



Krishna P. Singh Technology Campus, 1 Holtec Blvd., Camden, NJ 08104

Telephone (856) 797-0900

Fax (856) 797-0909

10 CFR 140.15

December 14, 2022

ATTN: Document Control Desk  
U.S. Nuclear Regulatory Commission  
Washington, DC 20555-0001

Oyster Creek Nuclear Generating Station  
Renewed Facility License No. DPR-16  
NRC Docket No. 50-219 and 72-15

Pilgrim Nuclear Power Station  
Renewed Facility License No. DPR-35  
NRC Docket No. 50-293 and 72-1044

Indian Point Nuclear Generating Stations 1, 2, & 3  
Provisional Operating License No. DPR-5  
Renewed Facility Operating License Nos. DPR-26 and DPR-64  
NRC Docket Nos. 50-3, 50-247, 50-286 and 72-051

Palisades Nuclear Plant  
Renewed Facility Operating License No. DPR-20  
Docket Nos. 50-255 and 72-007

Big Rock Point  
License No. DPR-6  
Docket Nos. 50-155 and 72-043

Subject: Proof of Financial Protection 10 CFR 140.15

In accordance with 10 CFR 140.15 *Proof of Financial Protection*, Holtec Decommissioning International (HDI) hereby provides proof of financial protection in the form of nuclear energy liability insurance for the HDI sites, Oyster Creek Nuclear Generating Station, Pilgrim Nuclear Power Station, Indian Point Nuclear Generating Stations 1, 2, & 3, Palisades Nuclear Plant and Big Rock Point Independent Spent Fuel Storage Installation.

HDI continues to maintain offsite nuclear liability coverage in accordance with 10 CFR 140.11 (a)(4) or amounts approved per exemptions referenced below. The Attachment Certificates of Liability Insurance satisfies the requirement to provide proof of financial protection per the requirements of 10 CFR 140.15(a)(1).

There are no regulatory commitments contained in this submittal.

HDI-OC-22-064  
HDI-PIL-22-042  
HDI-IPEC-22-086  
HDI PNP 2022-040

If you have any questions or require further information, please contact William Noval at (856) 797- 0900, x3587.

Respectfully,

Jean A. Fleming  
Vice President of Licensing, Regulatory Affairs & PSA  
Holtec International

References: 1. Exemption from 10 CFR 140.11(a)(4) - Primary and Secondary Liability Insurance, Pilgrim Nuclear Power Station (ADAMS Accension No. ML19282A036 letter dated January 6, 2020)  
2. Exemption from 10 CFR 140.11(a)(4) - Primary and Secondary Liability Insurance - Oyster Creek Nuclear Generating Station (ADAMS Accension No. ML19129A364 letter dated June 12, 2019)

Attachment: Certificates of Liability Insurance

cc:

- NRC Regional Administrator - Region I
- NRC Regional Administrator - Region III
- NRC NMSS Project Manager (Oyster Creek, Palisades, and Big Rock)
- NRC NMSS Project Manager (Pilgrim and IPEC)
- NRC Region 1 Lead Inspector, Indian Point Units 1, 2 & 3
- NRC Region 1 Lead Inspector, Oyster Creek
- NRC Region 1 Lead Inspector, Pilgrim Nuclear Power Station
- NRC Region 3 Lead Inspector, Palisades, and Big Rock
- New York State Department of Public Service
- New York State Liaison Officer Designee, NYSERDA
- New Jersey DEP - Assistant Commissioner, Air Quality, Energy and Sustainability
- New Jersey Bureau of Nuclear Engineering, Assistant Director Radiation Protection Element
- Commonwealth of Massachusetts, Director, Massachusetts Emergency Management Agency
- State of Michigan

