



Tennessee Valley Authority, Post Office Box 2000, Soddy-Daisy, Tennessee 37384-2000

June 30, 2003

U.S. Nuclear Regulatory Commission  
ATTN: Document Control Desk  
Washington, D.C. 20555

Gentlemen:

In the Matter of ) Docket Nos. 50-327  
Tennessee Valley Authority ) 50-328

**SEQUOYAH NUCLEAR PLANT - UNITS 1 AND 2 - EMERGENCY PLAN  
IMPLEMENTING PROCEDURE (EPIP) REVISIONS**

In accordance with the requirements of 10 CFR 50, Appendix E,  
Section V, the enclosure provides the following EPIP:

<u>EPIP</u>	<u>Revision</u>	<u>Title</u>
EPIP-2	23	Notification of Unusual Event
EPIP-3	25	Alert
EPIP-4	25	Site Area Emergency
EPIP-5	31	General Emergency

This letter is being sent in accordance with NRC RIS 2001-05.  
If you have any questions concerning this matter, please  
telephone me at (423) 843-7170 or J. D. Smith at  
(423) 843-6672.

Sincerely,



Pedro Salas

Licensing and Industry Affairs Manager

Enclosure

cc (Enclosure):

Mr. Mike L. Marshall, Jr., Senior Project Manager  
U.S. Nuclear Regulatory Commission  
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A045

**TENNESSEE VALLEY AUTHORITY**  
**SEQUOYAH NUCLEAR PLANT**  
**EMERGENCY PLAN IMPLEMENTING PROCEDURE**

**EPIP-2**

**NOTIFICATION OF UNUSUAL EVENT**

REVISION 23

PREPARED BY: BILL PEGGRAM

RESPONSIBLE  
ORGANIZATION: EMERGENCY PREPAREDNESS

APPROVED BY: RANDY FORD

EFFECTIVE DATE: 6/25/03

LEVEL OF USE: REFERENCE USE

QUALITY-RELATED

## Revision History

Rev	Date	Reason for Revision
18	03/30/2001	Revised references to EPIP-14 for Dose Assessment to the new EPIP-13 for Dose Assessment. Updated phone numbers for Ford and replaced Casey with Ford. Added EPIP-13 to references. Reformatted substantially for clarity. Updated Notification and Follow-Up forms to Pentagon standard content.
19	07/30/2002	Substantial format modification for standardization with BFN/WBN was implemented in this revision. Reformatted and repaginated as necessary. Reordered actions to be consistent with EIPs 3-5. Changed reference PHYSI-32 to SSI-1. Added Section 5.0, Illustrations and Appendices Section to the body of the procedure. Added caution concerning conducting assembly and accountability if it will present a danger to employees. Included Site Specific Security Threat staffing consideration of TSC and OSC. Added routine consideration of Assembly. Clarified use of 5- and 9- telephone prefixes. Added what information is to be provided by the Shift Manager to Chemistry when requesting Dose Assessment: 1.Type of event, 2.Release Path, 3.Expected Duration. EPIP-2 was revised to implement actions to support the NRC Security Order including adding "Two Person Line-of-Sight" rule when deemed necessary by Security. Clarified what MET Data elevation is to be included on the follow up form.
20	08/26/2002	Corrections, editorials and pagination cleanup. Clarified step 3.1, Step 3 to avoid redundancy. This is a intent revision.
21	10/22/2002	Revised to remove activation of the TSC/OSC at the NOUE. This is an intent revision.
22	04/22/2003	General revision to restructure EPIP for better flow. Moved ODS notification earlier in procedure. Added EIPs 6, 7 & 16 as references. Intent revision.
23	06/25/2003	Non intent change. Correct typo on phone number.

# Table of Contents

1.0 PURPOSE.....4

2.0 REFERENCES .....4

3.0 INSTRUCTIONS.....4

3.1 Activation of the Emergency Plan .....4

3.2 Monitor Conditions .....7

3.3 Termination of the Event .....9

4.0 RECORDS RETENTION.....10

4.1 Records of Classified Emergencies .....10

4.2 Drill and Exercise Records .....10

5.0 ILLUSTRATIONS AND APPENDICES .....10

5.1 Appendix A, Notifications and Announcements.....11

5.2 Appendix B, TVA Initial Notification NOUE .....12

5.3 Appendix C, NOUE Follow-up Information.....13

## 1.0 PURPOSE

- 1.1 To provide a method for timely notifications of appropriate individuals or organizations when the Shift Manager (SM)/Site Emergency Director (SED) has determined by EPIP-1 that events have occurred that are classified as a NOUE.
- 1.2 To provide the SED/SM a method for periodic reanalysis of current conditions to determine whether the NOUE should be terminated or continued.

## 2.0 REFERENCES

### 2.1 Interface Documents

- [1] SPP-3.5 "Regulatory Reporting Requirements"
- [2] EPIP-3, "Alert"
- [3] EPIP-4, "Site Area Emergency"
- [4] EPIP-5, "General Emergency"
- [5] EPIP-6, "Activation and Operation of the Technical Support Center"
- [6] EPIP-7, "Activation and Operation of the Operations Support Center"
- [7] EPIP-8, "Personnel Accountability and Evacuation"
- [8] EPIP-10, "Medical Emergency Response"
- [9] EPIP-13, "Dose Assessment"
- [10] EPIP-14, "Radiological Control Response"
- [11] EPIP-16, "Termination and Recovery"
- [12] CECC EPIP-9, "Emergency Environmental Radiological Monitoring Procedures"
- [13] SSI-1, "Security Instructions For Members Of The Security Force"

## 3.0 INSTRUCTIONS

**NOTE:** IF there are personnel injuries, THEN IMPLEMENT EPIP-10, "Medical Emergency Response."

**NOTE:** IF there are immediate hazards to plant personnel, THEN consider immediately implementing EPIP-8 "Personnel Accountability and Evacuation" in parallel with this procedure.

### 3.1 ACTIVATION OF THE EMERGENCY PLAN

Upon classifying events as an NOUE the SM/SED shall:

- [1] **COMPLETE** Appendix B, TVA Initial Notification for NOUE. ☐

## 3.1 ACTIVATION OF THE EMERGENCY PLAN (Continued)

**NOTE:** ODS should be notified within 5 minutes after declaration of the event.

**[2] NOTIFY ODS.**

Initial      Time

ODS: Ringdown Line or  
5 -751-1700 or 5 -751-2495 or 9-785-1700

**[a]** READ completed Appendix B to ODS.

☐

**[b]** FAX completed Appendix B to ODS.

☐

5-751-8620 (Fax)

**[c]** MONITOR for confirmation call from ODS that State/Local notifications complete: **RECORD** time State notified.

Notification Time

**[3] IF ODS CANNOT be contacted within 10 minutes of the declaration, THEN**

**[a]** CONTACT Tennessee Emergency Management Agency (TEMA) and READ completed Appendix B.

Initial      Time.

9-1-800-262-3300 or 9-1-615-741-0001  
or 888-616-8091 (satellite phone)

**[b]** FAX completed Appendix B to TEMA.

☐

9-1-615-242-9635 (Fax)

**[4] PERFORM Appendix A, Notifications and Announcements (Delegate as needed)**

☐

**3.2 MONITOR CONDITIONS**

- [1] MONITOR** radiation monitors. **WHEN** indication exists of an unplanned radiological release, **THEN PERFORM** Dose Assessment: ☐

- [a] IF** the CECC has not assumed dose assessment responsibility, **THEN**

**NOTIFY** Chemistry to perform a dose assessment using EPIP-13, "Dose Assessment"

**AND**

**PROVIDE** the following information:

- 1. Type Of Event** (SGTR/L, LOCA, WGDT, Cntmt Bypass)
- 2. Release Path** (SG/PORV, Aux, Shld, Turb, Serv, Cond)
- 3. Expected Duration** (If unknown assume 4 hour duration) ☐

7285 (Lab) or 6348 (Lab) or 20126 (Pager)

- [2] MONITOR** plant conditions:

- [a] EVALUATE** using EPIP-1:

- 1. IF** conditions satisfy criteria of **ALERT(s)** or higher classification, **THEN** initiate EPIP-3, -4, or -5 as appropriate. ☐
- 2. IF** additional conditions satisfy criteria of other **NOUE(s)** **THEN** Complete Appendix C. ☐
- 3. IF** conditions warrant a need for follow-up information, **THEN** complete Appendix C. ☐

- [b] IF** plant conditions warrant, **ACTIVATE** assembly and accountability using EPIP-8. ☐

**3.2 MONITOR CONDITIONS (Continued)****[c] IF Appendix C completed, THEN****1. REPORT to CECC for State notification:**InitialTime

CECC Director: Ringdown Line or  
5 -751-1614 or 5 -751-1680

OR

ODS: Ringdown Line or 5-751-1700 or  
5-751-2495 or 9-785-1700

**2. FAX completed Appendix C to CECC.**

CECC: 5-751-1682 (Fax) OR ODS: 5-751-8620 (Fax)

**3. IF neither the CECC or ODS can be reached, THEN****[a] NOTIFY TEMA AND READ Form.**InitialTime

9-1-800-262-3300 or 9-1-615-741-0001  
or 888-616-8091 (satellite phone)

**[b] FAX completed Appendix C to TEMA.**

9-1-615-242-9635 (Fax)



**3.3 TERMINATION OF THE EVENT****[1] WHEN the situation no longer exists, THEN**

- [a] TERMINATE emergency.** ☐
- [b] INFORM ODS and Duty Plant Manager.** ☐
- [c] COMPLETE Appendix C with Time and Date Event Terminated.** ☐
- [d] FAX completed Appendix C to ODS.** ☐

ODS: 5-751-8620 (Fax)

**[2] COLLECT all forms and completed procedure and FORWARD all documentation to Emergency Preparedness.** ☐

#### **4.0 RECORD RETENTION**

##### **4.1 Records of Classified Emergencies**

The materials generated in support of key actions during an actual emergency classified as NOUE or higher are considered Lifetime retention Non-QA records. Materials shall be forwarded to the EP Manager who shall submit any records deemed necessary to demonstrate performance to the Corporate EP Manager for storage.

##### **4.2 Drill and Exercise Records**

The materials deemed necessary to demonstrate performance of key actions during drills are considered Non-QA records. These records shall be forwarded to the EP Manager who shall retain records deemed necessary to demonstrate six-year plan performance for six years. The EP Manager shall retain other records in this category for three years.

#### **5.0 ILLUSTRATIONS AND APPENDICES**

##### **5.1 Appendix A - Notifications and Announcements**

Appendix A, Notifications and Announcements provides guidance for security threats, and for prompt notification of the NRC Resident and plant personnel.

##### **5.2 Appendix B - TVA Initial Notification for NOUE**

Appendix B, TVA Initial Notification for NOUE is used to initially notify the Operations Duty Specialist who notifies the Tennessee Emergency Management Agency.

##### **5.3 Appendix C - NOUE Follow-up Information**

Appendix C, NOUE Follow-up Information is used to provide additional information concerning other NOUE(s) or other information concerning additional conditions to the ODS for State notification and event termination.



Appendix A  
Notifications and Announcements  
Page 2 of 2

- [5] NOTIFY the "On Call" NRC Resident AND PROVIDE NOUE Information.

