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SHIELDS L. DALTROFF VICE PRESIDENT ELECTRIC PRODUCTION

August 31, 1984

Docket Nos. 50-277 50-278

Mr. Richard W. Starostecki, Director Division of Project and Resident Programs U.S. Nuclear Regulatory Commission Region I 631 Park Avenue King of Prussia, PA 19406

Dear Mr. Starostecki:

Your letter dated July 26, 1984, forwarded Combined Inspection Report 50-277/84-20 and 50-278/84-16. Appendix A of your letter addresses several items which do not appear to be in full compliance with Nuclear Regulatory Commission requirements. These items are restated below along with our response.

A.1 Technical Specification 6.8 and Regulatory Guide 1.33 (November 1972) require implementation of written procedures for fire protection equipment. Administrative Procedure A-30, Revision 4, June 10, 1981, Plant Housekeeping Controls, states in paragraph 9, Maintenance of Fire Fighting Capabilities, that the storage of equipment and materials shall not impede access to fire-fighting equipment.

Contrary to the above, at 8:20 a.m., June 27, 1984, access to fire extinguisher 234-5 on the Unit 2 Refuel Floor was impeded by storage of material in front of the extinguisher.

This is a Severity Level IV Violation (Supplement I) applicable to DPR-44.

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Response

This violation was caused as a result of maintenance riggers, focusing their attention on relocating large material storage containers, failing to recognize that the containers in the new location would block access to a fire extinguisher.

The individuals involved have been counseled for their lack of attention to detail. Fire equipment location signs were installed on July 11, 1984 on both Unit 2 and Unit 3 refueling floors to improve fire equipment location visibility. This corrective action was in response to a recent previous NRC inspector concern that fire equipment visibility on the refueling floor was restricted by the storage of large components during the present refuel/maintenance outage. Peach Bottom management concurred with the inspector's concerns and initiated fire equipment visibility improvements, prior to the citing of this violation, to provide better assurance of continued refueling floor safety and compliance. A letter, dated August 2, 1984, was also issued to supervisory personnel to remind all personnel of their obligation to keep fire equipment access clear. Due to the short time frame between the initial expressed concern and this violation, these improvements were not completed before this violation was issued. These improvements provide additional assurance of future compliance.

A.2 Technical Specification 6.8.1 states that written procedures and administrative policies shall be established, implemented and maintained. Administrative Procedure A-6 prescribes the methods used to control drawings and assure that up-to-date drawings are used in operation activities.

Contrary to the above, drawings used in operation activities were not properly controlled, including drawing M-351 which was found to be missing main steam relief valve vacuum breakers, drawing M-329 which was missing, and numerous other drawings which were found to be out-of-date during the time period June 27 to July 2, 1984. In addition, Procedure A-6, Rev. 9, dated 12/2/83, was out-of-date in that numerous drawings had been updated and not included in the procedure.

This is a Severity Level IV Violation (Supplement IV) applicable to DPR-44 and DPR-56.

Mr. Richard W. Starostecki

Response

The drawing deficiencies identified in this violation were the result of inadequate maintenance of controlled drawings and a backlog in the completion of drawing revisions. The controlled drawings at PBAPS were manually updated as required by Administrative procedure A-6; but because of extensive drawing use, the changes were torn and lost from the drawings. The missing changes were not corrected prior to this inspection. Upon notification, the inspector identified deficiencies were promptly corrected. In addition, a comparison of the controlled drawings in the Control Room, Shift Supervisor's office, and the Technical Support Center was made with the latest controlled drawing log, and no other discrepancies were identified.

Presently, Engineering and Research Department (E&R) procedures do not specify completion time requirements for drawing revisions following the completion of a plant modification. The present time period experienced between the completion of a modification and the final revision of the associated drawing has contributed to drawing inaccuracies. To correct this deficiency, Engineering and Research Department procedure, ERDP-3.6, will be revised to require time frames for revisions cf various types of drawings following completion of plant modifications. This corrective action will more expeditiously provide PBAPS with accurate drawings and reduce the likelihood of manually updated changes being torn and lost from the controlled drawings. This corrective action is expected to be in place by October 31, 1984.

