PUBLIC SERVICE ELECTRIC & GAS COMPANY DOCUMENT DISTRIBUTION NOTICE

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| PROC | ATT. 01 | 000 | | 012 | A | HECG | H | 001 | |
| PROC | ATT. 02 | 000 | | 007 | A | HECG | H | 001 | |
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9406030099 940521 PDR ADDCK 05000354 PDR

HOPE CREEK GENERATING STATION EVENT CLASSIFICATION GUIDE May 21, 1994

CHANGE PAGES FOR REVISION #33

The Table of Contents forms a general guide to the current revision of the Hope Creek ECG. The changes that are made in this TOC Revision #33 are shown below. Please check that your revision packet is complete and remove the outdated material listed below:

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SIGNATURE PAGE

Prepared By: CRAIG W. BANNER (If Editorial Revisions Only, Last Approved Revision) Reviewed By: tation Oualified Reviewer Significant Safety Issue () Yes (X) No Reviewed By: <u>5-20-94</u> Date Department Manager 5/20/94 Reviewed By: Anna A mayn Emergency Preparedness Manager General Manager - Quality Assurance/Safety Review Date (If Applicable) SORC Review and Station Approvals N/A Mtg. No. Hope Creek Chairman Mtg. No. Salem Chairman Date Date General Manager - Hope Freek <u>5-20-94</u> Date $\frac{\nu/A}{\text{General Manager - Salem}}$ Date

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Dage

ATTACHMENT 1

UNUSUAL EVENT

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1.4

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EMERGENCY COORDINATOR LOG SHEET

| | | INSTRUCTIONS: |
|----|------------------------|---|
| 1. | This is a | permanent record. |
| 2. | Each step as approp | shall be initialed or marked N/A riate. |
| 3. | Emergency | Coordinator (EC) responsibility is |
| | | fulfilled by:Name |
| | | Title:(SNSS/EDO/ERM) |

Initials

λ.

EC

I.

Declare an UNUSUAL EVENT. Notify Control Room Staff and call the communicators to the Control Room.

| ECG Section | Ward from tradition was meaning begin if reserves. | Initiating Condition | - |
|---|---|-------------------------|------|
| Declared at | time | hrs on | date |
| promise and competences and competences | of the local party of the local memory of the Control of States and the local sectors and the local sectors and | | |

If directed to implement this attachment due to a "Reduction" of the event, proceed to Section "C" and do not implement Section "B".

NOTE

B. NOTIFICATIONS

EC

 Check appropriate boxes and provide brief description of the event on the INITIAL CONTACT MESSAGE FORM (ICMF) (last page of this attachment). Complete, approve, and provide ICMF to the Designated Communicator (CM1).

EC

HCGS

 Direct the Designated Communicator (CM1) to implement Attachment 6 and make the notifications on the Communications Log within the time limits specified.

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| | 24 | 1963 |
|-------|----------|--------------|
| Sec 4 | a Second | |
| | τı | <u>[12</u>] |

EC

EC

EC

EC

EC

EC

3. Direct the Secondary Communicator (CM2) to implement Attachment 8.

| | | NORT |
|----|------|--|
| | | NOTE |
| | | Complete all applicable steps of subsections C thru G below. Then proceed to H. |
| c. | TRAJ | NSPORT OF INJURED TO HOSPITAL YES NO |
| | 1. | Coordinate onsite medical response per procedure, HC.FP-EO.ZZ-0003(Z), "Control Room Medical Emergency Response." |
| D. | SER: | IOUS INJURY/FATALITY OF NUCLEAR DEPARTMENT EMPLOYEE |
| | 1. | Notify the Admin Services Manager or representative wit information requested on page 15 of this attachment. |
| | | notified at hrs on |
| | | notified at hrs on name date |
| | 2. | Notify the employee's department manager of the event a direct the department manager to coordinate notification of the employee's family. |
| | | notified at hrs on |
| | | notified athrs on name time date |
| E. | SEC | URITY RELATED EVENT |
| | 1. | Notify the PSE&G Security Supervisor (X2222) to implement the Security Contingency Plan. |
| | 2. | If a bomb search is required; |
| | | a. Direct the OSC to be activated per EPIP 202H. |
| | | b. Direct the OSC Coordinator to implement Bomb Search |
| | | |
| | | Operations IAW EPIP 202H. |
| | | |

ECG ATT 1 Pg. 4 of 16

LOSS, THEFT, DIVERSION OF SPECIAL NUCLEAR MATERIAL (SNM) F. YES NO Notify NRC Region I Office (215-337-5000) of the 1. event immediately (within 1 hour). Use NRC Data Sheet to EC record additional information provided to the NRC. notified at hrs on time date name SAFETY LIMIT VIOLATIONS G. YES NO Notify the GM - Quality Assurance and Nuclear Safety 1. within 24 hours. EC HOME # PAGFR # WORK # (609)468-2575 478-5271 Richard Swanson 1400 Notified at hrs on time date 2. Notify the VP and Chief Nuclear Officer within EC 24 hours. PAGER # HOME # WORK # Steve Miltenberger 1100 (215)793-3726 478-5097 Notified at____ hrs on_ time date EMERGENCY COORDINATOR DUTIES H.

> Notify the Salem Senior Nuclear Shift Supervisor (NETS - x5127; 9-339-5200) and provide a briefing on the Unusual Event.

 If necessary, account for personnel in accordance with Accountability Instruction provided in Section II, (on pages 6, 7, & 8) of this attachment.

AND

If Accountability is implemented, direct the OSC coordinator to activate the OSC in accordance with EPIP 202H.

HCGS

EC

EC

EC



Initials

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Initials

NOTE

SSCL shall be transmitted every 30 minutes or immediately if a significant change in station status occurs.

EC

 Upon receipt of the Station Status Checklist (SSCL) from the (CM2), review and approve for transmittal.

ONE HOUR.

Name

4. Ensure the completion and approval of the NRC Data Sheet form.

- a. Obtain the form (both pages) from the CM2 (Att. 8)
- b. Provide the approved form to the CM2 for transmittal to the NRC as soon as possible, but not to exceed

As manpower permits, the Emergency Coordinator may assign an additional communicator (preferably an RO or SRO) to provide continuous updates to the NRC. The assignment of an additional communicator should not be made if personnel being considered are required to mitigate the event or to complete

NOTE:

- c. Notify the NRC of any significant changes in Plant Status, Emergency Status, or any actions taken in accordance with 10CFR50.54(x).
- d. Direct CM2 to log or document (via NRC Data sheet) any additional information provided to the NRC. This includes, but is not limited to, changes in Plant Status, Emergency Status, or any actions taken in accordance with 10CFR50.54(x).
- 5. If relieved as EC prior to termination of the Unusual Event, document the name of your relief below.

assumed EC duties at hrs. time

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EC

EC

- EC
- If the event classification escalates above an Unusual Event, exit this attachment and implement a new attachment as directed by the classifying section.

Escalated to (circle one) Alert - SAE - GE

EC

10.5 Mer.

EC

- 7. When necessary to terminate the event go to Section III, Termination, of this attachment.
- 8. Ensure that appropriate reports are made IAW Section IV of this attachment.



ECG ATT 1 Pg. 7 of 16

II. ACCOUNTABILITY INSTRUCTION FOR THE PROTECTED AREA

Initials/ Time

EC

EC

EC

1. Implement Assembly and Accountability as follows:

a. Notify Security to implement EPIP 901, "Opening the TSC," and EPIP 902, "Accountability/Evacuation," Sections 3.1 and 3.2 only, for Assembly and Accountability.

- b. Notify the Salem SNSS to implement Appendix 6 of EPIP 101S, "Accountability Instructions For An Unusual Event At Hope Creek."
 - c. Direct the Radiation Alert Alarm be sounded and the following page announcement made.

"Attention, Attention

"Hope Creek is in an Unusual Event condition"

"All PSE&G personnel assemble at your accountability stations. All contractors leave Artificial Island immediately'. (Repeat)

- - EC

d. Allow five (5) minutes for key personnel to reach accountability stations, then continue with this procedure.

NOTE

Timely page announcements are crucial to ensure accountability results are available within 30 minutes.

EC (T+0 Min) е.

Sound the Radiation Alert Alarm and announce on the station page:

"Attention, Attention, all accountability stations implement accountability." (Repeat Twice)



ECG ATT 1 Pg. 8 of 16

Initials/ Time

II. ACCOUNTABILITY INSTRUCTION FOR THE PROTECTED AREA (CONT)

NOTE

Personnel dispatched by the SNSS or OSC Coordinator who are taking vital actions to mitigate emergency events may be accounted for verbally and an accountability card exemption form of EPIP 202, completed and deposited to security.

