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10 CFR 50.4(b)(5)(iii)  
10 CFR 50.54(q)(5)  
10 CFR 50, Appendix E, Section V

Serial: RA-15-0019  
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U.S. Nuclear Regulatory Commission  
ATTN: Document Control Desk  
Washington, DC 20555-0001

CATAWBA NUCLEAR STATION, UNITS 1 AND 2  
DOCKET NOS. 50-413, 50-414 / RENEWED LICENSE NOS. NPF-35 AND NPF-52

MCGUIRE NUCLEAR STATION, UNITS 1 AND 2  
DOCKET NOS. 50-369, 50-370 / RENEWED LICENSE NOS. NPF-9 AND NPF-17

OCONEE NUCLEAR STATION, UNITS 1, 2 AND 3  
DOCKET NOS. 50-269, 50-270, 50-287 / RENEWED LICENSE NOS. DPR-38, DPR-47 AND  
DPR-55

**Subject: TRANSMITTAL OF EMERGENCY PLAN IMPLEMENTING PROCEDURES**

Ladies and Gentlemen:

In accordance with 10 CFR 50.4(b)(5)(iii), 10 CFR 50.54(q)(5) and 10 CFR 50, Appendix E, Section V, Duke Energy Carolinas, LLC (Duke Energy) is submitting revised Catawba Nuclear Station, Unit Nos. 1 and 2, McGuire Nuclear Station, Unit Nos. 1 and 2 and Oconee Nuclear Station, Unit Nos. 1, 2 and 3 Emergency Plan Implementing Procedures SR/0/A/2000/003, *Activation of the Emergency Operations Facility*, Revision 5 and SR/0/A/2000/004, *Notification to States and Counties from the Emergency Operations Facility for Catawba, McGuire and Oconee*, Revision 4.

Duke Energy has evaluated these Emergency Plan Implementing Procedure revisions, in accordance with 10 CFR 50.54(q), and determined that the revisions are not a reduction in the effectiveness of the Emergency Plan and that the Plan, as changed, continues to meet the standards of 10 CFR 50.47(b) and the requirements of 10 CFR 50, Appendix E. Enclosure 1 provides a 10 CFR 50.54(q)(5) summary for the revised Emergency Plan Implementing Procedures. Enclosure 2 contains a copy of the revised Emergency Plan Implementing Procedures.

This document contains no regulatory commitments.

Please refer any questions regarding this submittal to Mr. Art Zaremba at 980-373-2062.

Sincerely,

A handwritten signature in black ink, appearing to read "M. Christopher Nolan". The signature is fluid and cursive, with a large, stylized initial "M" and a long, sweeping underline.

M. Christopher Nolan, Director  
Nuclear Regulatory Affairs

Enclosures:

1. 10 CFR 50.54(q)(5) Summary
2. Copy of Revised Emergency Plan Implementing Procedures

xc (w/attachment)

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## 10 CFR 50.54(q)(5) Summary

In accordance with 10 CFR 50.54(q)(5), Duke Energy Carolinas is providing a summary of the revised Emergency Plan Implementing Procedures being submitted with this letter.

1. SR/0/A/2000/003, Revision 5, *Activation of the Emergency Operations Facility*
  - Revision added an additional NOTE to Enclosure 6.6, Radiological Assessment Manager Checklist, Page 5 of 6, before the third sign-off step to clarify the guidance for reporting liquid releases on the Emergency Notification Form.
  - Revision added a new sign-off step to Enclosure 6.12, Accident Assessment Manager Checklist, Page 1 of 3, to add new responsibilities for the Accident Assessment Manager.
  - Revision deleted the words "(Catawba and McGuire)" from the second sign-off step in Enclosure 6.12, Accident Assessment Manager Checklist, Page 3 of 3. The change assigns a new responsibility for the Accident Assessment Manager to assist the Technical Support Center (TSC), as requested, upon entry into Severe Accident Management Guidelines for Oconee. This step previously applied to Catawba and McGuire only.

The changes described above to Revision 5 of SR/0/A/2000/003, *Activation of the Emergency Operations Facility*, do not result in a reduction in the effectiveness of facilities, response organizations, or response equipment. The changes are not a reduction in the effectiveness of the Emergency Plans for Catawba, McGuire and Oconee, as written and approved, and continues to meet the requirements of 10 CFR 50.47(b) and 10 CFR 50, Appendix E.

2. SR/0/A/2000/004, Revision 4, *Notification to States and Counties from the Emergency Operations Facility for Catawba, McGuire and Oconee*

This revision added the following NOTE before Step 2.23 of Enclosure 6.1, Emergency Notification Form (ENF) Completion, Page 10 of 12: "Liquid releases cannot be quantified by URI and are not the basis for Protective Action Recommendations. The RAM should recommend providing information on liquid releases in Line 13." The note was added to clarify the guidance for reporting liquid releases on the Emergency Notification Form.

The change to Revision 4 of SR/0/A/2000/004, *Notification to States and Counties from the Emergency Operations Facility for Catawba, McGuire and Oconee*, does not result in a reduction in the effectiveness of facilities, response organizations, or response equipment. The change is not a reduction in the effectiveness of the Emergency Plans for Catawba, McGuire and Oconee, as written and approved, and continues to meet the requirements of 10 CFR 50.47(b) and 10 CFR 50, Appendix E.

**Copy of Emergency Plan Implementing Procedures**

|                    |                          |
|--------------------|--------------------------|
|                    | Procedure No.            |
|                    | Revision No.             |
|                    | Electronic Reference No. |
| <b>PERFORMANCE</b> |                          |

## Activation of the Emergency Operations Facility

### 1. PURPOSE

- 1.1 This procedure describes the emergency responsibilities and duties of the Emergency Operations Facility Emergency Response Organization (ERO) members.

### 2. DEFINITIONS

**NOTE:** The EOF must be operational using 75 minutes as a goal for the minimum staff to be in place following declaration of an Alert or higher classification. Turnover should occur with the TSC at a time that will not decrease the effectiveness of communications with the offsite agencies.

- 2.1 Operational: The Emergency Response Facility (e.g., Technical Support Center, Operations Support Center, Emergency Operations Facility) is staffed, ready to receive turnover and ready to perform assigned emergency response functions.
- 2.2 Activated: The Emergency Response Facility (e.g., Technical Support Center, Operations Support Center, Emergency Operations Facility) has accepted turnover and has direction and control of assigned emergency response functions.

**NOTE:** The following definition is applicable to the Emergency Notification Form Line 6.

- 2.3 Emergency Release: An unplanned, quantifiable radiological release to the environment during an emergency event. {AD-EP-ALL-0002}

**NOTE:** The following definitions are applicable to the Emergency Notification Form, Line 8.

- 2.4 Degrading: Plant conditions involve at least one of the following:

Plant parameters (e.g., temperature, pressure, level, voltage, frequency) are trending unfavorably away from expected or desired values **AND** plant conditions could result in a higher classification or Protective Action Recommendation (PAR) before the next follow-up notification.

Site conditions (e.g., wind, ice/snow, ground tremors, hazardous/toxic/radioactive material leak, fire, security event) impacting plant operations or personnel safety are worsening **AND** plant conditions could result in a higher classification or Protective Action Recommendation (PAR) before the next follow-up notification.

2.5 Improving: Plant conditions involve at least one of the following:

Plant parameters (e.g., temperature, pressure, level, voltage, frequency) are trending favorably toward expected or desired values **AND** plant conditions could result in a lower classification or emergency termination before the next follow-up notification.

Site conditions (e.g., wind, ice/snow, ground tremors hazardous/toxic/radioactive material leak, fire, security events) have become less of a threat to plant operations or personnel safety **AND** plant conditions could result in a lower classification or emergency termination before the next follow-up notification.

2.6 Stable: Plant conditions are neither degrading nor improving.

### 3. PROCEDURE

- NOTES:**
- This procedure and the position specific enclosures are not intended to be followed in a serial step-by-step sequence.
  - Instructions and guidance steps are to be implemented as applicable for the specific needs of the event.
  - Use hard copy (paper) forms or electronic equivalents to complete all forms.
  - References to "Status Boards" may refer to physical displays mounted in the facility or electronic displays either projected, displayed on large monitors or on personal computer monitors.

3.1 General instructions for all ERO members.

3.1.1 Ensure appropriate checklist, logs and forms are completed.

3.1.2 Provide critical information to appropriate personnel upon receipt rather than waiting for a time out or roundtable discussion.

3.1.3 Use "Attention in the EOF" to announce critical information in the facility.

**NOTE {IER L1-13-10}:**

- The Emergency Response Organization structure is scalable and flexible, based on the size, complexity, and the specifics of the hazard environment created by the emergency event. Additional functional elements (e.g., ERO positions) can be established to enhance the management and coordination of the event.
  - When the emergency event's complexity increases, then the ERO can expand, as additional functional responsibilities are needed.
  - When the complexity decreases, then the ERO can contract, when those additional functional responsibilities are no longer needed.
- The makeup and structure of the EOF will be determined by the EOF Director.
- EOF staffing may be required for extended periods of time (e.g., greater than 10 days for BDBEES, ELAP, etc.).

3.1.4 **IF** additional personnel are needed to support the emergency or for 24-hour coverage, refer to the following for telephone numbers:

- ERO Member Contact Information notebook on the EOF Director's Area bookshelf (home, office and cell phone numbers).
- Duke Energy Enterprise Phone Book (office and cell phone numbers).
- Emergency Response Organization (ERO) database by contacting the EOF Emergency Planner.

3.1.5 **IF** equipment problems occur, contact the following:

- Computer – EOF Data Coordinator
- Communications systems and other facility equipment – EOF Services Manager

**NOTE:** When using the OAC to trend plant data for decision purposes, please note that reducing the trend screen overall size can cause the plotted data to be suspect upon restoration to full size. It is recommended that trend plots be minimized using the standard windows button (the button in the top right that has the underbar). The software code is designed to refresh the trend screens upon restoration to full size from a minimized state. A second method is to have the OAC redraw the trend after restoring the trend screen to full size.

3.2 **IF** access to SDS data is desired, login to system as follows:

- 3.2.1 From DAE main screen, select Search DAE tab.
- 3.2.2 Type SDS in Search box and press Enter.
- 3.2.3 Select **Catawba OAC SDS**, **McGuire OAC SDS**, or **Oconee OAC SDS** as applicable.
- 3.2.4 Select Run Application.
- 3.2.5 Logon with LAN ID and Password as follows:

NAM\UserID  
Password

- 3.2.6 Select the desired OAC to access by checking the box and then clicking the Start button. You can start multiple sessions if desired.

#### **CNS**

- **C1 RT PRI**
- **C2 RT PRI**
- **C1 RT BAC**
- **C2 RT BAC**
- **Simulator**
- **Spare Simulator**
- **Drill Simulator**

#### **MNS**

- **M1 RTS PRI**
- **M1 RTS BAC**
- **M2 RTS PRI**
- **M2 RTS BAC**
- **Simulator**
- **Sim Backup**

**ONS**

- **O1 OAC**
- **O2 OAC**
- **O3 OAC**
- **KHU OAC**
- **Simulator A**
- **Simulator B**

3.2.7 Access emergency response displays as follows:

**Catawba/McGuire**

Enter GD (space)"Group Display Name" in the white box at the upper right portion of the screen.

**Catawba Specific**

| <u>Group Display Name</u> | <u>Group Display Description</u>               |
|---------------------------|--|
| ERDS1                     | ERDS Group 1                                   |
| ERDS2                     | ERDS Group 2                                   |
| EROCONT                   | Selected values associated with containment.   |
| EROCORE1                  | Incore temperature values                      |
| EROCORE2                  | Additional incore temperature values           |
| EROCORE3                  | Additional incore temperature values           |
| EROINJCT                  | Selected letdown/charging values               |
| EROPLEAK                  | Selected primary to containment leakage values |
| EROSLEAK                  | Selected primary to secondary leakage values   |
| EROPRIM                   | Selected primary system values                 |
| ERORD5                    | Selected Dose Assessment Points                |
| ERORXG                    | Selected Value for Reactor Engineer            |
| EROSAMG                   | Selected SAMG Values                           |
| EROSSECND                 | Selected secondary system values               |
| MET                       | Met Tower Points                               |

**McGuire Specific**

| <u>Group Display Name</u> | <u>Group Display Description</u>          |
|---------------------------|---|
| ERO-1                     | Selected plant parameters                 |
| EROCONT                   | Emergency Response Containment            |
| EROCORE                   | Emergency Response Incore                 |
| EROINJCT                  | Emergency Response Injection              |
| EROPRIM                   | Emergency Response Primary                |
| ERORD5                    | Selected Dose Assessment Points           |
| EROSSECND                 | Emergency Response Secondary.<br>{9} {10} |
| WEATHER                   | Weather Data                              |

## Oconee

Enter applicable Turn On code in the white box at the upper right portion of the screen.

| <b>Oconee Specific</b>   |  |
|--------------------------|--|
| <u>Turn On Code Name</u> | <u>Turn On Code Description</u>                              |
| EROMENU                  | Menu Access for Oconee Data Screens                          |
| EROPRI                   | Selected Primary System values                               |
| EROSEC                   | Selected Secondary System values                             |
| EROCONT                  | Selected Containment Condition values                        |
| EROAUX                   | Selected Radiation Monitor values                            |
| EROAREA                  | Selected Area Radiation Monitor values                       |
| EROPROC                  | Selected Process Radiation Monitor values                    |
| EROENV                   | Selected values for Dose Assessment and Field Monitoring use |
| EROECCS                  | Selected ECCS values   |
| ERDSMENU                 | Menu Access for Oconee ERDS Data                             |

- 3.2 The Emergency Plant Status application has also been established for Oconee emergency response use. This application is available from DAE.
  - 3.2.1 To launch the Emergency Plant Status application, from DAE select *Search DAE* and type in *Emergency Plant Status*.
  - 3.2.2 Select the *Emergency Plant Status - ONS*
  - 3.2.3 Select Run Application
  - 3.2.4 Enter your password and verify domain as NAM.
- 3.4 **IF** EOF facility in Energy Center is unavailable, establish Alternate EOF at designated alternate location {IER L1-13-10}:
  - Catawba Nuclear Station event - McGuire Administration Building per Enclosure 6.25
  - McGuire Nuclear Station event - Catawba Administration Building per Enclosure 6.26
  - Oconee Nuclear Station event - Catawba Administration Building per Enclosure 6.26

- 3.5 Perform the applicable actions for the event using instructions and guidance in the following enclosures:

| <b>ERO Position Title</b>              | <b>Enclosure</b>   |
|--|--|
| EOF Director/Assistant EOF Director    | 6.1 EOF Director/Assistant EOF Director Checklist          |
| Radiological Assessment Manager        | 6.6 Radiological Assessment Manager Checklist              |
| EOF Dose Assessor                      | 6.7 EOF Dose Assessor Checklist                            |
| Field Monitoring Coordinator           | 6.8 Field Monitoring Coordinator Checklist                 |
| Radio Operator                         | 6.9 Radio Operator Checklist                               |
| EOF Offsite Agency Communicator        | 6.10 EOF Offsite Agency Communicator Checklist             |
| EOF Services Administration/Commissary | 6.11 EOF Services Administration/Commissary Checklist {71} |
| Accident Assessment Manager            | 6.12 Accident Assessment Manager Checklist                 |
| Accident Assessment Interface          | 6.13 Accident Assessment Interface Checklist               |
| Operations Interface Checklist         | 6.14 Operations Interface Checklist {44}                   |
| Reactor Physics                        | 6.15 Reactor Physics Checklist                             |
| EOF Emergency Planner                  | 6.16 EOF Emergency Planner Checklist                       |
| EOF Log Recorder                       | 6.17 EOF Log Recorder Checklist                            |
| EOF Data Coordinator                   | 6.18 EOF Data Coordinator Checklist                        |
| EOF Services Manager                   | 6.19 EOF Services Manager Checklist                        |

## 4. REFERENCES

- 4.1 Catawba Nuclear Station (CNS) Emergency Plan
- 4.2 McGuire Nuclear Station (MNS) Emergency Plan
- 4.3 Oconee Nuclear Station (ONS) Emergency Plan

## 5. RECORDS

- 5.1 All logs, forms and records completed as the result of implementing this procedure during an actual declared event shall be retained as permanent plant records. Nuclear Generation Record Retention Rule Number 421734, "Procedures-Technical Completed."
- 5.2 All checklists, logs and forms completed as the result of implementing this procedure shall be collected at the end of the event and provided to the site Emergency Preparedness Manager.

