50-289

1004.6
Revision 8
10/21/83

IMPORTANT TO SAFETY
NON-ENVIRONMENTAL IMPACT RELATED

THREE MILE ISLAND NUCLEAR STATION
UNIT NO. 1 EMERGENCY PLAN IMPLEMENTING PROCEDURE 1004.6
ADDITIONAL ASSISTANCE AND NOTIFICATION

Table of Effective Pages

Page	Revision	Page	Revision	Page	Revision	Page	Revision
1.0	6						
2.0	6						
3.0	4						
4.0	6						
5.0	8						
6.0	4						
7.0	8						
8.0	6						
9.0	1						
10.0	6						
11.0	6						
12.0	6						
13.0	6						
14.0	3						
15.0	3						
16.0	3						
17.0	3						
18.0	3						
19.0	3						
20.0	5						

X _____ 10/21/83
Signature Date

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Signature Date

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THREE MILE ISLAND NUCLEAR STATION
UNIT NO. 1 EMERGENCY PLAN IMPLEMENTING PROCEDURE 1004.6
ADDITIONAL ASSISTANCE AND NOTIFICATION

1.0 PURPOSE

To provide the Emergency Director with a directory of additional emergency response personnel, organizations and agencies by organizational duties, responsibilities and disciplines.

The Emergency Director is responsible for implementing this procedure.

2.0 ATTACHMENTS

2.1 Attachment I - Unit 1 Onsite Emergency Response Directory.

2.2 Attachment II - Unit 2 Onsite Emergency Response Directory.

2.3 Attachment III - Offsite Emergency Response Directory.

2.4 Attachment IV - Emergency Response Assistance Checklist.

2.5 Attachment V - Emergency telephone numbers for NRC notification.

3.0 EMERGENCY ACTION LEVELS

3.1 This procedure shall be implemented with the declaration of any class of emergency when additional emergency response personnel, organizations or agencies other than those listed on the relevant Emergency Plan Implementing Procedures are needed to assist TMI, or,

3.2 As requested by the Emergency Director.

4.0 EMERGENCY ACTIONS

4.1 In the event of a declared emergency at TMI that requires additional emergency response personnel, organizations or agencies, the following steps should be taken:

4.1.1 Determine the discipline of personnel or necessary equipment that will be needed for the class of emergency declared.

4.1.2 Refer to Attachment I, II, or III to find the appropriate discipline, choose the personnel, organization or agency wanted and telephone number of that organization.

4.1.3 Emergency telephone numbers for the NRC are listed in Attachment V.

4.2 When called party answers, provide the following message:

THIS IS _____ AT THE THREE MILE ISLAND NUCLEAR STATION UNIT 1
(name/title)

CALLING. WE HAVE DECLARED A _____ AT _____ HOURS.
(type of emergency) (time)

TMI REQUESTS YOUR ASSISTANCE AS FOLLOWS. (State any assistance required using Attachment IV if applicable).

4.2.1 Identify existing problem and give brief description of problem.

4.2.2 Identify necessary personnel/equipment needed and request assistance.

4.2.3 Be sure to identify telephone number that can be used by the assisting organization to call back.

4.2.4 Refer to Attachment IV for assistance to be provided.

4.3 If further assistance is required, repeat 4.1 and 4.2 as needed.

4.4 Additional sources of assistance may be requested as described in the INPO Emergency Resources Manual and INPO Voluntary Assistance handbook.

5.0 FINAL CONDITIONS

N/A

ATTACHMENT I

UNIT 1 ONSITE EMERGENCY RESPONSE DIRECTORY

NOTE: Numbers prefixed with 948 are site extensions.

OPERATIONS	WORK PHONE NO.
Ron Toole	948-8005
	948-8506
M. Ross	948-8015
	948-8202
EMERGENCY CONTROL CENTER (CONTROL ROOM)	
Shift Foreman's Office	948-8069
	948-8070
	948-8071
Control Room - Communications Console	9-944-0839
Control Room - Shift Foreman	948-8069
	948-8070
	948-8071
Control Room - Dose Assessment (RAC)	948-8069
	948-8070
	948-8071
	9-944-0839
Control Room Computer Area	948-8525

OPERATIONS SUPPORT CENTER	
OSC Coordinator	948-8083
Radiological Controls Technicians	948-8082
UNIT 1 TECHNICAL SUPPORT CENTER	
TSC Coordinator	948-8742
Engineers	948-8742
UNIT 1 INSTRUMENT SHOP	
Shop Area	948-8214
Offices	948-8072
	948-8073
	948-8074
	948-8213
PROCESSING CENTER	
Security - Duty Sergeant	948-8038
NRC	
TMI Site Office	948-1120

ATTACHMENT II

UNIT 2 ONSITE EMERGENCY RESPONSE DIRECTORY

NOTE: Numbers prefixed with 948 are site extensions.

OPERATIONS	WORK PHONE NUMBER
John Barton	948-8401
	948-8327
Unit 2 Site Operations	948-8326
Manager, Plant Operations TMI-2	948-4068
EMERGENCY CONTROL CENTER (CONTROL ROOM)	
Shift Foreman's Office	948-8068
Control Room-Communications Console	948-8066
	948-8067
Control Room-Shift Foreman	948-8066
	948-8067
Control Room-Dose Assessment	948-8066
	948-8067
Control Room-Computer Area	948-8067
OPERATIONS SUPPORT CENTER	
OSC Coordinator	948-8092
Radiological Control Technicians	948-8092

UNIT 2 TECHNICAL SUPPORT CENTER	
TSC Coordinator	948-8352
Engineers	948-8352
UNIT 2 INSTRUMENT LABORATORY	
Lab Area	948-8274
Offices	948-8156
	948-8272
	948-8273
	948-8155
TRAILER 214	
Unit 2 Security Sergeant	948-8594
NRC	
TMI Site Office	948-1120

ATTACHMENT III

OFFSITE EMERGENCY RESPONSE DIRECTORY

EMERGENCY OPERATIONS FACILITY COMMERCE PARK, HARRISBURG

General Numbers -	9-657-0471, 9-657-0564, 8966
Admin. Support -	9-657-2368, 9-657-2435, 9-657-2739
Chemistry -	9-657-0629, 9-657-0564
Tech. Functions Area -	9-657-0471

ANNEX TO THE EMERGENCY OPERATIONS FACILITY (CRAWFORD STATION)

Second Floor	First Floor
9-944-2614 M and C	9-944-3858 Security
9-944-3668 M and C	72-286 Security
9-944-2922 Radcon	
9-944-2972 Radcon	

ENVIRONMENTAL ASSESSMENT COMMAND CENTER COMMERCE PARK, HARRISBURG

General No.	9-657-3934
Gary Baker	9-657-3666
William Ressler	9-657-8805

TECHNICAL FUNCTIONS PARSIPPANY

Group Leader Technical Support	74-1-201-299-2111
	74-1-201-299-2113
	74-1-201-299-2249
	74-1-201-299-2246
Commercial Number	74-1-201-263-6500

POLICE

Pennsylvania State Police (24 Hours)	9-234-4051
Pennsylvania State Police Helicopters (0815-1615) (M-F)	9-783-5511, 944-7149, 783-1691
Police Forces in York County (24 Hours)	73-1-843-5111

FIRE

Londonderry Township Fire Department	9-911 or 9-236-7976
Middletown Fire Department - including:	9-911 or 9-944-6344
Union Hose Company	
Rescue Hose Company, No. 3	
Liberty Fire Company	
Bainbridge Fire Department (Lancaster Co.) (24 Hours)	9-911 or 73-1-653-2046
York County Fire Departments	9-911 or 73-1-843-5111

AMBULANCE

Londonderry Township Vol. Ambulance	9-911 or 9-236-7976
Middletown Ambulance Service	9-911 or 9-944-6344
Bainbridge Ambulance Service (Lancaster Co.) (24 Hours)	73-1-653-2001

STATION MEDICAL CONSULTANT

Dr. William Albright III	General 9-939-7831

HOSPITALS

Hershey Medical Center (Emergency Room)	9-534-8333
Harrisburg General Hospital	General 9-782-3131
	Emergency Room 9-782-3297

METROPOLITAN EDISON COMPANY AND GENERAL PUBLIC UTILITIES MANAGEMENT

Met-Ed - System Safety Director (0800-1700) (M-F)	73-1-215-921-6227
Met-Ed - Div. Safety Director (0800-1700) (M-F) Office	73-1-215-921-6024
	Home 73-1-215-373-0307
Met-Ed - Dispatcher, Lebanon (24 Hours)	73-1-272-1281
	*73-1-272-5623
	*During Duty Hours, Ask for Dispatch
Met-Ed - District Manager, Middletown	9-944-5111
General Public Utilities	
0830 - 1700	74-1-201-263-6500
after 1700	74-1-201-263-6111