- Ensure accountability cards for the Control Room f. Staff and communicators are collected and provided to the OSC Coordinator.
 - Announce the following on the station page, 10 g. minutes after the first accountability announcement.

"Attention, Attentior. All accountability stations complete your initial accountability." (Repeat twice.)

Announce the following on the station page (20 h. minutes after the first accountability announcement.)

"Attention, Attention. All accountability stations complete your 30 minute accountability." (Repeat twice)

Obtain from Security a list of unaccounted for i . personnel. If Security has not supplied results of the accountability within 30 minutes of the first accountability announcement, then contact the TSC Security Liaison and request accountability results.

Hope Creek (NETS X5214) Salem (NETS X5117)

HCGS

EC

(T+20 Min)

(T+30 Min)

EC (T+10 Min)

EC

EC

ECG ATT 1 Pg. 9 of 16

Initials/ Time

II. ACCOUNTABILITY INSTRUCTION FOR THE PROTECTED AREA (CONT)

EC

Designate an individual to attempt to locate unaccounted for personnel as follows:

NOTE

Steps A through D should be coordinated with the other Station's SNSS, or EDO, or their designees.

- A. Page individuals over the plant page.
- B. Obtain feedback from unaccounted for person's co-workers/supervisors on last known location/job assignment.
- C. Request Security's assistance in locating unaccounted for personnel.
- D. Call individual's home to verify work schedule.
- Update Security as missing personnel are accounted for.
- _/___ l. Initiat accorda

j.

Initiate Search and Rescue Operations in accordance with EPIP 202, OSC Activation and Operations, if appropriate.

____/____

EC

EC

m. Accountability actions are complete, return to step H3 of this attachment (page 5).

Initials

III. TERMINATION

EC

 Terminate when either of the following conditions are met:

a. None of the Emergency Action Levels defined in the ECG are applicable,

OR

- b. If the Emergency Action levels are still applicable and the plant is in a stable condition, then refer to the EMERGENCY COORDINATOR RECOVERY CHECKLIST of this attachment (page 12) to determine if the Unusual Event can be terminated by entering recovery.
- Upon completion of Step 1 of this section complete EMERGENCY TERMINATION/RECOVERY FORM of this attachment (page 13) as follows:
 - a. If terminating the event without recovery, complete Part "A".
 - b. If terminating the event with recovery, complete Part "B".
- If terminating the event with recovery, direct the Recovery Manager (Duty EDO) to implement Recovery Operations and assume the following responsibilities.
 - a. Evaluation of the emergency (may be delegated to SERT).
 - b. Determine measures required to return plant to normal operations.
 - c. Coordinate contractor support as required.
- 4. Provide the completed EMERGENCY TERMINATION/ RECOVERY FORM, to the Communicator and direct him/her to make the proper notification(s) using the Communications Log in Attachment 6 (time limits do not apply to termination calls).

EC

EC

EC

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III. TERMINATION (CONT)

Initials

EC

EC

Notify the Salem SNSS that the Unusual Event has been terminated.
 Collect all documentation and forward as indicated in

Section IV, of this attachment.



1.01

III. TERMINATION (CONT)

EMERGENCY COORDINATOR'S RECOVERY CHECKLIST FOR UNUSUAL EVENT

THE EMERGENCY COORDINATOR SHALL:

A. Answer the following questions which are prerequisites for terminating an Unusual Event by entering recovery.

Are Radiological releases terminated or, if not terminated, is the release rate decreasing and less then the Unusual Event Classification Emergency Action Levels in Section 7 of the ECG?

| and the second second | | |
|-----------------------|------------------------|--|
| | | |
| | and the second result. | |
| | VPC | |
| and the second second | A. M. M. | |
| | | |

___ NO

NO

NO

Are Radiation Levels in all areas of the plant either stable or decreasing?

| YES | |
|---------|--|
| ILO | |

Is the plant in a safe, stable condition with no reason to expect further degradation?

| YES | |
|---------|--|
| * *** | |

Is the integrity of the station power supplies and ECCS equipment, required for safe shutdown, intact?

| i | YES | |
|---|-----|--|

NO

Can full time operations of the Operations Support Center be terminated?

YES

___ NO

- B. If questions above have all been answered YES then proceed to Step C on this checklist, otherwise, termination of the event should not be considered at this time.
- C. Has the Emergency Duty Officer been briefed on the Emergency Situation and concurred that terminating the event with an EAL still applicable is a correct course of action? If yes, proceed to Step D on this checklist. If no, termination of the event should not be considered at this time.



NO

Name of Contact

D. Sign and date this checklist and return to Section III, Step 2, (page 10) of this ECG Attachment and proceed with termination with recovery.

Emergency Coordinator

Date Time



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III. TERMINATION (CONT)

EMERGENCY TERMINATION/RECOVERY FORM - UNUSUAL EVENT

PART "A" - EMERGENCY TERMINATION WITHOUT RECOVERY: THIS IS ______, COMMUNICATOR IN THE CONTROL (communicator's name) ROOM, AT THE HOPE CREEK GENERATING STATION. THIS IS TO NOTIFY YOU THAT AS OF _____, ON ____, THE (time) (date) UNUSUAL EVENT HAS BEEN TERMINATED.

EC APPROVAL TO TRANSMIT

| THIS IS, COMMUNICATOR IN THE CONTROL (communicator's name) ROOM, AT THE HOPE CREEK GENERATING STATION. THIS IS T NOTIFY YOU THAT AS OF, ON, THE (time) , ON, THE (date) , ON, THE UNUSUAL EVENT HAS BEEN TERMINATED AND HOPE CREEK IS NOW IN A RECOVERY STATUS. | |
|--|----|
| NOTIFY YOU THAT AS OF, ON, THE, (date), THE, UNUSUAL EVENT HAS BEEN TERMINATED AND HOPE CREEK IS | |
| (time) (date) UNUSUAL EVENT HAS BEEN TERMINATED AND HOPE CREEK IS | ro |
| | |
| NOW TH & DECOVERY CRAMIC | |
| NOW IN A RECOVERI SIRIOS. | |
| IS THE RECOVERY MANAGER. | |



ECG ATT 1 Pg. 14 of 16

IV. REPORTING

| | | Instructions |
|--------|----|---|
| | | This is a permanent document - all pages of this Attachment. |
| | | Appropriate documents shall be appended to this form and the package expedited through all steps. |
| | | 3. Responsible person shall initial each step. |
| | | |
| Initia | 15 | |
| SNSS | 1. | Ensure that an Incident Report (IR) is prepared. |
| SNSS | 2. | Forward this attachment, along with the (IR) and any any supporting documentation, to the Operations Manager (OM) |
| OM | 3. | Review IR, this attachment and any other relevant information for correct classification of event and corrective action taken. |
| OM | 4. | Contact the LER Coordinator (LERC) and request that the required reports be prepared. Provide this attachment and any other supporting documentation to the LERC. |
| LERC | 5. | Prepare required reports. ECG Attachment 23 may be used as a guide for reporting requirements. |
| | | Report or LER Number |
| LERC | 6. | When no longer required, send this attachment and appended documents to the Emergency Preparedness Manager (EPM). |
| EPM | 7. | Forward this attachment to the Central Technical Document Room for microfilming. |
| | | |

ECG ATT 1 Pg. 15 of 16

REPORT OF SERIOUS INJURY/DEATH NUCLEAR DEPARTMENT EMPLOYEE

| NAME | EMPLOYEE # | AGE |
|--|--|-------|
| HOME ADDRESS | | |
| HOME PHONE # | | |
| JOB TITLE | | |
| SOCIAL SECURITY # | | |
| | NT/INJURY DESCRIPTION | 1 |
| DATE OF ACCIDENT | TIME | AM/PM |
| DID INJURIES RESULT IN DEATH | | |
| EXTENT OF INJURIES | have and have a set of the set of | |
| | | |
| | | |
| | | |
| DESCRIPTION OF ACCIDENT | | |
| | | |
| antenna e en entre a meneral e meneral a meneral a construction de la construction de la construction de la const | | |
| WHERE TAKEN AFTER ACCIDENT | a production of the second state of the | |
| an and an and an analysis of the set of | | |
| | | |