## 6. Enclosures

- 6.1 EOF Director/Assistant EOF Director Checklist
- 6.2 Catawba Offsite Protective Actions
- 6.3 McGuire Offsite Protective Actions
- 6.4 Oconee Offsite Protective Actions
- 6.5 Emergency Classification Downgrade/Termination
- 6.6 Radiological Assessment Manager Checklist
- 6.7 EOF Dose Assessor Checklist
- 6.8 Field Monitoring Coordinator Checklist
- 6.9 Radio Operator Checklist
- 6.10 EOF Offsite Agency Communicator Checklist
- 6.11 EOF Services Administration/Commissary Checklist {71}
- 6.12 Accident Assessment Manager Checklist
- 6.13 Accident Assessment Interface Checklist
- 6.14 Operations Interface Checklist {44}
- 6.15 Reactor Physics Checklist
- 6.16 EOF Emergency Planner Checklist
- 6.17 EOF Log Recorder Checklist
- 6.18 EOF Data Coordinator Checklist
- 6.19 EOF Services Manager Checklist
- 6.20 Establishing Communications Links Between McGuire SAMG Evaluators {11}
- 6.21 Oconee Recovery Guidelines
- 6.22 Keowee Hydro Dam/Dikes - Condition A/B Descriptions
- 6.23 EOF Evacuation Checklist
- 6.24 EOF Briefing Guideline
- 6.25 Setup of Catawba Alternate EOF in McGuire Admin Bldg. {66, 67, 68}
- 6.26 Setup of McGuire or Oconee Alternate EOF in Catawba Admin Bldg. {66, 67, 68}
- 6.27 NRC Response Team Briefing
- 6.28 Commitments for SR/0/B/2000/003

# EOF Director/Assistant EOF Director Checklist

 Page 1 of 16

INITIAL

**NOTE:** Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

\_\_\_\_\_ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

\_\_\_\_\_ Don position badge.

\_\_\_\_\_ Sign in on EOF staffing board.

**NOTE:** The EOF Log Recorder will maintain the official log for the EOF Director/Assistant EOF Director. The EOF Director/Assistant EOF Director may maintain an additional log if desired.

\_\_\_\_\_ Establish log of activities sufficient to conduct turnover for on-coming shift.

\_\_\_\_\_ Establish communications with Emergency Coordinator or Assistant Emergency Coordinator in affected site's TSC:

- Use affected site's EOF Director to Emergency Coordinator Ringdown phone (Catawba and McGuire only)

**OR**

- Catawba TSC, 9-803-701-5870

**OR**

- McGuire TSC, 9-980-875-4950

**OR**

- Oconee TSC, 9-1-864-873-3921

**NOTE:** EOF access is controlled through the use of a monitored card reader process.

\_\_\_\_\_ Verify Energy Center Building Security personnel are monitoring the EOF entrance card reader.

INITIALS \_\_\_\_\_ PRINTED NAME \_\_\_\_\_ (EOF Director)

INITIALS \_\_\_\_\_ PRINTED NAME \_\_\_\_\_ (Asst. EOF Director)

- NOTE:**
1. **IF** the emergency situation prevents activating the TSC within 75 minutes of declaration, Control Room will:
    - turn over responsibility for classification and state and county notification to EOF.
    - maintain responsibility for NRC Event Notification until released by NRC Communicator in TSC.
    - maintain responsibility for continuous phone communications to the NRC until relieved by the NRC Communicator in TSC.
  2. **IF** TSC remains unavailable and EOF cannot take responsibility for classification and state and county notification, Control Room will maintain these responsibilities until one of the facilities is capable of turnover.

\_\_\_\_\_ **IF** emergency situation prevents activating TSC within 75 minutes of declaration, contact affected Site's Control Room:

Person Notified/Date/Time

- ☐ Catawba Control Room, 9-803-701-5164 \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_
- ☐ McGuire Control Room, 9-980-875-4138 \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_
- ☐ Oconee Unit 1 and 2 Control Room, 9-1-864-873-2159 \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_
- ☐ Oconee Unit 3 Control Room, 9-1-864-873-2160 \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_ Verify EOF minimum staffing positions are prepared to assume their EOF duties prior to declaring the EOF operational:

- \_\_\_\_\_ EOF Director
- \_\_\_\_\_ Accident Assessment Manager
- \_\_\_\_\_ Radiological Assessment Manager
- \_\_\_\_\_ Off-Site Agency Communicator
- \_\_\_\_\_ Off-Site Agency Communicator.

**OR**

**IF** Less than the above listed minimum EOF positions are filled,

**AND**

The 75-minute EOF operational time requirement is near,

**AND**

An extra person(s) is available whom the EOF Director believes is capable of filling a missing position(s) based on the training, experience and skills required by the ERO training program - ETQS 7111.0, Emergency Response Training

**AND**

An appropriate log entry is made. {64}

\_\_\_\_\_ Request Offsite Agency Communicator monitor EOF Fax 704-382-1825. {13}

**NOTE:** For all drills, messages should be preceded with "This is a drill. This is a drill."

\_\_\_\_\_ Announce over EOF public address system:

"Anyone who is reporting to this facility outside of your normal work hours must complete a Fitness for the Duty Form. If you have consumed alcohol within the past five (5) hours or believe your work quality may be compromised due to fatigue {69}, sickness, or other potentially impairing conditions {72}, notify either the EOF Director, Assistant EOF Director, or the appropriate lead in your functional area."

\_\_\_\_\_ Declare EOF operational. EOF operational time: \_\_\_\_\_.

**NOTE:** For all drills, messages should be preceded with "This is a drill. This is a drill."

\_\_\_\_\_ Announce over EOF public address system:

"Attention all EOF personnel. This is \_\_\_\_\_ and as of \_\_\_\_\_ hours,  
(EOF Director's Name)

the EOF is operational. Each EOF functional area should perform a Take a Minute in its work area."

\_\_\_\_\_ Notify Emergency Coordinator or Assistant Emergency Coordinator that the EOF is:

- Operational
- Gathering plant status information
- Ready to receive turnover at the Emergency Coordinator's convenience.

\_\_\_\_\_ Review definitions in Section 2 of this procedure.

**NOTE:** The following step may be accomplished by conducting a Time Out or by verifying the level of readiness with the individuals in the positions.

\_\_\_\_\_ Verify the following positions, at a minimum, are ready to activate and prepared to perform the next offsite agency notification.

- \_\_\_\_\_ Accident Assessment Manager
- \_\_\_\_\_ Radiological Assessment Manager
- \_\_\_\_\_ Lead Off-Site Agency Communicator

**NOTE:** The Emergency Coordinator or Assistant Emergency Coordinator should fax the Emergency Coordinator Turnover Checklist to the EOF. The "Emergency Coordinator Turnover Checklist" is provided on page 13 of this enclosure.

\_\_\_\_\_ **IF** a classification change occurs during turnover, suspend turnover until CR OR TSC declares and transmits notification to offsite agencies. {12}

\_\_\_\_\_ Receive turnover from Emergency Coordinator or Assistant Emergency Coordinator utilizing the "Emergency Coordinator Turnover Checklist" or equivalent.

\_\_\_\_\_ Prepare or delegate to Assistant EOF Director preparations for briefing NRC by completing job aid in Enclosure 6.27 {8}

**NOTE:** The EOF Director is responsible for determining Emergency Classifications, approving Protective Action Recommendations, and approving Offsite Agency Emergency Notification Forms after the EOF is activated. These responsibilities remain with the EOF Director and shall not be delegated.

\_\_\_\_\_ Inform Emergency Coordinator that EOF is ready to activate.

**NOTE:** For all drills, messages should be preceded with "This is a drill. This is a drill."

\_\_\_\_\_ Announce over the EOF public address system:

"Attention all EOF personnel. The EOF was activated at \_\_\_\_\_ hours. This is \_\_\_\_\_. I am the EOF Director and have taken responsibility for emergency management from the Emergency Coordinator in the Technical Support Center. At this time, the EOF has command and control for emergency classification, offsite notifications, protective action recommendations, field monitoring, and offsite agency interface. The current emergency classification is \_\_\_\_\_. The following is a summary of the plant status

\_\_\_\_\_.  
Additional information will be provided to you as conditions change. The next offsite agency notification shall be transmitted by \_\_\_\_\_ hours. The EOF staff shall prepare for a time-out and a roundtable discussion at \_\_\_\_\_ hours."

\_\_\_\_\_ **IF AT ANY TIME** there is a need to deviate from normal work practices, refer to AD-OP-ALL-1000, Conduct of Operations, Attachment 7, Deviations from Normal Work Processes/Requirements Documentation, to document the deviation. {77}

\_\_\_\_\_ Review current emergency classification with EOF staff and verify it meets criteria in:

- Catawba RP/0/A/5000/001
- OR**
- McGuire RP/0/A/5700/000
- OR**
- Oconee RP/0/A/1000/001.

**NOTE:**

1. The first message from the EOF should include EOF activation time on Line 13.
2. **IF** data changes during review of the emergency notification form, it is a good practice to require the EOF staff to do a "clean sweep" through the form prior to approval. {52}

# **EOF Director/Assistant EOF Director Checklist**

\_\_\_\_ Notify Offsite Agency Communicator to make emergency notifications according to the following schedule:

## **Initial Notifications {39}**

1. Initial notifications to the State(s) and counties must be made within 15 minutes of the event declaration time using the Emergency Notification form (ENF).
2. For an upgrade in classification prior to or while transmitting an initial message:
  - The notification for the lesser emergency classification must be made within 15 minutes of the lesser classification declaration time.
  - The agencies must be informed that an upgrade in classification will be coming.
  - The upgraded classification message must be transmitted within 15 minutes of the upgraded classification declaration time.

## **Follow-up Notifications**

1. Follow-up notifications to the State(s) and Counties must be made according to the following schedule:

|   |  |   |
|---|--|---|
| <u>Catawba</u><br>-For NOUE, ALERT, SAE, or GE, every hour until the emergency is terminated. | <u>McGuire</u><br>-For NOUE, every 4 hours until the emergency is terminated.<br>-For ALERT, SAE, or GE, every hour until the emergency is terminated. | <u>Oconee</u><br>-For NOUE, a follow-up is not required.<br>-For ALERT, SAE, or GE, every 60 minutes until the emergency is terminated. |
|---|--|---|

### **OR**

|   |   |  |
|---|---|--|
| <u>Catawba</u><br>-If there is any significant change to the situation (make notification as soon as possible). | <u>McGuire</u><br>-If there is any significant change to the situation (make notification as soon as possible). | <u>Oconee</u><br>-If there is any significant change to the situation (make notification as the change occurs). See NOTE* below for examples of changes. |
|---|---|--|

### **OR**

|   |  |  |
|---|--|--|
| <u>Catawba</u><br>-As agreed upon with an Emergency Management official from <u>each</u> individual agency. Documentation shall be maintained for any agreed upon schedule change.<br>-The interval <u>shall not</u> be greater than 4 hours to any agency. | <u>McGuire</u><br>-As agreed upon with an Emergency Management official from each individual agency. Documentation shall be maintained for any agreed upon schedule change.<br>-The interval for ALERT, SAE, or GE <u>shall not</u> be greater than 2 hours to any agency. | <u>Oconee</u><br>-Required every 60 minutes from the notification time on Line 2 for ALERT, SAE, or GE.<br>-This frequency <u>may be</u> changed at the request of offsite agencies. |
|---|--|--|

\*NOTE (Oconee): Examples of significant plant changes include: evacuation/relocation of site personnel, fires onsite, MERT activation and/or injured personnel transported offsite, chemical spills, explosions, Condition "A" or "B" for Keowee Hydro Project Dams/Dikes, or any event that would cause or require offsite agency response.

2. If a follow-up is due and an upgrade to a higher classification is declared, there is no need to complete the follow-up ENF. In this case, the offsite agencies must be notified that the pending follow-up is being superseded by an upgrade to a higher classification and information will be provided.

3. Initial messages in the General Emergency classification that involve an upgrade in PARs must be communicated to the offsite agencies as soon as possible and within 15 minutes. {79}

\_\_\_\_ **IF AT ANY TIME** Site Area Emergency is declared, consult Accident Assessment Manager and Radiological Assessment Manager to determine potential zones for protective action recommendations.

\_\_\_\_ **IF AT ANY TIME** General Emergency is declared, EOF Director shall IMMEDIATELY (within 15 minutes) make Protective Action Recommendations to offsite agencies on Emergency Notification Form (ENF) using: {57}

- ☐ Enclosure 6.2 - Catawba Offsite Protective Actions
- ☐ Enclosure 6.3 - McGuire Offsite Protective Actions
- ☐ Enclosure 6.4 - Oconee Offsite Protective Action

\_\_\_\_ **IF** changes to Protective Action Recommendations are approved by the EOF Director, ensure changes are transmitted to offsite agencies within 15 minutes.

**CAUTION:** If a zone has been accurately selected for evacuation, it shall remain selected. {27} {30}

\_\_\_\_ Evaluate specific plant conditions, offsite dose projections, field monitoring team data, and determine need to update Protective Action Recommendations.

\_\_\_\_ Review dose projections with Radiological Assessment Manager to determine if Protective Action Recommendations are required beyond the 10-mile EPZ.

\_\_\_\_ **IF** Protective Action Recommendations are required beyond 10 miles, notify the states and counties to consider sheltering/evacuation of general population beyond 10-mile EPZ.

**NOTE:** Descriptions of Keowee Hydro Dam/Dike Condition A and B are provided in Enclosure 6.22.

\_\_\_\_ **IF** Condition A, Dam Failure (Keowee or Jocassee) exists, make Protective Action Recommendations to Oconee County and Pickens County for imminent/actual dam failure on Emergency Notification Form Line 5B (Evacuate) and Line 5E (Other):

Line 5B    *Move residents living downstream of the Keowee Hydro Project dams to higher ground.*

Line 5E    *Prohibit traffic flow across bridges identified on your inundation maps until the danger has passed.*

# **EOF Director/Assistant EOF Director Checklist**

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\_\_\_\_\_ Communicate, or delegate to the Assistant EOF Director the responsibility to communicate, plant status to County Directors of Emergency Management (CDEM), State Liaisons or State Directors of Emergency Management (SDEM):

- EOF State Liaisons communicate information from EOF Director to County/State representatives using the CNS/MNS Decision Line **OR** ONS Decision Line.

**NOTE:** If using Decision Line or the EOF/Assistant EOF Director telephone, individual State and/or County dial codes and numbers can be obtained from the appropriate site's Emergency Telephone Directory. {7}

- Use Decision Line **OR** EOF Director/Assistant EOF Director telephone to contact appropriate states/counties.