GOVERNMENTAL AGENCIES

Dept. of Energy (24 Hours)	74-1-516-282-2200
NRC - Office of I and E, Region 1 (24 Hours)	73-1-215-337-5000
NRC - Middletown Office	717-948-1150
PA Dept. of Env. Res. (BRP)	9-787-2480
EPA - Region III Office (24 Hours) Emergency No.	73-1-215-597-9898

Civil Defense Organization (24 Hours)

Pennsylvania Emergency Management Agency		9-783-8150
Bureau of Radiation Protection (Nights, Weekends)		9-763-9041
		9-232-4028
		9-652-6304
Dauphin Co.		9-911 or 9-236-7976
Lancaster Co. (24 Hours)		73-1-299-8373
York Co.		73-1-843-5111
Cumberland Co.		9-238-9676
Lebanon Co.	(0800-1630)	73-1-272-7621, 272-2296
	73-1-272-2025 (After hours and weekends)	
U.S. Coast Guard (Harrisburg, PA)	(General)	9-782-3737
(Nights, Weekends) (24 Hours)		74-1-212-668-7055

Meteorological Information

National Weather Service (NWS)	9-782-3927
Cliff Goodall, NWS Chief Meteorologist (24 hrs.)	9-782-3936
Pa. Bureau of Air Quality Control	9-787-4324
(Susquehanna) River Forecast Center	9-782-3488

PARSIPPANY TECHNICAL FUNCTIONS GROUP

Group Leader Technical Support	74-1-201-299-2111
	74-1-201-299-2113
	74-1-201-299-2249

GPU NUCLEAR CORP. CONSULTANTS

Babcock and Wilcox, Lynchburg, VA (24 hours)			74-1-804-384-3413
Radiation Management Corp.	Emergencies	(0800-1700)	73-1-215-243-2990
		(1700-0800)	73-1-215-841-5141
	Office	(0800-1700)	73-1-215-243-2950

Pickard, Lowe and Garrick Assoc. Washington, D.C.	74-1-202-296-8633
Gilbert Associates Inc., Reading, PA	73-1-215-775-2600
Teledyne Isotopes, Westwood, NJ	74-1-201-664-7070
Burns and Roe, Paramus, NJ	74-1-201-265-2000
MPR Associates Inc., Washington, D.C.	74-1-202-659-2320
Institute of Nuclear Power Operations (24 hours-Emergency)	1-404-953-0904
Emergency Telecopier (0800 to 1700)	1-404-953-7526

CHEM-NUCLEAR SYSTEM, INC.

Barnwell After Hours	803-259-1782/1783
Corporate After Hours	206-827-0456
Marketing Representative, Larry Witt	203-677-0457

Special Needs:

Nature of Business	Emergency Contact	
1.	Transportation Scheduling, M. Mattingly	803-259-1781
2.	Billing Problems, A. Rodgers	803-259-1781
3.	Solidification, Demineralization, and Decontamination, G. Motl	803-256-0450
4.	Engineering Start-up and Training, J. Coffman	803-256-0450
5.	New Business Farmington, CT Office, P. Sigler	203-677-0457
6.	Shipment Questions or Discrepencies, J. Zawacki	803-259-1781
7.	Undefined Farmington, CT Office, P Sigler	203-677-0457

DOWNSTREAM RIVER WATER USERS

Brunner Island (PP and L) (24 Hours)	73-1-266-3691
Wrightsville Water Supply Company	73-1-252-3711
or	
Mr. Miller, V.P. of Water Co. (Unlisted)	9-564-8220

Columbia Water Company Plant (24 Hours)	73-1-684-2712
Lancaster Water Company (24 Hours)	73-1-684-5056
Safe Harbor Water and Power, Inc.	73-1-872-5441
	73-1-872-4697
	73-1-872-5442
	73-1-872-4698
	73-1-872-5443
Holtwood Generating Station	73-1-284-4101
Chester Water Authority (Exec. Manager)	73-1-215-876-8181, 8182
(24 Hours Ans. Svc.)	
Baltimore Water Supply Auth. Mr. Hudson (Bus. Hrs.)	74-1-301-396-1277
(Weekends, Holidays) (24 Hours)	74-1-301-396-5352
Emergency Room (Mr. Jones)	74-1-301-396-5352
(24 hours)	
or	
Water Facilities Division (Pumping and Purification)	74-1-301-396-0287
Walter Koterwas	

OTHER

Harrisburg International Airport Control Tower		9-944-4502
Middletown Line Department		8535 or 9-944-4621
York Company Office		73-1-846-7800
Lebanon Company Office	(Business Hours)	73-1-272-5661
	(Weekends, Holidays)	73-1-272-1281
Keystone Helicopter Corporation		73-1-215-644-4430
Capital Trailways Bus Company		9-233-7673

Conrail Railroad Train Movement Coordinator (24 hrs)	9-652-3772
	9-657-3552
	9-657-5414
Insurance - American Nuclear Insurers	74-1-203-677-7305
	or 9-1-800-243-3172/3173

UTILITIES

Pennsylvania Power and Light, Allentown, PA	73-1-215-770-5151
Philadelphia Electric - Peach Bottom (Gen.)	73-1-456-7014
(Operations Dept.)	Ext 223 or 423
(Whole Body Counting Dept.)	Ext 490 or 497 or 496
Baltimore Gas and Electric	74-1-301-234-5000
Dusquesne Light/Beaver Valley (Control Rm.)	73-1-412-643-8002
Dusquesne Light (Corporate)	73-1-412-456-6000
Nine Mile Point Unit 1 (Business Hours)	74-1-315-343-2110
(Control Room)	74-1-315-342-3046
Power Authority State of NY (James A. Fitzpatrick Plant)	
(General)	74-1-315-342-3840
Control Room Ext. 311	
Oyster Creek (Control Room)	74-1-609-693-6066
(Main Gate Desk at Guard House)	74-1-609-693-6950
Salem Nuclear Station	74-1-609-365-7000

EMERGENCY RESPONSE ASSISTANCE CHECKLIST

ATTACHMENT IV

		OYS. CRK	SALEM	PCH BTM	BER-WICK	CALV. CLIFFS
A.	Personnel					
1.	H.P. Supervisors	2	2	5	2	3
2.	H.P. Techs	5	5	20	5	10
3.	Radio Chem Supervisors	0	0	2	0	2
4.	Radiochem Techs	3	2	2	1	2
5.	Engr-Effl. Anl.	0	0	1	1	1
6.	TLD Reader	0	1	1	1	1
7.	EE-RMS Spec.	1	0	1	0	1
8.	Security Sgt.	1		0		2
9.	Sec. Officers	8		0		1
B.	Radiaton Detection Equipment					
1.	Survey Meter-Hi	20	6	12	5	8
2.	Survey Meter Hi-Telescoping	4	5	0	4	1

		OYS. CRK	SALEM	PCH BTM	BER-WICK	CALV. CLIFFS
3.	Survey Meter-Lo	5	5	4	10	8
4.	SAM II	0	1	0	2	1
5.	Portable Geli	1	1	1	1NaI	0
6.	Shield for Geli	1	1	1	1	0
7.	Computer and Output for Geli	1	1	1	0	0
8.	uR/hr ratemeter and recorder	0	0	0	1	0
9.	RM-14 Frisker	15	10	15	5	3
10.	Air Sampler-lo vol.	5	3	6	2	2
11.	Air Sampler-hi vol.	10	5	3	2	2
12.	Gas Sampler (for later Geli Analysis	0	0	2	2	0
13.	Pocket Dosimeters	200	100	100	20	200

		OYS. CRK	SALEM	PCH BTM	BER-WICK	CALV. CLIFFS
14.	Proportional Count	0	0	1	0	1
15.	Liq. Scint.	1	0	0	0	0
16.	Scaler-Timer and Detector	1	1	0	1	1
17.	Shields for above	1	1	0	1	0
18.	Rad tads	0	8	24	0	0
19.	Ion Telemetry	0	0	1	0	0
C.	Vehicles					
1.	Station Wagon or Truck or Van for Survey Team	1	1	1	1	1
2.	110 generator	1	1	0	1	0
3.	Inverter for vehicle battery	0	1	0	1	1