 Work#
 Home#
 Pager#

 Linda Vreeland
 1195
 609-678-9382
 478-5717

 Dick DeSanctis
 1550
 609-228-1778
 N/A

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INITIAL CONTACT MESSAGE FORM

| I. | THIS IS, COMMUNICATOR IN THE CONTROL ROOM (NAME) |
|------|--|
| | AT THE HOPE CREEK NUCLEAR GENERATING STATION. |
| | THIS IS A NOTIFICATION OF AN UNUSUAL EVENT WHICH WAS DECLARED ATONONON |
| II. | ECG SECTION INITIATING CONDITION |
| | DESCRIPTION OF EVENT: |
| III. | THERE IS NO RELEASE IN PROGRESS. THERE IS A RELEASE IN PROGRESS. See NOTE below for release definition 33 FT. LEVEL WIND SPEED: (MPH) WIND DIRECTION (FROM): (DEGREES) |
| IV. | NO PROTECTIVE ACTIONS ARE RECOMMENDED AT THIS TIME |

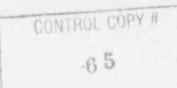
EC INITIALS TIME (EC Approval to Transmit ICMF)

NOTE: Release is defined as: Plant Effluent > Tech Spec Limit of 1.20E+4 uCi/sec Noble Gas or 1.70E+1 uCi/sec I-131



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ATTACHMENT 2

ALERT

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EMERGENCY COORDINATOR LOG SHEET I.

| | INSTRUCTIONS: |
|----|--|
| 1. | This is a permanent record |
| 2. | Each step shall be initialed or marked N/A as appropriate. |
| 3. | Emergency Coordinator (EC) responsibility is |
| | fulfilled by: |
| | name |
| | Title:(SNSS/EDO/ERM) |

Initials

EC

Declare an ALERT. Notify the Control Room staff and call Α. the communicators to the Control Room.

| Initiating ECG Section | waves in some infrastruktion of the | (| Cond | 11 |
|---------------------------|-------------------------------------|-----|------|----|
| Declared at | - | hrs | on | |

time

dition

Declared at

date

NOTE

If directed to implement this attachment due to a "Reduction" of the event, proceed to Section "C" and DO NOT implement Section "B".

NOTIFICATIONS в.

EC

Check appropriate boxes and provide a brief 1. description of the event on the INITIAL CONTACT MESSAGE FORM (ICMF) (last page of this attachment). Complete, approve, and provide ICMF to the Designated Communicator (CM1).

EC

Direct the Designated Communicator (CM1) to 2. implement Attachment 6 and make the notifications on the Communications Log within the time limits specified.

ECG ATT 2 Pg. 3 of 7

EC Log Sheet (Cont.)

B. NOTIFICATIONS (cont.)

Initials

EC

EC

EC

EC

| EC | 3. | Direct the Attachment | Communicator | (CM2) | to | implement |
|----|----|-----------------------|--------------|-------|----|-----------|
| | | | | | | |

 Notify the Salem SNSS (NETS X5127; 9-339-5200). Direct the implementation of EPIP 101S, Section 3.1.

C. SUPPORT

Direct the OSC Coordinator to activate the OSC in accordance with EPIP 202H.

D. EMERGENCY PLAN IMPLEMENTATION

Implement EPIP 102H, Alert.

E. SECURITY

For security event, notify the PSE&G Security Supervisor (X2222) to implement the Security Contingency Plan and Procedures.

NOTE

The Station Status Checklist shall be transmitted every 30 minutes or immediately if a significant change in station status occurs.

F. TECHNICAL COMMUNICATIONS

- Upon receipt of the Station Status Checklist (SSCL) from the CM2, review and approve for transmittal. Implement more frequently for significant station status change.
- EC

EC

- 2. Ensure completion and approval of the NRC Data Sheet form.
 - a) Obtain the form (both pages) from the CM2 (Att. 8)
 - b) Provide the approved form to the CM2 for transmittal to the NRC as soon as possible, but not to exceed ONE HOUR.

ECG ATT 2 Pg. 4 of 7

EC Log Sheet (Cont.)

Initials

NOTE:

As manpower permits, the Emergency Coordinator may assign an additional communicator (preferably an RO or SRO) to provide continuous updates to the NRC. The assignment of an additional communicator should not be made if personnel being considered are required to mitigate the event or to complete

- c) Notify the NRC of any significant changes in Plant Status, Emergency Status, or any actions taken in accordance with 10CFR50.54(x).
- d) Direct CM2 to log or document (via NRC Data Sheet) any additional information provided to the NRC. This includes, but is not limited to, changes in Plant Status, Emergency Status, or any actions taken in accordance with 10CFR50.54(x).
- When turning over EC duties ensure your communicators are directed to turnover notifications responsibilities to the facility being activated.

G. EMERGENCY ESCALATION

If the event classification escalates above an ALERT, then exit this attachment and implement a new attachment as directed by the classifying section EAL.

Escalated to (circle one) SAE - GE

H. RELIEF/TURNOVER

EC

EC

EC

If relieved as EC prior to termination of the ALERT, then turnover responsibility for this attachment to the oncoming EC and document your relief below and in EPIP 102H.

name assumed EC duties at _____ hrs.



Rev. 7

ECG ATT 2 Pg. 5 of 7

Initials

REPORTING I.

EC

EC

SNSS

SNSS

MO

OM

LERC

HCGS

Ensure that appropriate reports are made IAW Section II (page 5) of this Attachment.

3. RECORDS

Ensure that all completed documents related to this Event are forwarded in accordance with reporting requirements of Section II of this Attachment.

REPORTING II.

Instructions This is a permanent document - all pages 1. of this Attachment. Appropriate documents shall be appended 2. to this form and the package expedited through all steps. Responsible person shall initial each 3. step. Ensure that an Incident Report is prepared. 1. Forward this Attachment, the Incident Report, and any 2. supporting documentation to the Operations Manager (OM). Review the Incident Report and any other relevant 3. information for correct classification of event and corrective action taken. Contact the LER Coordinator (LERC) and request that 4 . the required reports be prepared. Provide this Attachment and any other supporting documentation to the LERC. Prepare required reports. ECG Attachment 23 may be 5. used as a guide for reporting requirements.

Report or LER Number

Rev. 7

ECG ATT 2 Pg. 6 of 7

LERC

 When no longer required send this attachment and appended documents to the Emergency Preparedness Manager (EPM).

EPM

7. Forward this Attachment package to the Central Technical Document Room (CTDR) for microfilming.

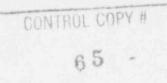
ECG ATT 2 Pg. 7 of 7

INITIAL CONTACT MESSAGE FORM

| • | THIS IS, COMMUNICATOR IN THE (NAME) |
|---|--|
| | CONTROL ROOM TECHNICAL SUPPORT CENTER |
| | AT THE HOPE CREEK NUCLEAR GENERATING STATION. |
| | THIS IS NOTIFICATION OF AN ALERT WHICH WAS DECLARED ATON (TIME - 24 HOUR CLOCK) (DATE) |
| | |
| | ECG SECTION INITIATING CONDITION DESCRIPTION OF EVENT: |
| | |
| | DESCRIPTION OF EVENT: |

EC Initials Time (EC Approval to Transmit ICMF)

NOTE: Release is defined as: Plant Effluent > Tech Spec Limit of 1.20E+4 uCi/sec Noble Gas or 1.7E+1 uCi/sec I-131.



ECG ATT 3 Pg. 1 of 7

ATTACHMENT 3

SITE AREA EMERGENCY

Table of Contents

Page

| ı. | Emergency Coordinator (EC) Log Sheet | 2 |
|-----|--------------------------------------|---|
| II. | Reporting | 6 |
| | Initial Contact Message Form (ICMF) | 7 |



ECG ATT 3 Pg. 2 of 7

I. EMERGENCY COORDINATOR LOG SHEET

Initials

EC

A. Declare a SITE AREA EMERGENCY. Notify the Control Room staff and call the communicators to the Control Room.

| Initiating ECG Section | Condition |
|---------------------------|-------------|
| Declared at | hrs on date |

NOTE

If directed to implement this attachment due to a "Reduction" of the event, proceed to Section "C" and DO NOT implement Section "B".

B. NOTIFICATIONS

EC

 Check appropriate boxes and provide a brief description of the event on the INITIAL CONTACT MESSAGE FORM (ICMF) (pg 7 of this attachment). Complete, approve, and provide ICMF to the Designated Communicator (CM1).

ECG ATT 3 Pg. 3 of 7

B. NOTIFICATIONS (cont)

Initials

EC

EC

EC

EC

- Direct the Designated Communicator (CM1) to implement Attachment 6 and make the notifications on the Communications Log within the time limits specified.
 - 3. Direct the Secondary Communicator (CM2) to implement Attachment 8.
 - Notify the Salem SNSS (NETS X5127; 9-339-5200). Direct the implementation of EPIP 101S, Section 3.2.