## **Catawba Site Specific**

\_\_\_\_\_ York CDEM \_\_\_\_\_

\_\_\_\_\_ Mecklenburg CDEM \_\_\_\_\_

\_\_\_\_\_ Gaston CDEM \_\_\_\_\_

\_\_\_\_\_ NC SDEM \_\_\_\_\_

\_\_\_\_\_ SC SDEM \_\_\_\_\_

## **McGuire Site Specific**

\_\_\_\_\_ Mecklenburg CDEM \_\_\_\_\_

\_\_\_\_\_ Gaston CDEM \_\_\_\_\_

\_\_\_\_\_ Lincoln CDEM \_\_\_\_\_

\_\_\_\_\_ Iredell CDEM \_\_\_\_\_

\_\_\_\_\_ Catawba CDEM \_\_\_\_\_

\_\_\_\_\_ Cabarrus CDEM \_\_\_\_\_

\_\_\_\_\_ NC SDEM \_\_\_\_\_

## **Oconee Site Specific**

\_\_\_\_\_ Oconee County CDEM \_\_\_\_\_

\_\_\_\_\_ Pickens County CDEM \_\_\_\_\_

\_\_\_\_\_ SC SDEM \_\_\_\_\_

\_\_\_\_\_ **IF** Protective Action Recommendations have been provided to the States and Counties, request protective action decision information from the SDEPs **AND** CDEPs:

Zones Evacuated: \_\_\_\_\_

Zones Sheltered: \_\_\_\_\_

Information Received from: \_\_\_\_\_

\_\_\_\_\_ Inform Emergency Coordinator **OR** Assistant Emergency Coordinator of SDEPs and CDEPs protective action decisions and other offsite conditions.

**NOTE:** Wireless mikes are available for use during round tables/timeouts. {38}

\_\_\_\_\_ Perform the following steps as needed throughout the event:

- Conduct a time-out and hold a roundtable discussion approximately every hour, coordinated with the TSC, with the EOF staff using Enclosure 6.24 to discuss:
  - Emergency Classification
  - Protective Action Recommendations
  - Emergency Notification Form status
  - Offsite dose projections
  - Mitigation strategies
  - Termination criteria as defined in Enclosure 6.5.
- Ensure roundtables/time-outs enable EOF members to know what is going on, what to anticipate, and understand focus and priorities.
- Announce to the EOF the emergency classification, plant status, and priorities via the EOF public address system following EOF time-outs.
- Emergency Coordinator or Assistant Emergency Coordinator updates may be broadcast on EOF public address system.
- Advise Emergency Coordinator or Assistant Emergency Coordinator of:
  - All aspects of the emergency situation, including alternate strategies outside of procedures as plant conditions dictate
  - Emergency Classification changes
  - Protective Action Recommendations changes
  - Mitigation strategies
  - Contingency plans.

- NOTE:**
1. 10CFR50.54(x) states that a licensee may take reasonable action that departs from a license condition or technical specification in an emergency, when this action is immediately needed to protect the health and safety of the public and no action consistent with license conditions or technical specifications that can provide adequate or equivalent protection is immediately apparent. Ultimate responsibility for plant response in an emergency resides in the highest authority in the chain of command of the facility licensee available to make a decision about the response. The on duty OSM should be consulted and his concurrence obtained before invoking 10CFR50.54(x). {48}
  2. Examples of potential 10CFR50.54(x) action items include: {40}
    - Deviation from an Emergency Procedure.
    - Rerouting system piping to temporarily restore system flow.
    - Re-alignment of electrical power systems outside of procedural guidance.
    - Using mitigation strategies not established by the SAMG guidelines.
  3. **IF** the TSC is activated, the TSC Emergency Coordinator makes the decision to invoke 10CFR50.54(x). {48}

- **WHEN** restoring power in a LOOP event, have the risk significance of power restoration assessed for risk potential by Accident Assessment personnel. {42}
- Authorize emergency worker extensions if the radiation exposure doses are expected to exceed the blanket dose extension limits authorized by the Radiation Protection Manager using:
  - Catawba RP/0/A/5000/018
  - McGuire RP/0/A/5700/020
  - Oconee RP/0/B/1000/011.

**NOTE:** The Emergency Action Level descriptions on Line 4 of the Emergency Notification Form have been pre-screened.

- **IF** the event involves a security threat, consult the job aid, "Nuclear Security Approved Messages for Security Related Events/Issues," in the EOF Director's notebook for guidance in developing remarks for Line 13 of the Emergency Notification Form. {47}

**NOTE:** Personnel without badge access will need to be escorted into the EOF by the Assistant EOF Director, EOF Emergency Planner, EOF Services Manager, or their Mentor. {61}

- Approve personnel with training deficiencies prior to their participation as EOF staff members. This approval shall be documented in the EOF Log.
- Document personnel escorted into the EOF in the EOF log. {73}
- Turn over EOF Director duties to the Assistant EOF Director prior to leaving the EOF Director's Area.

- **IF** necessary to relieve Duke Energy personnel, request environmental surveillance support personnel from DOE Radiological Assessment Plan by contacting DOE - Savannah River Site. {53}
- Periodically review the staffing levels in the EOF to ensure adequate resources are in place to deal with response/recovery, and direct the EOF Services Manager to coordinate with the appropriate department, agency, or companies. {25}
- **IF** events affect more than one nuclear site, refer to the multi-site event staffing chart in the Oconee Emergency Plan, Figure B-11
- **IF** a beyond design basis external event (BDBEE) or extended loss of AC power (ELAP) event impacts multiple units at a single site, evaluate the need for unit-specific responses (e.g., SAMG, EDMG, FSG, etc.) and unit-specific response teams. {IER L-1-10}

**NOTE:** The job aid, "Questions Corporate Communications may ask (based on initiating event)," is available in the EOF Director's notebook for guidance.

- Provide information to Corporate Communications for news releases.
- **IF** EOF needs to be evacuated, refer to EOF Evacuation Checklist in Enclosure 6.23. {54}

\_\_\_\_\_ Verify EOF Emergency Planner completes "EOF 24-Hour Staffing Log" in Enclosure 6.16.

\_\_\_\_\_ **IF** needed, conduct turnover for on-coming shift.

\_\_\_\_\_ Assist TSC Emergency Coordinator or Assistant TSC Emergency Coordinator as a Decision Maker upon entry into Severe Accident Management Guidelines (SAMG). (Catawba and McGuire) {11}

\_\_\_\_\_ Refer to Enclosure 6.5 (Emergency Classification Downgrade/Termination Criteria) for guidance to downgrade or terminate an emergency event.

**NOTE:** The offsite Recovery Organization will stay at the EOF and work with the counties and states if radiological conditions exist beyond the site boundary. The On-Site Recovery Organization will be established by the Emergency Coordinator.

\_\_\_\_\_ **IF** needed, establish Recovery Organization:

- ☐ Catawba RP/0/A/5000/025
- ☐ McGuire RP/0/A/5700/024
- ☐ Oconee RP/0/B/1000/027 and guidance in Enclosure 6.21.

Terminate the emergency event in accordance with applicable procedure:

\_\_\_\_\_ Notification of Unusual Event

Catawba - RP/0/A/5000/002

McGuire - RP/0/A/5700/001

\_\_\_\_\_ Alert

Catawba - RP/0/A/5000/003

McGuire - RP/0/A/5700/002

\_\_\_\_\_ Site Area Emergency

Catawba - RP/0/A/5000/004

McGuire - RP/0/A/5700/003

\_\_\_\_\_ General Emergency

Catawba - RP/0/A/5000/005

McGuire - RP/0/A/5700/004.

|  |
|--|
| <p><b>NOTE:</b> During declared emergencies, Duke Energy does not need to meet Fatigue Rule Work Hour Controls. Once the declared emergency or the unannounced drill has been terminated, <b>ALL HOURS worked during the declared emergency will be included in future work hour calculations, including the determination of minimum breaks between shifts.</b></p> <p>{69}</p> |
|--|

\_\_\_\_\_ Announce the following:

"Covered Workers need to ensure that all hours worked during an augmentation drill or a declared emergency are entered into EMPCenter prior to leaving the site. Supervisors should consider the need for to initiate a waiver in EmpCenter per NSD-200 Section 200.8." {69}

\_\_\_\_\_ Conduct a critique following termination of drill or actual event.

\_\_\_\_\_ Provide all completed paperwork to Emergency Preparedness following termination of a drill or actual event.

Close out an Oconee emergency event as listed below:

\_\_\_\_\_ **IF** an event meets termination criteria for General Emergency in Enclosure 6.5, Emergency Classification Downgrade/Termination, inform NRC Site Team Director (STD) and SDEM that termination criteria have been met.

- Secure agreement from the two directors to terminate the event.
- Document names and time decision made below.

|        | <u>Name</u> | <u>Telephone Number</u> | <u>Time</u> |
|--------|-------------|-------------------------|-------------|
| SDEM   | _____       | <u>9-1-803-737-8500</u> | _____       |
| NRCSTD | _____       | (In person in EOF)      | _____       |

- Request lead Offsite Agency Communicator to complete Termination Message and transmit it in accordance with SR/0/A/2000/004 (Notification to State and Counties from the Emergency Operations Facility) and terminate the emergency.

\_\_\_\_\_ **IF** terminating from an Unusual Event, Alert, or Site Area Emergency,

- Request lead Offsite Agency Communicator to complete Termination Message and transmit it in accordance with SR/0/A/2000/004 (Notification to State and Counties from the Emergency Operations Facility) and terminate the emergency.
- Notify the following agencies:

|      | <u>Name</u> | <u>Telephone Number</u> |
|------|-------------|-------------------------|
| SDEM | _____       | <u>9-1-803-737-8500</u> |

**OR, IF** the SEOC has not been activated, the County Emergency Management Directors (CEMD)

|              | <u>Name</u> | <u>Telephone Number</u> |
|--------------|-------------|-------------------------|
| Oconee CDEM  | _____       | <u>9-1-864-638-4200</u> |
| Pickens CDEM | _____       | <u>9-1-864-898-5943</u> |

\_\_\_\_\_ **IF** terminating from an emergency involving dam failure (Keowee or Jocassee),

- Discuss termination with Hydro Central (Refer to Section 6 of the Oconee Emergency Telephone Directory, Keowee Hydro Project Dam/Dike Notification).

\_\_\_\_\_ Request Oconee Emergency Preparedness to provide a copy of the Licensee Event Report (LER) to state and county agencies at the time it is sent to the NRC.

# EOF Director/Assistant EOF Director Checklist

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( ) CATAWBA

( ) MCGUIRE

( ) OCONEE

UNIT(S) AFFECTED: {8} ( ) Unit 1 ( ) Unit 2 ( ) Unit 3

|  |                                  |           |                             |                       |                          |                     |
|--|----------------------------------|-----------|-----------------------------|-----------------------|--------------------------|---------------------|
| GENERAL  | POWER LEVEL                      |           | REACTOR COOLANT TEMPERATURE |                       | REACTOR COOLANT PRESSURE |                     |
|  | DATE: _____                      | U-1 _____ | _____                       |                       | _____                    |                     |
|  | TIME: _____                      | U-2 _____ | _____                       |                       | _____                    |                     |
|  |                                  | U-3 _____ | _____                       |                       | _____                    |                     |
| EMERGENCY CLASSIFICATION   | NOUE DECLARED AT: _____          |           | TSC ACTIVATED AT: _____     |                       |                          |                     |
|  | ALERT DECLARED AT: _____         |           | EOF ACTIVATED AT: _____     |                       |                          |                     |
|  | SAE DECLARED AT: _____           |           |                             |                       |                          |                     |
|  | G.E. DECLARED AT: _____          |           |                             |                       |                          |                     |
|  | REASON FOR EMER CLASS: _____     |           |                             |                       |                          |                     |
| SITE ASSEMBLY<br>SITE EVACUATION   |                                  | YES       | NO                          | TIME                  | LOCATION OR COMMENTS     |                     |
|  | SITE ASSEMBLY                    | _____     | _____                       | _____                 | _____                    |                     |
|  | SITE EVAC. (NON-ESSEN.)          | _____     | _____                       | _____                 | _____                    |                     |
|  | SITE EVAC. (ESSENTIAL)           | _____     | _____                       | _____                 | _____                    |                     |
|  | OTHER OFFSITE AGENCY INVOLVEMENT | _____     | _____                       | _____                 | _____                    |                     |
|  | MEDICAL                          | _____     | _____                       | _____                 | _____                    |                     |
|  | FIRE                             | _____     | _____                       | _____                 | _____                    |                     |
|  | POLICE/SHERIFF                   | _____     | _____                       | _____                 | _____                    |                     |
| RADIOLOGICAL   | FIELD MON. TEAMS                 |           | NUMBER ASSEM. _____         | NUMBER DEPLOYED _____ |                          |                     |
|  |                                  |           | ZONES EVACUATED             | ZONES SHELTERED       |                          | KI (General Public) |
|  | OFFSITE PARS                     |           | _____                       | _____                 |                          | Yes ( ) No ( )      |
|  | RELEASE IN PROGRESS              |           | YES ( )                     | NO ( )                |                          |                     |
|  | RELEASE PATHWAY                  |           | _____                       |                       |                          |                     |
|  | CONTAINMENT PRESSURE             |           | _____ PSIG                  |                       |                          |                     |
|  | WIND DIRECTION                   |           | _____                       | WIND SPEED _____      |                          |                     |
|  | OFFSITE COMMUNICATIONS           | NUMBER    |                             | TIME                  |                          |                     |
| LAST MESSAGE SENT: _____   |                                  | _____     |                             |                       |                          |                     |
| NEXT MESSAGE DUE: _____  |                                  | _____     |                             |                       |                          |                     |
| NOTE: EOF COMMUNICATION CHECKS SHOULD BE COMPLETED PRIOR TO ACTIVATING THE EOF.    |                                  |           |                             |                       |                          |                     |
| OTHER NOTES RELATED TO THE ACCIDENT/EVENT/PLANT EQUIPMENT FAILED OR OUT OF SERVICE |                                  |           |                             |                       |                          |                     |
| _____  |                                  |           |                             |                       |                          |                     |
| _____  |                                  |           |                             |                       |                          |                     |
| _____  |                                  |           |                             |                       |                          |                     |

## EOF Director/Assistant EOF Director Checklist Page 16 of 16

## Job Aid {8}

|                 | CATAWBA/McGUIRE                 | OCONEE          | AVAILABLE | NOT AVAILABLE | COMMENTS |
|-----------------|---------------------------------|-----------------|-----------|---------------|----------|
| SG HEAT REMOVAL | AFW (CA) TRAIN A                | EFDW TRAIN A    | _____     | _____         |          |
|                 | AFW (CA) TRAIN B                | EFDW TRAIN B    | _____     | _____         |          |
|                 | TD AFW TRAIN                    | TDEFDW          | _____     | _____         |          |
|                 |                                 |                 |           |               |          |
| ECCS            | NV TRAIN A                      | HPI TRAIN A     | _____     | _____         |          |
|                 | NV TRAIN B                      | HPI TRAIN B     | _____     | _____         |          |
|                 | NI TRAIN A                      |                 | _____     | _____         |          |
|                 | NI TRAIN B                      |                 | _____     | _____         |          |
|                 | ND TRAIN A                      | LPIP TRAIN A    | _____     | _____         |          |
|                 | ND TRAIN B                      | LPIP TRAIN B    | _____     | _____         |          |
|                 | STANDBY MU WATER PMP            |                 | _____     | _____         |          |
| COOLING WATER   | KC TRAIN A                      | UNIT 1 CC       | _____     | _____         |          |
|                 | KC TRAIN B                      | UNIT 2 CC       | _____     | _____         |          |
|                 |                                 | UNIT 3 CC       | _____     | _____         |          |
|                 | RN TRAIN A                      | UNIT 1 & 2 LPSW | _____     | _____         |          |
|                 | RN TRAIN B                      | UNIT 3 LPSW     | _____     | _____         |          |
| POWER SYSTEMS   | BUSLINE A                       | MAIN FEEDER BUS | _____     | _____         |          |
|                 | BUSLINE B                       | STANDBY BUS     | _____     | _____         |          |
|                 | DG A                            | KEOWEE 1        | _____     | _____         |          |
|                 | DG B                            | KEOWEE 2        | _____     | _____         |          |
|                 | SATA                            | CT4             | _____     | _____         |          |
|                 | SATB                            | CT5             | _____     | _____         |          |
|                 | TRAIN A DC POWER                | DC POWER        | _____     | _____         |          |
|                 | TRAIN B DC POWER                |                 | _____     | _____         |          |
|                 | SSF DG                          | SSF DG          | _____     | _____         |          |
| CONTAINMENT     | CONT. SPRAY TRAIN A             | RBS TRAIN A     | _____     | _____         |          |
|                 | CONT. SPRAY TRAIN B             | RBS TRAIN B     | _____     | _____         |          |
|                 | H <sup>2</sup> IGNITERS TRAIN A |                 | _____     | _____         |          |
|                 | H <sup>2</sup> IGNITERS TRAIN B |                 | _____     | _____         |          |
|                 | CONT. AIR RETURN FANS TRAIN A   | A RBCU          | _____     | _____         |          |
|                 | CONT. AIR RETURN FANS TRAIN B   | B RBCU          | _____     | _____         |          |
|                 |                                 | C RBCU          | _____     | _____         |          |
|                 | CONT. ISOL. TRAIN A             | ES 1&2          | _____     | _____         |          |
|                 | CONT. ISOL. TRAIN B             | ES 5&6          | _____     | _____         |          |

Note: This form is not required for TSC/EOF Turnover. It is made available as a job aid only and can be used for other activities (e.g., Briefing the NRC).

