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March 14, 1986
 5211-86-2046

Dr. Thomas E. Murley
 Region I, Regional Administrator
 U.S. Nuclear Regulatory Commission
 631 Park Avenue
 King of Prussia, PA 19406

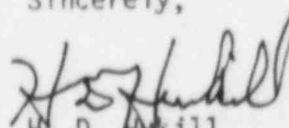
Dear Dr. Murley:

Three Mile Island Nuclear Station, Unit 1 (TMI-1)
 Operating License Nos. DPR-50
 Docket Nos. 50-289
 Response to Notice of Violation and Comment
 on Inspection Report 85-30

Attached is the GPUN response to Appendix A of Inspection Report No. 50-289/85-30 "Notice of Violation."

GPUN takes exception to a statement on page 15 of IR 85-30. The NRC statement that "the licensee wanted to restart the plant without a complete understanding of the effects of the Furmanite material in the steam generator" is untrue. The effects of the use of Furmanite in the plant were well understood by Plant management because of past experience and existing documentation. No chemistry concerns were identified nor was there a concern on any possible secondary system damage as a result of a small amount of Furmanite entering the secondary system. A 10 CFR 50.59 written evaluation was prepared at the request of the NRC subsequent to the plant startup so there would be sufficient written documentation.

Sincerely,


 H. D. Ankill
 Director, TMI-1

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 PDR ADDCK 05000289
 Q PDR

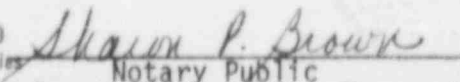
HDH/SMO/spb:0529A

Attachment

cc: W. Kane
 R. Conte

Sworn and subscribed to
 before me this 14th
 day of March, 1986.

SHARON P. BROWN, NOTARY PUBLIC
 MIDDLETOWN BORO, DAUPHIN COUNTY
 MY COMMISSION EXPIRES JUNE 12, 1989
 Member, Pennsylvania Association of Notaries


 Notary Public

GPU Nuclear Corporation is a subsidiary of the General Public Utilities Corporation

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NOTICE OF VIOLATION

During an NRC inspection conducted between December 13, 1985 and January 10, 1986, a violation of NRC requirements was identified. In accordance with the "General Statement of Policy and Procedure for NRC Enforcement Actions," 10 CFR Part 2, Appendix C (1985), the violation is set forth below:

Technical Specification 4.18.7.2.c requires that fire doors shall be verified to be functional by a visual inspection at least daily for doors neither locked nor supervised to verify that they are in a closed position.

Contrary to the above, during December 16-19, 1985, fire door D-108 (not locked or supervised) was not visually verified to be functional in a closed position and was found to be ajar.

RESPONSE TO NOTICE OF VIOLATION

I. Corrective Steps Taken and Results Achieved

On December 19, 1985, immediately following notification that fire door D-108 was ajar, the door was closed by an Operations representative.

Security personnel, in making their twice-per-shift rounds, pass through door D-108 and are under instruction to ensure all vital area doors, including fire doors, are closed when they pass through them.

Surveillance Procedure SP 1303-12.20, Revision 4, effective December 20, 1985, contained the required controls for surveillance of fire door D-108. The issuance of SP 1303-12.20, Rev. 4 and the performance of the surveillance on December 20, 1985, resulted in the re-establishment of compliance with Technical Specification 4.18.7.2.C.

II. Corrective Steps To Be Taken To Avoid Further Violations

The cause of this violation was the lack of identification of related procedure changes. SP 1303-12.22, Rev. 4 (implemented December 16, 1985) deleted fire door D-108 from surveillance. SP 1303-12.20, Rev. 4 (implemented December 20, 1985) added the surveillance of fire door D-108. Although the Procedure Change Requests to effect these changes were prepared and entered into the review and approval process simultaneously, the changes were not implemented simultaneously. Issuance of SP 1303-12.22, Rev. 4 prior to SP 1303-12.20, Rev. 4 resulted in the deletion of the required surveillance, thereby resulting in a non-compliance with Technical Specification 4.18.7.2.C.

A memorandum was issued on March 3, 1986 by the Review Program Coordinator, TMI-1 to TMI-1 management to emphasize the need for procedure preparers/owners/responsible offices to clearly identify the need to process related procedure changes simultaneously. The memorandum encourages preparers/owners/responsible offices to identify this need in writing on the respective Procedure Change Request (PCR) forms. Following receipt of notification of the need to process related procedure changes together, the TMI-1 Procedure Coordinator will log and track review/approval of the documents to ensure simultaneous implementation.

No further corrective action is planned.

III. Date of Full Compliance

Full compliance with Technical Specification 4.18.7.2.C was achieved December 20, 1985 upon issuance and performance of Surveillance Procedure 1303-12.20, Rev. 4.