C. SUPPORT

If not done previously, direct the OSC Coordinator to activate the OSC in accordance with EPIP 202H.

D. EMERGENCY PLAN IMPLEMENTATION

EC

EC

If the EC is the EDO or SNSS, implement EPIP 103H, "Site Area Emergency."

OR

If the EC is the <u>ERM</u>, implement EPIP 401 and perform the following:

- Notify the EDO of the change in Emergency Classification Level, the time of declaration, and direct the EDO to implement EPIP 103H, "Site Area Emergency."
- Notify EOF staff of the change in emergency classification.

E. SECURITY

For security event, notify the PSE&G Security Supervisor (X2222 to implement the Security Contingency Plan and Procedures.

NOTE

The Station Status Checklist shall be transmitted every 30 minutes or immediately if a significant change in station status occurs.



ECG ATT 3 Pg. 4 of 7

EC Log Sheet (Cont.)

Initials

F. TECHNICAL COMMUNICATIONS

EC -865

- Upon receipt of the Station Status Checklist (SSCL) from the CM2, review and approve for transmittal. Implement more frequently for significant station status change.
- EC
- Ensure completion and approval of the NRC Data Sheet form.
 - a) Obtain the form (both pages) from the CM2 (Att. 8)
 - b) Provide the approved form to the CM2 for transmittal to the NRC as soon as possible, but not to exceed ONE HOUR.

NOTE:

As manpower permits, the Emergency Coordinator may assign an additional communicator (preferably an RO or SRO) to provide continuous updates to the NRC. The assignment of an additional communicator should not be made if personnel being considered are required to mitigate the event or to complete high priority Emergency Response functions.

- c) Notify the NRC of any significant changes in Plant Status, Emergency Status, or any actions taken in accordance with 10CFR50.54(x).
- d) Direct CM2 to log or document (via NRC Data sheet) any additional information provided to the NRC. This includes, but is not limited to, changes in Plant Status, Emergency Status, or any actions taken in accordance with 10CFR50.54(x).
- 3. When turning over EC duties ensure your communicators are directed to turnover notifications responsibilities to the facility being activated.





EC

ECG ATT 3 Pg. 5 of 7

EC Log Sheet (Cont.)

Initials

EC

EC

G. PRECAUTIONARY PROTECTIVE ACTION RECOMMENDATION (PAR)

If a Precautionary PAR is developed with no escalation of the emergency status, <u>THEN</u> complete a new working copy ICMF (PAR Upgrade) for this Attachment and direct the CM1 to make new notifications with a clean copy of Attachment 6.

H. EMERGENCY ESCALATION

If the event classification escalates above a SAE, THEN exit this attachment and implement a new attachment as directed by the classifying section EAL.

I. RELIEF/TURNOVER

EC

If relieved as EC prior to change in event classification, THEN turnover responsibility for this attachment to the oncoming EC and document your relief below and in EPIP 103H.

assumed EC duties at _____ hrs. ____ hrs.

J. REPORTING

EC

EC

Ensure that appropriate reports are made IAW Section II (page 6) of this Attachment.

K. RECORDS

Ensure that all completed documents related to this Event are forwarded in accordance with reporting requirements of Section II of this Attachment.



II. REPORTING

Instructions

- 1. This is a permanent document all pages of this Attachment.
- 2. Appropriate documents shall be appended to this form and the package expedited through all steps.
- 3. Responsible person shall initial each step.

Initials

| ī | SNSS | 1. | Ensure that an Incident Report is prepared. |
|------|------|----|--|
| 1 44 | SNSS | 2. | Forward this Attachment, the Incident Report, and any supporting documentation to the Operations Manager (OM). |
| ō | MC | 3. | Review the Incident Report and any other relevant information for correct classification of event and corrective action taken. |
| Ċ | MC | 4. | Contact the LER Coordinator (LERC) and request that the required reports be prepared. Provide this Attachment and any other supporting documentation to the LERC. |
| ĵ | LERC | 5. | Prepare required reports. ECG Attachment 23 may be used as a guide for reporting requirements. |
| | | | Report or LER Number |
| i | LERC | 6. | When no longer required send this attachment and appended documents to the Emergency Preparedness Manager (EPM). |
| ī | EPM | 7. | Forward this Attachment package to the Central Technical Document Room (CTDR) for microfilming. |

| ECG | | | |
|-----|---|----|---|
| ATT | 3 | | |
| Pg. | 7 | of | 7 |

INITIAL CONTACT MESSAGE FORM

| I. | THIS IS, COMMUNICATOR IN THE |
|------|--|
| | CONTROL ROOM TECHNICAL SUPPORT CENTER EMERGENCY OPERATIONS CENTER |
| | AT THE HOPE CREEK NUCLEAR GENERATING STATION. |
| | THIS IS NOTIFICATION OF A SITE AREA EMERGENCY WHICH WAS DECLARED ATON (TIME - 24 HOUR CLOCK) (DATE) |
| | THIS IS NOTIFICATION OF A PROTECTIVE ACTION RECOMMENDATION UPGRADE WHICH WAS MADE AT (TIME - 24 HOUR CLOCK) (DATE) |
| II. | ECG SECTION INITIATING CONDITION |
| | DESCRIPTION OF EVENT: |
| | |
| | |
| III. | <pre>THERE IS NO RELEASE IN PROGRESS. THERE IS A RELEASE IN PROGRESS. See NOTE below for release definition</pre> |
| | 33 F1. LEVEL WIND SPEED: WIND DIRECTION (FROM): (DEGREES) |
| IV. | NO PROTECTIVE ACTIONS ARE RECOMMENDED AT THIS TIME |
| | WE RECOMMEND EVACUATION AS FOLLOWS |
| | WE RECOMMEND SHELTERING AS FOLLOWS |
| | FC Thitials Time |

EC Initials Time (EC Approval to Transmit ICMF)

ECG ATT 4 Pg. 1 of 9

ATTACHMENT 4

CONTROL CODY #

6.5

GENERAL EMERGENCY

Table of Contents

| | | Page |
|-----|--|------|
| I. | Emergency Coordinator (EC) Log Sheet | 2 |
| II. | Reporting | 6 |
| | Predetermined Protective Action Recommendations (flowchart) | 7 |
| | Protective Action Recommendation Worksheet | 8 |
| | Initial Contact Message Form (ICMF) | 9 |



ECG ATT 4 Pg. 2 of 9

I. EMERGENCY COORDINATOR LOG SHEET

Initials

EC

| | INSTRUCTIONS |
|-----|--|
| | 1. This is a permanent record. |
| | Each step shall be initialed or marked N/A as appropriate. |
| | 3. Emergency Coordinator (EC) responsibility is |
| | fulfilled by: |
| | prepared to make notifications. |
| ECO | Section Initiating |
| Dec | lared at hrs on date |
| | NOTE |
| | Protective Action Recommendation (PAR) shall be made n the Initial Contact Message Form (ICMF). |
| PRO | TECTIVE ACTION RECOMMENDATION (PAR) |
| 1. | Refer to page 7 of this attachment and choose the mos appropriate Fredetermined PAR. The worksheet (page 8 should be used to determine the affected downwind sectors. |
| 2. | If immediately available from the SRPT (RAC or RSM), obtain a Radiologically Based PAR for comparison. |
| з. | Compare the Predetermined PAR and the Radiologically Based PAR and choose the most conservative for inclusion on the ICMF. |
| | |

HCGS

EC

EC

EC

ECG ATT 4 Pg. 3 of 9

Initials

C. NOTIFICATIONS

EC

EC

EC

EC

EC

EC

EC

HCGS

- Check appropriate boxes and provide a brief description of the event on the INITIAL CONTACT MESSAGE FORM (ICMF) (pg 9 of this attachment). Complete, approve, and provide ICMF to the Designated Communicator (CM1).
- Direct the Designated Communicator (CM1) to implement Attachment 7 and make the notifications on the Communications Log within the time limits specified.
 - 3. Direct the Secondary Communicator (CM2) to implement Attachment 8.
 - Notify the Salem SNSS (NETS X5127; 9-339-5200). Direct the implementation of EPIP 101S, Section 3.2.

D. SUPPORT

If not done previously, direct the OSC Coordinator to activate the OSC in accordance with EPIP 202H.

E. EMERGENCY PLAN IMPLEMENTATION

If the EC is the <u>EDO</u> or <u>SNSS</u>, implement EPIP 104H, "General Emergency."

OR

If the EC is the ERM, implement EPIP 401 and perform the following:

- Notify the EDO of the change in Emergency Classification Level, the time of declaration, and direct the EDO to implement EPIP 104H, "General Emergency."
- Notify EOF staff of the change in emergency classification.