		OYS. CRK	SALEM	PCH BTM	BER-WICK	CALV. CLIFFS
4.	Geli Counting Lab Van	0	0	0	1	1
5.	Beta Count Lab	0	0	0	0	1
6.	Wind Speed and Direction Indic.	0	0	0	0	0
D.	Supplies					
1.	Coverall and Access. Set	2000	1000	500	500	0
2.	Disposable Coveralls	1000	1000	0	200	200
3.	Rainsuits	500	50	200	250	10
4.	Respirators	100	150	100	100	100
5.	Respirator Cartridges	1000	500	400	200	100
6.	Iodine Sampler Cartridges	500	200	200	250	100

		OYS. CRK	SALEM	PCH BTM	BER-WICK	CALV. CLIFFS
7.	Silver Zeolite Cartridges	0	200	0	0	0
8.	50 gal. plastic bags	5000	500	500	2000	1000
9.	Decon Kit (skin)	1	0	0	0	0
10.	Absolute Filter Vacuum Cleaner	2		0	1	0
11.	Filters for above	2	1	0	2	0
12.	Resp. Test Booth	0	0	0	0	0
13.	SCBA (4.5)	10	20	6	5	10
14.	SCBA Tanks	10	20	6	10	30
15.	Port. Air Comp.	0	1	0	0	0
16.	Glove Box for Sample Prep.	2	0	0	0	0
17.	Lead Bricks	0	20	0	100	500

		OYS. CRK	SALEM	PCH BTM	BER-WICK	CALV. CLIFFS
18.	1/4" Lead Sheet 4x4x1/4	50	10	10	20	100
19.	Lead Blankets	0		25	15	100
20.	Air Sample Papers	1000	200	200	900	10000
21.	Radiacwash/gal	0	0	55	55	5
22.	Rad. Cal. Source	0	0	0	2	0
23.	Misc. Std. for Lab Equip.	1	0	0	1	0

ATTACHMENT V

EMERGENCY TELEPHONE NUMBERS FOR NRC NOTIFICATION

	TELEPHONE SYSTEM	TELEPHONE NUMBER
1.	Emergency Notification System to NRC Operations Center	(Lift Receiver from Cradle)
2.	Commercial Telephone System to NRC Operations Center (via Bethesda Central Office)	202/951-0550
3.	Commercial Telephone System to NRC Operations Center (via Silver Spring Central Office)	301/427-4056
4.	Health Physics Network to NRC Operations Center	*22 (Touch-Tone) 22 (Rotary Dial)
5.	Commercial Telephone System to NRC Operator (via Bethesda Central Office)	301/492-7000

"TEMPORARY CHANGE"

Three Mile Island Nuclear Station Temporary Change Notice (TCN)

NOTE: Instructions and guidelines in AP1001A must be followed when completing this form.

12. TCN No. 1-83-0227 (From TCN Log Index)

13. Implementation Date 11/1/83

SS/SF Signature J R Powles

1. **Procedure** 1004.3 (No.) 9 (Present Rev. No.) Site Emergency (Title)

2. **Change** (Include page numbers, paragraph numbers, and exact wording of change. Attach additional sheets if necessary and provide the generic nature of the change on this sheet.)

Page 28.0, Attachment 1, Section IV. - To be replaced by a new Attachment 1 Section IV

3. **Reason for Change:**

4. **Duration of TCN** - No longer than ninety days from implementation date of TCN or as in (a) or (b) below whichever occurs first.

(a) TCN will be cancelled by a procedure revision issued as a result of a Procedure Change Request to be submitted by J. Beaver (Individual Submitting TCN) (Submit PCR as soon as possible) ☑

(b) TCN is not valid after _____ ☐
(Fill in circumstances which will result in TCN being cancelled)

5. Is procedure "Important to Safety"? ..... yes ☑ no ☐
If "Yes" a safety evaluation is required (side 2).

6. Is procedure "Environmental Impact Related"? ..... yes ☐ no ☑
If "Yes" an environmental impact evaluation is required (side 2).

7. Does the change effect the intent of the original procedure? ..... yes ☐ no ☑

NOTE: If answers to #5, 6 and 7 are "no" the change may be approved by the Shift Supervisor.

NOTE: If answer to #7 is "yes" the change must be reviewed and approved in accordance with Table 2 prior to implementation.

NOTE: If answer to #7 is "no" and answers to #5 or 6 are "yes" change may be either (a) two member reviewed or (b) reviewed and approved in accordance with table 2.

Review Signatures:

8. Change Recommended By: J Beaver Date 10/26/83

9. * Procedure Owner Concurrence W H Brown Date 10/26/83

* Responsible Technical Reviewer, Responsible Office Department Head, or his Designee may concur if Procedure Owner is unavailable
* May be by Telecon

10. Tech. Functions Rep. Notified (If reqd.) N/A Date _____

11. Approval(s):

(a) Two Members of the GPUN Mng. Staff Route

1. _____ Signature Date

2. _____ Signature Date

Within fourteen (14) days: (Approval per AP 1001A must occur)

_____ Signature Date

_____ Signature Date

(b) Normal Route (Per AP1001A):

(ISR) J. A. Brady 10/27/83 Signature Date

X [illegible] 10/27/83 Signature Date

OPS James R Powles 11/1/83

(c) SS Approval Only: (This approval only used if anwers to questions #5, 6 and 7 are all "No".)

_____ SS Signature Date

14. **TCN is Cancelled** _____ Shift Supervisor & Shift Foreman _____ Date

Three Mile Island Nuclear Station
Safety/Environmental Impact Evaluation

TCN No 1 - 83 - 2227

1. **Procedure** 1004.3 (No.) Site Emergency (Title)

2. **Safety Evaluation**

Does the attached procedure change:

*(a) increase the probability of occurrence or the consequences of an accident or malfunction of equipment important to safety? ..... yes ☐ no ☑

*(b) create the possibility for an accident or malfunction of a different type than any evaluated previously in the safety analysis report? ..... yes ☐ no ☑

*(c) reduce the margin of safety as defined in the basis for any technical specification? ..... yes ☐ no ☑

Details of Evaluation (Explain why answers to above questions are "no". Attach additional pages if required.)

This change simply inserts a new logic diagram for Protective Action Recommendations. It does not increase the probability or possibility of an accident nor reduce the margin of safety as defined in the Tech Specs.

Evaluation By Jerry R Beaver Date 11-01-83

*If any of these questions are answered "YES" the change must be reviewed and approved by the NRC prior to implementation.

3. **Environmental Impact Evaluation**

Does the attached procedure change:

(a) possibly involve a significant environmental impact? ..... yes ☐ no ☐

(if 3(a) is "yes", answer questions (b) and (c) and fill in "Details of Evaluation" below. If no, state why by filing in the "Details of Evaluation" below.)

*(b) have a significant adverse effect on the environment? ..... yes ☐ no ☐

*(c) involve a significant environmental matter or question not previously reviewed and evaluated by the N.R.C. ..... yes ☐ no ☐

Details of Evaluation (Attach additional pages if required)

N/A

Evaluation By _____ Date _____

*If any of these questions are answered "YES" the change must be reviewed and approved by the NRC prior to implementation.

4. (1) Normal Approval(s) (Per AP 1001A)	4. (2) If "Two (2) members of the GPUN management staff route:	Within fourteen (14) Days Approval per AP 1001A
(SR) Sect. Brady 10/27/83 Signature Date	Signature Date	Signature Date
X [illegible] 10/27/83 Signature Date	Signature Date	Signature Date

ATTACHMENT I SECTION IV

PROTECTIVE ACTION RECOMMENDATION GUIDELINES

THESE RECOMMENDATIONS MAY BE DELIVERED ONLY BY THE EMERGENCY DIRECTOR

1. Consideration shall be given to sheltering if:

   a. Release time is expected to be short (Puff release, < 2 hours).

   (AND)

   b. Evacuation could not be well underway prior to expected plume arrival due to short warning time, high wind speeds, and/or foul weather.

