			ratingressui N/A D		В	
		p	1	· •••••		. Jg: 00 3		

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this orm.

93-008-4

Remarks <u>Mechanical connection no wel</u> Applicable Manufacti	urer's Dala Reports to be attached
CERIII	FIRATE OF BOMPLIANCE
We certify that the statements made in the to the rules of the ASME Code, Section XI	he report are correct and this <u>replacement</u> confo repair or replacement
Type Code Symbol Stamp	N/A
Certificate of Authorization No. Signed Machel Owner or Owner's Designee.	N/A Expiration Date N/A P- FPL-CSM Date 8/17 . 19 93
I, the undersigned, holding a valid commission	rease of sayervee sayeesson It issued by the National Board of Boiler and Pressure Ve Dade County, Florida and employed b
	of Norwood, MA. his Owner's Report during the period 30 APRIL 93
	, and state that to the best of my knowledge and beli
	sken corrective measures describeth this Owner's Report
in accordance with the requirements of ASME	Code, Section XI.
By signing this certificate neither the insp	ector nor his employer makes anywarranty, expressed or
implied, concerning the examinations and corr	rective measures described in thisOwners Report. Furthern
	e liable in any manner, for anypersonal injury or property
damage or a loss of any kind arising from or	connected with the inspection.
Muli B. Steer Inspector's Signature	Commissions Factory Mutual System 8230 (N) (I) National Board, State, Province, and Endorse

1. OwnerFLOR	IDA POWER & LIGHT	Γ	. Date	5/3/93	3		
P.O. B	OX 029100, MIAMI, FI	L 33152	Sheet	1	of	1	· · · · · · · · · · · · · · · · · · ·
2. PlantTURKE	Y POINT Name		Unit _				
P.O. B	OX 3088, FLORIDA C	ITY, FL 33034	C	WO: 501031 R-93-359 Repair Organization F	W/O:	91058143 91-0279	
3. Work Performed by-		RUCTION INC.		code Symbol Sta			
	OX 3218, FLORIDA C					N/A N/A	
4. Identification of Syst				 -			
5. (a) Applicable Const(b) Applicable Editio6. Identification of Con	n of Section XI Utilized	d for Repairs or Re	placements	1980, Edition, V	— Add Vinter 19	enda, <u>N/A</u> 81 Addenda	— Code C
		I	1	1	 	· · · · · · · · · · · · · · · · · · ·	
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or
RHR PIPING	NA	NA	NA	SR-2	EST 1970	REPLACED	Ho
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n d							
1 - 3		,					
7. Description of Work PER CR-93-359	REPLACED TRANS	SITION TUBE PER	NCR-91-02	79 MODIFIED F	RONT BR	ACKET	
				>			

lemarks			
	Аррі	icable Manulacturer's Data Reports to be	attached
Type Code Symbol Stamp N/A Certificate of Authorization No. Signed N/A Expiration Date N/A Owner or Owner's Designee, Title CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vest			
	5		
	•	CERTIFICATION OF COMPLIA	NCE
We certify tha	t the statements made i	n the report are correct and this	REPLACEMENT conform
to the rules of	he rules of the ASME Code, Section X	on XI.	
		4	
	g.	,	
Type Code Sy	mbol Stamp	N	/A
	•		
Certificate of	Authorization No.	N/A	Expiration DateN/A
	Marchen	a a	<i>-1</i> .
Signed	Hywenese		Date 3/0 4, 19 9
	Owner or Ow	ner's Designee, Title	•
	·	ERTIFICATE OF INSERVICE IN	SPECTION
	,		
		V)	
_		·	
the Owner	has performed examin		
			• .
neither the	inspector nor his emplo	oyer shall be liable in any manne	er for any personal injury or property
damage of	r a loss of any kind arisi	ng from or connected with this in	spection.
bonn	in KKI,		FACTORY MUTUAL ENGINEERING ASSO
1 full	Inspector's Signature	Commissions .	8230 (N) (1)
1.11.			National Board, State, Province, and Endorsements

1. OwnerFLOR	IDA POWER & LIGHT	<u>r</u>	. Date	0	4/30/93	 	
P.O. B0	OX 029100, MIAMI, F	L 33152	Sheet	1	of	2	
2. PlantTURKE			Unit _	4			
P.O. BO	OX 3088, FLORIDA C	STY, FL 33034	930	08781 CWO:	501038	3	
2 Work Porformed by	Address RECHTEL CONS	TRUCTION INC		lepair Organization	-		
3. Work Performed by-	Name	110011011.1110.	• •	ode Symbol Sta zation No.——	-	N/A	
P.O. Bo	OX 3218, FLORIDA O Address ICW SYSTEM	HTY, FL 33034	Expirat	ion Date	·	N/A	-
5. (a) Applicable Const		B31.1 1 d for Repairs or Re	9 <u>55</u> Ed	lition, N/A 1980, Edition,	—— Adde Winter 19	enda, <u>N/A</u> 81 Addenda	— Code Ca
6. Identification of Con	nponents Repaired or	Replaced and Rep	olacement Co	mponents			
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
4-50-350	HENRY PRATT	NA	NA "	NA	NA	REPLACED	ко
4-50-350	HENRY PRATT	7-61465-1	NA	TRITON XR-70	1986	REPLACEMENT	NO
1-½" STUD (3)	NA	NA NA	NA	NA	EST 1970	REPLACED	МО
1-¼" STUD (3)	NA	NA	NA	R92-5338	1993	REPLACEMENT	но
*	· ·						
							-
7. Description of Work	REPLACED EXIST	ING 30" BUTTERF	LY VALVE		<u>-</u>		

-	Applica	ble Manufacturer's Data Reports to be	attached	
ALL VELIDING MAS PERFORMED IN ACCORDANCE WITH FPL VELID COHTROL MANUAL. Applicable Manufacturer's Data Reports to be attached CERTIFICATION OF COMPLIANCE We certify that the statements made in the report are correct and this REPLACEMENT co to the rules of the ASME Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Expiration Date N/A Signed N/A CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vess Inspectors and the State or Province of Dade County, Florida and employed to Arkwright Mutual Insurance Company of Norwood, MA have inspected the components described in this Owner's Report during the period to , and state that to the best of my knowledge and belie the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed o implied, concerning the examinations and corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed o implied, concerning the examinations and corrective measures described in this Owner's Report. Futherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.				
				
			<u> </u>	
	, с	ERTIFICATION OF COMPLIAN	NCE	
We certify	that the statements made in	the report are correct and this	DEDI ACCHENT	
				conform
	, , , , , , , , , , , , , , , , , , , ,		ropan or ropidodinonic	
		,		
Type Code	Symbol Stamp	N/	'A	
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- Cymsor Camp			
Certificate	of Authorization No.	N/A	Expiration Date	N/A
			•	,
Signed	Just // faulo		Date5/21/3	£3 . 19
•	Owner or Own	er's Designee, Title		
		- C(M)	· · · · ·	
	CE	OTIFICATE OF INSERVICE IN	PROTION	
	OEF	THEORIE OF INSERVICE INS	PECTION	
Inspect				nployed by
have in				
		•	- ·	and belief.
the Ow	ner has performed examinat			
				•
				perty
	a or a loss of any kind arising	from or connected with this in:	spection.	
damago	• • • • • • • • • • • • • • • • • • • •			
damage			FACTORY MUTUAL ENGI	NEERING ASS
damage	Inspeciors Signature 1993	Commissions .	8230 FACTORY MUTUAL ENGI 8230 (N) (1) National Board, State, Province, as	

1. Owner FLORIDA POWER & LIGHT			. Date	04/16/93	3		·	
P.O. E	OX 029100, MIAMI, F	L 33152	Sheet	1	of	2		
2. PlantTURK	Address EY POINT		Lloit	4				
	Name SOX 3088, FLORIDA C							
<u> </u>	Address	11 1, PL 33034	93010174 CNO: 501038 Repair Organization P.O., No., Job No., etc.					
3. Work Performed by	BECHTEL CONST	TRUCTION, INC.	Туре С	ode Symbol Sta	.mp	N/A		
						N/A		
P.O. F	BOX 3218, FLORIDA C	SITY. FL 33034	Expirat	tion Date		N/A		
4. Identification of Sys	temICW SYSTEM							
5. (a) Applicable Cons (b) Applicable Editi	struction Codeon of Section XI Utilize	B31.1 1 d for Repairs or Re	eplacements	1980, Edition, \			Code Ca	
6. Identification of Co	mponents Repaired or	Replaced and Rep	placement Co	mponents				
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)	
4-50-340	HENRY PRATT	2463-1R	NA	NA	1970	REPLACED	МО	
4-50-340	HENRY PRATT	S0270-1-1	NA	TRITON XR -70	1992	REPLACEMENT	ко `	
1-¼" STUDS (16)	MA	NA	NA	NA	EST. 1970	REPLACED	NO	
1-½" STUDS (16)	HA	NA NA	NA .	R92-5338	1992	REPLACEMENT	NO	
			<u> </u>					
		<u> </u>						
7. Description of Work	REPLACED I	EXISTING 30° BU	TTERFLY VAI	LYE		,		
		· · · · · · · · · · · · · · · · · · ·						

Remarks	ALL WELDING WAS PERFORM	ED IN ACCORDANCE WITH FPL WE	LD CONTROL MANUAL.	
	Applica	able Manufacturer's Data Reports to be	attached	
	CERTIFICATION OF COMPLIANCE The certify that the statements made in the report are correct and this REPLACEMENT continues of the ASME Code, Section XI. The rules of the ASME Code, Section XI. The rules of the ASME Code, Section XI. The rules of Authorization No. N/A Expiration Date N/A When the rules of Authorization No. N/A S/20/97			
				
	0	CERTIFICATION OF COMPLIA	NCE	
	•		•	
		· · · · · · · · · · · · · · · · · · ·		conforms
to the rule	es of the Asmic Code, Section	1 71.	repair or replacement	
			,	
Tuna Car	da Cumbal Stamp	N	/A	
Type Co	de Symbol Stamp			
Certificat	e of Authorization No.	N/A	Expiration Date	N/A
	Ogga 1		/	
Signed .	flanche	se	Date	<u>93</u> , 19_
	// Owner or Owr	ner's Designee, Title		
	CE	RTIFICATE OF INSERVICE IN	SPECTION	
1 45-	dessioned baldies a solid	and the state of t	and December Deltar and December	V1
	T • T	•		
have	inspected the components de	escribed in this Owner's Report	during the period	
			•	
	•		sures described in this Owner's	s Report
in ac	•	·		•
imali		neither the inspector nor his emp ons and corrective measures de	•	
-	-	oyer shall be liable in any manne	•	
	· · · · · · · · · · · · · · · · · · ·	ng from or connected with this in		perty
	/ / //	4	•	
M	mist Black	Commissions	FACTORY MUTUAL ENGI	NEERING ASSO
	Inspector's Signature	Outilities	National Board, State, Province, a	na Endorseme:
Date	May 21 1993	_		

1. OwnerFLOR	IDA POWER & LIGHT		. Date	05/02/93	3		
P.O. B	Name OX 029100, MIAMI, F	L 33152		1	of	2	
2. PlantTURKE							
P.O. B	Name OX 3088, FLORIDA C	ITY, FL 33034	93	006364 CWC): 5010	38	
3. Work Performed by	Address BECHTEL CONST Name	RUCTION INC.	Туре С	Repair Organization Gode Symbol Sta	3mb	N/A	-
<u>P.O. B</u>	OX 3218, FLORIDA C			zation No tion Date			
4. Identification of Syst		SYSTEM					
5. (a) Applicable Const	truction Code	B31.1 1	9 <u>55</u> Ed	dition, N/A	— Add Winter 19	enda, <u>N/A</u>	— Code C
6. Identification of Con					77 111(0) 13	o i Addelida	
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
1-¼" STUD (3)	NA	' NA	, NA	NA	1970	REPLACED	но
1-¼" STUD (3)	NA	NA	NA	R87-6683	1987	REPLACEMENT	но
1-½" STUD (15)	NA	NA	NA	NA	1970	REPLACED	МО
1-½" STUD (15)	NA	NA	NA	R92-4775	1992	REPLACEMENT	NO
1-½" Bolt (7)	NA	NA	NA	NA	1970	REPLACED	МО
1-¼" BOLT (7)	- NA	NA '	NA	R89-0222	1989	REPLACEMENT	но
1-¼" NUT (1)	NA	NA	NA	NA	1970	REPLACED	КО
1-½" NUT (1)	NA	NA	NA	R93-1208	1993	REPLACEMENT	ю
1-½" NUT (17)	NA '	NA	NA	NA NA	1970	REPLACED	NO
1-½" NUT (17)	на	NA	NA NA	R93-1392	1993	REPLACEMENT	NO
7. Description of Work	REPLACED BOLTI	NG MATERIAL DUI	RING REINST	TALLATION OF	PIPING	IN ICW	
SYSTEM FOR CRANL	THROUGH INSPECTIO	NS.					

		D. ALL MECHANICAL CONNECTION pplicable Manufacturer's Data Reports	
		Spirotoro manaradarar 3 dan 110port	, 10 to the state of
		· · · · · · · · · · · · · · · · · · ·	
			
 		<u>'</u>	
	•	CERTIFICATION OF COMP	PLIANCE
We certify	that the statements mad	e in the report are correct and	thic DEDIACEMENT confo
to the rules	s of the ASME Code, Sec	ction XI.	this REPLACEMENT confo
	, , , , , , , , , , , , , , , , , , , ,	•	
	1		
Type Code	e Symbol Stamp		N/A
		1	
Certificate	of Authorization No	N/A	Expiration Date N/A
	(Mr. 1		
Classed	Marchi	10	5/20/93
Signed _	Owner or (Owner's Designee, Title	Date <u>5/20/93</u> , 19
	0		
			•
		OFFICIOATE OF INCERNIO	E MODEOTION
		CERTIFICATE OF INSERVICE	EINSPECTION
I, the u	undersigned, holding a va	alid commission issued by the t	National Board of Boiler and Pressure Vessel
		vince of Dade C	
	Arkwright Mutual Insura		ofNorwood, MA
	nspected the components		port during the period March 31, 19
have 🏄	1		,
have it	lars 21, 1993	, and state	e that to the best of my knowledge and belief.
to Z	71	, and state	e that to the best of my knowledge and belief, measures described in this Owner's Report
to Z	vner bas performed exam	ninations and taken corrective i	measures described in this Owner's Report
to Z	vner bas performed exam ordance with the requiren	ninations and taken corrective in the state of ASME Code, Section 2	measures described in this Owner's Report XI.
to the Ow	vner bas performed examordance with the requirem By signing this certificat	ninations and taken corrective in nents of ASME Code, Section 2 to neither the inspector nor his	measures described in this Owner's Report XI. s employer makes anywarranty, expressed or
to Zu the Ow in acco	vner bas performed examordance with the requirem By signing this certificated, concerning the examina	ninations and taken corrective in nents of ASME Code, Section 2 te neither the inspector nor his ations and corrective measure	measures described in this Owner's Report XI. employer makes anywarranty, expressed or s described in this Owners Report. Futhermore
to Zu the Ow in acco implied neither	vner has performed exame ordance with the requirent By signing this certificate d, concerning the examinate r the inspector nor his em	ninations and taken corrective in nents of ASME Code, Section 2 te neither the inspector nor his ations and corrective measures apployer shall be liable in any ma	measures described in this Owner's Report XI. s employer makes anywarranty, expressed or s described in this Owners Report. Futhermore anner for any personal injury or property
to Zu the Ow in acco implied neither	vner has performed exame ordance with the requirent By signing this certificate d, concerning the examinate r the inspector nor his em	ninations and taken corrective in nents of ASME Code, Section 2 te neither the inspector nor his ations and corrective measure	measures described in this Owner's Report XI. s employer makes anywarranty, expressed or s described in this Owners Report. Futhermore anner for any personal injury or property
to Zu the Ow in acco implied neither	vner has performed exame ordance with the requirent By signing this certificate d, concerning the examinate r the inspector nor his em	ninations and taken corrective in nents of ASME Code, Section 2 te neither the inspector nor his ations and corrective measures aployer shall be liable in any ma- rising from or connected with the	measures described in this Owner's Report XI. s employer makes anywarranty, expressed or a described in this Owners Report. Futhermore anner for any personal injury or property his inspection.
to Zu the Ow in acco implied neither	vner has performed exame ordance with the requirent By signing this certificate d, concerning the examinate r the inspector nor his em	ninations and taken corrective in the neither the inspector nor his ations and corrective measures aployer shall be liable in any matrising from or connected with the Commission	measures described in this Owner's Report XI. s employer makes anywarranty, expressed or a described in this Owners Report. Futhermore anner for any personal injury or property his inspection.

OA POWER & LIGHT Name	<u> </u>					
		Date	05/04/9	3		
X 029100, MIAMI, FI	33152	Sheet	1	of	1	
POINT		Unit _	4			
X 3088, FLORIDA C	ITY, FL 33034	CWO:	501031, W/O:	930128	56, CR-93-349	
	TRUCTION INC		•		-	
	•	Authori	zation No.		N/A	
Address		Expirat	tion Date	<u>.</u>	N/A	
						
of Section XI Utilize	B31.1 1	9 <u>55</u> Ed	dition, N/A	Add	enda, <u>N/A</u> 81 Addenda	— Code
				**************************************	o i Audeliua	
	1	1				10115
Name of	Manufacturer	National Board	Other	Year	Repaired,	ASME Code Stamped
Manufacturer	Serial No.	No.	Identification	Built	or Replacement	(Yes or No)
NA	NA	NA	3"-CH- 1403 - 7	EST. 1970	REPAIRED	NO
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ETHEN OUT 1	INCAD INDICATIO	א טא הבוש .	7			-
FILLED OUT LA	INCAN INDICATIO	OH WELD				_
			<u> </u>			
	Name X 3088, FLORIDA C Address BECHTEL CONST Name X 3218, FLORIDA C Address SYSTEM 0 Introduction Code — of Section XI Utilizer Conents Repaired or Name of Manufacturer NA	X 3088, FLORIDA CITY, FL 33034 Address BECHTEL CONSTRUCTION INC. Name X 3218, FLORIDA CITY, FL 33034 Address SYSTEM 047, CVCS Inction Code B31.1 1 of Section XI Utilized for Repairs or Reponents Repaired or Replaced and Replaced And Replaced And Replaced And Re	X 3088, FLORIDA CITY, FL 33034 Address BECHTEL CONSTRUCTION INC. Name X 3218, FLORIDA CITY, FL 33034 Address SYSTEM 047, CVCS Inction Code B31.1 19 55 Expirate Address Inction Code System of Repairs or Replacements Incoments Repaired or Replaced and Replacement Coments Repaired or Replaced and Replacement Coments Name of Manufacturer Manufacturer Serial No. NA NA NA NA NA NA NA NA NA N	Name of Manufacturer Serial No. Name of Manufacturer Serial No. NAME NA NA NA NA NA NA NA NA NA NA NA NA NA	X 3088, FLORIDA CITY, FL 33034 Address BECHTEL CONSTRUCTION INC. Name X 3218, FLORIDA CITY, FL 33034 Address M SYSTEM 047, CVCS Address Type Code Symbol Stamp Authorization No. Expiration Date Expiration Date Address Type Code Symbol Stamp Authorization No. Expiration Date Authorization No. Expiration Date Address M SYSTEM 047, CVCS Address M System 047, CVCS Address M System 047, CVCS Manufacturer Manufacturer Serial No. Name of Manufacturer Serial No. NA NA NA NA NA NA NA NA NA N	X 3088, FLORIDA CITY, FL 33034 Address BECHTEL CONSTRUCTION_INC. Name X 3218_FLORIDA CITY, FL 33034 Address X 3218_FLORIDA CITY, FL

Remarks	NO WELDING PERFORMED
	Applicable Manufacturer's Data Reports to be attached
	
· · · · · · · · · · · · · · · · · · ·	
 	
	•
	CERTIFICATION OF COMPLIANCE
	that the statements made in the report are correct and this REPAIR conform
to the rules	of the ASME Code, Section XI. repair or replacement
Type Code	Symbol StampN/A
Certificate	of Authorization No. N/A Expiration Date N/A
	\mathcal{M}_{1}
Signed	Allarelese FPL-CSM Date 5/04/9.3 19
7	Owner or Owner's Designee, Title
$ \cup$	
•	CERTIFICATE OF INSERVICE INSPECTION
t the u	ndersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel
	tors and the State or Province of Dade County, Florida and employed by
<u> </u>	Arkwright Mutual Insurance Company of Norwood, MA
have in	spected the components described in this Owner's Report during the period
to	, and state that to the best of my knowledge and belief,
	ner has performed examinations and taken corrective measures described in this Owner's Report
in acco	rdance with the requirements of ASME Code, Section XI.
	By signing this certificate neither the inspector nor his employer makes anywarranty, expressed or
	, concerning the examinations and corrective measures described in this Owners Report. Futhermore,
	the inspector nor his employer shall be liable in any manner for any personal injury or property
damage	e or a loss of any kind arising from or connected with this inspection.
16.	FACTORY MUTUAL ENGINEERING ASSO
J. J. S. L.	Commissions 8230 (N) (1) National Board, State, Province, and Endorsements
BAL	National Board, State, Province, and Endorsements National Board, State, Province, and Endorsements
· /Date 4	13 / 5

1. OwnerFLOR	IDA POWER & LIGHT	•	. Date	05/03/93	3 '		
P.O. BO	DX 029100, MIAMI, FI	33152	Sheet	1	of	1	
2. PlantTURKE		1	Unit _	4			
P.O. BO	DX 3088, FLORIDA C	ITY, FL 33034	CWO:		9301285	4, CR-93-0324	
3. Work Performed by-		RUCTION INC.		-		No., etc.	
			Authori	ization No.		N/A	
ř	P.O. BOX 3218. FLORIDA CITY, FL 33034 Expiration Date N/A Address SAFETY INJECTION						
5. (a) Applicable Const	ruction Code n of Section XI Utilized	d for Repairs or Re	placements	1980, Edition, W	Adde /inter 198	enda, <u>N/A</u> 31 Addenda	— Code Ca
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
SAFETY INJECTION PIPING	NA	NA NA	NA	2"-SI-1402-11	EST 1970	REPAIRED	МО
					<u> </u>		
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).		î.		· · · · · · · · · · · · · · · · · · ·	í	
7. Description of Work	REMOVED LINEAR	R INDICATION BY	FILING.				
	,			•			

Remarks	NO WELDING PERFO	RHED		`
·		Applicable Manufacturer's Data Reports t		
		,		
		····		
		CERTIFICATION OF COMPL	.IANCE	
	•			
We certify the	hat the statements ma	de in the report are correct and th	nis REPAIR	conform
to the rules	of the ASME Code, S	ection XI.	repair or replacer	ment
Type Code	Symbol Stamp		N/A	
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1			
Cartificate	Australian Na	N/A	Funishtian Data	N/A
Certificate	of Muthorization No. \mathcal{L}	10/0	Expiration Date	19/7
	Marchese	TO COM	- /-	9-
Signed /		FPL-CSM	Date <u>3/c</u>	<u>, 19</u>
	Owner o	Owner's Designee, Title		
'			· · · · · · · · · · · · · · · · · · ·	
		CERTIFICATE OF INSERVICE	INSPECTION	
l, the ur	ndersigned, holding a	valid commission issued by the N	ational Board of Boiler and	d Pressure Vessel
Inspect	ors and the State or P	rovince of <u>Dade Co</u>	unty, Florida	and employed by
	Arkwright Mutual Insu	rance Company	ofNorwood,	, MA
have in	spected the componer	nts described in this Owner's Rep	ort during the period5/	2/93
to	5/2/93		that to the best of my know	
the Ow	ner has performed exa	minations and taken corrective m	neasures described in this (Owner's Report
		ements of ASME Code, Section X		•
	·	ate neither the inspector nor his		ntu evereced or
implied		inations and corrective measures	• •	• • •
				•
		mployer shall be liable in any ma	* *	y or property
uamage	or a loss of any kind	arising from or connected with thi	s inspection.	
la:		/	FACTORY HUTUA	L ENGINEERING ASSO
13111	wy, year	Commission	s 8230 (N) (1	
/1/	Inspector's Sign		National Board, State, Pro	ovince, and Endorsements
/ Date//	19_	<u>93</u>		

Page 1 of 2

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

	·····						
1. Owner FLOR	RIDA POWER & LIGH	ΙŢ		Date <u>May</u> 7, 1993			
P.O.	Name BOX 029100, MIAN	MI, FL 33102	:	Sheet 1 of	1		
O DI TURK	Address (EY POINT		_				
2. Plant Name P.O. BOX 3088, FLORIDA CITY, FL 33034				Unit 4 WO# 900542	78 PW	O# 2864	··
 	Address		_			. No., Job No. etc.	
3. Work Perform	ed by FLORIDA PO	WER & LIGHT	<u> </u>	Type Code Symbol Sto			
P.O.	Name BOX 3088, FLORID	A CITY, FL 33034	7	Authorization No		N/A N/A	
	Address	7. 0.1.1, 12 0000	<u></u>	Expiration Date		N/A	
4. Identification	of System	Spent Fuel	Pool Co	oling		Quality Gr	oup C
5. (a) Applicable	Construction Code	9 ANSI B31.1	19.55 E	dition, N/A A	ddenda	. N/A Co	de Case
				r Replacements 1980,			
				eplacement Compone			
			I				ASME
Name of	Name of	Manufacturer	National Board	Other	Year	Repaired,	Code Stamped
Component	Manufacturer	Serial No.	No.	Identification	Built	Replaced, or Replacement	(Yes or
							No)
Gate Valve	Aloyco	68M3304	N/A	4-742	N/A	Replaced	No
Gate Valve	Aloyco	C1118	N/A	4-742	1992	Replacement	No
							:
		-					
					,		
7. Description of Work Replaced valve at tag location 4-742 due to excessive seat leakage.							
•							
•							
		-					h
		X Pneumatic	٦				
8. Tests Conduct	ed: Hydrostatic	Pneumatic[J Nomi	nal Operating Pressu	re	Other *	
	Pressure	168 psi	Test	Temp <u>. 76.6</u> D	egree's	F	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-015-4

Apr Apr	med in accordance with the FPL Weld Control Manual
and Site Procedures.	
-	
·	
	CERTIFICATE OF COMPLIANCE
We certify that the statement to the rules of the ASME Cod	is made in the report are correct and this replacement conforms repair or replacement
Type Code Symbol Stamp	N/A °
Certificate of Authorization N	Nat Selfol Serve Sale Date 5/11, 1993
<u> </u>	Dwner's Designee, Title
Owner or O	CERTIFICATE OF INSERVICE INSPECTION d commission issued by the National Board of Boiler and Pressure Vesse
owner or o	CERTIFICATE OF INSERVICE INSPECTION d commission issued by the National Board of Boiler and Pressure Vessence of Dade County, Florida and employed by
Owner or O the undersigned, holding a valid nspectors and the State or Provin Arkwright Mutual Insuran	CERTIFICATE OF INSERVICE INSPECTION d commission issued by the National Board of Boiler and Pressure Vessence of and employed by nce Company of Norwood, MA.
Owner or O the undersigned, holding a valid nspectors and the State or Provin Arkwright Mutual Insurar aave inspected the components d	CERTIFICATE OF INSERVICE INSPECTION d commission issued by the National Board of Boiler and Pressure Vessence of Dade County, Florida and employed by of Norwood, MA. escribed in this Owner's Report during the period January 8, 1993
owner or of the undersigned, holding a valid aspectors and the State or Proving Arkwright Mutual Insurar ave inspected the components do April 2, 1993	CERTIFICATE OF INSERVICE INSPECTION d commission issued by the National Board of Boiler and Pressure Vessence of Dade County, Florida and employed by of Norwood, MA. escribed in this Owner's Report during the period January 8, 1993, and state that to the best of my knowledge and belief,
Owner or O the undersigned, holding a valid aspectors and the State or Provin Arkwright Mutual Insurar ave inspected the components de April 2, 1993 The Owner has performed examine	CERTIFICATE OF INSERVICE INSPECTION d commission issued by the National Board of Boiler and Pressure Vessence of Dade County, Florida and employed by nce Company of Norwood, MA. escribed in this Owner's Report during the period January 8, 1993, and state that to the best of my knowledge and belief, ations and taken corrective measures described in this Owner's Report
Owner or O the undersigned, holding a valid aspectors and the State or Provin Arkwright Mutual Insurar ave inspected the components de April 2, 1993 The Owner has performed examine	CERTIFICATE OF INSERVICE INSPECTION d commission issued by the National Board of Boiler and Pressure Vessence of Dade County, Florida and employed by nce Company of Norwood, MA. escribed in this Owner's Report during the period January 8, 1993, and state that to the best of my knowledge and belief, ations and taken corrective measures described in this Owner's Report
owner or of the undersigned, holding a valid aspectors and the State or Proving Arkwright Mutual Insurant ave inspected the components do April 2, 1993 The Owner has performed examinating accordance with the requirement	CERTIFICATE OF INSERVICE INSPECTION d commission issued by the National Board of Boiler and Pressure Vessence of Dade County, Florida and employed by nce Company of Norwood, MA. escribed in this Owner's Report during the period January 8, 1993, and state that to the best of my knowledge and belief, ations and taken corrective measures described in this Owner's Report
owner or of the undersigned, holding a valid aspectors and the State or Proving Arkwright Mutual Insurar as a large inspected the components do April 2, 1993 The Owner has performed examinate accordance with the requirements by signing this certificate neither the state of the components of the com	CERTIFICATE OF INSERVICE INSPECTION d commission issued by the National Board of Boiler and Pressure Vessence of and employed by nce Company of Norwood, MA. escribed in this Owner's Report during theperiod January 8, 1993, and state that to the best of my knowledge and belief, ations and taken corrective measures described in this Owner's Report ints of ASME Code, Section XI. ther the inspector nor his employer makes any warranty, expressed or
owner or of the undersigned, holding a valid inspectors and the State or Proving Arkwright Mutual Insurary have inspected the components do April 2, 1993. The Owner has performed examinating accordance with the requirement of the signing this certificate neither mplied, concerning the examinating the examinating states.	CERTIFICATE OF INSERVICE INSPECTION d commission issued by the National Board of Boiler and Pressure Vessence of and employed by nce Company of Norwood, MA. escribed in this Owner's Report during the period January 8, 1993 , and state that to the best of my knowledge and belief, ations and taken corrective measures described in this Owner's Report ints of ASME Code, Section XI.
owner or of the undersigned, holding a valid aspectors and the State or Proving Arkwright Mutual Insurant ave inspected the components do April 2, 1993 The Owner has performed examinating accordance with the requirement a	CERTIFICATE OF INSERVICE INSPECTION d commission issued by the National Board of Boiler and Pressure Vessence of Dade County, Florida and employed by of Norwood, MA. escribed in this Owner's Report during theperiod January 8, 1993 , and state that to the best of my knowledge and belief, ations and taken corrective measures described in this Owner's Report nts of ASME Code, Section XI. ther the inspector nor his employer makes any warranty, expressed or fons and corrective measures described in this Owners Report. Furthermo
owner or of the undersigned, holding a valid aspectors and the State or Proving Arkwright Mutual Insurant are inspected the components of April 2, 1993. The Owner has performed examinating accordance with the requirement By signing this certificate neither the inspector nor his employed.	CERTIFICATE OF INSERVICE INSPECTION d commission issued by the National Board of Boiler and Pressure Vessence of Dade County, Florida and employed by nee Company of Norwood, MA. escribed in this Owner's Report during the period January 8, 1993 , and state that to the best of my knowledge and belief, ations and taken corrective measures described in this Owner's Report ints of ASME Code, Section XI. ther the inspector nor his employer makes any warranty, expressed or ions and corrective measures described in this Owners Report. Furthermo loyer shall be liable in any manner for any personal injury or property

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OF

R REPLACEMENTS Section XI									
# 93-016-7									
193									
_13	<u>'</u>	 							
-	of	1	·						
<u>۔</u> ۲ د	301 <i>3</i> 66	S CLUS FC	1031						
Sta	mp ——	N/A N/A							
	-	N/A							
/A		nda, N/A	0-4-0						
on, V	Adde Vinter 198	nda, <u> </u>	— Code Ca	150					
				,					
	Year	Repaired,	ASME Code						
on	Built	Replaced, or Replacement	Stamped (Yes or No)						
)_ .Z	EST	REPAIR.	N _C ,						
			- 4(3)						
_									
			-						
				ĺ					

1. Owner FLORIDA POWER & LIGHT			Date	5/12/93	3		
P.O. B0	OX 029100, MIAMI, F	L 33152	Sheet		of	1	
2. PlantTURKE	Y POINT		Unit 4				
P.O. BOX 3088, FLORIDA CITY, FL 33034 Address			CR-93	-415, W/O 9	301366	o No., etc.	1601
3. Work Performed by-		RUCTION INC.	Туре С	Code Symbol Sta	mp ——	N/A	
	OX 3218, FLORIDA C		Author	ization No.—— tion Date———		N/A N/A	
4. Identification of Syst	Address						
5. (a) Applicable Const		<u>B31.1</u> 1	9 <u>55</u> E	dition, N/A 1980, Edition, V	Adde	enda, <u>N/A</u> B1 Addenda	— Code Cas
6. Identification of Con	nponents Repaired or	Replaced and Rep	olacement Co	omponents			
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
SUPPORT	N/A	NA	NA	76102B- H-421-02	EST	REPAIR.	U _C ,
				IA			
				ļ			
					l I		
7. Description of Work	LINEAR W	DICATION A	t LUE	"C" RE	いろいだ	0.	
Socialphon of from							

emarks No L'ELDIUG PE	ERFORMED	
Applie	cable Manufacturer's Data Reports t	to be attached
·		
b		
	CERTIFICATION OF COMPL	LIANCE
We certify that the statements made in to the rules of the ASME Code, Section		repair or replacement conform
Type Code Symbol Stamp	····	N/A
•		
Certificate of Authorization No.	N/A	Expiration Date N/A
Ana a day	<i>a</i> 1	-1
Signed		Date <u>5/20</u> , 19 ⁹
// Owner or Ow	rner's Designee, Title	
CE	ERTIFICATE OF INSERVICE	INSPECTION
I the undersioned holding a valid	Loommission issued by the M	ational Board of Boiler and Pressure Vessel
Inspectors and the State or Provin		
Arkwright Mutual Insurance		of Norwood, MA
have inspected the components d		
to May 21, 1993		that to the best of my knowledge and belief,
		neasures described in this Owner's Report
in accordance with the requiremen	•	
		employer makes any warranty, expressed or
		described in this Owners Report. Futhermore,
		nner for any personal injury or property
damage or a loss of any kind arising	ng from or connected with thi	is inspection.
hunick III		FACTORY MUTUAL ENGINEERING ASS
Lymus // lym	Commissions	8230 (N) (1)
/ Inspector's Signature		National Board, State, Province, and Endorsement

1. OwnerFLORI	DA POWER & LIGHT	•	Date	April 12	, 199	33	
P.O. BO	X 029100, MIAMI, FL	. 33152	Sheet		of		
2. PlantTURKEY	POINT Name		Unit	4		<u> </u>	0207
P.O. BO	X 3088, FLORIDA CI	TY, FL 33034		9300 S Repair Organization I		Pom	<u>92 - 075</u>
3. Work Performed by-		RUCTION INC.		ode Symbol Sta		• • • • • • • • • • • • • • • • • • • •	
	X 3218. FLORIDA CI			zation Noion Date		N/A N/A	
4. Identification of Syste	Address	1 0	lant.	<u> </u>	tem		
5. (a) Applicable Constru (b) Applicable Edition	uction Code	331.1	9 55 Ed	lition, N/A	Adde Winter 198	enda, <u>N/A</u> 31 Addenda	— Code Case
6. Identification of Com		•					
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Conoseal	Mestinghosic	N/A	N/A	K201	1970	Replaced	NO
Consect	ABB/CE	N/A	MA	K201	1993	Replacement	سر -
			i				
				4			
•			•				
		:					
		<u> </u>					
						ſ	
7. Description of Work	Cono sea	1 000	rocle	Pen	Per	n 92-5	<u> </u>
UN.T #4.	Leak	test to	be	Derforme	ed C	Luring	
7. Description of Work - UN.T #4. PCS Gine:	r - Presser	ue Test	Flader	WO:93	30137	132_11.bu	Van Lin
,						j}sv11 93	5-/13110 -017-4

9. Remarks The Congseal Upgrace	le was performed per
Applicable Manufacturer's Data F	΄
the ABBICE OALOC	roerum in accordance
with RTS No. 93-57	o and site approved
ABB traveler No 2000 88	9-001
ABB traveler No 2000 88	50()/;
CERTIFICATION OF C	COMPLIANCE
, CENTILIDATION OF C	, <u>/</u>
We certify that the statements made in the report are correct	t and this replacement conforms
to the rules of the ASME Code, Section XI.	repair or replacement
	,
·	
Type Code Symbol Stamp	N/A
Certificate of Authorization NoN/A	Expiration DateN/A
Signed Hough Marchese	Date 5./2 1993
Owner or Owner's Designee, Title	
L V	
·	
CERTIFICATE OF INSE	RVICE INSPECTION
I, the undersigned, holding a valid commission issued by	
Inspectors and the State or Province ofD	
Arkwright Mutual Insurance Company	of Norwood, MA
have inspected the components described in this Owner	
	d state that to the best of my knowledge and belief,
the Owner has performed examinations and taken corre	
in accordance with the requirements of ASME Code, Se	ĺ
	or his employer makes any warranty, expressed or
implied, concerning the examinations and corrective me	
neither the inspector nor his employer shall be liable in a	
damage or a loss of any kind arising from or connected	with this inspection.
	FACTORY MUTUAL ENGINEERING ASS
Still 1 Park Comm	nissions 8230 (N) (1)
Inspector's Signature	National Board, State, Province, and Endorsements
Date 10-13- 19 73	

1. OwnerFLOR	IDA POWER & LIGH	T	Date	05/12/	93		
P.O. B	OX 029100, MIAMI, F	L 33152	Shee	t <u> </u>	of1		
2. PlantTURKE			Unit .	44			
P.O. B	OX 3088, FLORIDA (DITY, FL 33034				1, CWO: 501031	
3. Work Performed by-	Address BECHTEL CONS	TRUCTION INC.		Repair Organization (Code Symbol Sta		No., etc.	
	Name OX 3218, FLORIDA (Author	rization No.——		N/A	
4. Identification of Syst	Address			ition Date	•	N/A	
5. (a) Applicable Const		B31.1 1	9 <u>55</u> E	dition, N/A 1980, Edition, V	Add	enda, <u>N/A</u> 81 Addenda	— Code Ca
6. Identification of Con	nponents Repaired or	Replaced and Rep	lacement C	omponents			
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
SUPPORT	NA	18014	NA	78102B- R-421-01	EST 1971	REPAIR	NO (00)
	,			-			
				 			
	<u> </u>			 			
]	
	!			,	<u> </u>	,	
7. Description of Work	MOVE EXISTING	REAR BRACKET T	O ACHIEVE	PROPER "L" DI	MENSION		
		,		N.			

Remarks ALL WELDING PERFORMED IN ACCORDANCE WIT	
Applicable Manufacturer's D	ata Reports to be attached
CERTIFICATION	OF COMPLIANCE
We certify that the statements made in the report are cor	
to the rules of the ASME Code, Section XI.	repair or replacement
	1
Tuna Cada Cumbal Cha	N/A
Type Code Symbol Stamp	IVA
Al/A	
Certificate of Authorization NoN/A	Expiration DateN/A
marches.	
Signed	Date <u>5/20/93</u> , 19
Owner or Owner's Designee, Ti	tle
	*
CERTIFICATE OF IN	ISERVICE INSPECTION
1 the undersioned helding a valid association (see	d for the Mattered Day of the Pattern of D
	d by the National Board of Boiler and Pressure Vessel
Arkwright Mutual Insurance Company	Dade County, Florida and employed by of Norwood, MA
have inspected the components described in this Ow	
E 4 00	, and state that to the best of my knowledge and belief,
	orrective measures described in this Owner's Report
in accordance with the requirements of ASME Code,	
	or nor his employer makes any warranty, expressed or
	measures described in this Owners Report. Futhermore,
neither the inspector nor his employer shall be liable	
damage or a loss of any kind arising from or connect	
/ / / /	That and inspection.
Munich St.	FACTORY MUTUAL ENGINEERING ASSO
/ Inspector's Signature	ommissions 8230 (N) (1) National Board, State, Province, and Endorsements
1 5 1 1993	विकास क्यांन, अवाव, गावमारव, वाच छावजंडसासाड
13/0	

1. OwnerFLOR	IDA POWER & LIGHT	Т	. Date	05/13/93	3		
P.O. B0	OX 029100, MIAMI, F	L 33152	Sheet	1	of	1	<u></u> _
2. PlantTURKE		1	Unit _	4			
P.O. 80	OX 3088, FLORIDA C	ITY, FL 33034	_CWO:	501031 CR-9	3-393 PC	N: 93-094 HO:	93013274
3. Work Performed by-		TRUCTION, INC.		Repair Organization ode Symbol Sta	•	o No., etc. N/A	
	Name OX 3218, FLORIDA C		Authori	zation No		N/A	
	Address	// / / / / / / / / / / / / / / / / / /	Expirat	ion Date		N/A	
4. Identification of Syst 5. (a) Applicable Const (b) Applicable Edition		B31.1 1	9 <u>55</u> Ec	lition, N/A	Adde	enda, N/A	— Code Cas
6. Identification of Con					***************************************	or Addenda	
	<u> </u>	<u> </u>	Madazi			<u> </u>	ASME
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built_	Repaired, Replaced, or Replacement	Code Stamped (Yes or No)
4-VCH-62	NA	NA	NA	NA	EST. 1970	REPLACED	NO
4-VCH-62	NA NA	NA "	NA	NA NA	1993	REPLACEMENT	но
PIPING CVCS	NA	NA	NA	3-CH-1403	EST. 1970	REPAIRED	NO
	•						,
	•			`a			
		1	 	,			
,							
		\$,				
7. Description of Work	REPLACED SUPPOR	T 4-VCH-62 / RE	EPAIRED CVC	S PIPING	•		
				•			ï

	Applica	ble Manufacturer's Data Reports to be	attached	
				
	, C	ERTIFICATION OF COMPLIAN	NCE	
	t the statements made in the ASME Code, Section	the report are correct and this XI.	REPLACEMENT AND REPAIR repair or replacement	conform
Type Code Sy	mbol Stamp	N	/A	
Certificate of A	Authorization No.	N/A	Expiration Date	N/A
S	142 / 140		,	; •
Signed //	MUNICIPELE.	er's Designee, Title	Date	, 19 $\frac{9}{2}$
				- .
	CEF	RTIFICATE OF INSERVICE IN	SPECTION	
L the unde	rsigned holding a valid o	commission issued by the Natio	and Roard of Roiler and Proce	ura Vassal
		e of Dade Count		
		Company of		
		scribed in this Owner's Report	during the period _5/5/93	
	3/93		t to the best of my knowledge	
		ions and taken corrective meas	sures described in this Owner's	Report
		s of ASME Code, Section XI.		
		either the inspector nor his emp		
		ns and corrective measures des		
		ver shall be liable in any manne g from or connected with this in		perty
			spection.	
	. ////			
	it Soul	Commissions	FACTORY MUTUAL ENGINE 8230 (N) (1)	NEERING ASSO

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1.	Owner FL	.OF	RIDA POWER & LIGH	RT		Date May 18,	1993		
		٥.	Name BOX 029100, MIĄN	MI, FL 33102		Sheet 1 of	1		
2.	PlantTL	JRK	Address (EY POINT			Unit4			
	<u></u>	0.	BOX 3088, FLORID	A CITY, FL 33034		WO# 93	012089 PW	O# 6253	
			Address			Repair O	rganization P.C). No., Job No. etc.	
3.	Work Perfor	m	ed by FLORIDA PO	WER & LIGHT		Type Code Symbo			
	' Р.	0.	BOX 3088, FLORID	A CITY, FL 33034	L	Authorization No. Expiration Date _		N1 / A	
4.	Identificatio	n	Address of System	Main Stear		expiration bate =		Quality Gr	oup B
5.	(a) Applica	ble	Construction Code	. ANSI 831.1	19 55 F	dition N/A	Addenda	N/A C	nda Casa
•			Edition of Section						
6.			of Components Re		-	-			
	Name of Component		Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
St	op Check VI	v.	Schutte/Koerting	N/A	N/A	POV-4-2605	S N/A	Replaced	No
					ı				
									
	1								
7.	Description	of	WorkReplo	aced Bonnet stud	s and n	uts.			
			1				ı		
						1	_		ħ
8.	Tests Cond	ıct	ed: Hydrostatic	Pneumatic	Nomi	inal Operating Pr	essure	Other	
			Pressure	psi	Test	Temp	Degree's	s F	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-020-4

_	Mechanical connection, no welding performed. Applicable Manufacturer's Data Reports to be attached
	CERTIFICATE OF COMPLIANCE
	ertify that the statements made in the report are correct and this replacement conforms repair or replacement e rules of the ASME Code, Section XI.
Туре	Code Symbol StampN/A
Certi Signo	ficate of Authorization No. 1 N/A Expiration Date N/A Owner's Designee, Tille Expiration Date 5.18 , 19 93
	CERTIFICATE OF INSERVICE INSPECTION ersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse and the State or Province of Dade County, Florida and employed by
	Arkwright Mutual Insurance Company of Norwood, MA.
	ected the components described in this Owner's Report during theperiod. April 23, 1993
lo	May 16, 1993 , and state that to the best of my knowledge and belief,
he Owner	has performed examinations and taken corrective measures described in this Owner's Report
,	ance with the requirements of ASME Code, Section XI.
By siç	gning this certificate neither the inspector nor his employer makes any warranty, expressed or
mplied, c	oncerning the examinations and corrective measures described in this Owners Report. Furthermo
neither th	e inspector nor his employer shall be liable in any manner for anypersonal injury or property
damage o	or a loss of any kind arising from or connected with the inspection.
	a loss of any kind drising from or connected with the hispection.