F. SECURITY

For security event, notify the PSE&G Security Supervisor (X2222) to implement the Security Contingency Plan and Procedures.

ECG ATT 4 Pg. 4 of 9

Initials

NOTE

The Station Status Checklist shall be transmitted every 30 minutes or immediately if a significant change in station status occurs.

G. TECHNICAL COMMUNICATIONS

- Upon receipt of the Station Status Checklist (SSCL) from the CM2, review and approve for transmittal. Implement more frequently for significant station status change.
- Ersure completion and approval of the NRC Data Sheet form.
 - a) Obtain the form (both pages) from the CM2 (Att. 8)
 - b) Provide the approved form to the CM2 for transmittal to the NRC as soon as possible, but not to exceed ONE HOUR,

NOTE:

As manpower permits, the Emergency Coordinator may assign an additional communicator (preferably an RO or SRO) to provide continuous updates to the NRC. The assignment of an additional communicator should not be made if personnel being considered are required to mitigate the event or to complete high priority Emergency Response functions.

- c) Notify the NRC of any significant changes in Plant Status, Emergency Status, or any actions taken in accordance with 10CFR50.54(x).
- d) Direct CM2 to log or document (via NRC Data Sheet) any additional information provided to the NRC. This includes, but is not limited to, changes in Plant Status, Emergency Status, or any actions taken in accordance with 10CFR50.54(x).

EC

ECG ATT 4 Pg. 5 of 9

Initials

EC

When turning over EC duties ensure your 3. communicators are directed to turnover notifications responsibilities to the facility being activated.

RELIEF/TURNOVER H.

EC

If relieved as EC prior to de-escalation of the GE, then, turnover responsibility for this attachment to the oncoming EC and document your relief below and in EPIP 104H.

| | assumed | EC | duties | at | | hrs. |
|------|---------|----|--------|----|------|------|
| name | | | | | time | |

REPORTING I.

Ensure that appropriate reports are made IAW Section II (page 6) of this Attachment.

J . RECORDS

EC

EC

Ensure that all completed documents related to this Event are forwarded in accordance with reporting requirements of Section II of this Attachment.



ECG ATT 4 Pg. 6 of 9

II. REPORTING

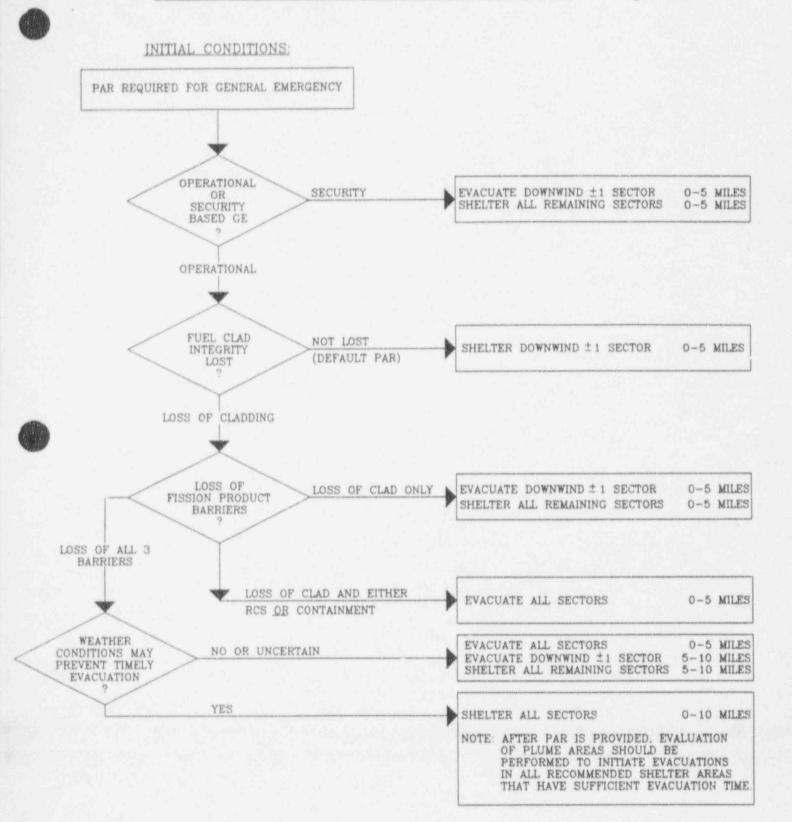
Initials

Instructions
 This is a permanent document - all pages of this Attachment.
 Appropriate documents shall be appended to this form and the package expedited through all steps.
 Responsible person shall initial each step.

| SNSS | 1. | Ensure that an Incident Report is prepared. |
|------|----|--|
| SNSS | 2. | Forward this Attachment, the Incident Report, and any supporting documentation to the Operations Manager (OM). |
| OM | 3. | Review the Incident Report and any other relevant information for correct classification of event and corrective action taken. |
| OM | 4. | Contact the LER Coordinator (LERC) and request that the required reports be prepared. Provide this Attachment and any other supporting documentation to the LERC. |
| LERC | 5. | Prepare required reports. ECG Attachment 23 may be used as a guide for reporting requirements. |
| | | Report or LER Number |
| LERC | 6. | When no longer required send this attachment and appended documents to the Emergency Preparedness anager (EPM). |
| EPM | 7. | Forward this Attachment package to the Central Technical Document Room (CTDR) for microfilming. |
| | | |

PREDETERMINED PROTECTIVE ACTION RECOMMENDATIONS

ECG AIT 4 Pg. 7 of 9



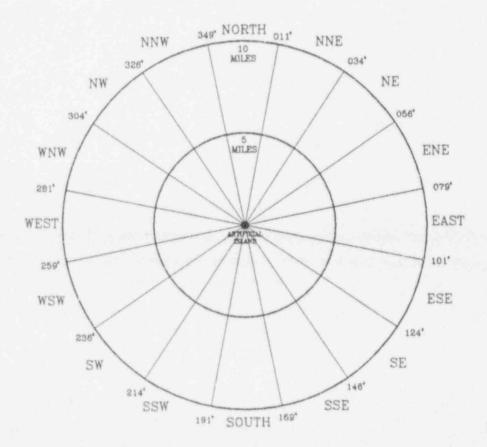
Rev. 6

RECOMMENDED PROTECTIVE ACTIONS WORKSHEET

ECG ATT 4 Pg. 8 of 9

| WIND DIRECTION | FROM | PAR | AFFE | CTED | SECT | ORS |
|--|---|--|------|--|------|---|
| DEGREES | COMPASS | DOW | NWIN | <u>ID -1</u> | SECI | OR |
| 349 - 011 011 - 034 034 - 056 056 - 079 079 - 101 101 - 124 124 - 146 146 - 169 169 - 191 191 - 214 214 - 236 236 - 259 259 - 281 281 - 304 304 - 326 326 - 349 | N NNE NE ENE E SSE SSE SSW SSW SW WSW WSW WSW WSW W | SSE SSW SW WSW WSW WNW NW NW NNW NNW NNE ENE ESE SE | | S SSW WSW WNW NNW NNW NNW NNE ESE SSE | | SSW SW WSW WNW NW NNW NNW NNE ESE ESE SSE SSE SSE |

NOTE: CONSIDER ADDING A SECTOR TO THE PAR IF THE WIND DIRECTION (FROM) IS WITHIN \pm 3° of a sector dividing line.