Initial Time

**NOTE:** NRC notification should be made as soon as practicable, but within 1 hour of "NOUE" declaration. Whenever NRC requests, a qualified person must provide a continuous update to NRC Operations Center.

- [6] NOTIFY NRC of plan activation via ENS phone.

Initial Time

9-1-(301) 816-5100 (Main)  
9-1-(301) 951-0550 (Backup)  
9-1-(301) 816-5151 (Fax)

- [7] NOTIFY SM/SED that notifications are complete

Initial Time

**Appendix B  
TVA Initial Notification for NOUE**

**TVA INITIAL NOTIFICATION FOR NOUE**

1. ☐ This is a Drill ☐ This is an Actual Event - Repeat - This is an Actual Event

2. This is SED \_\_\_\_\_, Sequoyah has declared an **UNUSUAL EVENT**  
affecting: ☐ Unit 1 ☐ Unit 2 ☐ Both Unit 1 and Unit 2

3. EAL Designator(s): \_\_\_\_\_

4. Brief Description of the Event: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Radiological Conditions: (Check one box under each Airborne AND Liquid column.)

**Airborne Releases Offsite**

- ☐ Minor releases within federally approved limits<sup>1</sup>  
☐ Releases above federally approved limits<sup>1</sup>  
☐ Release information not known

(<sup>1</sup>Tech Specs)

**Liquid Releases Offsite**

- ☐ Minor releases within federally approved limits<sup>1</sup>  
☐ Releases above federally approved limits<sup>1</sup>  
☐ Release information not known

(<sup>1</sup>Tech Specs)

6. Event Declared: Time: \_\_\_\_\_ Date: \_\_\_\_\_

7. Provide Protective Action Recommendation: ☐ None

8. Please repeat back the information you have received to ensure accuracy.

9. Time and Date this information was provided \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Action: When completed, fax this information.**

## Appendix C

### NOUE FOLLOW-UP INFORMATION

1. ☐ THIS IS A REAL EVENT ☐ THIS IS A DRILL
2. There has been an NOUE declared at Sequoyah affecting:  
☐ Unit 1 ☐ Unit 2 ☐ Both Unit 1 and Unit 2
3. Reactor Status: Unit 1: ☐ Shut Down ☐ At Power ☐ Refueling ☐ N/A  
Unit 2: ☐ Shut Down ☐ At Power ☐ Refueling ☐ N/A
4. Additional EAL Designators \_\_\_\_\_
5. Significant Changes in Plant Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Significant Changes in Radiological Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Offsite Protective Action Recommendation:  
☐ None
8. Onsite Protective Actions: Assembly and Accountability ☐ No ☐ Initiated ☐ Completed  
Site Evacuation ☐ No ☐ Initiated ☐ Completed
9. The Meteorological Conditions are: Wind Speed: \_\_\_\_\_ m.p.h.  
(Use 46 meter data on the Met Tower) Wind Direction is from: \_\_\_\_\_ degrees
10. Event Terminated: Date/Time \_\_\_\_\_
11. Please repeat back the information you have received to ensure accuracy.
12. FAX to ODS at 5-751-8620 or CECC Director at 5-751-1682 after completing the notification.
- Completed by: \_\_\_\_\_, Date/Time \_\_\_\_\_

**SQL EPIP-2, R23 - Procedure Changes  
Plan Effectiveness Determination**

Page 1 of 6

**Attachment 5**

**PLAN EFFECTIVENESS DETERMINATION (Ref. EPIL-1, Rev. 15)**

<b>*Document and Revision: SQL EPIP-2, R23</b>		
<b>*Revision summary: corrected phone number</b>		
<b>1.</b>	Does the REP/EPIP revision detrimentally affect the division of responsibility for emergency response by TVA or by the State or local organizations within the EPZ? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>2</b>	Does the REP/EPIP revision detrimentally affect the on-shift facility licensee (TVA) responsibilities for emergency response or the augmented emergency response organization? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>3</b>	Does the REP/EPIP revision detrimentally affect arrangements to accommodate State and local staff at TVA's Emergency Operations Facilities? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>4</b>	Does the REP/EPIP revision detrimentally affect TVA's standard emergency classification and action level scheme? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**SQNLPIP-2, R23 - Procedure Changes**  
**Plan Effectiveness Determination**

**Page 2 of 6**

**Attachment 5**

**PLAN EFFECTIVENESS DETERMINATION (Ref. EPIL-1, Rev. 15)**

<b>5</b>	Does the REP/EPIP revision detrimentally affect TVA's notification procedures for State and local response organizations and for notification of emergency personnel by all organizations? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>6</b>	Does the REP/EPIP revision detrimentally affect the means by which early notification and clear instruction to the populace within the plume exposure pathway EPZ is disseminated? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>7</b>	Does the REP/EPIP revision detrimentally affect any previously established prompt communications link which exists among principal response organizations to personnel and to the public? <b>Explanation:</b> Section 3.2 of EPIP-2, R23 has a phone number that was corrected.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



**SQNLPIP-2, R23 - Procedure Changes**  
**Plan Effectiveness Determination**

**Page 3 of 6**

<b>8</b>	Does the REP/EPIP revision detrimentally affect the methods, systems, and equipment for assessing and monitoring actual or potential offsite radiological conditions? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>9</b>	Does the REP/EPIP revision detrimentally affect any emergency facilities and equipment needed to support the emergency response? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>10</b>	Does the REP/EPIP revision detrimentally affect public emergency response education or any principle points of contact with the news media for dissemination of information during an emergency? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>11</b>	Does the REP/EPIP revision detrimentally affect any protective actions developed by TVA for the plume exposure pathway EPZ for emergency workers and the public? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**SQLPIP-2, R23 - Procedure Changes**  
**Plan Effectiveness Determination**

Page 4 of 6

12	<p>Does the REP/EPIP revision detrimentally affect the means for controlling radiological exposures to emergency workers both onsite and offsite?  <b>Explanation:</b></p>	<p><input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p>
13	<p>Does the REP/EPIP revision detrimentally affect any previously established arrangements for medical services for contaminated injured individuals?  <b>Explanation:</b></p>	<p><input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p>
14	<p>Does the REP/EPIP revision detrimentally affect general plans for recovery/reentry into the EPZ?  <b>Explanation:</b></p>	<p><input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p>
15	<p>Does the REP/EPIP revision detrimentally affect any radiological emergency response training which is provided for those who may be called on to assist in an emergency?  <b>Explanation:</b></p>	<p><input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p>
16	<p>Does the REP/EPIP revision detrimentally affect any periodic exercises which are conducted to evaluate major portions of the emergency response capabilities?  <b>Explanation:</b></p>	<p><input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p>

**SQNLPIP-2, R23 - Procedure Changes**  
**Plan Effectiveness Determination**

Page 5 of 6

17	Does the REP/EPIP revision detrimentally affect the responsibilities for REP development, review and distribution? Explanation:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
18	Does the REP/EPIP revision detrimentally affect any SAR requirements? Explanation:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
19	Does the REP/EPIP revision result in any deviation to Technical Specifications? Explanation:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
20	Does the REP/EPIP revision result in any deviation to the REP licensing basis and supporting SER (if applicable)? Explanation:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Attachment 5**

**PLAN EFFECTIVENESS DETERMINATION (Ref. EPIL-1, Rev. 15)**

---

PED Performed for:	EPIP-2, Notification of Unusual Event	23
	Procedure Title	Revision
	Bill Peggram	June 23, 2003
PED Performed by:		Date
	Randy Ford	June 23, 2003
PED Reviewed by:		Date

**SQN EPIP-2, R23 - Procedure Changes  
Plan Effectiveness Determination**

**Page 6 of 6**

**Attachment 5  
PLAN EFFECTIVENESS DETERMINATION (Ref. EPIL-1, Rev. 15)**

State concurrence of any EAL changes is obtained after all TVA plant approvals to the revision have been obtained.

2	Has the affected State concurred in any EAL changes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2	Explanation:	

State concurrence verified by: \_\_\_\_\_ Date \_\_\_\_\_

2	*Was this REP or EPIP revision impacted by another revision	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3	*to the same document that was issued while this revision	
	*was being processed?	
	*If the answer to the above question is yes then ensure that	
	*changes to that previous revision are captured in this revision	
	*unless intentionally changed in this revision.	

\* Revision content verified by: **Bill Peggram** **May 28, 2003**  
\_\_\_\_\_ Date \_\_\_\_\_

\* Revision

**TENNESSEE VALLEY AUTHORITY**  
**SEQUOYAH NUCLEAR PLANT**  
**EMERGENCY PLAN IMPLEMENTING PROCEDURE**

**EPIP-3**

**ALERT**

REVISION 25

PREPARED BY: BILL PEGGRAM

RESPONSIBLE  
ORGANIZATION: EMERGENCY PREPAREDNESS

APPROVED BY: RANDY FORD

EFFECTIVE DATE: 6/25/2003

LEVEL OF USE: REFERENCE USE

QUALITY-RELATED

## Revision History

Rev	Date	Affected Pages	Reason for Revision
21	03/30/2001		Revised references to EPIP-14 for Dose Assessment to the new EPIP-13 for Dose Assessment. Added EPIP-13 to references. Reformatted substantially for clarity. Updated Notification and Follow-Up forms to Pentagon standard content.
22	07/30/2002		Substantial format modification for standardization with BFN/MBN was implemented in this revision. Reformatted and repaginated as necessary. Reordered actions to be consistent with EPIPs 2, 4, 5. Changed reference of PHYSI-32 to SSI-1. Added Section 5.0, Illustrations and Appendices Section to the body of the procedure. Added caution concerning conducting assembly and accountability if it will present a danger to employees. Clarified use of 5- and 9-telephone prefixes. Added what information is to be provided by the Shift Manager to Chemistry when requesting Dose Assessment: 1.Type of Event, 2. Release Path, 3. Expected Duration. Clarified how to check ERO pager response. EPIP-3 was revised to implement actions to support the NRC Security Order including adding "Two Person Line-of-Sight" rule when deemed necessary by Security. Clarified what MET Data elevation is to be included on the follow up form.
23	08/26/2002		Added Step 2 to section 3.1 to speed implementation if EPS has already been activated. Condensed Steps 3.1.7 and 3.2.1 to activate assembly and accountability. Implemented ability to Stage TSC/OSC personnel near-site when it is unsafe to immediately enter the site. Corrected title of CECC EPIP-9 in Sections 3.1 and 3.2. CECC EPIP-9, "Emergency Environmental Radiological Monitoring Procedures". This is a Intent revision.
24	04/23/2003		General Revision to restructure EPIP for better flow. Moved ODS notification earlier in procedure. Intent Revision.
25	06/25/03	9	Non intent revision. Corrected wrong phone number.