BB

As Required by the Provisions of the ASME Code Section XI

1. Owner FLOR	RIDA POWER & LIGH	T	(Date <u>May 18, 199</u>	3		
P.O.	BOX 029100, MIAN	(I, FL 33102	9	Sheet 1 of	1		
O DIL TURK	Address CEY POINT		_				
2. Plant	Name Name	. 0.774 64 77.57	_	Jiii			·
P.0.	BOX 3088, FLORID	A CITY, FL 33032	<u>.</u>	WO# 930120		O# 6265 . No., Job No. etc.	
3. Work Perform	ad hu FLORIDA PO	WER & LIGHT	-				
5. Work Perform	Name			Type Code Symbol Sto Authorization No			
P.O.	BOX 3088, FLORID	A CITY, FL 33034	1	Expiration Date		N/A	
4. Identification	Address of System	Main Stear	n			Quality Gr	oup B
5. (a) Applicable	Construction Code	, ANSI 831.1	19 55 E	dition, N/A A	ddenda	. N/A Co	de Case
	-			r Replacements 1980,			
			-	eplacement Compone			
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Stop Check VIv.	Schutte/Koerting	N/A	N/A	POV-4-2606	N/A	Replaced	No
							•
				,			
							65
			t				
	,					4	
	-						
	1			L	<u> </u>		
7. Description of	WorkReplo	aced Bonnet stud	ls and n	uts.			
						•	
8. Tests Conduct	ed: Hydrostatic	Pneumatic	Nomi	inal Operating Pressu		Other	
J. 10010 Conlade	·			mai operanny riessu	'~لـــا	J	
	Pressure	psi	Test	Temp <u>. </u>	egree's	s F	
		41					

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form

93-021-4

Remarks Mechanical connection, no weldi	g parterinter
Applicable Manu	facturer's Dala Reports to be attached
_	
CER	TIFICATE OF COMPLIANCE
We certify that the statements made in	n the report are correct and this replacement conform
to the rules of the ASME Code, Section	a XI. repair or replacement
Type Code Symbol Stamp	N/A
Certificate of Authorization 130.	N/A Expiration Date N/A
	MANTMA Date 5. 18 . 19 93
Signed where or Owner's Design	Date, 19 75
	1100
CERTI	FICATE OF INSERVICE INSPECTION
l, the undersigned, holding a valid commiss	alam lagued by the National Deard of Calley and December Vac-
	sion issued by the National board of botter and Fressare Vesse
Inspectors and the State or Province of	
	Dade County, Florida and employed by
Arkwright Mutual Insurance Comp	Dade County, Florida and employed by any of Norwood, MA.
Arkwright Mutual Insurance Components described in	Dade County, Florida and employed by any of Norwood, MA. In this Owner's Report during theperiod April 23, 1993
Arkwright Mutual Insurance Compe have inspected the components described in	Dade County, Florida and employed by any of Norwood, MA. In this Owner's Report during theperiod April 23, 1993
Arkwright Mutual Insurance Components described in May 15, 1993	Dade County, Florida and employed by any of Norwood, MA. In this Owner's Report during theperiod April 23, 1993
Arkwright Mutual Insurance Components described in May 15, 1993 he Owner has performed examinations and	Dade County, Florida and employed by any of Norwood, MA. In this Owner's Report during theperiod April 23, 1993 , and state that to the best of my knowledge and belief, It taken corrective measures described in this Owner's Report
Arkwright Mutual Insurance Components described in May 15, 1993 The Owner has performed examinations and accordance with the requirements of ASM	Dade County, Florida and employed by any of Norwood, MA. In this Owner's Report during the period April 23, 1993 , and state that to the best of my knowledge and belief, at taken corrective measures described in this Owner's Report ME Code, Section XI.
Arkwright Mutual Insurance Components described in the Lower May 15, 1993 The Owner has performed examinations and in accordance with the requirements of ASA By signing this certificate neither the in	Dade County, Florida and employed by any of Norwood, MA. In this Owner's Report during the period April 23, 1993 , and state that to the best of my knowledge and belief, it taken corrective measures described in this Owner's Report ME Code, Section XI. Inspector nor his employer makes any warranty, expressed or
Arkwright Mutual Insurance Components described in the last of the	Dade County, Florida and employed by any of Norwood, MA. In this Owner's Report during the period April 23, 1993 I and state that to the best of my knowledge and belief, it taken corrective measures described in this Owner's Report ME Code, Section XI. Inspector nor his employer makes any warranty, expressed or corrective measures described in this Owners Report. Furthermost
Arkwright Mutual Insurance Components described in to May 15, 1993 The Owner has performed examinations and in accordance with the requirements of ASA By signing this certificate neither the interplied, concerning the examinations and components.	Dade County, Florida and employed by any of Norwood, MA. In this Owner's Report during the period April 23, 1993 , and state that to the best of my knowledge and belief, it taken corrective measures described in this Owner's Report ME Code, Section XI. Inspector nor his employer makes any warranty, expressed or
Arkwright Mutual Insurance Components described in to May 15, 1993 the Owner has performed examinations and in accordance with the requirements of ASA By signing this certificate neither the inimplied, concerning the examinations and conceither the inspector nor his employer shall	Dade County, Florida and employed by any of Norwood, MA. In this Owner's Report during the period April 23, 1993 In and state that to the best of my knowledge and belief, at taken corrective measures described in this Owner's Report ME Code, Section XI. Inspector nor his employer makes any warranty, expressed or corrective measures described in this Owners Report. Furthermost be liable in any manner for any personal injury or property
Arkwright Mutual Insurance Components described in to	Dade County, Florida and employed by any of Norwood, MA. In this Owner's Report during the period April 23, 1993 , and state that to the best of my knowledge and belief, it taken corrective measures described in this Owner's Report ME Code, Section XI. Inspector nor his employer makes any warranty, expressed or corrective measures described in this Owners Report. Furthermost be liable in any manner for any personal injury or property cor connected with the inspection.
Arkwright Mutual Insurance Components described in to May 15, 1993 the Owner has performed examinations and in accordance with the requirements of ASA By signing this certificate neither the inimplied, concerning the examinations and components.	Dade County, Florida and employed by any of Norwood, MA. In this Owner's Report during the period April 23, 1993 In and state that to the best of my knowledge and belief, at taken corrective measures described in this Owner's Report ME Code, Section XI. Inspector nor his employer makes any warranty, expressed or corrective measures described in this Owners Report. Furthermost be liable in any manner for any personal injury or property

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FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner FLOR	RIDA POWER & LIGH	т	ı	Date	May 18, 19	93		
P.O.	Name BOX 029100, MIAN	41. FL 33102		Sheet	1 of	1		
TUR	Address KEY POINT		_					
2. Plant	Nam∙	A CITY EL 7707		Unit	4	2400 000	· · · · · · · · · · · · · · · · · · ·	 ·
F.O.	BOX 3088, FLORID	A CITT, PL 33034	-		WO# 92032 Repair Organ		O# 9901	
3. Work Perform	ed by FLORIDA PO	WER & LIGHT	_	Type Cod	e Symbol S	itamp	N/A	
P.O.	Name BOX 3088, FLORID	A CITY, FL 33034	1		ition No		11./1	
	Address	Intoles On			n Date			
4. Identification	of System	Intake Coo	ling Wate	er			Quality Gr	oup C
(b) Applicable	Construction Code Edition of Section of Components Re	XI Utilized for R	Repairs o	r Replace	ments 198	0, Editio		
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	1 0	ther lification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Gate Valve	Walworth	N/A	N/A	4	-50-325	N/A	Replaced	No
Gate Valve	Walworth	N/A	N/A	4	-50-325	N/A	Replacement	No
		•						_
1	,	1						· ·
					_			, , ,
7. Description of	WorkRepl	aced valve at tag	location	4-50-3	325.			
8. Tesis Conduct	ed: Hydrostatic Pressure <u>No</u>	Pneumatic		inal Oper ł Temp <u>. </u>	ating Press Nominal	ureX Degree's	Other	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-022-4

CERTIFICATE OF COMPLIANCE We certify that the statements made in the report are correct and this repair or replacement conform to the rules of the ASME Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Expiration Date N/A Signed When States Plant Spi Date Signed N/A CERTIFICATE OF INSERVICE INSPEC ON I, the undersigned, holding a valid commission issued by the National Bourd of Boiler and Pressure Vess Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mulual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during theperiod September 17, 1992 to May 15, 1993 , and state that to the test of my knowledge and belief the Owner has performed examinations and taken corrective measures cescribed in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furtherm neither the inspector nor his employer shall be liable in any manner for anypersonal injury or property damage or a loss of any kind arising from or connected with the inspection. **Commissions*** **Natival Beagineering Assoc Natival Engineering Assoc Nativa		Data Reports to be attached
We certify that the statements made in the report are correct and this replacement to the rules of the ASME Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Exprision Date N/A Signed N/A CERTIFICATE OF INSERVICE INSPEC* 2N I, the undersigned, holding a valid commission issued by the National Bourd of Boiler and Pressure Vess Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period September 17, 1992 to May 15, 1993 , and state that to the test of my knowledge and belief the Owner has performed examinations and taken corrective measures cescribed in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection. Commissions Section Mutual Engineering Assoc NB 8230 (N) (I)		
We certify that the statements made in the report are correct and this replacement to the rules of the ASME Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Exprision Date N/A Signed N/A CERTIFICATE OF INSERVICE INSPEC* 2N I, the undersigned, holding a valid commission issued by the National Bourd of Boiler and Pressure Vess Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period September 17, 1992 to May 15, 1993 , and state that to the test of my knowledge and belief the Owner has performed examinations and taken corrective measures cescribed in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection. Commissions Section Mutual Engineering Assoc NB 8230 (N) (I)		
We certify that the statements made in the report are correct and this replacement to the rules of the ASME Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Exprision Date N/A Signed N/A CERTIFICATE OF INSERVICE INSPEC* ON Arwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period September 17, 1992 to May 15, 1993 , and state that to the test of my knowledge and belief the Owner has performed examinations and taken corrective measures cescribed in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report damage or a loss of any kind arising from or connected with the inspection. Commissions Section Mutual Engineering Assoc NB 8230 (N) (I)		
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We certify that the statements made in the report are correct and this repair or replacement to the rules of the ASME Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Expision Date N/A Signed Wheel Hand Sopt Date 5/19 19 43 CERTIFICATE OF INSERVICE INSPECTON It, the undersigned, holding a valid commission issued by the National Bourd of Boiler and Pressure Vess Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period September 17, 1992 to May 15, 1993 and state that to the test of my knowledge and belief the Owner has performed examinations and taken corrective measures cescribed in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection. Commissions 2000 AND AND AND AND AND AND AND AND AND AND	CERTIFICATE	E OF COMPLIANCE
Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Signed CERTIFICATE OF INSERVICE INSPEC* 2N I, the undersigned, holding a valid commission issued by the National Bourd of Boiler and Pressure Vess Inspectors and the State or Province of Arkwright Mutual Insurance Company Nay 15, 1993 To May 15, 1993 The Owner of Authorization No. Nower's Report during the period May 15, 1993 The Owner of Ashe Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report during the period or in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or properly damage or a loss of any kind arising from or connected with the inspection. Commissions Satory Mutual Engineering Assoc NB 8230 (N) (1)		
Certificate of Authorization No. N/A Exprision Date N/A Signed Wices Hand Sop Date 5/19 . 19 93 CERTIFICATE OF INSERVICE INSPEC ON I, the undersigned, holding a valid commission issued by the National Bourd of Boiler and Pressure Vess Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period September 17, 1992 to May 15, 1993 , and state that to the test of my knowledge and belief the Owner has performed examinations and taken corrective measures cescribed in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection. Commissions (actory Mutual Engineering Associated) (N) (1)		eport die correct did ins
CERTIFICATE OF INSERVICE INSPECTON I, the undersigned, holding a valid commission issued by the National Bourd of Boiler and Pressure Vess Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period September 17, 1992 to May 15, 1993, and state that to the test of my knowledge and belief the Owner has performed examinations and taken corrective measures cescribed in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection. Commissions 12ctory Mutual Engineering Associated 12 (N) (1)	Type Code Symbol Stamp	N/A
CERTIFICATE OF INSERVICE INSPECTON In the undersigned, holding a valid commission issued by the National Bourd of Boiler and Pressure Vess Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. Thave inspected the components described in this Owner's Report during the period September 17, 1992 to May 15, 1993, and state that to the test of my knowledge and belief the Owner has performed examinations and taken corrective measures cescribed in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection. Commissions Commissions On the Section Se	Certificate of Authorization No. N/	Expration Date N/A
Inspectors and the State or Province of	Signed Owner's Designee, Title	Date 3/19 . 19 75
Inspectors and the State or Province of		
Inspectors and the State or Province of	CEPTIFICATE	OF INSERVICE INSPEC. ON
Inspectors and the State or Province of		
Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during theperiod September 17, 1992 to May 15, 1993, and state that to the test of my knowledge and belief the Owner has performed examinations and taken corrective measures cescribed in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection. Commissions Section Mutual Engineering Associated Section (1) Commissions NB 8230 (N) (I)		
to May 15, 1993, and state that to the test of my knowledge and belief the Owner has performed examinations and taken corrective measures cescribed in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection. Commissions September 17, 1992 September 18, 1993 September 17, 1992 September 18, 1993 September 18, 1993 September 17, 1992 September 18, 1993 September 19, 1993 September 18, 1993 September 18, 1993 September 19, 1993 September 19, 1993 September 19, 1993 September 19, 1993 September 19, 1993 September 19, 1993 September 19, 1993 September 19, 1993 September 19, 1993 September 19, 1993 September 19, 1993 September 19, 1993 September 19, 1993 September 19, 1993 September 19, 1993 September 19, 1993 September 19, 1	I, the undersigned, holding a valid commission iss	sued by the National Board of Boiler and Pressure Vess
no May 15, 1993, and state that to the test of my knowledge and belief the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection. Commissions Commissions (3ctory Mutual Engineering Associated) (N) (1)	I, the undersigned, holding a valid commission iss	sued by the National Bourd of Boiler and Pressure Vess Dade County, Florida and employed by
the Owner has performed examinations and taken corrective measures cescribed in this Owner's Report in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection. Commissions Commissions Commissions Commissions Commissions	I, the undersigned, holding a valid commission iss Inspectors and the State or Province of Arkwright Mutual Insurance Company	Dade County, Florida and employed by of Norwood, MA.
By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection. Commissions Commissions Commissions NB 8230 (N) (1)	I, the undersigned, holding a valid commission iss Inspectors and the State or Province of Arkwright Mutual Insurance Company have inspected the components described in this (Dade County, Florida and employed by of Norwood, MA. Owner's Report during the period September 17, 1992
By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection. Commissions Commissions Commissions Commissions RB 8230 (N) (1)	I, the undersigned, holding a valid commission iss Inspectors and the State or Province of Arkwright Mutual Insurance Company have inspected the components described in this (Dade County, Florida and employed by of Norwood, MA. Owner's Report during the period September 17, 1992 and state that to the test of my knowledge and belief
implied, concerning the examinations and corrective measures described in this Owners Report. Furtherm neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection. Commissions Commissions NB 8230 (N) (I)	I, the undersigned, holding a valid commission iss Inspectors and the State or Province of Arkwright Mutual Insurance Company have inspected the components described in this (10	Dade County, Florida and employed by of Norwood, MA. Owner's Report during the period September 17, 1992 and state that to the test of my knowledge and belief
neither the inspector nor his employer shall be liable in any manner for anypersonal injury or property damage or a loss of any kind arising from or connected with the inspection. Commissions NB 8230 (N) (1)	I, the undersigned, holding a valid commission iss Inspectors and the State or Province of	Dade County, Florida and employed by of Norwood, MA. Owner's Report during theperiod September 17, 1992 and state that to the test of my knowledge and belief a corrective measures cescribed in this Owner's Report le, Section XI.
damage or a loss of any kind arising from or connected with the inspection. Solution Solution Commissions Commissions NB 8230 (N) (I)	I, the undersigned, holding a valid commission iss Inspectors and the State or Province of Arkwright Mutual Insurance Company have inspected the components described in this of to	Dade County, Florida and employed by of Norwood, MA. Owner's Report during theperiod September 17, 1992 and state that to the test of my knowledge and belief a corrective measures cescribed in this Owner's Report le, Section XI. or nor his employer makes any warranty, expressed or
Julie A. Slang Commissions Commissions NB 8230 (N) (I)	I, the undersigned, holding a valid commission issues Inspectors and the State or Province of	Dade County, Florida and employed by of Norwood, MA. Owner's Report during the period September 17, 1992 and state that to the test of my knowledge and belief a corrective measures cescribed in this Owner's Report 19, Section XI. or nor his employer makes any warranty, expressed or the measures described in this Owners Report. Furtherm
Commissions NB 8230 (N) (I)	I, the undersigned, holding a valid commission issues Inspectors and the State or Province of	Dade County, Florida and employed by of Norwood, MA. Owner's Report during the period September 17, 1992 and state that to the test of my knowledge and belief a corrective measures cescribed in this Owner's Report 19, Section XI. or nor his employer makes any warranty, expressed or tive measures described in this Owners Report. Furthermatic in any manner for any personal injury or property
	I, the undersigned, holding a valid commission iss Inspectors and the State or Province of Arkwright Mutual Insurance Company have inspected the components described in this of May 15, 1993 the Owner has performed examinations and taken in accordance with the requirements of ASME Cod By signing this certificate neither the inspecto implied, concerning the examinations and correctioneither the inspector nor his employer shall be lia	Dade County, Florida and employed by of Norwood, MA. Owner's Report during theperiod September 17, 1992 and state that to the test of my knowledge and belief a corrective measures cescribed in this Owner's Report 19, Section XI. or nor his employer makes any warranty, expressed or tive measures described in this Owners Report. Furtherm table in any manner for any personal injury or property nnected with the inspection.

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Page 1 of 2

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1.	Owne <u>r</u>	FLOR	RIDA POWER & LIGH	ıτ		Date	May 19,	1993		-
		P.O.	Name BOX 029100, MIAN	AI, FL 33102			1 of	1		
			Address		—					
2.	Plant	TURK	CEY POINT			Unit .	4			
		P.O.	BOX 3088, FLORID	A CITY, FL 33034	4		Siemens	/ PO# 89	2691-01146	
			Address		_		Repair Org	anization P.C	. No., Job No. etc.	1
3.	Work Per	rform	ed by FLORIDA PO	WER & LIGHT		Type Co	ode Symbol	Stamp	N/A	
		P.O.	BOX 3088, FLORID	A CITY, FL 33034			zation No			
			Address		`	Expirati	ion Date	· · · · · ·	N/A	
4.	Identific	ation	of System	Waste Disp	osal		•		Quality Gr	oup A
5.	(a) Appl	icable	Construction Code	ANSI 831.1	19 55 E	dition.	N/A	Addenda	. N/A co	de Cose
•			Edition of Section							
6.			of Components Re		-	-				
	-				National				Donnier d	ASME
	Name o		Name of Manufacturer	Manufacturer Serial No.	Board	i	Other entification	Year	Repaired, Replaced,	Code Stamped
	Compone		matia actar et	Serial No.	No.	1016	minication	Built	or Replacement	(Yes or No)
Ме	ech. Snub	ber	PSA	N/A	N/A		4-1100	N/A	Replaced	No
										_
								_		
										
						r				
-										
7.	Descripti	on of	WorkReplo	sced load pin.						
					- 	 -			7. M.L.	
8.	Tests Co	nduct	ed: Hydrostatic	Pneumatic	Nomi	nal On	erating Pre	ssure	Other	+
٠,			, 31 0014114			op	y 110		·····	
			Pressure	psi	Test	Temp		_ Degree's	F	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-024-4

Remarks Original Load Pin damaged.	
Applicable Manufacturer's Data Reports to be attac	hed
	
•	
CERTIFICATE OF COMPLIANCE	
We certify that the statements made in the report are correct ar	
to the rules of the ASME Code, Section XI.	repair or replacement
Tura Ondo C. I. I.O.	
Type Code Symbol StampN/A	
Cartificate of Authorization No. N/A	N/A
Certificate of Authorization No. N/A	xpiration Date N/A
Signed Mat Suff Soun In	Date <u> </u>
Owner or Owner's Designee, Tille	

	,
* CERTIFICATE OF INSERVICE INSP	ECTION
. the undersigned, holding a valid commission issued by the Nationa	I Board of Boiler and Pressure Vess
nspectors and the State or Province of Dade County, Flori	
Arkwright Mutual Insurance Company	
have inspected the components described in this Owner's Report duri	
May 5, 1993 , and state that to t	
he Owner has performed examinations and taken corrective measure	es described in this Owner's Report
n accordance with the requirements of ASME Code, Section XI.	
By signing this certificate neither the inspector nor his employer	makes any warranty, expressed or
mplied, concerning the examinations and corrective measures descri	bed in this Owners Report. Furtherm
neither the inspector nor his employer shall be liable in any manner	for anypersonal injury or property
damage or a loss of any kind arising from or connected with the ins	spection.
	Sactory Mutual Sacionarias Asses
Music / Harrissions	Factory Mutual Engineering Assoc NB 8230 (N) (I)
Inspector's Signature	110 0230 (11) (1)

Page 1 of 2

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner FLO	RIDA POWER & LIGH	НT		Date May 19,	1993			
P.0	Name . BOX 029100, MIAI	MI, FL 33102	_	Sheet 1 of	1			
2. PlantTUR	Address RKEY POINT			Unit4				
	BOX 3088, FLORIC	OA CITY, FL 3303		Siemens / PO# B92691-01146				
Address Repair Organization P.O. N								
3. Work Performed by FLORIDA POWER & LIGHT				Type Code Symbol StampN/A				
Name P.O. BOX 3088, FLORIDA CITY, FL 33034			A.	Authorization No. N/A				
	Address	× 0111, 12 0000		Expiration Date		N/A		
4. Identification	of System	Feedwater				Quality Gr	roup B	
5. (a) Applicabl	e Construction Cod	e ANSI B31.1	19 55 E	dition. N/A	Addendo	ı. "N/A Co	ode Casé	
	e Edition of Section							
6: Identification	of Components Re	paired or Replac	ed and R	eplacement Comp	onents			
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)	
Mech. Snubber	PSA	182	N/A	4-1035	N/A	Replaced	No	
Mech. Snubber	PSA	11439	N/A	· 4 - 1035	N/A	Replacement	No	
•							1	
							,	
		,						
7. Description o	f Work Repl	aced PSA-10 Me	chanical	Snubber at tag lo	cation 4-	1035.		
8. Tests Conduc	•	Pneumatic psi		nal Operating Pres		Other		

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-025-4

Applicable Manufactur	urer's Data Reports to be attached	
1		
CERTIFIC	ICATE OF COMPLIANCE	
We certify that the statements made in the to the rules of the ASME Code, Section XI.	repair or replacement	nforn
Type Code Symbol Stamp	N/A	
Certificate of Authorization No. Signed Mandelf S	Sem Ofen. Date 5/31, 199	כי
	CATE OF INSERVICE INSPECTION	
•	n issued by the National Board of Boiler and Pressure	
	Dade County, Florida and employed	
	of Norwood, MA. This Owner's Report during the period May 1, 1993	_
	, and state that to the best of my knowledge and b	—
	aken corrective measures described in this Owner's Rep	pori
n accordance with the requirements of ASME (-ء ا
	pector nor his employer makes any warranty, expressed	
	weather management described to this Assess David Court	nern
implied, concerning the examinations and corre	rective measures described in this Owners Report. Furth	
implied, concerning the examinations and correneither the inspector nor his employer shall be	e liable in any manner for anypersonal injury or prope	
implied, concerning the examinations and corr	e liable in any manner for anypersonal injury or prope	

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner FLOR	RIDA POWER & LIGH	ıτ		Date <u>May</u> 19, 199	3		
P.O.	Name BOX 029100, MIAN	41, FL 33102		Sheet 1 of	1		
	Address		_		-		
2. PlantTURE	KEY POINT		_ '	Unit4			·
P.O.	BOX 3088, FLORID	A CITY, FL 33034	<u> </u>			2691-01146	
				Kepair Organiz	alion P.O	. No., Job No. etc.	
3. Work Perform	ed by FLORIDA PC	WER & LIGHT		Type Code Symbol Sto			
P.O.	BOX 3088, FLORID	A CITY, FL 33034	I.	Authorization No Expiration Date		N/A	
4. Identification	Address of System	Main Stear	ţ	•		Quality Gr	oup B
							—
			. —	dition <u>, N/A</u> Ac r Replacements 1980,			
6. Identification	of Components Re	paired or Replace	ed and R	eplacement Compone	nts		
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Mech. Snubber	PSA	4589	N/A	4-1039	N/A	Replaced	No
Mech. Snubber	PSA	6998	N/A	4 1039	N/A	Replacement	No
				-			
							
······································							
•			1				
7. Description of	Work Repl	aced PSA-35 Me	chanical	Snubber at tag locat	on 4-	1039.	
			f				
							
8. Tests Conduct	ed: Hydrostatic	Pneumatic	Nomi	inal Operating Pressu	re	Other	•
	Pressure	psi	Tes	Temp. D	egree's	. , , , , , , , , , , , , , , , , , , ,	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-026-4

Remarks_	Replaced Snubber v	with previously tested	spare serial # (6998.
		Applicable Manufacturer's (Data Reports to be att	toched .
			 	
		CERTIFICATE	OF COMPLIANCE	
Was	ertify that the statem	ents made in the re-	and are correct	and this replacement conform
	e rules of the ASME (John die Confect	repair or replacement
Туре	Code Symbol Stamp		N/A	
,				
Certi	ficate of Authorizatiø	π NoN/A		Expiration DateN/A
1	00//	. •	_	
Signe	d Sol Francou	Madefits	ent, Soft	Date <u> </u>
	Owner	or Owner's Designee, Title		
		. CERTIFICATE	OF INSERVICE INS	SPECTION .
l the und	ersianed holding a v	valid commission issu	and by the Nation	nal Board of Boiler and Pressure Ves
	_		•	
		 		orida and employed by
				of Norwood, MA.
have insp	ected the component:	s described in this O	wner's Report di	uring theperiod May 1, 1993
lo	May 12, 1993	. (and state that to	o the best of my knowledge and belie
he Owner	has performed exar	ninations and taken	corrective meası	ures described in this Owner's Report
	nce with the require			·
				or makes any warranty evaraged or
		•		er makes any warranty, expressed or
implied, c	oncerning the examir	nations and corrective	e measures des	cribed in this Owners Report. Furthern
neither th	e inspector nor his e	mployer shall be liab	le in any manne	er for anypersonal injury or property
	r a loss of any kind	arising from or con	nected with the	inspection.
damage o				
damage o	///			Factory Mutual Fnaineering Asso
damage o	of She	<u> </u>	Commission	110 0200 (11) (1)
Municipal de la serie de la se	inspector's Signa	alure	Commission —	

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner FL	ORIDA POWER & LIGI	HT 5 - V		Date May 19, 1	993		
	Name D. BOX 029100, MIA	MI, FL 33102		Sheet 1 of			
2. PlantTU	Address RKEY POINT		_				
P.	O. BOX 3088, FLORIC	OA CITY, FL 3303	4	Siemens	/ PO# B9	2691-01146	
	Address		·	Repair Orga	inization P.C	. No., Job No. etc.	
3. Work Perfor	med by FLORIDA PO	OWER & LIGHT	_	Type Code Symbol	Stamp	N/A	
Р.	O. BOX 3088, FLORIC	A CITY, FL 3303		Authorization No			
	Address		<u></u>	Expiration Date	·	N/A	
4. Identificatio	n of System	Reactor Co	oolant			Quality Gr	oup A
5. (a) Applicat	ole Construction Cod	ANSI B31.1	19 55 F	dition N/A	Addenda	. N/A c	nda Casa
	le Edition of Section						
	n of Components Re						
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other °- Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Mech. Snubbe	PSA	16253	N/A	4-1054	N/A	Replaced	No
Mech. Snubbe	r PSA	157 18	N/A	4-1054	N/A	Replacement	No
						,	
					İ	,	
7. Description	of WorkRepl	aced PSA-10 Me	chanical	Snubber at tag loc	ation 4-	1054.	
		₩					ř
							r
8. Tests Condu	4	Pneumatic		nal Operating Pres		Other	
	Pressure	psi	Test	Temp	Degree's	s F	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-027-4

	ofacturer's Data Reports to be altached
CERT	TIFICATE OF COMPLIANCE
We certify that the statements made in to the rules of the ASME Code, Section	n the report are correct and this replacement conform
Type Code Symbol Stamp	N/A
$\sim 2 \cdot l \cdot l$	N/A Expiration Date N/A Wift Saw Date T/U . 19 93
CERTI	IFICATE OF INSERVICE INSPECTION
I, the undersigned, holding a valid commiss	sion issued by the National Board of Boiler and Pressure Ves
Inspectors and the State or Province of	Dade County, Florida and employed by
Arkwright Mutual Insurance Compo	of Norwood, MA.
	01
have inspected the components described in	
	in this Owner's Report during theperiod May 1, 1993 , and state that to the best of my knowledge and belie
to May 5, 1993	in this Owner's Report during theperiod May 1, 1993
to <u>May 5, 1993</u> the Owner has performed examinations and	in this Owner's Report during theperiod May 1, 1993 , and state that to the best of my knowledge and belied taken corrective measures described in this Owner's Report
to May 5, 1993 the Owner has performed examinations and in accordance with the requirements of ASA	in this Owner's Report during theperiod May 1, 1993 , and state that to the best of my knowledge and belied taken corrective measures described in this Owner's Report
toMay 5, 1993 the Owner has performed examinations and in accordance with the requirements of ASA By signing this certificate neither the in	in this Owner's Report during theperiod May 1, 1993 , and state that to the best of my knowledge and belied taken corrective measures described in this Owner's Report ME Code, Section XI.
to May 5, 1993 the Owner has performed examinations and in accordance with the requirements of ASM By signing this certificate neither the inimplied, concerning the examinations and concerning the examinations.	in this Owner's Report during the period May 1, 1993 , and state that to the best of my knowledge and belied taken corrective measures described in this Owner's Report ME Code, Section XI. Inspector nor his employer makes any warranty, expressed or
to May 5, 1993 the Owner has performed examinations and in accordance with the requirements of ASM By signing this certificate neither the inimplied, concerning the examinations and conceither the inspector nor his employer shall	in this Owner's Report during the period May 1, 1993 , and state that to the best of my knowledge and belied taken corrective measures described in this Owner's Report ME Code, Section XI. Inspector nor his employer makes any warranty, expressed or corrective measures described in this Owners Report. Furthern II be liable in any manner for any personal injury or property
the Owner has performed examinations and in accordance with the requirements of ASM By signing this certificate neither the inimplied, concerning the examinations and concerning the examinat	in this Owner's Report during the period May 1, 1993 , and state that to the best of my knowledge and belied taken corrective measures described in this Owner's Report ME Code, Section XI. Inspector nor his employer makes any warranty, expressed or corrective measures described in this Owners Report. Furthern II be liable in any manner for any personal injury or property

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

1. Owne <u>r</u>	FLOR	RIDA POWER & LIGH	IT	_	Date <u>May</u> 19, 19	93		
	P,O.	BOX 029100, MIAN	AI, FL 33102		Sheet1 of	1		
2. Plant	TURK	EY POINT		_ '	Unit4			
	P.O.	BOX 3088, FLORID	A CITY, FL 33034	<u> </u>	Siemens /	PO# B9	2691-01146	
		Address			Repair Organi	zation P.C). No., Job No. etc.	
3. Work Per	forme	ed by FLORIDA PO	WER & LIGHT	_	Type Code Symbol Si	amp	N/A	
	P.O.	BOX 3088, FLORID	A CITY, FL 33034	1	Authorization No Expiration Date		N/A N/A	
4. Identifica	tion (Address of System	Reactor Co	oolant			Quality Gr	oup A
(b) Appli	cable	Edition of Section	XI Utilized for R	Repairs o	dition, N/A A r Replacements 1980 eplacement Compon), Editio		
Name of Componer		Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Mech. Snub	ber	PSA	11110	N/A	4-1055	N/A	Replaced	No
Mech. Snub	ber	PSA	7782	N/A	4-1055	N/A	Replacement	No
	•		·			_		
			ı					
ı								
					F			
		,,,,,	* ~					,
7. Descriptio	on of	WorkRepl	aced PSA-10 Me	chanical	Snubber at tag loca	tion 4-	1055.	
8. Tests Co	nduct	·	Pneumatic		inal Operating Presso		Other	,

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-028-4

	Replaced Snubber with	plicable Manufacturer's Date	a Reports to be attach	ed	ı
			<u></u> .		
			,		
		CERTIFICATE OF	F COMPLIANCE		
1					ī
We	certify that the statement	ts made in the repo	rt are correct and	d this <u>replace</u>	ment conform
	he rules of the ASME Coo			repair or rep	lacement
~	. 0. 1. 0. 1. 1.01		N/A		
туре	e Code Symbol Stamp		N/A		
O a1	lificale of Audhorianitos b	N/A	_		N/A
Ceri	tificate of Authorization N			piration Date ——	· · · · · · · · · · · · · · · · · · ·
Sigr	ned	Mart Sell Sen	ne Sife	Date	<u>/</u>
•	Owner or (Owner's Designee, Title			
,		CERTIFICATE OF	INSERVICE INSPE	CTION	
, the un	dersigned, holding a valid	id commission issued	d by the National	Board of Boiler o	and Pressure Vess
nspector	rs and the State or Provi	nce ofDo	ade County, Florie	da	and employed by
					n.al 14A
- F 2	<u>Arkwright Mutual Insura</u>	nce Company		of Norwo	od, MA.
	Arkwright Mutual Insura				
nave insp	pected the components d	described in this Own	er's Report durir	g theperiod Apr	il 27, 1993
nave insp	pected the components d May 5, 1993	described in this Own	er's Report durin d state that to th	g theperiod Apr e best of my kno	il 27, 1993 wledge and belief
nave insp o	pected the components d May 5, 1993 er has performed examin	described in this Own	er's Report durir d state that to th rrective measure	g theperiod Apr e best of my kno	il 27, 1993 wledge and belief
nave insp o	pected the components d May 5, 1993	described in this Own	er's Report durir d state that to th rrective measure	g theperiod Apr e best of my kno	il 27, 1993 wledge and belief
nave insp to he Owne	pected the components d May 5, 1993 er has performed examin	described in this Own, and nations and taken co	er's Report during the state that to the creative measure Section XI.	ng the period <u>Apr</u> e best of my kno s described in thi	il 27, 1993 wledge and belief s Owner's Report
have insp to he Owner n accord	pected the components d May 5, 1993 er has performed examin dance with the requireme	described in this Own . and nations and taken co ents of ASME Code. S ither the inspector na	ner's Report during the state that to the crective measure Section XI. or his employer in the control of the c	ng the period Apr e best of my kno s described in thi makes any warran	il 27, 1993 wledge and belief s Owner's Report ty, expressed or
he Owne n accord By si	pected the components d May 5, 1993 er has performed examin dance with the requireme igning this certificate nei	described in this Own , and nations and taken co ents of ASME Code, S ither the inspector nations and corrective a	ner's Report during the state that to the creative measure Section XI. or his employer in the contract of the	e best of my knows described in this makes any warranted in this Owners	il 27, 1993 wledge and belief s Owner's Report ty, expressed or Report. Furtherm
have inspliced in according to By simplied, neither the	pected the components d May 5, 1993 For has performed examin dance with the requirement igning this certificate neiforment concerning the examination	described in this Own , and nations and taken co ents of ASME Code, S ither the inspector notions and corrective to	er's Report during the state that to the state that to the state measure Section XI. The state of the state o	e best of my knows described in this makes any warranted in this Owners for any personal in	il 27, 1993 wledge and belief s Owner's Report ty, expressed or Report. Furtherm
he Owner n accord By simplied,	pected the components d May 5, 1993 For has performed examin dance with the requirement signing this certificate neiconcerning the examination the inspector nor his emp	described in this Own , and nations and taken co ents of ASME Code, S ither the inspector notions and corrective to	er's Report during the state that to the state that to the state measure Section XI. The state of the state o	e best of my knows described in this makes any warranted in this Owners for any personal in pection.	il 27, 1993 wledge and belief s Owner's Report ty, expressed or Report. Furtherm

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owne <u>r</u>	FLOR	NDA POWER & LIGH	e T	_	Date <u>May 20, 19</u>	93		
	P.O.	Name BOX 029100, MIAN	иI, FL 33102	_	Sheet 1 of	1		
<u> </u>		Address		_				
2. Plant	TURK	EY POINT		<u> </u>	Unit 4			······································
	P.O.	BOX 3088, FLORID	A CITY, FL 33034	<u>.</u>	WO# 93011			
		Address	W55 A LIGHT		Repair Organ	zation P.C	. No., Job No. etc.	
3. Work Per	form	ed by FLORIDA PO	WER & LIGHT		Type Code Symbol S			
	P.O.	BOX 3088, FLORID	A CITY, FL 33034		Authorization No		N/A N/A	
	-	Address		_	Expiration Date			
4. Identifica	ation	of System	Main Steam	<u>n</u>			Quality Gr	oup B
(b) Appli	cable	Edition of Section	XI Utilized for R	epairs o	dition. N/A A r Replacements 1980 eplacement Compon), Editio		
Name of Compone		Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Safety Valv	0	Consolidated	N/A	N/A	RV-4-1400	N/A	Replaced	No
7. Descripti	on of	WorkRepl	aced Bonnet stud	s and n	uts.			
8. Tests Co	nduci		Pneumatic psi		inal Operating Presso		Other	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-029-4

	's Data Reports to be attached
•	
CERTIFICA	TE OF COMPLIANCE
We certify that the statements made in the to the rules of the ASME Code, Section XI.	report are correct and this replacement conforn
Type Code Symbol Stamp	N/A
Certificate of Authorization No. N. Signed Mary Soffal Owner or Owner's Designee. Ith	Pervici Sph. Date 5/00 , 1993
•	E OF INSERVICE INSPECTION ssued by the National Board of Boiler and Pressure Vess
I, the undersigned, holding a valid commission is	
I, the undersigned, holding a valid commission is	ssued by the National Board of Boiler and Pressure Vess
I, the undersigned, holding a valid commission is Inspectors and the State or Province of Arkwright Mutual Insurance Company	ssued by the National Board of Boiler and Pressure Vess Dade County, Florida and employed by of Norwood, MA.
I, the undersigned, holding a valid commission is Inspectors and the State or Province of Arkwright Mutual Insurance Company have inspected the components described in this	Dade County, Florida and employed by of Norwood, MA. Owner's Report during the period April 21, 1993
I, the undersigned, holding a valid commission is Inspectors and the State or Province of Arkwright Mutual Insurance Company have inspected the components described in this Insurance Company	Dade County, Florida and employed by of Norwood, MA. Owner's Report during the period April 21, 1993 , and state that to the best of my knowledge and belief
I, the undersigned, holding a valid commission is Inspectors and the State or Province of Arkwright Mutual Insurance Company have inspected the components described in this toMay 20, 1993 the Owner has performed examinations and take	Dade County, Florida and employed by of Norwood, MA. Owner's Report during the period April 21, 1993 , and state that to the best of my knowledge and belief
I, the undersigned, holding a valid commission is Inspectors and the State or Province of Arkwright Mutual Insurance Company have inspected the components described in this toMay 20, 1993 the Owner has performed examinations and take in accordance with the requirements of ASME Co	Dade County, Florida and employed by of Norwood, MA. Owner's Report during the period April 21, 1993 , and state that to the best of my knowledge and belief on corrective measures described in this Owner's Report de, Section XI.
I, the undersigned, holding a valid commission is inspectors and the State or Province of	Dade County, Florida and employed by of Norwood, MA. Owner's Report during the period April 21, 1993 , and state that to the best of my knowledge and belief on corrective measures described in this Owner's Report de, Section XI.
I, the undersigned, holding a valid commission is Inspectors and the State or Province of Arkwright Mutual Insurance Company have inspected the components described in this to May 20, 1993 the Owner has performed examinations and take in accordance with the requirements of ASME Co By signing this certificate neither the inspect implied, concerning the examinations and correct	Dade County, Florida and employed by of Norwood, MA. Owner's Report during the period April 21, 1993 , and state that to the best of my knowledge and belief on corrective measures described in this Owner's Report de, Section XI. for nor his employer makes any warranty, expressed or this measures described in this Owners Report. Furtherm
I, the undersigned, holding a valid commission is Inspectors and the State or Province of	Dade County, Florida and employed by of Norwood, MA. Owner's Report during the period April 21, 1993 , and state that to the best of my knowledge and belief on corrective measures described in this Owner's Report de, Section XI. for nor his employer makes any warranty, expressed or this measures described in this Owners Report. Furtherm table in any manner for any personal injury or property
I, the undersigned, holding a valid commission is Inspectors and the State or Province of	Dade County, Florida and employed by of Norwood, MA. Owner's Report during the period April 21, 1993 , and state that to the best of my knowledge and belief on corrective measures described in this Owner's Report de, Section XI. for nor his employer makes any warranty, expressed or this measures described in this Owners Report. Furtherm table in any manner for any personal injury or property
I, the undersigned, holding a valid commission is Inspectors and the State or Province of Arkwright Mutual Insurance Company have inspected the components described in this to May 20, 1993 the Owner has performed examinations and take in accordance with the requirements of ASME Co By signing this certificate neither the inspect implied, concerning the examinations and correct	Dade County, Florida and employed by of Norwood, MA. Owner's Report during the period April 21, 1993 , and state that to the best of my knowledge and belief on corrective measures described in this Owner's Report de, Section XI. for nor his employer makes any warranty, expressed or this measures described in this Owners Report. Furtherm table in any manner for any personal injury or property

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner FLOR	RIDA POWER & LIGH	IT	(Date <u>May 20, 19</u>	993		
P.O.	BOX 029100, MIAN	AI, FL 33102		Sheet 1 of _	1		
TURI	Address KEY POINT						
2. Plant	Name			Jnit4			
P.O.	BOX 3088, FLORID	A CITY, FL 33032	-	WO# 9203		O# 0259 D. No., Job No. etc.	·
3. Work Perform	ed by FLORIDA PO	WER & LIGHT	7	Type Code Symbol S		11.41	
	Name			Authorization No		N/A	
P.O.	BOX 3088, FLORID	A CITY, FL 33034	<u></u> 1	Expiration Date		N/A	
4. Identification	of System	Main Stear	n			Quality Gr	oup B
5. (a) Applicable	Construction Code	a ANSI B31.1	19 55 E	dition. N/A	Addenda	ı. N/A Co	de Case
• • •	· · · · · · · · · · · · · · · · · · ·			r Replacements 198			
6. Identification	of Components Re	paired or Replace	ed and R	eplacement Compoi	nents	• • • • • • • • • • • • • • • • • • • •	
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Safety Valve	Consolidated	N/A	N/A	RV-4-1401	N/A	Replaced	No
•						,	
							1
7. Description of	WorkRepl	aced Bonnet stud	ls and n	uts.			
8. Tests Conduc	•	Pneumaticpsi		nal Operating Press		Other	,

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-030-4

Kellidi Ka	rer's Data Reports to be altached
OCENTRIO	NATE OF COURT IN NOT
CERTIFIC	CATE OF COMPLIANCE
We certify that the statements made in the to the rules of the ASME Code, Section XI.	repair or replacement
Type Code Symbol Stamp	N/A
$\sim 10^{11}$	N/A Expiration Date N/A Service Solve Date T/02 . 19 93 Title
	ATE OF INSERVICE INSPECTION issued by the National Board of Boiler and Pressure Vess
	Dade County, Florida and employed by
	of Norwood, MA.
	is Owner's Report during the period January 14, 1993
	_ , and state that to the best of my knowledge and belief
	ken corrective measures described in this Owner's Report
in accordance with the requirements of ASME C	
	octor nor his employer makes any warranty, expressed or
	ective measures described in this Owners Report. Furtherm
	liable in any manner for anypersonal injury or property
• •	,
damage or a loss of any kind arising from or	connected with the inspection.
Elinio & Bland	Factory Mutual Engineering Assoc Commissions NB 8230 (N) (I)

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT	,	Date <u>May 20, 19</u>	93		
Name P.O. BOX 029100, MIAMI, FL	33 102	Sheef ¹ of	1		
Address					
2. Plant TURKEY POINT	 .	Unit <u>4</u>			
P.O. BOX 3088, FLORIDA CITY	1, FL 33034	WO# 9203	<u> </u>		
Address		Repair Organ	nization P.O. N	lo., Job No. etc.	
3. Work Performed by FLORIDA POWER &		Type Code Symbol S			
P.O. BOX 3088, FLORIDA CITY		Authorization No Expiration Date		N/A N/A	
Address					
4. Identification of System	Main Steam			Quality Gr	oup B
5. (a) Applicable Construction Code ANS	SI B31.1 1 <u>955</u> E	dition, N/A	Addenda,_	N/A Co	de Case
(b) Applicable Edition of Section XI Ut	-	-		Winter 1981 A	ddenda
6. Identification of Components Repaired	or Replaced and R	leplacement Compor	nents		
Name of Name of Man	ufacturer National	Other	Year	Repaired,	ASME Code
	rial No. Board	Identification	Built	Replaced, r Replacement	Stamped (Yes or
			<u> </u>	Ropidcomoni	No)
Safety Valve Consolidated	N/A N/A	RV-4-1402	N/A	Replaced	No
					 -
]					
1				1	
		<u> </u>			
7. Description of Work Replaced E	Bonnet studs and n	uts.		3	
					
8. Tests Conducted: Hydrostatic	neumatic Nom	inal Operating Press	ure	Other	
,	. —		_		
Pressure	nsı Tas	Temp	vegree's F		

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-031-4

	Reports to be attached
_	
	•
CERTIFICATE OF	COMPLIANCE .
e certify that the statements made in the report	t are correct and this replacement conform
the rules of the ASME Code, Section XI.	repair or replacement
	N/A
pe Code Symbol Stamp	N/A
ertificate of Authorization, NoN/A	Expiration Date N/A
	$\sim \alpha$
gned Januar Man Suffet St. Owner or Owner's Designee, Tille	Prove Syl Date 5/22 , 19 93
CERTIFICATE OF	INSERVICE INSPECTION
undersigned, holding a valid commission issued	by the National Board of Boiler and Pressure Vess
	de County, Florida and employed by
Arkwright Mutual Insurance Company	" · · · · · · · · · · · · · · · · · · ·
	er's Report during the periodJanuary 14, 1993
	state that to the best of my knowledge and belief
	rective measures described in this Owner's Report
ordance with the requirements of ASME Code, So	
	or his employer makes any warranty, expressed or
	neasures described in this Owners Report. Furtherm
	in any manner for anypersonal injury or properly
e or a loss of any kind arising from or connect	
	Factory Mutual Engineering Assoc

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner FLOR	RIDA POWER & LIGH	T	'	Date <u>May 20, 199</u>	3				
P.O.	Name BOX 029100, MIAN	11, FL 33102		Sheet1 of	1				
2. Plant TURK	Address (EY POINT Name			Unit 4					
P.O.	BOX 3088, FLORID	A CITY, FL 33034	<u>4</u>	WO# 93008534 PWO# 5606					
3. Work Perform	ou o <u>y</u>	WER & LIGHT	1	Repair Organiz Type Code Symbol Sto		. No., Job No. elc. N/A			
P.O.	Name BOX 3088, FLORID Address	A CITY, FL 33034		Authorization No. N/A Expiration Date N/A					
4. Identification	of System	Main Stear	n			Quality Gr	oup B		
(b) Applicable	Edition of Section	XI Utilized for R	Repairs o	dition, N/A A r Replacements 1980 eplacement Compone	Editio				
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)		
Safety Valve	Consolidated	N/A	N/A	RV-4-1410	N/A	Replaced	No		
	ν								
•							,		
·····									
····						t.			
7. Description of	WorkReplo	aced Bonnel stud	ts and n	uts.	·				
8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure Other Pressurepsi Test Temp, Degree's F									

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-032-4

	Applicable Manufacturer's Data Reports to be attached
	
·	CERTIFICATE OF COMPLIANCE
1 1/	rtify that the statements made in the report are correct and this replacement conform
_	rtify that the statements made in the report are correct and this repair or replacement conform rules of the ASME Code, Section XI.
10 1110	Tales of the Asmic code, Section Al.
Туре (Code Symbol Stamp N/A
	•
Certifi	cate of Authorization No. N/A Expiration Date N/A
	001/ -110/140 O1
Signed	Owner or Owner's Designee, Title
	C / Owner & Designee, Tille
	CEPTIFICATE OF INSERVICE INSPECTION
	CERTIFICATE OF INSERVICE INSPECTION
	rsigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse
Inspectors	rsigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse
Inspectors A	rsigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse and the State or Province of Dade County, Florida and employed by
Inspectors A	rsigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse and the State or Province of Dade County, Florida and employed by rkwright Mutual Insurance Company of Norwood, MA.
Inspectors A have inspec	rsigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse and the State or Province of
have inspectors to	rsigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse and the State or Province of
have inspectors to the Owner I	rsigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse and the State or Province of
have inspect to the Owner I in accordan	rsigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse and the State or Province of
have inspectors to the Owner I in accordan By sign implied, con	rsigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse and the State or Province of
have inspectors to the Owner I in accordan By sign implied, conneither the	and the State or Province of
have inspectors to the Owner I in accordan By sign implied, conneither the	rsigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse and the State or Province of
have inspectors to the Owner I in accordan By sign implied, conneither the	and the State or Province of

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT				Date May 20, 1993						
P.O.	BOX 029100, MIAN	41, FL 33102	•	Sheet ¹ of	1					
2. Plani	Address (EY POINT Name		_	Unit4						
P.O.	BOX 3088, FLORID	A CITY, FL 33034	<u>. </u>	W0# 920327						
3. Work Perform	Address ed by FLORIDA PO	WER & LIGHT	1	Repair Organiz Type Code Symbol Sto		No., Job No. elc.				
	Ņame			Authorization No		N/A				
P.O.	BOX 3088, FLORID	A CITY, FL 33034	<u>-</u> 1	Expiration Date		N/A				
4. Identification	of System	Main Stear	<u>n</u>			Quality Gr	oup B			
5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda 6. Identification of Components Repaired or Replaced and Replacement Components										
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)			
Safety Valve	Consolidated	N/A	N/A	RV-4-1411	N/A	Replaced	No			
										
1										
						'				
				, •			•			
				e						
4			,	;						
7. Description of WorkReplaced Bonnet studs and nuts.										
 										
8. Tests Conduct	8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure Other									
	11035016	psi	1 921	Temp D	yiaa s	•				

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-033-4

	nufacturer's Data Reports to be attached "
	·
CE	RTIFICATE OF COMPLIANCE
We certify that the statements made to the rules of the ASME Code, Section	
Type Code Symbol Stamp	N/A
Certificate of Authorization No. Signed	N/A Expiration Date N/A Date 5-/20 , 19 83
	TIFICATE OF INSERVICE INSPECTION
l, the undersigned, holding a valid commis	ssion issued by the National Board of Boiler and Pressure Vesse
I, the undersigned, holding a valid commis	ssion issued by the National Board of Boiler and Pressure Vesse Dade County, Florida and employed by
I, the undersigned, holding a valid commis Inspectors and the State or Province of Arkwright Mutual Insurance Comp have inspected the components described	ssion issued by the National Board of Boiler and Pressure Vesse Dade County, Florida and employed by pany of Norwood, MA. in this Owner's Report during the period January 5, 1993
I, the undersigned, holding a valid commisted inspectors and the State or Province of	Dade County, Florida and employed by pany of Norwood, MA. In this Owner's Report during the period January 5, 1993 , and state that to the best of my knowledge and belief.
I, the undersigned, holding a valid commissions. Inspectors and the State or Province of	Dade County, Florida and employed by of Norwood, MA. In this Owner's Report during the period January 5, 1993 and state that to the best of my knowledge and belief and taken corrective measures described in this Owner's Report
I, the undersigned, holding a valid commissions and the State or Province of	Dade County, Florida and employed by of Norwood, MA. In this Owner's Report during the period January 5, 1993 and state that to the best of my knowledge and belief, and taken corrective measures described in this Owner's Report SME Code, Section XI.
I, the undersigned, holding a valid commissions and the State or Province of	Dade County, Florida and employed by of Norwood, MA. In this Owner's Report during the period January 5, 1993 and state that to the best of my knowledge and belief, and taken corrective measures described in this Owner's Report SME Code, Section XI. inspector nor his employer makes any warranty, expressed or
Inspectors and the State or Province of	Dade County, Florida and employed by of Norwood, MA. In this Owner's Report during the period January 5, 1993 and state that to the best of my knowledge and belief, and taken corrective measures described in this Owner's Report SME Code, Section XI. inspector nor his employer makes any warranty, expressed or corrective measures described in this Owner's Report.
Inspectors and the State or Province of	Dade County, Florida and employed by of Norwood, MA. In this Owner's Report during the period. January 5, 1993 In and state that to the best of my knowledge and belief and taken corrective measures described in this Owner's Report SME Code, Section XI. Inspector nor his employer makes any warranty, expressed or corrective measures described in this Owner's Report. Furthermost of the liable in any manner for any personal injury or property
Inspectors and the State or Province of	Dade County, Florida and employed by of Norwood, MA. In this Owner's Report during the period. January 5, 1993 In and state that to the best of my knowledge and belief and taken corrective measures described in this Owner's Report SME Code, Section XI. Inspector nor his employer makes any warranty, expressed or corrective measures described in this Owner's Report. Furthermost of the liable in any manner for any personal injury or property

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner FLOR	RIDA POWER & LIGH	IT	(Date <u>May 20, 199</u>	3				
P.O.	BOX 029100, MIAN	_	Sheet 1 of	1					
	Address	,							
2. PlantTURE	KEY POINT			Unit4					
P.O. BOX 3088, FLORIDA CITY, FL 33034				WO# 930128			_		
	Address			Repair Organiz	tation P.O	. No., Job No. etc.			
3. Work Perform	ed by FLORIDA PO	WER & LIGHT		Type Code Symbol Stamp N/A					
P.O.	BOX 3088, FLORID	A CITY, FL 33034	4	Authorization No Expiration Date		A1 /A			
4 13- 4****1*	Address	Vain Ston		- April 411011 5 4170					
4. Identification	of System	wain Stear	n			Quality Gr	oup 8		
(b) Applicable	Edition of Section	XI Utilized for R	Repairs o	dition <u>, N/A</u> A r Replacements 1980 eplacement Compone	, Editio				
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)		
Safety Valve	Consolidated	N/A	N/A	RV-4-1412	N/A	Replaced	No		
					·				
		! :							
			<u> </u>						
						,			
			·						
							<u></u>		
7. Description of	WorkReplo	aced Bonnet stud	ls and n	uts.					
		****	··			4			
8. Tests Conduct	•	Pneumatic		inal Operating Pressu		Other	•		
8. Tests Conduct	•			. •			•		

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-034-4

Applicable Manufactu	rer's Data Reports to be alta	thed
,		
•	,	
CERTIFIC	CATE OF COMPLIANCE	
We certify that the statements made in the to the rules of the ASME Code, Section XI.		nd this replacement conform
Type Code Symbol Stamp	N/A	
Signed Owner or Owner's Designes.	A Dewie Of	N/A N/A
CERTIFICA	ATE OF INSERVICE INSP	PECTION
, the undersigned, holding a valid commission	,	
nspectors and the State or Province of		
Arkwright Mutual Insurance Company		
nave inspected the components described in th		
May 00 4007		he best of my knowledge and belief
he Owner has performed examinations and ta		
n accordance with the requirements of ASME (or cooming of mining of more of moreon
By signing this certificate neither the inspe		makes any warranty expressed or
mplied, concerning the examinations and corr		
neither the inspector nor his employer shall be		•
damage or a loss of any kind arising from or		
1 . 1 // 2	Tomoston mili ilio ili	ob a su a un
Juli A Standard Inspector's Signature	Commissions	Factory Mutual Engineering Assoc NB 8230 (N) (I) National Board, State, Province, and Endorsem

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner FLOR	RIDA POWER & LIGH	ıT		Date <u>May 20, 199</u>	3				
P.O.	Name BOX 029100, MIAN	AI, FL 33102	•	Sheet 1 of	1				
2. PlantTURK	Address (EY POINT		-	Unif4					
P.O. BOX 3088, FLORIDA CITY, FL 33034				WO# 92031			·		
- w <i>-</i>	Address	WED & LICHT	_			. No., Job No. etc.			
3. Work Performed by FLORIDA POWER & LIGHT				Type Code Symbol StampN/A Authorization NoN/A					
P.O.	BOX 3088, FLORID	A CITY, FL 33034	1	Expiration Date		N/A			
4. Identification	Address of System	Main Stear	m			Quality Gr	oup B		
(b) Applicable	Edition of Section	XI Utilized for R	Repairs o	dition <u>. N/A</u> A r Replacements 1980 eplacement Compone	, Editio		ddenda		
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)		
Safety Valve	Consolidated	N/A	N/A	RV-4-1413	N/A	Replaced	No		
					ļ				
•									
		<u> </u>		-					
7. Description of	Work Repl	aced Bonnet stud	ls and n	uts.					
									
