

UNITED STATES  
**ATOMIC ENERGY COMMISSION**  
 DIRECTORATE OF REGULATORY OPERATIONS  
 REGION I  
 631 PARK AVENUE  
 KING OF PRUSSIA, PENNSYLVANIA 19406

V-2B

JAN 17 1974

Jersey Central Power & Light Company  
 Attention: Mr. I. R. Finfrock, Jr.  
 Vice President - Generation  
 Madison Avenue at Punch Bowl Road  
 Morristown, New Jersey 07960

Docket Nos. 50-219 ✓  
 50-363

Gentlemen:

A letter to the Directorate of Licensing, from the Vermont Yankee Nuclear Power Corporation, dated December 27, 1973, was recently placed in the Public Document Room. The subject matter discussed in that letter is felt to have possible applicability to your plant and, accordingly, I have enclosed a copy for your information.

Sincerely,

Eldon J. Brunner, Chief  
 Reactor Operations Branch

Enclosure:

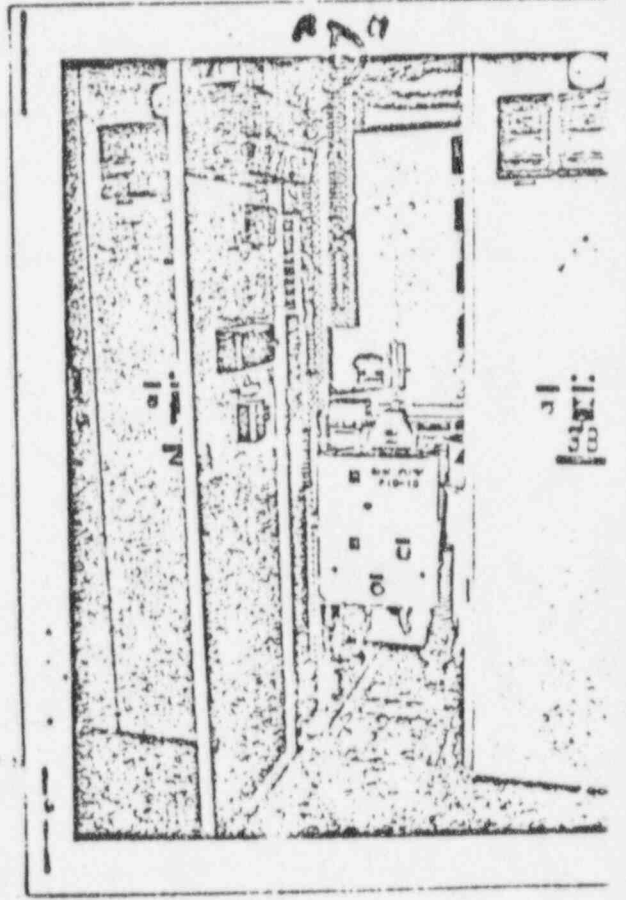
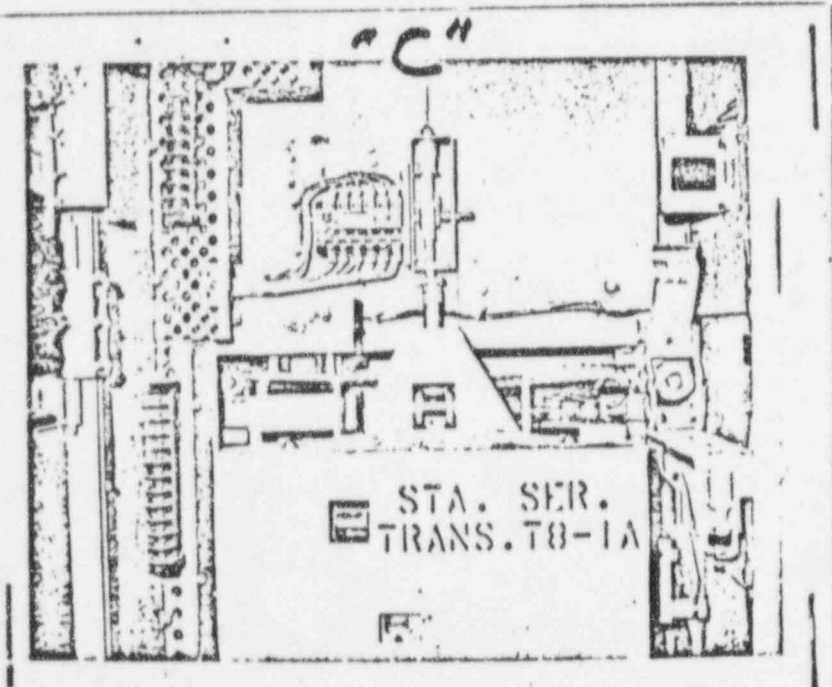
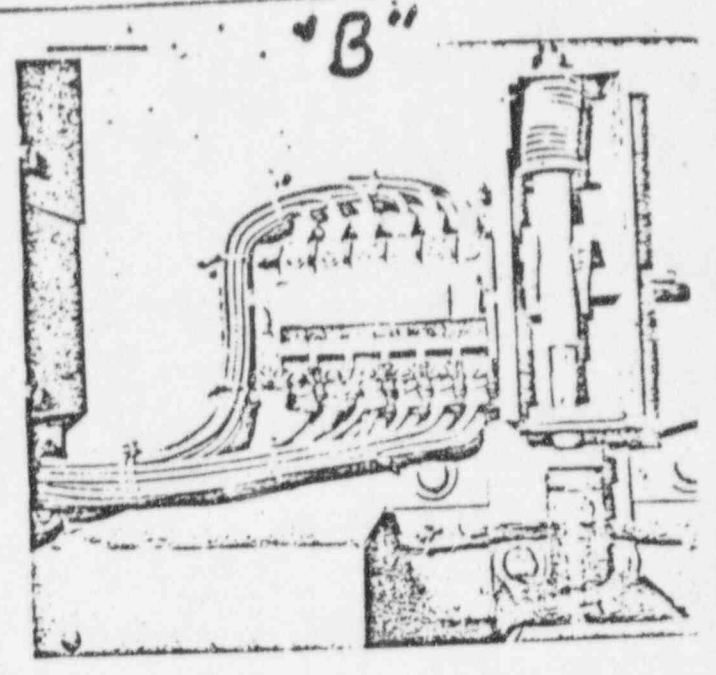
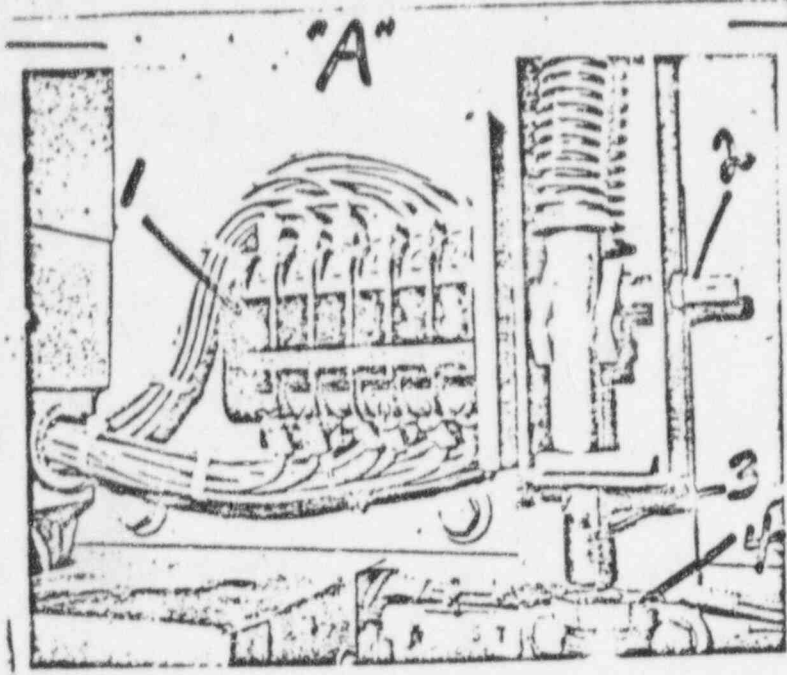
- 1. Copy of letter from the Vermont Yankee Nuclear Power Corporation, dated December 27, 1973 (AO-73-34)

cc: Mr. J. T. Carroll, Plant Superintendent

bcc: RO Files  
 DR Central File  
 PDR  
 Local PDR  
 NSIC  
 DTIE  
 State of New Jersey  
 Reg Reg Rdg Rm