# Table of Contents

1.0 PURPOSE.....4

2.0 REFERENCES .....4

3.0 INSTRUCTIONS.....4

3.1 Activation of the REP By the SM .....4

3.2 Emergency Level Escalation by the TSC .....7

3.3 Monitor Conditions .....8

3.4 Termination of the Event .....10

4.0 RECORDS RETENTION.....11

4.1 Records of Classified Emergencies .....11

4.2 Drill and Exercise Records.....11

5.0 ILLUSTRATIONS AND APPENDICES .....11

5.1 Appendix A, Notifications and Announcements.....12

5.2 Appendix B, TVA Initial Notification for Alert.....14

5.3 Appendix C, Alert Follow-up Information.....15

## 1.0 PURPOSE

- 1.1 To provide a method for timely notifications of appropriate individuals or organizations when the Shift Manager (SM)/Site Emergency Director (SED) has determined by EPIP-1 that events have occurred that are classified as a ALERT.
- 1.2 To provide the SED/SM a method for periodic reanalysis of current conditions to determine whether the ALERT should be terminated or continued.

## 2.0 REFERENCES

### 2.1 Interface Documents

- [1] SPP-3.5 "Regulatory Reporting Requirements"
- [2] EPIP-4, "Site Area Emergency"
- [3] EPIP-5, "General Emergency"
- [4] EPIP-6, "Activation and Operation of the Technical Support Center"
- [5] EPIP-7, "Activation and Operation of the Operations Support Center"
- [6] EPIP-8, "Personnel Accountability and Evacuation"
- [7] EPIP-10, "Medical Emergency Response"
- [8] EPIP-13, "Dose Assessment"
- [9] EPIP-14, "Radiological Control Response"
- [10] EPIP-16, "Termination and Recovery"
- [11] CECC EPIP-9, "Emergency Environmental Radiological Monitoring Procedures"
- [12] SSI-1, "Security Instructions For Members Of The Security Force"

## 3.0 INSTRUCTIONS

**NOTE:** IF there are personnel injuries, THEN IMPLEMENT EPIP-10, "Medical Emergency Response."

**NOTE:** IF there are immediate hazards to plant personnel, THEN consider immediately implementing EPIP-8 "Personnel Accountability and Evacuation" in parallel with this procedure

### 3.1 ACTIVATION OF THE EMERGENCY RESPONSE FACILITIES

Upon classifying events as an ALERT the SM/SED shall:

- [1] IF TSC is OPERATIONAL, (SED transferred to TSC), THEN  
GO TO Section 3.2 (page 7).





### 3.1 ACTIVATION OF THE EMERGENCY RESPONSE FACILITIES (Continued)

**[2] ACTIVATE Emergency Paging System (EPS) as follows:**

- [a] IF EPS has already been activated, THEN GO TO Step 3.** ☐
- [b] IF ongoing onsite Security events may present risk to the emergency responders, THEN CONSULT with Security to determine if site access is dangerous to the life and health of emergency responders.** ☐
- [c] IF ongoing events makes site access dangerous to the life and health of emergency responders THEN SELECT STAGING AREA button on the terminal INSTEAD of the EMERGENCY button.** ☐
- [d] ACTIVATE EPS using touch screen terminal. IF EPS fails to activate, THEN continue with step 3.** ☐

**[3] COMPLETE Appendix B (TVA Initial Notification for Alert).**

**NOTE:** ODS should be notified within 5 minutes after declaration of the event.

**[4] NOTIFY ODS.**

Initial	Time
---------	------

**5-751-1700 ODS: Ringdown Line or 5-751-2495 or 9-785-1700**

- [a] IF EPS failed to activate from SQN when attempted THEN DIRECT ODS to activate SQN EPS. IF ODS is also unable to activate EPS, THEN continue with step [4] [b].** ☐
- [b] READ completed Appendix B to ODS.** ☐
- [c] FAX completed Appendix B to ODS.** ☐

**5-751-8620 (Fax)**

- [d] MONITOR** for confirmation call from ODS that State/Local notifications complete: **RECORD** time State notified. \_\_\_\_\_  
Notification Time

**3.1 ACTIVATION OF THE EMERGENCY RESPONSE FACILITIES (Continued)**

- [5] IF ODS CANNOT be contacted within 10 minutes of the declaration, THEN**

- [a] CONTACT** Tennessee Emergency Management Agency (TEMA) and **READ** completed Appendix B.

InitialTime.

9-1-800-262-3300 or 9-1-615-741-0001  
or 888-616-8091 (satellite phone)

- [b] FAX** completed Appendix B to TEMA.



9-1-615-242-9635 (Fax)

- [6] MONITOR** Emergency Response Organization (ERO) Responses by reviewing touch screen monitor, obtaining copies of the printed report available in the TSC or OSC, or reviewing Call List progress. (Delegate these tasks to Operations Clerk, MSS, or other available personnel.)

- [a] IF** any ERO positions are not responding, **THEN DIRECT** available staff to **CALL** personnel to staff TSC/OSC positions (Use REP Duty Roster and Call List).



- [7] PERFORM** Appendix A, Notifications and Announcements. (Delegate as needed)



- [8] GO TO** Section 3.3.

**3.2 ALERT DECLARATION BY TSC**

Upon classifying events as a **ALERT** the SED shall:

**NOTE:** CECC Director should be notified within **5 minutes** after declaration of the event.

**[1] RECORD** Time of Declaration \_\_\_\_\_

**[2] RECORD** EAL(s) \_\_\_\_\_

**[3] CALL** CECC Director and inform of escalation, time of declaration, EAL(s) declared, and description of events.

Initial	Time
---------	------

Ringdown Line or 5 -751-1614 or 5 -751-1680

**[4] IF** CECC Director **CANNOT** be contacted within **10 minutes** of the declaration, **THEN**

**[a] COMPLETE** Appendix B (Initial Notification for Alert). ☐

**[b] NOTIFY** TEMA AND **READ** completed Appendix B.

Initial	Time
---------	------

9-1-800-262-3300 or 9-1-615-741-0001  
or 888-616-8091 (satellite phone)

**[c] FAX** completed Appendix B to TEMA. ☐

9-1-615-242-9635 (Fax)

**[5] IF** not previously implemented, **THEN PERFORM** Appendix A, Notifications and Announcements. ☐

## 3.3 MONITOR CONDITIONS

- [1] MONITOR radiation monitors. WHEN indication exists of an unplanned radiological release, THEN PERFORM Dose Assessment. ☐

- [a] IF the CECC has not assumed dose assessment responsibility, THEN NOTIFY Chemistry to perform a dose assessment using EPIP-13, "Dose Assessment"

AND

PROVIDE the following information:

1. Type Of Event (SGTR/L, LOCA, WGDT, Cntmt Bypass)
2. Release Path (SG/PORV, Aux, Shld, Turb, Serv, Cond)
3. Expected Duration (If unknown assume 4 hour duration) ☐

7285 (Lab) or 6348 (Lab) or 20126 (Pager)

- [2] MONITOR plant conditions:

- [a] EVALUATE using EPIP-1:

1. IF conditions satisfy criteria of SITE AREA EMERGENCY(s) or higher THEN initiate EPIP-4 or 5 as appropriate. ☐
2. IF additional conditions satisfy criteria of other ALERT(s) THEN Complete Appendix C. ☐
3. IF conditions warrant a need for follow-up information, THEN Complete Appendix C. ☐

- [b] IF plant conditions warrant, ACTIVATE assembly and accountability using EPIP-8. ☐

**3.3 MONITOR CONDITIONS (Continued)**

**[c] IF Appendix C completed, THEN**

**1. REPORT to CECC for State notification:**

Initial      Time

<p>CECC Director: Ringdown Line or 5 -751-1614 or 5 -751-1680 OR ODS: Ringdown Line or 5-751-1700 or 5-751-2495 or 9-785-1700</p>
---

**2. FAX completed Appendix C to CECC.**

☐

CECC: 5-751-1682 (Fax) OR ODS: 5-751-8620 (Fax)
---

**3. IF neither the CECC or ODS can be reached, THEN**

**[a] NOTIFY TEMA AND READ Form .**

Initial      Time

<p>9-1-800-262-3300 or 9-1-615-741-0001 or 888-616-8091 (satellite phone)</p>
---

**[b] FAX completed Appendix C to TEMA.**

☐

9-1-615-242-9635 (Fax)
------------------------

**3.4 TERMINATION OF THE EVENT****[1] WHEN the situation no longer exists, THEN**

**[a] TERMINATE** emergency per EPIP-16, "Termination and Recovery," ☐

**[b] COMPLETE** Appendix C including Time and Date Event Terminated. ☐

**[c] FAX** completed Appendix C to the CECC Director. ☐

ODS: 5-751-8620 (Fax) OR  
CECC: 5-751-1682 (Fax)

**[2] COLLECT** all forms and appendices and **FORWARD** all documentation to Emergency Preparedness. ☐

**4.0 RECORD RETENTION****4.1 Records of Classified Emergencies**

The materials generated in support of key actions during an actual emergency classified as NOUE or higher are considered Lifetime retention Non-QA records. Materials shall be forwarded to the EP Manager who shall submit any records deemed necessary to demonstrate performance to the Corporate EP Manager for storage.

**4.2 Drill and Exercise Records**

The materials deemed necessary to demonstrate performance of key actions during drills are considered Non-QA records. These records shall be forwarded to the EP Manager who shall retain records deemed necessary to demonstrate six-year plan performance for six years. The EP Manager shall retain other records in this category for three years.

**5.0 ILLUSTRATIONS AND APPENDICES****5.1 Appendix A - Notifications and Announcements**

Appendix A, Notifications and Announcements provides guidance for security threats, and for prompt notification of the NRC Resident and plant personnel.

**5.2 Appendix B - TVA Initial Notification for Alert**

Appendix B, TVA Initial Notification for Alert, is used to initially notify the Operations Duty Specialist who notifies the Tennessee Emergency Management Agency.

**5.3 Appendix C - Alert Follow-up Information**

Appendix C, Alert Follow-up Information is used to provide additional information concerning other Alerts or other information concerning additional conditions to the ODS for State notification and event termination.

**APPENDIX A**  
**Notifications and Announcements**  
 (Page 1 of 2)

**[1] IF there is a security threat, THEN**

- [a] NOTIFY Security Shift Supervisor to implement SSI-1, "Security Instructions For Members Of The Security Force"**

Initial Time

6144 or 6568

- [b] DETERMINE if Security recommends implementing the "Two Person Line of Sight" Rule.**
- [c] IF Nuclear Security recommends establishing the "Two Person Line of Sight" Rule, THEN INFORM the SM/SED. ("Two Person Line of Sight" requires use of EPIP-8).**

Initial Time

**[2] NOTIFY RADCON Shift Supervisor:**

- [a] STATE: "AN ALERT HAS BEEN DECLARED, BASED UPON (*Describe the conditions*), AFFECTING UNIT(s) \_\_\_\_."**

Initial Time

- [b] DIRECT RadCon to implement EPIP-14, "Radiological Control Response."**
- [c] DIRECT RadCon to evaluate the need for CECC EPIP-9, "Emergency Environmental Radiological Monitoring Procedures" which includes activation of the radiological monitoring van.**

**[3] NOTIFY Chemistry Shift Supervisor:**

- [a] STATE: "AN ALERT HAS BEEN DECLARED, BASED UPON (*Describe the conditions*), AFFECTING UNIT(s) \_\_\_\_."**

Initial Time

7285 (Lab) or 6348 (Lab) or 20126 (Pager)

- [b] DIRECT Chemistry to implement EPIP-14, "Radiological Control Response."**



**APPENDIX A**  
**Notifications and Announcements**  
(Page 2 of 2)

**[4] ANNOUNCE to plant personnel:**

**[a] "ATTENTION PLANT PERSONNEL. ATTENTION PLANT PERSONNEL. A ALERT HAS BEEN DECLARED BASED ON ( Describe the conditions ), AFFECTING UNIT(s) \_\_\_\_."** ☐

**[b] REPEAT Announcement.** ☐

**[5] NOTIFY Plant Management in accordance with SPP-3.5 AND PROVIDE ALERT Information.** \_\_\_\_\_  
Initial      Time

**[6] NOTIFY the "On Call" NRC Resident AND PROVIDE ALERT Information.** \_\_\_\_\_  
Initial      Time

**NOTE:** NRC notification should be made as soon as practicable, but within 1 hour of "ALERT" declaration. Whenever NRC requests, a qualified person must provide a continuous update to NRC Operations Center.