8. Tests Conduct		Pneumatic		nal Operating Pressu		Other			

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-035-4

Remarks_	Replaced pressure retaining studs and nuts, no welding performed.
	Applicable Manufacturer's Data Reports to be attached
•	
	CERTIFICATE OF COMPLIANCE
	•
We c	certify that the statements made in the report are correct and this replacement conform
to th	ne rules of the ASME Code, Section XI.
Tunn	Cade Symbol Stamp N/A
туре	Code Symbol StampN/A
Conti	ificate of Authorization No. N/A Expiration Date N/A
Certi	ificate of Authorization No. N/A Expiration Date
Sign	ed Shanger Mant Soft Service Sh Date 5/22, 19 93
· ·	Owner or Owner's Designee, Tille
· · · · · · · · · · · · · · · · · · ·	
	CERTIFICATE OF INSERVICE INSPECTION
I, the und	dersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vess
	s and the State or Province of Dade County, Florida and employed by
	Arkwright Mutual Insurance Company of Norwood, MA.
	pected the components described in this Owner's Report during theperiod January 5, 1993
	May 20, 1993 , and state that to the best of my knowledge and belief
	r has performed examinations and taken corrective measures described in this Owner's Report
in accord	ance with the requirements of ASME Code, Section XI.
By sig	gning this certificate neither the inspector nor his employer makes any warranty, expressed or
implied, c	concerning the examinations and corrective measures described in this Owners Report. Furtherm
neither th	e inspector nor his employer shall be liable in any manner for anypersonal injury or property
damage d	or a loss of any kind arising from or connected with the inspection.
Alle	Commissions Factory Mutual Engineering Associated NB 8230 (N) (I)
/ ,,	Inspector's Signature National Board, State, Province, and Endorsem

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner FLOR	RIDA POWER & LIGH	ır		Date	May 20, 19	93			
P.O.	Name BOX 029100, MIAN	AI, FL 33102	_	Shaai	1 of	1			
	Address			211661					
2. PlantTURK	CEY POINT		_	Unit _	4			-	
P.O. BOX 3088, FLORIDA CITY, FL 33034				W0# 93012821 PW0# 6404					
	Address		_		Repair Organ	ization P.C	. No., Job No. elc.		
3. Work Performed by FLORIDA POWER & LIGHT				Type Code Symbol Stamp N/A					
Name P.O. BOX 3088, FLORIDA CITY, FL 33034				Authorization No. N/A					
	Address		_	Expiratio	on Date				
4. Identification	of System	Main Stear	n				Quality Gr	oup B	
5. (a) Applicable	Construction Code	ANSI B31.1	19 55 E	dition,	N/A	Addenda	. N/A Co	de Case	
	Edition of Section								
6. Identification	of Components Re	paired or Replace	ed and R	eplacem	ent Compon	ents			
Name of	Name of	Manufacturer	National		Other		Repaired,	ASME Code	
Component	Manufacturer	Serial No.	Board	•	other ntification	Year Built	Replaced,	Stamped (Yes or	
			No.				or Replacement	No)	
Safety Valve	Consolidated	N/A	N/A	RV-	4-1403	N/A	Replaced	No	
		,				 			
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		ı.							
		1							
						1			
7.6 /	w . Panle	aced Bonnet stud	s and n	uie					
7. Description of	WorkKepit	acea boiller stad	s dild il	u13.					
			 1						
8. Tests Conduct	ed: Hydrostatic	Pneumatic	·Nom	inal Ope	rating Press	ure	Other	1	
	Prassura	psi	Toe	Temn		Dearee's	: F		
	11033416	psi	162	i i emp.		ogi ee s	•		

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-036-4

	Applicable Manufacturer's Data Reports to be attached
	Applicable wandidcturer 2 paid kepons to be dilactied
	OFFITTE OF COVER AND
	CERTIFICATE OF COMPLIANCE
We	certify that the statements made in the report are correct and this replacement conform
	the rules of the ASME Code, Section XI.
Тур	pe Code Symbol StampN/A
Cei	tificate of Authorization No. N/A Expiration Date N/A
Sig	ned Stanca Wat Sept Service Sh Date 5/00 , 19 92
	Owner or Owner's Designee, Title
· · · · · · · · · · · · · · · · · · ·	
	CERTIFICATE OF INSERVICE INSPECTION
I. the w	
	ndersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vesse
	ndersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessers and the State or Province of Dade County, Florida and employed by
Inspecto	ndersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessers and the State or Province of Dade County, Florida and employed by of Norwood, MA.
Inspecto	ndersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessers and the State or Province of
Inspecto	andersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessers and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. Spected the components described in this Owner's Report during the period May 1, 1993
Inspecto have ins	ndersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessers and the State or Province of
Inspecto have ins	ndersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessers and the State or Province of
have instance in the Own	Arkwright Mutual Insurance Company Spected the components described in this Owner's Report during the period May 1, 1993 May 20, 1993 And state that to the best of my knowledge and belief, and performed examinations and taken corrective measures described in this Owner's Report during the period May 1, 1993 May 20, 1993 And state that to the best of my knowledge and belief, and performed examinations and taken corrective measures described in this Owner's Report dance with the requirements of ASME Code, Section XI.
have instance to	ndersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessers and the State or Province of
have instance the Own in accor	Arkwright Mutual Insurance Company Spected the components described in this Owner's Report during the period May 1, 1993 May 20, 1993 And state that to the best of my knowledge and belief, and performed examinations and taken corrective measures described in this Owner's Report during the period May 1, 1993 May 20, 1993 And state that to the best of my knowledge and belief, and performed examinations and taken corrective measures described in this Owner's Report dance with the requirements of ASME Code, Section XI.
have instance in according to By simplied,	Arkwright Mutual Insurance Company May 20, 1993 The has performed examinations and taken corrective measures described in this Owner's Report during the period in this Owner's Report during the best of my knowledge and belief, and state that to the best of my knowledge and belief, and separate with the requirements of ASME Code, Section XI.
have instance in according the By simplied, neither	ndersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessers and the State or Province of
have instance in according to By simplied, neither	Arkwright Mutual Insurance Company Arkwright Mutual Insurance Company May 20, 1993 The has performed examinations and taken corrective measures described in this Owner's Report during the requirements of ASME Code, Section XI. Signing this certificate neither the inspector nor his employer makes any warranty, expressed or concerning the examinations and corrective measures described in this Owner's Report during the examinations and corrective measures described in this Owner's Report dance with the requirements of ASME Code, Section XI. Signing this certificate neither the inspector nor his employer makes any warranty, expressed or concerning the examinations and corrective measures described in this Owners Report. Furthermost the inspector nor his employer shall be liable in any manner for anypersonal injury or property or a loss of any kind arising from or connected with the inspection.
have instance in according the By simplied, neither	ndersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessers and the State or Province of

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1.	Owne <u>r</u>	FLOF	RIDA POWER & LIGH	IT		Date	May 20,	1993		
		P.O.	Name BOX 029100, MIA	MI, FL 33102			1 of	1		
_		TUR	Address (EY POINT		_	-	_			
2.	Plant		BOX 3088, FLORID	A CITY EL 7707	_	Unit	4	40055 000	10 5 4 4 0	<u></u>
		1.0.	Address	A CITT, PL 3303	-			12855 PW	0. No., Job No. etc.	
3.	Work Peri	form	ed by FLORIDA PO	WER & LIGHT		Type C	ode Symbol	Stamp	N/A	
			BOX 3088, FLORID		_	Authori	zation No		N/A	
		1.0.	Address	A CITT, FE 3303	<u>•</u>	Expirat	ion Date		N/A	
4.	Identifica	tion	of System	Main Stear	<u> </u>				Quality G	roup B
5.	(a) Applio	able	Construction Code	9 ANSI B31.1	19 55 E	dition.	N/A	Addendo	. N/A C	ode Case
	(b) Applic	:able	Edition of Section	XI Utilized for R	Repairs o	r Repla	cements 19	80, Editio		
6.	Identifical	ion	of Components Re	paired or Replace	ed and R	eplace	ment Comp	onents		
	Name of Componer	nt	Name of Manufacturer	Manufacturer Serial No.	National Board No.	1	Other entification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Sa	ifety Valve		Consolidated	N/A	N/A	RV	-4-1405	N/A	Replaced	No
				r			•			
							,			
				,						
7	Dogg-i-i-		World Rent	aced Bonnet stud	s and n	uts.				
/.	Descriptio	n Oi	MOLK WADI	2000 00111101 3140	s dila M					
					l					
8.	Tests Con	duct	ed: Hydrostatic	Pneumatic	Nomi	nal Op	erating Pres	ssure	Other	u.
			Pressure	psi	Test	Temp		Degree's	F	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-037-4

Remarks Applicable Manufacturer's	Data Reports to be attached
CERTIFICATE	OF COMPLIANCE
We certify that the statements made in the re	
to the rules of the ASME Code, Section XI.	repair or replacement
	•
Type Code Symbol Stamp	N/A
Certificate of Authorization No. N/A	Expiration DateN/A
MM/ 20140/14	.0 01
Signed Owner or Owner's Designee, Title	Service Soft Date 5/22 . 19 93
Owner or Owner's Designee, time	
CERTIFICATE	OF INSERVICE INSPECTION
I, the undersigned, holding a valid commission issu	ued by the National Board of Boiler and Pressure Vess
Inspectors and the State or Province of	Dade County, Florida and employed by
· · · · · · · · · · · · · · · · · · ·	of Norwood, MA.
have inspected the components described in this O	
to May 20, 1993	and state that to the best of my knowledge and belief
the Owner has performed examinations and taken	corrective measures described in this Owner's Report
in accordance with the requirements of ASME Code	, Section XI.
in accordance with the requirements of ASME Code By signing this certificate neither the inspector	e, Section XI. nor his employer makes any warranty, expressed or
By signing this certificate neither the inspector	nor his employer makes any warranty, expressed or
By signing this certificate neither the inspector implied, concerning the examinations and correctiv	nor his employer makes any warranty, expressed or
By signing this certificate neither the inspector implied, concerning the examinations and correctiv	nor his employer makes any warranty, expressed or remeasures described in this Owners Report. Furthermole in any manner for anypersonal injury or property
By signing this certificate neither the inspector implied, concerning the examinations and corrective neither the inspector nor his employer shall be liab	nor his employer makes any warranty, expressed or remeasures described in this Owners Report. Furthermole in any manner for anypersonal injury or property

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As	Required	by the	Provisions	of th	e ASME	Code	Section	ΧI

1. Owner FLOR	RIDA POWER & LIGH	T		Date <u>May 20, 199</u>	3		
P.O.	BOX 029100, MIAN	11, FL 33102	;	Sheet 1 of	1		
2. Plant	Address (EY POINT Name BOX 3088, FLORID	A CITY FI 3303/	_ '	Unit 4 WO# 920424		0+ 1757	
	Address	A CIII, FL 33032	<u>-</u>			. No., Job No. etc.	
3. Work Perform	· · · · · · · · · · · · · · · · · · ·	WER & LIGHT		Type Code Symbol Sto	mp	N/A	
P.O.	Name BOX 3088, FLORID	A CITY, FL 33034	•	Authorization No		A1 / A	
	Address			Expiration Date	·····		
4. Identification	of System	Main Stear	<u>n</u>			Quality Gr	oup B
(b) Applicable	Edition of Section	XI Utilized for R	epairs o	dition. N/A A r Replacements 1980 eplacement Compone	Edition		
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Safety Valve	Consolidated	N/A	N/A	RV-4-1406	N/A	Replaced	No
						1	
17				, ,			
				`			
		, च					
7. Description of	WorkReplo	aced Bonnet stud	ls and n	uts.			
No.				1			
8. Tests Conduct	•	Pneumatic		inal Operating Pressu		Other	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-038-4

CERTIFICATE OF COMPLIANCE We certify that the statements made in the report are correct and this replacement to the rules of the ASME Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Expiration Date N/A Signed Signed Signed State of Authorization No. N/A Expiration Date N/A CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Inspectors and the State or Province of Dade County, Florida and employe Arkwright Multual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during theperiod September 18, to May 20, 1993, and state that to the best of my knowledge and the Owner has performed examinations and taken corrective measures described in this Owner's Report. Further the inspector nor his employer shall be liable in any manner for anypersonal injury or propridamage or a loss of any kind arising from or connected with the inspection.	Repl	laced pressure retaining stud		
We certify that the statements made in the report are correct and this replacement to the rules of the ASME Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Expiration Date N/A Signed N/A CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Inspectors and the State or Province of Dade County, Florida and employee Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during theperiod September 18, to May 20, 1993, and state that to the best of my knowledge and if the Owner has performed examinations and taken corrective measures described in this Owner's Report accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed implied, concerning the examinations and corrective measures described in this Owners Report. Further the inspector nor his employer shall be liable in any manner for anypersonal injury or proper.		Applicable Manuf	acturer's Data Reports to be alto	ached
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Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Expiration Date N/A Signed Signed Symbol Stamp N/A CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Inspectors and the State or Province of Dade County, Florida and employe Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period September 18, to May 20, 1993 , and state that to the best of my knowledge and the Owner has performed examinations and taken corrective measures described in this Owner's Report. By signing this certificate neither the inspector nor his employer makes any warranty, expressed implied, concerning the examinations and corrective measures described in this Owner's Report. Further the inspector nor his employer makes any warranty, expressed implied, concerning the examinations and corrective measures described in this Owner's Report. Further the inspector nor his employer makes any warranty, expressed implied, concerning the examinations and corrective measures described in this Owner's Report. Further the inspector nor his employer shall be liable in any manner for any personal injury or proper				
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Certificate of Authorization No. N/A Expiration Date N/A Signed	to the rule	s of the ASME Code, Section	XI.	· ·
Certificate of Authorization No. N/A Expiration Date N/A Signed	Type Code	Symbol Stamp	N/A	
Signed Certificate of Inservice Inspection Certificate of Inservice Inspection I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Inspectors and the State or Province of Dade County, Florida and employe Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period September 18, to May 20, 1993, and state that to the best of my knowledge and the Owner has performed examinations and taken corrective measures described in this Owner's Re in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed implied, concerning the examinations and corrective measures described in this Owners Report. Further the inspector nor his employer shall be liable in any manner for any personal injury or proper	.,,,,			
CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Inspectors and the State or Province of	Certificate	of Authorization/No	N/A	Expiration DateN/A
CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Inspectors and the State or Province of		7/1//	n = 0	
CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Inspectors and the State or Province of	Signed	lot offuncias / Kut	Sfot Server Spi	Date
I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Inspectors and the State or Province of		Owner or Owner's Design	hee, Tille	
I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Inspectors and the State or Province of				
Inspectors and the State or Province of Dade County, Florida and employe Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period September 18, to May 20, 1993, and state that to the best of my knowledge and the Owner has performed examinations and taken corrective measures described in this Owner's Rein accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed implied, concerning the examinations and corrective measures described in this Owners Report. Further the inspector nor his employer shall be liable in any manner for any personal injury or property.	th.	CERTI	FICATE OF INSERVICE INS	PECTION
Inspectors and the State or Province of Dade County, Florida and employe Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period September 18, to May 20, 1993, and state that to the best of my knowledge and the Owner has performed examinations and taken corrective measures described in this Owner's Rein accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed implied, concerning the examinations and corrective measures described in this Owners Report. Further the inspector nor his employer shall be liable in any manner for any personal injury or property.	the undersign	ed, holding a valid commiss	ion issued by the Nation	al Board of Boiler and Pressure Vesse
Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during theperiod September 18. to May 20, 1993, and state that to the best of my knowledge and the Owner has performed examinations and taken corrective measures described in this Owner's Re in accordance with the requirements of ASME Code, Section XI. By signing this certificate neither the inspector nor his employer makes any warranty, expressed implied, concerning the examinations and corrective measures described in this Owners Report. Further the inspector nor his employer shall be liable in any manner for any personal injury or property.				
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implied, concerning the examinations and corrective measures described in this Owners Report. Further the inspector nor his employer shall be liable in any manner for anypersonal injury or property.				
neither the inspector nor his employer shall be liable in any manner for anypersonal injury or prope				*
				·
damage or a loss of any kind arising from or connected with the inspection.	either the insp	ector nor his employer shall	be liable in any manner	r for anypersonal injury or property
	amage or a lo	ss of any kind arising from	or connected with the in	nspection.
Factory Mutual Engineering /	hu. : 1	////	<u>-</u>	Factory Mutual Engineering Assoc
(MMC) Lift an Commissions NB 8230 (N) (I)	guuce)	Inspector's Signature	Commissions	

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Ow	ne <u>r</u> FLOR	RIDA POWER & LIGH	ır		Date <u>May</u> 20, 19	93		
	P.O.	Name BOX 029100, MIAN	AI, FL 33102		Sheet 1 of _	1		
2 01-	TURK	Address (EY POINT		_			· · · · · · · · · · · · · · · · · · ·	
2. Pla		Name Name	4 OITY CL 7707		<u> </u>		0 5.100	
	۲.0.	BOX 3088, FLORID	A CITT, FL 33034		WO# 93012		O# 6402 . No., Job No. etc.	
3. Wo	rk Perform	ed by FLORIDA PC	WER & LIGHT		Type Code Symbol S			
	P.O.	Name BOX 3088, FLORID	A CITY, FL 33034		Authorization No		N/A	
		Address		<u>·</u>	Expiration Date		IV/ A	
4. Ide	entification	of System	Main Steam	m		,	Quality Gr	onb B
(b)) Applicable	Edition of Section	XI Utilized for R	Repairs o	dition, N/A A r Replacements 1980 Replacement Compon), Editio		
	ame of mponent	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Safet	y Valve	Consolidated	N/A	N/A	RV-4-1408	N/A	Replaced	No
,	•							
	el			,				
		1	a.					
					1			
					,			
7. De:	scription of	WorkReplo	aced Bonnet stud	ls and n	uts.			
8. Te:	sts Conduct	•	Pneumatic psi	Nomi	inal Operating Presso		Other	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-039-4

Applicable Manufacti	urer's Data Reports to be atlac	ned
,		
·		
•		
CERTIFI	CATE OF COMPLIANCE	
We certify that the statements made in the to the rules of the ASME Code, Section X		nd this replacement conform
Type Code Symbol Stamp	N/A	
Certificate of Authorization No.	N/A E	xpiration Date N/A
Signed On Infrances / C.T. Owner or Owner's Designee	Sept Service Sp	Date <u>5/22</u> , 19 <u>93</u>
, omit a omit o outgine		
CERTIFIC	CATE OF INSERVICE INSP	ECTION
, the undersigned, holding a valid commission	n issued by the Nationa	Il Board of Boiler and Pressure Vess
nspectors and the State or Province of	Dade County, Flor	ida and employed by
Arkwright Mutual Insurance Company	<u>, </u>	of Norwood, MA.
nave inspected the components described in t	his Owner's Report dur	ing theperiod May 1, 1993
	, and state that to t	he best of my knowledge and belief
o <u>May 20, 1993</u>		
o May 20, 1993 he Owner has performed examinations and to	aken corrective measur	
o May 20, 1993 he Owner has performed examinations and to n accordance with the requirements of ASME	aken corrective measur Code, Section XI.	es described in this Owner's Report
o May 20, 1993 he Owner has performed examinations and to n accordance with the requirements of ASME By signing this certificate neither the insp	oken corrective measur Code, Section XI. ector nor his employer	es described in this Owner's Report makes any warranty, expressed or
o May 20, 1993 he Owner has performed examinations and to n accordance with the requirements of ASME By signing this certificate neither the insp mplied, concerning the examinations and core	oken corrective measur Code, Section XI. ector nor his employer rective measures descr	es described in this Owner's Report makes any warranty, expressed or ibed in this Owners Report. Furtherm
May 20, 1993 he Owner has performed examinations and to accordance with the requirements of ASME By signing this certificate neither the inspection of the examinations and corneither the inspector nor his employer shall be	oken corrective measur Code, Section XI. ector nor his employer rective measures descri e liable in any manner	es described in this Owner's Report makes any warranty, expressed or ibed in this Owners Report. Furtherm for anypersonal injury or property
May 20, 1993 he Owner has performed examinations and to accordance with the requirements of ASME By signing this certificate neither the inspection of the examinations and corneither the inspector nor his employer shall be	oken corrective measur Code, Section XI. ector nor his employer rective measures descri e liable in any manner	es described in this Owner's Report makes any warranty, expressed or ibed in this Owners Report. Furtherm for anypersonal injury or property spection.
to May 20, 1993 the Owner has performed examinations and to in accordance with the requirements of ASME	oken corrective measur Code, Section XI. ector nor his employer rective measures descri e liable in any manner	es described in this Owner's Report makes any warranty, expressed or ibed in this Owners Report. Furtherm for anypersonal injury or property

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner	FLOR	RIDA POWER & LIGH	ıT		Date	May 20) , 199:	3		
	P.O.	Name BOX 029100, MIAN	AI, FL 33102		Sheet	1 0	of	1		
	THE	Address YEV POINT								
2. Plant	TORF	(EY POINT		_ '	Unit _		<u> </u>			
	P.O.	BOX 3088, FLORID	A CITY, FL 33034	<u> </u>					0# 0263	
			WED & LICHT			•	•		. No., Job No. etc.	
3. Work P	erform	ed by FLORIDA PO	WER & LIGHT			de Symb				
	P.O.	BOX 3088, FLORID	A CITY, FL 33034	<u>+</u>	Autnoriz Expiratio	ation No on Date	·		N/A	
		Address	Vain Stone							
		of System							Quality Gr	. —
		Construction Code								
		Edition of Section of Components Re		-	-				n, Winter 1981 A	ddenda
		or components ke	Pairea or Replace	i and k	epiacen	Teni Con	uboue:	115		ASME
Name		Name of	Manufacturer	National Board		Other		Year	Repaired,	Code Stamped
Compor	nent	Manufacturer	Serial No.	No.	Idei	ntificatio	n	Built	Replaced, or Replacement	(Yes or
C. (.) V.									_	No)
Safety Val	Ive	Consolidated	N/A	N/A	RV-	-4 1407		N/A	Replaced	No
							Ì			
										
``										
			41							
······································										
								-		
1		1			·		1		· · · · · · · · · · · · · · · · · · ·	
7. Descrip	ion of	Work Repla	aced Bonnet stud	ls and n	uts.					
•					I					
0 Tanka 0	ا د د المسم	. المام المام المام المام المام المام المام المام المام المام المام المام المام المام المام المام المام المام		–					Other	
8. Tests C	onduci	ed: Hydrostatic	Pneumatic_	Nomi	inai Upe	rating P	ressur	e	Other []	
		Pressure	psi	Test	Temp_		De	gree's	F	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-040-4

	Replaced pressure retaining studs and nuts, no welding performed. Applicable Manufacturer's Data Reports to be attached
	*
	CERTIFICATE OF COMPLIANCE
	ertify that the statements made in the report are correct and this replacement conform
to th	e rules of the ASME Code, Section XI.
Type	Code Symbol Stamp N/A
1750	Code Symbol StampN/A
Conti	figate of Authorization No. N/A 5 N/A
Cern	Expiration Date
Signe	
_	Owner or Owner's Designee, Title
	CERTIFICATE OF INSERVICE INSPECTION
, the und	ersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vess
	and the State or Province of Dade County, Florida and employed by
	Arkwright Mutual Insurance Company of Norwood, MA.
ICIVA IDSD	
	ected the components described in this Owner's Report during the period January 5, 1993
·	May 20, 1993 , and state that to the best of my knowledge and believe
he Owner	May 20, 1993 , and state that to the best of my knowledge and believed has performed examinations and taken corrective measures described in this Owner's Report
he Owner	May 20, 1993 , and state that to the best of my knowledge and believe
he Owner	May 20, 1993 , and state that to the best of my knowledge and believed has performed examinations and taken corrective measures described in this Owner's Report
he Owner n accordo By sig	May 20, 1993 , and state that to the best of my knowledge and believed has performed examinations and taken corrective measures described in this Owner's Report ance with the requirements of ASME Code, Section XI.
he Owner n accorde By sig	May 20, 1993 , and state that to the best of my knowledge and believe that performed examinations and taken corrective measures described in this Owner's Report ance with the requirements of ASME Code, Section XI. Igning this certificate neither the inspector nor his employer makes any warranty, expressed or concerning the examinations and corrective measures described in this Owners Report. Furtherm
the Owner in accorde By sig implied, c	May 20, 1993 , and state that to the best of my knowledge and believe has performed examinations and taken corrective measures described in this Owner's Report ance with the requirements of ASME Code, Section XI. Againing this certificate neither the inspector nor his employer makes any warranty, expressed or concerning the examinations and corrective measures described in this Owners Report. Furthermal e inspector nor his employer shall be liable in any manner for any personal injury or property
he Owner in accorde By sig mplied, c	May 20, 1993 , and state that to the best of my knowledge and believe that performed examinations and taken corrective measures described in this Owner's Report ance with the requirements of ASME Code, Section XI. Igning this certificate neither the inspector nor his employer makes any warranty, expressed or concerning the examinations and corrective measures described in this Owners Report. Furtherm
he Owner n accorde By sig mplied, c	May 20, 1993 , and state that to the best of my knowledge and believe has performed examinations and taken corrective measures described in this Owner's Report ance with the requirements of ASME Code, Section XI. Againing this certificate neither the inspector nor his employer makes any warranty, expressed or concerning the examinations and corrective measures described in this Owners Report. Furthermal e inspector nor his employer shall be liable in any manner for any personal injury or property

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1.	Owne <u>r</u> FLOR	NDA POWER & LIGH	ıT		Date <u>May</u> 20, 199	3		
	P.O.	Name 80X 029100, MIAN	AI, FL 33102		Sheel 1 of	1		
_	a TURK	Address (CEY POINT			4			
2.	Plant	BOX 3088, FLORID	A CITY FL 33034		Unil <u>4</u> WO# 910586	14 PW	O# 2264	
		Address	X 0111, 12 0000-	<u></u>			. No., Job No. etc.	
3.	Work Performe	ed by FLORIDA PO	WER & LIGHT	1	Type Code Symbol Sto		11.44	
	P.O.	Name BOX 3088, FLORID	A CITY, FL 33034	Į.	Authorization No		N/A N/A	
		Address	0		Expiration Date	•		
4.	Identification	of System	Chemical	and Volu	me Control		Quality Gr	oup B
	(b) Applicable	Edition of Section	XI Utilized for R	epairs o	dition <u>, N/A</u> Ac r Replacements 1980, eplacement Compone	Editio		•
	Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Re	lief Valve	Crosby	N/A	N/A	RV-4-203	N/A	Replaced	No
	-							
	· · · · · · · · · · · · · · · · · · ·							
			· · · · · · · · · · · · · · · · · · ·					
7.	Description of	WorkReplo	aced two (2) bon	inet stud	s and one (1) nut.		,	
			=				-105	
	2							
8.	Tests Conduct	ed: Hydrostatic	Pneumatic	Nomi	nal Operating Pressu	е	Other	
		Pressure	psi	Test	Temp, D	egree's	F	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-041-4

9. Remarks_	Replaced pressure retaining bolting, no welding performed.
_	Applicable Manufacturer's Data Reports to be altached
,,	·
	CERTIFICATE OF COMPLIANCE
	•
	certify that the statements made in the report are correct and this replacement conforms
to th	ne rules of the ASME Code, Section XI.
Tyne	Code Symbol StampN/A
1,70	- dodd dymbol didmp
Certi	ificate of Authorization No. N/A Expiration Date N/A
Sign	owner or Owner's Designee, Title Date 5/22, 1955
	Owner or Owner's Designee, little
	CERTIFICATE OF INSERVICE INSPECTION .
I. the unc	dersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel
	s and the State or Province of Dade County, Florida and employed by
	Arkwright Mutual Insurance Company of Norwood, MA.
•	
	pected the components described in this Owner's Report during theperiod June 26, 1992
10	May 20, 1993 , and state that to the best of my knowledge and belief,
the Owner	r has performed examinations and taken corrective measures described in this Owner's Report
in accord	ance with the requirements of ASME Code, Section XI.
By si	gning this certificate neither the inspector nor his employer makes any warranty, expressed or
implied, d	concerning the examinations and corrective measures described in this Owners Report. Furthermore
neither th	ne inspector nor his employer shall be liable in any manner for anypersonal injury or property
damage (or a loss of any kind arising from or connected with the inspection.
	Castani Mulual Engineering Assa
Sull	Commissions Factory Mutual Engineering Assoc. NB 8230 (N) (I)
/	Inspector's Signature • National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1.	Owne <u>r</u>	FLOR	IDA POWER & LIGH	ıT		Date	May 21,	1993		
		P.O.	Name BOX 029100, MIAN	AI, FL 33102	_	•	1 of	1		
2.	Plant	TURK	Address EY POINT			Unit _	4			
		P.O.	BOX 3088, FLORID	A CITY, FL 33034	}		WO# 92	056784 PW	O# 3451	
			Address		_		Repair Or	ganization P.C). No., Job No. etc.	
3.	Work Per	form	ed by FLORIDA PO	WER & LIGHT			-	I Stamp _		
		P.O.	BOX 3088, FLORID	A CITY, FL 33034	,	Authoriz	zation No.		N/A N/A	
			Address		_	Expirati	on Date _		IVA	
4.	Identifica	ation (of System	Reactor Co	olant Sy	stem			Quality Gr	oup A
5.	(a) Appli	cable	Construction Code	ANSI 831.1	19 55 E	dition.	N/A	Addenda	. N/A co	nda Casa
٠.			Edition of Section							
6.			of Components Re							
	Name of Compone	i	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Ī	Other ntification	Year Built	Repaired, Replaced, or Replacement	ASME Code Slamped (Yes or No)
S	afety Valv	8	Crosby	1579	N/A		RV-4-55	1A N/A	Replaced	No
s	afely Valv	' e	Crosby	1580	N/A		RV-4-55	1A N/A	Replacement	No
						,	•			
							•			
,						·				
7.	Descriptio	on of	WorkReplo	aced valve at tag	location	RV-4-	-55 1A.			
8.	Tests Co	nduct	ed: Hydrostatic Pressure <u>22</u> 8	Pneumatic 30 psi			erating Pre	essure	Other X	

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-042-4

Remarks	Replaced pressurizer safety valve, bolted connection no welding performed.
	Applicable Manufacturer's Data Reports to be attached
	
	CERTIFICATE OF COMPLIANCE
Wo so	stify that the statements made in the senest are correct and this replacement confers
	rtify that the statements made in the report are correct and this repair or replacement conformulation conformu
Type (Code Symbol StampN/A
Certifi	cate of Author zation No. N/A Expiration Date N/A
C!	Date 5/00 . 19 93
Signed	Owner or Owner's Designee, Title
	CERTIFICATE OF INSERVICE INSPECTION
l, the unde	rsigned, holding a valid commission issued by the National Board of Boiler and Pressure Vess
	and the State or Province of Dade County, Florida and employed by
	rkwright Mutual Insurance Company of Norwood, MA.
	cted the components described in this Owner's Report during theperiod December 3, 1993
to	May 21, 1993 , and state that to the best of my knowledge and belie
	has performed examinations and taken corrective measures described in this Owner's Report
	•
	nce with the requirements of ASME Code, Section XI.
	ning this certificate neither the inspector nor his employer makes any warranty, expressed or
	ncerning the examinations and corrective measures described in this Owners Report. Furthern
	inspector nor his employer shall be liable in any manner for anypersonal injury or property
damage or	a loss of any kind arising from or connected with the inspection.
hum	Commissions Factory Mutual Engineering Associated NB 8230 (N) (I)

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owne <u>r</u> FL	ORIDA POWER & LIG	нт		Date	May 21,	1993			
P.(BOX 029100, MIAMI, FL 33102		Sheel	1 of	1			
2. PlantTU	RKEY POINT			Unit _	4				
P.(O. BOX 3088, FLORII	WO# 92056778 PWO# 3448							
Address Repair Organization P.O. No., Job No. etc.									
3. Work Performed by FLORIDA POWER & LIGHT				Type Code Symbol Stamp N/A					
P.O. BOX 3088, FLORIDA CITY, FL 33034				Authorization No. N/A Expiration Date N/A					
Address Expiration bate									
4. Identification of System Reactor Coolant System Quality Group A									
5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda 6. Identification of Components Repaired or Replaced and Replacement Components									
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.		Other ntification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)	
Safety Valve	Crosby	N69877000004	N/A		RV-4-551	B N/A	Replaced	No	
Safety Valve	Crosby	N69877010008	N/A		RV-4-551	B N/A	Replacement	No	
₹ ¥				,	•				
•									
				-	-				
7. Description of WorkReplaced valve at tag location RV-4-551B.									
8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure Other X Pressure 2280 psi Test Temp, 547 Degree's F									

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-043-4

. Remarks	Replaced pressurizer safety valve, b Applicable Manufactu	polled connection no wa	
	1		
········			
	CERTIFIC	CATE OF COMPLIANCE	1
	tify that the statements made in th rules of the ASME Code, Section XI.		repair or replacement conforms
Type C	ode Symbol Stamp	N/A	
Certific	rate of Authorization No.		xpiration DateN/A
Signed	Owner or Owner's Designee,	Tille	Date <u> </u>
	CERTIFIC	ATE OF INSERVICE INSP	ECTION
			I Board of Boiler and Pressure Vessel
Inspectors of	nd the State or Province of	Dade County, Flori	ida and employed by
	kwright Mutual Insurance Company		
have inspec	ted the components described in th	nis Owner's Report duri	ing theperiod December 3, 1993
			he best of my knowledge and belief,
the Owner h	as performed examinations and to	ken corrective measure	es described in this Owner's Report
	ce with the requirements of ASME		·
	ing this certificate neither the inspe		makes any warranty, expressed or
	-		ibed in this Owners Report. Furthermore
-	-		•
	inspector nor his employer shall be		
damage of	a loss of any kind arising from or	connected with the ins	spection.
Gume	Inspector's Signature	Commissions	Factory Mutual Engineering Assoc. NB 8230 (N) (1) National Board, State, Province, and Endorsements

Page 1 of 2

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner FLOR	RIDA POWER & LIGH	-		Date <u>May</u> 21, 199	3				
P.O.	BOX 029 100, MIAI	MI, FL 33102		Sheet 1 of	1				
2. PlantTURK	Address (EY POINT		_	Unit 4					
P.O.	BOX 3088, FLORIC	DA CITY, FL 33034	4	, WO# 920567					
	Address			Repair Organiz	ation P.C	. No., Job No. etc.			
3. Work Perform	ed by FLORIDA PO	OWER & LIGHT		Type Code Symbol Sto					
P.O.	BOX 3088, FLORID	DA CITY, FL 33034		Authorization No Expiration Date					
4. Identification	of System	Reactor Co	olant Sy	stem		Quality Gr	oup A		
(b) Applicable	Edition of Section	XI Utilized for F	Repairs o	dition, N/A Adr r Replacements 1980, Replacement Compone	Editio				
Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)		
Safety Valve	Crosby	1581	N/A	RV−4−55ָ1C	N/A	Replaced	No		
Safety Valve	Crosby	N698770 10009	N/A	RV-4-551C	N/A	Replacement	No		
······									
							·		
7. Description of	WorkRepl	aced valve at tag	location	n RV-4-551C.					
							· · · · · · · · · · · · · · · · · · ·		
8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure Other X Pressure 2280 psi Test Temp, 547 Degree's F									

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-044-4

. Remarks Replaced pressurizer safety valve, bolted	connection no welding performed.
Applicable Manufacturer's D	ata Reports to be attached
	1
•	
CERTIFICATE	OF COMPLIANCE
We sadd that the statement and to the sec-	ort are correct and this replacement conforms
We certify that the statements made in the rep to the rules of the ASME Code, Section XI.	repair or replacement
To the fales of the Asme Code, Section Al.	
Type Code Symbol Stamp	N/A
Certificate of Authorization No. N/A	Expiration Date N/A
Signed Job of Mant Soffer Ser	on Date 5/22, 1995
Owner or Owner's Designee, Title	·
CERTIFICATE C	F INSERVICE INSPECTION
I, the undersigned, holding a valid commission issu	ed by the National Board of Boiler and Pressure Vesse
Inspectors and the State or Province of	Dade County, Florida and employed by
Arkwright Mutual Insurance Company	of Norwood, MA.
have inspected the components described in this Ov	
	nd state that to the best of my knowledge and belief,
	corrective measures described in this Owner's Report
in accordance with the requirements of ASME Code,	Section XI.
By signing this certificate neither the inspector	nor his employer makes any warranty, expressed or
implied, concerning the examinations and corrective	measures described in this Owners Report. Furthermo
neither the inspector nor his employer shall be liab	e in any manner for anypersonal injury or property
damage or a loss of any kind arising from or conr	ected with the inspection.
Bull & Dlandi	Factory Mutual Engineering Assoc. Commissions NB 8230 (N) (1)
Inspector's Signature	National Board, State, Province, and Endorseme

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

	1. OwnerFLORI	DA POWER & LIGHT Name		Date		-21 -9	•	
	P.O. BC	OX 029100, MIAMI, FL Address	33152	Sheet		of	1	
2	2. PlantTURKE	Y POINT Name		Unit _	4-			-
	P.O. BC	OX 3088, FLORIDA CI	TY, FL 33034		B93965-			14 15/25
		Address ساتان بعز باده برده <u>BECHTEL CONST</u>	S 1260LPORATE	2)	Repair Organization P			
3		Sicyland Coult 2015 Geoleia DX 3218 FLORIDA G	داه داه	Authori	ode Symbol Sta zation No	=		
	<u> </u>	OX 3218 FLORIDA G	HTY. FL 33094	Expirat	tion Date	<u> </u>	N/A	
4	I. Identification of Syste	em MAN FE	EDWATER					/
5	5. (a) Applicable Constr (b) Applicable Edition	ruction CodeE n of Section XI Utilized						€ — Coo
E	6. Identification of Com	nponents Repaired or	Replaced and Rep	olacement Co	omponents			
	Name of	Name of	Manufacturer	National	Other	Year	Repaired,	ASA
	Component	Name of Manufacturer style	Serial No.	Board No.	Identification	Built	Replaced, or Replacement	Stam (Yes
15	3"K14" REDUCER	supruse.		110.	mas *		or rehignatilatif	No
	STM. 651."A"	TIOGA PIPE	659 74F	710	097-11189-9	1993	REPLACEMENT	70
	311/47 DEDICE	TIOCH PIPE	659 JHF	12(A	MASA	1993	DEPLACEMENT	٥٨
1	Sm.661"B" "LI4" REDUCER		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		097-11189-9 M&S#	177		
	Stw.681"C"	TIOGA PIPE	659 JNF	414	097-11169-9	1993	REPLACEMENT	20
14	la sch. 60 PIPE	TIOGA PIPE	A1500	-110-	M\$5#		050.4.5	١.
_	W' 1004	TOOT TIPE	7,300	414	097-07689-9	•	REPLACEMENT	70
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\vdash								
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		ľ					ì.	
				i .	1			

Remarks				<u> </u>
• •	anufacturer's Data Reports			
ALL WELDING WAS PERFO	emed per pro	CEDURE	S OF WELDING	
SERVICES INCORPORATES	AND APPROVED !	RY FL	orida Power AND	LIGHT
ı				
CERTI	FICATION OF COMP	PLIANCE		
We certify that the statements made in the roto the rules of the ASME Code, Section XI.	eport are correct and	this	REPUCEMENT repair or replacemen	
•				
Type Code Symbol Stamp		N/A	1	
	•			
Certificate of Authorization No.	N/A		Expiration Date	N/A
$\mathcal{O}_{\mathcal{O}}}}}}}}}}$			r 1	
Signed			Date 5 [2]	19
// Owner or Owner's I	Designee, Title			,
			· , ,	
	·			
CERTIF	CATE OF INSERVIC	E INSPE	CTION	
I, the undersigned, holding a valid comm				
Inspectors and the State or Province of				
Arkwright Mutual Insurance Con				
have inspected the components describ		-	•	
			the best of my knowled	•
the Owner has performed examinations			s described in this Owr	петѕ нероп
in accordance with the requirements of				
By signing this certificate neithe	•		•	•
implied, concerning the examinations ar			•	
neither the inspector nor his employer sl				property
damage or a loss of any kind arising from	n or connected with t	his inspec	ction.	
		1	FACTORY MUTUAL E	NOTNEEDING ASS
Ellewi J. How	Commissio) IIS	230 (N) (1)	
Inspector's Signature		N	ational Board, State, Provinc	e, and Endorsement
They 22 1993				

Page 1 of 2

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. 0	Owne <u>r</u>	FLOR	RIDA POWER & LIGH	IT		Date	June 22	, 1993		,
		P.O.	Name BOX 029100, MIAN	AI, FL 33102			1 of	1		- ·
		TURK	Address (EY POINT		_					
2. P	-1dm		Name			Unit	4			
-		<u>، ۲.۵.</u>	BOX 3088, FLORID	A CITY, FL 33032	_			058087 PW	O# 3641	
3. V	Work Perf	orm	ed by FLORIDA PO	WER & LIGHT		Type Co	ode Symbo	ol Stamp	N/A	
			Name			Authori	zation No.		N/A	
-		P.U.	BOX 3088, FLORID	A CITY, FL 33034	<u>-</u>	Expirat	ion Date _		N/A	
4. 1	dentificat	ion ·	of System	Reactor Co	olant Sy	stem			Quality Gr	oup A
5. (a) Applic	ahle	Construction Code	. ANSI 831.1	10 55 F	dition	N/A	Addenda	N/A C	ndo Caso
			Edition of Section							
			of Components Re							
_	Name of componen	i	Name of Manufacturer	Manufacturer Serial No.	Nationa Board No.	1	Other entification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Reli	ef Valve		Copes Vulcan	N/A	N/A	РС	V-4-4550	N/A	Replaced	No
							+			-
			r							
				,		 			9	
							 			
					_					
						<u> </u>				
7. D	escription)	n of	WorkReple	aced Bonnet Stud	and Nu	ıts.				
			·							
8. T	8. Tests Conducted: Hydrostatic Pneumatic Nominal Operating Pressure Other X Pressure 2280 psi Test Temp, 547 Degree's F									

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-046-4

Remarks Replaced bolling, no welding performed. Applicable Manufacturer's Do	ala Reports to be attached
,	
· · · · · · · · · · · · · · · · · · ·	
CERTIFICATE (OF COMPLIANCE
	ort are correct and this replacement conform
to the rules of the ASME Code, Section XI.	
Type Code Symbol Stamp	N/A
Type dode Symbol Stamp	
Certificate of Authorization No. N/A	Expiration Data N/A
	Expiration bate
Signed POWY WAINT MU	N. Date 6/23, 19 93
Owner or Owner's Designee, Title	
CERTIFICATE O	F INSERVICE INSPECTION
l, the undersigned, holding a valid commission issu	ed by the National Board of Boiler and Pressure Vess
Inspectors and the State or Province of	Dade County, Florida and employed by
	of Norwood, MA.
have inspected the components described in this Ow	
	nd state that to the best of my knowledge and belief
the Owner has performed examinations and taken o	corrective measures described in this Owner's Report
in accordance with the requirements of ASME Code,	Section XI.
By signing this certificate neither the inspector	nor his employer makes any warranty, expressed or
implied, concerning the examinations and corrective	measureș described in this Owners Report. Furtherm
neither the inspector nor his employer shall be liabl	e in any manner for anypersonal injury or property
	and a distribution in an address
damage or a loss of any kind arising from or conn	ected with the inspection.
damage or a loss of any kind arising from or conn	
damage or a loss of any kind arising from or conn	Factory Mulual Engineering Assoc Commissions NB 8230 (N) (I)

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Page 1 of 2

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owne <u>r</u>	FLOF	RIDA POWER & LIGH	IT		Date _	June 22,	1993		
	P.O.	Name BOX 029100, MIAN	AI, FL 33102		Sheef	1 of	1		
		Address			J.1001	v' -			
2. Plant	TUR	CEY POINT		_	Unit _	4			
	P.O.	BOX 3088, FLORID	A CITY, FL 33034	_ \$		WO# 9205	6277 PW	O# 4280	
		Address				Repair Orga	nization P.O	. No., Job No. etc.	
3. Work Per	form	ed by FLORIDA PO	WER & LIGHT		Type Co	de Symbol :	Stamp	N/A	
	P.O.	BOX 3088, FLORID	A CITY, FL 33034			ation No			
		Address		<u> </u>	Expiration	on Date		II/ A	
4. Identifica	ation	of System	Feedwater					Quality Gr	oup B
(b) Appli	cable	Construction Code Edition of Section of Components Re	XI Utilized for R	epairs o	r Replac	ements 198	0, Editio		
Name of Compone		Name of Manufacturer	Manufacturer Serial No.	National Board No.	į (Other atification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Control Val	/8	Copes Vulcan	N/A	N/A	FCV	-4-498	N/A	Replaced	No
									
			,						
					<u> </u>				
								;	
						-			
· ·									
					<u> </u>			<u> </u>	
7. Description	on of	WorkReplo	aced Bonnet Stud	ls (4) an	d Nuts	(4).			
1									
, <u></u> -									
								<u></u>	
8. Tests Co	nduct	ed: Hydrostatic	Pneumatic	Nomi	inal Ope	rating Press	ure	Other	
1		Pressure	psi	Tesi	Temp.		Degree's	F *	
							• • • •		

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form 93-047-4

Remarks_	Replaced bolting, no welding perform	med.	
_		er's Data Reports to be atte	ached
	CERTIFIC	ATE OF COMPLIANCE	
	ertify that the statements made in the e rules of the ASME Code, Section XI.	report are correct o	and this replacement conforms
Type	Code Symbol Stamp	N/A	
,,,,			
Certi	ficate of Authorization No.	N/A	Expiration Date N/A
	7/2012- 1- UN	WE WA	Expiration DateN/A
Signe	Owher or Owner's Designee, i	(N) MU /C.	
	CERTIFICA	TE OF INSERVICE INS	PECTION
l, the und	ersigned, holding a valid commission	issued by the Nation	nal Board of Boiler and Pressure Vess
Inspectors	and the State or Province of	Dade County, Flo	orida and employed by
	Arkwright Mutual Insurance Company		
have insp	ected the components described in thi	is Owner's Report du	ring theperiod January 19, 1993
to	-		the best of my knowledge and belief
the Owner	has performed examinations and tak		
	ance with the requirements of ASME C		•
By sig	gning this certificate neither the inspe	ctor nor his employe	r makes any warranty, expressed or
	oncerning the examinations and corre		• •
	e inspector nor his employer shall be		
	r a loss of any kind arising from or		
	. /// /	T	•
Muu	1 B Offen -	Commissions	110 0200 (11) (1)
7)	Inspector's Signature	•	National Board, State; Province, and Endorseme