2. Consideration shall be given to evacuation if:

   a. A release is expected to occur with projected doses approaching or exceeding:

      1 Rem Whole Body and/or

      5 Rem Child Thyroid

      (AND)

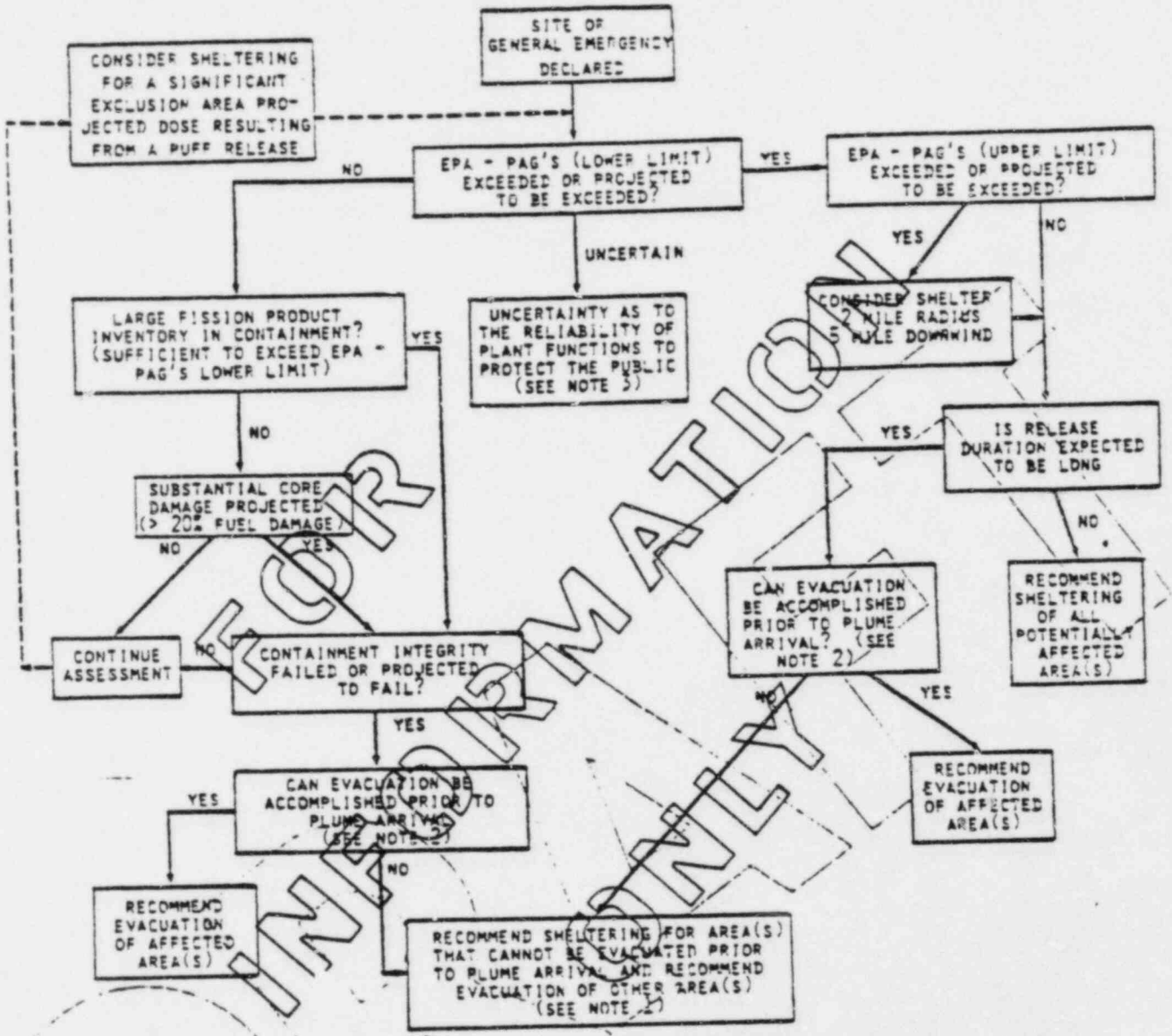
   b. Release time is expected to be long (> 2 hours)

      (AND)

   c. Evacuation can be well underway prior to plume arrival for above release, based uoon wind speed and travel conditions.

LOGIC DIAGRAM

DEVELOPMENT OF PROTECTIVE ACTION RECOMMENDATIONS (PAR)



NOTE 1: CONSIDERATION SHOULD BE GIVEN TO THE PROJECTED EXPOSURE TO BE RECEIVED TO A PERSON IF HE SHELTERS VICE EVACUATES. IN SO DOING, YOU MUST FACTOR RELEASE DURATION, RELEASE MAGNITUDE AND ASSUME A PROTECTION FACTOR OF 2 FOR UP TO THE FIRST 2 HOURS OF RELEASE DURATION AND A PF OF 1 FOR > 2 HOURS RELEASE DURATION. THE PATHWAY OF LEAST EXPOSURE SHOULD BE CHOSEN.

NOTE 2:

TMI EVACUATION TIME ESTIMATES

	LOWER (HOURS)	UPPER (HOURS)
BEST ESTIMATE (NIGHT)	5.25	8.50
TYPICAL WEEKDAY (NORMAL)	5.75	8.50
ADVERSE WEATHER	8.00	11.50

LOWER - GOOD STATE OF EMERGENCY READINESS (SLOW SCENARIO)
UPPER - LACK OF ADEQUATE PREPARATION TIME (FAST SCENARIO)

NOTE 3: IN EXERCISING THE JUDGMENT AS TO THE NEED FOR PROTECTIVE ACTION RECOMMENDATIONS, ANY UNCERTAINTY CONCERNING THE STATUS OF PLANT FUNCTIONS NEEDED FOR PROTECTION OF THE PUBLIC, THE LENGTH OF TIME THE UNCERTAINTY EXISTS, THE PROSPECTS FOR EARLY RESOLUTION OF AMBIGUITIES, AND THE POTENTIAL DEGRADATION OF THE PLANT FUNCTIONS NEEDED FOR PROTECTION OF PUBLIC SHOULD BE CONSIDERED; I.E., SIGNIFICANT UNCERTAINTY AS TO THE RELIABILITY OF PLANT FUNCTIONS TO PROTECT THE PUBLIC EXTENDING BEYOND A REASONABLE TIME PERIOD IS A SUFFICIENT BASIS FOR MAKING A PROTECTIVE ACTION RECOMMENDATION TO SHELTER WITHIN A 2 MILE RADIUS OF THE PLANT AND 5 MILES DOWNWIND. CONTINUE PLANT ASSESSMENT.

"TEMPORARY CHANGE"

Three Mile Island Nuclear Station Temporary Change Notice (TCN)

NOTE: Instructions and guidelines in AP1001A must be followed when completing this form.

12. TCN No. 1-83-0224 (From TCN Log Index)

13. Implementation Date 12/31/83

SS/SF Signature [signature]

1. Procedure 1004.10 (No) 6 (Present Rev No) Onsite/Offsite Radiological Monitoring (Title)

2. Change (Include page numbers, paragraph numbers, and exact wording of change. Attach additional sheets if necessary and provide the general nature of the change on this sheet.)
See attached copies of pages 1, 2, and 3

3. Reason for Change:
Update and correct the procedure.

4. Duration of TCN - No longer than ninety days from implementation date of TCN or as in (a) or (b) below whichever occurs first.

(a) TCN will be cancelled by a procedure revision issued as a result of a Procedure Change Request to be submitted by J. Whitaker (Individual Submitting TCN) (Submit PCR as soon as possible) ☒

(b) TCN is not valid after _____ (Fill in circumstances which will result in TCN being cancelled) ☐

5. Is procedure "Important to Safety"? ..... yes ☒ no ☐
If "Yes" a safety evaluation is required (side 2).

6. Is procedure "Environmental Impact Related" ..... yes ☐ no ☒
If "Yes" an environmental impact evaluation is required (side 2).

7. Does the change effect the intent of the original procedure? ..... yes ☐ no ☒

NOTE: If answers to #5, 6 and 7 are "no" the change may be approved by the Shift Supervisor.

NOTE: If answer to #7 is "yes" the change must be reviewed and approved in accordance with Table 2 prior to implementation.

NOTE: If answer to #7 is "no" and answers to #5 or 6 are "yes" change may be either (a) two member reviewed or (b) reviewed and approved in accordance with table 2.

Review Signatures:

8. Change Recommended By J. L. Whitaker OK Date 10/27/83

9. * Procedure Owner Concurrence X [signature] Date _____

* Responsible Technical Reviewer, Responsible Office Department Head, or his Designee may concur if Procedure Owner is unavailable
* May be by Telecon

10. Tech. Functions Rep. Notified (If read.) OK [signature] - Not Required Date 10/28/83

11. Approval(s):

(a) Two Members of the GPUN Mng. Staff Route

1. _____ Signature Date

2. _____ Signature Date

Within fourteen (14) days: (Approval per AP 1001A must occur)

_____ Signature Date

_____ Signature Date

(b) Normal Route (Per AP1001A):

(ISR) J. A. Brady 10/28/83 Signature Date

X [signature] 10/28/83 Signature Date

(OSC) James F. Fowler 10/31/83

(c) SS Approval Only. (This approval only used if anwers to questions #5, 6 and 7 are all "No".)