B/668

OFFICE ▶	CRESS:I				
SURNAME ▶	<i>EJB</i> Brunner/kmf	O'Reilly	<i>[Signature]</i>		
DATE ▶	1/15				



PICTURE INDEX

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- C. Typical breaker in compartment
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- D. Typical breaker in compartment
  - 1. Breaker opened



VERMONT YANKEE NUCLEAR POWER CORPORATION

SEVENTY SEVEN GROVE STREET  
RUTLAND, VERMONT 05701

VYV-3109

REPLY TO:  
P. O. BOX 157  
VERNON, VERMONT 05354

December 27, 1973

Director  
Directorate of Licensing  
United States Atomic Energy Commission  
Washington, D.C. 20545

REFERENCE: Operating License DPR-28  
Docket No. 50-271  
Abnormal Occurrence No. AO-73-34

Gentlemen:

As defined by Technical Specifications for the Vermont Yankee Nuclear Power Station, Section 6.7.B.1, we are reporting the following Abnormal Occurrence as AO-73-34.

On December 17, 1973, while investigating a reported problem involving the "A" Station Service Water Pump 4 KV breaker, an electrician noted the fact that the breaker stationary auxiliary switch assembly rear mounting tie bolt had loosened and was disengaged from its mounting plate. This bolt serves to assist in maintaining proper switch contact alignment. The loosening and subsequent backing out of the tie bolt caused some misalignment of the switch auxiliary contacts which would have rendered those contacts inoperable had the breaker operated. This failure is not considered to be an abnormal occurrence, but is merely referenced to detail appropriate background information.

As a result of this incident, an investigation of all forty-seven (47) 4 KV breakers was initiated. This investigation, which was completed on December 19, 1973, indicated that all 4 KV breakers exhibited varying degrees of bolt loosening. Due to the fact that some breakers are associated with safety related systems, it was determined that this condition was in violation of Technical Specifications, Section 1.A.4 in that it could have resulted in one or more engineering safety feature failures which could have caused or threaten to cause that feature or component to be incapable of performing its intended function as defined in the Technical Specifications.

~~8312070534~~ (EP)

Tightening of all loose switch tie bolts was initiated immediately upon discovery and completed by 1000 hours on December 19, 1973. The reactor was operating at approximately 68% power at the time of this incident.

Of a total of forty-seven (47) switchgear units (General Electric Metal-Clad, Type M26) at Vermont Yankee, forty-three (43) contain 1200 amp., General Electric Magne-Blast circuit breakers, style AM-4, 16-250-8HB, and the remaining four (4) units contain 3000 amp., Magne-Blast circuit breakers, style AM-4, 16-350-1H. All switchgear units are equipped with stationary auxiliary switches which are referenced in General Electric Company Instruction and Renewal Parts Manual GEH-1802R, Metal-Clad Switchgear, Figure 45A.

The Plant Operations Review Committee (PORC) concluded that a possible cause of bolt loosening could be attributed to improper bolt tightening during factory assembly. This possibility is supported by the fact that the switch must be pre-wired prior to being mounted to the front mounting plate. At this time, the rear mounting tie bolt is somewhat difficult to see and could possibly be overlooked when performing a final quality check. An additional possible cause could be due to breaker operation. During breaker closure, the switch is operated by the breaker operating plunger through mechanical linkage. When the breaker is tripped, the switch is again operated in the reverse direction by a spring which has been held under tension by the breaker operating plunger. The operation of the switch in either direction is, of course, rapid and pronounced and might possibly contribute to a problem of this nature.

PORC determined that as a result of this incident, all 4 KV switchgear stationary auxiliary switches should be inspected in three months (which would be coincidental with approximately three breaker operations). If a similar condition is found to be developing at that time, the committee will undertake whatever further corrective action is required to assure resolution of the problem. In addition, a complete inspection of all breaker associated devices should be conducted during each plant refueling outage.

Very truly yours,

VERMONT YANKEE NUCLEAR POWER CORPORATION

*B.W. Riley*

B.W. Riley  
Plant Superintendent