**Enclosure 6.2**  
**Catawba Offsite Protective Actions**

SR/0/A/2000/003  
Page 1 of 6

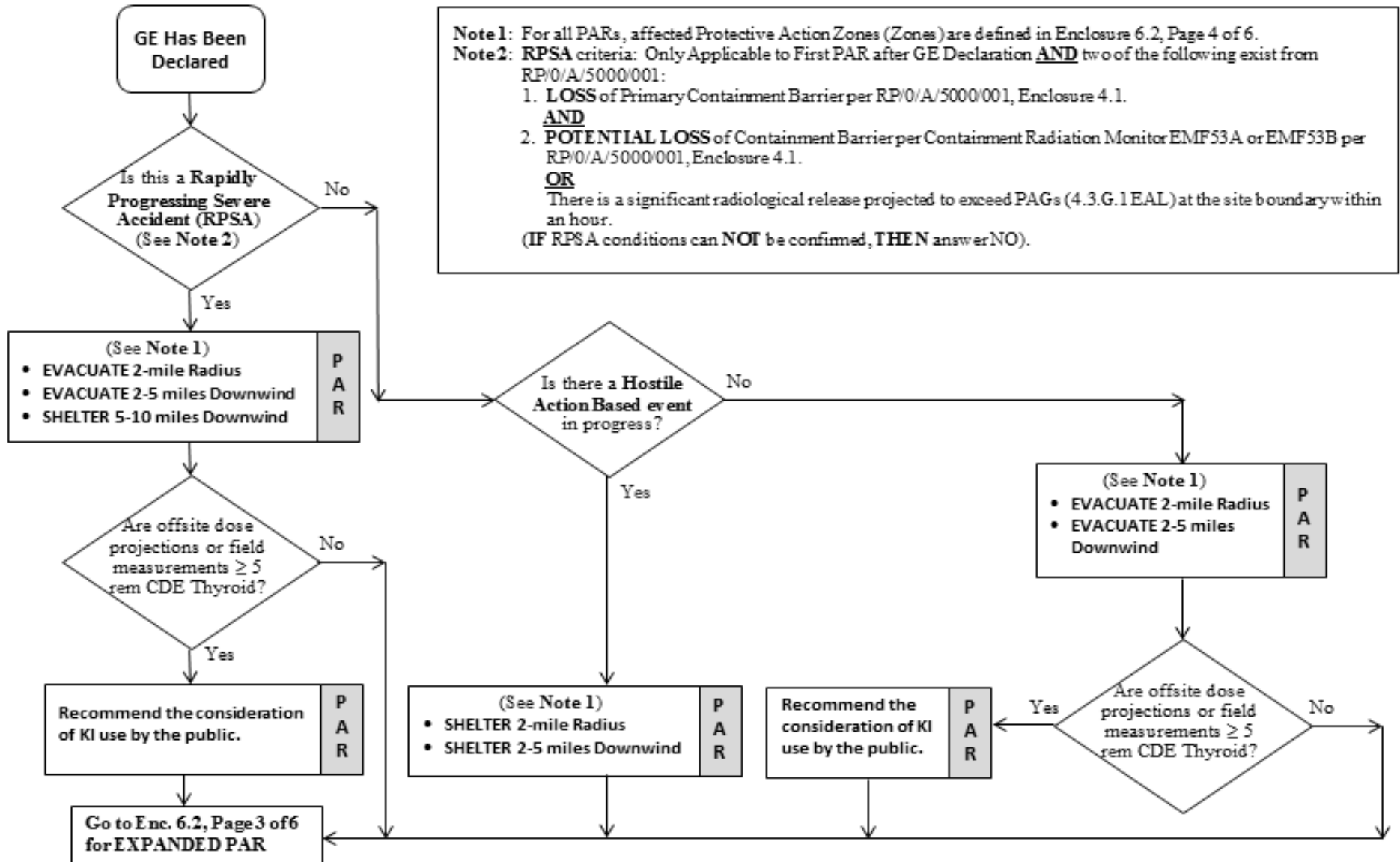
**Protective Action Guides**

**Note:** Protective Action Recommendations (PARs) for the public apply during a General Emergency, and include sheltering, evacuation and consideration of KI use. PARs are based on plant conditions independent of projected dose, and can also be based on projected dose. Protective Action Guides (PAGs) are levels of radiation dose at which prompt protective actions should be initiated and are based on EPA-400-R-92-001, Manual of Protective Action Guides and Protective Actions for Nuclear Incidents. The projected dose PARs specified in this enclosure are based on the PAGs listed below. The PAG for KI is taken from Potassium Iodide as a Thyroid Blocking Agent in Radiation Emergencies, FDA Guidance, November 2001 and Guidance for Industry, KI in Radiation Emergencies, Questions and Answers, FDA, December 2002. {23}

| <b>PROTECTIVE ACTION GUIDES (PAGs)</b><br>(Projected Dose or Field Measurements) |   |
|--|---|
| Total Effective Dose<br>Equivalent (TEDE)  | Committed Dose<br>Equivalent (CDE)<br>Thyroid |
| $\geq 1$ Rem   | $\geq 5$ Rem                                  |

INITIALS \_\_\_\_\_ PRINTED NAME \_\_\_\_\_

## Catawba Offsite Protective Actions Flowchart - INITIAL PAR



## Catawba Offsite Protective Actions Flowchart - EXPANDED PAR

**Note 1:** For all PARs, affected Protective Action Zones (Zones) are defined in Enclosure 6.2, Page 4 of 6. **IF** a Zone has been accurately selected for evacuation, it shall remain selected.

**Note 2:** A short-term release is one that can be accurately projected to be < three hours and controlled by the licensee. This consideration would typically apply to controlled venting of containment.

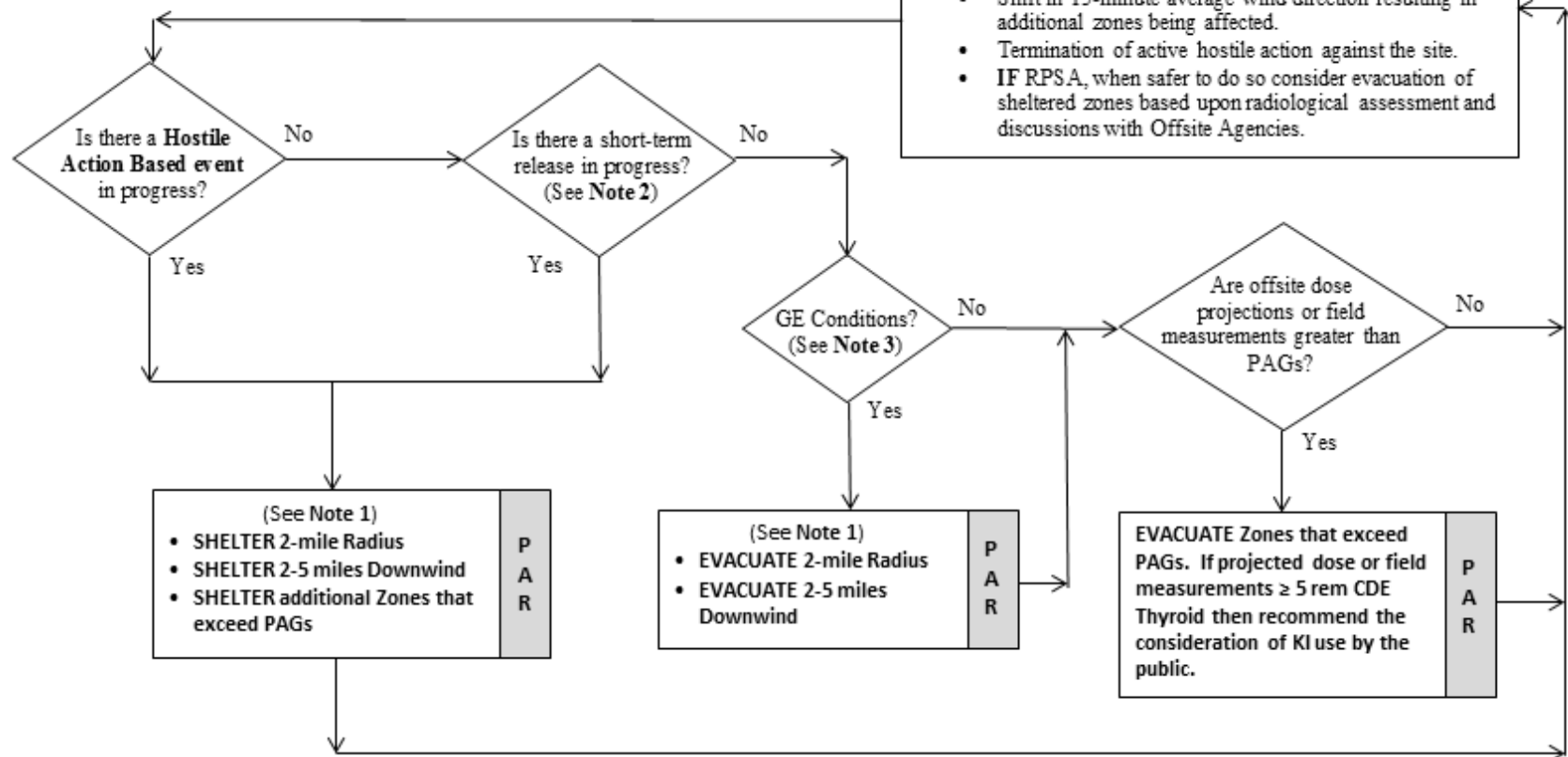
**Note 3:** **Plant conditions** exist which would require the classification of a General Emergency per the EALs. This does **NOT** include consideration of offsite dose-based EALs.

From INITIAL PAR  
Enc. 6.2, Page 2 of 6

Continuous Assessment

Evaluate PAR based on changes in any of the following:

- Increase in dose assessment projected values.
- Increase in field measurement values.
- Shift in 15-minute average wind direction resulting in additional zones being affected.
- Termination of active hostile action against the site.
- **IF** RPSA, when safer to do so consider evacuation of sheltered zones based upon radiological assessment and discussions with Offsite Agencies.



**Enclosure 6.2**  
**Catawba Offsite Protective Actions**

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**INITIAL**

**CAUTION:** A short term release is any release that can be projected to be 3 hours or less in duration. An example would be a "puff release". A controlled release is one that can be started and stopped at the licensee's discretion, such as the venting of Containment for pressure control. **IF** a release is short term **AND** controlled, sheltering in lieu of evacuation should be considered. {36}

**NOTE:**{5} 1. If necessary, obtain needed data from one of the following sources in order of sequence:  
 A. Catawba SDS (Group Display "ERORD5")  
 B. Duke Energy Meteorologist (2-0139, 3-7896, **OR** 2-4316)  
 C. National Weather Service in Greer, S.C. (9-1-864-879-1085, 9-1-800-268-7785  
**OR** Decision Line 15) {55}  
 2. OAC/SDS wind direction can be displayed as greater than 360 degrees. To arrive at wind direction for table below, subtract 360 from wind direction indications greater than 360 degrees.

—— **IF AT ANY TIME** a General Emergency is declared, make immediate PROTECTIVE ACTION RECOMMENDATIONS (PARs) within 15 minutes to be entered on Line 5 of the Emergency Notification Form (ENF). Determine the PARs based on the 15-minute average upper wind direction (OAC point C1P0250) as below:

| <b>Protective Action Zones</b> |               |                    |                                    |
|--------------------------------|---------------|--------------------|------------------------------------|
| Wind Direction                 | 2-Mile Radius | 2-5 Miles Downwind | 5-10 Miles Downwind<br>(RPSA Only) |
| 348.75 - 11.25                 | A0            | B1, C1, D1         | B2, C2, D2                         |
| 11.26 - 33.75                  | A0            | C1, D1             | C2, D2                             |
| 33.76 - 56.25                  | A0            | C1, D1, E1         | C2, D2, E2                         |
| 56.26 - 78.75                  | A0            | C1, D1, E1, F1     | C2, D2, E2, F2                     |
| 78.76 - 101.25                 | A0            | C1, D1, E1, F1     | D2, E2, F2                         |
| 101.26 - 123.75                | A0            | D1, E1, F1         | D2, E2, F2, F3                     |
| 123.76 - 146.25                | A0            | E1, F1             | E2, F2, F3                         |
| 146.26 - 168.75                | A0            | A1, E1, F1         | A2, E2, F2, F3                     |
| 168.76 - 191.25                | A0            | A1, E1, F1         | A2, F2, F3                         |
| 191.26 - 213.75                | A0            | A1, B1, E1, F1     | A2, A3, B2, F2, F3                 |
| 213.76 - 236.25                | A0            | A1, B1, F1         | A2, A3, B2, F2, F3                 |
| 236.26 - 258.75                | A0            | A1, B1, F1         | A2, A3, B2, F3                     |
| 258.76 - 281.25                | A0            | A1, B1, C1         | A2, A3, B2, C2                     |
| 281.26 - 303.75                | A0            | A1, B1, C1         | A2, A3, B2, C2                     |
| 303.76 - 326.25                | A0            | B1, C1             | A3, B2, C2                         |
| 326.26 - 348.74                | A0            | B1, C1, D1         | B2, C2, D2                         |