HDI-OC-22-064  
HDI-PIL-22-042  
HDI-IPEC-22-086  
HDI PNP 2022-040

Attachment  
Certificates of Liability Insurance



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
11/09/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Marsh USA Inc. 1717 Arch Street Philadelphia, PA 19103-2797	<b>CONTACT NAME:</b> <b>PHONE (A/C. No. Ext):</b> <b>FAX (A/C. No):</b> <b>E-MAIL ADDRESS:</b>
CN102263520-STNDN-NEL-23-24	<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A :</b> American Nuclear Insurers
<b>INSURED</b> Holtec International Attn: Martin J. Babos, JR. Krishna P. Singh Technology Campus 1 Holtec Boulevard Camden, NJ 08104	<b>INSURER B :</b> <b>INSURER C :</b> <b>INSURER D :</b> <b>INSURER E :</b> <b>INSURER F :</b>

**COVERAGES** **CERTIFICATE NUMBER:** CLE-006804503-03 **REVISION NUMBER:** 1

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>COMMERCIAL GENERAL LIABILITY</b>						EACH OCCURRENCE
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)
							MED EXP (Any one person)
							PERSONAL & ADV INJURY
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG
	OTHER:						
	<b>AUTOMOBILE LIABILITY</b>						COMBINED SINGLE LIMIT (Ea accident)
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)
	<input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident)
	<input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)
	<b>UMBRELLA LIAB</b>						EACH OCCURRENCE
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE
	DED <input type="checkbox"/> RETENTION \$						
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>						<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	N/A				E.L. EACH ACCIDENT
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE
							E.L. DISEASE - POLICY LIMIT
A	Nuclear Energy Liability Insurance			See Attached Acord 101	01/01/2023	01/01/2024	See Attached Acord 101

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

## CERTIFICATE HOLDER

Document Control Desk  
U.S. Nuclear Regulatory Commission  
Washington, DC 20555-0001

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

*Marsh USA Inc.*

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# ADDITIONAL REMARKS SCHEDULE

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<b>AGENCY</b> Marsh USA Inc.		<b>NAMED INSURED</b> Holtec International Attn: Martin J. Babos, JR. Krishna P. Singh Technology Campus 1 Holtec Boulevard Camden, NJ 08104	
<b>POLICY NUMBER</b>		<b>EFFECTIVE DATE:</b>	
<b>CARRIER</b>	<b>NAIC CODE</b>		

## ADDITIONAL REMARKS

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,**

**FORM NUMBER:** 25 **FORM TITLE:** Certificate of Liability Insurance

### CERTIFICATE OF NUCLEAR ENERGY LIABILITY INSURANCE

This is to certify that there is in force as of the effective date of this Certificate a Nuclear Energy Liability Insurance Policy issued by members of American Nuclear Insurers as indicated (Companies), to the Insured named herein, with respect to the Nuclear Facility at the Location shown and/or with respect to the Insured's operations described herein. If such policy is cancelled or otherwise terminated prior to the end of December 31st of the calendar year in which the Effective Date of this Certificate occurs, notice will be delivered in accordance with the policy provisions. Otherwise this Certificate shall terminate as of the end of such December 31st. A Certificate will NOT be issued for any subsequent calendar year unless requested in writing.

Types of Insurance: NF – [Facility Form], NW- [Master Worker Certificate], NS – [US Domestic Supplier's & Transporters], FS – [Foreign Suppliers & Transporters], N – [Secondary Financial Protection Certificate]

### COVERAGE FOR NUCLEAR FACILITIES:

#### 1. SITE #1 – Pilgrim Station

LOCATION OF NUCLEAR FACILITY: Pilgrim Station in the Town of Plymouth, Plymouth County, Massachusetts, on the western shore of Cape Cod Bay, thirty-eight miles southeast of Boston, Massachusetts, and forty-four miles east of Providence, Rhode Island

NAMED INSURED [LISTED ON POLICY]: Holtec Pilgrim, LLC and Holtec Decommissioning International, LLC

POLICY NUMBER:	POLICY EFFECTIVE:	LIMIT OF LIABILITY:
NF -0188	10/1/1970	\$100 Million
NW-0573	10/1/1970	\$450 Million**

#### 2. SITE #2 – Oyster Creek

LOCATION OF NUCLEAR FACILITY: Oyster Creek Generating Station, located in Lacey Township, Ocean County, New Jersey, approximately two miles south of the community of Forked River, about two miles inland from the shore of Barnegat Bay and seven miles west-north-west of Barnegat Light.