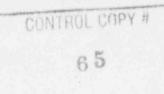


Rev. 6

| INITIAL | CONTACT | MESSAGE | FORM |
|---------|---------|---------|------|
|---------|---------|---------|------|

| I. | THIS IS, COMMUNICATOR IN THE (NAME) |
|---------------------------|---|
| | CONTROL ROOM TECHNICAL SUPPORT CENTER EMERGENCY OPERATIONS FACILITY |
| | AT THE HOPE CREEK NUCLEAR GENERATING STATION. |
| | THIS IS NOTIFICATION OF A GENERAL EMERGENCY WHICH WAS DECLARED ATON (TIME - 24 HOUR CLOCK) (DATE) |
| | (TIME - 24 HOUR CLOCK) (DATE) |
| | THIS IS NOTIFICATION OF A PROTECTIVE ACTION RECOMMENDATION UPGRADE WHICH WAS MADE AT ON ON ON (DATE) |
| II. | ECG SECTION INITIATING CONDITION |
| | DESCRIPTION OF EVENT: |
| | |
| | |
| III. | <pre>THERE IS NO RELEASE IN PROGRESS. THERE IS A RELEASE IN PROGRESS. See NOTE below for release definition</pre> |
| | 33 FT. LEVEL WIND SPEED: WIND DIRECTION (FROM): (DEGREES) |
| IV. | Sector(s) Distance-Miles |
| | WE RECOMMEND BHELTERING AS FOLLOWS |
| 1968 1967 1966 V.H. KAP 1 | |
| | EC Initials Time (EC Approval to Transmit ICMF) |

ECG ATT 4 Pg. 9 of 9



ECG ATT 6 Pg. 1 of 10

ATTACHMENT 6

DESIGNATED COMMUNICATOR (CM1) COMMUNICATIONS LOG

UNUSUAL EVENT

____ ALERT

SITE AREA EMERGENCY

PROTECTIVE ACTION RECOMMENDATION (PAR) UPDATE (FOR SITE AREA EMERGENCY)

Table of Contents

| | | | | | | Page |
|-----------------|-----|-----|--------|-------|-----------|------|
| (CM1/TSC1/EOF1) | Ins | sti | ructio | ons | | 2-4 |
| Communications | Log | - | Норе | Creek | Emergency | 5-10 |

Instructions

1. This is a permanent record.

2. Initial items implemented.

Name

Date Time

<u>CR TSC EOF</u> Location (circle one)



Rev. 18

ECG ATT 6 Pg. 2 of 10

I. DESIGNATED COMMUNICATOR (CM1/TSC1/EOF1) INSTRUCTIONS

Initials

NOTE

Implement a new working copy of this attachment for changes in Emergency Classification as directed by the Emergency Coordinator (EC).

CM1/TSC1 /EOF1 Obtain approved Initial Contact Message Form (ICMF) from the Emergency Coordinator (EC). Telephonically provide ICMF to contacts on the communications log (pages 5 through 10). See step 10 for pager (beeper) activation instructions.

NOTE

Turnover of notifications responsibility may only occur after the Emergency Coordinator position transfers and a copy of the ICMF is available to the oncoming communicator (TSC or EOF).

CM1/TSC1

- 2. When the TSC (or EOF) is ready to assume notifications responsibilities, discuss the following with your relief.
 - Organizations/Individuals notified of the current level of Emergency.
 - b. Provide, as appropriate, names and locations (numbers) of those contacted for updates/changes.

CM1/TSC1 /EOF1

- 3. Initiate followup transmission of ICMF on telecopier if not done previously.
 - a. CM1/TSC1 use telecopier Group A.
 - b. EOF1 use telecopier Group C.
- Assist the Secondary Communicator (CM2) in the transmission of data forms using the telecopier.

CM1

- B. When you hear "Beep, Beep, Beep" you should enter the phone number that you want the pager holder to call you on. This is done using the touch-tone key pad on the phone you are on.
- C. Hang up the phone. Pager holder should call you back on the phone number you provided within 5 minutes (approximately).



HCGS

Rev. 18

ECG ATT 6 Pg. 3 of 10

Initials

CAUTION

YOU ARE NOT AUTHORIZED TO RELEASE ANY INFORMATION CONCERNING THE EMERGENCY TO THE NEWS MEDIA.

verification call backs) to the Secondary Communicator.

CM1/TSC1 /EOF1

5.

TSC1/EOF1

CM1

/EOF1

When all notifications are completed, assist the 6. TSC2 (EOF2) in maintaining required status boards or as directed by the Emergency Preparedness Advisor (EPA).

or any other incoming phone calls (other than

Refer request for information from the News Media

- If telecopier is not working properly, request 7. assistance from the Emergency Preparedness Advisor in the TSC (NETS 5213).
- When the Emergency has been terminated or reduced in 8. CM1/TSC1 classification, obtain the approved EMERGENCY TERMINATION/REDUCTION FORM, from the EC. Implement notifications using the Communications Log and note contacts in the Event Reduction Column (time limits do not apply).
 - When the emergency is terminated or you are relieved 9. of duty, forward this and all other completed documents to the SNSS/EDO/ERM.

If required to activate an individual's pager, follow 10. the following instructions.

Dial the pager number of the individual you are Α. trying to contact listed in the Communications Log.

CAUTION

When entering the phone number where the pager holder should call you back at, make sure you provide the complete number of a phone that is not in use; and make sure you DO NOT enter a NETS phone number.



CM1/TSC1 /EOF1

CM1/TSC1 /EOF1

ECG ATT 6 Pg. 5 of 10

| | COMMUNICATIONS LOG | INITIAL | NOTIFIC | CATION | EVENT |
|---------------|--|-----------------------|--|----------------------|--------------------------------|
| TIME LIMIT | CLASSIFICATION: (UE/A/SAE) ORGANIZATIONS/INDIVIDUALS | NAME OF CONTACT | DATE/ TIME | CALLER | NAME OF CONTACT, TIME |
| 15 MIN. | DELAWARE STATE POLICE/DEMA Primary: NETS 5406/5407 | | | | |
| | Secondary: 302-739-5851(SP) or 302-834-4531 (DEMA) Backup: NAWAS | Call Back: | | | |
| | NOTES: IF DELAWARE IS CONT PROCEED WITH NEW JI | DELAWAI | BLE TO CC RE STATE T BOTH OF ING. | (above), | |
| | NEW CASTLE COUNTY Primary: NETS 5408 Secondary: 302-738-3131 | | | | |
| | KENT COUNTY Primary: NETS 5409 Secondary: 302-678-9111 | | | | |
| 15 MIN. | NEW JERSEY STATE POLICE/OEM (Speak only with Trooper on | | | | |
| | duty) Primary: Nets 5400 Secondary: 882-2000 Backup: EMRAD | Call Back: | | | |
| | NOTES: IF NEW JERSEY IS (PROCEED TO NEXT P) | CONTACTED, AGE. | JERSEY | STATE (a T ALL OF | NTACT NET bove), THE |
| | SALEM COUNTY Primary: NETS 5402 Secondary: 769-2959 | | | | |
| | CUMBERLAND COUNTY Primary: NETS 5403 Secondary: 455-8500 | | | | |
| | U. S. COAST GUARD (Speak Only With Duty Desk) Primary: 215-271-4940 Secondary: 215-271-4800 | | | | |



Rev. 18

ECG ATT 6 Pg. 6 of 10

| | COMMUNICATIONS LOG | INITIAI | L NOTIFIC | CATION | REDUCTIO |
|------------|---|-----------------------|---------------|--------|--------------------------------|
| TIME | CLASSIFICATION: (UE/A/SAE) ORGANIZATIONS/INDIVIDUALS | NAME OF CONTACT | DATE/ TIME | CALLER | NAME OF CONTACT, TIME |
| 20 MIN. | EMERGENCY DUTY OFFICER(EDO) Primary: Refer to Roster Secondary: (Contact One) Bill O'Malley Office: 3478 Home: 609-935-6136 Pager: 478-5674 Car: 922-0341 Jim Clancy Office: 3144 Home: 609-455-9110 Pager: 478-5073 Bob Hovey Office: 3463 Home: 609-678-8645 Pager: 478-5284 Car: 922-5622 Steve Funsten Office: 3115 Home: 215-358-0635 Pager: 478-5280 Marty Trum Office: 3645 Home: 609-358-7487 Pager: 478-5311 | * | | | |
| 20 MIN. | TECH. SUPP. SUPERVISOR(TSS) Primary: Refer to Roster Secondary: Contact 1 Below George Daves Office: 3071 Home: 609-455-3163 Pager: 478-5281 Dave Powell Office: 3065 Home: 609-467-8625 Pager: 478-5049 John DeDomenico Office: 3458 Home: 609-769-1660 Pager: 478-5381 Frank Hughes Office: 3458 Home: 609-769-2713 Pager: 478-5672 Larry Wagner Office: 3671 Home: 609-582-0067 Pager: 478-5332 | * | | | |

After TSC activation, individual notification of EDO and TSS is not required by TSC1 or EOF1.

ECG ATT 6 Pg. 7 of 10

| | COMMUNICATIONS LOG | INITIAL | NOTIFI | CATION | EVENT REDUCTION |
|---------------|--|-----------------------|---------------|--------|--------------------------------|
| TIME LIMIT | CLASSIFICATION: (UE/A/SAE) ORGANIZATIONS/INDIVIDUALS | NAME OF CONTACT | DATE/ TIME | CALLER | NAME OF CONTACT/ TIME |
| 30 MIN. | LAC TOWNSHIP Primary: NETS 5404 Secondary:935-7300 | | | | |
| 30 MIN. | GEN. MANAGER - HOPE CREEK Operations (Contact One) Bob Hovey Office: 3463 Home: 609-678-8645 Pager: 478-5284 Car: 922-5622 Bill O'Malley Office: 3478 Home: 609-935-6136 Pager: 478-5674 Car: 922-0341 | | | | |
| 30 MIN. | PUBLIC INFORMATION MANAGER NUCLEAR (Contact One) Bill Stewart Office: Office: 1006 Home: 609-935-0923 Pager: 478-5226 Michaele Camp Office: 0ffice: 1001 Home: 302-529-9027 Pager: 478-5318 Chris Florentz Office: 0ffice: 1002 Home: 215-543-0729 Pager: 478-5367 | * | | | |

After ENC activation, notify the ENC and read the ICMF to the ENC Manager (NETS - 5300 or 273-1961).

