

LICENSEE EVENT REPORT

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

01 | P | L | S | L | S | 1 | 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 36 37 38 39 40

CCN'T | 0 | 1 | REPORT SOURCE | L | 5 | 0 | 5 | 0 | 0 | 0 | 3 | 3 | 5 | 1 | 2 | 0 | 9 | 8 | 2 | 0 | 1 | 1 | 0 | 8 | 3 |
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

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES
02 | During a surveillance test, MV-09-11 (1C Auxiliary Feedwater Pump Flow
03 | Control Valve) failed to cycle as required by T.S. 4.7.1.2.a.4. The
04 | valve operated until the torque switch actuator roller separated from
05 | its operator arm. T.S. 3.7.1.2 ACTION was entered. The torque switch was
06 | replaced and the valve was returned to service within the required T.S.
07 | 3.7.1.2 time limit. The health and safety of the public was not affected
08 | by this event.

09 | SYSTEM CODE | C | H | CAUSE CODE | B | CAUSE SUBCODE | B | COMPONENT CODE | V | A | L | V | O | P | COMP SUBCODE | X | VALVE SUBCODE | Z |
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

17 | LEAD REPORT NUMBER | 8 | 2 | SEQUENTIAL REPORT NO. | 0 | 6 | 6 | OCCURRENCE CODE | 0 | 3 | REPORT TYPE | L | REVISION NO. | 0 |
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

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS
10 | MV-09-11 failed to operate properly due to a torque switch roller shaft
11 | bearing being approximately 1/4 inch short. This problem is considered
12 | to be an isolated case as the one other valve of this type was checked
13 | and no problems were found. The torque switch was replaced and the
14 | valve was returned to service.

15 | FACILITY STATUS | E | % POWER | 0 | 9 | 9 | OTHER STATUS | NA | METHOD OF DISCOVERY | B | DISCOVERY DESCRIPTION | ROUTINE SURVEILLANCE
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

16 | ACTIVITY CONTENT | Z | Z | AMOUNT OF ACTIVITY | NA | LOCATION OF RELEASE | NA
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

17 | PERSONNEL EXPOSURES NUMBER | 0 | 0 | 0 | TYPE | Z | DESCRIPTION | NA
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

18 | PERSONNEL INJURIES NUMBER | 0 | 0 | 0 | DESCRIPTION | NA
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

19 | LOSS OF OR DAMAGE TO FACILITY TYPE | Z | DESCRIPTION | NA
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

20 | PUBLICITY ISSUED DESCRIPTION | N | NRC USE ONLY
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

NAME OF PREPARER | T. S. Rotella | PHONE | 305-465-3550