

CONTROL BLOCK: [] [] [] [] [] [] [] (1) (PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

CONT

| | |
|---|---|
| 3 | 1 |
| 7 | 8 |

REPORT SOURCE

| | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------|----|---|---|---|---|---|---|---|---|----|------------|---|---|---|---|----|-------------|---|---|---|---|---|---|----|
| L | 6 | 0 | 5 | 0 | 0 | 0 | 3 | 3 | 4 | 7 | 0 | 5 | 0 | 3 | 8 | 1 | 3 | 0 | 6 | 0 | 2 | 8 | 1 | 9 |
| 50 | 51 | | | | | | | | | 68 | 69 | | | | | 74 | 75 | | | | | | | 80 |
| DOCKET NUMBER | | | | | | | | | | | EVENT DATE | | | | | | REPORT DATE | | | | | | | |

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

| | | | | | | | | | | | | | |
|----------------------|---|-----------------------|---|---------------------|---|------------------------|---|--------------|---|---------|---|---------|---|
| SYSTEM CODE | | CAUSE CODE | | CAUSE SUBCODE | | COMPONENT CODE | | | | SUBCODE | | SUBCODE | |
| C | F | E | | A | | V | A | L | V | O | P | A | Z |
| 11 | | 12 | | 13 | | 14 | | | | 15 | | 16 | |
| 9 | | 10 | | 11 | | 12 | | | | 13 | | 14 | |
| EVENT YEAR | | SEQUENTIAL REPORT NO. | | OCCURRENCE CODE | | REPORT TYPE | | REVISION NO. | | | | | |
| 8 | 1 | 0 | 4 | 8 | 0 | 3 | L | 0 | | | | | |
| 21 | | 22 | | 23 | | 24 | | 25 | | | | | |
| ACTION TAKEN | | FUTURE ACTION | | EFFECT ON PLANT | | SHUTDOWN METHOD | | HOURS | | | | | |
| E | Z | Z | Z | Z | | 0 | 0 | 0 | 0 | | | | |
| 18 | | 19 | | 20 | | 21 | | 22 | | | | | |
| 9 | | 10 | | 11 | | 12 | | 13 | | | | | |
| ATTACHMENT SUBMITTED | | NPRD-4 FORM SUB. | | PRIME COMP SUPPLIER | | COMPONENT MANUFACTURER | | | | | | | |
| Y | N | N | L | 2 | 0 | 0 | | | | | | | |
| 23 | | 24 | | 25 | | 26 | | | | | | | |
| 43 | | 44 | | 45 | | 46 | | | | | | | |

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

7 3 3 FACILITY STATUS (28) 10 12 13 OTHER STATUS (30) 44 METHOD OF DISCOVERY (31) 45 46 DISCOVERY DESCRIPTION (32) 80
1 5 D 0 0 0 N/A A During normal shutdown operation
7 3 3 ACTIVITY CONTENT (35) 44 45 46 LOCATION OF RELEASE (36) 80
1 5 Z 2 N/A N/A

| PERSONNEL INJURIES | | | | | |
|--------------------|--|-------------|--|------|-----|
| NUMBER | | DESCRIPTION | | | |
| | | | | (40) | N/A |

3 9 10
PUBLICITY (45)
ISSUED DESCRIPTION (45) N/A
10 68 69 30
NRC USE ONLY
100-662-2525

NRC USE ONLY

NAME OF PREPARER W. S. Lacey

PHONE: 412-643-8525

8106160 457 NAME (

Attachment To LER 81-48/03L
Beaver Valley Power Station
Duquesne Light Company
Docket No. 50-334

No further information is available or needed to satisfy the reporting requirement.