

MANUAL HARD COPY DISTRIBUTION
DOCUMENT TRANSMITTAL 2003-51725

USER INFORMATION:

Name: ~~GERLACH*ROSE M~~ EMPL#: 28401 CA#: 0363

Address: NUCSAL

Phone#: ~~254-3194~~

TRANSMITTAL INFORMATION:

TO: ~~GERLACH*ROSE M~~ 10/31/2003

LOCATION: DOCUMENT CONTROL DESK

FROM: NUCLEAR RECORDS DOCUMENT CONTROL CENTER (NUCSA-2)

THE FOLLOWING CHANGES HAVE OCCURRED TO THE HARDCOPY OR ELECTRONIC MANUAL ASSIGNED TO YOU:

111 - 111 - TSC LEAD ENGINEER

REMOVE MANUAL TABLE OF CONTENTS DATE: 10/27/2003

ADD MANUAL TABLE OF CONTENTS DATE: 10/30/2003

CATEGORY: PROCEDURES TYPE: EP

ID: EP-PS-111

REPLACE: REV:4

REPLACE: REV:4

REMOVE: PCAF 2003-1480 REV: N/A

REMOVE: PCAF 2003-1551 REV: N/A

ADD: PCAF 2003-1480 REV: N/A

ADD: PCAF 2003-1551 REV: N/A

UPDATES FOR HARD COPY MANUALS WILL BE DISTRIBUTED WITHIN 5 DAYS IN ACCORDANCE WITH DEPARTMENT PROCEDURES. PLEASE MAKE ALL CHANGES AND ACKNOWLEDGE COMPLETE IN YOUR NIMS INBOX UPON RECEIPT OF HARD COPY. FOR ELECTRONIC MANUAL USERS, ELECTRONICALLY REVIEW THE APPROPRIATE DOCUMENTS AND ACKNOWLEDGE COMPLETE IN YOUR NIMS INBOX.

A045

Control # _____

EMERGENCY NOTIFICATION REPORT

1. Call Status: ☐ THIS IS A DRILL ☐ THIS IS AN ACTUAL EVENT

2. This is: _____ at Susquehanna Steam Electric Station.
(Communicator's Name)

My telephone
number is: _____

(Callback telephone number)

Notification time is: _____

(Time notification
initiated)

2. EMERGENCY CLASSIFICATION:

☐ UNUSUAL EVENT

☐ ALERT

☐ The event has been terminated.

☐ SITE AREA EMERGENCY

☐ GENERAL EMERGENCY

UNIT: ☐ ONE

Declaration
Time: _____

DATE: _____

☐ TWO

☐ ONE & TWO

(Time classification/
termination declared)

(Date classification/
termination declared)

THIS REPRESENTS A/AN:

☐ INITIAL DECLARATION

☐ ESCALATION

☐ NO CHANGE

} IN CLASSIFICATION STATUS

4. The Emergency Action Level (EAL) Number is: _____

BRIEF NON-TECHNICAL
DESCRIPTION OF THE EVENT:

- For initial declaration, static update, or escalation, provide current classification-EAL-number only.
- For significant events, or when directed by the ED, RM, or EOFSS, provide a brief description.
- For termination, write emergency has been terminated.

5. THERE IS: ☐ No
☐ AN AIRBORNE
☐ A LIQUID } NON-ROUTINE RADIOLOGICAL RELEASE IN PROGRESS

6. WIND DIRECTION IS FROM: _____ WIND SPEED IS: _____ mph.
(Data from 10 meter meteorological tower, available on PICSY.)

7. Conclusion: ☐ THIS IS A DRILL ☐ THIS IS AN ACTUAL EVENT

APPROVED: _____
(ED, RM, or EOFSS)

Time: _____
(Time form approved)

Date: _____
(Date form approved)