**[7] NOTIFY NRC of plan activation via ENS phone** \_\_\_\_\_  
Initial      Time

9-1-(301) 816-5100 (Main) 9-1-(301) 951-0550 (Backup) 9-1-(301) 816-5151 (Fax)
--

**[8] NOTIFY the SM/SED that notifications are complete.** \_\_\_\_\_  
Initial      Time

APPENDIX B  
TVA INITIAL NOTIFICATION FOR ALERT

## TVA INITIAL NOTIFICATION FOR ALERT

1. ☐ This is a Drill ☐ This is an Actual Event - Repeat - This is an Actual Event2. This is SED \_\_\_\_\_, Sequoyah has declared an **ALERT**  
affecting: ☐ Unit 1 ☐ Unit 2 ☐ Both Unit 1 and Unit 2

3. EAL Designator(s): \_\_\_\_\_

4. Brief Description of the Event: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Radiological Conditions: (Check one box under each Airborne AND Liquid column.)

Airborne Releases Offsite

- ☐
- Minor releases within federally approved limits
- <sup>1</sup>
- 
- ☐
- Releases above federally approved limits
- <sup>1</sup>
- 
- ☐
- Release information not known

( <sup>1</sup>Tech Specs)Liquid Releases Offsite

- ☐
- Minor releases within federally approved limits
- <sup>1</sup>
- 
- ☐
- Releases above federally approved limits
- <sup>1</sup>
- 
- ☐
- Release information not known

( <sup>1</sup>Tech Specs)

6. Event Declared: Time: \_\_\_\_\_ Date: \_\_\_\_\_

7. Provide Protective Action Recommendation: ☐ None

8. Please repeat back the information you have received to ensure accuracy.

9. Time and Date this information was provided \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Action: When completed, FAX this information.

APPENDIX C  
ALERT FOLLOW-UP INFORMATION

1. ☐ THIS IS A REAL EVENT ☐ THIS IS A DRILL

2. There has been an ALERT declared at Sequoyah affecting:  
☐ Unit 1 ☐ Unit 2 ☐ Both Unit 1 and Unit 2

3. Reactor Status: Unit 1: ☐ Shut Down ☐ At Power ☐ Refueling ☐ N/A  
Unit 2: ☐ Shut Down ☐ At Power ☐ Refueling ☐ N/A

4. Additional EAL Designators \_\_\_\_\_

5. Significant Changes in Plant Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Significant Changes in Radiological Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Offsite Protective Action Recommendation:  
☐ None

8. Onsite Protective Actions: Assembly and Accountability ☐ No ☐ Initiated ☐ Completed  
Site Evacuation ☐ No ☐ Initiated ☐ Completed

9. The Meteorological Conditions are: Wind Speed: \_\_\_\_\_ m.p.h.  
(Use 46 meter data on the Met Tower) Wind Direction is from: \_\_\_\_\_ degrees

10. Event Terminated: Date/Time \_\_\_\_\_

11. Please repeat back the information you have received to ensure accuracy.

12. FAX to ODS at 5-751-8620 or CECC Director at 5-751-1682 after completing the notification.

Completed by: \_\_\_\_\_ Date/Time \_\_\_\_\_

**SQN L.P-3, R25 - Procedure Changes  
Plan Effectiveness Determination**

**Page 1 of 6**

**Attachment 5**

**PLAN EFFECTIVENESS DETERMINATION (Ref. EPIL-1, Rev. 15)**

<b>*Document and Revision: SQN EPIP-3, R25</b>		
<b>*Revision summary: corrected phone number</b>		
<b>1.</b>	Does the REP/EPIP revision detrimentally affect the division of responsibility for emergency response by TVA or by the State or local organizations within the EPZ? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="radio"/> No
<b>2</b>	Does the REP/EPIP revision detrimentally affect the on-shift facility licensee (TVA) responsibilities for emergency response or the augmented emergency response organization? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="radio"/> No
<b>3</b>	Does the REP/EPIP revision detrimentally affect arrangements to accommodate State and local staff at TVA's Emergency Operations Facilities? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="radio"/> No
<b>4</b>	Does the REP/EPIP revision detrimentally affect TVA's standard emergency classification and action level scheme? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="radio"/> No

**Attachment 5**

**PLAN EFFECTIVENESS DETERMINATION (Ref. EPIL-1, Rev. 15)**

<b>5</b>	Does the REP/EPIP revision detrimentally affect TVA's notification procedures for State and local response organizations and for notification of emergency personnel by all organizations? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>6</b>	Does the REP/EPIP revision detrimentally affect the means by which early notification and clear instruction to the populace within the plume exposure pathway EPZ is disseminated? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>7</b>	Does the REP/EPIP revision detrimentally affect any previously established prompt communications link which exists among principal response organizations to personnel and to the public? <b>Explanation:</b> Section 3.3, [c] 3. [a] of EPIP-3, R25 has a phone number that was corrected.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**SQN E. P-3, R25 - Procedure Changes  
Plan Effectiveness Determination**

**Page 3 of 6**

<b>8</b>	Does the REP/EPIP revision detrimentally affect the methods, systems, and equipment for assessing and monitoring actual or potential offsite radiological conditions? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>9</b>	Does the REP/EPIP revision detrimentally affect any emergency facilities and equipment needed to support the emergency response? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>10</b>	Does the REP/EPIP revision detrimentally affect public emergency response education or any principle points of contact with the news media for dissemination of information during an emergency? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>11</b>	Does the REP/EPIP revision detrimentally affect any protective actions developed by TVA for the plume exposure pathway EPZ for emergency workers and the public? <b>Explanation:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

<b>12</b>	<p>Does the REP/EPIP revision detrimentally affect the means for controlling radiological exposures to emergency workers both onsite and offsite?</p> <p><b>Explanation:</b></p>	<input type="checkbox"/> Yes <input checked="" type="radio"/> No
<b>13</b>	<p>Does the REP/EPIP revision detrimentally affect any previously established arrangements for medical services for contaminated injured individuals?</p> <p><b>Explanation:</b></p>	<input type="checkbox"/> Yes <input checked="" type="radio"/> No
<b>14</b>	<p>Does the REP/EPIP revision detrimentally affect general plans for recovery/reentry into the EPZ?</p> <p><b>Explanation:</b></p>	<input type="checkbox"/> Yes <input checked="" type="radio"/> No
<b>15</b>	<p>Does the REP/EPIP revision detrimentally affect any radiological emergency response training which is provided for those who may be called on to assist in an emergency?</p> <p><b>Explanation:</b></p>	<input type="checkbox"/> Yes <input checked="" type="radio"/> No
<b>16</b>	<p>Does the REP/EPIP revision detrimentally affect any periodic exercises which are conducted to evaluate major portions of the emergency response capabilities?</p> <p><b>Explanation:</b></p>	<input type="checkbox"/> Yes <input checked="" type="radio"/> No

**SQL P-3, R25 - Procedure Changes**  
**Plan Effectiveness Determination**

Page 5 of 6

17	Does the REP/EPIP revision detrimentally affect the responsibilities for REP development, review and distribution? Explanation:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
18	Does the REP/EPIP revision detrimentally affect any SAR requirements? Explanation:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
19	Does the REP/EPIP revision result in any deviation to Technical Specifications? Explanation:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
20	Does the REP/EPIP revision result in any deviation to the REP licensing basis and supporting SER (if applicable)? Explanation:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Attachment 5**

**PLAN EFFECTIVENESS DETERMINATION (Ref. EPIL-1, Rev. 15)**

---

	EPIP-3, Alert	25
PED Performed for:	_____ Procedure Title	_____ Revision
	Bill Peggram	June 24, 2003
PED Performed by:	_____	_____ Date
	Randy Ford	June 24, 2003
PED Reviewed by:	_____	_____ Date



**SQN L.P-3, R25 - Procedure Changes  
Plan Effectiveness Determination**

**Page 6 of 6**

**Attachment 5**

**PLAN EFFECTIVENESS DETERMINATION (Ref. EPIL-1, Rev. 15)**

State concurrence of any EAL changes is obtained after all TVA plant approvals to the revision have been obtained.

2	Has the affected State concurred in any EAL changes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2	Explanation:	

State concurrence verified by: \_\_\_\_\_ Date \_\_\_\_\_

2	<p>*Was this REP or EPIP revision impacted by another revision</p> <p>*to the same document that was issued while this revision</p> <p>*was being processed?</p> <p>*If the answer to the above question is yes then ensure that</p> <p>*changes to that previous revision are captured in this revision</p> <p>*unless intentionally changed in this revision.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3		

\* Revision content verified by: Bill Peggram June 24, 2003  
Date \_\_\_\_\_

\* Revision

**TENNESSEE VALLEY AUTHORITY**  
**SEQUOYAH NUCLEAR PLANT**  
**EMERGENCY PLAN IMPLEMENTING PROCEDURE**

**EPIP-4**

**SITE AREA EMERGENCY**

REVISION 25

**QUALITY-RELATED**

PREPARED BY: BILL PEGGRAM

RESPONSIBLE  
ORGANIZATION: EMERGENCY PREPAREDNESS

APPROVED BY: RANDY FORD

EFFECTIVE DATE: 06/25/2003

**LEVEL OF USE: REFERENCE USE**

## Revision History

Rev	Date	Pages Effected	Reason for Revision
21	03/30/2001		Revised references to EPIP-14 for Dose Assessment to the new EPIP-13 for Dose Assessment. Added EPIP-13 to references. Reformatted substantially for clarity. Updated Notification and Follow-Up forms to Pentagon standard content.
22	07/30/2002		Substantial format modification for standardization with BFN/WBN was implemented in this revision. Reformatted and repaginated as necessary. Reordered actions to be consistent with EIPs 2, 3, 5. Changed reference of PHYSI-32 to SSI-1. Added Section 5.0, Illustrations and Appendices Section to the body of the procedure. Added caution concerning conducting assembly and accountability if it will present a danger to employees. Clarified use of 5- and 9- telephone prefixes. Added what information is to be provided by the Shift Manager to Chemistry when requesting Dose Assessment: 1.Type of Event, 2. Release Path, 3. Expected Duration. Clarified how to check ERO pager response. EPIP-4 was revised to implement actions to support the NRC Security Order including adding "Two Person Line-of-Sight" rule when deemed necessary by Security. Clarified what MET Data elevation is to be included on the initial notification form and the followup form for Site Area Emergency.
23	08/26/2002		Added Step 2 to section 3.1 to speed implementation if EPS has already been activated. Condensed steps in 3.1 and 3.2 on assembly and accountability. Implement ability to Stage TSC/OSC personnel near-site when it is unsafe to immediately enter the site due to security conditions. Corrected title of CECC EPIP-9 in Sections 3.1 and 3.2. This is a intent revision.
24	04/22/2003		General Revision to restructure EPIP for better flow. Moved ODS notification earlier in procedure. Intent Change.
25	06/25/2003	9	Non intent change. Phone number correction.