TURKEY POINT UNIT 4 1993 REFUELING OUTAGE

Summary of Inservice Inspection Examinations

DATE:	08/11/	93
DEVISIO	าน •	3

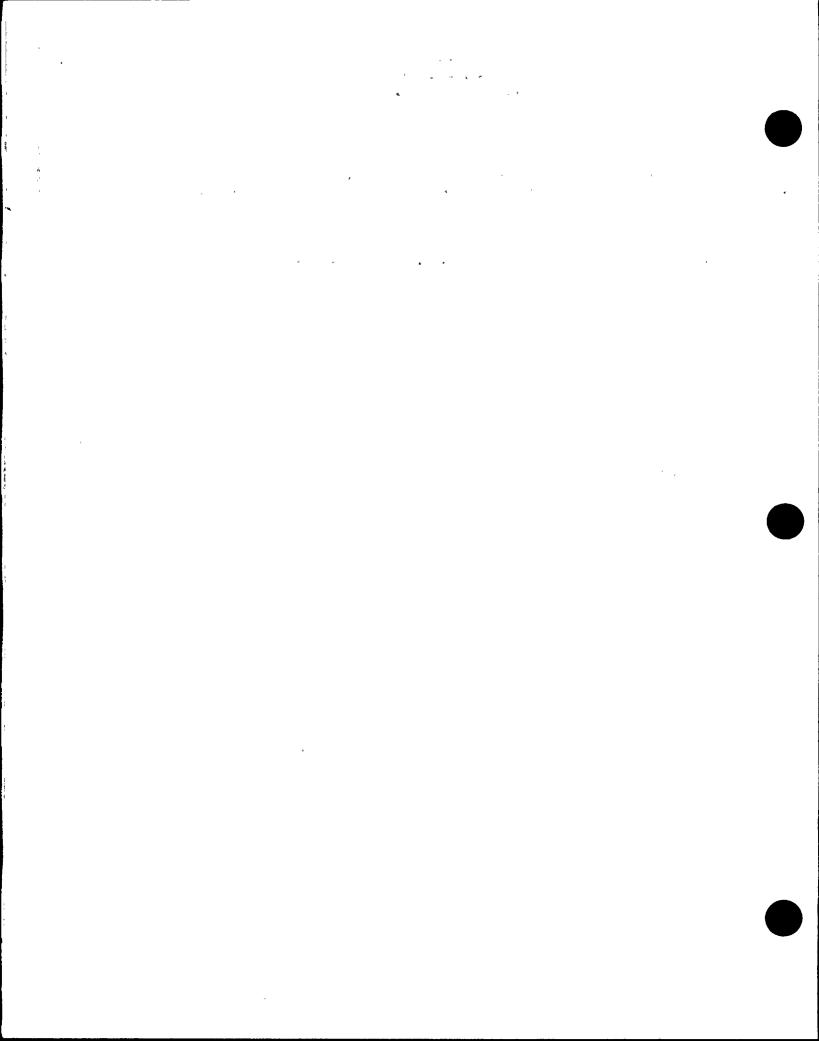
TURKEY POINT NUCLEAR PLANT UNIT 4

PAGE:

INSERVICE INSPECTION SUMMARY
SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 1 ALL STATUS COMPONENTS

M	GENERATOR	C	PRIMARY	SIDE

ZONE NUM	MBER: 005	ASME SEC. XI				0	N	O G T E H	
SUMMARY NUMBER	EXAMINATION AREA IDENTIFICATION	CATGY ITEM NO	EXAM METHOD	PROCEDURE	A	E	1	D E	REMARKS **CALIBRATION BLOCK**
	10L11111011101			***************************************	•	-	-		
	(REF. DWG. NO. 4-V09C)								
052900	4-SGC-I BOLTING INLET MANWAY BOLTING CTMT	B-G-2 B7.30	VT-1 VT-1 CNR PWO	NDE 4.1-6 NDE 4.1-93-0410 93-4-082 93002706					4/28/93 - VT COMPLETE, BOLT 12 HAS A DENT ON THE SHANK, BOLT WAS REPLACED
									N/A
053000	4-SGC-O BOLTING OUTLET MANWAY BOLTING CTMT	B-G-2 B7.30	VT-1 VT-1 CNR PWO						4/28/93 - VT COMPLETE, CORROSION AND HOLE IN BOLTS, BOLTS WERE REPLACED
									N/A



ZONE NUMBER: 009

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 1 ALL STATUS COMPONENTS

TOR COOLANT SYSTEM LOOP A COLD LEG

ASKE SONGT

SEC. XI TRSEH

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

ITEM NO METHOD T C G M R **CALIBRATION BLOCK** PROCEDURE NUMBER IDENTIFICATION

SYSTEM NO. 41, 5614-P-766-S SH. 1 OF 1 (REF. DWG. NO. 4-A03)

057500 27.5"-RCS-1407-14

ELBOW TO RPV NOZZLE CTMT, 25'5", IN RPV

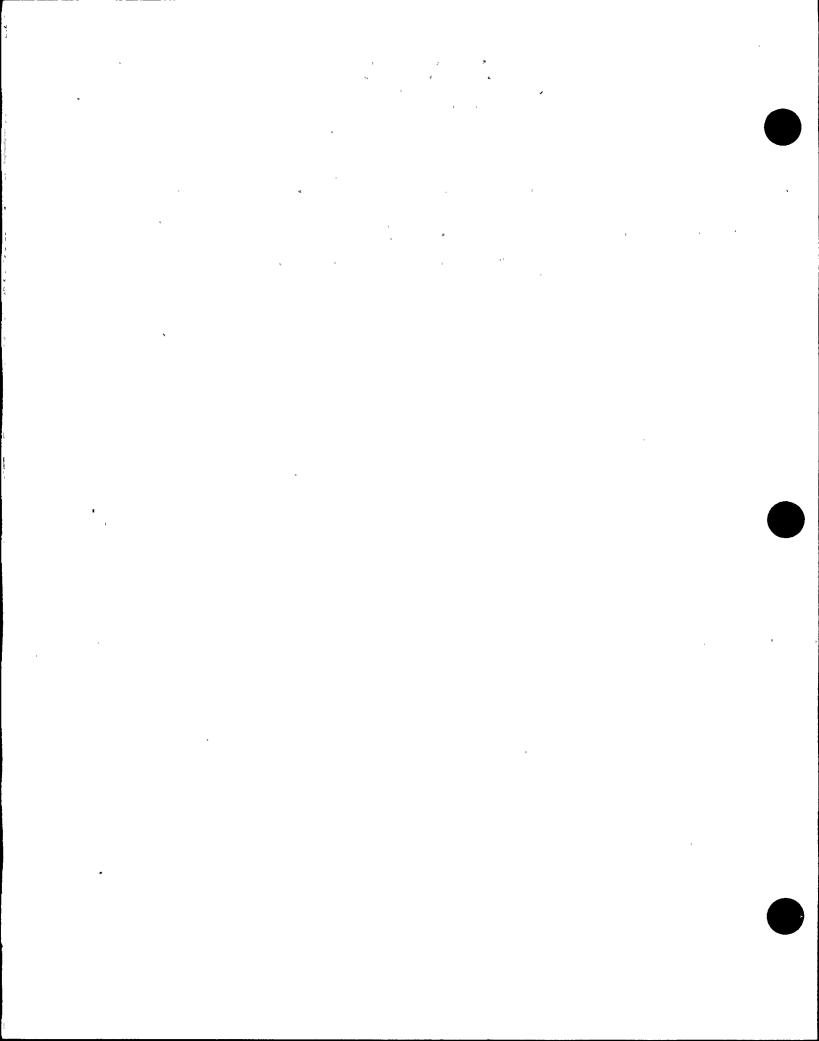
B-F PT B5.10 UT

SEE REMARKS

NI O

NDE 3.3-1 C X - - - 4/13/93 - PT COMPLETE, UT EXAMINATION PERFORMED DURING PREVIOUS OUTAGE, LIMITED EXAMINATION DUE TO TIGHT ACCESS IN SANDBOX AND NON-REMOVABLE INSULATION, EXAMINATION WAS PERFORMED IN ACCORDANCE WITH RELIEF REQUEST NO. 2 **UT-32**

PAGE:



ZONE NUMBER: 012

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 1 ALL STATUS COMPONENTS

TOR COOLANT SYSTEM LOOP B COLD LEG

NIO SONGT ASME

SEC. XI TRSEH

CATGY EXAM A E I O E REMARKS SUMMARY EXAMINATION AREA

ITEM NO METHOO PROCEDURE T C G M R **CALIBRATION BLOCK** NUMBER IDENTIFICATION

SYSTEM NO. 41, 5614-P-766-S SH. 1 OF 1 (REF. DWG. NO. 4-A06)

059600 27.5"-RCS-1406-14 B-F PT NDE 3.3-2

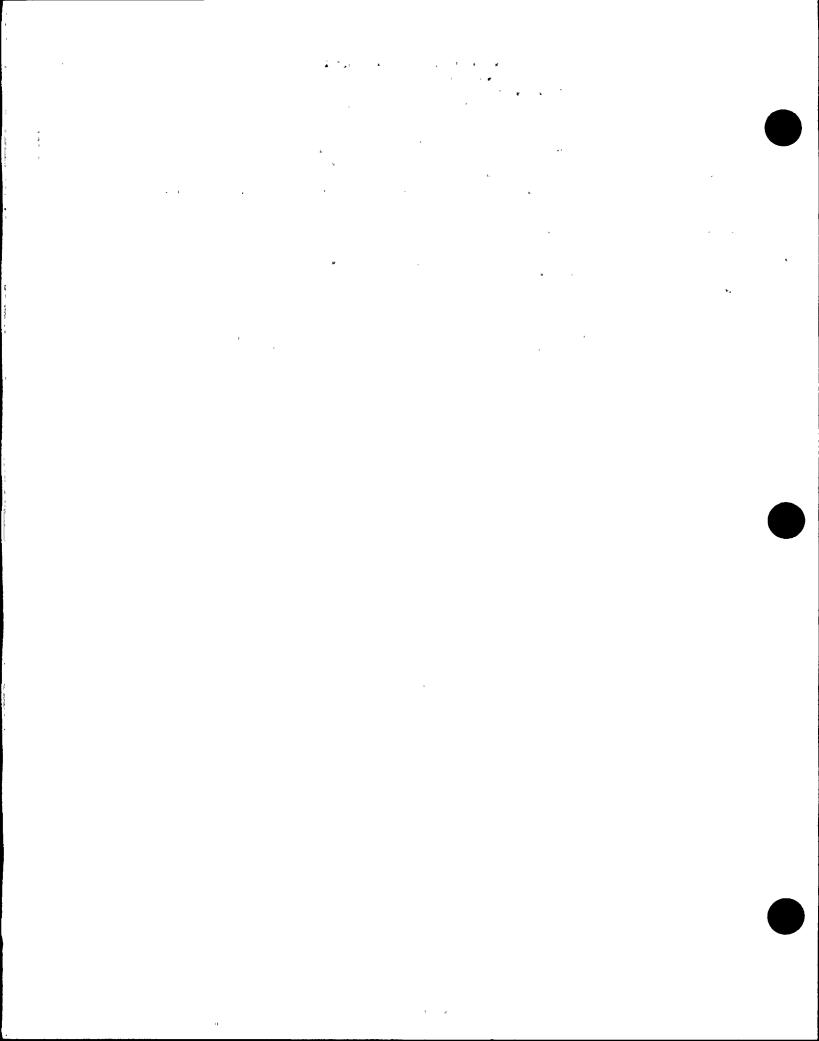
ELBOW TO RPV NOZZLE CTHT, 25'8", IN RPV

B5.10 UT SEE REMARKS

UT-32

C X - - - 4/13/93 - PT COMPLETE, UT EXAMINATION PERFORMED DURING PREVIOUS OUTAGE, LIMITED EXAMINATION DUE TO TIGHT ACCESS IN SANDBOX AND NON-REMOVABLE INSULATION. EXAMINATION WAS PERFORMED IN ACCORDANCE WITH RELIEF REQUEST NO. 2

PAGE:



ZONE NUMBER: 015

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 1 ALL STATUS COMPONENTS

TOR COOLANT SYSTEM LOOP C COLD LEG

NIO SONGT ASME

SEC. XI TRSEK

EXAM A E I O E REMARKS CATGY SUMMARY EXAMINATION AREA

ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK** NUMBER IDENTIFICATION

SYSTEM NO. 41, 5614-P-766-S SH. 1 OF 1 (REF. DWG. NO. 4-A09)

061700 27.5"-RCS-1409-14

ELBOW TO RPV NOZZLE CTHT, 25'8", IN RPV

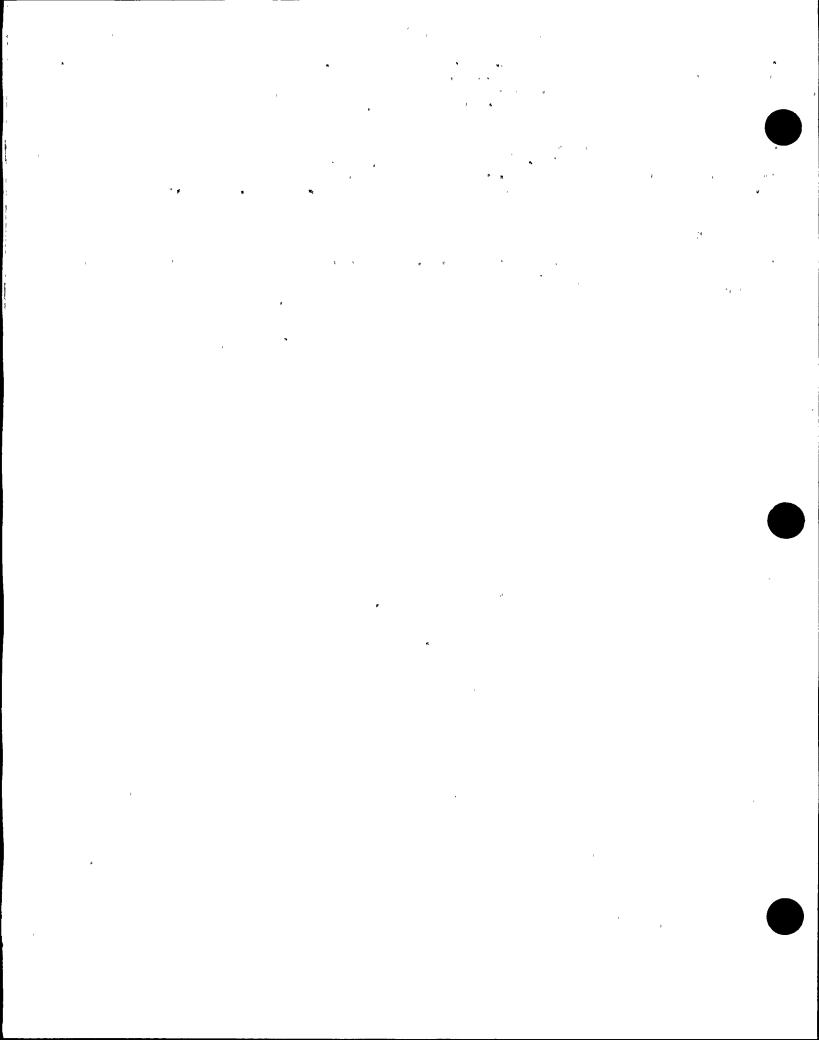
B-F PT B5.10 UT

NDE 3.3-3 SEE REMARKS

C X - - - 4/13/93 - PT COMPLETE, UT EXAMINATION PERFORMED DURING PREVIOUS OUTAGE, LIMITED EXAMINATION DUE TO TIGHT ACCESS IN SANDBOX AND NON-REMOVABLE INSULATION, EXAMINATION WAS PERFORMED IN ACCORDANCE

PAGE:

WITH RELIEF REQUEST NO. 2 **UT-32**



TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 1 ALL STATUS COMPONENTS

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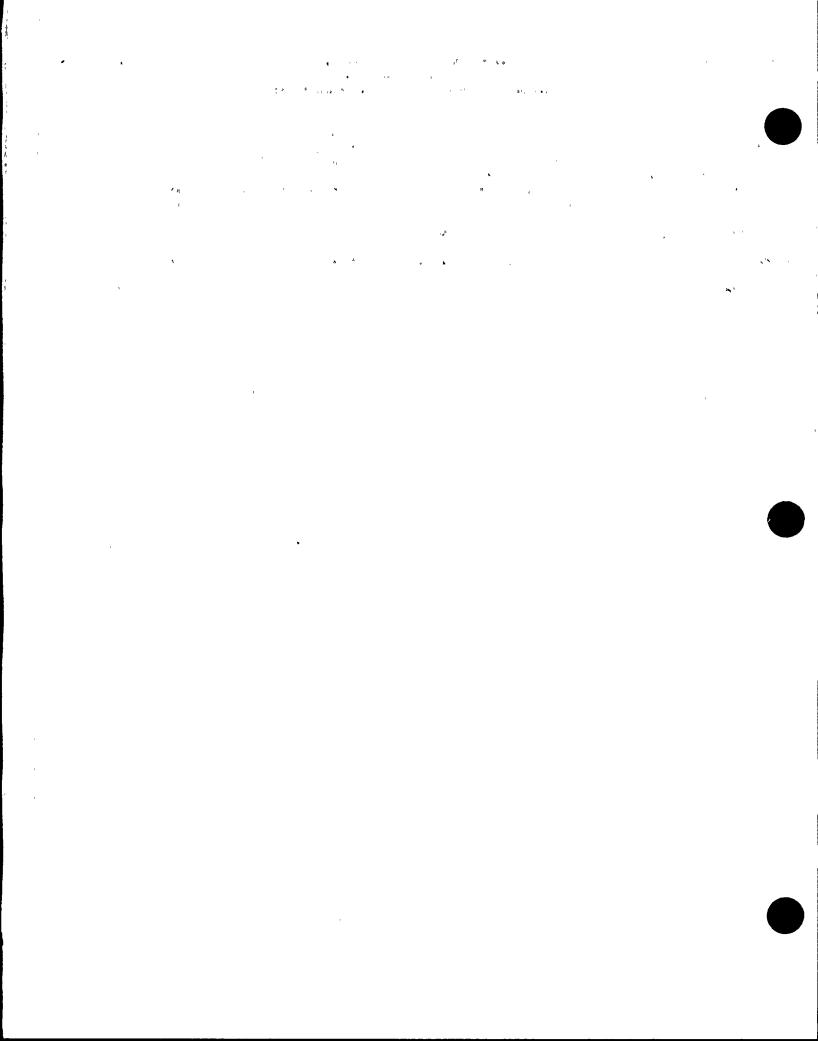
5

NTOR CO	TIANT.	SYSTEM	PRESSURIZER	SURGE	LINE

						N	I	0	
ZONE NU	MBER: 016	ASHE		:	S	0	N G	T	
		SEC. XI		•	T	R	SE	Н	
SUHHARY	EXAMINATION AREA	CATGY	EXAM		A	E	1 0) E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G H	l R	**CALIBRATION BLOCK**
			•		-	•		•	
	SYSTEM NO. 41, 5614-P-766-S	SH. 1 OF 1	(REF. DWG.	NO. 4-A10)					
062705	4-SR-400 IA		PT	TS 9.4-W93-0107	С	X		-	93 - INTEGRAL ATTACHMENT REHOVED FROM
	INTEGRAL ATTACHMENT		NIS-2 PC/M	93-002-4 91-200					SERVICE, SUPPORT WAS REPLACED
	СТНТ, 25'7"		PC/M	91-200					**H/A**
062710	SR-400	F-C	VT-3,4	TS 9.9-M93-0042	С	x			93 - SPRING HANGER WAS REPLACED,
	DUAL SPRING HANGER	F3.50	CHO	300567					BASELINE EXAMINATION
	CTHT, 25'7"		PC/H	91-200					

N/A

NIS-2 93-002-4



LONE NUMBER: 017

TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 1 ALL STATUS COMPONENTS

CTOR COOLANT SYSTEM PRESSURIZER SAFETY LOOP A

NI O SONGT ASME

SEC. XI TRSEH

CATGY EXAM SUMMARY EXAMINATION AREA NUMBER IDENTIFICATION CATGY EXAM A E I O E REMARKS

ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 41, 5614-P-564-S SH. 3 OF 3 (REF. DWG. NO. 4-A11)

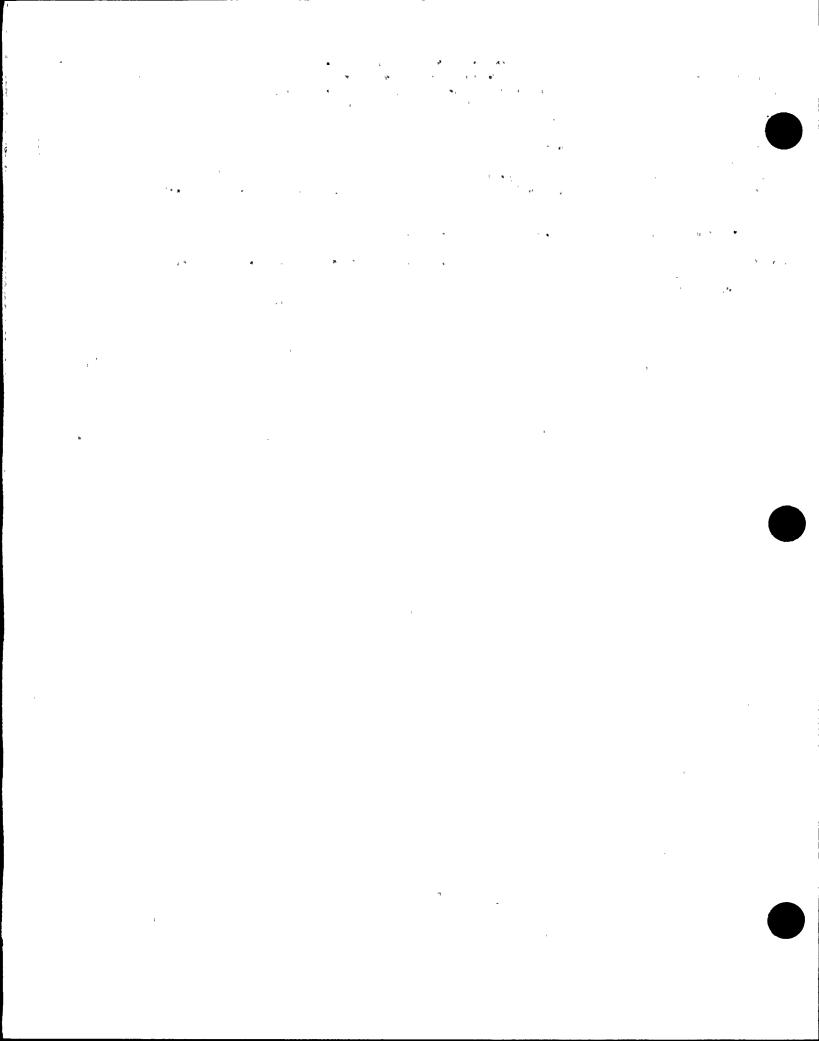
B-G-2 VT-1 NDE 4.1-8 C X - - - 5/3/93 - VT COMPLETE 064250 4"-RC-1401-FB

B7.50 FLANGE BOLTING

CTHT, 69'0"

N/A

PAGE:



ZONE NUMBER: 018

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 1 ALL STATUS COMPONENTS

TOR COOLANT SYSTEM PRESSURIZER SAFETY LOOP B

N I O SONGT ASME

SEC. XI TRSEH

NUMBER IDENTIFICATION TIEM TO THE TO CATGY EXAM A E I O E REMARKS

ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 41, 5614-P-564-S SH. 3 OF 3 (REF. DWG. NO. 4-A12)

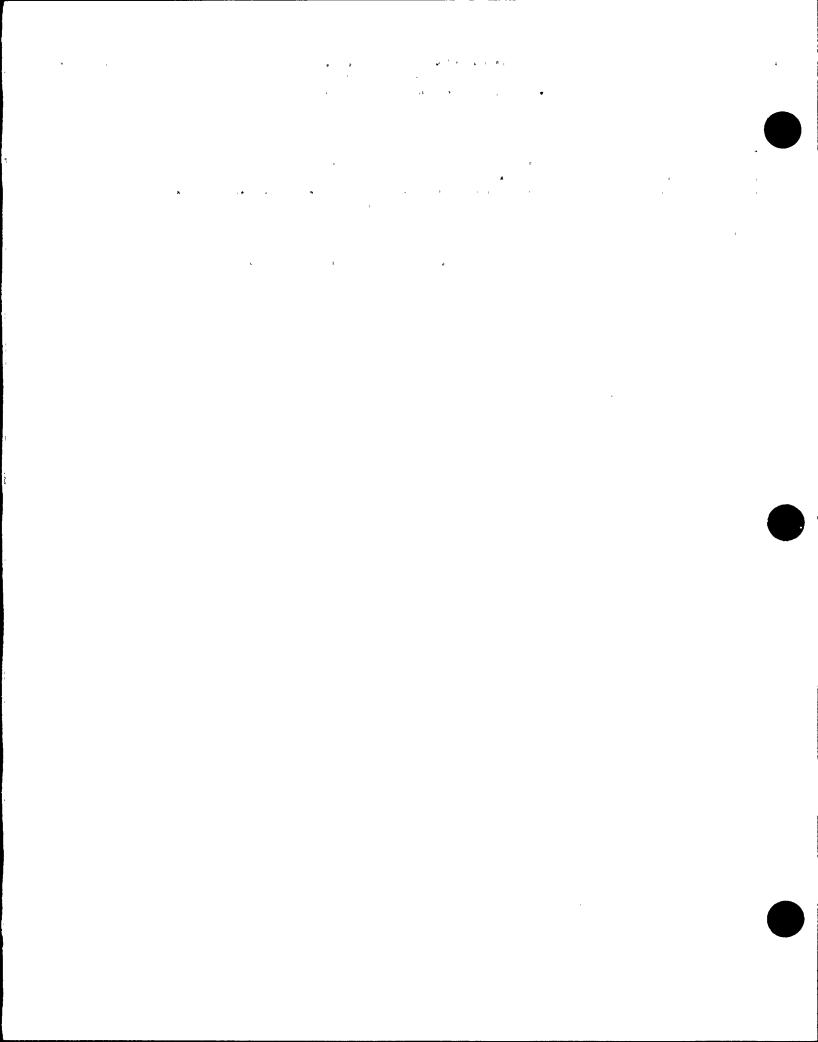
B-G-2 VT-1 NDE 4.1-9 C X - - - 5/3/93 - VT COMPLETE 065350 4"-RC-1402-FB

87.50 FLANGE BOLTING

CTHT, 69'0"

N/A

PAGE: 7



ZONE NUMBER: 021

TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 1 ALL STATUS COMPONENTS

TOR COOLANT SYSTEM PRESSURIZER SPRAY LINE

NI O SONGT

ASHE SEC. XI TRSEH

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

ITEM NO HETHOD PROCEDURE T C G M R **CALIBRATION BLOCK** NUMBER IDENTIFICATION

SYSTEM NO. 41, 5614-P-566-S SH. 2 OF 2 (REF. DWG. NO. 4-A15)

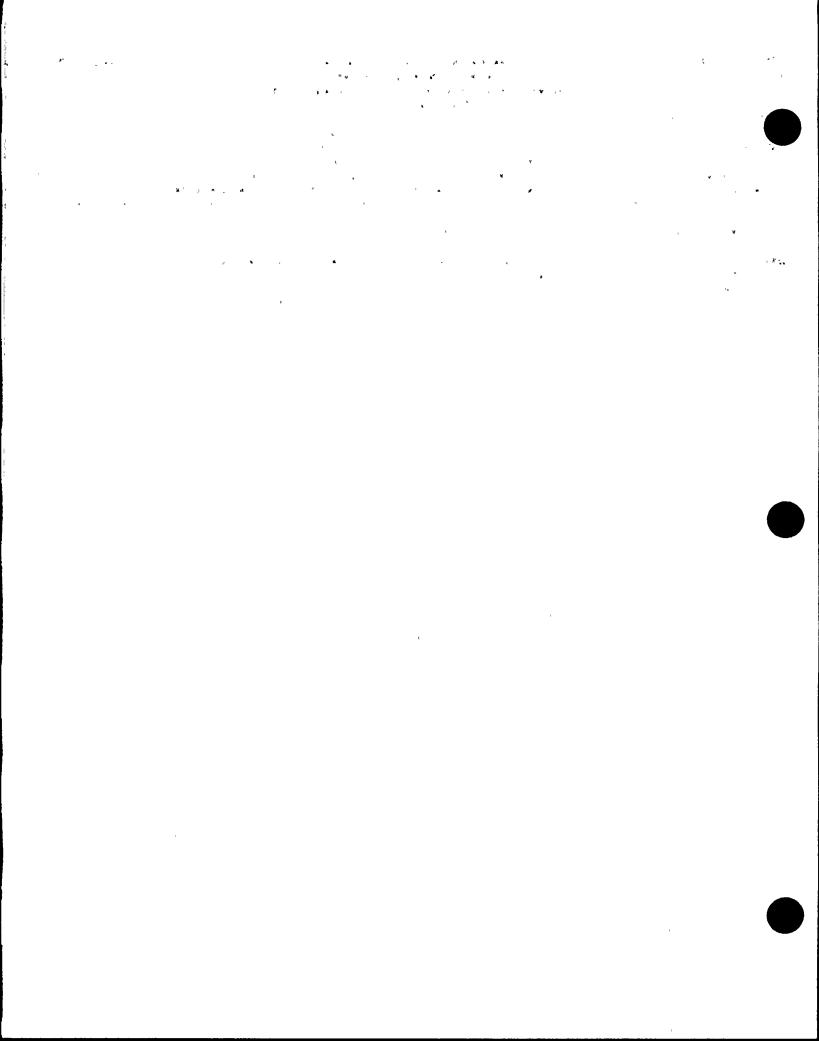
F-C VT-3 NDE 4.3-8 C X - - - 4/16/93 - VT COMPLETE F3.10 071920 4-RCH-33

SLIDING STANCHION

CTHT, 16'3"

N/A

PAGE:



ZONE NUMBER: 022

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

9

PAGE:

CLASS 1 ALL STATUS COMPONENTS

TOR COOLANT SYSTEM PRESSURIZER RELIEF LINE

NI O ASME SONGT

SEC. XI TRSEH

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

T C G M R **CALIBRATION BLOCK** ITEM NO METHOD PROCEDURE NUMBER IDENTIFICATION

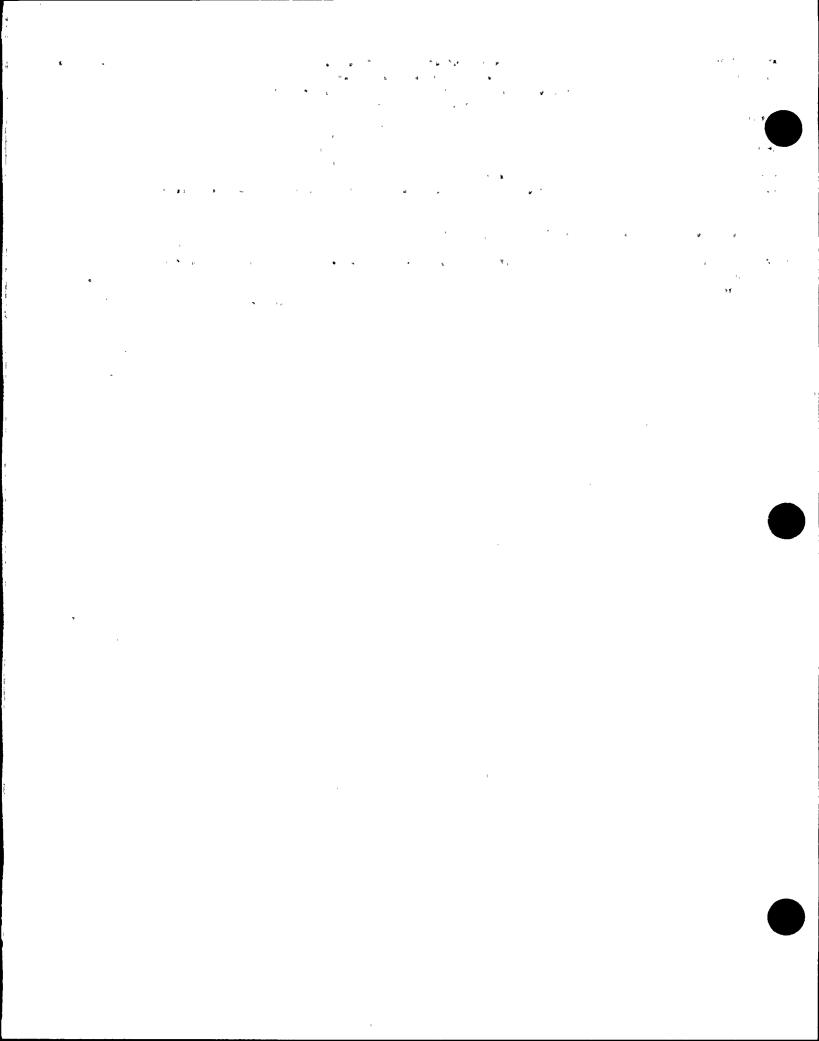
SYSTEM NO. 41, 5614-P-564-S SH. 1 OF 3 (REF. DWG. NO. 4-A16)

NDE 9.3-W93- C - X - - 4/23/93 - RT COMPLETE, SURFACE B-F RT 076700 4"-RC-1406-1A

B5.40 0167 EXAMINATION PERFORMED DURING PREVIOUS NOZZLE TO SAFE-END

OUTAGE, ACCEPTABLE POROSITY AND TUNGSTEN CTHT, 70'3"

INCLUSION, GRINDING MARKS **UT-53**



TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

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10

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 1 ALL STATUS COMPONENTS

DUAL HEAT REMOVAL TO RC LOOP A COLD LEG

NI O ONE NUMBER: 037 ASME SONGT SEC. XI TRSEH

CATGY EXAM A E I O E REMARKS SUMMARY EXAMINATION AREA

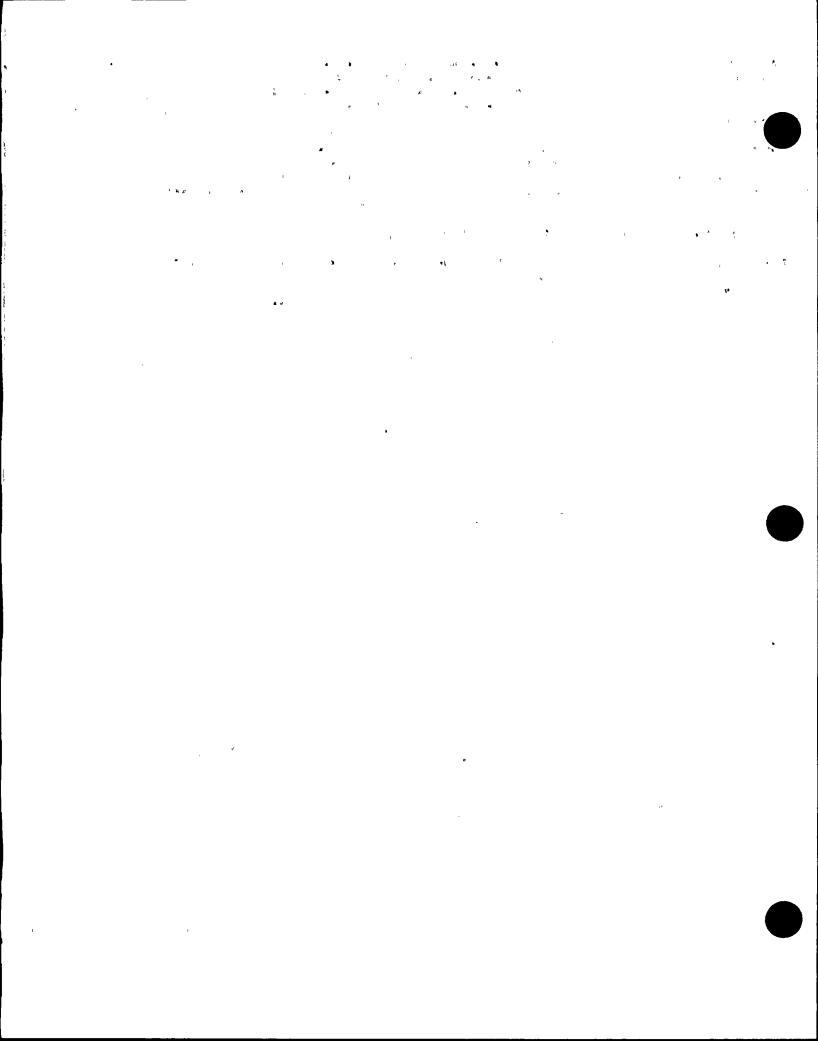
ITEM NO METHOD NUMBER IDENTIFICATION PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 50, 5614-P-509-S SH. 1 OF 4 (REF. DWG. NO. 4-A31)

PT NDE 3.3-8 C X - - - 4/24/93 - PT AND UT COMPLETE, ROOT 117500 8"-RHR-1401-3 B-J

UT 45 - - X - GEOMETRY B9.11 NDE 5.4-3 ELBOW TO PIPE

UT 60 NDE 5.4-3 - - x -- CTHT, 20'8" **UT-41**



ZONE NUMBER: 038

TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 1 ALL STATUS COMPONENTS

DUAL HEAT REMOVAL TO RC LOOP B COLD LEG

SONGT ASHE

TRSEH SEC. XI

CATGY EXAM A E I O E REMARKS SUMMARY EXAMINATION AREA

T C G M R **CALIBRATION BLOCK** ITEM NO METHOD PROCEDURE NUMBER IDENTIFICATION

SYSTEM NO. 50, 5614-P-509-S SH. 3 OF 4 (REF. DWG. NO. 4-A32)

B-K-1 PT NDE 3.3-31 C X - - - 4/29/93 - PT COMPLETE 122460 8073-H-826-01 IA

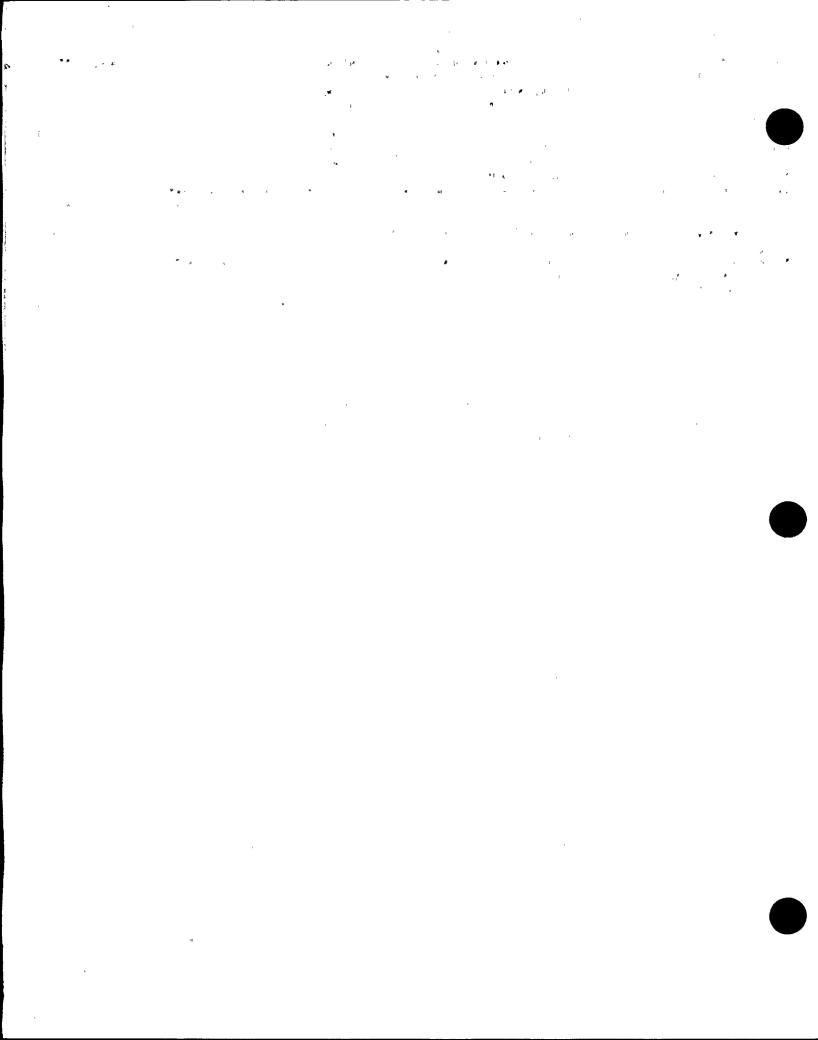
INTEGRAL ATTACHMENT B10.10

CTMT, 22'2"

N/A

NI O

PAGE:



CTHT, 21'6"

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY

PAGE:

12

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 1 ALL STATUS COMPONENTS

DUAL HEAT REMOVAL TO RC LOOP C COLD LEG

ONE NUM	MBER: 039	ASME				N 1	1 G	T	
	EXAMINATION AREA IDENTIFICATION	SEC. XI CATGY ITEM NO	EXAM METHOD	PROCEDURE	A		0	E	REMARKS **CALIBRATION BLOCK**
	SYSTEM NO. 50, 5614-P-509-S	SH. 4 OF 4	(REF. DWG.	NO. 4-A33)					
	VALVE 4-876C BOLTING VALVE BOLTING CTMT, 21'6"	B-G-2 B7.70	VT-1	NDE 4.1-3	С	х -		-	4/2/93 - VT COMPLETE
									N/A
	SR-449 SPRING HANGER CTMT, 21'6"	F-C F3.50	VT-3,4 CNR CR	NDE 4.3-77 93-4-080 93-356	С		• •	x	5/1/93 - VT COMPLETE, BROKEN TACK WELD ON WASHER, DOES NOT INTERFERE WITH SUPPORT FUNCTION, ACCEPTED AS-IS BY ENGINEERING EVALUATION **N/A**
24960	SR-449 IA INTEGRAL ATTACHMENT	B-K-1 B10.10	PT	NDE 3.3-35	С	х -		•	4/30/93 - PT COMPLETE

N/A

g N N Approximate the second of the • t

ONE NUMBER: 040

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 1 ALL STATUS COMPONENTS

HEAD SAFETY INJECTION LOOP A INSIDE CTHT

N I O SONGT ASME

SEC. XI TRSEH

CATGY EXAM SUMMARY EXAMINATION AREA A E I O E REMARKS

NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 62, 5614-P-512-S SH. 1 OF 2 (REF. DWG. NO. 4-A34)

8-J PT NDE 3.3-38 C X - - - 5/4/93 - PT COMPLETE 128300 2"-51-1401-3

B9.40 ELBOW TO PIPE

CTHT, 28'3"

N/A

PAGE:

CTHT, 20'1"

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

PAGE:

ATFER INDICATION REMOVAL

N/A

14

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 1 ALL STATUS COMPONENTS

HEAD SAFETY INJECTION LOOP B INSIDE	CTMT
-------------------------------------	------

N I O SONGT ZONE NUMBER: 041 ASHE TRSEH SEC. XI SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS ITEM NO METHOD PROCEDURE T C G H R **CALIBRATION BLOCK** NUMBER IDENTIFICATION SYSTEM NO. 62, 5614-P-513-S SH. 1 OF 2 (REF. DWG. NO. 4-A35A) PT NDE 3.3-23 C - - - X 4/24/93 - PT COMPLETE, LINEAR INDICATION 133500 2"-\$1-1402-11 B-J 89.40 PT NDE 3.3-36 X - - - ON ELBOW, SUSPECTED MANUFACTURING FLAW, PIPE TO ELBOW 5/3/93 - PT RE-EXAMINATION COMPLETE

93-4-061 93-324

CNR

CR

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 1 ALL STATUS COMPONENTS

PAGE:

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	UEAD	CAECTY	THICKTION	LOOD	0	INCIDE	CTHT
L	HEAD	SAFETY	INJECTION	LOOP	В	INSIDE	CIMI

ZONE NUM	HBER: 044	ASME			s		I N G		
	EXAMINATION AREA IDENTIFICATION	SEC. XI CATGY ITEM NO	EXAM METHOD	PROCEDURE	A	Ε		E	REMARKS **CALIBRATION BLOCK**
	SYSTEM NO. 62, 5614-P-792-S	SH. 1 OF 3	(REF. DWG.	NO. 4-A38A)					
145550	8081-H-001-03 BOX RESTRAINT CTHT, 26'10"	F-B F2.10	VT-3 CNR	NDE 4.3-78 93-4-081	C	-		X	4/29/93 - VT COMPLETE, SUPPORT TAG HISSING, TAG WILL BE REPLACED **N/A**
	2"-SI-1406-3 ELBOW TO PIPE CTHT, 26'10"	B-J B9.40	PT	NDE 3.3-30	С	x		-	4/29/93 - PT COMPLETE

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TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

PAGE:

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SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 1 ALL STATUS COMPONENTS

ITCAL	2.	VOLUME	CONTROL	TΩ	RC	LOOP	C	HOT I	FG
いしれた	œ	AOLOWE	COMINOL		_n_	LOUP			

						NI C	0	
ZONE NU	MBER: 045	ASME			S	ONGI	Ţ	
		SEC. XI			T	RSE	H	
SUMMARY	EXAMINATION AREA	CATGY	EXAM		Α	EIOE	E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	CGHF	R	**CALIBRATION BLOCK**
					•		-	
	SYSTEM NO. 47, 5614-P-782-S	SH. 2 OF 3	(REF. DWG.	NO. 4-A39)				
153000	3"-CH-1401-14 PIPE TO ELBOW	B-J B9.21	PT	NDE 3.3-14	С	x ·	-	4/23/93 - PT COMPLETE
	СТНТ	27.22						**N/A**
								1
153100	З"-СН-1401-15	B-J	PT	NDE 3.3-14	С	x ·	-	4/23/93 - PT COMPLETE
	ELBOW TO PIPE	B9.21						
	VIAI						- 1	

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

17

PAGE:

CLASS 1 ALL STATUS COMPONENTS

_										
MICAL	&	VOLUME	CONTROL	TO	RC	LOOP	Α	COLD	LEG	

ZONE NUI	HBER: 046	ASME SEC. XI	•		-	NIONGT RSEH	
SUMMARY	EXAMINATION AREA	CATGY	EXAM		A	EIOE	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T -	CGHR	**CALIBRATION BLOCK**
	SYSTEM NO. 47, 5614-P-782-S	SH. 2 OF 3	(REF. DWG.	NO. 4-A40)			
158450	SR-935 SPRING HANGER CTMT, 22'6"	F-C F3.50	VT-3,4 CNR CR	NDE 4.3-89 93-4-098 93-481	C	x	5/12/93 - VT COMPLETE, COLD STAMP IS NOT AS SHOWN ON DRAWING, ACCEPTED AS-IS BY ENGINEERING EVALUATION, THERE WAS NO DEVIATION FROM DESIGN INFORMATION, THE LOAD MARKS ARE FOR INFORMATION ONLY **N/A**
158600	3"-CH-1402-15 PIPE TO TEE CTMT	B-J B9.21	PT	NDE 3.3-27	С	x	4/29/93 - PT COMPLETE **N/A**
158700	3"-CH-1402-16 TEE TO PIPE CTMT	B-J B9.21	PT	NDE 3.3-27	С	x	4/29/93 - PT COMPLETE

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

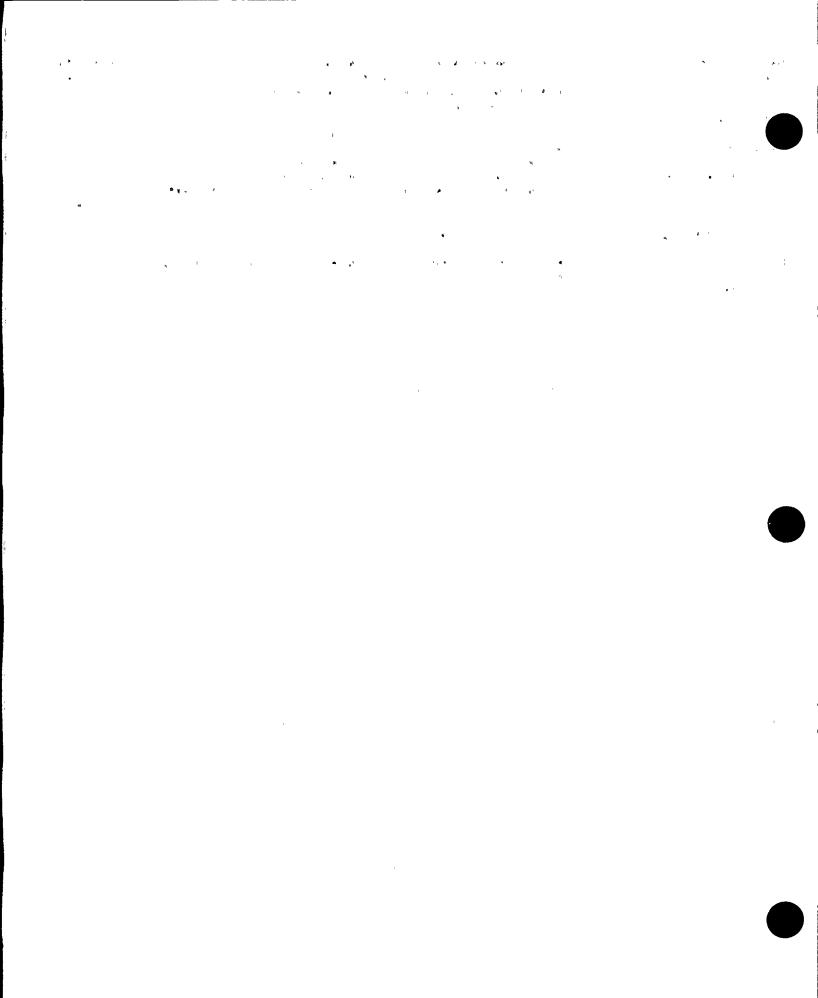
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CLASS 1 ALL STATUS COMPONENTS

MICAL AND VOLUME CONTROL TO REGENERATIVE HX

						N I	I	0	
LONE NU	MBER: 047	ASME				0 1			
		SEC. XI			T	RS	E	H	
SUMMARY	EXAMINATION AREA	CATGY	EXAM	,	Α	E	0	E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	M	R	**CALIBRATION BLOCK**
						• •	•	-	•••••
	SYSTEM NO. 47, 5614-P-551-S	SH. 1 OF 1	(REF. DWG.	NO. 4-A41)					
162960	4-VCH-62	F-C	VT-3	NDE 4.3-80	A			X	5/3/93 - VT COMPLETE, SUPPORT DOES NOT
	SINGLE ACTING RESTRAINT	F3.10	CNR	93-4-087					MATCH DRAWING, APPARENT BROKEN WELD,
	CTMT, 25'3"		CR	93-393					DAMAGE TO PIPE, BASE PLATE NOT PROPERLY
			PC/M	93-094					BOLTED, SUPPORT WAS REMOVED, REDESIGNED,
									AND REPLACED
				0					**N/A**
447700	3"-сн-1403-7	B-J	PT	NDE 3.3-29	_			v	4/28/93 - PT COMPLETE, 2 UNACCEPTABLE
103300	PIPE TO ELBOW	B9.21	PT	NDE 3.3-37	U				LINEAR INDICATIONS, 5/2/93 - PT
		D7.21	PT	W93-0264					RE-EXAMINATION COMPLETE, INDICATIONS
	CTMT, 17'3"		CNR	93-4-074		^ -	-	_	WERE REMOVED, SURFACE ANOMOLY
									•
			CR	93-349					**N/A**
			PWO	93012856					