_____ SS Signature Date

14. TCN is Cancelled _____ Shift Supervisor & Shift Foreman _____ Date

INFORMATION ONLY

8-82 A0001132 A

THREE MILE ISLAND NUCLEAR STATION
UNIT NO. 1 EMERGENCY PLAN IMPLEMENTING PROCEDURE 1004.10
ONSITE/OFFSITE RADIOLOGICAL MONITORING

1.0 PURPOSE-

The purpose of this procedure is to provide guidance to radiation monitoring teams for adequate monitoring of radiation levels, following the accidental release of radioactive materials to the environment. The procedure establishes monitoring team actions to be performed to supplement normal Radiological Controls procedures. The Radiation Monitoring Team is responsible for implementing this procedure.

2.0 ATTACHMENTS

2.1 Attachment 1, Radiation Survey/Smear Log

2.2 Attachment 2, Team Exposure Log

3.0 EMERGENCY ACTION LEVELS

3.1 This procedure is to be initiated upon the direction of the Radiological Assessment Coordinator.

4.0 EMERGENCY ACTIONS

INITIALS

____4.1 Proceed to the Processing Center/EACC and obtain an emergency kit, instrument kit, air sampler, portable radio, magnetic antenna, pager, and emergency respirators. (if vehicle is not equipped with an Env. and Rad. frequency radio)

NOTE:	If EACC personnel intend to take air samples in areas inaccessible to vehicles (eg. Shelley Island), a gasoline powered generator should be obtained for this purpose. The generator should have adequate fuel supply and should be started to ensure operability prior to departing.

____4.2 Verify seals on the emergency kit and then operationally check radiation meters and portable air sampler. (Battery Check, Air Flow Check, Visual Inspection, check calibration sticker, check source check tag, as applicable).

__ __4.3 If emergency kit seals were broken, conduct a brief inventory of equipment.

____4.4 Prior to leaving the Processing Center/EACC conduct a radio check with the Radiological Assessment Coordinator (RAC)/Environmental Assessment Coordinator (EAC) using freq. 1 and with the "CG" switch on. Inform the RAC/EAC of your telephone pager number.

____4.5 Obtain an emergency vehicle at the Processing Center/EACC. This vehicle must have a cigarette lighter socket or installed 110V power supply if the TCS air sampler is to be used.

____4.6 Ensure your dose rate meter is turned on from the time you leave the Processing Center/EACC.

____4.7 Proceed to the designated monitoring location or other location as directed by the RAC/EAC. (See map or directions in emergency kit for specifically designated monitoring point locations.)

____4.8 Perform radiological surveys (as directed by the RAC/EAC).

4.8.1 To perform radiation surveys:

Take an open window reading at waist level, then take a closed window reading at waist level. Enter these readings on the Attachment I. Report closed window readings to the RAC/EAC.

4.8.2 Perform contamination surveys if directed by the RAC/EAC as follows:

Obtain smears and coin envelopes from emergency kit, label envelope with date, time and location. Wipe the smear over a 100 cm^2 (4 in. x 4 in.) area. Count the

smear with E140N (or equiv.) if background is less than 300 CPM. If background is too high, move to an area of acceptable background in order to count smears. Enter gross CPM and BKG CPM on Attachment I. Subtract background from gross CPM to obtain net CPM. Report net CPM for each smear to the RAC/EAC. Save smears in coin envelopes for later analysis as directed by the RAC/EAC.

4.8.3 Perform air samples in accordance with Airborne Radioactivity Sampling and Analysis, Procedure 1004.31.

____4.9 Call in sampling data to the RAC/EAC and await further instructions.

____4.10 If radio communications are lost and the pager is activated, attempt to re-establish radio communications with the RAC/EAC. If radio communications cannot be re-established, attempt to contact another monitoring team to relay information. If contact cannot be established, drive to the nearest telephone and call the RAC at 946-8069, 948-8070, 948-8071 or the EACC (if transfer has been made) at 944-3737, 944-2648, or 944-6709. of monitoring team control occurred 657-3666.

____4.11 Minimize personnel exposures by moving out of areas of high radiation when recording data or awaiting further instructions.

____4.12 Ensure all team members keep track of their exposure on Attachment II.

____4.13 Maintain all completed Attachment I's for permanent records. Request direction from the RAC/EAC as to the disposition of these completed forms.

THREE MILE ISLAND NUCLEAR STATION
UNIT NO. 1 EMERGENCY PLAN IMPLEMENTING PROCEDURE 1004.10
ONSITE/OFFSITE RADIOLOGICAL MONITORING

1.0 PURPOSE

The purpose of this procedure is to provide guidance to radiation monitoring teams for adequate monitoring of radiation levels, following the accidental release of radioactive materials to the environment. The procedure establishes monitoring team actions to be performed to supplement normal Radiological Controls procedures. The Radiation Monitoring Team is responsible for implementing this procedure.

2.0 ATTACHMENTS

2.1 Attachment I, Radiation Survey/Smear Log

2.2 Attachment II, Team Exposure Log

3.0 EMERGENCY ACTION LEVELS

3.1 This procedure is to be initiated upon the direction of the Radiological Assessment Coordinator.

4.0 EMERGENCY ACTIONS

INITIALS

____4.1 Proceed to the Processing Center/EASC and obtain an emergency kit, instrument kit, air sampler, portable radio, ~~magnetic antenna~~ (if vehicle is not equipped with ~~magnetic antenna~~ an Env. and Rad frequency radio) pager, and emergency respirators.

NOTE:	If EACC personnel intend to take air samples in areas inaccessible to vehicles (eg. Shelley Island), a gasoline powered generator should be obtained for this purpose. The generator should have adequate fuel supply and should be started to ensure operability prior to departing.

____4.2 Verify seals on the emergency kit and then operationally check radiation meters and portable air sampler. (Battery Check, Air Flow Check, Visual Inspection, check calibration sticker, check source check tag, as applicable).

____4.3 If emergency kit seals were broken, conduct a brief inventory of equipment.

____4.4 Prior to leaving the Processing Center/EACC conduct a radio check with the Radiological Assessment Coordinator (RAC)/Environmental Assessment Coordinator (EAC) using freq. 1 and with the "CG" switch on. Inform the RAC/EAC of your telephone pager number.

____4.5 Obtain an emergency vehicle at the Processing Center/EACC. This vehicle must have a cigarette lighter socket or installed 110V power supply if the TCS air sampler is to be used.

____4.6 Ensure your dose rate meter is turned on from the time you leave the Processing Center/EACC.

____4.7 Proceed to the designated monitoring location or other location as directed by the RAC/EAC. (See map or directions in emergency kit for specifically designated monitoring point locations.)

____4.8 Perform radiological surveys (as directed by the RAC/EAC).

4.8.1 To perform radiation surveys:
First take an open window reading at waist level, then take a closed window reading at waist level. Enter these readings on the Attachment I. Report the [redacted] readings to the RAC/EAC.

4.8.2 Perform contamination surveys if directed by the RAC/EAC as follows:
Obtain smears and coin envelopes from emergency kit, label envelope with date, tim and location. Wipe the smear over a 100 cm^2 (4 in. x 4 in.) area. Count the

INFO

smear with E140N (or equiv.) if background is less than 300 CPM. If background is too high, move to an area of acceptable background in order to count smears. Enter gross CPM and BKG CPM on Attachment I. Subtract background from gross CPM to obtain net CPM. Report net CPM for each smear to the RAC/EAC. Save smears in coin envelopes for later analysis as directed by the RAC/EAC.

4.8.3 Perform air samples in accordance with Airborne Radioactivity Sampling and Analysis, Procedure 1004.31.

____4.9 Call in sampling data to the RAC/EAC and await further instructions.

____4.10 If radio communications are lost and the pager is activated, attempt to re-establish radio communications with the RAC/EAC. If radio communications cannot be re-established, attempt to contact another monitoring team to relay information. If contact cannot be established, drive to the nearest telephone and call the EACC at 948-8069, 948-8070, 948-8071 or the EACC (if transfer has ~~been made~~ occurred of monitoring team control) at 667-3566 ~~or 948-8072~~.

____4.11 Minimize personnel exposures by moving out of areas of high radiation when recording data or awaiting further instructions.