Prior to this violation, controlled drawings were being maintained by individuals who were not assigned to the modification office. To correct this problem and enhance controlled drawing review, responsibility for maintaining the controlled drawings has been assigned to personnel in the modification office.

The chlorination system at Peach Bottom was replaced with a new sodium hypochlorite system for which a new P&ID (M-2601) was created. As a result, P&ID M-329 was deleted and removed from the Control Room, the Shift Supervisor's office, and the Technical Support Center to preclude any use of this P&ID. However, P&ID M-329 was not removed from Administrative Procedure A-6, Table A6, due to an Administrative oversight. To correct this problem, P&ID M-2601 for the sodium hypochlorite system is being renumbered M-329 to replace the deleted P&ID for the chlorination system. Personnel responsible for the review of controlled drawings have been using a controlled document entitled, "Drawing Control Log", in addition to Administrative Procedure A-6, Table A6, in the review of controlled drawings and their latest revisions. Additional drawings were added to the Drawing Control Log to ensure that the scope of drawings used in operations activities is complete. However, the additional drawings were not added to Administrative Procedure A-6, Table A6, because of an administrative oversight.

Administrative Procedure A-6 will be revised to refer to the Drawing Control Log and Table A-6 will be deleted from the procedure. This corrective action will be completed by September 30, 1984.

The extensive corrective actions identified in this response should preclude the occurrence of similar controlled drawing problems.

A.3 Technical Specification 6.8.1 states that written procedures and administrative policies shall be established, implemented and maintained. Administratile Procedure A-2 prescribes the method for control, issuance, and use of documents and revisions. Paragraph 7.5.1 states that controlled copies of documents shall be distributed in accordance with the Controlled Copy Distribution Table. Changes to controlled copies shall be placed in the notebooks by the office staff unless requested otherwise by the notebook holder.

Contrary to the above, on July 2, 1984, the controlled copy of GP procedures, in the Technical Support Center, contained GP-2, Rev. 35, and GP-18, Rev. 2, when GP-2, Rev. 36, dated 5/18/84, and GP-18, Rev. 3, dated 12/27/83, should have been filed in the notebook.

This is a Severity Level V Violation (Supplement I) applicable to DPR-44 and DPR-5 ϵ .

Response

NRC Inspection Report 50-277/84-08; 50-278/84-08 identified minor nonconformancies in controlled copy procedure notebooks.

In a June 3, 1984 letter, Philadelphia Electric Company responded to this violation by stating the cause of the occurrence, ensuring that the inspector identified nonconformancies were corrected, and initiating appropriate Mr. Richard W. Starostecki

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corrective action to prevent recurrence, which included clerical staff training and procedure revision. The committed compliance date for this corrective action was July 30, 1984.

As a result of the corrective actions taken to prevent recurrence stated above, the Technical Support Center (TSC) controlled procedure deficiencies had been identified by the clerical staff which had begun the process of replacing the out-of-date procedures prior to this inspector's procedure notebook audit.

Philadelphia Electric Company believes that the corrective actions identified in the response to NRC Inspection Report 50-277/84-08; 50-278/84-08 are adequate. This second apparent violation, identified on July 2, 1984, of individual controlled procedure book deficiencies occurred because the corrective actions that had been initiated, which must be applied to a very large number of procedures as well as procedure locations, had not been completed.

Because the TSC controlled procedure notebook deficiencies were already identified and were being corrected, and because this second apparent violation was issued well in advance of the July 30, 1984 expected compliance date, Philadelphia Electric Company respectfully requests that this apparent violation be reconsidered.

A seven-day extension of this response was discussed with Robert M. Gallo of your staff and found acceptable. We regret any inconvenience this late submittal may have caused.

If you require any additional information, please do not hesitate to contact us.

Very truly yours,

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cc: A. R. Blough, Site Inspector