ZUNE NUMBER: 049

TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 1 ALL STATUS COMPONENTS

ICAL & VOLUME CONTROL FROM THE REGENERATIVE HX

NI O ASME SONGT

TRSEH SEC. XI

SUMMARY EXAMINATION AREA NUMBER IDENTIFICATION CATGY EXAM A E I O E REMARKS

ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 47, 5614-P-553-S SH. 3 OF 4 (REF. DWG. NO. 4-A43)

B-J PT NDE 3.3-24 C X - - - 4/26/93 - PT COMPLETE 170700 2"-CH-1402-22

PIPE TO RESTRICTING ORIFICE B9.40

CTHT, 15'6"

N/A

PAGE:

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

N/A

PAGE:

20

CLASS 1 ALL STATUS COMPONENTS

MICAL	&	VOLUME	CONTROL	SEAL	INJECTION	LOOP A

						N	I	0	
ZONE NU	MBER: 050	ASHE			S	0 1	N G	T	
		SEC. XI			T	R	SE	H	
SUHHARY	EXAMINATION AREA	CATGY	EXAM		Α	E	10	E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G M	R	**CALIBRATION BLOCK**
	SYSTEM NO. 47, 5614-P-556-S	SH. 1 OF 1	(REFDWG.	NO. 4-A44)					
175500	1.5"-CH-1401-FB	B-G-2	VT-1	NDE 4.1-10	С	_		X	4/27/93 - VT COMPLETE, ADDITIONAL
	ELANOE DOLTINO	B7.50	VT-1	NDE 4.1-13		ν.		_	CLEANING REQUIRED, 5/7/93 - VT
	FLANGE BOLTING	B7.30	41-1	NUL 7.1-13		^		_	CLEANING REGOIRED, 3/1/93 - VI
	CTHT, 2917"	67.50	CNR	93-4-066		^		_	RE-EXAMINATION COMPLETE AFTER CLEANING

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 1 ALL STATUS COMPONENTS

PAGE:

21

ICAL & VOLUME CONTROL SEAL INJECTION LOOP B

					_	NI	_	
ZONE NU	MBER: 051	ASME				ON		
		SEC. XI			T	RS	E H	
SUMMARY	EXAMINATION AREA	CATGY	EXAM		Α	ΕI	O E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	CG	M R	**CALIBRATION BLOCK**
				***************************************	•			
	SYSTEM NO. 47, 5614-P-554-S	SH. 1 OF 2	(REF. DWG.	NO. 4-A45)				
180350	2"-CH-1404-FB2	B-G-2	VT-1	NDE 4.1-4	С	x -		4/27/93 - VT COMPLETE
	FLANGE BOLTING CTHT, 30'7"	B7.50						
	CIRI, 30*7"							**N/A**
180450	2"-CH-1404-FB3	B-G-2	VI-1	NDE 4.1-5	С	x -		4/28/93 - VT COMPLETE
.23450	FLANGE BOLTING CTHT, 30'7"	B7.50						
	····· / •• ·							

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TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

PAGE:

22

CLASS 1 ALL STATUS COMPONENTS

MICAL & VOLUME CONTROL SEAL INJECTION LOOP C

ZONE NUMBER: 052 ASME S O N G T SEC. XI T R S E H

SEC. XI T R S E H
SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 47, 5614-P-555-S SH. 2 OF 2 (REF. DWG. NO. 4-A46)

184720 2"-CH-1405-FB1 B-G-2 VT-1 NDE 4.1-11 C - - - X 4/27/93 - VT COMPLETE, 5/7/93 - VT FLANGE BOLTING B7.50 VT-1 NDE 4.1-12 X - - - RE-EXAMINATION AFTER CLEANING COMPLETE

CTMT, 28'6" CNR 93-4-065 PMO 93007318

93007318

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ZONE NUMBER: 056

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 1 ALL STATUS COMPONENTS

TOR COOLANT PUMP A

NI O SONGT ASHE

SEC. XI TRSEH

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

T C G M R **CALIBRATION BLOCK** ITEM NO METHOD PROCEDURE NUMBER IDENTIFICATION

SYSTEM NO. 41 (REF. DWG. NO. 4-V13A)

197300 4-RCP-A-FLYWHEEL RG 1.14 PT 80165-2 C X - - - 2/12/93 - PT AND UT COMPLETED BY FLYWHEEL UT 12560 X - - - WESTINGHOUSE, EXAMINED ENTIRE FLY X - - - WESTINGHOUSE, EXAMINED ENTIRE FLYWHEEL,

MOTOR SERIAL NUMBER 1S-76P499 PLACED IN CTMT

SERVICE

PAGE:

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 1 ALL STATUS COMPONENTS

CTOR COOLANT PUMP B

NE NUMBER: 057

N'I O SONGT ASHE

SEC. XI TRSEH

CATGY EXAM A E I O E REMARKS SUMMARY EXAMINATION AREA

T C G M R **CALIBRATION BLOCK** NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE

SYSTEM NO. 41 (REF. DWG. NO. 4-V138)

RG 1.14 UT NDE 5.15-1 C X - - - 4/30/93 - UT COMPLETE 198200 4-RCP-B-FLYWHEEL

FLYWHEEL CTMT

N/A

PAGE:

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

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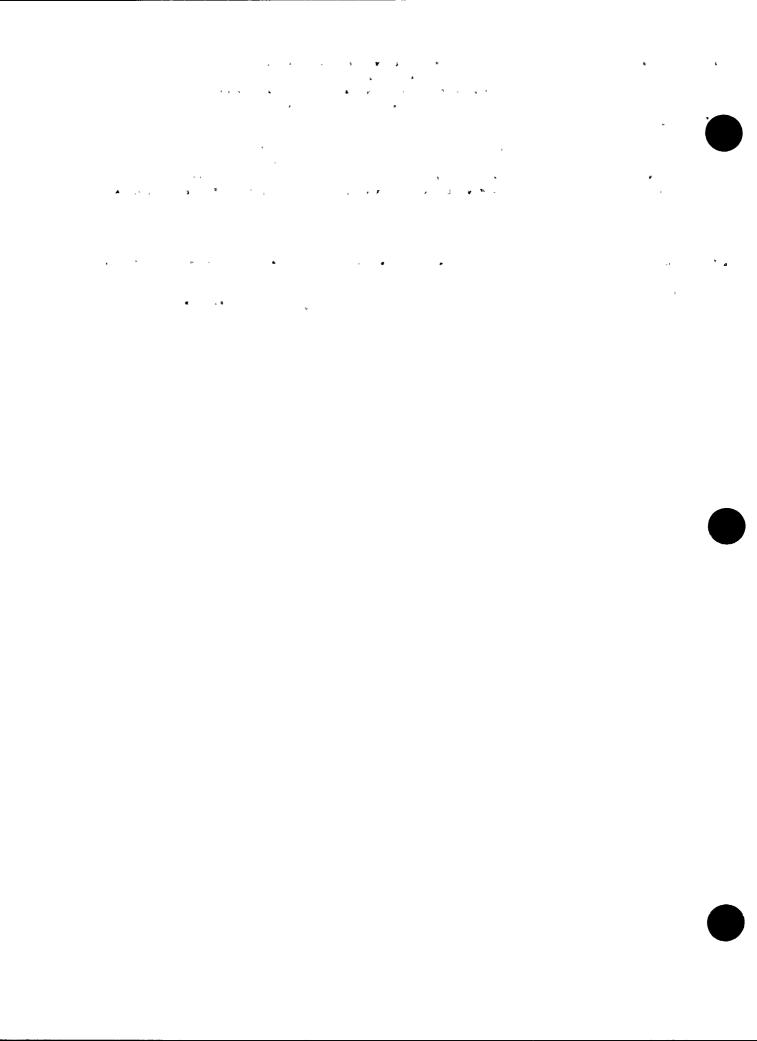
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SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 1 ALL STATUS COMPONENTS

SENERATIVE HEAT EXCHANGER

CHEK	ATTYE REAT EXCHANGER								
						N	I	0	
ME NU	MBER: 059	ASME			S	0	N C	T	
		SEC. XI			T	R	SE	H	
SUMMARY	EXAMINATION AREA	CATGY	EXAM		Α	E	1 () E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G F	1 R	**CALIBRATION BLOCK**
••••					-	-		-	
204300	(REF. DWG. NO. 4-V11) RGX 4E200 VISUAL FOR LEAKAGE CTMT		VT-2 VT-3	NDE 4.2-1 NDE 4.3-1	С				4/12/93 - VT-3 COMPLETE, 5/21/93 - VT-2 COMPLETE, EXAMINED IN ACCORDANCE WITH RELIEF REQUEST NO. 3
									N/A



TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

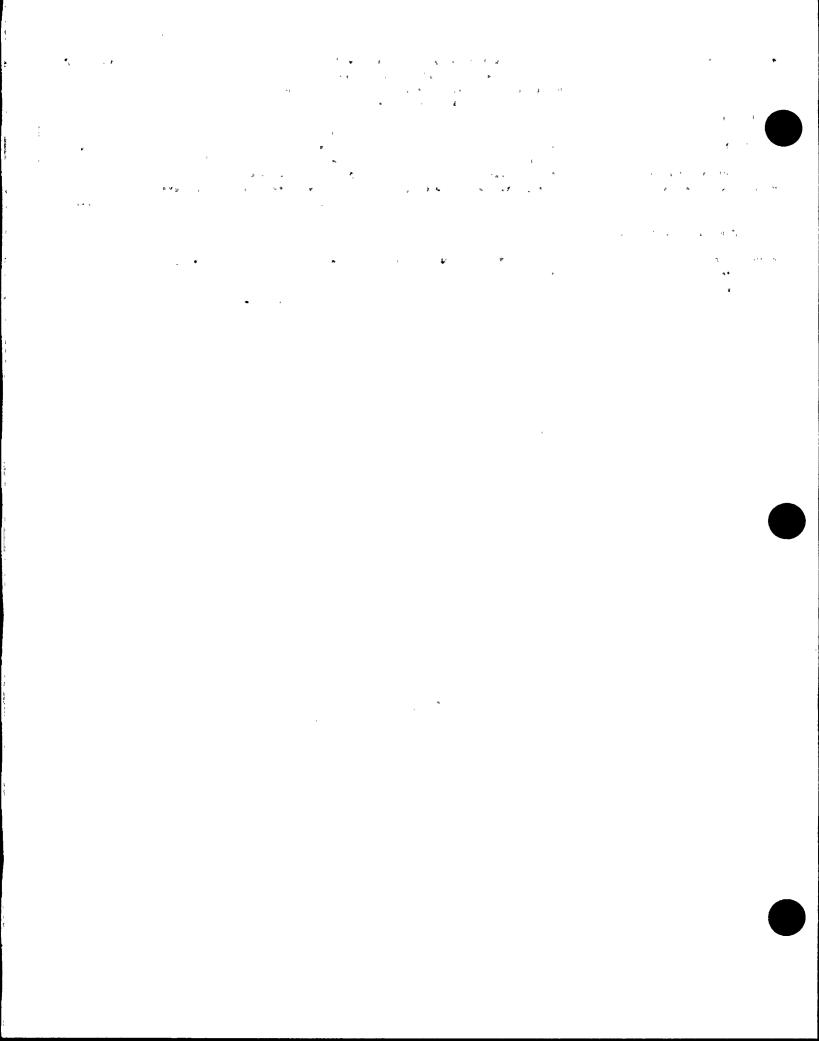
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CLASS 2 ALL STATUS COMPONENTS

LM GENERATOR A SECONDARY SIDE

						N	I	0	
ZONE NUI	MBER: 060	ASME			S	0	N	GT	
		SEC. XI			T	R	S	ΕН	1
SUMMARY	EXAMINATION AREA	CATGY	EXAM		A	Ε	1	0 E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G	M R	**CALIBRATION BLOCK**
•••••			•••••		-	-	•	• •	••••••
	(REF. DWG. NO. 4-V10A)								
204700	4-SGA-CL	C-A	UT 0	NDE 5.1-1	C	-	•	- X	4/93 - UT COMPLETE, ACCEPTABLE SLAG
	TRANSITION TO UPPER SHELL WELD	C1.10	UT 45	NDE 5.1-1		-	-	ХХ	INCLUSIONS, NOZZLE GEOMETRY
	CTMT		UT 60	NDE 5.1-1		-	-	- x	
									UT-7
205300	4-SGA-SS		VT	NDE 4.4-1	Α	X	-		4/20/93 - VT COMPLETE
	SECONDARY SIDE EXAMINATION CTHT								



ZONE NUMBER: 061

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

M GENERATOR B SECONDARY SIDE

ASME S O N G T

SEC. XI T R S E H
CATGY EXAM A E I O E

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS
NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

(REF. DWG. NO. 4-V10B)

206600 4-SGB-SS --- VT NDE 4.4-2 A X - - - 4/20/93 - VT COMPLETE

SECONDARY SIDE EXAMINATION ---

CTHT

N/A

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ZONE NUMBER: 062 .

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

M GENERATOR C SECONDARY SIDE

ASME S O N G T SEC. XI T R S E H

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

(REF. DWG. NO. 4-V10C)

207900 4-SGC-SS --- VT NDE 4.4-3 A X - - - 4/20/93 - VT COMPLETE

SECONDARY SIDE EXAMINATION ---

CTMT

N/A

PAGE:

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF) CLASS 2 ALL STATUS COMPONENTS

PAGE: 29

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	MBER: EXAMINATION AREA IDENTIFICATION	ASHE SEC. XI CATGY ITEM NO	EXAM METHOD	PROCEDURE	T A	O R E	N S		REMARKS **CALIBRATION BLOCK**
208390	RHR PUMP 4P210A		VT-1 CNR PWO	4.1-1 92-4-003 92047166	С	•	-	- x	10/20/92 - VT COMPLETE, WATER LEAKING FROM FLANGE, ACCEPTED AS-IS, WILL BE CORRECTED AT A FUTURE DATE WITH A PLANT WORK ORDER, EXAMS PERFORMED DURING THE 1992 UNIT 3 OUTAGE
208400	RHR PUMP 4P210B		VT-1 CHR PWO	NDE 4.1-2 92-4-004 92047260	С	-	-	- x	10/20/92 - VT COMPLETE, WATER LEAKING FROM FLANGE, BORIC ACID ACCUMULATION, ACCEPTED AS-IS, WILL BE CORRECTED AT A FUTURE DATE WITH A PLANT WORK ORDER, EXAMS PERFORMED DURING THE 1992 UNIT 3 OUTAGE

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TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

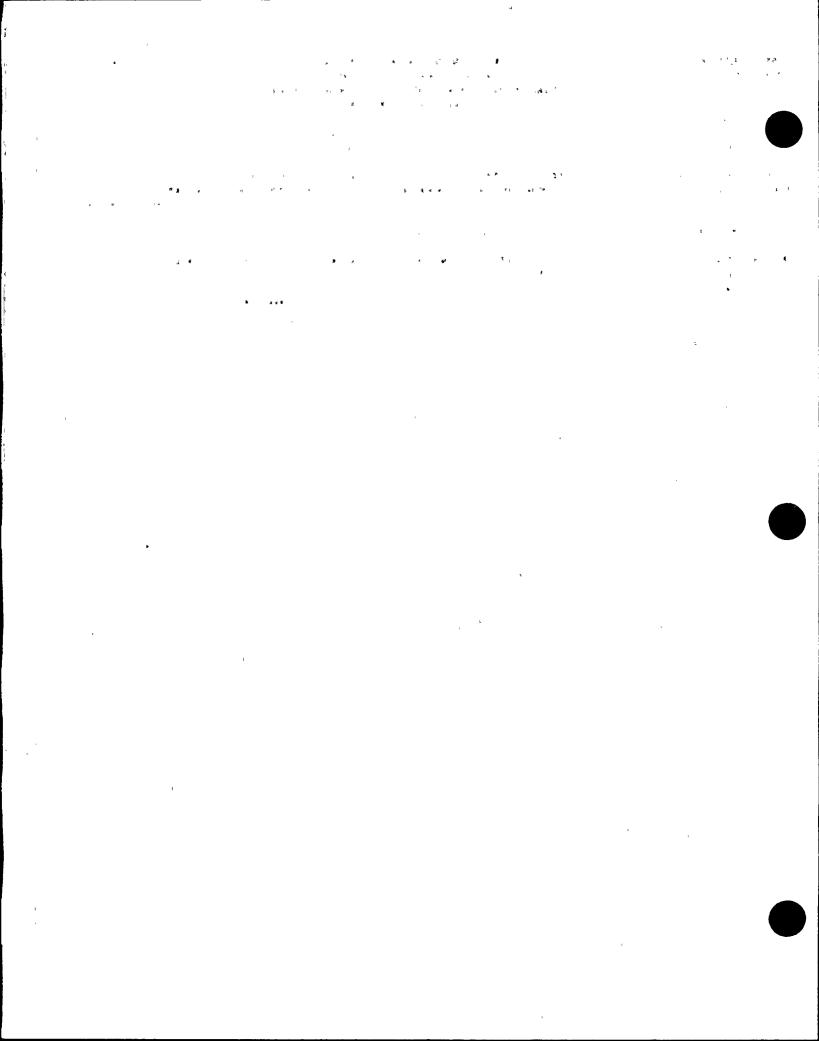
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SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 2 ALL STATUS COMPONENTS

LDUAL	HEAT	REMOVAL	TO	RESID.HEAT	REMOVAL	PUMP A

ZONE NU	MBER: 063	ASHE			s	N O		0 T :	
SUMMARY NUMBER	EXAMINATION AREA IDENTIFICATION	SEC. XI CATGY ITEM NO	EXAM METHOD	PROCEDURE	A	E	1 (REMARKS **CALIBRATION BLOCK**
	SYSTEM NO. 50, 5614-P-503-S	SH. 1 OF 2	(REF. DWG.	NO. 4-B01B)					
209900	14"-RHR-2401-15 PIPE TO VALVE 4-752A 5'7"	C-F C5.11	PT	NDE 3.3-34	С	x	-		4/27/93 - PT COMPLETE
									N/A
210700	14"-RHR-2402-8 PIPE TO PUMP CASING (-) 2'9"	C-F C5.11	PT	NDE 3.3-34	С	X		•	4/27/93 - PT COMPLETE



E NUMBER: 064

TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

MIDUAL HEAT REMOVAL TO RESID. HEAT REMOVAL PUMP B

NI O SONGT

ASME SEC. XI TRSEH

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

T C G M R **CALIBRATION BLOCK** NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE

SYSTEM NO. 50, 5614-P-503-S SH. 1 OF 2 (REF. DWG. NO. 4-B02)

PT NDE 3.3-19 C X - - - 4/25/93 - PT COMPLETE 212900 14"-RHR-2403-12 C-F

C5.11 PIPE TO PUMP CASING

(-) 21911

N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

SIDUAL HEAT REMOVAL FROM CONTAINMENT SUMP A

N I O E NUMBER: 066 ASHE SONGT TRSEH SEC. XI

CATGY EXAM A E I O E REMARKS SUMMARY EXAMINATION AREA

ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK** NUMBER IDENTIFICATION

SYSTEM NO. 50, 5614-P-503-S SH. 2 OF 2 (REF. DWG. NO. 4-B04)

NDE 3.3-33 C X - - - 4/27/93 - PT COMPLETE C-F PT 216050 14"-RHR-2405-10LS

LONG SEAM C5.11

014"

N/A

C-F PT NDE 3.3-33 C X - - - 4/27/93 - PT COMPLETE 216100 14"-RHR-2405-11

C5.11 PIPE TO TEE

014"

N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

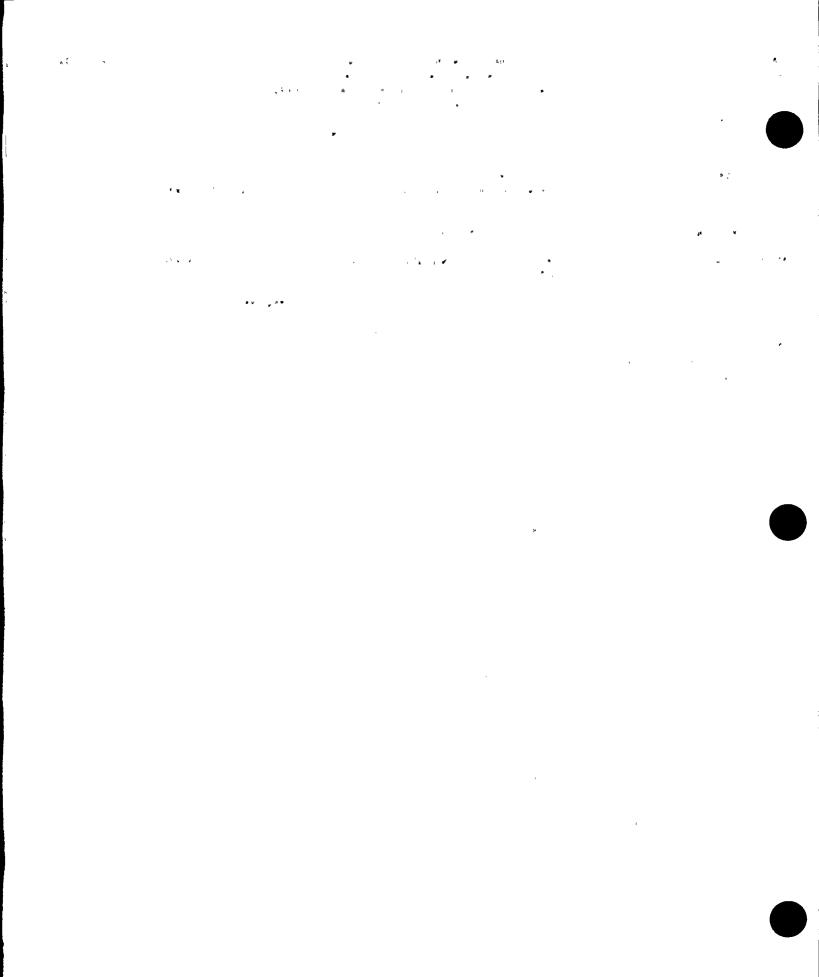
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SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 2 ALL STATUS COMPONENTS

IAHA	HEAT	REMOVAL	FROM	CONTAINMENT	SUMP B
	11671	KEHOTKE	11101	001111111111111111111111111111111111111	- 001111 - 0

ZONE NUM	4BER: 067	ASHE SEC. XI				N : O I R :		T	
SUMMARY	EXAMINATION AREA	CATGY	EXAM		A	E	1 0	E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G M	R	**CALIBRATION BLOCK**
	SYSTEM NO. 50, 5614-P-503-S	SH. 2 OF 2	(REF. DWG.	NO. 4-B05)	•	-		•	
216200	14"-RHR-2406-1	C-F	PT	NDE 3.3-32	С	X ·		•	4/29/93 - PT COMPLETE
	PIPE TO PIPE 7'5"	C5.11							
									H/A
	4-SR-629 BOX RESTRAINT	F-B F2.10	VT-3	NDE 4.3-69	С	X ·		•	4/26/93 - VT COMPLETE
	7'2"								**H/A**
216560	4-SR-629 IA	c-c	PT	NDE 3.3-32	С	х -			4/29/93 - PT COMPLETE
	INTEGRAL ATTACHMENT	C3.20							
									N/A
760	4-SR-623 IA	с-с	PT	NDE 3.3-25	С	X ·		-	4/26/93 - PT COMPLETE
	INTEGRAL ATTACHMENT (-) 0'1"	c3.20							
									N/A



TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

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SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 2 ALL STATUS COMPONENTS

KOHAL	HFAT	REMOVAL.	INSIDE	ጼ	OUTSIDE	CONTAINMENT

						N	I	0	•
ZONE NU	MBER: 069	ASME		•	S	0	N	GT	
		SEC. XI			T	R	S	ЕН	
SUMMARY	EXAMINATION AREA	CATGY	EXAM		A	E	I	0 E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G	M R	**CALIBRATION BLOCK**
				••••	•	-	-		
	SYSTEM NO. 50, 5614-P-509-S	H. 2 OF 4	(REF. DWG.	NO. 4-B078)					
223020	12"-RHR-2402-30A PIPE TO PIPE	C-F C5.11	PT	NDE 3.3-10	С	X	•		4/23/93 - PT COMPLETE
	СТНТ, 21'0"			,					**N/A**
223080	12"-RHR-2402-30B PIPE TO PIPE	C-F C5.11	PT	NDE 3.3-10	С	x	-		4/23/93 - PT COMPLETE
	CTHT, 21'0"								**N/A**
227400	12"-RHR-2402-34	C-F	PΤ	NDE 3.3-10	C	x	-		4/23/93 - PT COMPLETE
223400	TEE TO REDUCER CTMT, 21'0"	C5.11	••		Ĭ	.,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	, al v								**N/A**
500	12"-RHR-2402-35	C-F	PΤ	NDE 3.3-10	С	x	_		4/23/93 - PT COMPLETE
	REDUCER TO VALVE 4-744A CTMT, 21'0"	C5.11							

N/A

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ZONE NUMBER: 070

TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

MOUAL HEAT REMOVAL PUMP A DISCHARGE TO RHR HX A

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SEC. XI T R S E H

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 50, 5614-P-505-S SH. 2 OF 5 (REF. DWG. NO. 4-B08)

226300 10"-RHR-2401-16 C-F PT NDE 3.3-15 C X - - - 4/25/93 - PT COMPLETE

VALVE 4-757A TO PIPE C5.11

N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

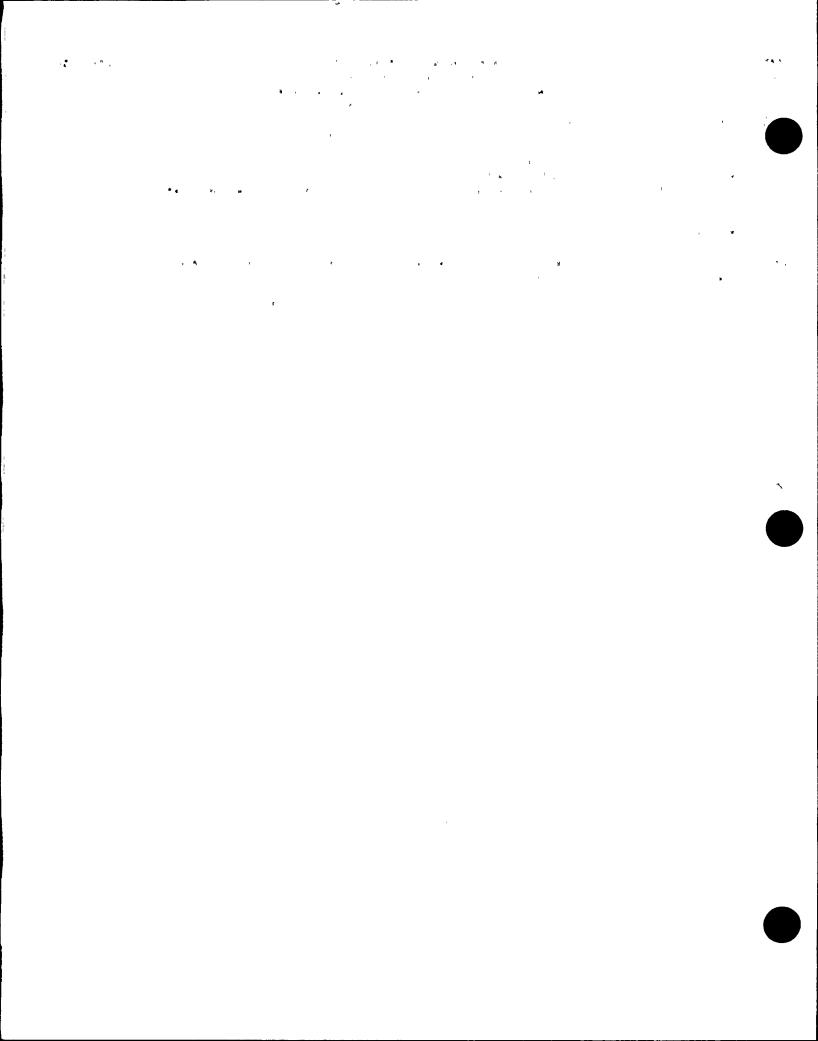
CLASS 2 ALL STATUS COMPONENTS

SIDUAL HEAT REMOVAL PUMP B DISCHARGE TO RHR HX B

STOOK	L HEAT KEMOVAL PUMP B DISCHAR	GC TO KIIK II	<u> </u>				
						N I O	
JE NU	MBER: 071	ASME			\$	ONGT	
_		SEC. XI			T	RSEH	
SUMMARY	EXAMINATION AREA	CATGY	EXAM		Α	EIOE	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	CGMR	**CALIBRATION BLOCK**
					-		***************************************
	SYSTEM NO. 50, 5614-P-505-S	SH. 1 OF 5	(REF. DWG.	NO. 4-B09)			
	444		= 4		_		
227640		F-C	VT-3,4	NDE 4.3-73	С	X	4/26/93 - VT COMPLETE, DRAWING
	SPRING HANGER	F3.50	CNR	93-4-075			DISCREPENCY, ACCEPTED AS-IS BY
	5'1/2"		CR	93-347			ENGINEERING EVALUATION
							N/A
	404 -45 0/00 0/			une 7 7 47	_	v	/ /07 /07 DY 001/01 FYF
229000	10"-RHR-2402-24	C-F	PT	NDE 3.3-17	Ü	X	4/25/93 - PT COMPLETE
	VALVE 4-757B TO NOZZLE	C5.11					

N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

NOUAL HEAT REMOVAL HEAT EXCHANGER B DISCHARGE

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SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

NUMBER IDENTIFICATION 1TEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 50, 5614-P-505-S SH. 4 OF 5 (REF. DWG. NO. 4-B11)

230500 10"-RHR-2404-1 C-F PT NDE 3.3-16 C X - - - 4/25/93 - PT COMPLETE

NOZZLE TO ELBOW C5.11

N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

ETY INJECTION FROM REACTOR WATER STORAGE TANK

NI O S ON G T

ASHE S ONGT SEC. XI T R S E H

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 62, 5614-P-502-S SH. 2 OF 4 (REF. DWG. NO. 4-B15)

231900 SR-621 F-C VT-3 NDE 4.3-6 C X - - - 4/15/93 - VT COMPLETE

PIPE SUPPORT F3.10

15'7"

N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY
SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

DUAL HEAT REMOVAL SYSTEM FROM ACCUMULATOR A

	DONE HEAT REHOVAE OF STELL TROST NO		i					
	NUMBER: 078	ASME			s	N I O N	O G T	
	L HOHDERT OF O	SEC. XI				RS		
SUM	MARY EXAMINATION AREA	CATGY	EXAM		-			REMARKS
NUM	BER IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	CG	M R	**CALIBRATION BLOCK**
				•••••	-			•
	SYSTEM NO. 50, 5614-P-509-S	SH. 1 OF 4	(REF. DWG.	NO. 4-B16)				
2329	910 4-SIH-68	F-C	VT-3,4	NDE 4.3-72	С		- x	4/29/93 - VI COMPLETE, INADEQUATE THREAD
	SPRING HANGER	F3.50	CNR	93-4-073				ENGAGEMENT, ACCEPTED AS-IS BY
	CTHT, 21'4"		CR	93-348				ENGINEERING EVALUATION **N/A**
232	915 4-SIH-68 IA INTEGRAL ATTACHMENT CTMT, 21'4"	C-C- C3.20	PT	NDE 3.3-28	С	x -		4/29/93 - PT COMPLETE
	911117 W							

N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

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SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 2 ALL STATUS COMPONENTS

RESIDUAL HEAT REMOVAL SYSTEM FROM ACCUMULATOR B

\						NI O	
AE NU	1BER: 079	ASME			S	ONGT	1
		SEC. XI			T	RSEH	
JMMARY	EXAMINATION AREA	CATGY	EXAM		Α	EIOE	REMARKS
MBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	CGHR	**CALIBRATION BLOCK**
			*********		•	• • • •	
	SYSTEM NO. 50, 5614-P-509-S	SH. 3 OF 4	(REF. DWG.	NO. 4-B17)			
3000	10"-SI-2402-1A	C-F	PT	NDE 3.3-9	С	x	4/23/93 - PT AND UT COMPLETE, ROOT
	NOZZLE TO PIPE	C5.21	UT 45	NDE 5.4-4		X -	GEOMETRY, NO EXAMINATION FROM THE NOZZLE
	CTHT, 30'2"		UT 60	NDE 5.4-4		X -	SIDE DUE TO ITS CONFIGURATION
	•						**UT-27**
3100	SR-450B	F-C	VT-3.4	NDE 4.3-68	c	v	4/23/93 - VT COMPLETE, LOOSE LOCK NUT;
3100	SPRING HANGER	F3.50	VT-3,4	NDE 4.3-76	·		4/30/93 - VT RE-EXAMINATION COMPLETE,
		r3.30	CNR	93-4-060		^	LOCK NUT WAS TIGHTENED
	CTMT, 20'10"		CR	93-323			LOCK NOT WAS ITUNIENED
			PWO	93012700			**N/A**

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ONE NUMBER: 080

SUMMARY EXAMINATION AREA

TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

DUAL HEAT REMOVAL SYSTEM FROM ACCUMULATOR C

NIO SONGT ASME

SEC. XI TRSEH CATGY EXAM A E I O E REMARKS

ITEM NO METHOD NUMBER IDENTIFICATION PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 50, 5614-P-509-S SH. 4 OF 4 (REF. DWG. NO. 4-B18)

NDE 3.3-20 C X - - - 4/22/93 - PT AND UT COMPLETE, ROOT AND C-F PT 233280 10"-\$1-2403-3

C5.21 UT 45 - - X - COUNTERBORE GEOMETRY NDE 5.4-1 PIPE TO ELBOW

CTHT, 18'9" UT 60 NDE 5.4-1 - - x -

UT-27

PAGE:

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TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

TY INJECTION TO CONTAINMENT SPRAY PUMP A

N I O
TE NUMBER: 083 ASME S O N G T
SEC. XI T R S E H

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 62, 5614-P-502-S SH. 1 OF 4 (REF. DWG. NO. 4-B21)

234070 8"-SI-2401-6 C-F PT NDE 3.3-26 C X - - - 4/29/93 - PT COMPLETE

ELBOW TO VALVE 4-844A C5.11

N/A

PAGE:

42

234090 8"-SI-2401-8 C-F PT NDE 3.3-7 C X - - - 4/20/93 - PT COMPLETE

REDUCING ELBOW TO FLANGE C5.11

N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

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43

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 2 ALL STATUS COMPONENTS

DUAL	HEAT	REMOVAL	SYSTEM	INSIDE	CONTAINMENT

TOME NU	MBER: 085	ASHE SEC. XI				NI OONGT	
	EXAMINATION AREA	CATGY ITEM NO	EXAM METHOD	PROCEDURE	A	EIOE	REMARKS **CALIBRATION BLOCK**
					•		
	SYSTEM NO. 50, 5614-P-509-S	SH. 2 OF 4	(REF. DWG.	NO. 4-B23)			
235600	8"-SI-2403-1	C-F	PT /F	NDE 3.3-21	C		4/24/93 - PT AND UT COMPLETE, ROOT
	TEE TO PIPE CTMT, 21'6"	C5.21	UT 45 UT 60	NDE 5.4-2 NDE 5.4-3		X -	**UT-41**
236000	8"-S1-2403-16	C-F	PT	NDE 3.3-21	С	x	4/24/93 - PT AND UT COMPLETE, ROOT
	ELBOW TO PIPE CTHT, 26'8"	C5.21	UT 45 UT 60	NDE 5.4-2 NDE 5.4-3		x -	GEOMETRY **UT-41**
							3.
236060	8"-SI-2403-17 PIPE TO VALVE 4-876B CTMT, 26'8"	C-F C5.21	PT UT 45 UT 60	NDE 3.3-21 NDE 5.4-2 NDE 5.4-2	С		4/24/93 - PT AND UT COMPLETE, ROOT GEOMETRY
	· · · · · · · · · ·						**UT-41**

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

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44

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 2 ALL STATUS COMPONENTS

ETY	INJECTION SYSTEM OUTSIDE CONTA	INMENT							
						N	I	0	
ME NU	MBER: 087	ASHE			S	0	N	GT	
		SEC. XI			T	R	S	E H	
SUHHARY	EXAMINATION AREA	CATGY	EXAM		Α	E	1 (0 E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G	M R	**CALIBRATION BLOCK**
				•••••	-	-	-		
	SYSTEM NO. 62, 5614-P-502-S	SH. 1 OF 4	(REF. DWG.	NO. 4-B25)					
237100	8"-\$1-2405-7	C-F	PT	NDE 3.3-5	С	x	_		4/20/93 - PT COMPLETE
	VALVE 4-844B TO PIPE	C5.11							
									H/A
237200	8"-SI-2405-8 PIPE TO REDUCER	C-F C5.11	PT	NDE 3.3-5	С	x	•		4/20/93 - PT COMPLETE
	TITE TO REDUCE	03111		7					**N/A**
237300	8"-SI-2405-9 REDUCER TO FLANGE	C-F C5.11	PT	NDE 3.3-5	С	×	•		4/20/93 - PT COMPLETE

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

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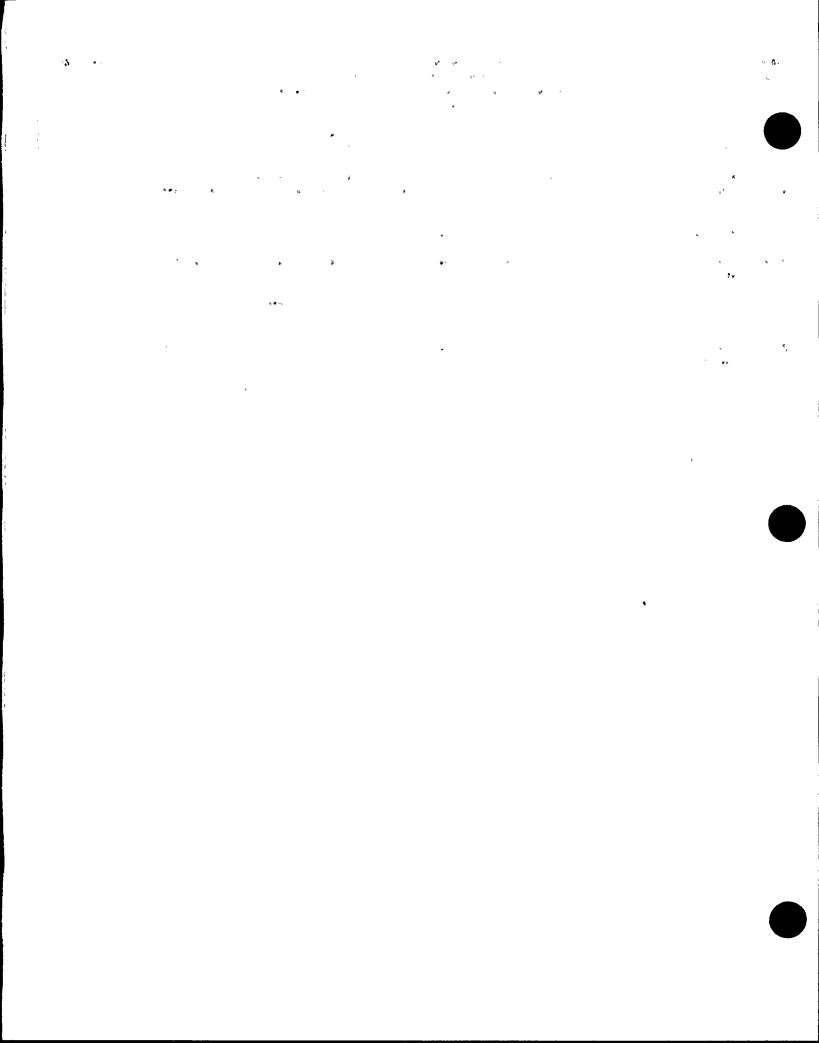
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CLASS 2 ALL STATUS COMPONENTS

KOUAL	HEAT	REMOVAL	SYSTEM	INSIDE	CONTAINMENT	

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FORE NO	MBER: 089	ASME				0 1			
		SEC. XI				R S			•
SUMMARY	EXAMINATION AREA	CATGY	EXAM	1	A	E	1 0	E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G M	R	**CALIBRATION BLOCK**
					-	-		-	
	SYSTEM NO. 50, 5614-P-509-S	SH. 1 OF 4	(REFDWG.	NO. 4-B27)					
238950	4-89-A1	F-B	VT-3	NDE 4.3-71	С	χ.			4/26/93 - VT COMPLETE
	ANCHOR	F2.10			-				
	CTMT, 26'0"								
									H/A
					_				
238960	4-89-A1 IA	C-C	PT	NDE 3.3-22	С	х .		-	4/24/93 - PT COMPLETE
	INTEGRAL ATTACHMENT	c2.30							
	CTMT, 26'0"								**N/A**
									W D
241350	SR-445	F-B	VT-3	NDE 4.3-70	C	χ.		-	4/26/93 - VT COMPLETE
	BOX RESTRAINT	F2.10							
	CTHT, 18'4"								
									A Assessment Assessmen

N/A



TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

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46

CLASS 2 ALL STATUS COMPONENTS

IDUAL HEAT REMOVAL SYSTEM OUTSIDE CONTAINMENT

SUMMA	NUMBER: 090 RY EXAMINATION AREA R IDENTIFICATION	ASHE SEC. XI CATGY ITEM NO	EXAM METHOD	PROCEDURE	T A	O R E	SE	T E H D E	REMARKS **CALIBRATION BLOCK**
	SYSTEM NO. 50, 5614-P-504-S	`				.,			4.05.07
24550	0 8"-SI-2408-14 PIPE TO ELBOW 19'0"	C-F C5.11	PT	NDE 3.3-18	С	х		•	4/25/93 - PT COMPLETE
									N/A
24560	0 8"-SI-2408-15 ELBOW TO VALVE 4-10-872 20'0"	C-F C5.11	PT	NDE 3.3-18	С	X	• •	•	4/25/93 - PT COMPLETE
									N/A
24570	0 8"-SI-2408-16 VALVE 4-10-872 TO ELBOW	C-F C5.21	PT UT 45	NDE 3.3-18 NDE 5.4-6	С				4/25/93 - PT COMPLETE, 4/29/93 - UT COMPLETE, COUNTERBORE AND ROOT GEOMETRY
	20*0"		UT 60	NDE 5.4-6				-	
90	0 8"-SI-2408-17	C-F		NDE 3.3-18	С				4/25/93 - PT COMPLETE; 4/29/93 - UT
	ELBOW TO ELBOW 2510"	C5.21	UT 45 UT 60	NDE 5.4-6 NDE 5.4-6				(- (-	COMPLETE, ROOT AND COUNTERBORE GEOMETRY
									UT-41
24610	0 8"-51-2408-18	C-F	PT	NDE 3.3-18	С				4/25/93 - PT COMPLETE; 4/29/93 - UT
	ELBOW TO PENETRATION 11 26'0"	C5.21	UT 45 UT 60	NDE 5.4-6		- X			COMPLETE, ROOT GEOMETRY
						•			**UT-41**

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TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

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SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 62, 5614-P-502-S SH. 4 OF 4 (REF. DWG. NO. 4-B31)

249400 6"-SI-2402-3 C-F PT NDE 3.3-4 C X - - - 4/16/93 - PT COMPLETE

ELBOW TO PIPE C5.11

N/A

249440 6"-SI-2402-3LD C-F PT NDE 3.3-4 C X - - - 4/16/93 - PT COMPLETE

2.5T OF LONG SEAM DOWNSTREAM C5.12

OF WELD 3

N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

NDE 3.3-13

CIDUAL HEAT REMOVAL SYSTEM TO REFUELING CANAL

N I O

RE NUMBER: 094

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SUMMARY EXAMINATION AREA

CATGY EXAM

A E I O E REMARKS

NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 50, 5614-P-575-S SH. 1 OF 1 (REF. DWG. NO. 4-B32)

251300 6"-SI-2403-15 C-F PT NDE 3.3-13 C X - - - 4/24/93 - PT COMPLETE

PIPE TO ELBOW C5.11

CTHT, 15:11"

PT

251400 6"-SI-2403-16 C-F ELBOW TO PIPE C5.11

CTMT, 16'8"

N/A

C X - - - 4/24/93 - PT COMPLETE

N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

TAINMENT SPRAY PUMP B DISCHARGE

N I O
NE NUMBER: 096 ASME S O N G T
SEC. XI T R S E H

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

NUMBER IDENTIFICATION ITEM NO HETHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 68, 5614-P-511-S SH. 1 OF 1 (REF. DWG. NO. 4-B34)

255000 6"-CS-2402-1A C-F PT NDE 3.3-6 C X - - - 4/20/93 - PT COMPLETE

FLANGE TO REDUCING ELBOW C5.11

2114"

N/A

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255200 6"-CS-2402-3 C-F PT NDE 3.3-6 C X - - - 4/20/93 - PT COMPLETE

PIPE TO VALVE 4-880B C5.11

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N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

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SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK** NUMBER IDENTIFICATION

SYSTEM 62, 5614-P-783-S SH. 1 OF 3 (REF. DWG. NO. 4-835)

C-F 257800 6"-CS-2404-1 PT NDE 3.3-41 C X - - - 5/4/93 - PT COMPLETE

NOZZLE TO ELBOW C5.11

N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

W STEAM SYSTEM LOOP A INSIDE CONTAINHENT

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NE NUMBER: 099

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S O N G T

SEC. XI
T R S E H

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE T C G H R **CALIBRATION BLOCK**

SYSTEM NO. 72, 5614-P-559-S SH. 1 OF 1 (REF. DWG. NO. 4-B37)

259500 4-99-A1 F-B VT NDE 4.3-85 C X - - - 5/4/93 - VT COMPLETE

ANCHOR F2.10

CTHT, 54'10"

N/A

259550 4-99-A1 IA C-C HT NDE 2.2-11 C X - - - 5/4/93 - HT COMPLETE

INTEGRAL ATTACHMENT C3.20

CTHT, 54'10"

N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY
SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

W STEAM SYSTEM LOOP B INSIDE CONTAINMENT

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WHE NUMBER: 100 ASME S O N G T

SEC. XI T R S E H

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 72, 5614-P-560-S SH. 1 OF 1 (REF. DWG. NO. 4-B38)

260600 4-100-A1 F-B VT-3 NDE 4.3-86 C X - - - 5/6/93 - VT COMPLETE

ANCHOR F2.10

CTHT, 54'10"

N/A

52

PAGE:

260650 4-100-A1 IA C-C HT NDE 2.2-14 C X - - - 5/5/93 - HT COMPLETE

INTEGRAL ATTACHMENT C3.20

CTHT, 54'10"

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 2 ALL STATUS COMPONENTS

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SAH	GENERATOR	Α	BLOWDOWN	INSIDE	CONTAINMENT
		_			

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NE NU	MBER: 105	ASME						GT	
OLMULADY	CVAMINATION ADDA	SEC. XI	EVAU					EH	DENADVO
	EXAMINATION AREA IDENTIFICATION	CATGY ITEM NO	EXAM	PROCEDURE					REMARKS **CALIBRATION BLOCK**
NUMBER	IDENTIFICATION								CALIBRATION DECOR
	SYSTEM NO. 71, 5614-P-790-S S	H. 2 OF 3	(REF. DWG.	NO. 4-B49A)					
268760	78102B-H-420-12 IA INTEGRAL ATTACHMENTS CTHT, 32°6"	C-C C3.20	нт	NDE 2.2-9	С	x	•	• •	5/3/93 - MT COMPLETE
	,								**N/A**
269860	78102B-H-420-09 IA INTEGRAL ATTACHHENTS	C-C C3.20	нт	NDE 2.2-9	С	x	•		5/3/93 - MT COMPLETE
	CTHT, 25'8"								**N/A**
	SYSTEM NO. 71, 5614-P-790-S S	н. 1 ог <u>3</u>	(REFDWG.	NO. 4-B49B)					
270200	6"-BDA-2401-17	C-F	MT	NDE 2.2-7	С	X	-		5/3/93 - MT COMPLETE, 5/4/93 - UT
	PIPE TO PIPE	C5.21	UT 45	NDE 5.2-1		-	-	х -	COMPLETE, ROOT GEOMETRY
	CTHT, 20'6"		UT 60	NDE 5.2-1		X	-		
									UT-22
270220	78102B-H-420-08	F-B	VT-3	NDF 4.3-82	C	x			5/3/93 - VT COMPLETE
Elorro	BOX RESTRAINT	F2.10		1104 410 04	•				5,5,75 V. Gam 12.12
	CTHT, 21'0"								**N/A**
270240	78102B-H-420-08 IA INTEGRAL ATTACHMENTS CTMT, 21'0"	C-C C3.20	нт	NDE 2.2-8	С	X	•		5/3/93 - MT COMPLETE
									N/A
270//0	704020-11-720-07	F-B	V7-7	NDE / 7-47	•		_	- v	//2//03 - VT COMBLETE SUBBORT DOES NOT
270440	78102B-H-420-03 BOX RESTRAINT	F2.10	VT-3 CNR	NDE 4.3-67 93-4-050	·		_	- ^	4/24/93 - VT COMPLETE, SUPPORT DOES NOT MATCH DRAWING, ACCEPTED AS-IS BY ENGINEERING EVALUATION
	СТНТ, 26'0"		CR	93-300					**N/A**
270460	78102B-H-420-03 IA	c-c	нт	NDE 2.2-3	· C	x	-		4/22/93 - MT COMPLETE
	INTEGRAL ATTACHMENT CTHT, 26'0"	C3.20							
	•								**N/A**

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 2 ALL STATUS COMPONENTS

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ME NU	MBER: 105	ASKE					GT	
		SEC. XI					EH	
UHHARY	EXAMINATION AREA	CATGY	EXAM		A	ΕI	0 E	REMARKS
UMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	Ţ	CG	M R	**CALIBRATION BLOCK**
					•			
	SYSTEM NO. 71, 5614-P-790-S	SH. 1 OF 3	(REF. DWG.	NO. 4-B49B)				
70540	78102B-H-420-02	F-B	VT-3	NDE 4.3-81	С	x -		5/3/93 - VT COMPLETE
	BOX RESTRAINT	F2.10						
	CTHT, 26'0"							
								N/A
705/0	704020 # /20 02 *4		D.T.	NOC 7 7.70	_	v .		EV/VOZ DZ COMOLEZE ACCEDZADLE DOUMOED
270560	78102B-H-420-02 IA INTEGRAL ATTACHMENTS	C-C C3.20	PT	NDE 3.3-39	L	х -	• •	5/4/93 - PT COMPLETE, ACCEPTABLE ROUNDED AND LINEAR INDICATIONS
	CTHT, 26'0"	00000	•					
	,							**N/A**
70760	78102B-H-420-01 IA	C-C	PT	NDE 3.3-42	C	x -		5/3/93 - PT COMPLETE
	INTEGRAL ATTACHMENTS CTMT, 26'0"	C3.20						

