

LICENSEE EVENT REPORT

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

01 | C | 10 | F | S | N | 1 | 2 | 0 | 0 | - | 0 | 0 | 0 | 0 | 0 | - | 0 | 0 | 3 | 4 | 1 | 1 | 2 | 0 | 4 | _____ | 5
7 8 9 14 15 25 26 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100
LICENSEE CODE LICENSE NUMBER LICEN. CAT 58

CON'T
01 | REPORT SOURCE | L | 6 | 0 | 5 | 0 | 0 | 0 | 2 | 6 | 7 | 7 | 1 | 0 | 1 | 0 | 8 | 0 | 3 | 1 | 1 | 1 | 0 | 3 | 0 | 9
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100
REPORT SOURCE DOCKET NUMBER EVENT DATE REPORT DATE

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)
02 | Noninterruptible bus 3, the Plant Protective System battery charger/inverter tripped
03 | while the reactor was at power. Operation with the inverter out of service consti-
04 | tutes operation in a degraded mode allowed by LCO 4.6.1 and reportable per Fort St.
05 | Vrain Technical Specification AC 7.5.2(b)2. There were no effects upon public health
06 | or safety. Redundant systems were available and operable.
07 | _____
08 | _____
09 | _____

09 | SYSTEM CODE | CAUSE CODE | CAUSE SUBCODE | COMPONENT CODE | COMP. SUBCODE | VALVE SUBCODE
E | D | 11 | B | 12 | A | 13 | G | E | N | E | R | A | 14 | F | 15 | Z | 16
9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100
LER PD REPORT NUMBER | EVENT YEAR | SEQUENTIAL REPORT NO. | OCCURRENCE CODE | REPORT TYPE | REVISION NO.
17 | 8 | 0 | 6 | 0 | 3 | L | 0
21 22 23 24 25 26 27 28 29 30 31 32
ACTION TAKEN | FUTURE ACTION | EFFECT ON PLANT | SHUTDOWN METHOD | HOURS | ATTACHMENT SUBMITTED | NPRO-4 FORM SUB. | PRIME COMP. SUPPLIER | COMPONENT MANUFACTURER
X | F | 19 | Z | 20 | Z | 21 | 0 | 0 | 0 | 0 | Y | 22 | N | 24 | N | 25 | D | L | O | S | 26
33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)
10 | Battery was on overcharge at time of main turbine generator trip; noise spike ex-
11 | ceeded the inverter high voltage trip level. Trip circuit is too sensitive to noise.
12 | Bus 3 was energized from back source until inverter was returned to service.
13 | Charger/inverter is manufactured by DELTEC. Modified trip circuit is on hand and will
14 | be installed as soon as change is approved.
15 | _____
16 | _____
17 | _____

15 | FACILITY STATUS | % PCWER | OTHER STATUS | METHOD OF DISCOVERY | DISCOVERY DESCRIPTION
E | 28 | 0 | 4 | 0 | 29 | N/A | A | 31 | Operator Observation
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

16 | ACTIVITY CONTENT | AMOUNT OF ACTIVITY | LOCATION OF RELEASE
Z | 33 | Z | 34 | N/A | N/A
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

17 | PERSONNEL EXPOSURES | DESCRIPTION
0 | 0 | 0 | 37 | Z | 38 | N/A
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

18 | PERSONNEL INJURIES | DESCRIPTION
0 | 0 | 0 | 40 | N/A
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

19 | LOSS OF OR DAMAGE TO FACILITY | DESCRIPTION
Z | 42 | N/A
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

20 | PUBLICITY ISSUED | DESCRIPTION
N | 44 | N/A
7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

NAME OF PREPARER J. W. [Signature] PHONE: (303) 785-2223

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