____4.12 Ensure all team members keep track of their exposure on Attachment II.

____4.13 Maintain all completed Attachment I's for permanent records. Request direction from the RAC/EAC as to the disposition of these completed forms.

INFO

"TEMPORARY CHANGE"

Three Mile Island Nuclear Station Temporary Change Notice (TCN)

NOTE: Instructions and guidelines in AP1001A must be followed when completing this form

12. TCN No. 1 - 83 - 0125 (From TCN Log Index)

13. Implementation Date 10/31/83

SS/SF Signature [signature]

1. **Procedure** 1004.29 (No) 3 (Present Rev. No) Activation of the O.S.C. (Title)

2. **Change** (Include page numbers, paragraph numbers, and exact wording of change. (Attach additional sheets if necessary and provide the generic nature of the change on this sheet.)
Update procedure to reflect new layout and method of operation.

3. **Reason for Change:**
NRC recommendations and periodic review

4. **Duration of TCN** - No longer than ninety days from implementation date of TCN or as in (a) or (b) below whichever occurs first.
   (a) TCN will be cancelled by a procedure revision issued as a result of a Procedure Change Request to be submitted by J. L. Whitehead (Individual Submitting TCN) (Submit PCR as soon as possible) ☒
   (b) TCN is not valid after ______ (Fill in circumstances which will result in TCN being cancelled) ☐

5. Is procedure "Important to Safety"? .... yes ☒ no ☐
   If "Yes" a safety evaluation is required (side 2).
6. Is procedure "Environmental Impact Related"? .... yes ☐ no ☒
   If "Yes" an environmental impact evaluation is required (side 2).
7. Does the change effect the intent of the original procedure? .... yes ☐ no ☒

NOTE: If answers to #5, 6 and 7 are "no" the change may be approved by the Shift Supervisor.

NOTE: If answer to #7 is "yes" the change must be reviewed and approved in accordance with Table 2 prior to implementation.

NOTE: If answer to #7 is "no" and answers to #5 or 6 are "yes" change may be either (a) two member reviewed or (b) reviewed and approved in accordance with table 2.

Review Signatures:

8. Change Recommended By: Jeffrey L. Whitehead [signature] Date 10/26/83
9. * Procedure Owner Concurrence x [signature] Date 10/28/83
   - Responsible Technical Reviewer, Responsible Office Department Head, or his Designee may concur if Procedure Owner is unavailable
   - May be by Telecon
10. Tech. Functions Rep. Notified (If reqd.) N/A [signature] Date 10/28/83

11. Approval(s):

(a) Two Members of the GPUN Mng. Staff Route

1. ______ Signature ______ Date
2. ______ Signature ______ Date

Within fourteen (14) days: (Approval per AP 1001A must occur)

______ Signature ______ Date

______ Signature ______ Date

(b) Normal Route (Per AP1001A):

(ISR) [signature] 10/27/83
Signature Date

x [signature] 10/28/83
Signature Date

(OPS) [signature]

(c) SS Approval Only: (This approval only used if anwers to questions #5, 6 and 7 are all "No".)

______ SS Signature ______ Date

14. **TCN is Cancelled** ______ Shift Supervisor & Shift Foreman ______ Date

6-82 A0001132 A

IMPORTANT TO SAFETY
NON-ENVIRONMENTAL IMPACT RELATED

THREE MILE ISLAND NUCLEAR STATION
UNIT NO. 1 EMERGENCY IMPLEMENTING PROCEDURE 1004.29
ACTIVATION OF THE OPERATIONS SUPPORT CENTER

Table of Effective Pages

Page	Revision	Page	Revision	Page	Revision	Page	Revision
1.0	3						
2.0	3						
3.0	3						
4.0	3						
5.0	3						

Unit 1 Staff Recommends Approval

Approval _____ Date _____
Cognizant Dept. Head

Unit 1 PORC Recommends Approval

_____ Date 11/12/81
Chairman of PORC

Manager TMI I Approval

_____ Date 11/13/81

QA Modifications/Operations Mgr

_____ Date _____

Document ID: 0033W

THREE MILE ISLAND NUCLEAR STATION
UNIT NO. 1 EMERGENCY PLAN IMPLEMENTING PROCEDURE 1004.29
ACTIVATION OF THE OPERATIONS SUPPORT CENTER

1.0 PURPOSE

The purpose of this procedure is to provide guidelines for the Operations Support Center Coordinator to activate the Operations Support Center. The Operations Support Center Coordinator is responsible for implementing this procedure.

2.0 ATTACHMENTS

2.1 Attachment I, Operations Support Center Floor Plan.

3.0 EMERGENCY ACTION LEVELS

3.1 This procedure is to be initiated upon declaration of any of the following:

3.1.1 Alert as determined by the Alert Procedure, 1004.2.

3.1.2 Site Emergency as determined by the Site Emergency procedure 1004.3.

3.1.3 General Emergency as determined by the General Emergency procedure, 1004.4.

3.1.4 As directed by the Emergency Director.

4.0 EMERGENCY ACTIONS

Initials

____4.1 The Operations Support Center Coordinator will activate the OSC by ensuring completion of the following:

____4.1.1 Announce to the personnel in the OSC area that you are the Operations Support Center Coordinator and fill in your name on the OSC Manning Status Board. Have other coordinators (Rad Con Coordinator, Chemistry Coordinator, and Emergency Maint. Coordinator) enter their names on the Status Board and announce themselves as they arrive.

Activate the Maintenance and Instrument Phone Line (M and I) and obtain information pertaining to the emergency from the phonetalker in the Emergency Control Center.

4.1.5. Establish a roster of personnel at the OSC and track teams as they are dispatched and return using the Team Tracking Status Board.

___4.1.2 Assign a phonetalker to man the M and I (Maintenance and Instrumentation) Phone (activate line) and to Log all appropriate messages sent and received, on the Telephone Communications Logsheet (Attachment III of the Communications and Recordkeeping procedure, 1004.5).

___4.1.3 Initiate and maintain log in accordance with (the OSC) Communications and Recordkeeping, procedure 1004.5.

___4.1.4 Establish access control at the OSC so that all personnel must frisk prior to entering the OSC if radiological problems exist or are expected to exist. Refer to Attachment I for suggested frisking locations.

___4.1.5 As directed by the Radiological Assessments Coordinator/Operations Coordinator (Radiological Assessment Coordinator) implement the following procedures:

___a. Onsite Monitoring and Offsite Radiological 1004.10

___b. Offsite Monitoring 1004.11

___c. Search and Rescue 1004.18

___d. In Plant Radiological Controls during Emergencies 1004.9

Controls During Emergencies
d. Emergency Repair/Operations 1004.21

___e. Any other procedure as directed by the Radiological Assessment Coordinator/Operations Coordinator.

7
____4.1.6 If directed to dispatch monitoring teams, ensure vehicles are available at the processing center. Assign a driver, as needed, to accompany the Rad Con Technician.
Obtain vehicle keys from:

a. Rad Con for the Rad Con Van

H. P. van for the I and C vehicle

b. Maintenance

I and C vehicle

c. Other vehicles as needed.

8
____4.1.7 If accountability is being conducted, collect all security badges and turn them over to the Site Security Officer who will be dispatched to pick them up.

: NOTE: All personnel must retain their keycards. :

____4.1.8 Inform the Emergency Director, via the communicator, that the Operations Support Center is Operational.

4.1.9 As Onsite Duty Roster personnel arrive, turn over duties to them as time permits. Ensure that their name is filled on the OSC Manning Status Board and that an announcement is made in the OSC area when they assume your duties.

5.0 FINAL CONDITIONS

4.1.10 When all coordinator positions are filled with Onsite Duty Roster personnel, establish operations of the OSC per the floor plan in Attachment I and direct excess personnel to the established areas on Attachment I.