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 2 ALL STATUS COMPONENTS

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e.n	UCHERATOR	<u> </u>	_DLUMUUMA_	INSIDE	CONTATRICAT

SUMMARY	MBER: 106 EXAMINATION AREA IDENTIFICATION	ASME SEC. XI CATGY ITEM NO	EXAM METHOD	PROCEDURE	T A	O R E	N C S E I C	H	REMARKS **CALIBRATION BLOCK**
272960	SYSTEM NO. 71, 5614-P-791-S S 78102B-H-421-06 IA INTEGRAL ATTACHMENTS CTMT, 33'11"	C-C C3.20	(REF. DWG.	NO. 4-B50A) NDE 2.2-10	С	x			5/3/93 - MT COMPLETE **N/A**
273650	SYSTEM NO. 71, 5614-P-791-S S 78102B-H-421-02 BOX RESTRAINT CTHT, 25'0"	F-B F2.10	(REF. DWG.	NO. 4-B50B) NDE 4.3-84	С	x		• •	5/3/93 - VT COMPLETE **N/A**
273660	78102B-H-421-02 IA INTEGRAL ATTACHMENTS CTMT, 25'0"	c-c c3.20	PT PT CNR CR	NDE 3.3-40 NDE 3.3-44 93-4-090 93-415	С				5/4/93 - PT COMPLETE, ALIGNED ROUNDED INDICATIONS, INDICATIONS REMOVED, SURFACE ANOMOLY
273850	78102B-H-421-01 BOX RESTRAINT CTHT, 25.0"	F-B F2.10	VT-3	NDE 4.3-83	С	x		• •	5/3/93 - VT COMPLETE **N/A**
273860	78102B-H-421-01 IA INTEGRAL ATTACHMENTS CTHT, 25'0"	c-c c3.20	PT	NDE 3.3-43	С	x		•	5/4/93 - PT COMPLETE **N/A**

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

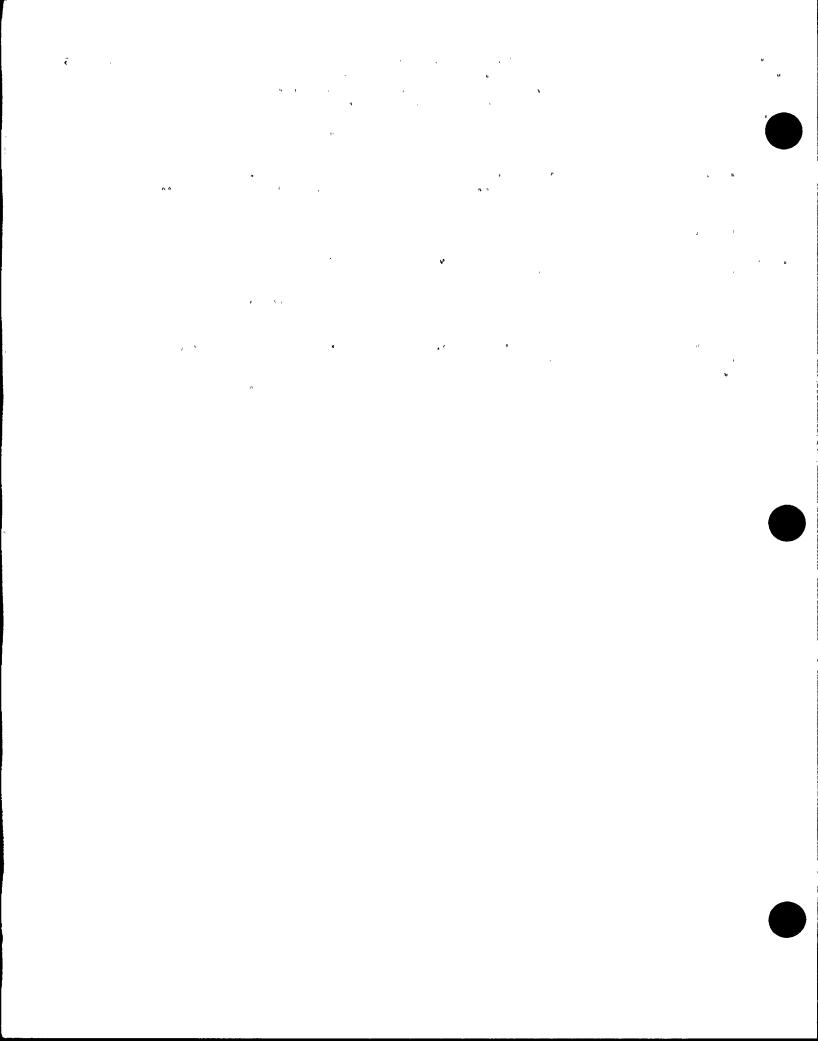
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CLASS 2 ALL STATUS COMPONENTS

MA	GENERATOR	C	BLOWDOWN	INSIDE	CONTAINMENT

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THE NU	MBER: 107	ASME						GT	
CIMUADY	EXAMINATION AREA	SEC. XI	EXAM					EH	REMARKS
	IDENTIFICATION	ITEM NO		PROCEDURE					**CALIBRATION BLOCK**
NUMBER	IDENTIFICATION	1160 40	nemoo	FROCEDORE		-			CALIBATION DECK
	SYSTEM NO. 71, 5614-P-785-S	SH. 1 OF 3	(REFDWG.	NO. 4-851B)					
276450	78102B-H-422-03	F-B	VT-3	NDE 4.3-74	С	X	-		4/28/93 - VT COMPLETE
	BOX RESTRAINT	F2.10							
	CTHT, 25'0"								**N/A**
									"/^
276460	78102B-H-422-03 IA	C-C	MT	NDE 2.2-5	C	X	•	• •	4/28/93 - MT COMPLETE
	INTEGRAL ATTACHMENT	C3.20							
	CTMT, 25'0"								******
			1						**N/A**
276540	78102B-H-422-02	F-B	VT-3	NDE 4.3-75	С	X			4/28/93 - VT COMPLETE
	PIPE SUPPORT	F2.10							
	CTHT, 25'0"								
									N/A
560	78102B-H-422-02 IA	c-c	MT	NDE 2.2-4	C	x			4/28/93 - MT COMPLETE
	INTEGRAL ATTACHMENT	C3.20		,	-	••			.,,
	CTMT, 25'0"								
									**** ***



TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

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SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 2 ALL STATUS COMPONENTS

IN FEEDWATER SYSTEM LOOP A

N I O SONGT E NUMBER: 111 ASME SEC. XI TRSEH A E I O E REMARKS SUMMARY EXAMINATION AREA CATGY FXAM T C G M R **CALIBRATION BLOCK** ITEM NO METHOD PROCEDURE NUMBER IDENTIFICATION SYSTEM NO. 74, 5614-P-557-S SH. 1 OF 1 (REF. DWG. NO. 4-B55B) 282245 4-FWH-19A IA C-C MT NDE 2.2-16 C X - - - 5/8/93 - MT COMPLETE INTEGRAL ATTACHMENTS C3.20 CTMT, 51'10" **N/A** C X - - - 5/15/93 - MT AND UT COMPLETE BEFORE HEAT 282950 14"-FWA-2401-28 C-F MT NDE 2.2-19 NDE 2.2-23 X - - - TREATMENT, 5-17-93 - MT AND UT COMPLETE PIPE TO REDUCER C5.21 MT UT 0 X - - - AFTER HEAT TREATMENT, ROOT AND NDE 5.2-6 CTHT, 68'5" - - X - COUNTERBORE GEOMETRY, BASELINE **HT 45** NDE 5.2-6 UT 60 - - X - EXAMINATION NDE 5.2-6 UT 70 NDE 5.2-6 - - X - **UT-20** UT 0 NDE 5.2-10 x - - -- - X -UT 45 NDE 5.2-10 - - X -**UT 60** NDE 5.2-10 C X - - - 5/15/93 - MT AND UT COMPLETE BEFORE HEAT 283050 18"-FWA-2401-29 C-F MT NDE 2.2-20 REDUCER TO NOZZLE C5.21 MT NDE 2.2-23 X - - - TREATMENT, 5/17/93 - MT AND UT COMPLETE CTHT, 68'5" UT O NDE 5.2-5 X - - - AFTER HEAT TREATMENT, ROOT GEOMETRY, - - X - BASELINE EXAMINATION **UT 45** NDE 5.2-5 - - X - **UT-29** **UT 60** NDE 5.2-5 NDE 5.2-9 X - - -UT 0 - - X -**UT 45** NDE 5.2-9 UT 60 NDE 5.2-9 - - X -IE BUL UT NDE 5.16-1 C - - - X 5/1/93 - CRACKLIKE INDICATIONS FOUND IN 284460 AUGHENTED EXAM STEAM GENERATOR FEEDWATER 79-13 VT-1 NDE 4.1-14 X - - - THE NOZZLE TO REDUCER WELD, VISUAL EXAMINATION PERFORMED ON INSIDE SURFACE **NOZZLE PIPING** CNR 93-4-069 CTMT, 68'5" CR 93-370 OF NOZZLE AFTER REDUCER REMOVAL, REDUCER PWO 93013356 WAS REPLACED AND A BASELINE EXAMINATION - - X - PERFORMED UT NDE 5.16-4

UT-20, UT-29

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PAGE:

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

IN FEEDWATER SYSTEM LOOP B

HE NU	MBER: 112	ASME			s	N :			
		SEC. XI				R S			
SUMMARY	EXAMINATION AREA	CATGY	EXAM						REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G M	R	**CALIBRATION BLOCK**
					•	•		•	
	SYSTEM NO. 74, 5614-P-558-S	SH. 1 OF 1	(REF. DWG.	NO. 4-B56)					
285960	80116-R-005-01 IA INTEGRAL ATTACHMENTS CTMT, 60'3"	C-C C3.20	нт	NDE 2.2-12	C	X ·		•	5/5/93 - MT COMPLETE
									N/A
20/552	4/H 5HD 2/02 20	0.5	W.	NOT 2 2-24	_	v		_	E /44 /07 - NT AND UT COMPLETE DEFORE HEAT
286550	14"-FWB-2402-20	C-F	MT	NDE 2.2-21					5/16/93 - MT AND UT COMPLETE BEFORE HEAT
	PIPE TO PIPE	c5.21	MT	NDE 2.2-24					TREATMENT, 5/18/93 - MT AND UT COMPLETE
	CTHT, 68'6"		UT 0 UT 45	NDE 5.2-8					AFTER HEAT TREATMENT, ROOT GEOMETRY, BASELINE EXAMINATION
									UT-20
			UT 60	NDE 5.2-8			•		01-20
				NDE 5.2-8		-			
			UT 45	NDE 5.2-11					
			UT 60 UT 70	NDE 5.2-11					
			UT 0	NDE 5.2-11 NDE 5.2-12		χ.			,
			01 0	NUC 3.2"12		^		_	
650	14"-FWB-2402-21	C-F	HT	NDE 2.2-17	С	x ·		-	5/11/93 - MT AND UT COMPLETE BEFORE HEAT
	PIPE TO REDUCER	C5.21	MT	NDE 2.2-24		X ·		-	TREATMENT, 5/18/93 - MT AND UT COMPLETE
	CTHT, 68'6"		UT 0	NDE 5.2-2		χ.		•	AFTER HEAT TREATMENT, ROOT AND
	•		UT 45	NDE 5.2-2		-	- x	-	COUNTERBORE GEOMETRY, BASELINE
			UT 60	NDE 5.2-2		-	- x	-	EXAMINATION
			UT 45	NDE 5.2-14		-	- x	-	**UT-20**
			UT 60	NDE 5.2-14		-	- x	-	
			UT 70	NDE 5.2-14		-	- x	-	
					_				
286750	18"-FWB-2402-22	C-F	MT	NDE 2.2-22					5/16/93 - MT AND UT COMPLETE BEFORE HEAT
	REDUCER TO NOZZLE	C5.21	HT	NDE 2.2-24					TREATMENT, 5/18/93 - MT AND UT COMPLETE
	CTHT,68'6"		UT 0	NDE 5.2-7					AFTER HEAT TREATMENT, ROOT GEOMETRY,
			UT 45	NDE 5.2-7					BASELINE EXAMINATION
			UT 60	NDE 5.2-7		-	- x	•	**UT-29**
			UT 45	NDE 5.2-13		•			
			UT 60	NDE 5.2-13		-	- x	•	
284080	AUGHENTED EXAM	IE BUL	UT	NDE 5.16-1	r			y	5/1/93 - CRACKLIKE INDICATIONS FOUND IN
200700	STEAM GENERATOR FEEDWATER	79-13	VT-1	NDE 4.1-15	-				THE NOZZLE TO REDUCER WELD, VISUAL
	NOZZLE PIPING	17 13	CNR	93-4-069					EXAMINATION PERFORMED ON THE INSIDE
	CTHT, 68'6"		CR	93-370					SURFACE OF NOZZLE AFTER REDUCER REMOVAL,
	UIAI, 00.0	•	PWO	93013356					REDUCER WAS REPLACED AND A BASELINE
			UT	NDE 5.16-5					
			01	UNE 3.10-3		- '	^	` ~	**UT-20, UT-29**
									01-60, 01-67

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TURKEY POINT NUCLEAR PLANT UNIT 4 PAGE:

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INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF) CLASS 2 ALL STATUS COMPONENTS

L	FE	ED	WA.	TER	<u> </u>	<u>YS</u>	TEM	LO	<u> 90</u>	<u>C</u>	

Y FE	EDWATER SYSTEM LOOP C						_	_	
 .	447	4011			_			0	
ZONE NU	MBER: 113	ASME						GT	
		SEC. XI	P14444					EH	DEULDIA.
	EXAMINATION AREA	CATGY	EXAM	DD 007011DF					REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	1	C	G	мк	**CALIBRATION BLOCK**
				•••••	•	•	•	• •	
	CYCTEM NO. 7/ E41/-D-700-C	U 1 0F 1	ADEE DUC	VO 4-0571					
	SYSTEM NO. 74, 5614-P-789-S S	<u> </u>	(KEF. DWG.	NU. 4-837)					
288440	80116-R-006-02 IA	C-C	нт	NDE 2.2-15	r	v	_		5/7/93 - MT COMPLETE
200440	INTEGRAL ATTACHMENTS	C3.20	nı	NDE 2.2-13	·	^	_		371773 - HI CONFLETE
	CTHT, 51'10"	03.20							
	CIMI, SI IO								**N/A**
									M/A
288670	80116-R-006-01 IA	C-C	MT	NDE 2.2-13	С	X	-		5/5/93 - HT COMPLETE
	INTEGRAL ATTACHMENTS	C3.20							
	CTMT, 61'3"								
	•								**N/A**
289050	14"-FWC-2403-19	C-F	UT 0	NDE 5.2-15	A	X	-		5/18/93 -UT COMPLETE
	PIPE TO PIPE	C5.21	UT 45	NDE 5.2-15		X	-		
	CTMT, 68'5"		UT 60	NDE 5.2-15		X	-		
									UT-20
	440 505 0407 00			vo= 2 2 42	_				F./4F./OT NT AND NT COURT STE DESCRIPT
150		C-F	HT	NDE 2.2-18	Ü				5/15/93 - MT AND UT COMPLETE BEFORE HEAT
	PIPE TO REDUCER	C5.21	MT O	NDE 2.2-25					TREATMENT, 5/18/93 - MT AND UT COMPLETE
	CTHT, 68'5"		UT O	NDE 5.2-3					AFTER HEAT TREATHENT, ROOT AND
			UT 45	NDE 5.2-3 NDE 5.2-3					COUNTERBORE GEOMETRY, BASELINE
			UT 60 UT 0	NDE 5.2-15					EXAMINATION **UT-20**
			UT 45	NDE 5.2-15				x -	01-20
			UT 60	NDE 5.2-15				х -	
			01 00	NUE 3.2°13		Ī		^ -	
289250	18"-FWC-2403-21	C-F	MT	NDE 2.2-18	С	х	-		5/15/93 - MT AND UT COMPLETE BEFORE HEAT
	REDUCER TO NOZZLE	C5.21	MT	NDE 2.2-25					TREATMENT, 5/18/93 - MT AND UT COMPLETE
	CTHT, 68'5"		UT O	NDE 5.2-4					AFTER HEAT TREATMENT, ROOT GEOMETRY,
	,		UT 45	NDE 5.2-4					BASELINE EXAMINATION
			UT 60	NDE 5.2-4					**UT-29**
			UT O	NDE 5.2-16				• •	-
			UT 45	NDE 5.2-16		-	-	x -	
			UT 60	NDE 5.2-16		_	'-	x -	
289650	AUGMENTED EXAM	IE BUL	บา	NDE 5.16-3	C	-	-	- X	4/23/93 - UT COMPLETE, CRACKLIKE
	STEAM GENERATOR FEEDWATER	79-13	VT-1	NDE 4.1-16		X	-		INDICATIONS FOUND IN THE NOZZLE TO
	NOZZLE PIPING		CNR	93-4-069					REDUCER WELD, VISUAL EXAMINATION
	CTHT, 68'5"		CR .	93-370					PERFORMED ON THE INSIDE SURFACE OF
			PWO	93013356					NOZZLE AFTER REDUCER REMOVAL, REDUCER
			UT	NDE 5.16-6		-	•	x -	WAS REPLACED AND A BASELINE EXAMINATION
									PERFORMED
									UT-20, UT-29

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40'0"

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

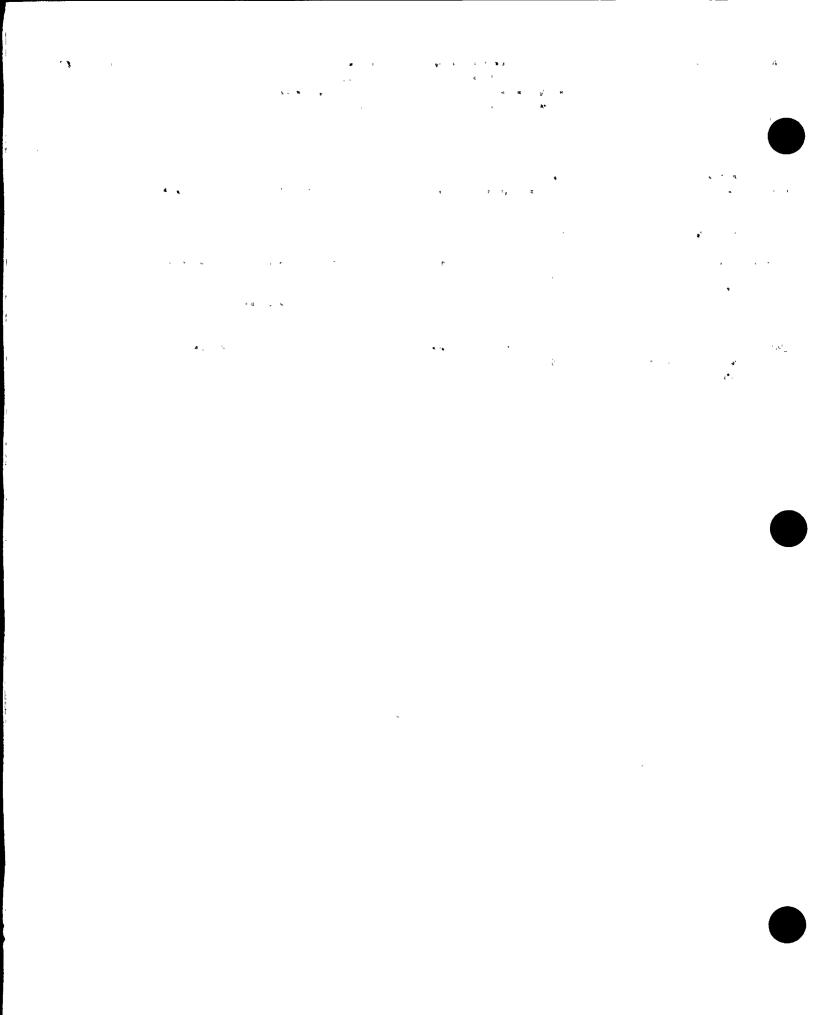
SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 2 ALL STATUS COMPONENTS

N FEEDWATER BYPASS LOOP A

	N TE	CHATER DIFASS LOOP A					NI O	
	- 1010	BER: 114	ASME			c	ONGT	
•	JE NU	18EK: 114	SEC. XI				RSEH	
	CH HILLARY	EVANDULATION ADEA	CATGY	EXAM			EIOE	REMARKS
		EXAMINATION AREA			2222521125			
	NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	ı	CGMK	**CALIBRATION BLOCK**
					•••••	•		
		SYSTEM NO. 74, 5614-P-770-S	cu 7 oc /	ABEE DUC	VO (-259)			
		STSTEM NO. 74, 3014-P-110-S	3n. 3 UF 4	(KEP. DHG.	NO. 4-8207			
	290100	7884-R-014-01	F-C	VT-3	NDE 4.3-79	С	x	5/1/93 - VT COMPLETE, CHIPPED CONCRETE
		BOX RESTRAINT	F3.10	CNR	93-4-085			AROUND BASE PLATE, PWO ISSUED TO CORRECT
		40'0"		PWO	93007585			AT A LATER DATE
								N/A
	290150	7884-R-014-01 IA	C-C	HT	NDE 2.2-6	C	X	4/29/93 - MT COMPLETE
		INTEGRAL ATTACHMENTS	C3.20					

N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 2 ALL STATUS COMPONENTS

W FEEDWATER BYPASS_LOOP_B

M I O

ME NUMBER: 115 ASHE S ON G T

SEC. XI T R S E H

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 74, 5614-P-770-S SH. 2 OF 4 (REF. DWG. NO. 4-B59)

290850 7884-R-014-02 F-B VT-3 NDE 4.3-65 C X - - - 4/21/93 - VT COMPLETE

BOX RESTRAINT F2.10

40 '0"

N/A

PAGE:

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290860 7884-R-014-02 IA C-C MT NDE 2.2-1 C X - - - 4/19/93 - MT COMPLETE

INTEGRAL ATTACHMENTS C3.20

4010"

The second secon 1 T ... v fi **4**, / **0**

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF) CLASS 2 ALL STATUS COMPONENTS

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N FEEDWATER BYPASS LOOP C

						N	I	0	
LONE NUN	4BER: 116	ASME			S	0	N (G T	
		SEC. XI			T	R	S	ЕН	
SUMMARY	EXAMINATION AREA	CATGY	EXAM		Α	E	1 () E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G I	M R	**CALIBRATION BLOCK**
					•	-	-	• •	
	SYSTEM NO. 74, 5614-P-770-S	SH. 1 OF 4	(REF. DWG.	NO. 4-B60)					
291600	7884-R-014-03	F-B	VT-3	NDE 4.3-66	С	X	•		4/21/93 - VT COMPLETE
	BOX RESTRAINT	F2.10							
	40'0"								**N/A**
291610	7884-R-014-03 IA	C-C	нт	NDE 2.2-2	C	X			4/19/93 - MT COMPLETE
	INTEGRAL ATTACHMENTS 40'0"	C3.20							

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

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CLASS 2 ALL STATUS COMPONENTS

DESIDUAL.	HEAT	EXCHANGER A	

	MBER: 117	ASME			c	N	I	-	
E NU	MBERT III	SEC. XI				R			
SUMMARY	EXAMINATION AREA	CATGY	EXAM	P	-				REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	Ţ	C	G F	1 R	**CALIBRATION BLOCK**
		•••••			-	-		• •	
	(REF. DWG. NO. 4-V14A)								
292400	4-RHE-A1	C-A	UT 45	NDE 5.4-5	С	-	- >	٠-	4/24/93 - UT COMPLETE, ROOT GEOMETRY
	HEAD TO SHELL	C1.20	UT 60	NDE 5.4-5		X		•	
									UT-55
292500	4-RHE-A2	C-A	UT 45	NDE 5.4-5	С	-	- >	(-	2/24/93 - UT COMPLETE, ROOT GEOMETRY AND
	SHELL TO FLANGE	C1.10	UT 60	NDE 5.4-5		-	- >	(-	WELDED ATTACHMENT ON THE INSIDE SURFACE
									UT-55
292630	4-RHE-A9	C-B	PΤ	NDE 3.3-11	С	x		. .	4/23/93 - PT COMPLETE
	REINFORCEMENT PLATE TO SHELL	C2.31							
									H/A
2640	4-RHE-A10	C-B	PT	NDE 3.3-11	С	x		. <u>-</u>	4/23/93 - PT COMPLETE
	REINFORCEMENT PLATE TO NOZZLE	c2.31							

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 2 ALL STATUS COMPONENTS

PAGE:

ESS LETDOWN HEAT EXCHANGER

						N I	Ī	0	
NE NUM	IBER: 119	ASHE			S	0 1	4 G	T	
		SEC. XI			T	RS	SE	H	
JMMARY	EXAMINATION AREA	CATGY	EXAM		Α	E	0	Ε	REMARKS
JMBER	IDENTIFICATION	ITEH NO	METHOD	PROCEDURE	Ţ	C	G M	R	**CALIBRATION BLOCK**
					-		• •	-	
	ATLAS SERIAL NO. 846, NATIONAL	BOARD NO	. 697 (REF.	DWG. NO. 4-V15)					
73700	4-LDHX-2	C-A	UT 45	NDE 5.4-7	С		- x	-	4/27/93 - UT COMPLETE, ROOT GEOMETRY,
	SHELL TO FLANGE	C1.30	UT 60	NDE 5.4-7		• •	- X	•	WELD ATTACHMENT, ROOT GEOMETRY FROM LONG
	CTHT								SEAM
									UT-41
93750	4-LDHX-2LS		UT 45	NDE 5.4-7	С		- x	-	4/27/93 - UT COMPLETE, ROOT GEOMETRY,
	LONGITUDINAL SEAM								WELD WAS FOUND DURING EXAMINATION OF
	CTMT								CIRCUMFERENTIAL WELD
									UT-41

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

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CLASS 3 ALL STATUS COMPONENTS

PONENT COOLING WATER INSIDE CONTAINMENT

SHE NU	MBER: 120	ASME				0	N (O G T E H	
	EXAMINATION AREA IDENTIFICATION	SEC. XI CATGY ITEM NO	EXAM METHOD	PROCEDURE		Ε	1 (O E	REMARKS **CALIBRATION BLOCK**
••••	SYSTEM NO. 30, 5614-P-536-S	SH. 1 OF 4	(REF. DWG.	NO. 4-CO1)					
293800	4-ACH-150 PIPE SUPPORT CTMT, 17'0"	F-B F2.10	VT-3	NDE 4.3-47	C	x	-		4/16/93 - VT COMPLETE
									N/A
293850	4-ACH-150 IA INTEGRAL ATTACHMENT CTMT, 17'0"	D-A D1.20	VT-3	NDE 4.3-48	С	X	- ·		4/16/93 - VT COMPLETE
	Cint, 17-0								**N/A**
294000	4-120-A1 ANCHOR	F-B F2.10	VT-3	NDE 4.3-49	С	x	- ·		4/16/93 - VT COMPLETE
	CTHT, 21'0"		n						**N/A**
050	INTEGRAL ATTACHMENT	D-A D1.20	VT-3	NDE 4.3-50	С	x	•		4/16/93 - VT COMPLETE
	CTMT, 21'0"								**N/A**

TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

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SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 3 ALL STATUS COMPONENTS

PONE	NT COOLING WATER INSIDE CONTAIN	MENT						_	
E NU	MBER: 121	ASHE			s		I N G		
_		SEC. XI			T	R	SE	Н	
SUMMARY	EXAMINATION AREA	CATGY	EXAM		Α	E	1 0	E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G M	I R	**CALIBRATION BLOCK**
				•••••	•	•	• •	•	•••••
	SYSTEM NO. 30, 5614-P-535-S S	SH. 1 OF 3	(REF. DWG.	NO. 4-CO2)					
294100	4-121-A1	F-B	VT-3	NDE 4.3-51	С	x			4/16/93 - VT COMPLETE
474100	ANCHOR	F2.10	•••			••			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	CTHT, 21'0"								
									N/A
294150	4-121-A1 IA	D-A	VT-3	NDE 4.3-52	C	X		-	4/16/93 - VT COMPLETE
	INTEGRAL ATTACHMENT	D1.20							
	CTMT, 21'0"								*****
									N/A
					_				
294450	4-ACH-124	F-C	VT-3	NDE 4.3-41	C	Х		•	4/16/93 - VT COMPLETE
	SPRING SUPPORT CTHT, 17'0"	F3.50	VT-4						
	CIMI, III-0								**N/A**
4460	4-ACH-124 IA	D-A	VT-3	NDE 4.3-42	C	x			4/16/93 - VT COMPLETE
	INTEGRAL ATTACHMENT	D1.40	•••		•	••			7, 10, 72
	CTMT, 17'0"								
									N/A
294500	4-ACH-125	F-B	VT-3	NDE 4.3-43	C	X		-	4/16/93 - VT COMPLETE
	BOX RESTRAINT CTHT, 17'0"	F2.10							
	CIMI, 17.0"								**N/A**
									•
20/550	/_ACU_12E 1A	D-A	VT-3	NDE 4.3-44	_	v		_	4/16/93 - VT COMPLETE
274770	4-ACH-125 IA INTEGRAL ATTACHMENT	D-A D1.20	41-5	NUE 4.J-44	U	^		•	4/10/73 - VI GOTTLEIE
	CTHT, 17'0"								

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TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 3 ALL STATUS COMPONENTS

MPONENT COOLING WATER SYSTEM TO CCW PUMPS A & B

N I O
NE NUMBER: 123 ASME S O N G T
SEC. XI T R S E H

SUMMARY EXAMINATION AREA CATGY EXAM ' A E I O E REMARKS

NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 30, 5614-P-518-S SH. 8 & 9 OF 10 (REF. DWG. NO. 4-CO4)

295900 SR-686 F-B VT-3 NDE 4.3-2 C X - - - 4/14/93 - VT COMPLETE

ANCHOR F2.10

3012"

295950 SR-686 IA D-B VT-3 NDE 4.3-3 C X - - - 4/14/93 - VT COMPLETE

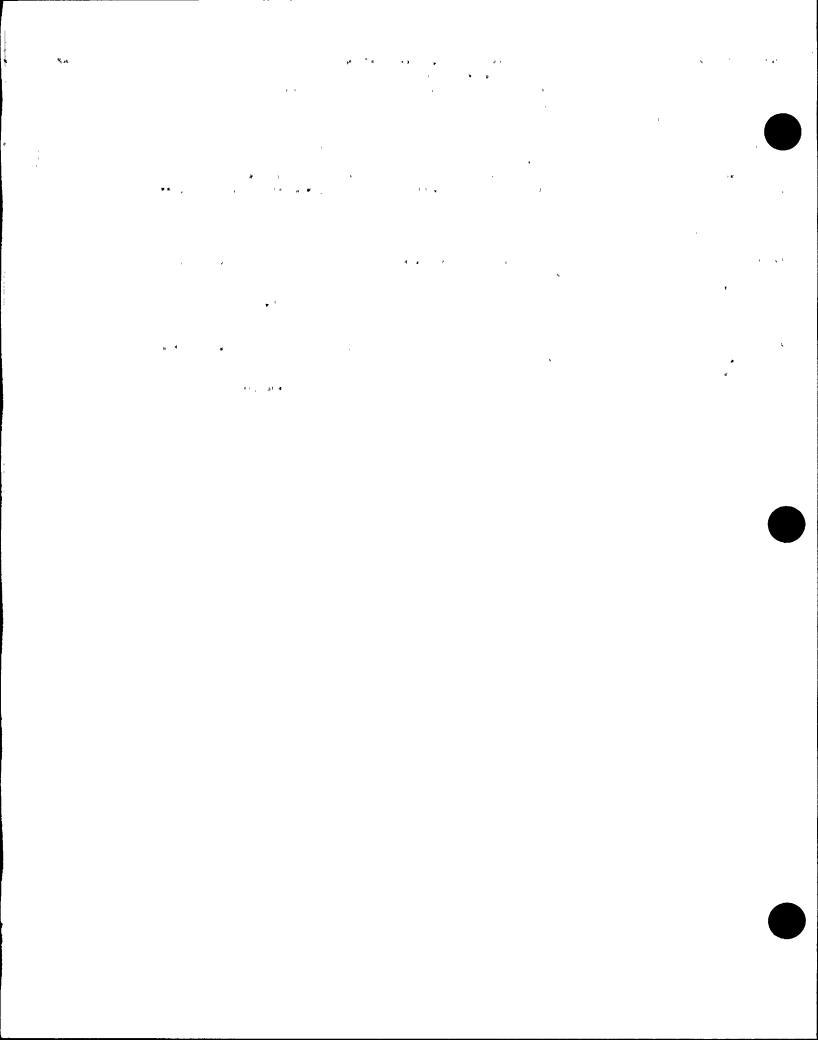
295950 SR-686 IA D-B
INTEGRAL ATTACHMENT D2.20

INTEGRAL ATTACHMENT D2.20
30'2"

N/A

N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

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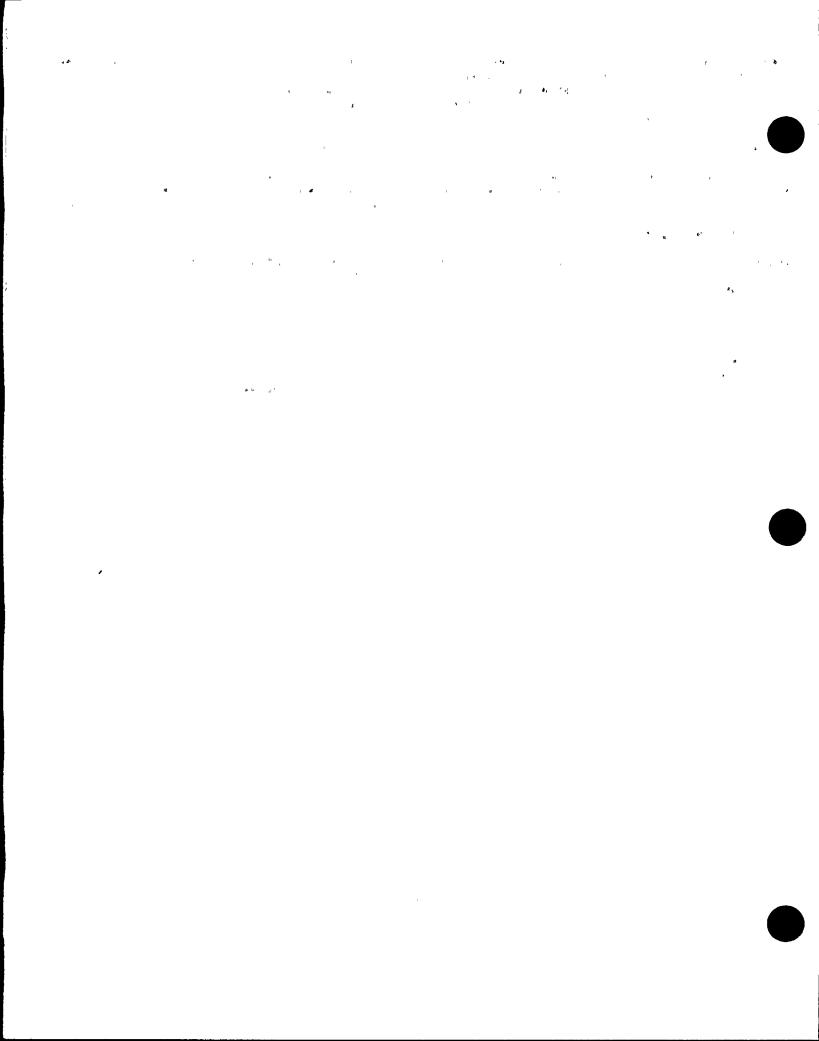
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SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 3 ALL STATUS COMPONENTS

PONENT	COOLING	WATER	FROM	NON-REGENERATIVE HX
--------	---------	-------	------	---------------------

PUNE	NI COOLING WATER FROM NON-REGI	CHEKALIAC U	Δ						
						N	I	0	
ME NU	MBER: 125	ASME			S	0	N	GT	
		SEC. XI			T	R	S	E H	
SUMMARY	EXAMINATION AREA	CATGY	EXAM		Α	E	I	0 E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G	M R	**CALIBRATION BLOCK**
					-	-	-		
	SYSTEM NO. 30, 5614-P-528-S	SH. 2 OF 2	(REFDWG.	NO. 4-CO6)					
296700	4-ACH-216	F-C	VT-3	NDE 4.3-9	C	X	-		4/14/93 - VT COMPLETE
	SLIDING STANCHION	F3.10							
	19'6"								
									N/A
			_						
296750	4-ACH-216 IA	D-A	VT-3	NDE 4.3-10	С	Х	•		4/14/93 - VT COMPLETE
	INTEGRAL ATTACHMENT	D1.20							
	19'6"								*****
									N/A
204800	4-ACH-217	F-C	VT-3	NDE 4.3-11	r	v	_		4/14/93 - VT COMPLETE
270000	SLIDING STANCHION	F3.10	V1 - 3	NOL 4.5 11	·	^			TY TTY YOU COMPELIE
	1916"	13.10							
	17 0								**N/A**
									.,,
850	4-ACH-217 IA	D-A	VT-3	NDE 4.3-14	C	X	-		4/14/93 - VT COMPLETE
	INTEGRAL ATTACHMENT	D1.20							
	19'6"								
									N/A



TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

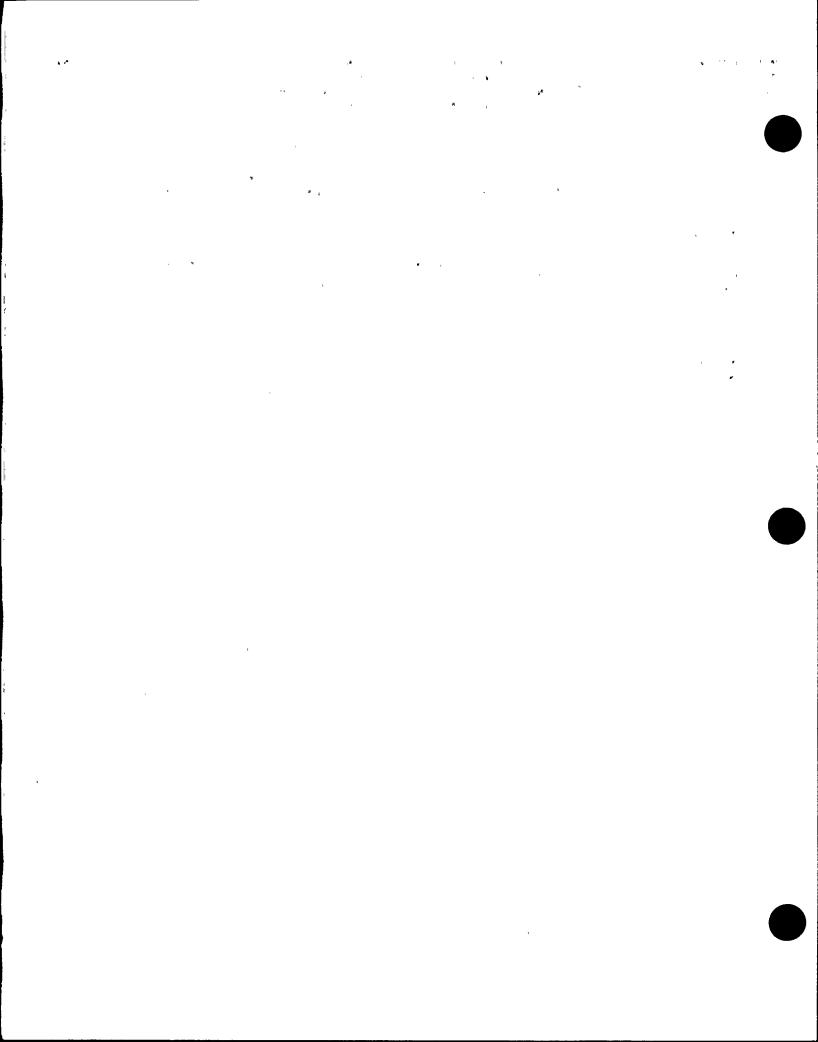
PAGE:

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SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 3 ALL STATUS COMPONENTS

MONENT COOLING WATER FROM RHR HEAT EXCHANGER A

3,,,,,,,						N	1	0	
E NUM	IBER: 126	ASME			S		N G		
		SEC. XI			T	R	SE	Н	
MARY	EXAMINATION AREA	CATGY	EXAM		Α	E	1 0	E	REMARKS
IBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G M	R	**CALIBRATION BLOCK**
		•• •••••	•••••	• • • • • • • • • • • • • • • • • • • •		•		•	
	SYSTEM NO. 30, 5614-P-518-S	SH. 4 OF 1	O (REF. DWO	G. NO. 4-CO7)					W
7700	4-ACH-11	F-C	VT-3	NDE 4.3-19	С	-		х	4/14/93 - VT COMPLETE, PAINT ON
	RIGID STRUT	F3.10	VT-3	NDE 4.3-93		X		-	SPHERICAL BEARINGS, 5/20/93 - VT
	15'0"		CNR	93-4-010					RE-EXAMINATION COMPLETE
			CR	93-232					
			PWO	93007052					**N/A**
7750	4-ACH-11 IA	D-B	VT-3	NDE 4.3-20	С			x	4/14/93 - VT COMPLETE, WELDS ON
	INTEGRAL ATTACHMENT	D2.20	CNR	93-4-011					INTREGRAL ATTACHMENT DIFFERENT FROM
	15'0"		CR	93-231					DRAWING, ACCEPTED AS-IS BY ENGINEERING
									EVALUATION, DRAWING WILL BE UPDATED TO
									SHOW WELD CONFIGURATION
									H/A



13'6"

TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

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SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 3 ALL STATUS COMPONENTS

PONENT COOLING WATER SYSTEM	OUTSIDE CONTAINMENT				
			N	I	
SNE NUMBER: 127	ASHE	S	0	N (ì
	SEC. XI	T	R	S	:
ALBERT CHARLEST AND ARCA	CATCY EVAU		_	1 /	•

NE NU	MBER: 127	ASME SEC. XI				O N G T R S E H	
	EXAMINATION AREA IDENTIFICATION	CATGY ITEM NO	EXAM METHOO	PROCEDURE	A	EIOE	REMARKS **CALIBRATION BLOCK**
	SYSTEM NO. 30, 5614-P-518-	S SH. 6 OF 1	0_(REFD	WG. NO. 4-CO8)			
298300	4-ACH-64 SLIDING STANCHION 13'6"	F-C F3.10	VT-3	NDE 4.3-25	C	x	4/15/93 - VT COMPLETE
	13.0						**N/A**
298350	4-ACH-64 IA INTEGRAL ATTACHMENT 13'6"	D-B D2.20	VT-3	NDE 4.3-26	С	x	4/15/93 - VT COMPLETE
	13.0						**N/A**
298400	4-ACH-56 SLIDING STANCHION	F-C F3.10	VT-3	NDE 4.3-23	С	x	4/15/93 - VT COMPLETE
	13'6"						**N/A**
450	4-ACH-56 IA INTEGRAL ATTACHMENT	D-8 D2.20	VT-3	NDE 4.3-24	С	x	4/15/93 - VT COMPLETE
	13'6"						**N/A**
298500	4-ACH-55 SLIDING STANCHION	F-C F3.10	VT-3	NDE 4.3-21	С	x	4/15/93 - VT COMPLETE
	1316"						**N/A**
	4-ACH-55 IA INTEGRAL ATTACHMENT	D-B D2.20	VT-3	NDE 4.3-22	С	x	4/15/93 - VT COMPLETE

N/A

PAGE:

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TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

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SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 3 ALL STATUS COMPONENTS

PONENT	COOLING	WATER	SYSTEM	OUTSIDE	CONTAINMENT

						N	I	0	
E NU	MBER: 129	ASME			S	0	N (3 T	
		SEC. XI			T	R	SI	H	
SUMMARY	EXAMINATION AREA	CATGY	EXAH		Α	E	1 (E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G ł	1 R	**CALIBRATION BLOCK**
					•	•		• •	••••••
	SYSTEM NO. 30, 5614-P-526-S	SH. 5 OF 5	(REF. DWG.	NO. 4-C10)					
299500	4-ACH-52	F-B	VT-3	NDE 4.3-28	С	X			4/15/93 - VT COMPLETE
	SLIDING STANCHION	F2.10							
	11.5								**N/A**
			· =		_				445.00
299600	4-ACH-52 IA INTEGRAL ATTACHMENT 11'2"	D-B D2.20	VT-3	NDE 4.3-29	С	X			4/15/93 - VT COMPLETE

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

72

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CLASS 3 ALL STATUS COMPONENTS

COMPONENT	COOLING	WATER	TO	SEAL	WATER	&	NON-REG.HX	

E NUN	HBER: 131	ASME SEC. XI			-	_	I N (S E	-	
	EXAMINATION AREA IDENTIFICATION	CATGY ITEM NO	METHOD	PROCEDURE					REMARKS **CALIBRATION BLOCK**
	SYSTEM NO. 30, 5614-P-526-S	SH. 3 OF 5	(REF. DWG.	NO. 4-C13)					
300200	SR-702 ANCHOR 30'3"	F-C F3.10	VT-3	NDE 4.3-30	С	x		•	4/14/93 - VT COMPLETE
	30*3"						•		**N/A**
300250	SR-702 IA INTEGRAL ATTACHMENT	D-B D2.20	VT-3	NDE 4.3-31	С	x		. -	4/14/93 - VT COMPLETE
	30:3"								**N/A**
	SYSTEM NO. 30, 5614-P-523-S	SH. 2 OF 2	(REF. DWG.	NO. 4-C13)					
300500	4-ACH-225 SLIDING STANCHION 18'9"	F-C F3.10	VT-3	NDE 4.3-32	С	X	• •	•	4/14/93 - VT COMPLETE
	10-7"		٤						**N/A**
2 00550	4-ACH-225 IA INTEGRAL ATTACHMENT 18'9"	D-B D2.20	VT-3	NDE 4.3-33	С	x		•	4/14/93 - VT COMPLETE

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TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 3 ALL STATUS COMPONENTS

MIPONENT COOLING WATER SYSTEM OUTSIDE CONTAINMENT

N I O E NUMBER: 132 ASME S O N G T

SEC. XI T R S E H
SUMHARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 30, 5614-P-526-S SH. 3 OF 5 (REF. DWG. NO. 4-C14)

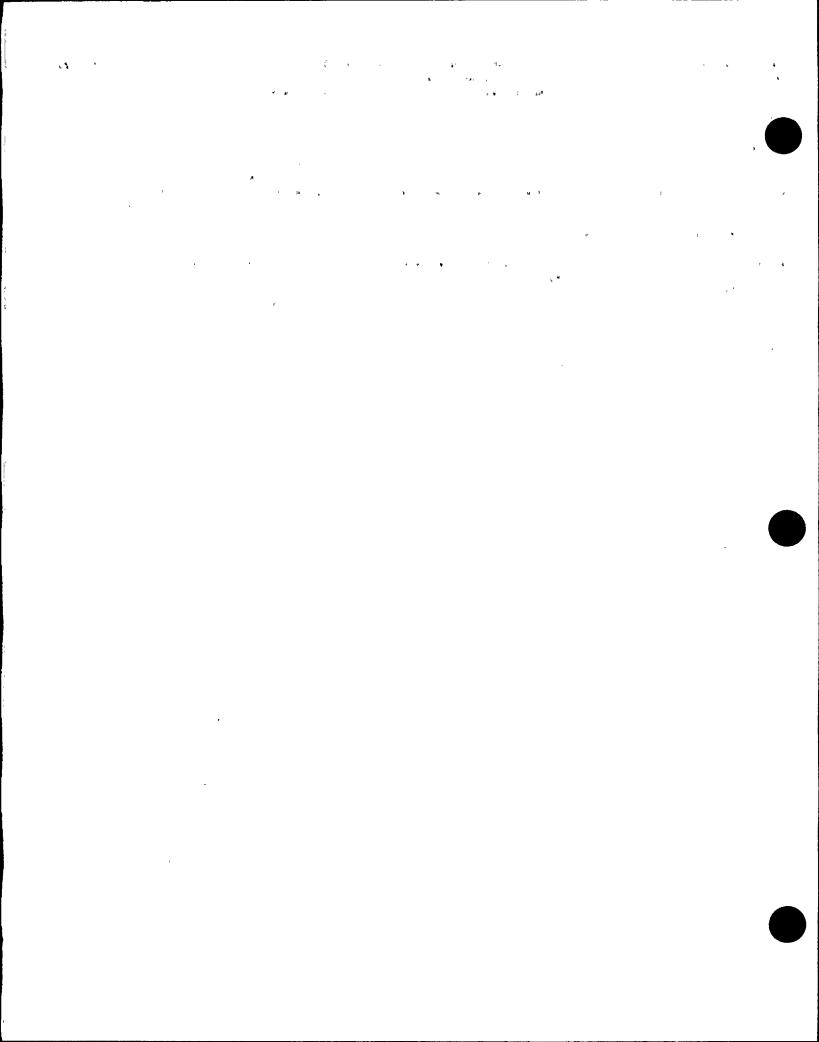
300600 4-ACH-212 F-C VT-3,4 NDE 4.3-88 A - - - X 5/6/93 - VT COMPLETE, IMPROPER SPRING SPRING HANGER F3.50 CNR 91-4-011 CAN SETTINGS, RE-EXAMINATION AFTER

32'2" PWO 910207105639 CORRECTION OF DISCREPENCIES NOTED IN CNR

91-4-011

N/A

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TURKEY POINT NUCLEAR PLANT UNIT 4
1NSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

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CLASS 3 ALL STATUS COMPONENTS

MPONENT COOLING WATER FROM CCW HEAT EXCHANGERS

1			_			11	1 (
e Mil	MBER: 133	ASHE			s		NGI	
TE NO	nock. 133	SEC. XI					SEH	
SIMMARY	EXAMINATION AREA	CATGY	EXAM		-			REMARKS
	IDENTIFICATION	ITEM NO		PROCEDURE				**CALIBRATION BLOCK**
					-	_		
	SYSTEM NO. 30, 5614-P-526-S_S	H. 2 OF 5	(REF. DWG.	NO. 4-C15A)				
301500	SR-693	F-C	VT-3,4	NDE 4.3-12	C	-	X	4/14/93 - VT COMPLETE, MISSING LOAD
	SPRING HANGER	F3.50	CNR	93-4-003				PLATE, ACCEPTED AS-IS BY ENGINEERING
	32'2"		CR	93-237				EVALUATION
								N/A
				up= / 7 47	_			/ /4/ /O7 NT COURT FTF
301600	SR-693 IA	D-B	VT-3	NUE 4.3-13	C	Х		4/14/93 - VT COMPLETE
	INTEGRAL ATTACHMENT	D2.20						
	3212"							**N/A**
	SYSTEM_NO. 30, 5614-P-526-S S	H. 1 OF 5	(REF. DWG.	NO. 4-C15A)				
302700	SR-697	F-B	VT-3	NDE 4.3-36	C	X		4/15/93 - VT COMPLETE
	SLIDING STANCHION	F2.10						
	11'6"							
								N/A
					_			
302750	SR-697 IA	D-B	VT-3	NDE 4.3-37	С	X		4/15/93 - VT COMPLETE
	INTEGRAL ATTACHMENT	D2.20						
	11'6"							**N/A**
								N/A
302800	4-ACH-214	F-B	VT-3	NDF 4 3-38	C	Y		4/15/93 - VT COMPLETE
302000	SLIDING STANCHION	F2.10	VI 3	NUC 4.5 50	·	^		4) 13/73 VI CONTELLE
	11'6"	12.10						
								N/A
302850	4-ACH-214 IA	D-B	VT-3	NDE 4.3-39	C	X		4/15/93 - VT COMPLETE
	INTEGRAL ATTACHMENT	D2.20						
	11'6"							

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 3 ALL STATUS COMPONENTS

75

PAGE:

COMPONENT COOLING WATER TO RESIDUAL HX A & B

E NUMBER: 134	ASHE SEC. XI			T	NI OONGT	
MMARY EXAMINATION AREA WHER IDENTIFICATION	CATGY ITEM NO	EXAM METHOO	PROCEDURE	• • •	EIOE	REMARKS **CALIBRATION BLOCK**
••••			• •••••			
SYSTEM NO. 30, 5614-	P-526-S SH. 4 OF 5	(REFDWG	i. NO. 4-C16)			
3100 4-ACH-13	F-C	VT-3	NDE 4.3-15	С		4/14/93 - VT COMPLETE, PAINT ON
DUAL ROD HANGER 15'0"	F3.10	VT-3 CNR	NDE 4.3-91 93-4-006		x	SPHERICAL BEARING, PAINT WAS REMOVED; 5/20/93 - VT RE-EXAMINATION COMPLETE
		CR	93-234			5,25,75
		PWO	93007050		÷	**N/A**
3150 4-ACH-13 IA	D-B	VT-3	NDE 4.3-18	C	x	4/14/93 - VT COMPLETE, INTEGRAL
INTEGRAL ATTACHMENT	D2.10	CNR	93-4-009			ATTACHMENT NOT WELDED AS SHOWN ON
15'0"		CR	93-233			DRAWING, ACCEPTED AS-IS BY ENGINEERING EVALUATION
						N/A

TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 3 ALL STATUS COMPONENTS

EMPONENT COOLING WATER SYSTEM OUTSIDE CONTAINMENT

NI O E NUMBER: 136 ASME SONGT TRSEH SEC. XI

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK** NUMBER IDENTIFICATION

SYSTEM NO. 30, 5614-P-518-S SH. 5 OF 10 (REF. DWG. NO. 4-C18)

VT-3 NDE 4.3-64 C X - - - 4/20/93 - VT COMPLETE 304000 4-CCH-2 F-C

F3.10 ROD HANGER

291911

N/A

304050 4-CCH-2 IA D-B VT-3 NDE 4.3-64 C X - - - 4/20/93 - VT COMPLETE

INTEGRAL ATTACHMENT D2.20

291911

N/A

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¥.