**Enclosure 6.2**  
**Catawba Offsite Protective Actions**

SR/0/A/2000/003  
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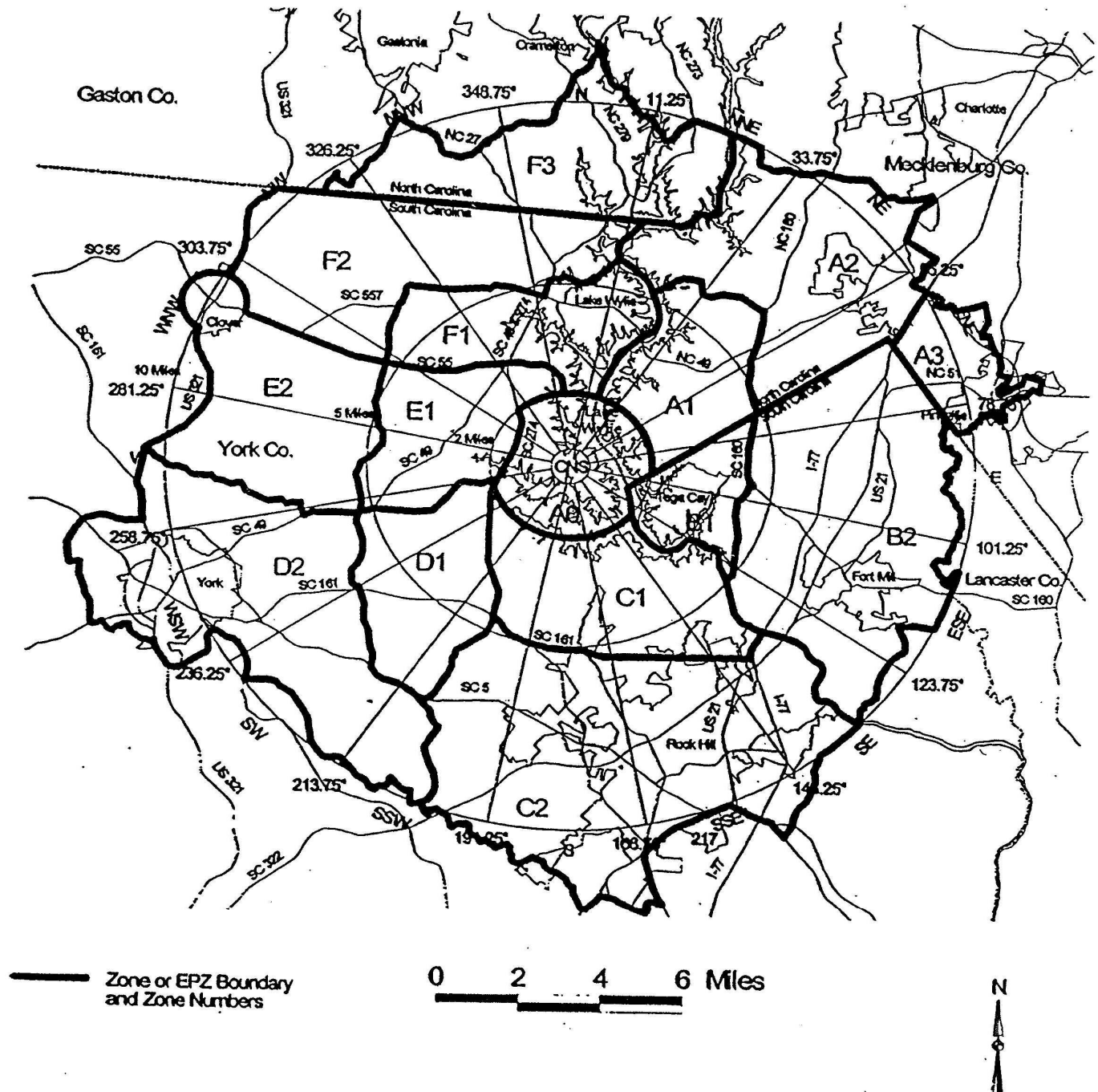
**NOTE:** **IF** changes to the initial Protective Action Recommendations are recommended, these changes must be transmitted to the offsite agencies within 15 minutes.

**CAUTION:** **IF** a zone has been accurately selected for evacuation, it shall remain selected. {27},  
{30}

- \_\_\_\_\_ **IF** dose projections indicate that CDE Thyroid dose will be  $\geq 5$  Rem, recommend KI use by the General Public in accordance with State Plans and Policy. {23}
- \_\_\_\_\_ Evaluate specific plant conditions, offsite dose projections, wind direction, field monitoring team data, and assess the need to update Protective Action Recommendations made to the states and counties in the previous notification throughout the event.
- \_\_\_\_\_ Review dose projections with the Radiological Assessment Manager to determine if Protective Action Recommendations are required beyond the 10-mile EPZ.
- \_\_\_\_\_ **IF** Protective Action Recommendations are required beyond 10 miles, notify states and counties to consider sheltering/evacuating general population located beyond the affected 10-mile EPZ.

## Catawba Offsite Protective Actions

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Catawba Protective Action Zones - 10-mile EPZ  
(2 and 5-mile Radius, inner circles)

## McGuire Offsite Protective Actions

## Protective Action Guides

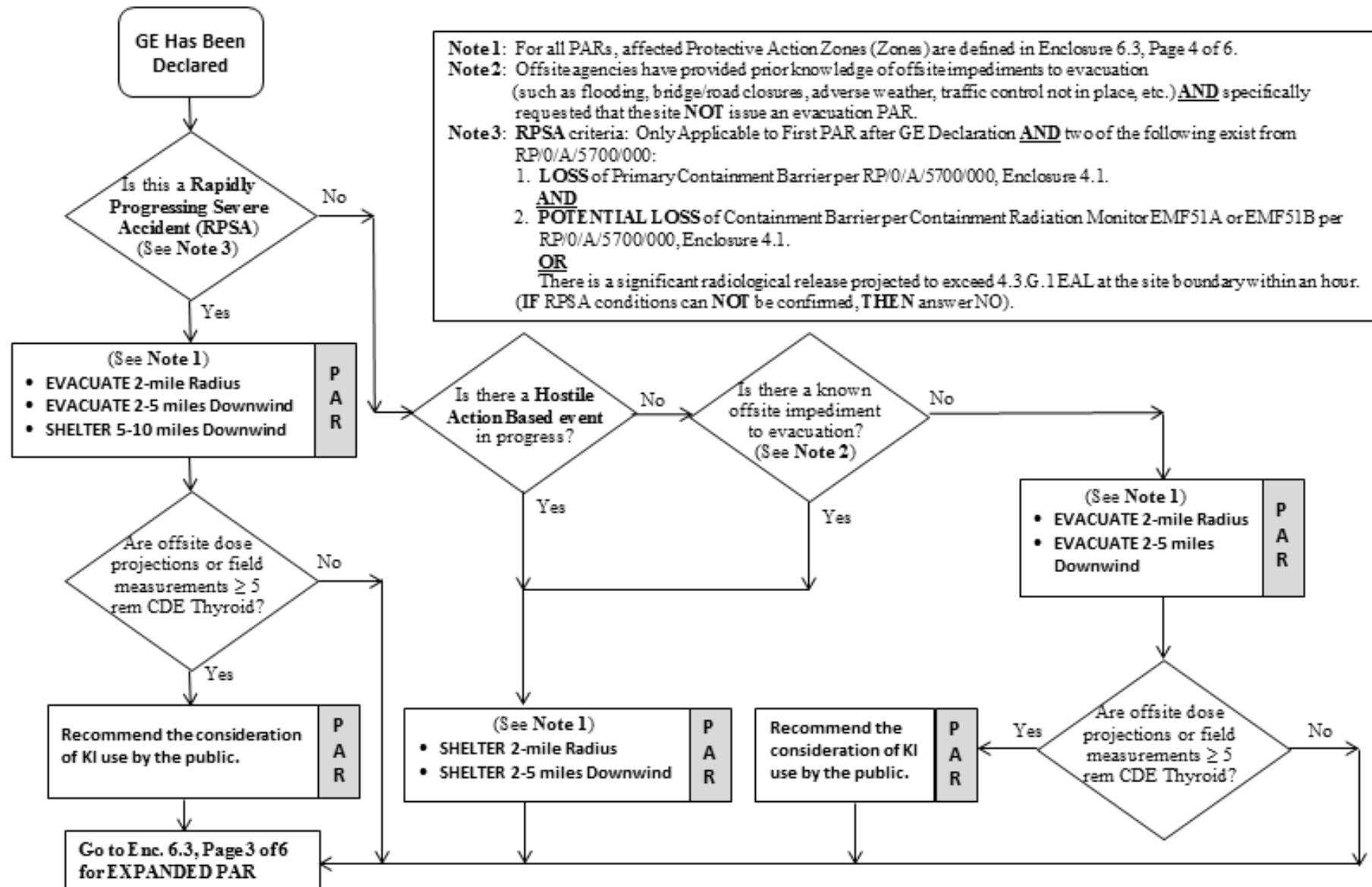
**Note:** Protective Action Recommendations (PARs) for the public apply during a General Emergency, and include sheltering, evacuation and consideration of KI use. PARs are based on plant conditions independent of projected dose, and can also be based on projected dose. Protective Action Guides (PAGs) are levels of radiation dose at which prompt protective actions should be initiated and are based on EPA-400-R-92-001, Manual of Protective Action Guides and Protective Actions for Nuclear Incidents. The projected dose PARs specified in this enclosure are based on the PAGs listed below. The PAG for KI is taken from Potassium Iodide as a Thyroid Blocking Agent in Radiation Emergencies, FDA Guidance, November 2001 and Guidance for Industry, KI in Radiation Emergencies, Questions and Answers, FDA, December 2002. {23}

| <b>PROTECTIVE ACTION GUIDES (PAGs)</b><br>(Projected Dose or Field Measurements) |   |
|--|---|
| Total Effective Dose<br>Equivalent (TEDE)  | Committed Dose<br>Equivalent (CDE)<br>Thyroid |
| $\geq 1$ Rem   | $\geq 5$ Rem                                  |

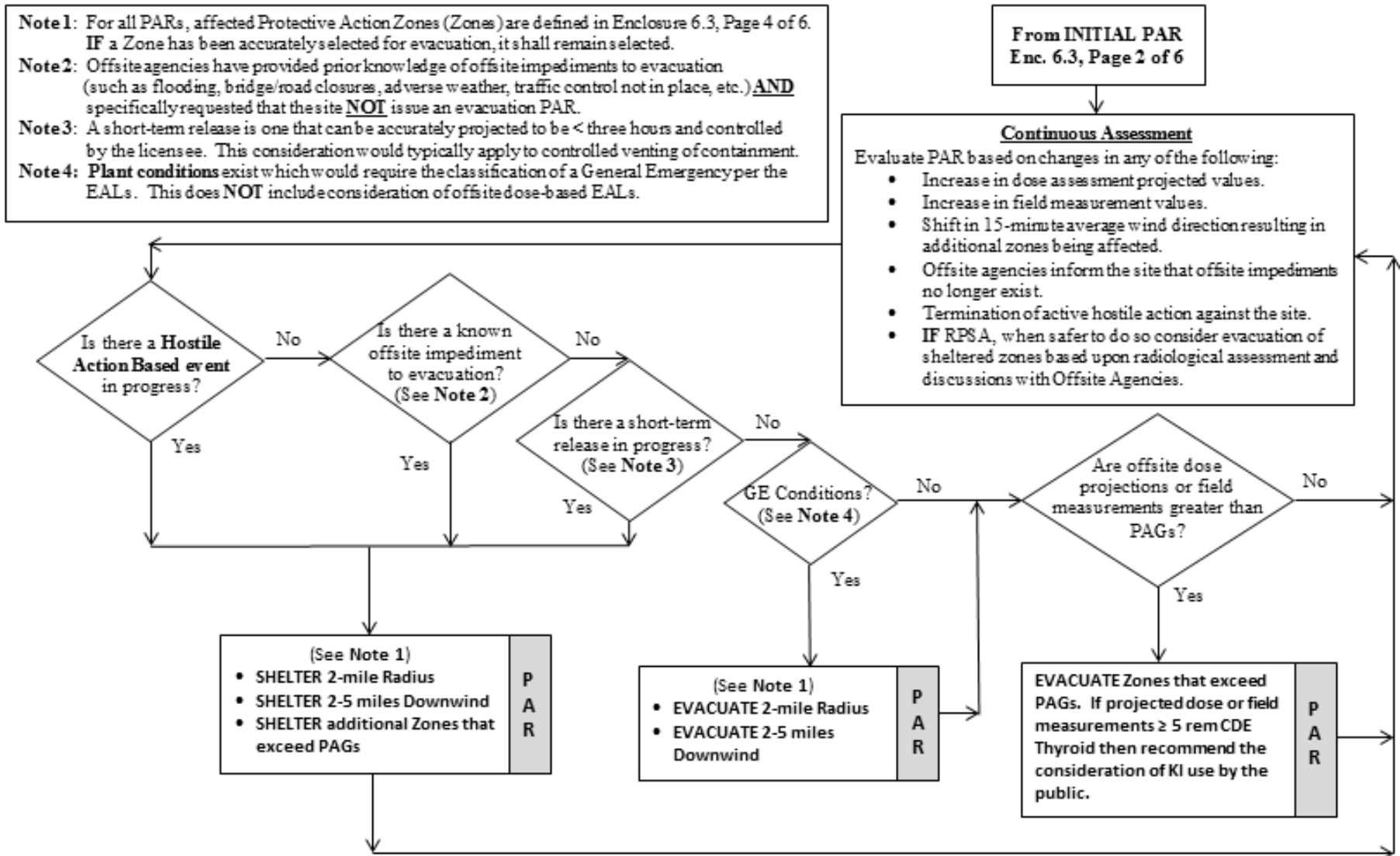
INITIALS \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

## McGuire Offsite Protective Actions Flowchart - INITIAL PAR



## McGuire Offsite Protective Actions Flowchart - EXPANDED PAR



## INITIAL

**CAUTION:** A short term release is any release that can be projected to be 3 hours or less in duration. An example would be a "puff release". A controlled release is one that can be started and stopped at the licensee's discretion, such as the venting of Containment for pressure control. **IF** a release is short term **AND** controlled, sheltering in lieu of evacuation should be considered. {36}

**NOTE:**{5} If necessary, obtain needed data from one of the following sources in order of sequence:

- A. McGuire SDS (Group Display "ERORD5")
- B. Duke Energy Meteorologist (2-0139, 3-7896, **OR** 2-4316)
- C. National Weather Service in Greer, S.C. (9-1-864-879-1085, 9-1-800-268-7785 **OR** Decision Line 15) {55}

—— **IF AT ANY TIME** a General Emergency is declared, make immediate PROTECTIVE ACTION RECOMMENDATIONS (PARs) within 15 minutes to be entered on Line 5 of the Emergency Notification Form (ENF). Determine the PARs based on the 15-minute average upper wind direction (OAC point M1P0847) as below:

| Protective Action Zones |               |                    |                                    |
|-------------------------|---------------|--------------------|------------------------------------|
| Wind Direction          | 2-Mile Radius | 2-5 Miles Downwind | 5-10 Miles Downwind<br>(RPSA Only) |
| 0.1 - 22.5              | B,C,L,M       | D,O,R              | E,F,S                              |
| 22.6 – 45.0             | B,C,L,M       | D,O,R              | E,Q,S                              |
| 45.1 – 67.5             | B,C,L,M       | D,N,O,R            | E,P,Q,S                            |
| 67.6 – 90.0             | B,C,L,M       | D,N,O,R            | P,Q,S                              |
| 90.1 – 112.5            | B,C,L,M       | N,O,R              | K,P,Q,S                            |
| 112.6 – 135.0           | B,C,L,M       | A,N,O,R            | I,K,P,Q,S                          |
| 135.1 – 157.5           | B,C,L,M       | A,N,O              | I,K,P,Q                            |
| 157.6 – 180.0           | B,C,L,M       | A,N                | H,I,J,K,P                          |
| 180.1 – 202.5           | B,C,L,M       | A,N                | G,H,I,J,K,P                        |
| 202.6 – 225.0           | B,C,L,M       | A,D,N              | G,H,I,J,K,P                        |
| 225.1 – 247.5           | B,C,L,M       | A,D                | F,G,H,I,J                          |
| 247.6 – 270.0           | B,C,L,M       | A,D                | F,G,H,I,J                          |
| 270.1 – 292.5           | B,C,L,M       | A,D                | E,F,G,H,J                          |
| 292.6 – 315.0           | B,C,L,M       | A,D,R              | E,F,G                              |
| 315.1 – 337.5           | B,C,L,M       | D,R                | E,F,G,S                            |
| 337.6 – 360.0           | B,C,L,M       | D,R,O              | E,F,S                              |