Initials

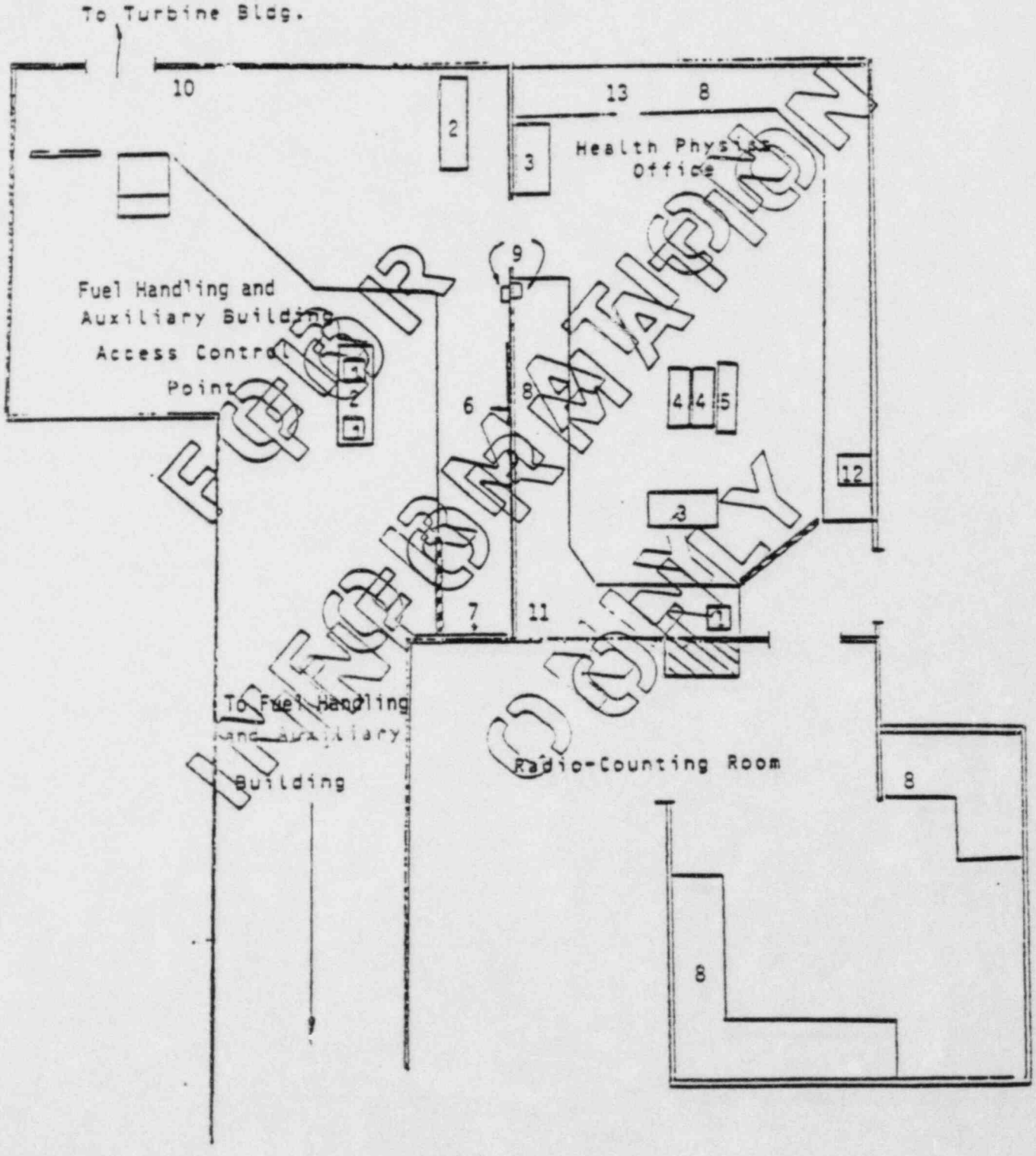
____5.1 The Operations Support Center will be operational with muster areas established for duty section personnel and communications established on the Operational Line.

4.1.11 Periodically brief personnel in the OSC regarding current plant status and projected course of events.

____5.2 Duty section personnel are available for assignment as necessary.

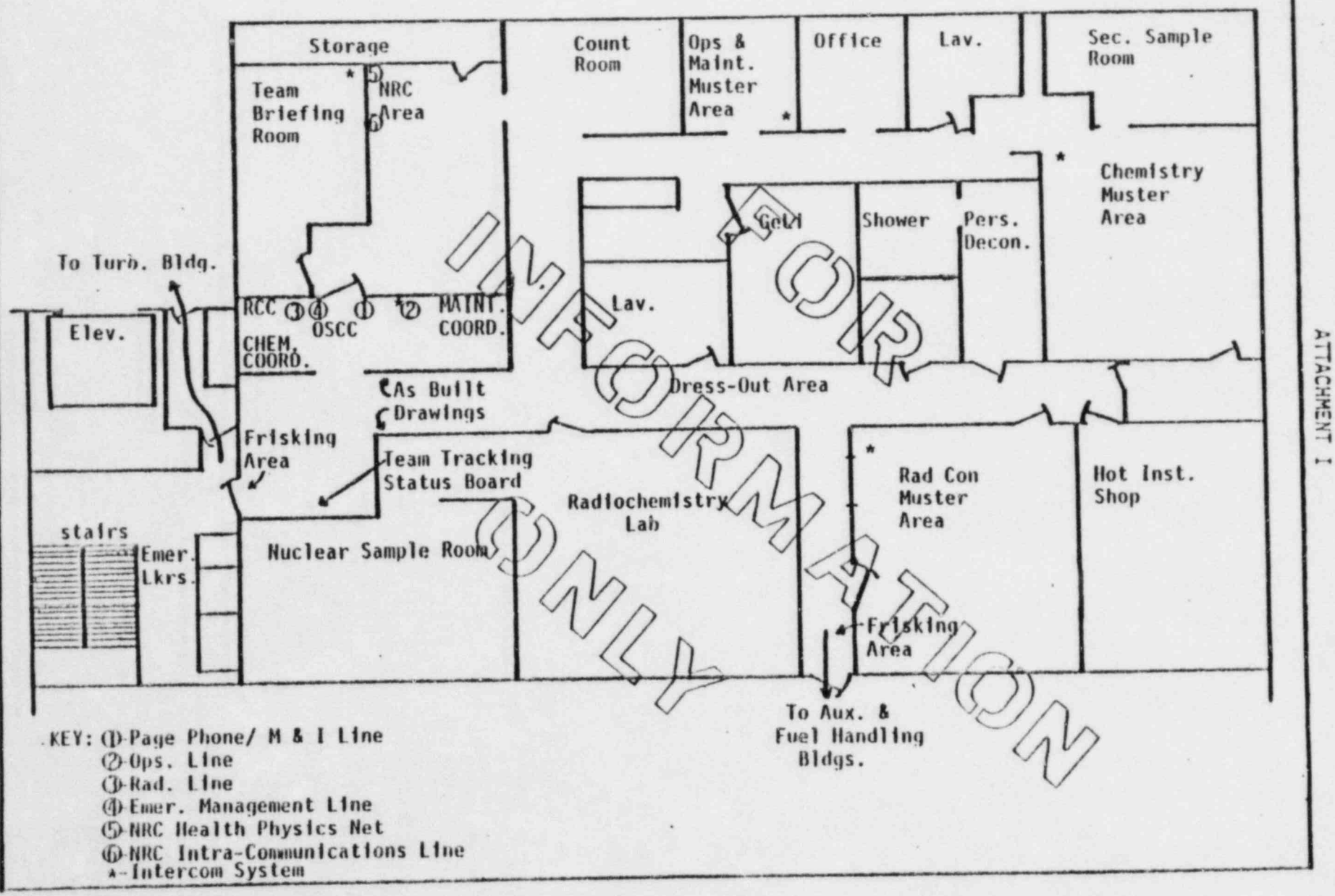
ATTACHMENT I

OPERATIONS SUPPORT CENTER OFFICE LAYOUT-HP



OSC FLOOR PLAN

ATTACHMENT 1



ATTACHMENT I

OPERATIONS SUPPORT CENTER OFFICE LAYOUT-HP

Key to OSC Equipment

1. RM-14 with HP-210 Probe
2. Table
3. Desk
4. File Cabinets
5. Storage Cabinet for Instrumentation
6. Status Boards
7. REMP Map
8. Cabinets
9. Plant Page Phone
10. First Aid Cabinet
11. Emergency Locker (Flow diagrams, prints, etc.)
12. High Rad area Key Locker
13. Xerox Copier

Equipment in Radio-Counting Room:

Ludlum-2000 beta-gamma Counter-Scaler

Wide-Beta

Ortec beta-gamma Counter-Scaler

Tri-Carb Liquid Scintillation

Nuclear Measurements Corp. beta-gamma, alpha Counter-Scalers

Stabilized Assay Meters

1004.29
Revision 3

THREE MILE ISLAND NUCLEAR STATION
UNIT NO. 1 EMERGENCY PLAN IMPLEMENTING PROCEDURE 1004.29
ACTIVATION OF THE OPERATIONS SUPPORT CENTER

1.0 PURPOSE

The purpose of this procedure is to provide guidelines for the Operations Support Center Coordinator to activate the Operations Support Center. The Operations Support Center Coordinator is responsible for implementing this procedure.