11'6"

TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

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SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 3 ALL STATUS COMPONENTS

UDAUFUT	COOL THE	HATED	CVCTCH	MITCIDE	CONTATUMENT	
RYUNENI	COOLING	WAILK	2121FW	COLOTE	CONTAINMENT	

, , , , , , , , , , , , , , , , , , ,	MENT COOLING WATER STOTEL COTOL	DE CONTINUE							
						H	I	0	
L	NUMBER: 137	ASME			S	0	N	GT	
_		SEC. XI			T	R	S	ЕН	
SUMMA	ARY EXAMINATION AREA	CATGY	EXAM		Α	Е	1	O E	REMARKS
NUMBE	R IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G	M R	**CALIBRATION BLOCK**
					-	-	-		••••••
	SYSTEM NO. 30, 5614-P-527-S	SH. 1 OF 2	(REF. DWG.	NO. 4-C19)					
30410	00 SR-710	F-C	V1-3	NDE 4.3-34	C	X	-		4/15/93 - VT COMPLETE
	ANCHOR	F3.10							
	11'6"								
									N/A
3041	60 SR-710 IA	D-B	VT-3	NDE 4.3-35	C	X	-		4/15/93 - VT COMPLETE
	INTEGRAL ATTACHMENT	D2.20							

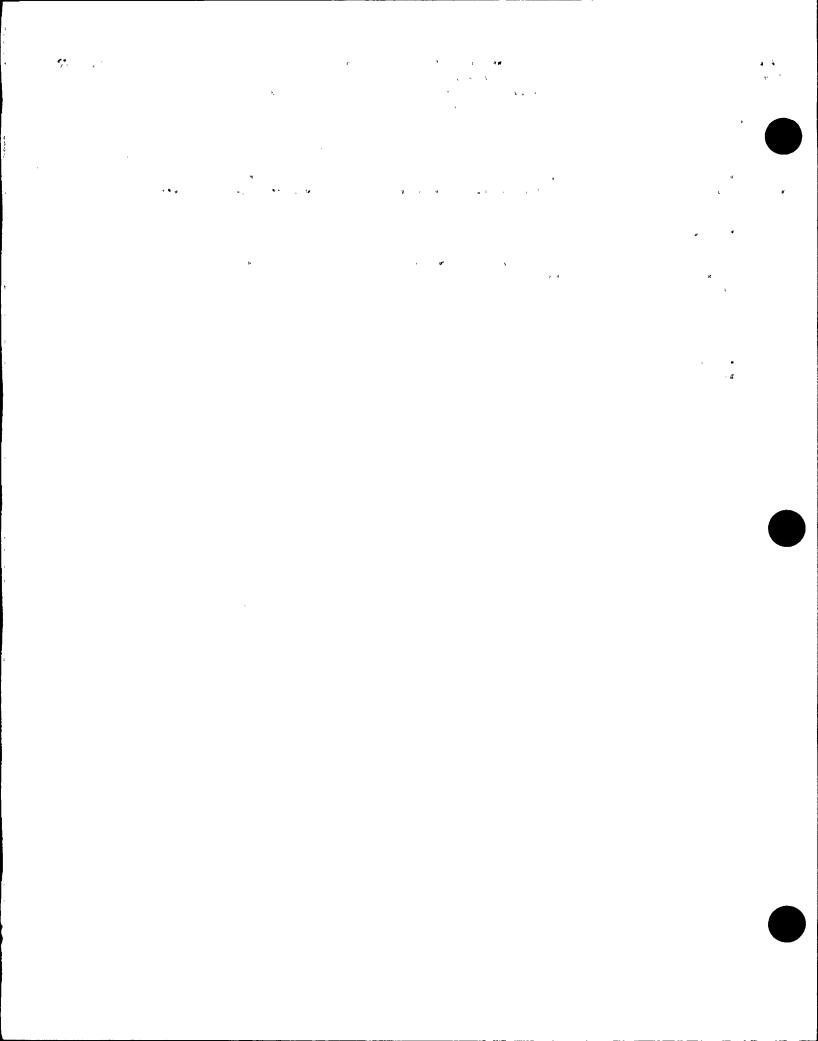
TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 3 ALL STATUS COMPONENTS

EMPONENT COOLING WATER TO RHR HEAT EXCHANGER A

		-			N	I	0	
MBER: 140	ASME			S	0	N C	3 T	
	SEC. XI			Ţ	R	SE	H	
EXAMINATION AREA	CATGY	EXAM		Α	Ε	1 () E	REMARKS
IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G I	1 R	**CALIBRATION BLOCK**
***************************************				-	•	• •	•	***************************************
SYSTEM NO. 30, 5614-P-526-S	SH. 1 OF 5	(REF. DWG.	NO. 4-C22)					
4-ACH-14	F-C	VT-3	NDE 4.3-17	С	-		· x	4/14/93 - PAINT ON SPHERICAL BEARINGS,
DUAL ROD HANGER	F3.10	VT-3	NDE 4.3-94		X			PAINT REMOVED, 5/20/93 - VT
15*0"		CNR	93-4-008					RE-EXAMINATION COMPLETE
		CR	93-235					
		PWO	93007051					**N/A**
A-ACH-14 1A	D-R	VT-3	NDF 4.3-16	c	_		. x	4/14/93 - VT COMPLETE, DRAWING
				•			^	DISCREPENCY, INTEGRAL ATTACHMENT NOT
	02.10						1	WELDED AS SHOWN ON DRAWING, ACCEPTED
15 0		OI.	75 250					•
								AS-IS BY ENGINEERING EVALUATION
	SYSTEM NO. 30, 5614-P-526-S 4-ACH-14 DUAL ROD HANGER	EXAMINATION AREA CATGY IDENTIFICATION ITEM NO SYSTEM NO. 30, 5614-P-526-S SH. 1 OF 5 4-ACH-14 F-C DUAL ROD HANGER F3.10 4-ACH-14 IA D-B INTEGRAL ATTACHMENT D2.10	SEC. XI EXAMINATION AREA IDENTIFICATION SYSTEM NO. 30, 5614-P-526-S 4-ACH-14 DUAL ROD HANGER 15'0" CNR CR PHO 4-ACH-14 IA INTEGRAL ATTACHMENT SEC. XI CATGY EXAM ITEM NO HETHOD F-C VT-3 CREF. DWG. CATGY EXAM ITEM NO HETHOD F-C VT-3 CNR CR PHO D-B VT-3 CNR CR CR CR CR CR CR CR CR CR CR CR CR CR	SEC. XI EXAMINATION AREA IDENTIFICATION SYSTEM NO. 30, 5614-P-526-S 4-ACH-14 DUAL ROD HANGER 15'0" SYSTEM NO. 30, 5614-P-526-S CNR SY-3-235 PWO SY-3 NDE 4.3-16 INTEGRAL ATTACHMENT SEC. XI CATGY EXAM CATGY EXAM CATGY EXAM NETHOD PROCEDURE SYSTEM NO. 4-C22) 4-ACH-14 IA D-B VT-3 NDE 4.3-16 INTEGRAL ATTACHMENT D2.10 CNR 93-4-007	SEC. XI EXAMINATION AREA IDENTIFICATION SYSTEM NO. 30, 5614-P-526-S 4-ACH-14 DUAL ROD HANGER TO CNR CNR CR CR CR CR CR CR CR CR CR CR CR CR CR	ASHE SEC. XI TR EXAMINATION AREA CATGY EXAM A E IDENTIFICATION ITEM NO METHOD PROCEDURE T C SYSTEM NO. 30, 5614-P-526-S SH. 1 OF 5 (REF. DWG. NO. 4-C22) 4-ACH-14 F-C VT-3 NDE 4.3-17 C - DUAL ROD HANGER F3.10 VT-3 NDE 4.3-94 X 15'0" CNR 93-4-008 CR 93-235 PHO 93007051 4-ACH-14 IA D-B VT-3 NDE 4.3-16 C - INTEGRAL ATTACHMENT D2.10 CNR 93-4-007	### ASME SEC. XI TRISE SEC. XI TRISE SEC. XI TRISE SEC. XI TRISE SEC. XI TRISE SEC. XI TRISE SEC. XI TRISE SEC. XI TRISE SEC. XI TRISE SEC. XI TRISE SEC. XI TRISE SEC. XI TRISE SEC. XI TRISE SEC. XI TRISE SEC. XI TRISE SEC. XI TEM NO. HETHOD PROCEDURE TO CITY OF SEC. XI TEM NO. HETHOD PROCEDURE TO CITY OF SEC. XI TEM NO. 4-C22) ##################################	SEC. XI EXAMINATION AREA IDENTIFICATION SYSTEM NO. 30, 5614-P-526-S 4-ACH-14 DUAL ROD HANGER ST. XI ITR SE H A E I O E F-C VT-3 NDE 4.3-17 C X CNR 93-4-008 CR 93-235 PHO 93007051 CNR 93-4-007 CNR 93-4-007

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TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY
SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

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CLASS 3 ALL STATUS COMPONENTS

COMPONENT COOLING WATER SYSTEM INSIDE CONTAINMENT

Æ NU	MBER: 141	ASME SEC. XI				N :		T	
	EXAMINATION AREA	CATGY	EXAM				-		REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T -	C (G M	R	**CALIBRATION BLOCK**
	SYSTEM_NO. 30, 5614-P-539-S	SH. 3 OF 3	(REF. DWG.	NO. 4-C23)					
306900	4-141-A1	F-B	VT-3	NDE 4.3-53	С	χ.		-	4/16/93 - VT COMPLETE
	ANCHOR CTHT, 2316 ¹¹	F2.10							
	CIRT, 25 0								**N/A**
306950	4-141-A1 IA INTEGRAL ATTACHMENT	D-B B2.20	VT-3	NDE 4.3-54	С	X ·		•	4/16/93 - VT COMPLETE
	CTHT, 23'6"								**N/A**
307000	4-ccH-34	F-B	VT-3	NDE 4.3-45	С	х .	• •		4/16/93 - VT COMPLETE
	BOX RESTRAINT	F2.10							
	CTHT, 34'8"								**N/A**
7040	4-CCH-34 IA INTEGRAL ATTACHMENT	D-B D2.20	VT-3	NDE 4.3-46	С	χ ·		-	4/16/93 - VT COMPLETE
	CTHT, 34'8"	JV							
									H/A

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY

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SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

CLASS 3 ALL STATUS COMPONENTS

POMPONENT COOLING WATER SYSTEM FROM CCW PUMP C

NIO
E NUMBER: 151 ASME SONGT
SEC. XI TRSEH

SUMMARY EXAMINATION AREA CATGY EXAM A E I O E REMARKS

NUMBER IDENTIFICATION ITEM NO METHOD PROCEDURE T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 30, 5614-P-501-S SH. 3 OF 3 (REF. DWG. NO. 4-C33)

314200 4-ACH-182 F-C VT-3,4 NDE 4.3-87 A - - - X 5/6/93 - VT COMPLETE, SPRING CAN SCALE

DUAL SPRING HANGER F3.50 CNR 91-4-022 ILLEGIBLE, RE-EXAMINATION AFTER 32'2" PWO 910207111504 CORRECTION OF ITEMS FOUND IN CNR

91-4-022 **N/A**

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TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

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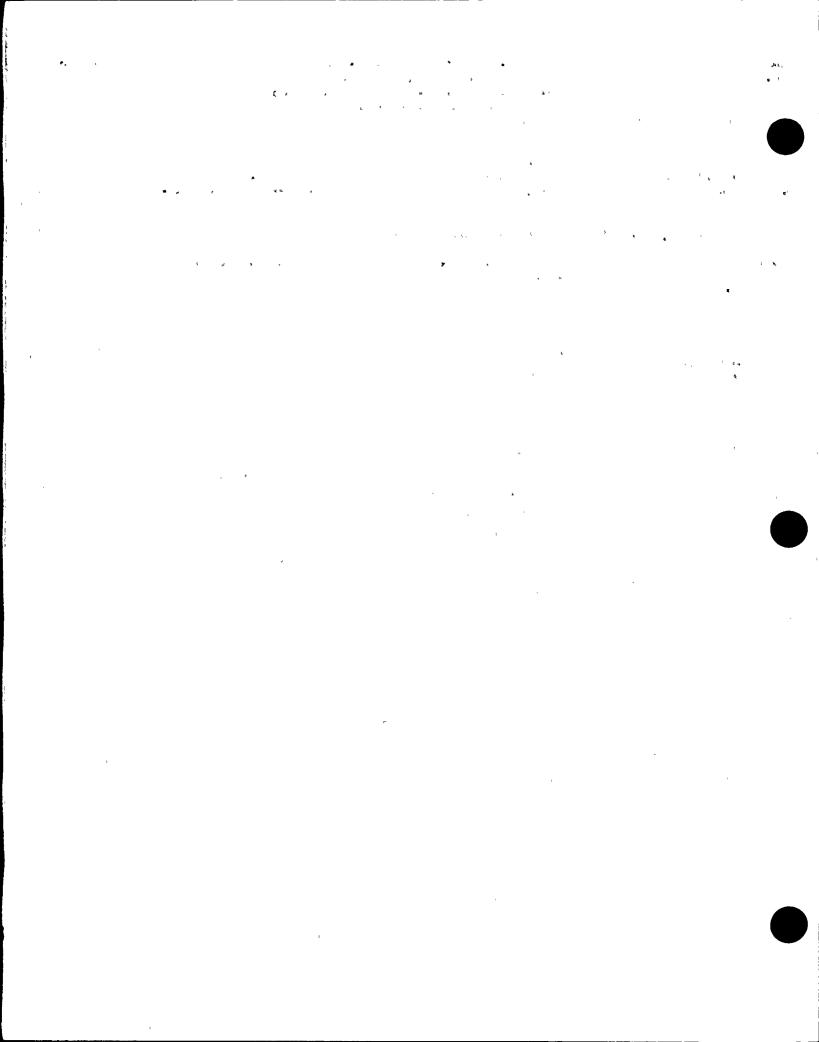
SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 3 ALL STATUS COMPONENTS

			CLASS 3	ALL STATUS COMPO	NENT	S	
MPONE	NT COOLING WATER SYSTEM OUTSID	E CONTAIN	ENT				
						N I O	
ME NU	MBER: 154	ASME			S	ONGT	
		SEC. XI			T	RSEH	
SUMMARY	EXAMINATION AREA	CATGY	EXAM		Α	EIOE	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	CGMR	**CALIBRATION BLOCK**
				• ••••			•••••
	SYSTEM NO. 30, 5614-P-518-S	SH. 5 OF 1	O (REF. DW	<u>G. NO. 4-C36)</u>			
747700	/ . cou - 7	F-C	VT-3	NDE 4.3-4	c	V	4/14/93 - VT COMPLETE, PAINT ON
317300	4-CCH-3	F3.10	VT-3	NDE 4.3-92	C		•
	RIGID STRUT	F3.10				^	SPHERICAL BEARING, PAINT REMOVED,
	19'3"		CNR CR	93-4-095 93-462			5/20/93 - VT RE-EXAMINATION COMPLETE
			CK	y3-402			**N/A**
							n/A
317350	4-CCH-3 IA	D-B	VT-3	NDE 4.3-5	c	x	4/14/93 - VT COMPLETE
317330	INTEGRAL ATTACHMENT	D2.20	*** 5	1102 410 5	•	•	Ty 17/20 VI GOIN BOILD
	1913"	J 4.40					
							N/A
	SYSTEM NO. 30, 5614-P-518-S	SH. 10 OF	10 (REF. D	WG. NO. 4-C36)			
317600	4-ACH-43	F-C	VT-3	NDE 4.3-40	С		4/14/93 - VT COMPLETE, PAINTED SPHERICAL
	DUAL RIGID STRUT	F3.10	,VT-3	NDE 4.3-90		X	BEARING, BEARING RACE IS PARTIALLY
_	13'6"		CNR	93-4-012			DISLODGED FROM STRUT, ACCEPTED AS-IS BY
			CR	93-229			ENGINEERING EVALUATION, WILL BE
			PWO	93007054			CORRECTED AT A FUTURE DATE UNDER A PLANT
							WORK ORDER, PAINT WAS REMOVED
							N/A
	N						
747/50	4-ACH-43 IA	D-B	VT-3	NDE 4.3-7	c	V	4/14/93 - VT COMPLETE
317020	H-MUTHO IN	ם-ם	41-2	NUE 4.3-1	C	^	TITITE TO THE CONFESTS

D2.20

INTEGRAL ATTACHMENTS

13'6"



TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

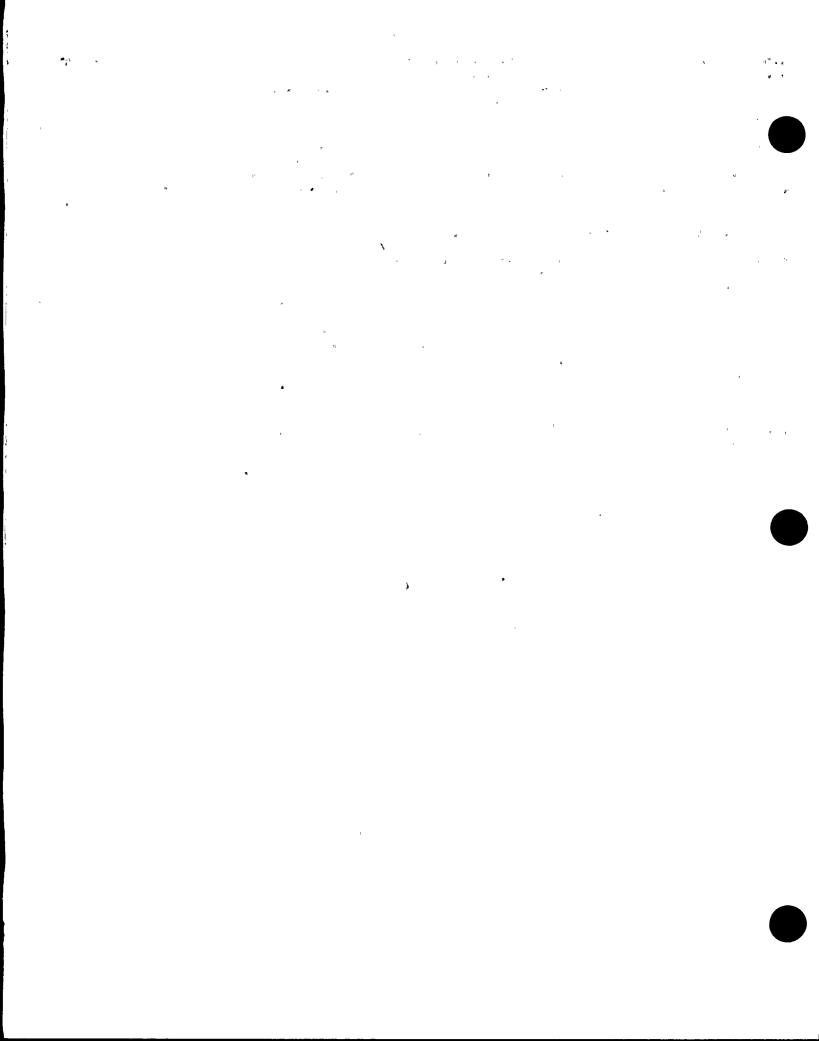
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SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)
CLASS 3 ALL STATUS COMPONENTS

MYILIARY	FEEDWATER	SYSTEM PUMP	DISCHARGE

							N	1	0	,
Į	AE NUR	1BER: 160	ASME			S	0	N G	T	
			SEC. XI			Ţ	R	SE	H	
	SUMMARY	EXAMINATION AREA	CATGY	EXAM						REMARKS
	NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G P	l R	**CALIBRATION BLOCK**
			• • • • • • • • • • • • • • • • • • • •			-	-		-	
		SYSTEM NO. 74, 5614-P-807-S	SH. 4 OF 7	(REF. DWG.	NO. 4-C42)					
	322600	80117-A-324-01 ANCHOR 36'0"	F-C F3.10	VT-3	NDE 4.3-55	С	X		• •	4/16/93 - VT COMPLETE
		30.0								**N/A**
	322650	80117-A-324-01 IA INTEGRAL ATTACHMENT	D-B D2.20	VT-3	NDE 4.3-55	С			. .	4/16/93 - VT COMPLETE
		36.04								**N/A**
	322800	80117-H-324-07 PIPE SUPPORT	F-C F3.10	VT-3	NDE 4.3-56	С	X			4/16/93 - VT COMPLETE
		36'0"								**N/A**
	850	80117-H-324-07 IA INTEGRAL ATTACHMENT 36'0"	D-B D2.20	vr-3	NDE 4.3-56	С	x		. -	4/16/93 - VT COMPLETE
		30.0								**N/A**



INTEGRAL ATTACHMENT

3013"

D2.20

TURKEY POINT NUCLEAR PLANT UNIT 4

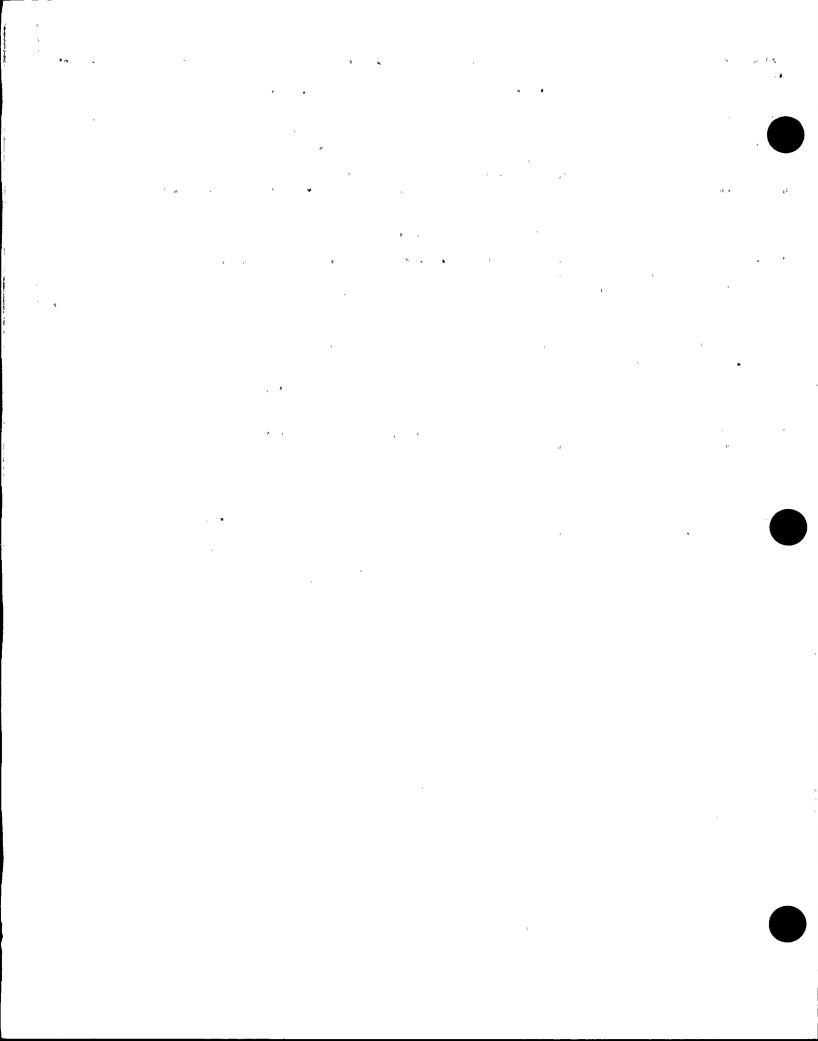
INSERVICE INSPECTION SUMMARY
SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

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CLASS 3 ALL STATUS COMPONENTS

			orvoo o v	FF DIVIDO CONCO		•			
MYILIA	RY FEEDWATER SYSTEM PUMP DISCH	IARGE							
							-	0	
ME NU	HBER: 161	ASHE			S	0	N C	T	
		SEC. XI			T	R	S	H	
SUMMARY	EXAMINATION AREA	CATGY	EXAM		Α	Е	1 () E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G I	1 R	**CALIBRATION BLOCK**
					•	•	•	• •	•••••
	SYSTEM NO. 74, 5614-P-807-S	SH. 4 OF 7	(REF. DWG.	NO. 4-C43)					
323250		F-C	VT-3	NDE 4.3-57	C	X		• •	4/16/93 - VT COMPLETE
	BOX RESTRAINT	F3.10							
	32'2"								
	T.								**H/A**
323275	80117-H-324-11 IA	D-B	VT-3	NDE 4.3-57	С	х			4/16/93 - VT COMPLETE
	INTEGRAL ATTACHMENT	D2.20							
	32'2"	i .							
									N/A
				4 7 50	_				444407 447 20004 777
323450		F-C F3.10	vr-3	NDE 4.3-58	C	Х	•	•	4/16/93 - VT COMPLETE
	BOX RESTRAINT 30'3"	13.10							
	30.3								**N/A**
									•••
_									
K475	80117-H-324-13 IA	D-B	VT-3	NDE 4.3-58	C	X		-	4/16/93 - VT COMPLETE



TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

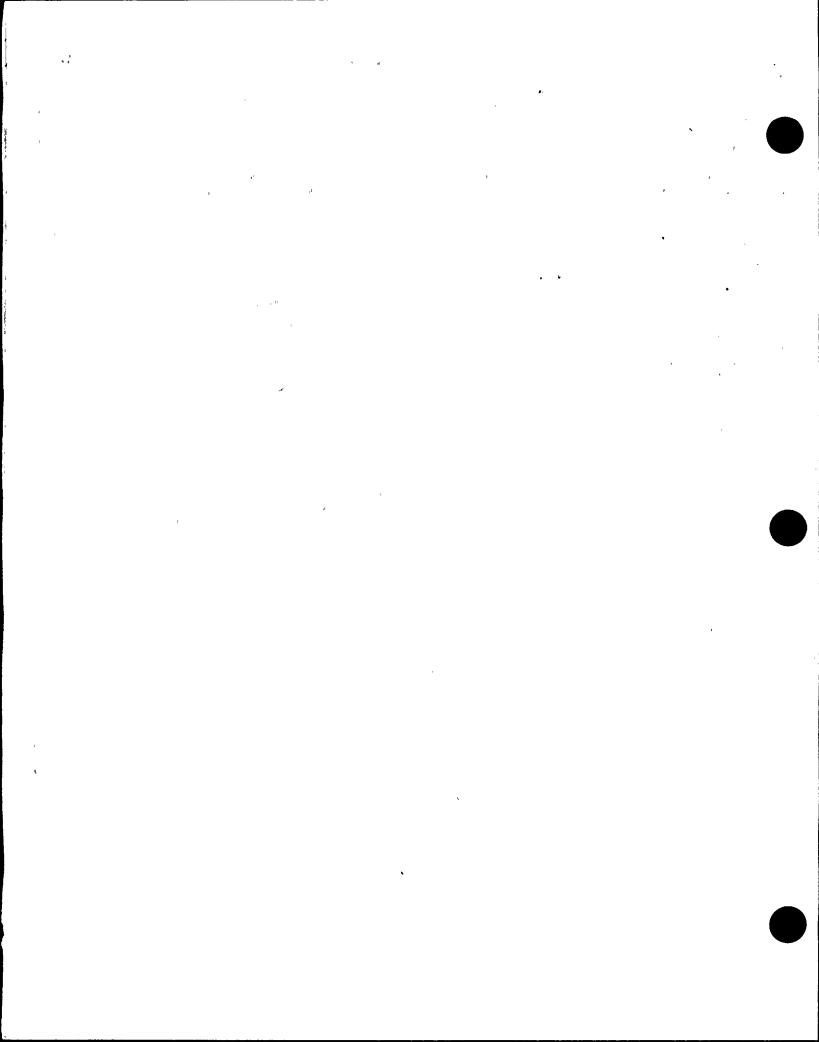
SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

PAGE:

CLASS 3 ALL STATUS COMPONENTS

NIXILIARY FEEDWATER PUMP SUCTION FROM COND.STG.TK.

						N	I	0	
Æ NU	MBER: 163	ASHE			s			G T	
		SEC. XI			T	R	S	E H	
SUMMARY	EXAMINATION AREA	CATGY	EXAM		A	Ε	I	0 E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G	M R	**CALIBRATION BLOCK**
					-	-	-		
	SYSTEM NO. 74, 5610-P-818-S S	H. 3 OF 3	(REF. DWG.	NO. 4-C45A)					
325700	80117-H-341-23 SLIDING STANCHION 20'7"	F-B F2.10	VT-3	NDE 4.3-62	С	X	•		4/20/93 - VT COMPLETE
									N/A
325750	80117-H-341-23 IA INTEGRAL ATTACHMENT 20'7"	D-A D1.20	VT-3	NDE 4.3-62	С	x	•		4/20/93 - VT COMPLETE
									N/A
326050	80117-R-341-03 IA INTEGRAL ATTACHMENT 29'10"	D-A D1.20	VT-3	NDE 4.3-63	С	x	-		4/20/93 - VT COMPLETE
	27 10								**N/A**
-			70		_				
4400		F-C	VT-3	NDE 4.3-61	C	•	•	- x	4/17/93 - VT COMPLETE, SUPPORT HAS
	ROD HANGER	F3.10	CNR CR	93-4-023 93-254					DAMAGED INSULATION ON ADJACENT LINE, INSULATION WILL BE MODIFIED TO GIVE
	30-10"		PWO	93012727					PROPER CLEARANCE
									N/A
									4.48.48
326450	80117-H-341-18 IA INTEGRAL ATTACHMENT	D-A D1.20	VT-3	NDE 4.3-61	С	Х	•		4/17/93 - VT COMPLETE
	30'10"								
									N/A
	SYSTEM NO. 74, 5610-P-818-S S	H. 2 OF 3	(REF. DWG.	NO. 4-C45B)					
328100	80117-H-341-02	F-B	VT-3	NDE 4.3-60	С	X	-		4/16/93 - VT COMPLETE
	SLIDING STANCHION	F2.10							
	2019"								



TURKEY POINT NUCLEAR PLANT UNIT 4 INSERVICE INSPECTION SUMMARY

SECOND INTERVAL, THIRD PERIOD, SECOND OUTAGE (93RF)

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CLASS 3 ALL STATUS COMPONENTS

MINILIARY FEEDWATER PUMP SUCTION FROM COND.STG.TK.

	Æ NUR	4BER: 163	ASME SEC. XI			_	0	I N G S E	T	
,	SUMMARY	EXAMINATION AREA	CATGY	EXAM		-				REMARKS
ı	NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G M	R	**CALIBRATION BLOCK**
•		SYSTEM NO. 74, 5610-P-818-S	SH. 2 OF 3	(REF. DWG.	NO. 4-C45B)	•	-		•	
3	328150	80117-H-341-02 IA INTEGRAL ATTACHMENT 2019"	D-A D1.20	VT-3	NDE 4.3-60	С	x		-	4/16/93 - VT COMPLETE
										N/A
3		80117-H-341-01 SLIDING STANCHION	44	VT-3	NDE 4.3-59	С	X		-	4/16/93 - VT COMPLETE
		2019"								**N/A**
3	328210	80117-H-341-01 IA INTEGRAL ATTACHMENT	D-A D1.20	VT-3	NDE 4.3-59	С	X		-	4/16/93 - VT COMPLETE
		2019#								**N/A**

TURKEY POINT UNIT 4 1993 REFUELING OUTAGE

Summary of Visual Examinations and Functional Testing of Snubbers

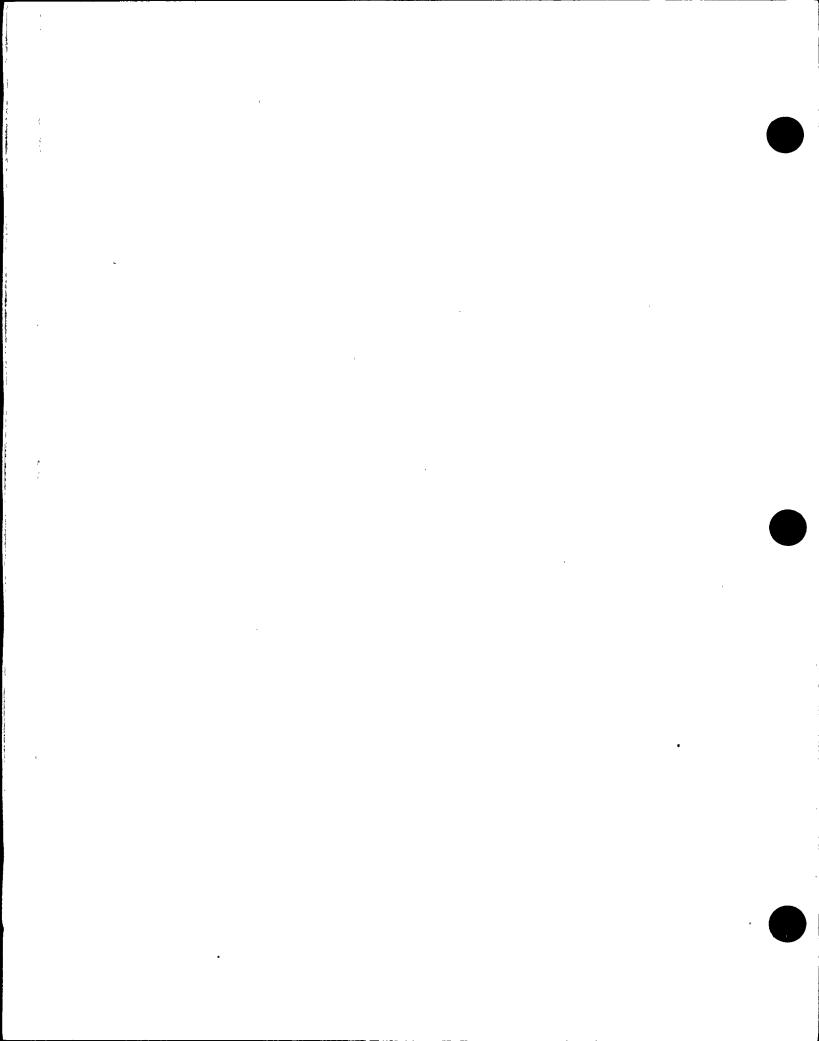


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ABSTRACT	3
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EXAMINATION/TESTING	5
CONCLUSION1	4
ACRONYM LIST	6

ABSTRACT

Visual examination and functional testing of Mechanical Shock
Arrestors were performed on Unit 4 to satisfy the requirements of
ASME Section XI, 1980 Edition, Winter 1981 Addenda and Plant
Technical Specifications during the 1993 Refueling Outage. Visual
Examination and Functional Testing activities were performed by
Siemens Nuclear Power Services, Inc. during the period of April
21, 1993 through May 18, 1993.

PROCEDURES

The following Florida Power & Light procedures were used to implement the Mechanical Shock Arrestor Surveillance Program.

AP 0190.83 Mechanical Shock Arrestor Surveillance Program
AP 0190.85 Functional Testing of Mechanical Shock Arrestors
OP 0209.9 Visual Examination of Mechanical Shock Arrestors
0-CMM-105.1 Removal and Reinstallation of Mechanical Shock Arrestors

The following procedures were utilized by Siemens Nuclear Power Services, Inc. to perform the Visual Examination and Functional Testing.

SNPS Quality Assurance Manual Rev. 14

SNPS-PP-3319-TPN Project Plan

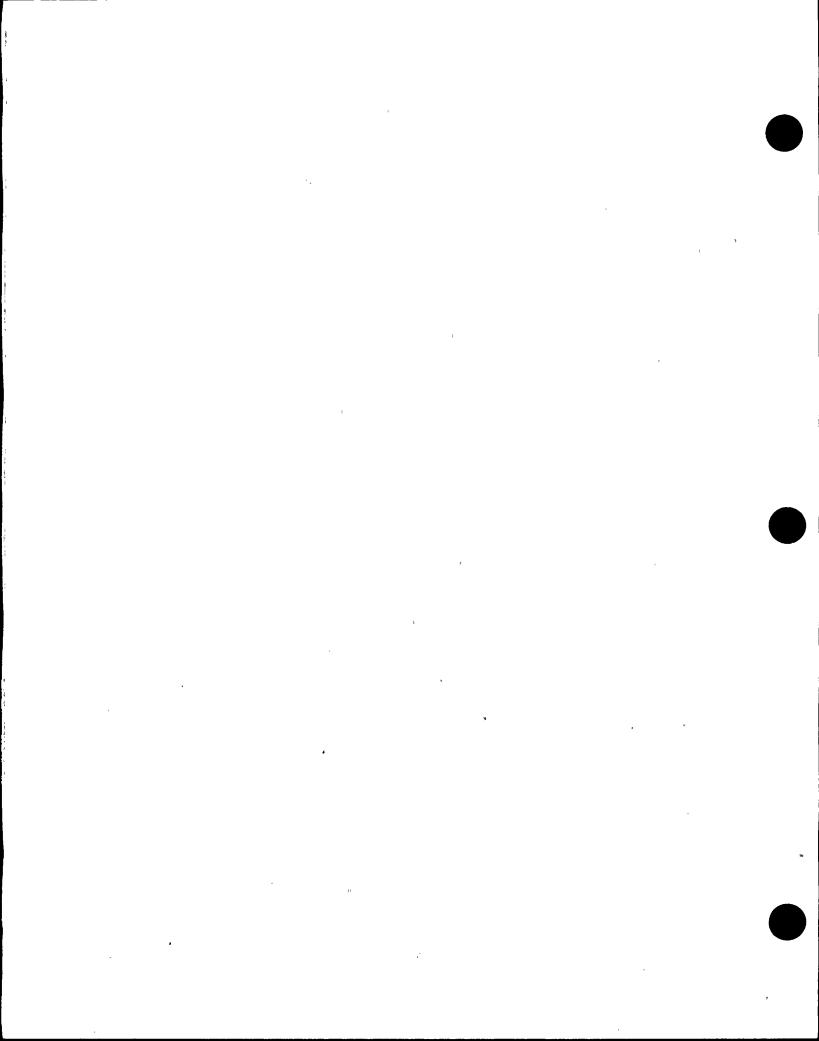
SNPS-CAL-2.2, Rev. 0 Daily Verification of Test Equipment

SNPS-CAL-1.2, Rev. 1 Daily Verification of Test Equipment

SNPS-EXM-1.1, Rev. 0 Visual Examination of MSA's

SNPS-TST-1.1, Rev. 0 Functional Testing of PSA MSA's

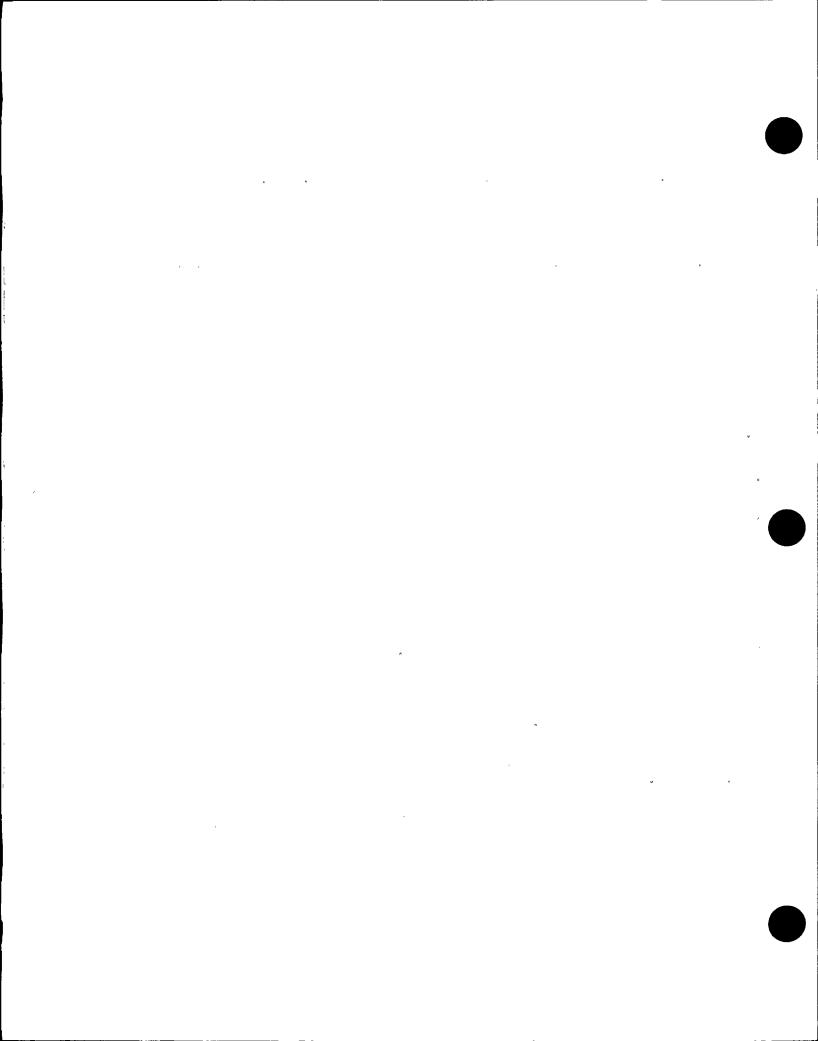
SNPS-MNT-3.1, Rev. 0 Disassembly and Repair of PSA MSA's



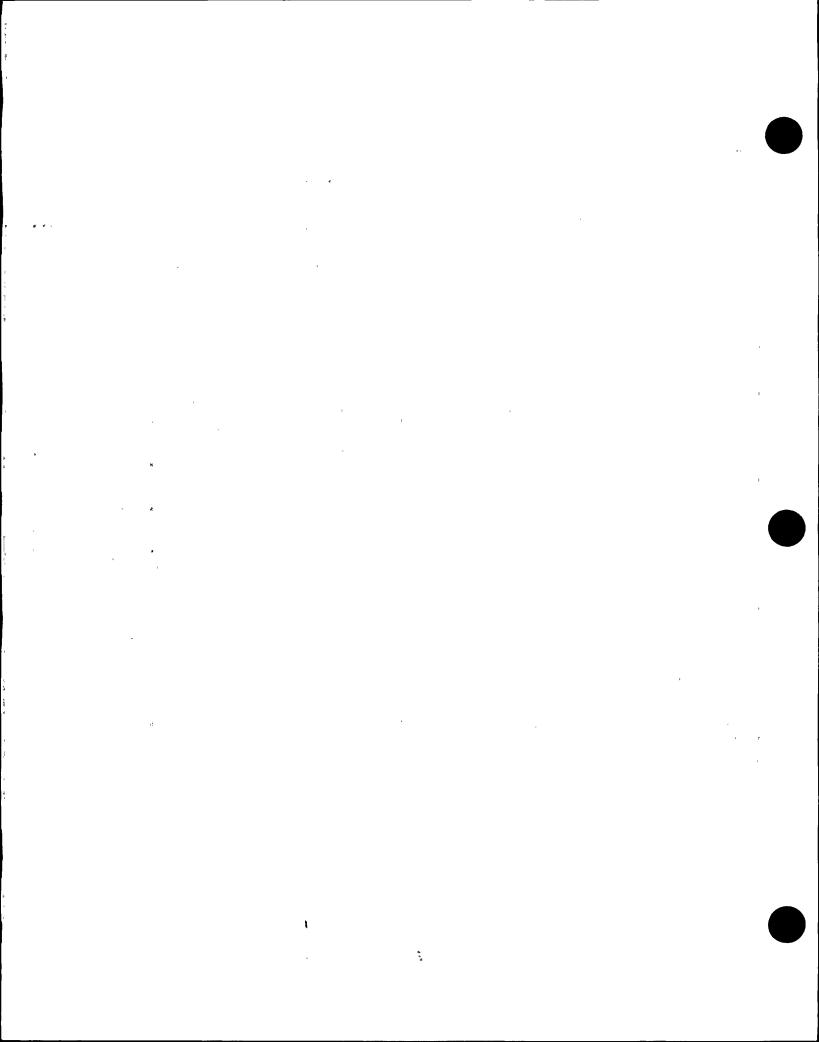
Examination/Testing

Visual examination (VT-3, VT-4 hand stroke) were performed on a total of ninety one (91) snubbers and functional testing was performed on thirty (30) snubbers.