**Enclosure 6.3**  
**McGuire Offsite Protective Actions**

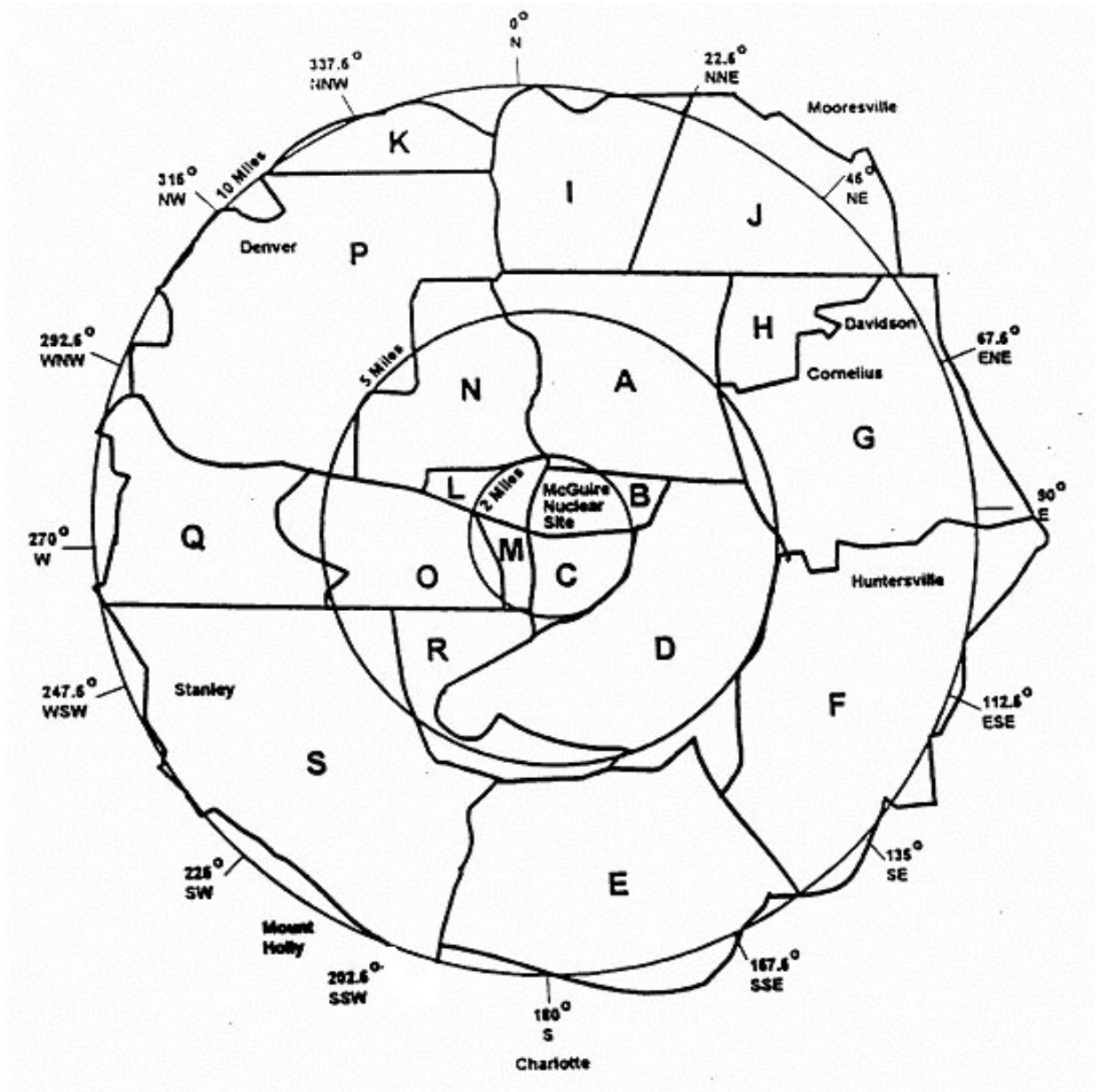
SR/0/A/2000/003  
Page 5 of 6

**NOTE:** **IF** changes to the initial Protective Action Recommendations are recommended, these changes must be transmitted to the offsite agencies within 15 minutes.

**CAUTION:** **IF** a zone has been accurately selected for evacuation, it shall remain selected. {27},  
{30}

- \_\_\_\_\_ **IF** dose projections indicate that CDE Thyroid dose will be  $\geq 5$  Rem, recommend KI use by the General Public in accordance with State Plans and Policy. {23}
  
- \_\_\_\_\_ Evaluate specific plant conditions, offsite dose projections, wind direction, field monitoring team data, and assess the need to update Protective Action Recommendations made to the states and counties in the previous notification throughout the event.
  
- \_\_\_\_\_ Review dose projections with the Radiological Assessment Manager to determine if Protective Action Recommendations are required beyond the 10-mile EPZ.
  
- \_\_\_\_\_ **IF** Protective Action Recommendations are required beyond 10 miles, notify states and counties to consider sheltering/evacuating general population located beyond the affected 10-mile EPZ.

## McGuire Offsite Protective Actions

McGuire Protective Action Zones - 10-mile EPZ  
(2 and 5-mile radius, inner circles)

## Oconee Offsite Protective Actions

## Protective Action Guides

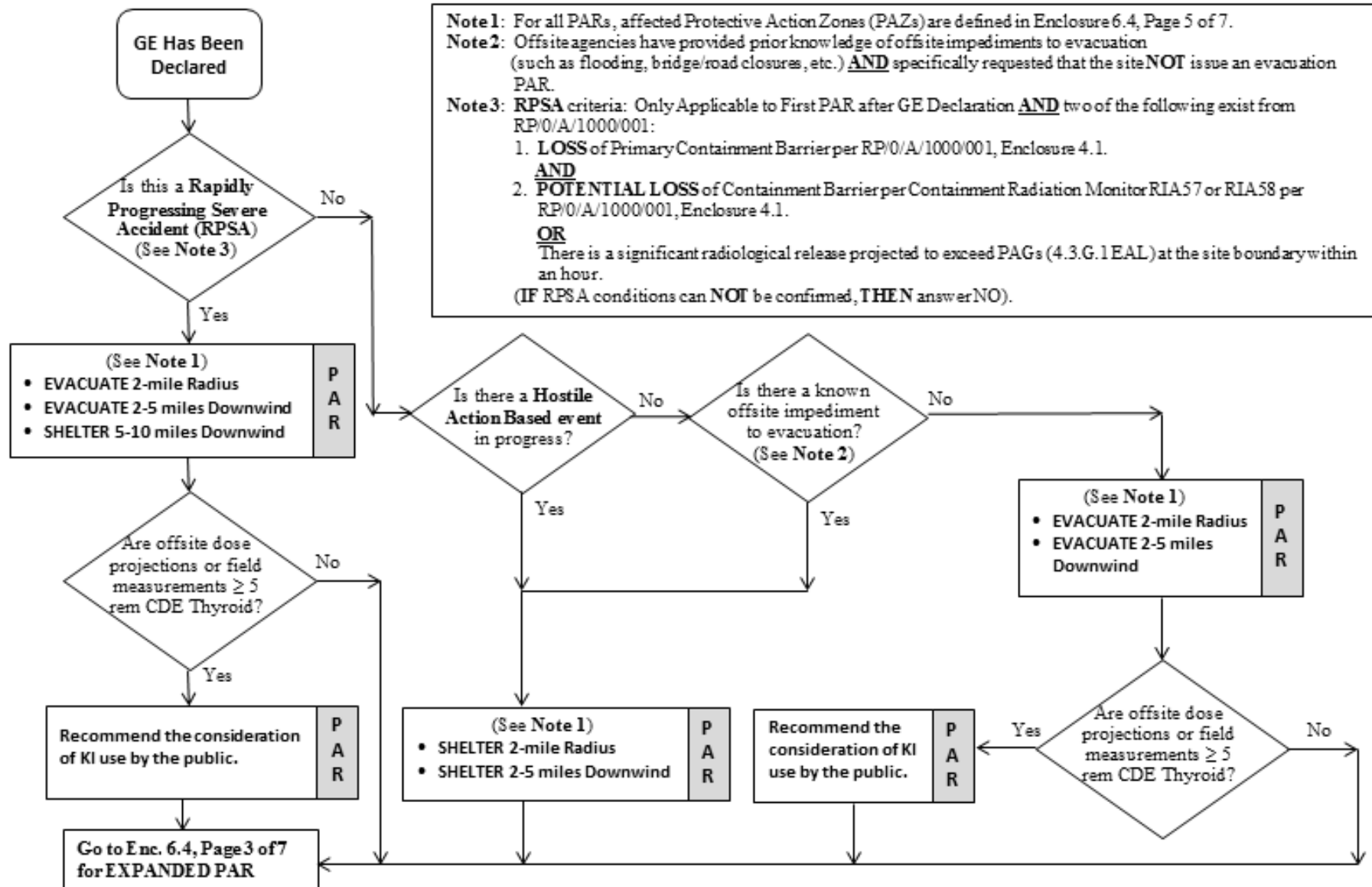
**Note:** Protective Action Recommendations (PARs) for the public apply during a General Emergency, and include sheltering, evacuation and consideration of KI use. PARs are based on plant conditions independent of projected dose, and can also be based on projected dose. Protective Action Guides (PAGs) are levels of radiation dose at which prompt protective actions should be initiated and are based on EPA-400-R-92-001, Manual of Protective Action Guides and Protective Actions for Nuclear Incidents. The projected dose PARs specified in this enclosure are based on the PAGs listed below. The PAG for KI is taken from Potassium Iodide as a Thyroid Blocking Agent in Radiation Emergencies, FDA Guidance, November 2001 and Guidance for Industry, KI in Radiation Emergencies, Questions and Answers, FDA, December 2002. {23}

| <b>PROTECTIVE ACTION GUIDES (PAGs)</b><br>(Projected Dose or Field Measurements) |   |
|--|---|
| Total Effective Dose<br>Equivalent (TEDE)  | Committed Dose<br>Equivalent (CDE)<br>Thyroid |
| $\geq 1$ Rem   | $\geq 5$ Rem                                  |

INITIALS \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

## Oconee Offsite Protective Actions Flowchart - INITIAL PAR

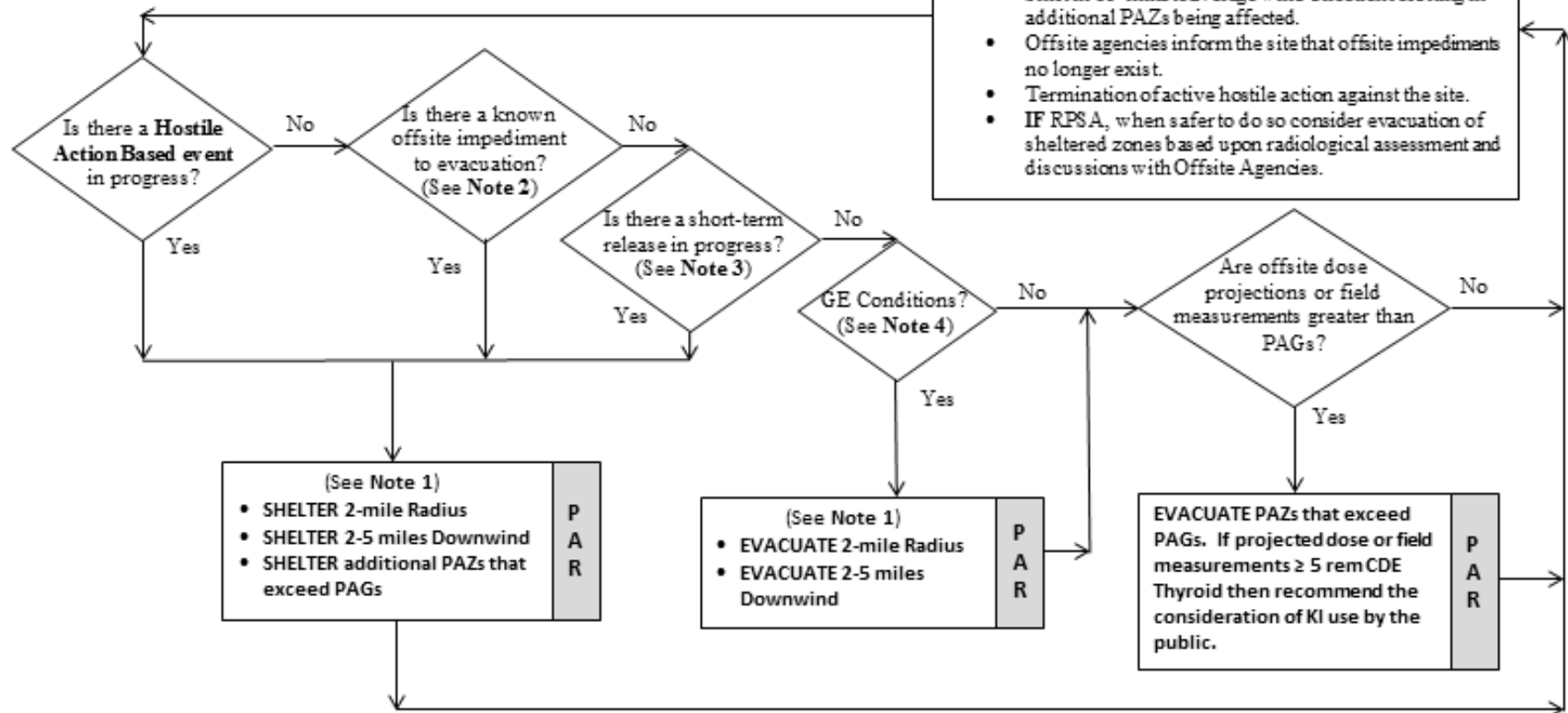


**Note 1:** For all PARs, affected Protective Action Zones (PAZs) are defined in Enclosure 6.4, Page 5 of 7. IF a PAZ has been accurately selected for evacuation, it shall remain selected.

**Note 2:** Offsite agencies have provided prior knowledge of offsite impediments to evacuation (such as flooding, bridge/road closures, adverse weather, traffic control not in place, etc.) AND specifically requested that the site NOT issue an evacuation PAR.

**Note 3:** A short-term release is one that can be accurately projected to be < three hours and controlled by the licensee. This consideration would typically apply to controlled venting of containment.

**Note 4:** Plant conditions exist which would require the classification of a General Emergency per the EALs. This does NOT include consideration of offsite dose-based EALs.