2.0 ATTACHMENTS

2.1 Attachment 1, Operations Support Center Floor Plan.

3.0 EMERGENCY ACTION LEVELS

3.1 This procedure is to be initiated upon declaration of any of the following:

3.1.1 Alert as determined by the Alert Procedure, 1004.2.

3.1.2 Site Emergency as determined by the Site Emergency procedure 1004.3.

3.1.3 General Emergency as determined by the General Emergency procedure, 1004.4.

3.1.4 As directed by the Emergency Director.

4.0 EMERGENCY ACTIONS

Initials

____ 4.1 The Operations Support Center Coordinator will activate the OSC by ensuring completion of the following:

____ 4.1.1 Announce to the personnel in the OSC area that you are the Operations Support Center Coordinator and fill in your name on the OSC manning Status Board. Have other coordinators enter their names on the Status Board as they arrive and announce themselves (Rad Con Coordinator, Chemistry Coordinator, and Emergency Maint. Coord.)

____4.1.2 Assign a phonetalker to ~~man~~ activate the 1/ and 2/ Phone maintenance instrumentation Line and to Log all appropriate messages sent and received, on the Telephone Communications Logsheet (Attachment III of the Communications and Recordkeeping procedure, 1004.5).

____4.1.3 Initiate and maintain the OSC log in accordance with Communications and Recordkeeping, procedure 1004.5.

____ 4.1.4 Establish access control to the OSC so that all personnel must frisk prior to entering the OSC ~~[illegible]~~ if radiological problems exist or are expected to exist. Refer to Attachment I for suggested frisking locations

____4.1.5 As directed by the Radiological Assessments Coordinator/Operations Coordinator implement the following procedures: (reverse the order)

____a. Onsite and Offsite Radiological Monitoring 1004.10

____~~b.~~ ~~Offsite Monitoring 1004.11~~

____b. Search and Rescue 1004.18

____c. ~~In Plant~~ Radiological Controls during Emergencies 1004.9

~~Controls During Emergencies~~

____e. Any other procedure as directed by the Radiological Assessment Coordinator/Operations Coordinator.

____ d. Emergency Repair/Operations 1004.21

4.1.5 Establish a roster of personnel at the OSC and track teams as they are dispatched and return using the Team Tracking Status Board.

INFO

____4.1.~~6~~7 If directed to dispatch monitoring teams, ensure vehicles are available at the processing center. Assign a driver, as needed, to accompany the Rad Con Technician.
Obtain vehicle keys from:

a. Rad Con, ~~for the Rad Con Van~~

~~H. P. van~~

b. Maintenance for the I and C vehicle

~~I and C vehicle~~

c. ~~Other vehicles as needed.~~

____4.1.~~7~~8 If accountability is being conducted, collect all security badges and turn them over to the Site Security Officer who will be dispatched to pick them up.

NOTE: All personnel must retain their keycards.

____4.1.~~8~~9 If Onsite Duty Roster personnel arrive, turn over duties to them as time permits. Ensure that their name is filled in on the OSC Manning Status Board and that an announcement is made in the OSC area when they assume your duties.

____4.1.~~9~~10 When all coordinator positions are filled with Onsite Duty Roster personnel, establish operations of the OSC ~~[illegible]~~ per the floor plan in Att I and direct excess personnel to the established areas on Att I.

4.1.~~10~~11 Periodically brief personnel in the OSC regarding current plant status and projected course of events.

INFO

____4.1.12 Inform the Emergency Director, via the communicator, that the Operations Support Center is Operational.

5.0 FINAL CONDITIONS

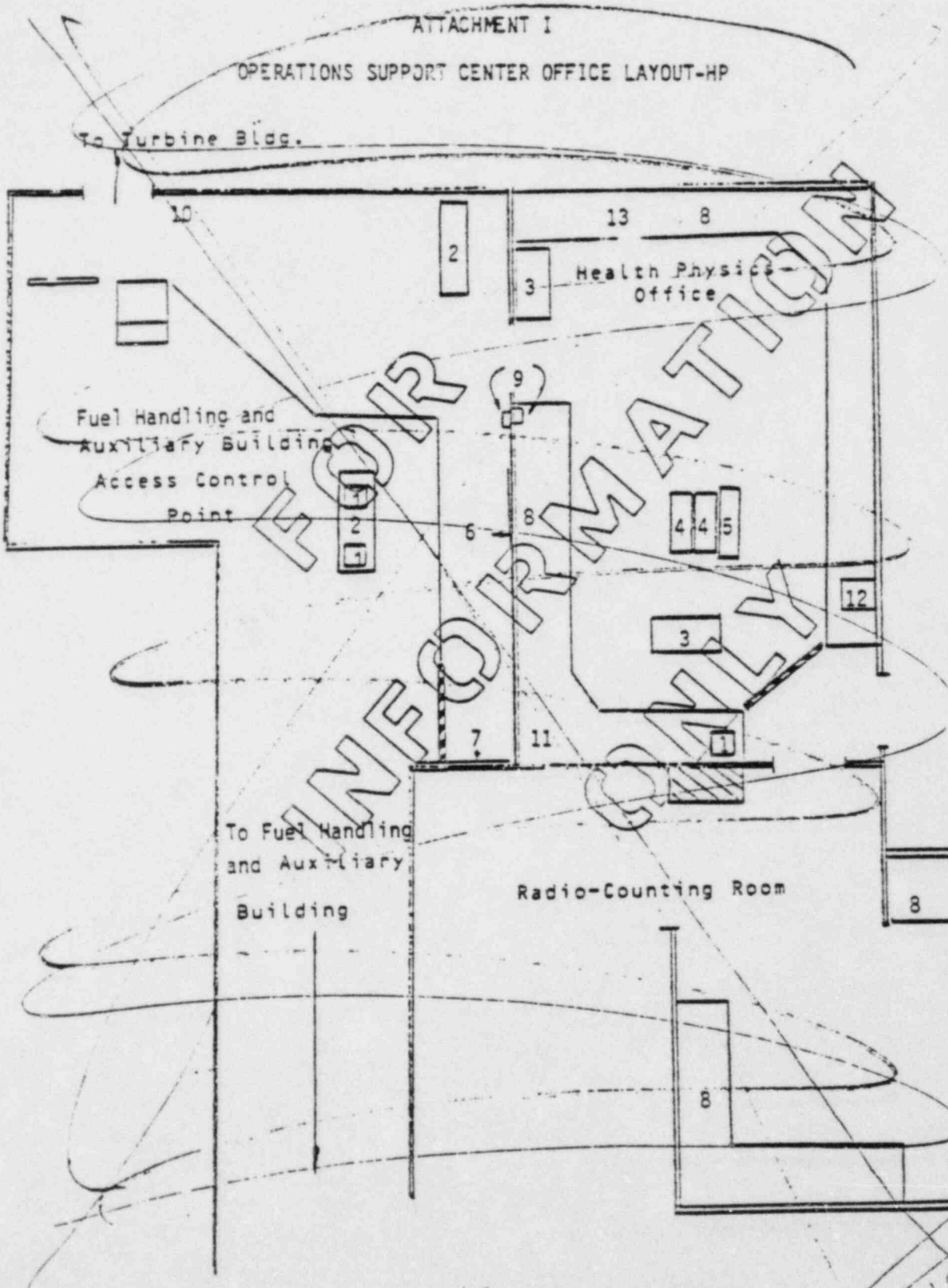
Initials

____5.1 The Operations Support Center will be operational with muster areas established for duty section personnel and communications established on the Operational Line.

____5.2 Duty section personnel are available for assignment as necessary.

ATTACHMENT I

OPERATIONS SUPPORT CENTER OFFICE LAYOUT-HP



ATTACHMENT I

OPERATIONS SUPPORT CENTER OFFICE LAYOUT-HP

Key to OSC Equipment

1. RM-14 with HP-210 Probe
2. Table
3. Desk
4. File Cabinets
5. Storage Cabinet for Instrumentation
6. Status Boards
7. REMP Map
8. Cabinets
9. Plant Page Phone
10. First Aid Cabinet
11. Emergency Locker (Flow diagrams, prints, etc.)
12. High Rad area Key Locker
13. Xerox Copier

Equipment in Radio-Counting Room:

Ludlum-2000 beta-gamma Counter-Scaler

Wide-Beta

Ortec beta-gamma Counter-Scaler

Tri-Carb Liquid Scintillation

Nuclear Measurements Corp. beta-gamma, alpha Counter-Scalers

Stabilized Assay Meters