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| | COMMUNICATIONS LOG | INITIAL | NOTIFIC | NOITA | REDUCTION |
|------------|---|--|--|---|--------------------------------|
| TIME | CLASSIFICATION: (UE/A/SAE) ORGANIZATIONS/INDIVIDUALS | NAME OF CONTACT | DATE/ TIME | CALLER | NAME OF CONTACT, TIME |
| NRC OI | PS CENTER COMMUNICATION IN | STRUCTIONS: | | | |
| | 1. Obtain the approved N | IRC Data She | et from | Communica | tor #2. |
| | 2. Read both the ICMF an Operations Center. (Fill in Communication | | | | (e) |
| | 3. <u>IF</u> the NRC is request the event, <u>THEN</u> obtain assistant staff. | | | | |
| | 4. <u>IF</u> requested by the M request Communicator on Communicator #1 lo | #2 to comple | n an ope ete any | n phone l remaining | ine and calls |
| | ħ | IOTE: | | | |
| | As manpower permits, the additional communicator (continuous updates to the additional communicator s considered are required t complete high priority Em | (preferably NRC. The should not b to mitigate | an RO or assignme e made i the even | SRO) to nt of an f personr t or to | provide |
| 60 MIN. | NRC OPERATIONS CENTER (ICMF & NRC Data Sheet) Primary: (ENS) 301-951-0550 Secondary: | 2 | | | |

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COMMUNICATIONS LOG

INITIAL NOTIFICATION

EVENT REDUCTION

| TIME LIMIT | CLASSIFICATION: (UE/A/SAE) ORGANIZATIONS/INDIVIDUALS | NAME OF CONTACT | DATE/ TIME | CALLER | NAME OF CONTACT/ TIME |
|---------------|---|-----------------------|---------------|--------|--------------------------------|
| 60 MIN. | NRC RESIDENTS (Contact One) Charlie Marschall Office: 2962 or 935-3850 Home: 610-444-0181 Pager: 478-5772 Todd Fish Office: 2962 or 935-3850 Home: 302-426-1913 Steve Barr Office: 2962 or 935-3850 Home: 610-558-2802 Pager: 478-5072 Joe Schoppy Office: 2962 or 935-3850 Home: 610-558-2802 Pager: 478-5072 Joe Schoppy Office: 2962 or 935-3850 Home: 609-384-1365 | | | | |
| 60 MIN. | EMERGENCY PREPAREDNESS (Contact One) Tom DiGuiseppi Office: 1517 Home: 609-455-6045 Pager: 478-5203 Craig Banner Office: 1157 Home: 609-728-5043 Pager: 478-5215 Jim Schaffer Office: 1575 Home: 609-299-2057 Pager: 478-5086 | ** | | | |

** Not required After the EOF is Activated.

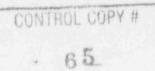


ECG ATT 6 Pg. 10 of 10

EVENT

| | COMMUNICATIONS LOG | INITIA | L NOTIFIC | CATION | REDUCTION |
|---------------|---|-----------------------|---------------|----------|--------------------------------|
| TIME LIMIT | CLASSIFICATION: (UE/A/SAE) ORGANIZATIONS/INDIVIDUALS | NAME OF CONTACT | DATE/ TIME | CALLER | NAME OF CONTACT/ TIME |
| | Note: External Affairs Rep Utilities. | . will con | tact the | Board of | Public |
| 90 MIN. | EXTERNAL AFFAIRS (Contact One) Mike Bachman Office: 1434 Home: 609-358-7211 Pager: 478-5206 Bryan Gorman Office: 1433 Home: 302-455-0220 Pager: 478-5100 Jan Moyle Office: 1436 Home: 609-424-8522 Pager: 478-5259 | ** | | | |
| 90 MIN. | AMERICAN NUCLEAR INSURERS (ANI) 203-561-3433 | * | | | |

Not required for Unusual Events to notify ANI.
 ** Not required <u>After</u> the EOF is <u>Activated</u>.



ECG ATT 7 Pg. 1 of 10

ATTACHMENT 7

DESIGNATED COMMUNICATOR (CM1) COMMUNICATIONS LOG

___ GENERAL EMERGENCY

PROTECTIVE ACTION RECOMMENDATION (PAR) UPDATE

Table of Contents

| | | | | | Page |
|-----------------|-------|--------|-------|-----------|------|
| (CM1/TSC1/EOF1) | Inst | ructio | ons | | 2-4 |
| Communications | Log - | Hope | Creek | Emergency | 5-10 |

Instructions

1. This is a permanent record.

2. Initial items implemented.

Name

Date Time

CR TSC EOF Location (circle one)



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DESIGNATED COMMUNICATOR (CM1/TSC1/EOF1) INSTRUCTIONS

Initials

Ι.

NOTE

Implement a new working copy of this attachment for changes in Emergency Classification as directed by the Emergency Coordinator (EC).

NOTE

For 15 minute notifications use NETS X5555 conference call (separate contact required for Coast Guard.

CM1/TSC1 /EOF1 Obtain approved Initial Contact Message Form (ICMF) from the Emergency Coordinator (EC). Telephonically provide ICMF to contacts on the Communications Log (pages 5 through 9). See step 10 for pager (beeper) activation instructions.

NOTE

Turnover of notifications responsibility may only occur after the Emergency Coordinator position transfers and a copy of the ICMF is available to the oncoming communicator (TSC or EOF).

CM1/TSC1

2. When the TSC (or EOF) is ready to assume notifications responsibilities, discuss the following with your relief.

- a. Organizations/Individuals notified of the current level of Emergency.
- Provide, as appropriate, names and locations (numbers) of those contacted for updates/changes.



ECG ATT 7 Pg. 3 of 10

| Initials | |
|-------------------|---|
| CM1/TSC1 | Initiate followup transmission of ICMF on telecopier if not done previously. |
| /EOF1 | a. CM1/TSC1 use telecopier Group A. b. EOF1 use telecopier Group C. |
| CM1 | Assist the Secondary Communicator (CM2) in the transmission of data forms using the telecopier. |
| | CAUTION |
| | You are not authorized to release any information concerning the emergency to the News Media. |
| CM1/TSC1 /EOF1 | Refer request for information from the News Media or any other incoming phone calls (other than verification call backs) to the CM2 (TSC2/EOF2). |
| TSC1/ EOF1 | When all notification are completed, assist the TSC2 (EOF2) in maintaining required status boards or as Directed by the Emergency Preparedness Advisor (EPA). |
| CM1 | If telecopier is not working properly, request assistance from the Emergency Preparedness Advisor in th TSC (NETS 5213). |
| CM1/TSC1 /EOF1 | 8. Upon reduction of the Event Classification, obtain the completed EMERGENCY TERMINATION/REDUCTION FORM from the EC. Implement notification using the Communications Log. (Time limits do not apply.) |
| CM1/TSC1 /EOF1 | 9. When the emergency is terminated or you are relieved of duty, forward this and all other completed documents to the SNSS/EDO/ERM. |
| | |

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Initials

CM1/TSC1 /EOF1 If required to activate an individual's pager, follow the following instructions.

A. Dial the pager number of the individual you are trying to contact listed in the Communications Log.

CAUTION

When entering the phone number where the pager holder should call you back at, make sure you provide the complete number of a phone that is not in use; and make sure you DO NOT enter a Nets phone number.

- B. When you hear "Beep, Beep, Beep" you should enter the phone number that you want the pager holder to call you on. This is done using the touch-tone key pad on the phone you are on.
- C. Hang up the phone. Pager holder should call you back on the phone number you provided within 5 minutes (approximately).