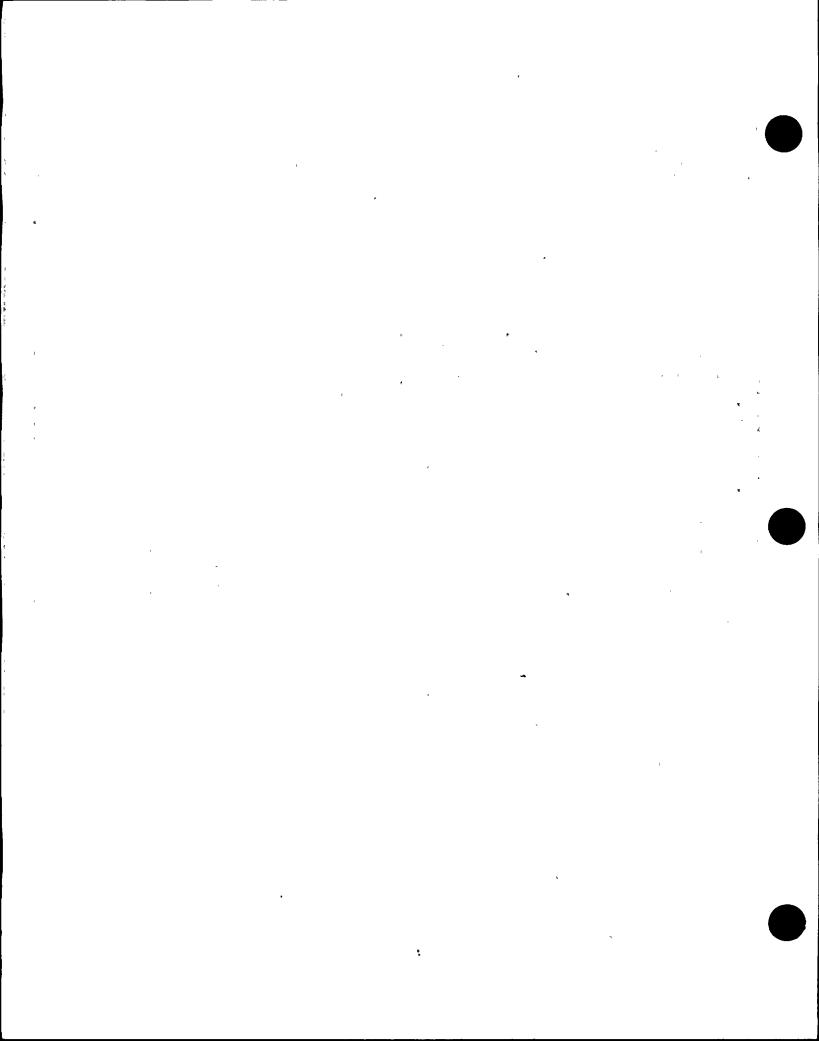
TAG#	SERIAL #	MODEL	SYSTEM	VT	FT	TEST SAMPLE	CORRECTIVE ACTION	
4- 1000	184	PSA-10	sis	SAT			NONE	
4- 1001	18010	PSA-1	SIS	SAT			NONE	
4- 1002	18016	PSA-1	SIS	SAT			NONE	
4- 1003	18008	PSA-1	SIS	SAT			NONE	
4- 1004	3168	PSA-35	MS	SAT			SEE DEV. SUMMARY 2-93-PTN-4-1004	
4- 1005	1206	PSA-35	MS	SAT			SEE DEV. SUMMARY 4-93-PTN-4-1005	
4 - 1006	8087	PSA-35	MS	SAT	SAT	EXP. SAMPLE #3	SEE DEV. SUMMARY 3-93-PTN-4-1006	
4- 1007	11928	PSA-35	MS	SAT			SEE DEV. SUMMARY 1-93-PTN-4-1007	
4- 1008	1205	PSA-35	MS	SAT	SAT	EXP. SAMPLE #3		
4 - 1009	1228	PSA-35	MS	SAT			SEE DEV. SUMMARY 5-93-PTN-4-1009	
4- 1010	1204	PSA-35	MS	SAT			SEE DEV. SUMMARY 7-93-PTN-4-1010	
4- 1011	1281	PSA-35	MS	SAT	SAT	EXP. SAMPLE #3	SEE DEV. SUMMARY 6-93-PTN-4-1011	
4- 1012	16154	PSA-10	RHR	SAT			NONE	
4- 1013	17418	PSA-3	RHR	SAT		-	NONE	
4- 1014	17177	PSA-10	RHR	SAT			NONE	



m> a !!		WODDY	arrammı.	****				
TAG#	SERIAL #	MODEL	SYSTEM	VT	FT	TEST SAMPLE	CORRECTIVE ACTION	
4- 1015	117	PSA-10	RHR	SAT			NONE	
4- 1016	122	PSA-10	RHR	SAT			SEE DEV. SUMMARY 8-93-PTN-4-1016	
4- 1017	118	PSA-10	RHR	SAT			NONE	
4- 1018	17420	PSA-3	RHR	SAT			NONE	
4- 1019	17426	PSA-3	RHR	SAT			NONE	
4- 1020	27101	PSA-3	FW	SAT	SAT	EXP. SAMPLE #1	NONE	
4- 1021	128	PSA-3	FW	SAT			NONE	
4- 1022	21381	PSA-3	FW	SAT	SAT	EXP. SAMPLE #2	NONE	
4- 1032	3707	PSA-35	FW	SAT			NONE	
4- 1033	7001	PSA-35	FW	SAT			NONE	
4- 1034	16243	PSA-10	FW	SAT			NONE	
4- 1035	182	PSA-10	FW	SAT	#2 UNSAT	YES	SEE DEV. SUMMARY 11-93-PTN-4-1035	
4- 1036	11461	PSA-10	FW	SAT	SAT	EXP. SAMPLE #1	NONE	
4- 1037	11930	PSA-35	FW	SAT	SAT	YES	NONE	
4- 1038	29497	PSA-1/4	cvcs	SAT			NONE	



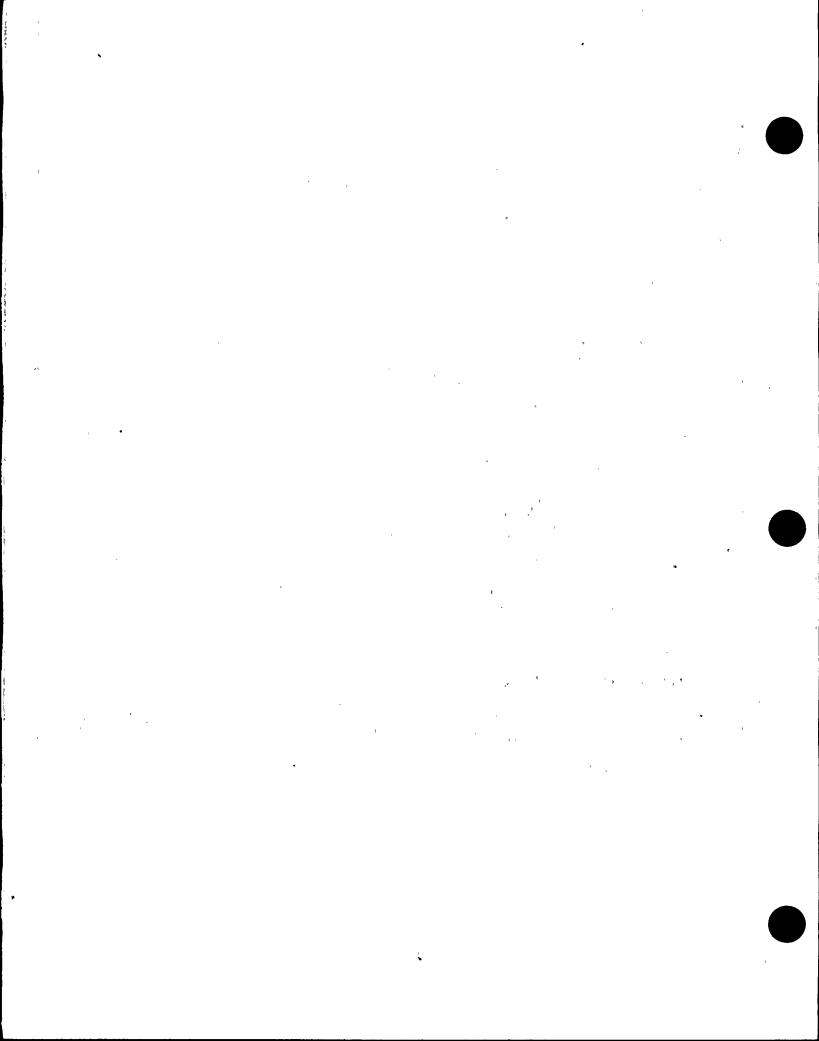
TAG#	SERIAL #	MODEL	SYSTEM	VT	FT	TEST SAMPLE	CORRECTIVE ACTION
4- 1039	4589	PSA-35	MS	SAT	#3 UNSAT	YES	SEE DEV. SUMMARY 12-93-PTN-4-1039
4- 1040	17419	PSA-3	cvcs	SAT	4		NONE
4- 1041	19721	PSA-3	cvcs	SAT			NONE
4- 1042	19727	PSA-3	cvcs	SAT			NONE
4- 1043	27099	PSA-3	cvcs	SAT			NONE
4- 1044	3919	PSA-10	RCS	SAT			NONE
4- 1045	3905	PSA-10	RCS	SAT			NONE
4- 1046	187	PSA-10	RCS	SAT			NONE
4- 1047	185	PSA-10	RCS	SAT	SAT	EXP. SAMPLE #1	NONE
4- 1048	4251	PSA-10	RCS	SAT			NONE
4- 1049	10169	PSA-10	RCS	SAT			NONE
4- 1050	12374	PSA-10	RCS	SAT			NONE
4- 1051	11125	PSA-10	RCS	SAT			NONE
4- 1052	16251	PSA-10	RCS	SAT	SAT	EXP. SAMPLE #1	NONE
4- 1053	11446	PSA-10	RCS	SAT			NONE



ma a #	CEDIAL #	MODEL	GVGDDV	77CD	- FOR	WEGE CAMPLE	CODDECETION & CONTON	
TAG#	SERIAL #	MODEL	SYSTEM	VT	FT	TEST SAMPLE	CORRECTIVE ACTION	
4- 1054	16253	PSA-10	RCS	SAT	#1 UNSAT	YES	SEE DEV. SUMMARY 10-93-PTN-4-1054	
4- 1055	11110	PSA-10	RCS	SAT	SAT	DEVIATION DISPOSITION	SEE DEV. SUMMARY 9-93-PTN-4-1055	
4- 1056	17841	PSA-10	RCS	SAT	SAT	INFO TEST	NONE	
4- 1057	27080	PSA-3	RCS	SAT			NONE	
4- 1058	21379	PSA-3	RCS	SAT			NONE	
4- 1059	27103	PSA-3	RCS	SAT			NONE	
4- 1061	19722	PSA-3	RCS	SAT			NONE	
4- 1062	27076	PSA-3	RCS	SAT	SAT	EXP. SAMPLE #1	NONE	
4- 1063	27098	PSA-3	RCS .	SAT			NONE	
4- 1064	27077	PSA-3	RCS	SAT	SAT	YES	NONE	
4- 1065	20873	PSA-3	RCS	SAT	,		NONE	
4- 1066	27094	PSA-3	RCS	SAT			NONE	
4- 1067	27097	PSA-3	RCS	SAT	SAT	YES	NONE	
4- 1068	27085	PSA-3	RCS	SAT		NONE		
4- 1069	10033	PSA-35	FW	SAT			NONE	

TAG#	SERIAL #	MODEL	SYSTEM	VT	FT	TEST SAMPLE	CORRECTIVE ACTION
4- 1070	10036	PSA-35	FW	SAT			NONE
4- 1071	11315	PSA-10	FW	SAT			NONE
4- 1072	16235	PSA-10	FW	SAT	SAT	EXP. SAMPLE #2	NONE
4- 1073	3941	PSA-10	FW	SAT	SAT	EXP. SAMPLE #2	NONE
4- 1074	19298	PSA-3	FW	SAT			NONE
4- 1075	19297	PSA-3	FW	SAT			NONE
4- 1076	24414A	PSA-1	sg	SAT	SAT	EXP. SAMPLE #1	NONE
4- 1077	18014	PSA-1	SG	SAT	SAT	EXP. SAMPLE #2	SEE DEV. SUMMARY 13-93-PTN-4-1077
4- 1078	24430A	PSA-1	sg	SAT			NONE
4- 1079	23227	PSA-1	sg	SAT	SAT	EXP. SAMPLE #1	NONE
4- 1080	24431	PSA-1	sg	SAT	SAT	YES	NONE
4- 1081	19295	PSA-3	sG	SAT			NONE
4- 1082	19296	PSA-3	SG	SAT	SAT	EXP. SAMPLE #2	NONE
4- 1083	24408A	PSA-1	SG	SAT	SAT	YES	NONE
4- 1084	23229	PSA-1	SG	SAT	SAT	EXP. SAMPLE #2	NONE

TAG#	CEDTAL #	MODET	CVCDEM	VT	15m	mpcm campre	CODDECETTE ACETON
<u> </u>	SERIAL #	MODEL	SYSTEM	V.T.	FT	TEST SAMPLE	CORRECTIVE ACTION
4- 1085	23229	PSA-1/4	cvcs	SAT			NONE
4- 1086	12993	PSA-35	MS	SAT			NONE
4- 1087	12994	PSA-35	MS	SAT			NONE
4- 1088	12995	PSA-35	MS	SAT			NONE
4- 1089	12996	PSA-35	MS	SAT			NONE
4- 1090	12997	PSA-35	MS	SAT			NONE
4- 1091	12998	PSA-35	MS	SAT			SEE DEV. SUMMARY 15-93-PTN-4-1091
4- 1092	12999	PSA-35	MS	SAT			NONE
4- 1093	17868	PSA-10	MS	SAT			NONE
4- 1094	17869	PSA-10	MS	SAT	1		NONE
4- 1095	17870	PSA-10	MS'	SAT	SAT	DEVIATION DISPOSITION	SEE DEV. SUMMARY 19-93-PTN-4-1095
4- 1096	17871	PSA-10	MS	SAT			NONE
4- 1097	17872	PSA-10	MS	SAT	UNSAT	EXP. SAMPLE #2	SEE DEV. SUMMARY 14-93-PTN-4-1097
4- 1098	17873	PSA-10	MS	SAT			NONE
4- 1099	17423	PSA-3	MS	SAT	SAT	YES	NONE



TAG#	SERIAL #	MODEL	SYSTEM	VT	FT	TEST SAMPLE	CORRECTIVE ACTION
4- 1100	29498	PSA-1/4	WDS	SAT	SAT	YES	NONE

DEVIATION REPORT SUMMARY

Taq #: 4-1004 DEVIATION #: 2-93-PTN-4-1004 Int.: 04/22/93

Closed: 04/27/93

CONDITION: 1) Spherical bearing partially dislodged.

2) Load pin holes in rear bracket and pipe attachment are elongated.

DISPOSITION: Condition Report generated CR NO. 93-320. Bearing restaked and brackets replaced.

Taq #: 4-1005 DEVIATION #: 4-93-PTN-4-1005 Int.: 04/22/93

Closed: 04/26/93

CONDITION: 1) Load pin deformed.

2) Load pin holes in rear bracket and pipe attachment are elongated.

DISPOSITION: Condition Report generated CR NO. 93-320. Load pin replaced and brackets replaced.

<u>Taq #: 4-1006</u> DEVIATION #: 3-93-PTN-4-1006 Int.: 04/22/93

Closed: 04/26/93

CONDITION: Spherical bearing dislodged on snubber end.

DISPOSITION: Bearing restaked and verified freedom of movement IAW SNPS-MNT-3.1.

<u>Taq #: 4-1007</u> DEVIATION #: 1-93-PTN-4-1007 Int.: 04/22/93

Closed: 04/26/93

CONDITION: Load pin deformed.

DISPOSITION: Replaced load pin IAW SNPS-MNT-3.1.

Taq #: 4-1009 DEVIATION #: 5-93-PTN-4-1009 Int.: 04/22/93

Closed: 04/26/93

CONDITION: Load pin hole on rear bracket is elongated.

DISPOSITION: Condition Report generated CR NO. 93-320. Rear bracket replaced.

Tag #: 4-1010 DEVIATION #: 7-93-PTN-4-1010 Int.: 04/22/93

Closed: 04/26/93

CONDITION: 1) Spherical bearing dislodged on snubber end.

- 2) Load pin hole in rear bracket is elongated.
- 3) Rear bracket load pin is deformed.

DISPOSITION: Condition Report generated CR NO. 93-320. Bearing restaked and rear bracket and pin replaced.

Tag #: 4-1011 DEVIATION #: 6-93-PTN-4-1011 Int.: 04/22/93

Closed: 04/26/93

CONDITION: Load pin holes in the rear bracket and pipe attachment are elongated.

DISPOSITION: Condition Report generated CR NO. 93-320. Brackets replaced.

Tag #: 4-1016 DEVIATION #: 8-93-PTN-4-1016 Int.: 04/26/93

Closed: 04/26/93

CONDITION: Lack of thread engagement between snubber and transition tube assembly.

DISPOSITION: Condition Report generated CR NO. 93-341. Bolts replaced providing adequate thread engagement.

Tag #: 4-1035 DEVIATION #: 11-93-PTN-4-1035 Int.: 05/01/93

Closed: 05/10/93

CONDITION: MSA exceeded the 0.02G specified criteria for acceleration.

DISPOSITION: Replaced MSA with tested spare S/N 11439.

Tag #: 4-1039 DEVIATION #: 12-93-PTN-4-1039 Int.: 05/02/93

Closed: 05/07/93

CONDITION: 1) MSA has damaged spherical bearing.

2) MSA exceeded the 0.02G specified criteria for acceleration

DISPOSITION: Replaced MSA with tested spare S/N 6998.

Tag #: 4-1054 DEVIATION #: 10-93-PTN-4-1054 Int.: 05/01/93

Closed: 05/07/93

CONDITION: MSA exceeded the specified 0.02G acceleration criteria.

DISPOSITION: Replaced MSA with tested spare S/N 15718.

Tag #: 4-1055 DEVIATION #: 9-93-PTN-4-1055 Int.: 04/27/93

Closed: 05/07/93

CONDITION: Snubber could not be hand stroked through it's full range.

DISPOSITION: Replaced MSA with tested spare S/N 7782. Functional tested removed MSA, test sat.

Taq #: 4-1077 DEVIATION #: 13-93-PTN-4-1077 Int.: 05/03/93

Closed: 10/7/92

CONDITION: "L" dimension is less than the specified minimum.

DISPOSITION: Condition Report generated CR NO. 93-385. Attachment moved to reestablish proper "L" dimension.

Tag #: 4-1091 DEVIATION #: 15-93-PTN-4-1091 Int.: 05/04/93

Closed: 05/07/93

CONDITION: Load pin hole on pipe attachment is elongated.

DISPOSITION: Condition Report generated CR NO. 93-320. Bracket

replaced.

Tag #: 4-1095 DEVIATION #: 19-93-PTN-4-1095 Int.: 05/04/93

Closed: 05/10/93

CONDITION: Inspector unable to hand stroke this MSA.

DISPOSITION: MSA was functional tested sat.

Tag #: 4-1097 DEVIATION #: 14-93-PTN-4-1097 Int.: 05/03/93

Closed: 05/07/93

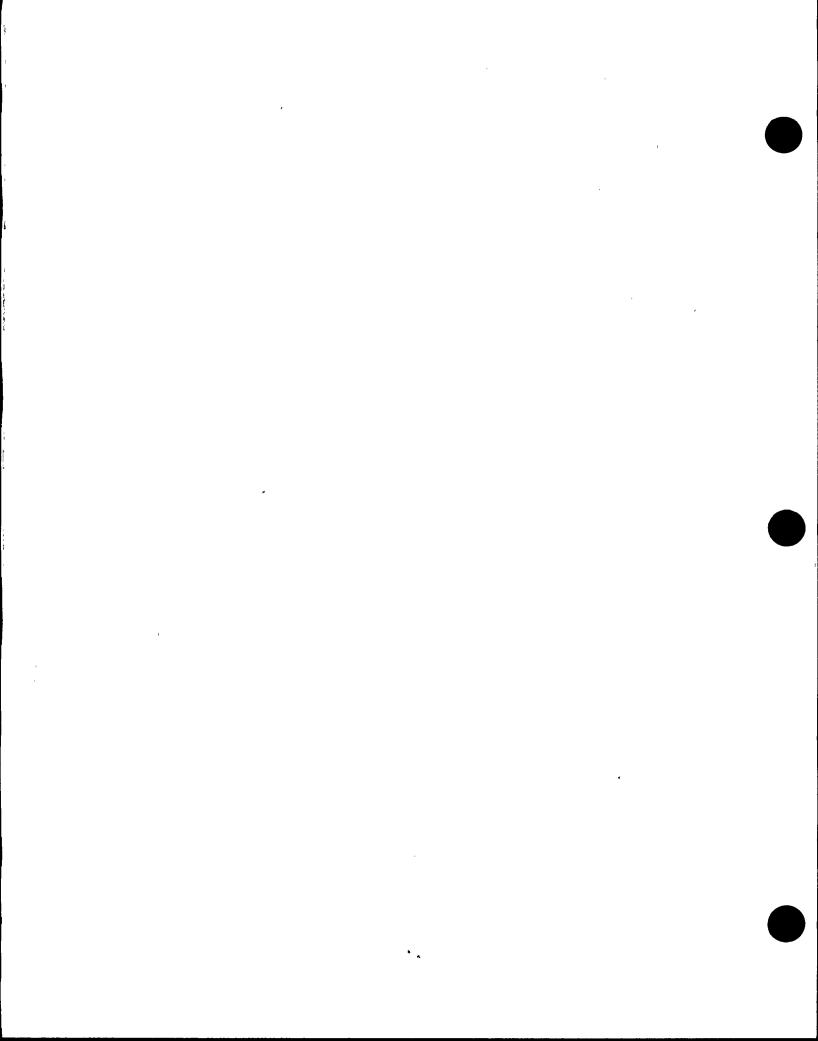
CONDITION: MSA exceeded the 750 # Final Drag criteria.

DISPOSITION: Replaced MSA with tested spare S/N 17852.

CONCLUSION

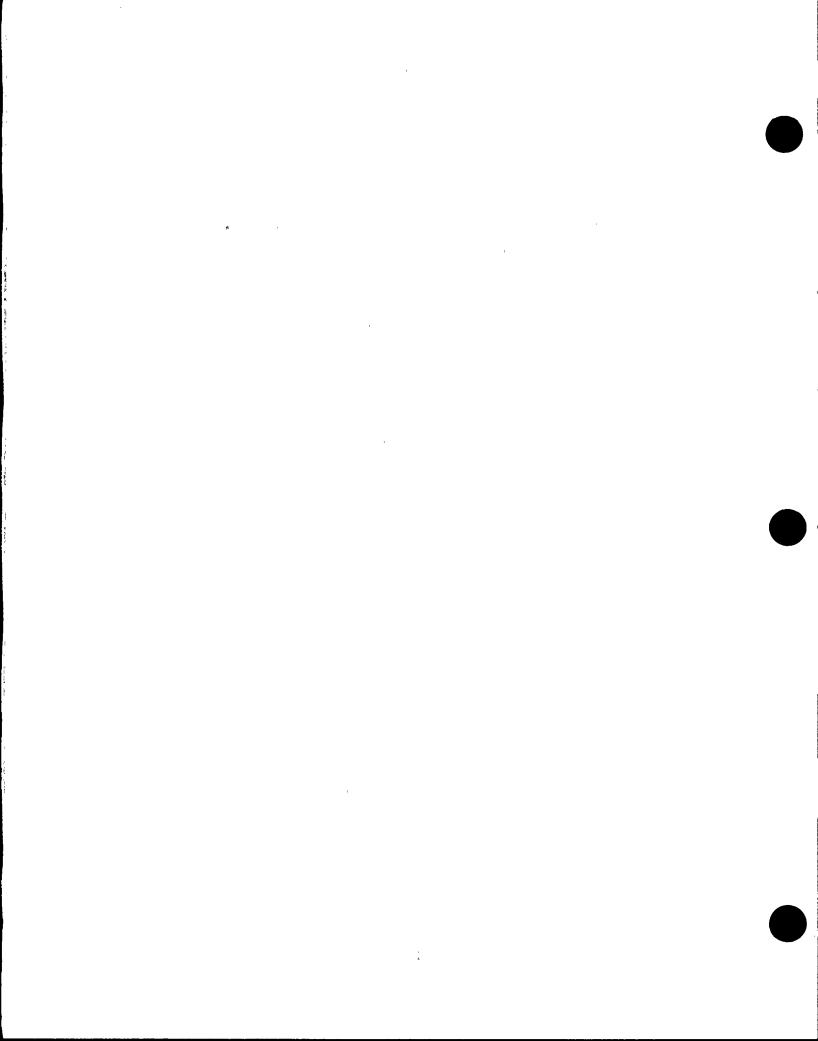
During the 1993 Refueling Outage, snubber surveillances were performed on the snubber population of Turkey Point Unit 4 in accordance with AP 0190.83 (Mechanical Shock Arrestor Surveillance Program). These surveillances included visual examinations and hand stroking of all Unit 4 snubbers in accordance with OP 0209.9 (Visual Examination of Mechanical Shock Arrestors). The functional test representative sample, and additional selections were tested and selected in accordance with AP 0190.85 (Functional Testing of Mechanical Shock Arrestors).

All functional tests and visual examinations were performed in compliance with ASME Section XI and the surveillance requirements of Plant Technical Specifications (3/4.7.6). Visual examinations did



not reveal any items that would render the snubbers non-functional, therefore there were no failures. Of the snubbers that were functional tested, there were three (3) failures of the test sample. Sample expansion of 10% of that type snubber was performed resulting in seventeen (17) additional snubbers being tested. One functional test failure did occur on a snubber tested during the sample expansion. However the failure occured during a non-Tech. Spec. test in which the final drag is measured. Since final drag is not required by Tech. Spec. 4.7.6.e an expanded sample in accordance with Tech. Spec. 4.7.6.d.1 was not performed.

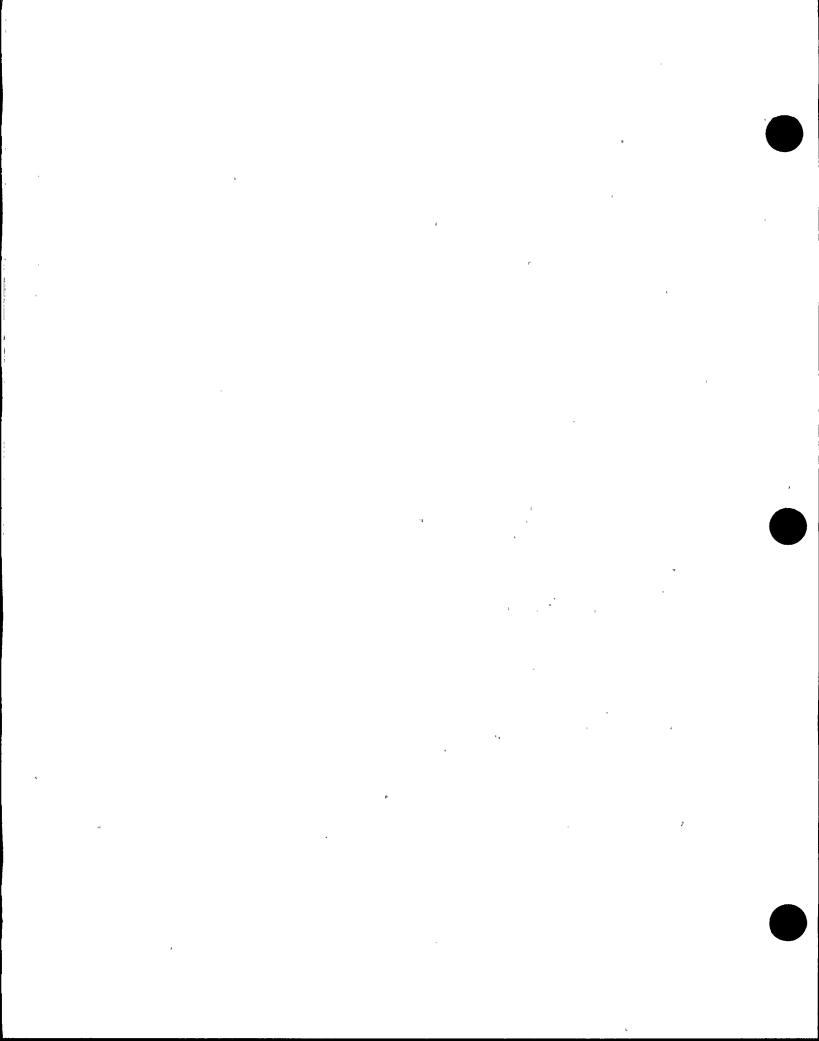
Therefore, FPL has met all ASME Section XI and Plant Technical Specification requirements for visual examination and functional testing of snubbers at Turkey Point Unit 4.



ACRONYM LIST

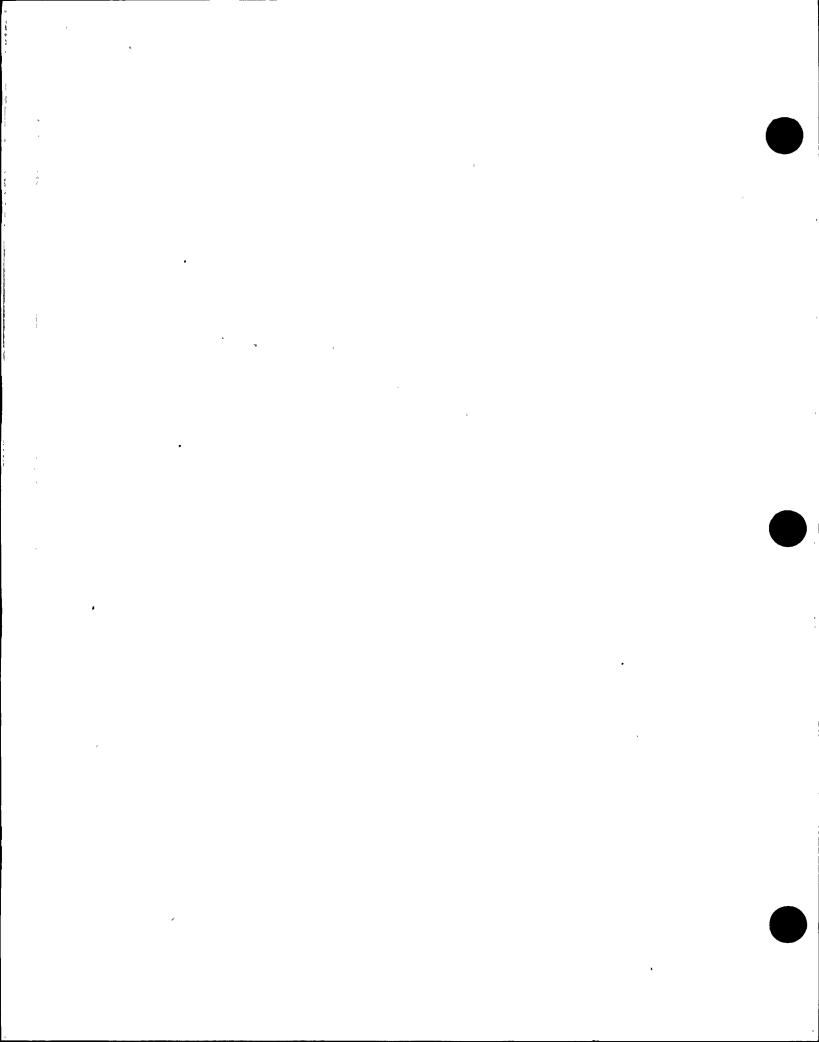
The following is a list of all acronyms used in this Snubber Summary:

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ASME
        American Society of Mechanical Engineers
AΡ
        Administrative Procedure
OP
        Operating Procedure
CMM
        Corrective Maintenance Mechanical
        Siemens Nuclear Power Services
SNPS
PP
        Project Plan
CAL
        Calibration
EXM
        Examination
TST
        Testing
MNT
        Maintenance
Rev.
        Revision
Inc.
        Incorporated
        Pacific Scientific Arrestors
PSA
MSA
        Mechanical Shock Arrestor's
AFW
        Auxiliary Feedwater
FW
        Feedwater
MS
        Main Steam
        Component Cooling Water
CCW
VT
        Visual Test
FT
        Functional Test
SAT
        Satisfactory
DEV
        Deviation
PTN
        Turkey Point Nuclear
RHR
        Residual Heat Removal
SIS
        Safety Injection System
SG
        Steam Generator
RCS
        Reactor Coolant System
INFO
        Information
CVCS
        Chemical and Volume Control System
        Waste Disposal
WD
        Initiated
Int.
TTA
        Transition Tube Assembly
CR
        Condition Report
PWO
        Plant Work Order
S/N
        Serial Number
пГп
        Length
PCM
        Plant Change Modification
FPL
        Florida Power & Light
IAW
        In Accordance With
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TURKEY POINT UNIT 4 1993 REFUELING OUTAGE

Final Report of Hydrostatic Testing Program



Abstract

This report details the hydrostatic testing of selected class 2, and 3 piping and components of the Florida Power and Light Company Turkey Point Unit 4 which were performed during and subsequent to the 1993 refueling outage, between the dates of April 13, 1993 and June 18, 1993.

Piping and components were selected and tested in accordance with Section XI of the American Society of Mechanical Engineers (ASME) Boiler and Pressure Vessel Code "Rules for Inservice Inspection of Nuclear Power Plant Components", 1980 Edition with addenda through Winter 1981, and ASME Code Case N-498, "Alternative Rules for 10 Year Hydrostatic Pressure Testing for Class 1 and 2 Systems" Section XI, Division 1 (Approval date May 13, 1991).

Procedures

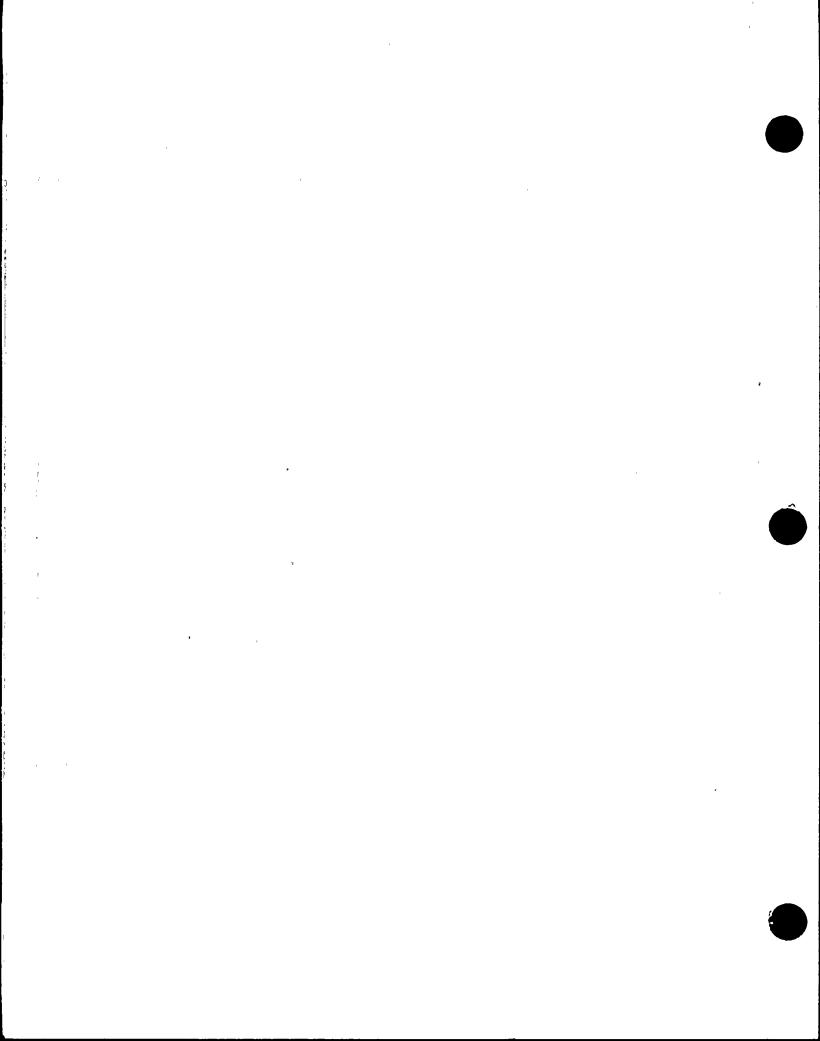
The following FPL procedures and documents have been implemented to provide instructional guidance for the performance of the required ASME XI hydrostatic testing, and subsequent inspections.

- AP 0190.90- ASME Section XI pressure tests for quality groups A, B, and C Systems/Components.
- OP 1506.7 Steam Generator Hydrostatic Pressure Test.
- NDE 4.2 Visual Examination VT-2 Conducted During System Pressure Tests.
- 0-ADM-217 Conduct of Infrequently Performed Tests or Evolutions.
- WCAP-13155 Technical Basis for Determination of Secondary Side Pressure Test Temperatures, Turkey Point Units 3 and 4 Steam Generators.

System Summary: Unit 4

The following safety related systems, or sections thereof were hydrostatically tested in accordance with ASME Section XI.

Name of system	system number
Steam Generators	71
Steam Generator Blowdown	. 71
Main Steam	72
Feedwater	74
Intake Cooling Water	19
Spent Fuel Pool Cooling	33



Acronyms

AP : Administrative Procedure

ADM: Administrative

ASME: American Society of Mechanical Engineers

CCW: Component Cooling Water

HX : Heat Exchanger

ICW: Intake Cooling Water

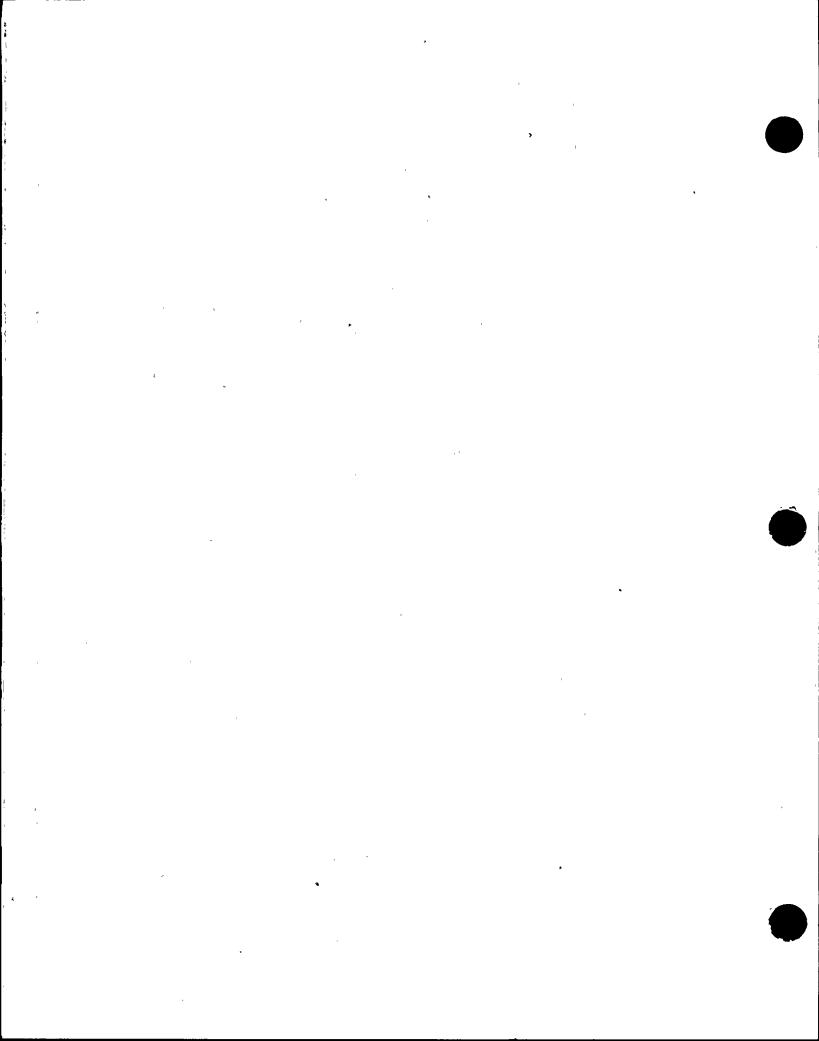
NDE: Non Destructive Examination

SFPC: Spent Fuel Pool Cooling

TPCW: Turbine Plant Cooling Water

OP : Operating Procedure

WCAP: Westinghouse Commercial Atomic Power



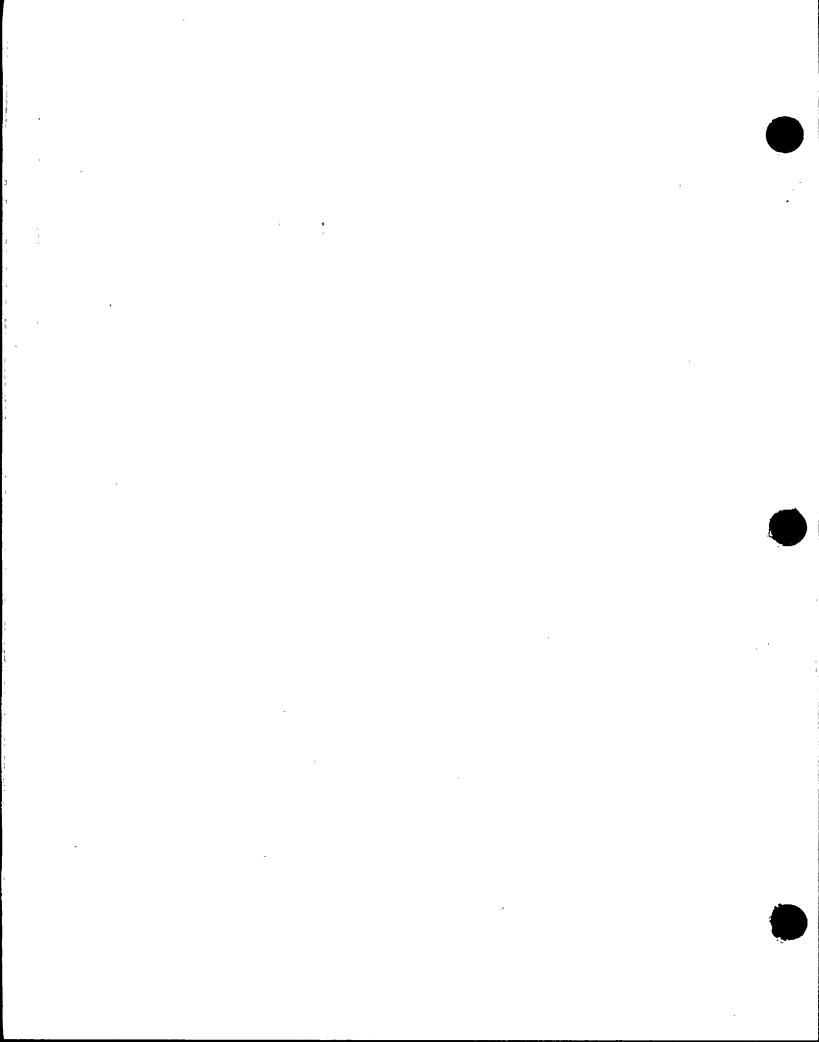
Test Package Development

The specific pressure test boundaries were selected after review of the applicable plant operating diagram/code boundary Drawing. The piping systems were first broken down into sub-systems. The sub systems were selected based on Technical Specification operability requirements, acceptable isolation points and availability of test connections and vent valves. These sub-systems were then assigned a test package number, which could be tested in the entirety, or based on availability, could be broken down further into numerous tests within that specific sub-system.

The pressure test package numbers contain six segments of information.

Sample: 03-CCW-30110-H-01 † † † † † † † 1 2 3 4 5 6

- 1. Unit number (00) common to units 3 and 4. (03) unit 3 specific (04) unit 4 specific
- 2. System abbreviation
- 3. System number [First (2) digits]
- 4. Sub-system number [(2) or (3) digits]
- 5. Type of test (H) hydrostatic (F) system functional (I) system inservice
- 6. Number of tests performed within the specific sub system.



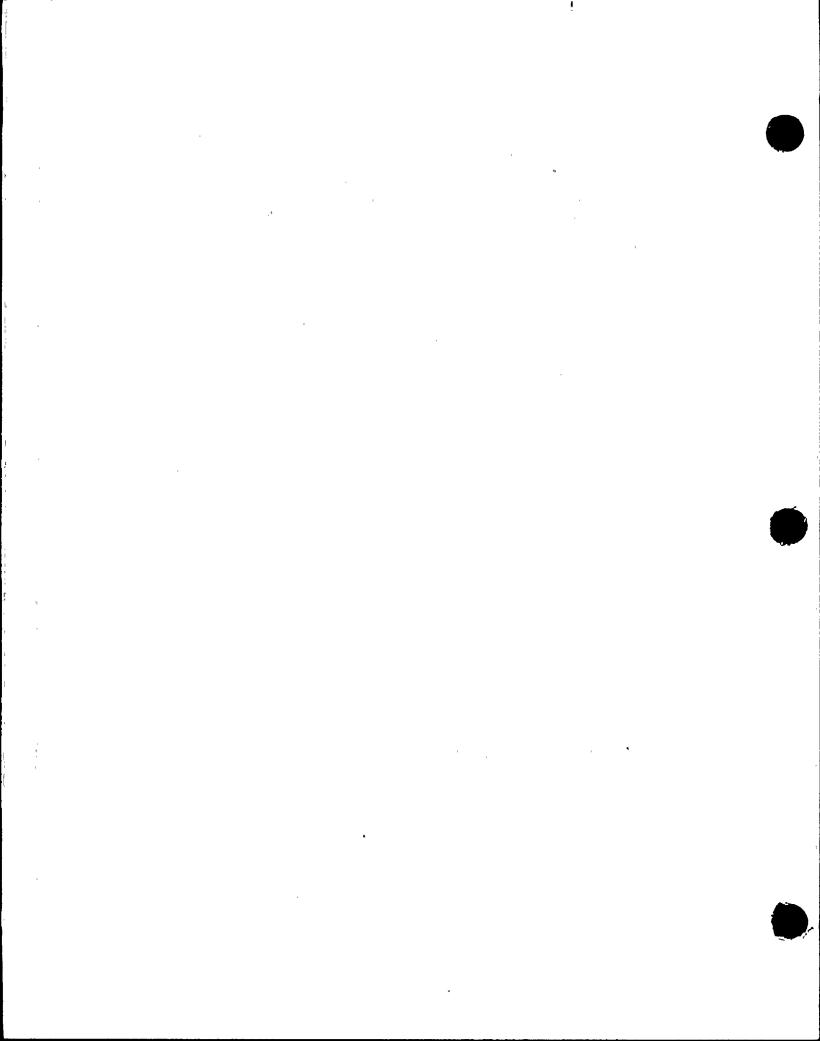
Intake Cooling Water System 19

04-ICW-1992-H-01 - Test date 4/13/93 - This test involved the ICW piping associated with "A" ICW header, "A" ICW pump, "A" CCW HX, and "A" TPCW HX. All leakage noted during this test was found at mechanical joints (i.e., packing, seals, bolted connections etc.) which does not require retesting per ASME Section XI. All leakage was addressed by the following plant work requests:

93006466 93006467 93006468 93006469 93006471 93006480 93006481

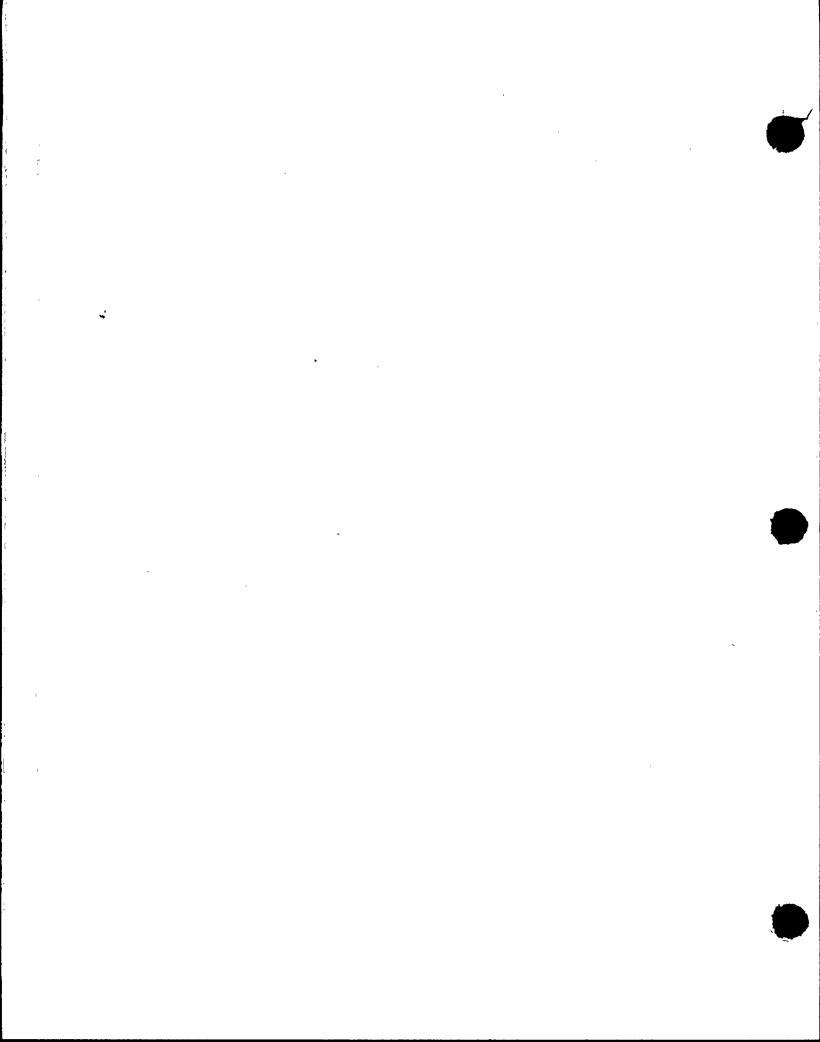
04-ICW-1993-H-01 - Test date 4/13/93 - This test involved the ICW piping associated with "B" ICW header, "B" and "C" ICW pumps, "B" and "C" CCW HX, and "B" TPCW HX. All leakage noted during this test was found at mechanical joints (i.e., packing, seals, bolted connections etc.) which does not require retesting per ASME Section XI and was addressed by the following plant work requests:

93006472 93006474 93006479 93006476 93006480



Spent Fuel Pool Cooling System 33

04-SFPC-3326-H-02 - Test date 6/18/93 - This test involved the SFPC piping associated with the refueling water purification pump, the spent fuel pool demineralizer, and the spent fuel pool filters. No leakage was noted during this test.



OP 1506.7 Steam Generator Hydrostatic Pressure Test (Includes Systems 71, 72, and 74)

OP 1506.7 - Test date 4/17/93 - This test was performed in order to satisfy all repair/replacement hydrostatic testing requirements which had been deferred in accordance with ASME Code Case N-416 "Alternative Rules for Hydrostatic Testing of Repair or Replacement of Class 2 Piping" Section XI Division 1 (approval date 12/05/84). This test included steam generators "A", "B", "C", and associated main steam, feedwater, and blowdown piping extending to the "B" to "D", or the "B" to "SR" class breaks outside containment. All leakage noted during this test was found at mechanical joints (i.e., packing, seals, bolted connections, etc.) which does not require retesting per ASME Section XI. All leakage was addressed by the following plant work requests:

93006736	93006740	93006741	93006742	93006743	93006745
93006751	93006753	93006754	93006755	93006756	93006757
93006758	93006760	93006761	93006765	93006766	93006767
93006771	93006768	93006772	93006808	93006809	93006810
93006811	93006814	93006816	93006817	93006995	93006996
93006999	93007000	93007001	93007002	93006824	93007003
92056277	93007004	93007005	93007006	93006837	93006838
93007007	93006839	93006904	93006884	93006885	93006886
93006887	93006888	93007008	93012092	93012090	93007009
93006905	93006907	93008534	91058708	93006903	93006910
93006911					