## Table of Contents

<b>1.0 PURPOSE</b>	<b>4</b>
<b>2.0 REFERENCES</b>	<b>4</b>
<b>3.0 INSTRUCTIONS</b>	<b>4</b>
3.1 Activation of the REP By the SM	4
3.2 Emergency Level Escalation by the TSC	6
3.3 Monitor Conditions	7
3.4 Termination of the Event	9
<b>4.0 RECORDS RETENTION</b>	<b>10</b>
4.1 Records of Classified Emergencies	10
4.2 Drill and Exercise Records	10
<b>5.0 ILLUSTRATIONS AND APPENDICES</b>	<b>10</b>
5.1 Appendix A, Notifications and Announcements	11
5.2 Appendix B, TVA Initial Notification of Site Area Emergency	13
5.3 Appendix C, Site Area Emergency Follow-up Information	14

## 1.0 PURPOSE

- 1.1 To provide a method for timely notifications of appropriate individuals or organizations when the Shift Manager (SM)/Site Emergency Director (SED) has determined by EPIP-1 that events have occurred that are classified as a SITE AREA EMERGENCY (SAE).
- 1.2 To provide the SED/SM a method for periodic reanalysis of current conditions to determine whether the SITE AREA EMERGENCY should be terminated or continued.

## 2.0 REFERENCES

### 2.1 Interface Documents

- [1] SPP-3.5 "Regulatory Reporting Requirements"
- [2] EPIP-5, "General Emergency"
- [3] EPIP-6, "Activation and Operation of the Technical Support Center"
- [4] EPIP-7, "Activation and Operation of the Operations Support Center"
- [5] EPIP-8, "Personnel Accountability and Evacuation"
- [6] EPIP-10, "Medical Emergency Response"
- [7] EPIP-13, "Dose Assessment"
- [8] EPIP-14, "Radiological Control Response"
- [9] EPIP-16, "Termination and Recovery"
- [10] CECC EPIP-9, "Emergency Environmental Radiological Monitoring Procedures"
- [11] SSI-1, "Security Instructions For Members Of The Security Force"

## 3.0 INSTRUCTIONS

**NOTE:** IF there are personnel injuries, THEN IMPLEMENT EPIP-10, "Medical Emergency Response."

**NOTE:** IF there are immediate hazards to plant personnel, THEN consider immediately implementing EPIP-8 "Personnel Accountability and Evacuation" in parallel with this procedure

### 3.1 ACTIVATION OF THE EMERGENCY RESPONSE FACILITIES

Upon classifying events as a SITE AREA EMERGENCY the SM/SED shall:

- [1] IF TSC is OPERATIONAL, (SED transferred to TSC), THEN  
GO TO Section 3.2 (Page 7).



## 3.1 ACTIVATION OF THE EMERGENCY RESPONSE FACILITIES (Continued)

## [2] ACTIVATE Emergency Paging System (EPS) as follows:

- [a] IF EPS has already been activated, THEN GO TO Step 3. ☐
- [b] IF ongoing onsite Security events may present risk to the emergency responders, THEN...CONSULT with Security to determine if site access is dangerous to the life and health of emergency responders. ☐
- [c] IF ongoing events makes site access dangerous to the life and health of emergency responders THEN SELECT STAGING AREA button on the terminal INSTEAD of the EMERGENCY button. ☐
- [d] ACTIVATE EPS using touch screen terminal. IF EPS fails to activate, THEN continue with step 3. ☐
- [3] COMPLETE Appendix B, TVA Initial Notification for Site Area Emergency. ☐

**NOTE:** ODS should be notified within 5 minutes after declaration of the event.

## [4] NOTIFY ODS.

Initial Time

ODS: Ringdown Line or  
5 -751-1700 or 5 -751-2495 or 9-785-1700

- [a] IF EPS failed to activate from SQN when attempted THEN DIRECT ODS to activate SQN EPS. IF ODS is also unable to activate EPS, THEN continue with step [4] [b]. ☐
- [b] READ completed Appendix B to ODS. ☐
- [c] FAX completed Appendix B to ODS. ☐

5-751-8620 (Fax)

- [d] MONITOR for confirmation call from ODS that State/Local notifications complete: RECORD time State notified.

Notification Time

**3.1 ACTIVATION OF THE EMERGENCY RESPONSE FACILITIES (Continued)**

- [5] IF ODS CANNOT be contacted within 10 minutes of the declaration, THEN**

- [a] CONTACT Tennessee Emergency Management Agency (TEMA) and READ Completed Appendix B.**

Initial      Time.

9-1-800-262-3300 or 9-1-615-741-0001  
or 888-616-8091 (satellite phone)

- [b] FAX completed Appendix B to TEMA.**

☐

9-1-615-242-9635 (Fax)

- [6] MONITOR Emergency Response Organization (ERO) Responses by reviewing touch screen monitor, obtaining copies of the printed report available in the TSC or OSC, or reviewing Call List progress. (Delegate these tasks to Operations Clerk, MSS, or other available personnel.)**

- [a] IF any ERO positions are not responding, THEN DIRECT available staff to CALL personnel to staff TSC/OSC positions (Use REP Duty Roster and Call List).**

☐

- [7] PERFORM Appendix A, Notifications and Announcements. (Delegate as needed)**

☐

- [8] GO TO Section 3.3.**

**3.2 SITE AREA EMERGENCY DECLARATION BY TSC**

Upon classifying events as a SITE AREA EMERGENCY the SED shall:

**NOTE:** CECC Director should be notified within 5 minutes after declaration of the event.

[1] **RECORD** Time of Declaration \_\_\_\_\_

[2] **RECORD** EAL(s) \_\_\_\_\_

[3] **CALL** CECC Director and inform of escalation, time of declaration, EAL(s) declared, and description of events.

\_\_\_\_\_  
Initial      Time

Ringdown Line or 5 -751-1614 or 5 -751-1680

[4] **IF** CECC Director **CANNOT** be contacted within 10 minutes of the declaration, **THEN**

[a] **COMPLETE** Appendix B (Initial Notification for SAE)

[b] **NOTIFY** TEMA AND **READ** completed Appendix B.

\_\_\_\_\_  
Initial      Time

9-1-800-262-3300 or 9-1-615-741-0001  
or 888-616-8091 (satellite phone)

[c] **FAX** completed Appendix B to TEMA.

☐

9-1-615-242-9635 (Fax)

[5] **IF** not previously implemented, **THEN PERFORM** notifications using Appendix A.



## 3.3 MONITOR CONDITIONS

- [1] **MONITOR** radiation monitors. **WHEN** indication exists of an unplanned radiological release, **THEN PERFORM** Dose Assessment: ☐

- [a] **IF** the CECC has not assumed dose assessment responsibility, **THEN**

**NOTIFY** Chemistry to perform a dose assessment using EPIP-13, "Dose Assessment"

**AND**

**PROVIDE** the following information:

1. Type Of Event (SGTR/L, LOCA, WGDT, Cntmt Bypass)
  2. Release Path (SG/PORV, Aux, Shld, Turb, Serv, Cond)
  3. Expected Duration (If unknown assume 4 hour duration)
- ☐

7285 (Lab) or 6348 (Lab) or 20126 (Pager)

**CAUTION:** Assembly should **NOT** be initiated **IF** Assembly will present a danger to employees - For example:  
A severe weather condition exists or is imminent (such as a Tornado)  
An onsite Security risk condition exists (Consult with Nuclear Security)

- [2] **IF** personnel accountability has not been previously initiated, **THEN** **ACTIVATE** assembly and accountability using EPIP-8, Appendix C (may be delegated). ☐

- [3] **MONITOR** plant conditions:

- [a] **EVALUATE** conditions using EPIP-1:

- [1] **IF** conditions satisfy criteria of **GENERAL EMERGENCY(s)** **THEN** initiate EPIP-5. ☐

## 3.3 MONITOR CONDITIONS (Continued)

[2] IF additional conditions satisfy criteria of other  
SITE AREA EMERGENCY(s) THEN Complete  
Appendix C. ☐

[3] IF conditions warrant a need for follow-up information,  
THEN Complete Appendix C. ☐

[b] IF Appendix C completed, THEN

[1] REPORT to CECC for State notification:

Initial

Time

CECC Director: Ringdown Line or  
5 -751-1614 or 5 -751-1680  
OR  
ODS: Ringdown Line or 5-751-1700 or  
5-751-2495 or 9-785-1700

[2] FAX completed Appendix C to CECC. ☐

CECC: 5-751-1682 (Fax) OR ODS: 5-751-8620 (Fax)

[3] IF neither the CECC or ODS can be reached, THEN

[a] NOTIFY TEMA AND READ Appendix C.

Initial

Time

9-1-800-262-3300 or 9-1-615-741-0001  
or 888-616-8091 (satellite phone)

[b] FAX completed Appendix C to TEMA. ☐

9-1-615-242-9635 (Fax)

**3.4 TERMINATION OF THE EVENT****[1] WHEN situation no longer exists, THEN**

**[a] TERMINATE** emergency per EPIP-16, "Termination and Recovery," ☐

**[b] COMPLETE** Appendix C including Time and Date Event Terminated.

**[c] FAX** completed Appendix C to CECC Director. ☐

CECC: 5-751-1682 (Fax) OR  
ODS: 5-751-8620 (Fax) (Backup)

**[2] COLLECT** all forms and appendices and **FORWARD** all documentation to Emergency Preparedness. ☐

**4.0 RECORD RETENTION****4.1 Records of Classified Emergencies**

The materials generated in support of key actions during an actual emergency classified as NOUE or higher are considered Lifetime retention Non-QA records. Materials shall be forwarded to the EP Manager who shall submit any records deemed necessary to demonstrate performance to the Corporate EP Manager for storage.

**4.2 Drill and Exercise Records**

The materials deemed necessary to demonstrate performance of key actions during drills are considered Non-QA records. These records shall be forwarded to the EP Manager who shall retain records deemed necessary to demonstrate six-year plan performance for six years. The EP Manager shall retain other records in this category for three years.

**5.0 ILLUSTRATIONS AND APPENDICES****5.1 Appendix A - Notifications and Announcements**

Appendix A, Notifications and Announcements, provides guidance for security threats, and for prompt notification of the NRC Resident and plant personnel.

**5.2 Appendix B - TVA Initial Notification for Site Area Emergency**

Appendix B, TVA Initial Notification for Site Area Emergency, is used to initially notify the Operations Duty Specialist who notifies the Tennessee Emergency Management Agency.

**5.3 Appendix C - Site Area Emergency Follow-up Information**

Appendix C, Site Area Emergency Follow-up Information, is used to provide additional information concerning other Site Area Emergencies or other information concerning additional conditions to the ODS for State notification and event termination.