NAMED INSURED [LISTED ON POLICY]: Oyster Creek Environmental Protection, LLC and Holtec Decommissioning International, LLC

POLICY NUMBER:	POLICY EFFECTIVE:	LIMIT OF LIABILITY:
NF -0164	10/3/1967	\$100 Million
NW-0558	10/3/1967	\$450 Million**

#### 3. SITE #3 – Indian Point

LOCATION OF NUCLEAR FACILITY: Indian Point Energy Center is located on the east bank of the Hudson River in the Village of Buchanan in upper Westchester County, New York. It is about 24 miles north of the New York City

NAMED INSURED [LISTED ON POLICY]: Holtec Indian Point 2, LLC, Holtec Indian Point 3, LLC and Holtec Decommissioning International, LLC

POLICY NUMBER:	POLICY EFFECTIVE:	LIMIT OF LIABILITY:
NF -0100	1/1/1961	\$450 Million
NW-0530	1/1/1961	\$450 Million**
NW-0529	1/1/1961	\$450 Million**
N-0006	8/1/1977	***
N-0007	8/1/1977	***

#### 4. SITE #4 – Palisades

LOCATION OF NUCLEAR FACILITY: Palisades Nuclear Plant, located approximately five (5) miles south of South Haven, Michigan in Covert Township, Van Buren County, Michigan

NAMED INSURED [LISTED ON POLICY]: Holtec Palisades, LLC and Holtec Decommissioning International, LLC

POLICY NUMBER:	POLICY EFFECTIVE:	LIMIT OF LIABILITY:
NF -0179	8/15/1969	\$450 Million
NW-0566	8/15/1969	\$450 Million**



# **ADDITIONAL REMARKS SCHEDULE**

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<b>AGENCY</b> Marsh USA Inc.		<b>NAMED INSURED</b> Holtec International Attn: Martin J. Babos, JR. Krishna P. Singh Technology Campus 1 Holtec Boulevard Camden, NJ 08104
<b>POLICY NUMBER</b>		
<b>CARRIER</b>	<b>NAIC CODE</b>	<b>EFFECTIVE DATE:</b>

## **ADDITIONAL REMARKS**

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,**  
**FORM NUMBER:** 25 **FORM TITLE:** Certificate of Liability Insurance

N-0020 8/15/1969 \*\*\*

### **5. SITE #5 – Big Rock Point**

LOCATION OF NUCLEAR FACILITY: Big Rock Point is located in Charlevoix County, Michigan, approximately four miles northeast of Charlevoix, Michigan, and approximately eleven miles west of Petoskey, Michigan, on the northern shore of Michigan's lower peninsula.

NAMED INSURED [LISTED ON POLICY]: Holtec Palisades, LLC and Holtec Decommissioning International, LLC

POLICY NUMBER:	POLICY EFFECTIVE:	LIMIT OF LIABILITY:
NF -0117	8/30/1962	\$44.4 Million
NW-0536	8/30/1962	\$450 Million**

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER.

The insurance afforded by the policy(ies) is subject to the exclusions, conditions and other provisions of the policy(ies). Neither this Certificate nor any contract or other document with respect to which it is issued shall amend, extend or alter the coverage afforded by the policy. The Limit of Liability shown above may have been reduced by payment of claims or claims expenses.

### **COMMENTS/NOTES:**

\*\* Master Worker Certificate - This limit is shared by all Certificates to the Master Worker Policy of which each Certificate is a part and is subject to all of the provisions of such Policy and Certificate having reference thereto. Such limit may have been reduced by payment of claims or claims expenses.

\*\*\* Secondary Financial Protection Certificate - Financial protection available under an industry retrospective rating plan.