LICENSEE EVENT REPORT

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	CONTROL BLOCK: (PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)
7 8	N J S G S 1 2 0 0 - 0 0 0 0 - 0 0 3 4 1 1 1 1 1 4 5 5 EICENSE CODE 14 15 LICENSE NUMBER 25 26 LICENSE TYPE 30 57 CAT 58
O 1 7 8	REPORT L 6 0 5 0 0 0 2 7 2 7 1 0 0 6 8 2 8 1 0 2 7 8 2 9 SOURCE 60 61 DOCKET NUMBER 68 69 EVENT DATE 74 75 REPORT DATE 80
0 2	On October 6, 1982, following satisfactory completion of Maintenance Procedure M3M,
012	
0 3	it was discovered that the procedure had not been performed the preceding week as
0 4	required by Technical Specification Surveillance Requirements 4.8.2.3.2.a, and
0 5	4.8.2.5.2.a. The surveillance is required to demonstrate the operability of Salem
0 6	Generating Station Units 1 and 2 28VDC and 125VDC batteries and chargers. The occur-
0 7	rence constituted an inadequacy in the implementation of administrative controls which
0 8	threatened to cause a reduction of the redundancy provided in reactor protective and sendineered safety feature systems. SYSTEM CAUSE CAUSE CAUSE COMPONENT CODE SUBCODE SUBC
0 9	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	TO LER RO EVENT YEAR SEQUENTIAL REPORT NO. 17 REPORT NUMBER 21 22 24 25 26 23 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20
	ACTION FUTURE EFFECT SHUTDOWN HETHOD HOURS (22) ATTACHMENT NPRD-4 PRIME COMP. COMPONENT MANUFACTURER SUBMITTED FORM-SUB. SUPPLIER MANUFACTURER COMPONENT MANUFACTURER (25) C 1 7 3 (26)
	33 34 35 36 37 40 41 42 43 44 47 CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)
1 0	Assignment of the surveillance to a station electrician was overlooked by the
11	electrical supervisor. Scheduling of the procedure had not been incorporated into
1 2	the Inspection Order system. A monthly Inspection Order card was written to perform
13	the surveillance weekly, and a supervisor was designated to track completion.
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7 8	FACILITY SPOWER OTHER STATUS 30 METHOD OF DISCOVERY DESCRIPTION 32 E 28 1 0 0 29 N/A A 31 Electrician Observation
	9 10 ACTIVITY CONTENT ELEASED OF RELEASE AMOUNT OF ACTIVITY 35 AMOUNT OF ACTIVITY 35 LOCATION OF RELEASE 36
1 6 7 8	Z (33) Z (34) N/A
1 7	NUMBER TYPE DESCRIPTION (39) N/A
	PERSONNEL INJURIES NUMBER DESCRIPTION 41
7 8	9 11 12 N/A 80
1 9	LOSS OF OR DAMAGE TO FACILITY 43 TYPE DESCRIPTION N/A
7 8	PUBLICITY ISSUED DESCRIPTION 45 B211120451 B21027 PDR ADDCK 05000272
2 0	SSOED ADDCK 05000272 PDR ADDCK 05000272 PDR S PDR S S S S S S S S S S S S S S S S S S S
	NAME OF PREPARER R. Frahm PHONE: 609/935-6000 Ext 3078 0