**APPENDIX A**  
**Notifications and Announcements**  
(Page 1 of 2)

**[1] IF there is a security threat, THEN**

- [a] NOTIFY** Security Shift Supervisor to implement SSI-1, "Security Instructions For Members Of The Security Force"

Initial Time

6144 or 6568

- [b] DETERMINE** if Security recommends implementing the "Two Person Line of Sight" Rule. ☐
- [c] IF** Nuclear Security recommends establishing the "Two Person Line of Sight" Rule, **THEN INFORM** the SM/SED. ("Two Person Line of Sight" requires use of EPIP-8).

Initial Time

**[2] NOTIFY** RADCON Shift Supervisor:

- [a] STATE: "A SITE AREA EMERGENCY HAS BEEN DECLARED, BASED UPON (*Describe the conditions*), AFFECTING UNIT(s) \_\_\_\_."**

Initial Time

- [b] DIRECT** RadCon to implement EPIP-14, "Radiological Control Response." ☐
- [c] DIRECT** RadCon to implement CECC EPIP-9, "Emergency Environmental Radiological Monitoring Procedures" which includes activation of the radiological monitoring van. ☐

**[3] NOTIFY** Chemistry Shift Supervisor:

- [a] STATE: "A SITE AREA EMERGENCY HAS BEEN DECLARED, BASED UPON (*Describe the conditions*), AFFECTING UNIT(s) \_\_\_\_."**

Initial Time

7285 (Lab) or 6348 (Lab) or 20126 (Pager)

- [b] DIRECT** Chemistry to implement EPIP-14, "Radiological Control Response." ☐

**APPENDIX A**  
**Notifications and Announcements**  
(Page 2 of 2)

**[4] ANNOUNCE to plant personnel:**

**[a] "ATTENTION PLANT PERSONNEL. ATTENTION PLANT PERSONNEL. A SITE AREA EMERGENCY HAS BEEN DECLARED BASED ON ( Describe the condition ), AFFECTING UNIT(s) \_\_\_\_."**

☐

**[b] REPEAT Announcement.**

☐

**[5] NOTIFY Plant Management in accordance with SPP-3.5 AND PROVIDE SAE Information.**

Initial Time

**[6] NOTIFY the "On Call" NRC Resident AND PROVIDE SAE Information.**

Initial Time

**NOTE:** NRC ENS notification should be made as soon as practicable, but within 1 hour of "SITE AREA EMERGENCY" declaration. Whenever NRC requests, a qualified person must provide a continuous update to NRC Operations Center.

**[7] NOTIFY NRC of plan activation via ENS phone**

Initial Time

9-1-(301) 816-5100 (Main)  
9-1-(301) 951-0550 (Backup)  
9-1-(301) 816-5151 (Fax)

**[8] NOTIFY the SM/SED that notifications are complete.**

Initial Time

**APPENDIX B**  
**TVA Initial Notification for Site Area Emergency**

**TVA INITIAL NOTIFICATION FOR SITE AREA EMERGENCY**

1. ☐ This is a Drill ☐ This is an Actual Event - Repeat - This is an Actual Event
2. This is SED \_\_\_\_\_, Sequoyah has declared a **SITE AREA EMERGENCY**  
affecting: ☐ Unit 1 ☐ Unit 2 ☐ Both Unit 1 and Unit 2
3. EAL Designator(s): \_\_\_\_\_
4. Brief Description of the Event: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Radiological Conditions: (Check one box under each Airborne AND Liquid column.)
- | <u>Airborne Releases Offsite</u>  | <u>Liquid Releases Offsite</u>  |
|---|---|
| <input type="checkbox"/> Minor releases within federally approved limits <sup>1</sup> | <input type="checkbox"/> Minor releases within federally approved limits <sup>1</sup> |
| <input type="checkbox"/> Releases above federally approved limits <sup>1</sup>        | <input type="checkbox"/> Releases above federally approved limits <sup>1</sup>        |
| <input type="checkbox"/> Release Information not known                                | <input type="checkbox"/> Release Information not known                                |
| ( <sup>1</sup> Tech Specs)  | ( <sup>1</sup> Tech Specs)  |
6. Event Declared: Time: \_\_\_\_\_ Date: \_\_\_\_\_
7. Provide Protective Action Recommendation: ☐ None
8. Please repeat back the information you have received to ensure accuracy.
9. Time and Date this information was provided \_\_\_\_\_ / \_\_\_\_\_

**Action: When completed, FAX this Information.**

**APPENDIX C**  
**SITE AREA EMERGENCY FOLLOW-UP INFORMATION**

1. <input type="checkbox"/> THIS IS A REAL EVENT		<input type="checkbox"/> THIS IS A DRILL			
2. There has been a <b>SITE AREA EMERGENCY</b> declared at Sequoyah affecting: <input type="checkbox"/> Unit 1 <input type="checkbox"/> Unit 2 <input type="checkbox"/> Both Unit 1 and Unit 2					
3. Reactor Status:	Unit 1:	<input type="checkbox"/> Shut Down	<input type="checkbox"/> At Power	<input type="checkbox"/> Refueling	<input type="checkbox"/> N/A
	Unit 2:	<input type="checkbox"/> Shut Down	<input type="checkbox"/> At Power	<input type="checkbox"/> Refueling	<input type="checkbox"/> N/A
4. Additional EAL Designators _____					
5. Significant Changes In Plant Conditions: _____ _____ _____					
6. Significant Changes In Radiological Conditions: _____ _____ _____					
7. Offsite Protective Action Recommendation: <input type="checkbox"/> None					
8. Onsite Protective Actions:					
Assembly and Accountability		<input type="checkbox"/> No	<input type="checkbox"/> Initiated	<input type="checkbox"/> Completed	
Site Evacuation		<input type="checkbox"/> No	<input type="checkbox"/> Initiated	<input type="checkbox"/> Completed	
9. The Meteorological Conditions are:		Wind Speed: _____ m.p.h.			
(Use 46 meter data on the Met Tower)		Wind Direction is from: _____ degrees			
10. Event Terminated: Date/Time _____					
11. Please repeat back the information you have received to ensure accuracy.					
12. FAX to ODS at 5-751-8620 or CECC Director at 5-751-1682 after completing the notification.					
Completed by: _____, Date/Time _____					



**TENNESSEE VALLEY AUTHORITY**  
**SEQUOYAH NUCLEAR PLANT**  
**EMERGENCY PLAN IMPLEMENTING PROCEDURE**

**EPIP-5**

**GENERAL EMERGENCY**

REVISION 31

PREPARED BY: BILL PEGGRAM

RESPONSIBLE  
ORGANIZATION: EMERGENCY PREPAREDNESS

APPROVED BY: RANDY FORD

EFFECTIVE DATE: 06/25/2003

LEVEL OF USE: REFERENCE USE

**QUALITY-RELATED**

## Revision History

Rev	Date		Reason for Revision
27	03/30/2001		Revised references to EPIP-14 for Dose Assessment to the new EPIP-13 for Dose Assessment. Added EPIP-13 to references. Reformatted substantially for clarity. Added new Protective Action Recommendation Logic Diagram and removed the old one. Updated Notification and Follow-Up forms to Pentagon standard content.
28	07/30/2002		Substantial format modification for standardization with BFN/WBN was implemented in this revision. Reformatted and repaginated as necessary. Reordered actions to be consistent with EPIPs 2, 3, 4. Changed reference of PHYSI-32 to SSI-1. Added Section 5.0, Illustrations and Appendices Section to the body of the procedure. Added caution concerning conducting assembly and accountability if it will present a danger to employees. Clarified use of 5- and 9- telephone prefixes. Added what information is to be provided by the Shift Manager to Chemistry when requesting Dose Assessment: 1.Type of Event, 2. Release Path, 3. Expected Duration. Clarified how to check ERO pager response. EPIP-5 was revised to implement actions to support the NRC Security Order including adding "Two Person Line-of-Sight" rule when deemed necessary by Security. Clarified what MET Data elevation (46 meter) is to be included on the initial notification form and the followup form for General Emergency. At request of State, changed order of notification in cases where ODS cannot be reached (Counties first). Corrected telephone number for CECC.
29	08/26/2002		Implement ability to stage TSC/OSC personnel near-site when it is unsafe to immediately enter the site. Added Step in 3.1 when EPS had already been activated. Condensed assembly and accountability steps in Sections 3.1 and 3.2. Added "TVA" to step 9 in Sect. 3. Corrected title of CECC EPIP-9 in Sections 3.1 and 3.2. This is a intent revision.
30	04/01/2003		General Revision to restructure EPIP for better flow. Moved ODS notification earlier in procedures. Added evacuation sectors to Initial Notification Appendix and to consider issuance of KI in accordance with the State Plan in the PAR. Intent Change.
31	06/25/2003	9, 14	Non intent change. Phone number correction. Changed title of Appendix B and added note o match Figure 10-1 of the TVA REP.

## Table of Contents

1.0 PURPOSE .....	4
2.0 REFERENCES .....	4
3.0 INSTRUCTIONS.....	4
3.1 Activation of the Emergency Response Facilities .....	4
3.2 General Emergency Declaration by the TSC .....	7
3.3 Monitor Conditions .....	8
3.4 Termination of the Event .....	10
4.0 RECORDS RETENTION .....	11
4.1 Records of Classified Emergencies .....	11
4.2 Drill and Exercise Records .....	11
5.0 ILLUSTRATIONS AND APPENDICES .....	12
5.1 Appendix A, Notifications and Announcements.....	14
5.2 Appendix B, Protective Action Recommendation Logic Diagram .....	14
5.3 Appendix C, TVA Initial Notification of General Emergency.....	15
5.4 Appendix D, General Emergency Follow-up Information .....	16

## 1.0 PURPOSE

- 1.1 To provide a method for timely notifications of appropriate individuals or organizations when the Shift Manager (SM)/Site Emergency Director (SED) has determined by EPIP-1 that events have occurred that are classified as a GENERAL EMERGENCY (GE).
- 1.2 To provide the SED/SM a method for periodic reanalysis of current conditions to determine whether the GENERAL EMERGENCY should be terminated or continued.

## 2.0 REFERENCES

### 2.1 Interface Documents

- [1] SPP-3.5 "Regulatory Reporting Requirements"
- [2] EPIP-6, "Activation and Operation of the Technical Support Center"
- [3] EPIP-7, "Activation and Operation of the Operations Support Center"
- [4] EPIP-8, "Personnel Accountability and Evacuation"
- [5] EPIP-10, "Medical Emergency Response"
- [6] EPIP-13, "Dose Assessment"
- [7] EPIP-14, "Radiological Control Response"
- [8] EPIP-16, "Termination and Recovery"
- [9] CECC EPIP-9, "Emergency Environmental Radiological Monitoring Procedures"
- [10] SSI-1, "Security Instructions For Members Of The Security Force"

## 3.0 INSTRUCTIONS

**NOTE:** IF there are personnel injuries, THEN IMPLEMENT EPIP-10, "Medical Emergency Response" in parallel with this procedure.

**NOTE:** IF there are immediate hazards to plant personnel, THEN consider immediately implementing EPIP-8 "Personnel Accountability and Evacuation" in parallel with this procedure

### 3.1 ACTIVATION OF THE EMERGENCY RESPONSE FACILITIES

Upon classifying events as a GENERAL EMERGENCY," the SM/SED shall:

- [1] IF TSC is OPERATIONAL, (SED transferred to TSC), THEN  
GO TO Section 3.2.



