

LICENSEE EVENT REPORT

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

0 1 | M | I | D | C | C | 1 | 2 | 0 | 0 | - | 0 | 0 | 0 | 0 | 0 | 0 | - | 0 | 0 | 0 | 3 | 4 | 1 | 1 | 1 | 1 | 4 | 5
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

0 1 | L | 5 | 0 | 5 | 0 | 0 | 0 | 3 | 1 | 5 | 7 | 0 | 4 | 2 | 7 | 8 | 3 | 3 | 0 | 5 | 2 | 7 | 8 | 3 | 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

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

0 2 | WHILE ISOLATING THE UNIT 2, 609 TURB. BLDG. SPRINKLER SYSTEM, THE YOKE ON THE
0 3 | ISOLATION VALVE, FP322, FAILED. IN ORDER TO REPAIR FP322, THE AUX. BLDG.
0 4 | SPRINKLER HDR. REQUIRED ISOLATION. THIS CONDITION WAS NONCONSERVATIVE WITH
0 5 | RESPECT TO T.S. 3.7.9.2. THE ACTION REQUIREMENTS WERE MET. PUBLIC HEALTH AND
0 6 | SAFETY WERE NOT AFFECTED. THIS WAS THE FIRST OCCURRENCE OF THIS TYPE.
0 7 |
0 8 |

0 3 | SYSTEM CODE: A B (11) CAUSE CODE: E (12) CAUSE SUBCODE: B (13) COMPONENT CODE: V A L V E X (14) COMP SUBCODE: E (15) VALVE SUBCODE: B (16)

17 | LER/RO REPORT NUMBER: 8 3 (21) EVENT YEAR: 8 3 (22) SEQUENTIAL REPORT NO.: 0 3 9 (24) OCCURRENCE CODE: 0 3 (28) REPORT TYPE: L (30) REVISION NO.: 0 (32)
ACTION TAKEN: A (33) FUTURE ACTION: Z (34) EFFECT ON PLANT: Z (35) SHUTDOWN METHOD: Z (36) HOURS: 0 0 0 0 (37) ATTACHMENT SUBMITTED: N (41) NPRO-4 FORM SUB.: N (42) PRIME COMP. SUPPLIER: A (43) COMPONENT MANUFACTURER: T 3 0 5 (47)

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

1 3 | THE YOKE ON FP322 FAILED WHEN THE VALVE WAS CLOSED. CONTINUOUS FIRE WATCHES, WITH
1 4 | BACK-UP FIRE SUPPRESSION, WERE POSTED PRIOR TO ISOLATING THE AUX. BLDG. SPRINKLER
1 5 | HDR. THE VALVE YOKE WAS REPLACED AND THE SPRINKLER SYSTEM WAS RETURNED TO SERVICE.
1 6 |
1 7 |
1 8 |

1 5 | FACILITY STATUS: E (28) % POWER: 1 0 0 (29) OTHER STATUS: NA (30) METHOD OF DISCOVERY: A (31) DISCOVERY DESCRIPTION: OPERATOR OBSERVATION (32)

1 6 | ACTIVITY CONTENT: Z (33) RELEASED: Z (34) AMOUNT OF ACTIVITY: NA (35) LOCATION OF RELEASE: NA (36)

1 7 | PERSONNEL EXPOSURES: NUMBER: 0 0 0 (37) TYPE: Z (38) DESCRIPTION: NA (39)

1 8 | PERSONNEL INJURIES: NUMBER: 0 0 0 (40) DESCRIPTION: NA (41)

1 9 | LOSS OF OR DAMAGE TO FACILITY: TYPE: Z (42) DESCRIPTION: NA (43)

2 0 | PUBLICITY: ISSUED DESCRIPTION: N (44) NAME OF PREPARER: PAUL CARTEAUX
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PHONE: 616-465-5901