**Enclosure 6.4**  
**Oconee Offsite Protective Actions**

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INITIAL

**CAUTION:** A short term release is any release that can be projected to be 3 hours or less in duration. An example would be a "puff release". A controlled release is one that can be started and stopped at the licensee's discretion, such as the venting of Containment for pressure control. **IF** a release is short term **AND** controlled, sheltering in lieu of evacuation should be considered. {36}

**NOTE:**{5}If necessary, obtain needed data from one of the following sources in order of sequence:  
A. Oconee SDS (Turn On Code "EROENV")  
B. Duke Energy Meteorologist (2-0139, 3-7896, **OR** 2-4316)  
C. National Weather Service in Greer, S.C. (9-1-864-879-1085 **OR** 9-1-800-268-7785)

— **IF AT ANY TIME** a General Emergency is declared, make immediate PROTECTIVE ACTION RECOMMENDATIONS (PARs) within 15 minutes to be entered on Line 5 of the Emergency Notification Form (ENF). Determine the meteorological parameters to use based on the 15-minute average wind direction (SDS "EROENV" screen) as determined from the following chart below:

| Time of Day Conditions   | Met Parameter  | First Priority | Second Priority | Third Priority | Fourth Priority |
|--|----------------|----------------|-----------------|----------------|-----------------|
| 1000 - 1600  | Wind Direction | 60M reading    | 10M reading     | River Tower    | NWS             |
| 1600 – 1000 and River Wind between 210° and 360° or 0° and 70° | Wind Direction | 60M reading    | 10M reading     | River Tower    | NWS             |
| 1600 – 1000 and River Wind between 70° and 210°                | Wind Direction | River Tower    | 60M reading     | NWS            |                 |

**Enclosure 6.4**  
**Oconee Offsite Protective Actions**

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Page 5 of 7

\_\_\_\_\_ Determine affected zones from chart below based on the 15-minute average wind direction as determined in previous step:

| Wind Direction | Protective Action Zones |             |                        |
|----------------|-------------------------|-------------|------------------------|
|                | 0-2 miles;              | 2-5 miles;  | 5-10 miles (RPSA Only) |
| 14.1°-27°      | A0,                     | C1, D1, E1, | C2, D2, E2             |
| 27.1°-42°      | A0,                     | C1, D1, E1, | D2, E2                 |
| 42.1°-66°      | A0,                     | D1, E1,     | D2, E2                 |
| 66.1°-85°      | A0,                     | D1, E1,     | D2, E2, F2             |
| 85.1°-104°     | A0,                     | D1, E1, F1, | D2, E2, F2             |
| 104.1°-129°    | A0,                     | E1, F1,     | E2, F2                 |
| 129.1°-156°    | A0,                     | A1, E1, F1, | A2, E2, F2             |
| 156.1°-175°    | A0,                     | A1, E1, F1, | A2, F2                 |
| 175.1°-181°    | A0,                     | A1, F1,     | A2, F2                 |
| 181.1°-219°    | A0,                     | A1, B1, F1, | A2, B2, F2             |
| 219.1°-255°    | A0,                     | A1, B1,     | A2, B2,                |
| 255.1°-271°    | A0,                     | A1, B1, C1, | A2, B2, C2             |
| 271.1°-297°    | A0,                     | B1, C1,     | B2, C2                 |
| 297.1°-312°    | A0,                     | B1, C1,     | B2, C2, D2             |
| 312.1°-345°    | A0,                     | B1, C1, D1, | B2, C2, D2             |
| 345.1°-14°     | A0,                     | C1, D1,     | C2, D2                 |

**NOTE:** **IF** changes to the initial Protective Action Recommendations are recommended, these changes must be transmitted to the offsite agencies within 15 minutes.

**CAUTION:** **IF** a zone has been accurately selected for evacuation, it shall remain selected.  
{27}, {30}

- \_\_\_\_\_ **IF** dose projections indicate that CDE Thyroid dose will be  $\geq 5$  Rem, recommend KI use by the General Public in accordance with State Plans and Policy. {23}
  
- \_\_\_\_\_ Evaluate specific plant conditions, offsite dose projections, wind direction, field monitoring team data, and assess the need to update Protective Action Recommendations made to the states and counties in the previous notification throughout the event.
  
- \_\_\_\_\_ Review dose projections with the Radiological Assessment Manager to determine if Protective Action Recommendations are required beyond the 10-mile EPZ.
  
- \_\_\_\_\_ **IF** Protective Action Recommendations are required beyond 10 miles, notify states and counties to consider sheltering/evacuating general population located beyond the affected 10-mile EPZ.

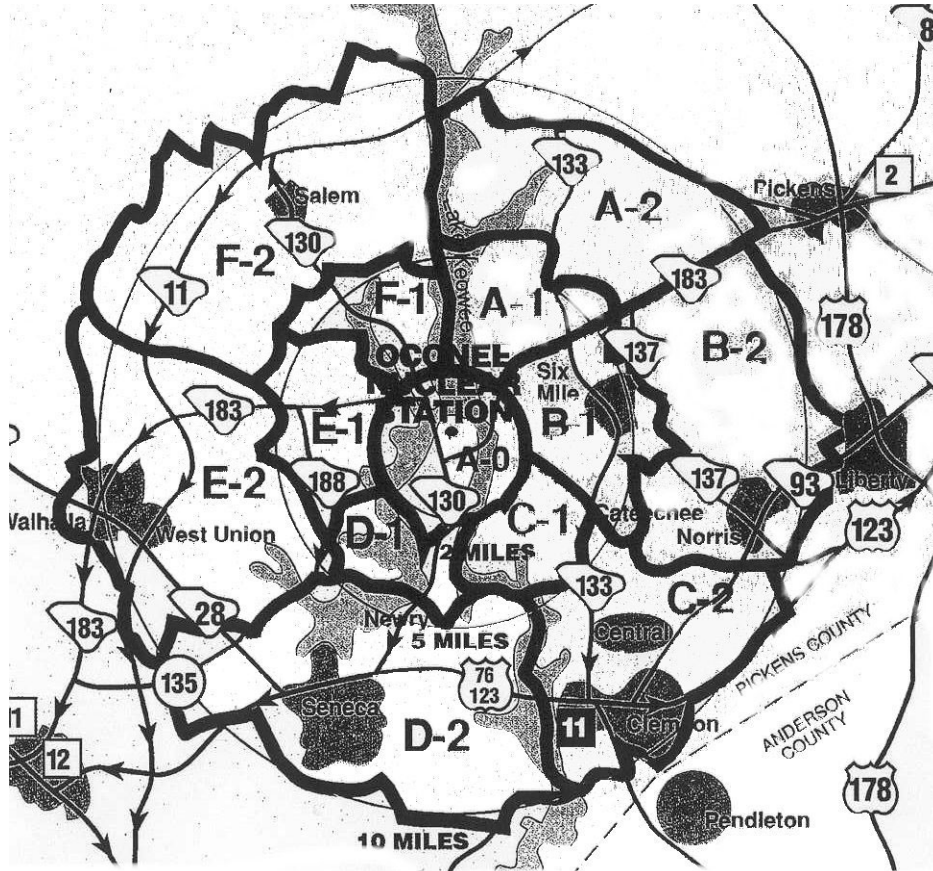
# Enclosure 6.4

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## Oconee Offsite Protective Actions

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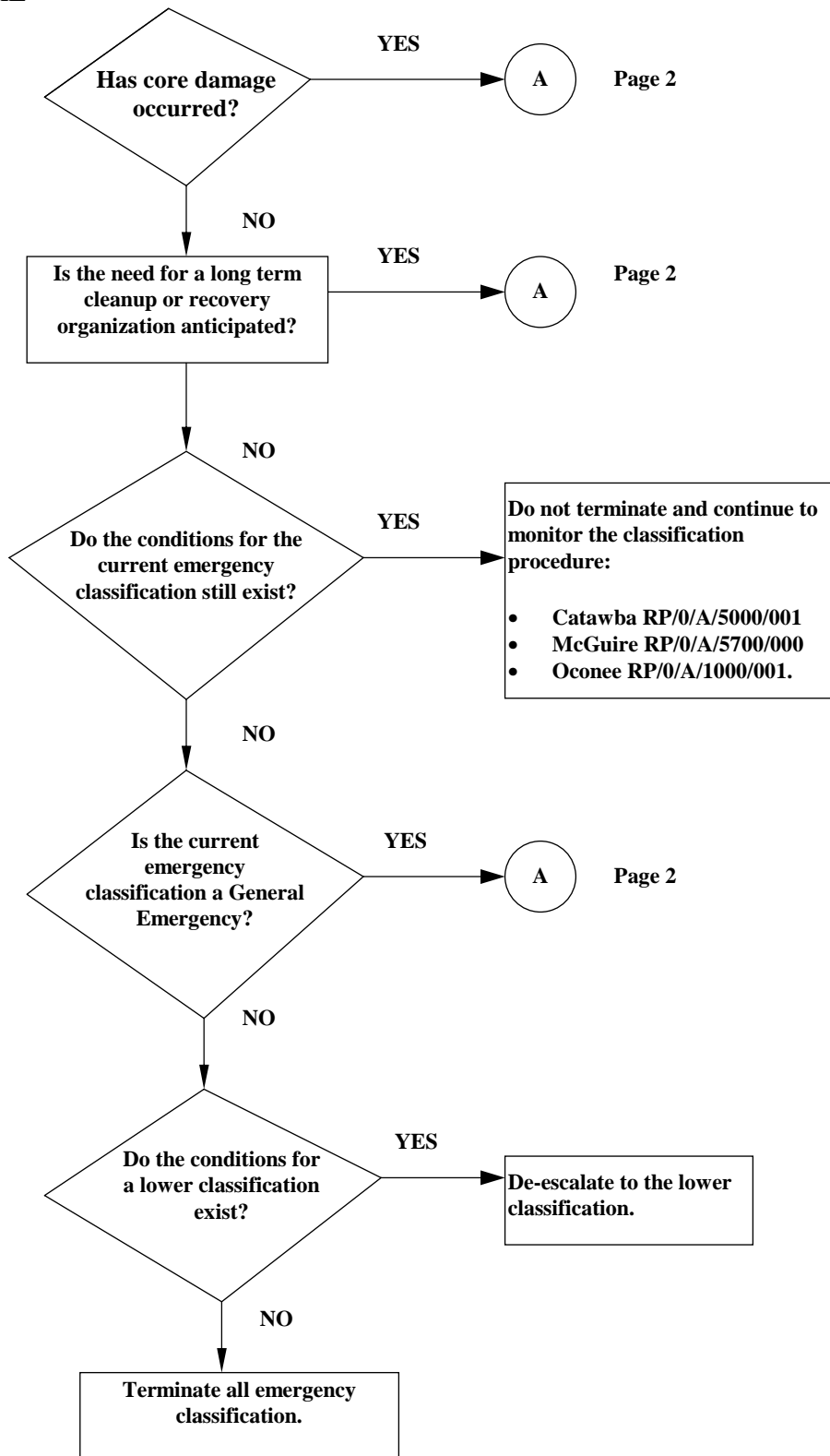
### Oconee Protective Action Zones - 10-Mile EPZ (2 and 5-mile radius, inner circles)



| Radius From Site<br>(miles) | Pickens County<br>Zones | Oconee County<br>Zones |
|-----------------------------|-------------------------|------------------------|
| 0-2                         | A0                      | A0                     |
| 2-5                         | A-1, B-1, C-1           | D-1, E-1, F-1          |
| 5-10                        | A-2, B-2, C-2           | D-2, E-2, F-2          |

# Emergency Classification Downgrade/Termination Criteria

INITIAL



INITIALS \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

# Emergency Classification Downgrade/Termination Criteria

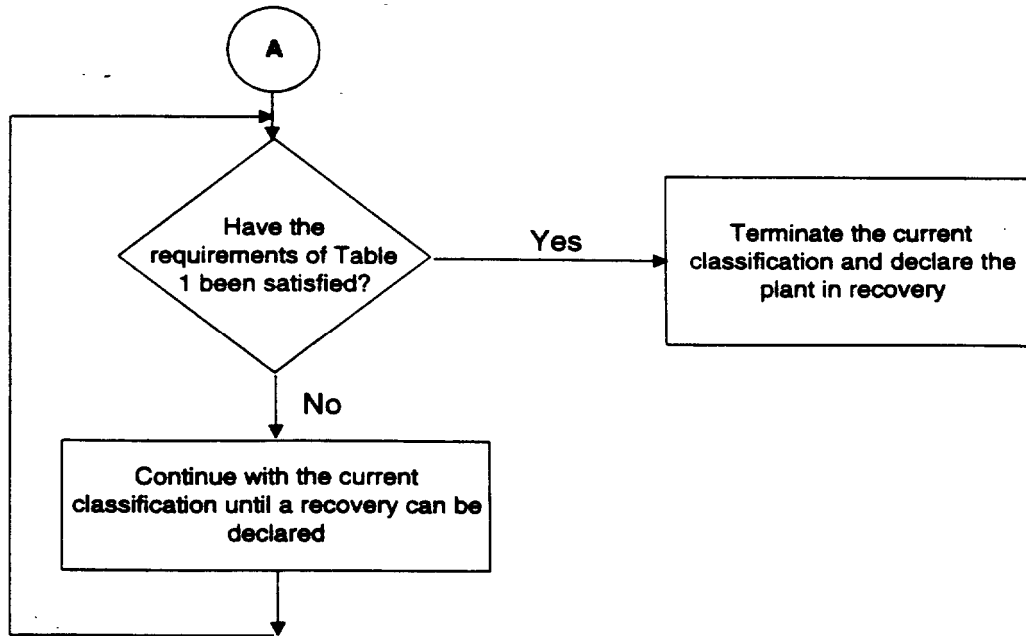


Table 1

\_\_\_ Security threat has been contained.

\_\_\_ No new evacuation or sheltering protective actions are anticipated.

\_\_\_ Containment pressure is being maintained less than design pressure.

\_\_\_ Containment hydrogen levels are less than 9% and stable or decreasing.

\_\_\_ Decay heat rejection to the ultimate heat sink has been established and is stable. This is indicated by either of the following (circle one):

- Decay heat removal is considered stable if supported by redundancy or diversity

- Examples of a satisfactory state include:

- 2 trains of systems for sump recirculation.
- 2 trains of Decay Heat Removal (DHR)
- 1 train of DHR and the ability to cool with the steam generators.
- steam generator cooling with 2 trains of feed capability.

**OR**

- Decay heat removal is considered stable if no additional fission product barrier challenges would be expected for at least 2 hours following interruption of core cooling.

(continued on next page)

**Emergency Classification Downgrade/Termination  
Criteria**

\_\_\_\_\_The risks from recriticality are acceptably low.

\_\_\_\_\_Radiation Protection is monitoring access to radiologically hazardous areas.

\_\_\_\_\_Offsite conditions do not limit plant access.

\_\_\_\_\_The Public Information Coordinator, NRC officials, and State representatives have been consulted to determine the effects of termination on their activities.

\_\_\_\_\_The recovery organization is ready to assume control of recovery operations:

- Catawba - RP/0/B/5000/025
- McGuire - RP/0/A/5700/024
- Oconee - RP/0/A/1000/027

**Enclosure 6.6**  
**Radiological Assessment Manager Checklist**

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INITIAL \_\_\_\_\_

**NOTE:** Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

- \_\_\_\_\_ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.
- \_\_\_\_\_ Don position badge.
- \_\_\_\_\_ Sign in on the EOF staffing board.
- \_\_\_\_\_ Obtain copy of AD-EP-ALL-0202, Emergency Response Offsite Dose Assessment. {56}
- \_\_\_\_\_ **IF** Field Monitoring teams have been dispatched, ensure FMC has established communication with Field Monitoring teams. {18}
- \_\_\_\_\_ Notify EOF Director that Radiological Assessment Manager (RAM) position is operational.
- \_\_\_\_\_ Ensure all Radiation Protection personnel reporting to the EOF sign in on staffing board.
- \_\_\_\_\_ Ensure that EOF Dose Assessors are kept informed of pertinent plant information including, but not limited to:
  - 1) Time of TSC activation
  - 2) Time of EOF activation
  - 3) Time of reactor trip
  - 4) Status of safety injection
  - 5) Status of onsite radiological conditions
  - 6) Time next emergency notification message is due. {15}
- \_\_\_\_\_ Establish log of activities sufficient to conduct turnover for on-coming shift.
- \_\_\_\_\_ Communicate to EOF Director:
  - 1) Any release in progress, including dose rates (especially at the site boundary)
  - 2) Field Team status/data
  - 3) On-site radiological concerns
  - 4) Need to request the site pull a reactor coolant sample for Dose Equivalent Iodine to support emergency classification

INITIALS \_\_\_\_\_ PRINTED NAME \_\_\_\_\_

**Radiological Assessment Manager Checklist**

\_\_\_\_\_ Review Criteria in "Classification of Emergency" procedure for emergency classification changes and discuss with Accident Assessment personnel plant conditions including power failures, valve closures, etc.

Catawba RP/0/A/5000/001

**OR**

McGuire RP/0/A/5700/000

**OR**

Oconee RP/0/A/1000/001.