## 3.1 ACTIVATION OF THE EMERGENCY RESPONSE FACILITIES (Continued)

## [2] ACTIVATE Emergency Paging System (EPS) as follows.

- [a] IF EPS has already been activated, THEN GO TO Step 3. ☐
- [b] IF ongoing onsite Security events may present risk to the emergency responders, THEN CONSULT with Security to determine if site access is dangerous to the life and health of emergency responders. ☐
- [c] IF ongoing events makes site access dangerous to the life and health of emergency responders, THEN SELECT STAGING AREA button on the EPS terminal INSTEAD of the EMERGENCY button. ☐
- [d] ACTIVATE EPS using touch screen terminal. IF EPS fails to activate, THEN continue with step 3. ☐
- [3] COMPLETE Appendix C (TVA Initial Notification for General Emergency). EVALUATE Protective Actions using Appendix B. ☐

**NOTE:** ODS should be notified within 5 minutes after declaration of the event.

## [4] NOTIFY ODS.

Initial Time

ODS: Ringdown Line or  
5 -751-1700 or 5 -751-2495 or 9-785-1700

- [a] IF EPS failed to activate from SQN, THEN DIRECT ODS to activate SQN EPS. IF ODS is also unable to activate EPS, THEN continue with step [4] [b]. ☐
- [b] READ completed Appendix C to ODS. ☐
- [c] FAX completed Appendix C to ODS. ☐

5-751-8620 (Fax)

- [d] MONITOR for confirmation call from ODS that State/Local notifications complete: RECORD time State notified.

Notification Time

## 3.1 ACTIVATION OF THE EMERGENCY RESPONSE FACILITIES (Continued)

[5] IF ODS CANNOT be contacted within 10 minutes of the declaration, THEN

[a] CONTACT Hamilton County Emergency Management Agency (EMA) AND READ completed Appendix C.

Initial

Time.

9-209-6900 or 9-622-7777 or 9-622-0022

[b] CONTACT Bradley County EMA AND READ completed Appendix C.

Initial

Time.

9-476-0606 or 9-476-7511

[c] NOTIFY Tennessee Emergency Management Agency (TEMA) and READ completed Appendix C.

Initial

Time.

9-1-800-262-3300 or 9-1-615-741-0001  
or 888-616-8091 (satellite phone)

[d] FAX completed Appendix C to TEMA.

☐

9-1-615-242-9635 (Fax)

[6] MONITOR Emergency Response Organization (ERO) Responses by reviewing touch screen monitor, obtaining copies of the printed report available in the TSC and OSC, or reviewing Call List progress.

(Delegate this task to Operations Clerk, MSS, or other available personnel.)

[a] IF any ERO positions are not responding, THEN CALL personnel to staff TSC/OSC positions (Use REP Duty Roster and Call List).

☐

[7] NOTIFY plant staff using Appendix A. (Delegate as needed)

☐

[8] GO TO Section 3.3

## 3.2 GENERAL EMERGENCY DECLARATION BY TSC

Upon classifying events as a **GENERAL EMERGENCY**," the SED shall:

**NOTE:** CECC Director should be notified within 5 minutes after declaration of the event.

[1] **RECORD** Time of Declaration \_\_\_\_\_

[2] **RECORD** EAL(s) \_\_\_\_\_

[3] **CALL** CECC Director and inform of escalation, time of declaration, EAL(s) declared, and description of events.

Initial \_\_\_\_\_ Time \_\_\_\_\_

Ringdown Line or 5 -751-1614 or 5 -751-1680

[4] **IF** CECC Director **CANNOT** be contacted within 10 minutes of the declaration, **THEN**

[a] **COMPLETE** Appendix C (TVA Initial Notification for General Emergency) using Appendix B to evaluate Protective Actions.

[b] **NOTIFY** Hamilton County EMA **AND READ** Appendix C

Initial \_\_\_\_\_ Time \_\_\_\_\_

9-209-6900 or 9-622-7777 or 9-622-0022

[c] **NOTIFY** Bradley County EMA **AND READ** Appendix C.

Initial \_\_\_\_\_ Time \_\_\_\_\_

9-476-0606 or 9-476-7511

[d] **NOTIFY** TEMA **AND READ** completed Appendix C .

Initial \_\_\_\_\_ Time \_\_\_\_\_

9-1-800-262-3300 or 9-1-615-741-0001  
or 888-616-8091 (satellite phone)

[e] **FAX** completed Appendix C to TEMA.

☐

9-1-615-242-9635 (Fax)

## 3.3 MONITOR CONDITIONS

**[1] ANNOUNCE** to plant personnel:

**[a]** "ATTENTION PLANT PERSONNEL. ATTENTION PLANT PERSONNEL. A GENERAL EMERGENCY HAS BEEN DECLARED BASED ON ( Describe the condition ), AFFECTING UNIT(s) \_\_\_\_." ☐

**[b]** REPEAT Announcement. ☐

**CAUTION:** Accountability should NOT be initiated at this time IF Assembly will present a danger to employees - For example:  
A severe weather condition exists or is imminent (such as a Tornado)  
An onsite Security risk condition exists (Consult with Nuclear Security)

**[2]** IF personnel accountability has not been previously initiated, THEN ACTIVATE assembly and accountability by using EPIP-8, Appendix C (may be delegated). ☐

**[3]** MONITOR radiation monitors. WHEN indication exists of an unplanned radiological release, THEN PERFORM Dose Assessment. ☐

**[a]** IF the CECC has not assumed Dose Assessment responsibility, THEN NOTIFY Chemistry to perform a dose assessment using EPIP-13, "Dose Assessment"

AND

PROVIDE the following information:

1. Type Of Event (SGTR/L, LOCA, WGDT, Cntmt Bypass)
  2. Release Path (SG/PORV, Aux, Shld, Turb, Serv, Cond)
  3. Expected Duration (If unknown assume 4 hour duration)
- ☐

7285 (Lab) or 6348 (Lab) or 20126 (Pager)

**[b]** IF PAR responsibility has NOT been transferred to the CECC Director, THEN REFER to Appendix B (Protective Action Recommendation Logic Diagram). ☐

**[c]** IF changes to Protective Action Recommendations are necessary, THEN complete Appendix D. ☐



## 3.3 MONITOR CONDITIONS (Continued)

## [4] MONITOR plant conditions:

## [a] EVALUATE conditions using EPIP-1:

[1] IF additional conditions satisfy criteria of other  
GENERAL EMERGENCY(s) THEN complete  
Appendix D. ☐

[2] IF conditions warrant a need for follow-up information,  
THEN complete Appendix D. ☐

## [b] IF Appendix D completed, THEN

## [1] REPORT to CECC for State notification:

Initial Time

CECC Director: Ringdown Line or  
5-751-1614 or 5-751-1680  
OR  
ODS: Ringdown Line or 5-751-1700 or  
5-751-2495 or 9-785-1700

[2] FAX completed Appendix D to CECC. ☐

CECC: 5-751-1682 (Fax) OR ODS: 5-751-8620 (Fax)

## [3] IF neither the CECC or ODS can be reached, THEN

[a] NOTIFY TEMA AND READ completed  
Appendix D .

Initial Time

9-1-800-262-3300 or 9-1-615-741-0001  
or 888-616-8091 (satellite phone)

[b] FAX completed Appendix D to TEMA. ☐

9-1-615-242-9635 (Fax)

**3.3 MONITOR CONDITIONS (Continued)**

**NOTE:** NRC notification should be made as soon as practicable, but within 1 hour of "**GENERAL EMERGENCY**" declaration. Whenever NRC requests, a qualified person must provide a continuous update to NRC Operations Center.

**[5] NOTIFY NRC of plan activation via ENS phone**

Initial	Time
<div data-bbox="596 508 1034 623" data-label="Text"><p>9-1-(301) 816-5100 (Main) 9-1-(301) 951-0550 (Backup) 9-1-(301) 816-5151 (Fax)</p></div>	

**3.4 TERMINATION OF THE EVENT****[1] IF the situation no longer exists, THEN**

- [a] TERMINATE** emergency per EPIP-16, "Termination and Recovery," ☐
- [b] COMPLETE** Appendix D including Time and Date Event Terminated. ☐
- [c] FAX** completed Appendix D to CECC Director. ☐

ODS: 5-751-8620 (Fax) OR  
CECC: 5-751-1682 (Fax)

**[2] COLLECT** documentation and **FORWARD** to Emergency Preparedness. ☐

**END OF SECTION**

**4.0 RECORD RETENTION****4.1 Records of Classified Emergencies**

The materials generated in support of key actions during an actual emergency classified as NOUE or higher are considered Lifetime retention Non-QA records. Materials shall be forwarded to the EP Manager who shall submit any records deemed necessary to demonstrate performance to the Corporate EP Manager for storage.

**4.2 Drill and Exercise Records**

The materials deemed necessary to demonstrate performance of key actions during drills are considered Non-QA records. These records shall be forwarded to the EP Manager who shall retain records deemed necessary to demonstrate six-year plan performance for six years. The EP Manager shall retain other records in this category for three years.

**5.0 ILLUSTRATIONS AND APPENDICES****5.1 Appendix A - Notifications and Announcements**

Appendix A provides guidance for security threats, and for prompt notification of the NRC Resident and plant personnel.

**5.2 Appendix B - Protective Action Recommendation Logic Diagram**

Appendix B, Protective Action Recommendation Logic Diagram, is used to determine the Protective Action Recommendation which is made to the State and is part of the initial notification made to the State. Protective Action Recommendations are the responsibility of the CECC Director after assuming the responsibility from the SED.

**5.3 Appendix C - TVA Initial Notification of General Emergency**

Appendix C, TVA Initial Notification of General Emergency, is the form used to initially notify the Operations Duty Specialist who notifies the Tennessee Emergency Management Agency.

**5.4 Appendix D - General Emergency Follow-up Information**

Appendix D, General Emergency Follow-up Information is the form used to provide additional concerning other General Emergencies or other information concerning additional conditions to the ODS for State notification and event termination.

Appendix A  
NOTIFICATIONS AND ANNOUNCEMENTS  
(Page 1 of 2)

**[1] IF there is a security threat, THEN**

- [a] NOTIFY** Security Shift Supervisor to implement SSI-1, "Security Instructions For Members Of The Security Force".

Initial Time

6144 or 6568

- [b] DETERMINE** if Security recommends implementing the "Two Person Line of Sight" Rule. ☐
- [c] IF** Nuclear Security recommends establishing the "Two Person Line of Sight" Rule, **THEN INFORM** the SM/SED. ("Two Person Line of Sight" requires use of EPIP-8).