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| | COMMUNICATIONS LOG | and the second size of the second | | | |
|------|---|--|---|--------|---|
| TIME | CLASSIFICATION: General Emergency ORGANIZATIONS/INDIVIDUALS | NAME OF CONTACT | DATE/ TIME | CALLER | NAME OF CONTACT TIME |
| 15 | NEW JERSEY STATE POLICE/OEM | | | | |
| MIN. | | Call Back: | | | |
| | DELAWARE STATE POLICE/DEMA | | | | |
| | Primary: Nets 5406/5407 Secondary: 302-739-5851(SP) or 302-834-4531(DEMA) Backup: NAWAS | Call Back: | | | |
| | LAC TOWNSHIP Primary: Nets 5404 Secondary: 935-7300 | | | | and the second second descent of the second |
| | | Call Back: | | | |
| | BALEM COUNTY Primary: NETS 5402 Secondary: 769-2959 Backup: EMRAD | | | | |
| | | Call Back: | | | |
| | CUMBERLAND COUNTY Primary: NETS 5403 Secondary: 455-8500 Backup: EMRAD | | | | |
| | | Call Back: | | | |
| | NEW CASTLE COUNTY | | | | |
| | Primary: NETS 5408 Secondary: 302-738-3131 | Call Back: | | | |
| | KENT COUNTY | | | | |
| | Primary: NETS 5409 Secondary: 302-678-9111 | Call Back: | | | |
| 15 | U.S. COAST GUARD | | and the second se | | |
| MIN. | (Speak Only With Duty Desk) Primary: 215-271-4940 Secondary: 215-271-4800 | Call Back: | | | 1 Title 20 |

Reminder: Use NETS 5555 (conference call) for 15 min. notification(s) except for U.S. Coast Guard.

NOTES:



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COMMUNICATIONS LOG

INITIAL NOTIFICATION

EVENT REDUCTION

| TIME LIMIT | CLASSIFICATION: General Emergency ORGANIZATIONS/INDIVIDUALS | NAME OF CONTACT | DATE/ TIME | CALLER | NAME OF CONTACT, TIME |
|---------------|---|-----------------------|---------------|--------|--------------------------------|
| 20 MIN. | EMERGENCY DUTY OFFICER(EDO) Primary: Refer to Roster Secondary: (Contact One) Bill O'Malley Office: 3478 Home: 609-935-6136 Pager: 478-5674 Car: 922-0341 Jim Clancy Office: 3144 Home: 609-455-9110 Pager: 478-5073 Bob Hovey Office: 3463 Home: 609-678-8645 Pager: 478-5284 Car: 922-5622 Steve Funsten Office: 3115 Home: 215-358-0635 Pager: 478-5280 Marty Trum Office: 3645 Home: 609-358-7487 Page 478-5311 | * | | | |
| 20 MIN. | TECH. SUPP. SUPERVISOR(TSS) Primary: Refer to Roster Secondary: (Contact Cne) George Daves Office: 3071 Home: 609-455-3163 Pager: 478-5281 Dave Powell Office: 3065 Home: 609-467-8625 Pager: 478-5049 John DeDomenico Office: 3458 Home: 609-769-1660 Pager: 478-5381 Frank Hughes Office: 3458 Home: 609-769-2713 Pager: 478-5672 Larry Wagner Office: 3671 Home: 609-582-0067 Pager: 478-5332 | * | | | |

After TSC accivation, individual notification of the EDO and TSS is not required by the TSC1 or EOF1.

EC(ATT Pg. 7 of 10

EVENT

REDUCTION

| TIME LIMIT | CLASSIFICATION: General Emergency ORGANIZATIONS/INDIVIDUALS | NAME OF CONTACT | DATE/ TIME | CALLER | NAME OF CONTACT/ TIME |
|---------------|---|-----------------------|---------------|--------|--------------------------------|
| 30 MIN. | GEN. MANAGER - HOPE CREEK OPERATIONS (Contact One) | | | | |
| PALM. | | | | | |
| | Bob Hovey | | | | |
| | Office: 3478 | | | | |
| | Home: 609-678-8645 | | | | |
| | Pager: 478-5284 Car: 922-5622 | | | | |
| | Bill O'Malley | | | | 1 |
| | Office: 3478 | | | | 1.1.1.1 |
| | Home: 609-935-6136 | | | | 10.0 |
| | Pager: 478-5674 | | | | |
| | Pager: 478-5674 Car: 922-0341 | | | | |
| 30 MIN. | PUBLIC INFORMATION MANAGER NUCLEAR (Contact One) | * | | | |
| | | | | | 1 |
| | Bill Stewart | | | | |
| | Office: 1006 Home: 609-935-0923 | | | | |
| | | | | | 1 2 2 |
| | Pager: 478-5226 Michaele Camp | | | | |
| | Office: 1001 | | | 1 1 | |
| | Home: 302-529-9027 | | | | |
| | Pager: 478-5318 | | | | |
| | Chris Florentz | | | | |
| | Office: 1002 | | | | |
| | Home: 215-543-0729 | | | | 1. 1. 2. 2 |
| | Pager: 478-5367 | | | | |

COMMUNICATIONS LOG

INITIAL NOTIFICATION

* After ENC activation, notify the ENC and read the ICMF to the ENC Manager (NETS - 5300 or 273-1961).

ECG ATT 7 Pg. 8 of 10

| | COMMUNICATIONS LOG | INITIAL | NOTIFIC | ATION | EVENT REDUCTION |
|---------------|---|-------------------------------------|--|---|--------------------------------|
| TIME LIMIT | CLASSIFICATION: (UE/A/SAE) ORGANIZATIONS/INDIVIDUALS | NAME OF CONTACT | DATE/ TIME | CALLER | NAME OF CONTACT, TIME |
| NRC OI | PS CENTER COMMUNICATION INS | STRUCTIONS: | | | |
| | 1. Obtain the approved NH | RC Data She | et from | Communica | tor #2. |
| | 2. Read both the ICMF and Operations Center. (Fill in Communication | | | | e) |
| | 3. <u>IF</u> the NRC is request: the event, <u>THEN</u> obtain assistance staff. | | | | |
| | 4. <u>IF</u> requested by the NI request Communicator # on Communicator #1 log | #2 to comple | n an ope ete any | n phone l remaining | ine and calls |
| | N | OTE: | | | |
| | As manpower permits, the 1 additional communicator () continuous updates to the additional communicator s) considered are required to complete high priority Eme | NRC. The hould not b mitigate | an RO or assignme e made i the even | SRO) to nt of an f personr t or to | provide |
| 60 MIN. | NRC OPERATIONS CENTER (ICMF & NRC Data Sheet) Primary: (ENS) 301-951-0550 Secondary: 301-427-4259, 301-427-4059 | 6 | | | 0 |

ECG ATT 7 Pg. 9 of 10

COMMUNICATIONS LOG INITIAL NOTIFICATION REDUCTION

EVENT

| TIME LIMIT | CLASSIFICATION: General Emergency ORGANIZATIONS/INDIVIDUALS | NAME OF CONTACT | DATE/ TIME | CALLER | NAME OF CONTACT TIME |
|---------------|--|-----------------------|---------------|--------|-------------------------------|
| 60 MIN. | NRC RESIDENTS (Contact One) Charlie Marschall Office: 2962 or 935-3850 Home: 610-444-0181 Pager: 478-5772 Todd Fish Office: 2962 or 935-3850 Home: 302-426-1913 Steve Barr Office: 2962 or 935-3850 Home: 610-558-2802 Pager: 478-5072 Joe Schoppy Office: 2962 or 935-3850 Home: 609-384-1365 | | | | |
| 60 MIN. | EMERGENCY PREPAREDNESS (Contact One) Tom DiGuiseppi Office: 1517 Home: 609-455-6045 Pager: 478-5203 Craig Banner Office. 1157 Home: 609-728-5043 Pager: 478-5215 Jim Schaffer Office: 1575 Home: 609-299-2057 Pager: 478-5086 | ** | | | |

** Not Required After the EOF is Activated.



ECG ATT 7 Pg. 10 of 10

| | COMMUNICAT | IONS LOG | INITIAL | NOTIFIC | CATION | EVENT REDUCTION |
|------------|--|--|-----------------------|---------------|-----------|--------------------------------|
| TIME | CLASSIFICATIO | Emergency | NAME OF CONTACT | DATE/ TIME | CALLER | NAME OF CONTACT/ TIME |
| | NOTE: Externa Utiliti | l Affairs Repr es. | . will con | ntact the | e Board o | of Public |
| 90 MIN | Pager: Bryan Gorman Office: Home: Pager: Jan Moyle Office: | 1434 609-358-7211 478-5206 1433 302-455-0220 478-5100 1436 609-424-8522 | ** | | | |
| 90 MIN. | AMERICAN NUCL (ANI) | EAR INSURERS 203-561-3433 | * | | | |

* Not Required for Unusual Events to Notify ANI.
** Not Required <u>after</u> the EOF is <u>activated</u>.



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