

Carolina Power & Light Company

Brunswick Nuclear Plant P. O. Box 10429 Southport, N.C. 28461-0429

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U.S. Nuclear Regulatory Commission ATTN: Document Control Desk Washington, D. C. 20555

> BRUNSWICK STEAM ELECTRIC PLANT UNITS 1 AND 2 DOCKET NOS. 50-325 AND 50-324 LICENSE NOS. DPR-71 AND DPR-62 REPLY TO A NOTICE OF VIOLATION

Gentlemen:

The Brunswick Steam Electric Plant (BSEP) has received NRC Inspection Report 50-325/93-04 and 50-324/93-04 and finds that it does not contain information of a proprietary nature. This report included a Notice Of Violation.

Enclosed is Carolina Power & Light Company's response to that Notice Of Violation.

Very truly yours,

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R. E. Morgen, Plant Manager - Unit 1 Brunswick Nuclear Plant

TMJ/

Enclosure

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cc: Mr. S. D. Ebneter Mr. P. D. Milano BNP NRC Resident Office

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Violation A

Brunswick Steam Electric Plant Technical Specification Section 6.8.1 states that written procedures shall be established implemented and maintained covering the activities referenced below. Item (e) is the Emergency Plan implementing procedures (PEP'S).

Contrary to the above, 10 controlled volumes of the PEP's in the Emergency Operations Facility (EOF) were not maintained in that they contained the incorrect revision of PEP 02.6.21, "Emergency Communicator". In addition, four of the ten controlled volumes of the PEP in the EOF also contained other procedures with the incorrect revision.

This is a severity level IV violation (Supplement VIII)

Response

I. Reason for violation

CP&L acknowledges that Emergency Plan implementing procedures in the EOF were not maintained as required by Section 6.8.1 of Technical Specifications As indicated above, ten controlled volumes of the PEP's in the Emergency Operations Facility (EOF) were not maintained in that they contained the incorrect revision of PEP 02.6.21, "Emergency Communicator". In addition, four of the ten controlled volumes of the PEP in the EOF also contained other procedures with the incorrect revision. Specific causes for incorrect procedure revisions in the EOF are as follows.

- a. The process that was in place for control of EOF procedures was insufficient. One common controlled copy number was assigned for ten sets of Emergency procedures located in the EOF. This provided one document receipt transmittal form for all ten books. Without an individual transmittal form, missing books, shortage of copies, etc. were not readily apparent and the transmittal form could be signed off but not actually complete. This prevented the implementation of the process for identification of late documents.
- Physical control of the EOF procedures was not sufficient to identify missing volumes following drills or actual events.

II. Corrective steps which have been taken

On February 9,1993, while working in the EOF, NRC personnel notified Emergency Preparedness of numerous errors in the procedures located in the EOF. Emergency Preparedness audited procedures in the Control Room and the Technical Support Center and found no discrepancies. On February 10, 1993, the EOF procedures were audited by Document Control Personnel and the PEP's were found to be out of compliance. The errors were corrected the same day by Document Control. The following corrective steps have been completed.

- a. Procedures in the EOF have been uniquely identified with a controlled copy identification number. Therefore, each procedure set receives a separate document receipt transmittal form. This process will identify when a particular book is not updated. Following this, a late notification transmittal is received by the responsible individual(s) for that procedure at ten, twenty, and thirty days. The Document Control Supervisor receives a monthly report on late receipt transmittals.
- b. Physical control of the EOF procedures has been enhanced by assigning the individual copy number discussed above. In addition, the TSC/EOF inventory checklist has been revised to include verification of the correct number of procedures. The inventory is completed by Emergency Preparedness on a quarterly basis and following every drill or actual activation of that facility.
- III. Corrective steps that will be taken.

No further actions are required.

IV. Date when full compliance will be achieved.

CP&L is in full compliance.

Violation B

10CFR 50.54 (q) states that a licensee authorized to possess and operate a nuclear power reactor shall follow and maintain in effect an emergency plan which meets the standards of 10CFR 50.47(b) and the requirements of Appendix E to 10CFR Part 50. 10CFR 50.47 (b)(8) states that the emergency facilities and equipment to support the emergency response are provided and maintained.

Plant Emergency Procedure PEP-04.2, "Emergency Facilities and equipment" states that adequate emergency facilities and equipment shall be maintained and kept operational. Section 5.2 of the Brunswick Emergency Plan identifies the EOF/TSC Emergency diesel generator as EOF equipment.

Contrary to the above, the EOF/TSC Emergency diesel generator did not have a preventative maintenance program, nor any scheduled maintenance program.

This is a severity level IV violation (supplementary)

Response

I. Reason for the violation

CP&L acknowledges the violation in that a preventative maintenance or scheduled maintenance program for the EOF/TSC Emergency diesel did not exist. As identified above the diesel generator provides a back-up power supply for the EOF/TSC building.

The lack of a formal periodic maintenance/testing program had been identified by Emergency Preparedness personnel and documented in Adverse Condition report # 92-827 on October 16, 1992. Work had not been initiated at the time of this inspection and was identified as being overdue.

II. Corrective Steps which have been taken

An evaluation of the EOF/TSC Emergency diesel has been completed to determine and ensure continued operability. The following items have been completed.

- a. Contracted Covington Diesel to provide parts, labor, and testing necessary to ensure the TSC/EOF Emergency diesel generator is current with respect to the manufacturer's recommended preventative maintenance standards. This inspection identified the need for a higher capacity fuel oil transfer pump that was installed on March 18, 1993. This action is complete.
- b. Performed a "Loss of Power" test to ensure the diesel generator

design. This action is complete.

Implemented a monthly PM route (2-M-M1-030) to run the diesel c. to inspect hoses for signs of leakage, belts for fraying and cracking, coolant and lube oil for adequate levels, and a general inspection of the diesel generator unit to ensure that no visible problems exist. This action is complete.

d. Conducted field training for plant maintenance personnel to provide the opportunity to become more familiar with the system, and to insure that future preventative maintenance activities are performed consistent with vendor standards. This action is complete.

A preventative maintenance program is in place to insure continued operability. This consists of the monthly test described above, and a semiannual and eighteen month test that will include, in addition to the standard vendor recommended activities, an actuation of the transfer switch to verify the switch and diesel generator will assume the "house" loads on demand.

The Corrective steps that will be taken.

The semi-annual and eighteen month procedures to support the PM program, though not completed, have been identified and are scheduled to be completed prior to their due date of 8/25/93 and 8/25/94, respectively.

IV. Date when full compliance will be achieved.

> CP&L is in full compliance. Periodic maintenance has been performed and is current on the TSC/EOF Emergency diesel.

III.