Initial Time

**[2] NOTIFY** RADCON Shift Supervisor:

- [a] STATE: "A GENERAL EMERGENCY HAS BEEN DECLARED, BASED UPON (*Describe the conditions*), AFFECTING UNIT(s) \_\_\_\_."**

Initial Time

- [b] DIRECT** RADCON to implement EPIP-14, "Radiological Control Response." ☐
- [c] DIRECT** RADCON to implement CECC EPIP-9, "Emergency Environmental Radiological Monitoring Procedures" which includes activation of the radiological monitoring van. ☐

**[3] NOTIFY** Chemistry Shift Supervisor:

- [a] STATE: "A GENERAL EMERGENCY HAS BEEN DECLARED, BASED UPON (*Describe the conditions*), AFFECTING UNIT(s) \_\_\_\_."**

Initial Time

7285 (Lab) or 6348 (Lab) or 20126 (Pager)

- [b] DIRECT** Chemistry to implement EPIP-14, "Radiological Control Response." ☐

**Appendix A**  
**NOTIFICATIONS AND ANNOUNCEMENTS**  
(Page 2 of 2)

- [4] NOTIFY the "On Call" NRC Resident AND PROVIDE GE Information.

InitialTime

- [5] NOTIFY Plant Management in accordance with SPP-3.5 AND PROVIDE GE Information.

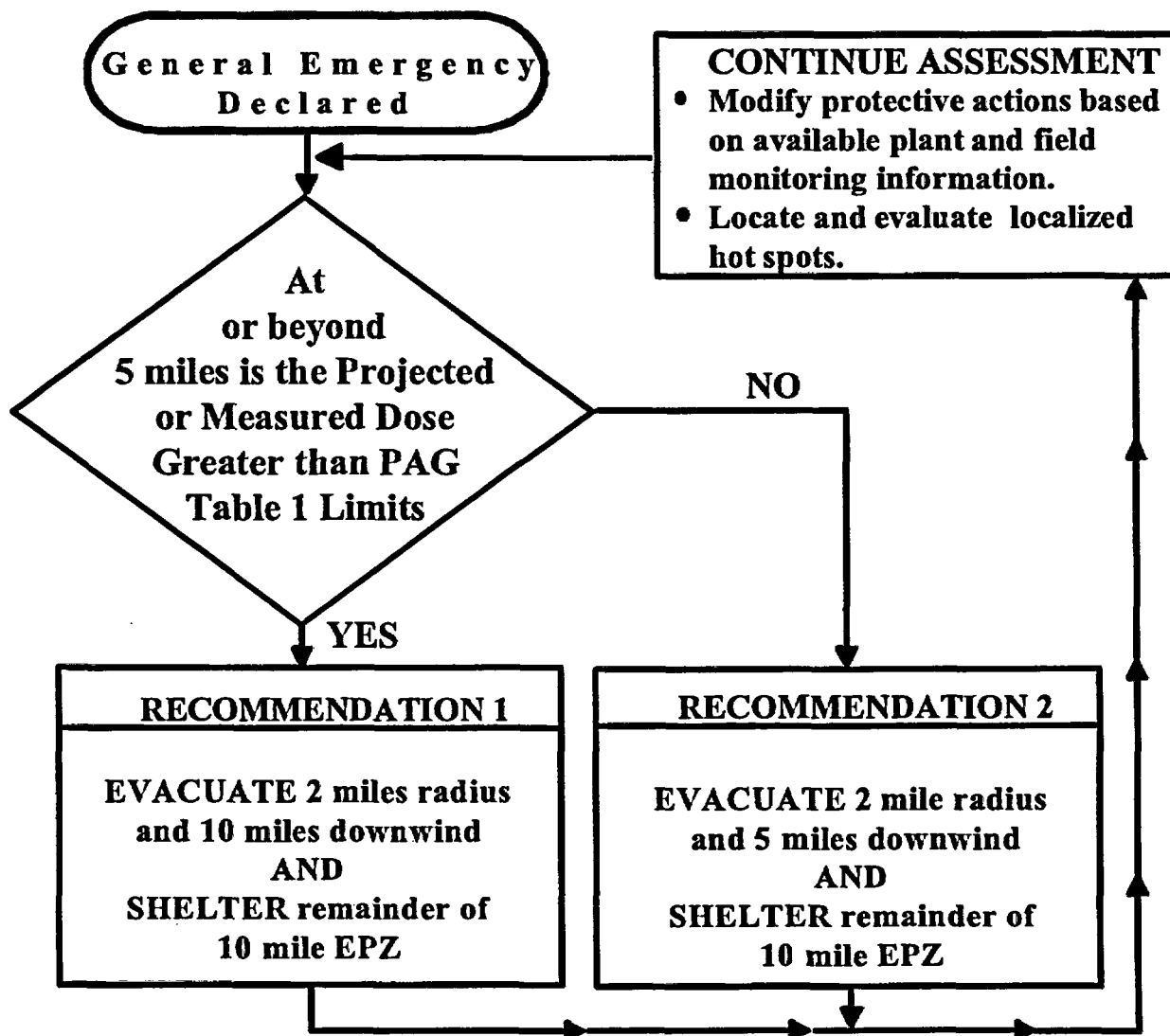
InitialTime

- [6] NOTIFY the SM/SED that notifications are complete.

InitialTime

**Appendix B  
PROTECTIVE ACTION RECOMMENDATIONS**

**Note: If conditions are unknown utilizing the flowchart, then answer NO.**



<b>Table 1</b>	
<b>Radioactivity Release Dose</b>	
<b>Note: Unknown conditions are assumed less than listed conditions</b>	
TYPE	Protective Action Guide (PAG) Limits
Measured	3.9E-6 microCurie/cc Iodine 131
	1 Rem/hr External Dose
Projected	1 Rem TEDE
	5 Rem Thyroid CDE

**Appendix C**  
**TVA INITIAL NOTIFICATION OF GENERAL EMERGENCY**

1. <input type="checkbox"/> This is a Drill <input type="checkbox"/> This is an Actual Event - Repeat - This is an Actual Event		
2. This is _____, Sequoyah has declared a <b>GENERAL EMERGENCY</b> affecting: <input type="checkbox"/> Unit 1 <input type="checkbox"/> Unit 2 <input type="checkbox"/> Both Unit 1 and Unit 2		
3. EAL Designator(s): _____		
4. Brief Description of the Event: _____ _____ _____		
5. Radiological Conditions: (Check one under both Airborne and Liquid column.)		
<div style="display: flex; justify-content: space-around;"> <div style="text-align: left;"> <u><b>Airborne Releases Offsite</b></u>  <input type="checkbox"/> Minor releases within federally approved limits<sup>1</sup>  <input type="checkbox"/> Releases above federally approved limits<sup>1</sup>  <input type="checkbox"/> Release information not known  ('Tech Specs) </div> <div style="text-align: left;"> <u><b>Liquid Releases Offsite</b></u>  <input type="checkbox"/> Minor releases within federally approved limits<sup>1</sup>  <input type="checkbox"/> Releases above federally approved limits<sup>1</sup>  <input type="checkbox"/> Release information not known  ('Tech Specs) </div> </div>		
6. Event Declared:      Time: _____      Date: _____		
7. The Meteorological Conditions are: (Use 46 meter data from the Met Tower)		
Wind Direction is FROM: _____ degrees      Wind Speed: _____ m.p.h		
8. Provide Protective Action Recommendation: (Check either 1 or 2, and mark wind direction.)		
<input type="checkbox"/> <b>Recommendation 1</b> • EVACUATE LISTED SECTORS (2 mile Radius and 10 miles downwind) • SHELTER all other non-listed sectors. • Consider issuance of POTASSIUM IODIDE in accordance with the State Plan	WIND FROM DIRECTION (item 7 )	<input type="checkbox"/> <b>Recommendation 2</b> • EVACUATE LISTED SECTORS (2 mile Radius and 5 mile downwind) • SHELTER all other non-listed sectors. • Consider issuance of POTASSIUM IODIDE in accordance with the State Plan
A-1, B-1, C-1, D-1, C-2, -6, -7, -8, D-2, -3, -5, -6	12 - 49	A-1, B-1, C-1, D-1, C-2, D-2
A-1, B-1, C-1, D-1, D-2, -3, -4, -5, -6	50 - 70	A-1, B-1, C-1, D-1, D-2
A-1, B-1, C-1, D-1, A-3, -4, D-2, -3, -4, -5	71 - 112	A-1, B-1, C-1, D-1, A-3, D-2
A-1, B-1, C-1, D-1, A-2, -3, -4, -5, -6, D-4	113 - 146	A-1, B-1, C-1, D-1, A-2, A-3,
A-1, B-1, C-1, D-1, A-2, -3, -4, -5, -6, B-2	147 - 173	A-1, B-1, C-1, D-1, A-2, A-3, B-2
A-1, B-1, C-1, D-1, A-2, -5, -6, B-2, -3, -4	174 - 214	A-1, B-1, C-1, D-1, A-2, B-2,
A-1, B-1, C-1, D-1, B-2, -3, -4, -5, -6, -7, -8	215 - 258	A-1, B-1, C-1, D-1, B-2, B-5,
A-1, B-1, C-1, D-1, B-2, -3, -5, -6, -7, -8, C-2, -3, C-4, -5, -6	259 - 331	A-1, B-1, C-1, D-1, B-2, B-5, C-2
A-1, B-1, C-1, D-1, B-5, C-2, -3, -4, -5, -6, -7, -8	332 - 11	A-1, B-1, C-1, D-1, B-5, C-2
9. Please repeat back the information you have received to ensure accuracy.		
10. Time and Date this information was provided _____ / _____		
<b>Action: When completed, FAX this information.</b>		

Appendix D  
GENERAL EMERGENCY FOLLOW-UP INFORMATION

1. <input type="checkbox"/> THIS IS A REAL EVENT		<input type="checkbox"/> THIS IS A DRILL			
2. There has been a <b>GENERAL EMERGENCY</b> declared at Sequoyah affecting: <input type="checkbox"/> Unit 1 <input type="checkbox"/> Unit 2 <input type="checkbox"/> Both Unit 1 and Unit 2					
3. Reactor Status:	Unit 1:	<input type="checkbox"/> Shut Down	<input type="checkbox"/> At Power	<input type="checkbox"/> Refueling	<input type="checkbox"/> N/A
	Unit 2:	<input type="checkbox"/> Shut Down	<input type="checkbox"/> At Power	<input type="checkbox"/> Refueling	<input type="checkbox"/> N/A
4. Additional EAL Designators _____					
5. Significant Changes in Plant Conditions: _____ _____ _____					
6. Significant Changes in Radiological Conditions: _____ _____ _____					
7. Offsite Protective Action Recommendation: (CECC to provide detailed PAR Sector Recommendations)					
<input type="checkbox"/> Recommendation 1 - Evacuate 2 mile radius and 10 miles downwind and shelter remainder of the 10 mile EPZ					
<input type="checkbox"/> Recommendation 2 - Evacuate 2 mile radius and 5 miles downwind and shelter remainder of the 10 mile EPZ					
8. Onsite Protective Actions:		Assembly and Accountability	<input type="checkbox"/> No	<input type="checkbox"/> Initiated	<input type="checkbox"/> Completed
		Site Evacuation	<input type="checkbox"/> No	<input type="checkbox"/> Initiated	<input type="checkbox"/> Completed
9. The Meteorological Conditions are:		Wind Speed: _____ m.p.h.			
(Use 46 meter data on the Met Tower)		Wind Direction is from: _____ degrees			
10. Event Terminated: Date/Time _____					
11. Please repeat the information you have received to ensure accuracy.					
12. FAX to ODS at 5-751-8620 or CECC Director at 5-751-1682 after completing the notification.					
Completed by: _____, Date/Time _____					