



ASME Section XI

LG-21-075

August 5, 2021

USNRC Region I, Regional Administrator  
U. S. Nuclear Regulatory Commission, Region I  
2100 Renaissance Blvd., Suite 100  
King of Prussia, PA 19406-2713

Limerick Generating Station, Unit 2  
Renewed Facility Operating License No. NFP-85  
Docket No. 50-353

Subject: Limerick Generating Station Unit 2 Owner's Activity Report (OAR-1)

The Limerick Generating Station Unit 2 OAR-1 for Li2R16 (Attachment 1) is submitted in accordance with ASME Section XI, Article IWA-6200 and ASME Section XI Code Case N-532-5. This report includes inspections and Repair and Replacement Activities completed during the second Period of the fourth Inservice Inspection Interval and the third Containment Inservice Inspection Interval.

There are no regulatory commitments contained in this letter.

If you have any questions or require additional information, please contact Mr. Ted Ryan at 610-718-3530.

Respectfully,

A handwritten signature in black ink, appearing to read "Frank Sturniolo".

Digitally signed by Sturniolo,  
Frank  
Date: 2021.08.04 11:25:49  
-04'00'

Frank Sturniolo  
Vice President, Limerick Generating Station  
Exelon Generation Co., LLC

Attachment 1: Form OAR-1 Owner's Activity Report

cc: USNRC Senior Resident Inspector, LGS  
NRC Document Control Desk

Attachment OAR-1 Owner's Activity Report for Limerick Generating Station

**FORM OAR-1 OWNER'S ACTIVITY REPORT**

Report Number Li2R16

Plant Limerick Generating Station, 3146 Sanatoga Road, Pottstown, Pennsylvania 19464

Unit No. 2 Commercial Service Date January 8, 1990 Refueling Outage Number Li2R16  
(if applicable)

Current Inspection Interval Fourth Inspection Interval (ISI) & Third Inspection Interval (Containment ISI)  
(1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup>, other)

Current Inspection Period Second Inspection Period (ISI and Containment ISI)  
(1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>)

Edition and Addenda of Section XI applicable to the Inspection Plans ASME Section XI 2007 Ed. through 2008 Add. (4<sup>th</sup> ISI/3<sup>rd</sup> CISI Interval)

Date and Revision of ISI Program Plan (ER-LG-330-1001), Rev. 16 (4/11/2019), Rev. 17 (1/7/2020),  
Inspection Plans Rev. 18 (6/18/2020), Rev. 19 (12/9/2020)

Edition and Addenda of Section XI applicable to repair/replacement activities,  
if different than the inspection plans Same as above

Code Cases used: N-508-4, N-532-5, N-578-1, N-552-1, N-613-2, N-639, N-702, N-805, N-854

**CERTIFICATE OF CONFORMANCE**

I certify that (a) the statements made in this report are correct; (b) the examinations and tests, meet the Inspection Plan as required by the ASME Code, Section XI; and (c) the repair/replacement activities and evaluations supporting the completion of Li2R16 conform to the requirements of Section XI.  
(refueling outage number)

Signed Michelle Karasek Michelle Karasek, ISI Program Owner Date 7-30-2021  
(Owner or Owner's designee, Title)

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and employed by The Hartford Steam Boiler Inspection and Insurance Company of Hartford, Connecticut have inspected the items described in this Owner's Activity Report, and state that, to the best of my knowledge and belief, the Owner has performed all activities represented by this report in accordance with the requirements of Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied concerning the repair/replacement activities and evaluation described in this report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J.S. KAN Commissions 14396 R, N, I, C  
(Inspector's Signature) (National Board Number and Endorsement)

Date July 30, 2021

**TABLE 1**

**ITEMS WITH FLAWS OR RELEVANT CONDITIONS THAT REQUIRED EVALUATION  
FOR CONTINUED SERVICE**

<b>Examination Category</b>	<b>Examination Item Number</b>	<b>Item Description</b>	<b>Evaluation Description</b>
None	None	None	None

**TABLE 2**

**ABSTRACT OF REPAIR/REPLACEMENT ACTIVITIES REQUIRED FOR CONTINUED SERVICE**

<b>Code Class</b>	<b>Item Description</b>	<b>Description Of Work</b>	<b>Date Completed</b>	<b>Repair/Replacement Plan Number</b>
None	None	None	None	None