**NOTE:**

- Microsoft Office Communicator is an acceptable communications method.
- Oconee TSC Dose Assessment Liaison, 9-1-864-873-4902.
- Catawba/McGuire, Dose Assessment Bridge, 9-980-875-4980.

\_\_\_\_\_ Establish communications with dose assessment personnel at TSC. Compare information, projections and strategies with TSC. {4, 60}

**NOTE:** Descriptions of Keowee Hydro Dam/Dike Condition A and B are provided in Enclosure 6.22. {58}

\_\_\_\_\_ **IF** Condition A, Dam Failure (Keowee or Jocassee) exists, make the following Protective Action Recommendations to Oconee County and Pickens County for imminent/actual dam failure and include on the Emergency Notification Form on Line 5B (Evacuate) and Line 5E (Other):

Line 5B *Move residents living downstream of the Keowee Hydro Project dams to higher ground.*

Line 5E *Prohibit traffic flow across bridges identified on your inundation maps until the danger has passed.*

**Enclosure 6.6**  
**Radiological Assessment Manager Checklist**

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**NOTE:** Enclosure 6.2 (for CNS), Enclosure 6.3 (for MNS), and Enclosure 6.4 (for ONS) provide guidance for PARs and KI protective action recommendations.

\_\_\_\_\_ **IF** General Emergency is declared, provide PAR information on Line 5 of the Emergency Notification Form:

**CAUTION:** **IF** a zone has been accurately selected for evacuation, it shall remain selected. {27}, {30}

- Zones for Evacuation
- Zones for Sheltering
- Use of KI for General Public. {23}
- Other PARs.

\_\_\_\_\_ Determine, with input from the Accident Assessment Manager (AAM), Protective Actions using

- ☐ Enclosure 6.2, Catawba Offsite Protective Actions
- ☐ Enclosure 6.3, McGuire Offsite Protective Actions
- ☐ Enclosure 6.4, Oconee Offsite Protective Actions

\_\_\_\_\_ Review dose projections and determine if Protective Action Recommendations are required beyond 10-mile EPZ.

**NOTE:** **IF** changes to the initial Protective Action Recommendations, including KI, are recommended to and approved by the EOF Director, these changes shall be transmitted to the offsite agencies within 15 minutes and the reason for the Protective Action Recommendation change be reported on Line 13 of the ENF {46}.

\_\_\_\_\_ Provide EOF Director Protective Action Recommendations.

**Radiological Assessment Manager Checklist**

\_\_\_\_\_ Evaluate Emergency Release Status:

- None - no release of radioactivity generated by the event and no release expected.
- Is Occurring - radioactivity generated during an event that is currently being released through any defined accident pathway, as indicated by **ANY** of the following:

**McGuire/Catawba**

- EMF-38, 39, 40, 51 (MNS), 53 (CNS) containment monitor reading(s) indicate an increase **AND** containment pressure is greater than 0.3 psig
- EMF-38, 39, 40, 51 (MNS), 53 (CNS) containment monitor reading(s) indicate an increase **AND** a known leak path exists from containment
- EMF-36 unit vent monitor reading or other alternate means indicates steam generator tube leakage
- EMF-33 CSAE exhaust monitor reading or other alternate means indicates steam generator tube leakage
- A known unmonitored release path exists **AND** radioactive material exists
- Alternate method of release determination
- Field Monitoring Team results.

**Oconee**

- RIA-47, 48, 49, 49A, 57 or 58 containment monitor reading(s) indicate an increase **AND** containment pressure is greater than 1 psig
- RIA-47, 48, 49, 49A, 57 or 58 containment monitor reading(s) indicate an increase **AND** a known leak path exists from containment
- RIA-45 or 46 unit vent monitor reading(s) indicate an increase in activity
- RIA-40 CSAE exhaust monitor reading or other alternate means indicates steam generator tube leakage
- A known unmonitored release path exists, **AND** radioactive material exists
- Alternate method of release determination
- Field Monitoring Team results.

- Has Occurred - any radioactivity released to the environment during a declared emergency event, but has been stopped.

\_\_\_\_\_ Provide Emergency Release Status input for Line 6 of ENF.

**Enclosure 6.6**  
**Radiological Assessment Manager Checklist**

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**NOTE:** The Site Boundary Normal Operating Limits in the Technical Specifications and SLCs are:

- EDE 5.70 E-2 mRem/hr (500 mRem/yr)
- CDC Thyroid 1.71E-1 mRem/hr (1500 mRem/yr)

\_\_\_\_\_ Evaluate **AND** provide Emergency Release Significance for ENF Line 7:

- **IF** no release in progress, Not Applicable.
- **IF** release significance is known, Within Normal Operating Limits **OR** Above Normal Operating Limits.
- **IF** release significance is unknown, Under Evaluation.

\_\_\_\_\_ Provide on ENF Line 9:

- Wind Direction
- Wind Speed
- Precipitation Type
- Stability Class.

**NOTES:** 1. Emergency Release data are not required for initial Emergency Notification Forms **OR** notifications of changes in Protective Action Recommendations. {79}

2. It is inappropriate to provide information for liquid releases on ENF Lines 14, 15, and 16, as they cannot be quantified using URI and are not the basis for Protective Action Recommendations. It is appropriate to provide information about liquid releases on Line 13, Remarks. {82}

\_\_\_\_\_ Provide on ENF Line 14:

- Release Characterization (Type, C (Ground) and Units, B (Ci/sec))
- Magnitude (Ci/Sec Release rates from Dose Assessment Report)
- Form **AND** start and/or stop time, as appropriate.

\_\_\_\_\_ Provide Projection Parameters on ENF Line 15:

- Projection period (forecast period in hours) from Dose Assessment Report.
- Estimated Release Duration by adding forecast period and time elapsed since release began.
- Date and time projection was performed.

**Radiological Assessment Manager Checklist**

\_\_\_\_\_ Provide Projected Dose information on ENF Line 16, by entering "Forecast Data" from Dose Assessment Report.

\_\_\_\_\_ Assist Public Affairs and/or Public Spokesperson with dose comparisons based on computer model or field data.

|   |
|---|
| <p><b>NOTE:</b>    <u><b>IF</b></u> necessary to relieve Duke Energy personnel, environmental surveillance support personnel from the DOE Radiological Assistance Plan may be requested by the Radiological Assessment Manager through the EOF Director. {53}</p> |
|---|

\_\_\_\_\_ **IF** needed, conduct turnover for on-coming shift.

\_\_\_\_\_ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

**Enclosure 6.7**  
**EOF Dose Assessor Checklist**

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INITIAL

**NOTE:** Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

- \_\_\_\_\_ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.
- \_\_\_\_\_ Don position badge.
- \_\_\_\_\_ Obtain copy of AD-EP-ALL-0202, Emergency Response Offsite Dose Assessment.
- \_\_\_\_\_ Initiate log of activities sufficient to conduct a turnover for on-coming shift.
- \_\_\_\_\_ Acquire necessary dose assessment and plant status information.
- \_\_\_\_\_ **IF** data acquisition programs are unavailable, request SDS data from TSC or instrument readings from Control Room (EMF and Met data).

**NOTE:** Be aware of the effects of loss of power on critical EMFs (Catawba and McGuire) or RIAs (Oconee).

- \_\_\_\_\_ Verify operability and validity of EMFs (Catawba and McGuire) or RIAs (Oconee) through the TSC.
- \_\_\_\_\_ **IF** Catawba or McGuire event is in progress, verify effluent discharge alignment with Shift Lab, Radiation Protection Manager (TSC), or Dose Assessors (TSC) as necessary.
- \_\_\_\_\_ **IF** Oconee event is in progress, verify effluent discharge alignment with TSC Dose Assessment Liaison (gas tank), RP Manager (gas tank or liquid releases), or Chemistry Manager in the OSC (liquid releases).

INITIALS \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

**Enclosure 6.7**  
**EOF Dose Assessor Checklist**

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**NOTE:**

- Microsoft Office Communicator is an acceptable communications method.
- Oconee, TSC Dose Assessment Liaison, 9-1-864-873-3705.
- Catawba/McGuire, Dose Assessment Bridge, 9-980-875-4980.

\_\_\_\_\_ Establish communications with dose assessment personnel at TSC. Compare information, projections and strategies with TSC.

\_\_\_\_\_ Obtain Dose Assessor turnover from TSC:

1. Release in progress: No:\_\_\_\_\_ Yes:\_\_\_\_\_

Is occurring\_\_\_\_\_ Has occurred\_\_\_\_\_ Time\_\_\_\_\_

Normal Operating Limits: Below\_\_\_\_\_Above\_\_\_\_\_

2. Recommended Protective Actions:

☐ A No Recommended Protective Actions

☐ B Evacuate\_\_\_\_\_

☐ C Shelter-In-Place\_\_\_\_\_

☐ D Other\_\_\_\_\_

3. Additional pertinent information necessary to continue monitoring of release and dose assessment calculations.

Turnover complete date/time:\_\_\_\_\_

\_\_\_\_\_ Verify operability of Health Physics Network (HPN) phone by placing a call to the NRC using the number listed on HPN phone.

**Enclosure 6.7**  
**EOF Dose Assessor Checklist**

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- NOTE:**
1. The NRC Regional Office will request activation of the HPN phone through Emergency Notification System (ENS) telephone if desired.
  2. Information that may be requested over the HPN line could include, but is not limited to the following:
    - Is there any change to the classification of the event? If so, what is the reason?
    - Have toxic or radiological releases occurred or been projected (including changes in the release rate)?
    - If so, what are the actual or currently projected onsite and offsite releases, and what is the basis for this assessment?
    - What are the health effects or consequences to onsite and offsite people?
    - How many onsite or offsite people are being or will be affected and to what extent?
    - Is the event under control? When was control established, or what is the planned action to bring the event under control?
    - What mitigative actions are currently underway or planned?
    - What onsite protective measures have been taken or are planned?
    - What offsite protective actions are being considered or have been recommended to state and local officials?
    - What are the current meteorological conditions?
    - What are the dose and dose rate readings onsite and offsite? {16}

\_\_\_\_\_ **IF** requested during a drill or actual event, activate HPN phone by calling NRC using number listed on HPN phone.

\_\_\_\_\_ Analyze source-term data, formulate source-term mitigation strategies, and provide information to Radiological Assessment Manager, EOF Staff, and TSC Dose Assessors as required.

\_\_\_\_\_ Perform dose projections as appropriate to plant conditions.

\_\_\_\_\_ Interact with Field Monitoring Coordinator to compare off-site dose projections to actual field readings.

**Enclosure 6.7**  
**EOF Dose Assessor Checklist**

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Page 4 of 4

**NOTE:** Emergency Release data are not required for initial Emergency Notification Forms **OR** notifications of changes in Protective Action Recommendations. {79}

- \_\_\_\_\_ Evaluate dose projections and provide protective action recommendations to Radiological Assessment Manager and EOF Director.
  
- \_\_\_\_\_ **IF** SAMGs are implemented **AND** offsite releases approach or exceed 100mRem TEDE or 500mRem Thyroid CDE, notify EOF SAMG Evaluator (in Accident Assessment Area). (Applicable to Catawba and McGuire). {22}
  
- \_\_\_\_\_ **IF** SAMGs are implemented **AND** offsite releases approach or exceed 1Rem TEDE or 5 Rem Thyroid CDE, notify EOF SAMG Evaluator (in Accident Assessment Area). (Applicable to Catawba and McGuire). {14}
  
- \_\_\_\_\_ **IF** needed, conduct turnover for on-coming shift.
  
- \_\_\_\_\_ Restore equipment to "Ready Status" and notify appropriate personnel of conditions that would cause a less than operational status.
  
- \_\_\_\_\_ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

**Enclosure 6.8**  
**Field Monitoring Coordinator Checklist**

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Page 1 of 2

INITIAL

**NOTE:** Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

\_\_\_\_\_ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

\_\_\_\_\_ Don position badge.

\_\_\_\_\_ Sign in on EOF staffing board.

**NOTE:** Field Teams may be directed by the EOF Field Monitoring Coordinator (FMC) prior to activation of the EOF.

\_\_\_\_\_ Obtain copy of SH/0/B/2005/002, Protocol for the Field Monitoring Coordinator During Emergency Conditions.

\_\_\_\_\_ Establish log of activities sufficient enough to conduct a turnover for on-coming shift.

**NOTE:**

1. For drill or exercise met data, choose appropriate site simulator SDS resource.
2. For real time met data, choose the SDS resource for a specific site and unit.

\_\_\_\_\_ Refer to Procedure Step 3.2 to access SDS.

INITIALS \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

**Field Monitoring Coordinator Checklist**

\_\_\_\_\_ **WHEN** EOF Radio Operator has established communications with field monitoring teams, notify TSC Dose Assessors and provide direction to field monitoring teams. {19}

**Catawba Specific**

Perform duties as described in the following:

- HP/0/B/1009/004, "Environmental Monitoring for Emergency Conditions Within the Ten Mile Radius of CNS"
- HP/0/B/1009/019, "Emergency Radio System Operation, Maintenance, & Communication".

\_\_\_\_\_ **IF** needed, conduct turnover for on-coming shift.

\_\_\_\_\_ Restore equipment to "Ready Status" and notify appropriate personnel of conditions that would cause a less than operational status.

\_\_\_\_\_ Provide all completed procedures and copies of logs to EOF Emergency Planner upon deactivation of EOF.

**Enclosure 6.9**  
**Radio Operator Checklist**

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Page 1 of 1

INITIAL

**NOTE:** Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

- \_\_\_\_\_ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.
- \_\_\_\_\_ Don position badge.
- \_\_\_\_\_ Sign in on EOF staffing board.
- \_\_\_\_\_ Establish log of activities sufficient to conduct turnover for on-coming shift.
- \_\_\_\_\_ Obtain copy of SH/0/B/2005/002 (Protocol for the Field Monitoring Coordinator During Emergency Conditions), Enclosure 5.3 (Field Monitoring Survey data Sheet) and Enclosure 5.4 (Meteorological Update for Field Monitoring Teams). {6}
- \_\_\_\_\_ Establish contact with Field Teams.
- \_\_\_\_\_ Communicate instructions from Field Monitoring Coordinator to Field Teams.
- \_\_\_\_\_ Conduct turnover for on-coming shift, if needed.
- \_\_\_\_\_ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

INITIALS \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

**Enclosure 6.10**  
**EOF Offsite Agency Communicator Checklist**

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Page 1 of 1

INITIAL

**NOTE:** Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

- \_\_\_\_\_ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.
- \_\_\_\_\_ Don position badge.
- \_\_\_\_\_ Sign in on EOF staffing board.
- \_\_\_\_\_ Establish log of activities sufficient to conduct turnover for on-coming shift.
- \_\_\_\_\_ Notify INPO for an Alert, Site Area Emergency, General Emergency, or any event expected to require significant industry support, including the name of the affected site(s) and a name and phone number to call for additional information at one of the following numbers:  
{70}{IER L1-13-10}{81}
  - 9-1-800-321-0614 (Drills Only)
  - 9-1-404-290-3977 (INPO Emergency Director)
  - 9-1-404-290-3980 (INPO Assistant Emergency Director)
- \_\_\_\_\_ **IF** requested:
  - Provide INPO Emergency Director with a brief description of the nature of the event.
  - Identify any equipment or support needed from INPO.
  - Respond when contacted for periodic updates.
- \_\_\_\_\_ Perform duties as described in procedure SR/0/A/2000/004 (Notification to States and Counties from the Emergency Operations Facility).
- \_\_\_\_\_ Ensure emergency notification times are satisfied.
- \_\_\_\_\_ Conduct turnover for on-coming shift, if needed.
- \_\_\_\_\_ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

INITIALS \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

**Enclosure 6.11**  
**EOF Services Administration/Commissary**  
**Checklist {71}**

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Page 1 of 2

**NOTE:** Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

**INITIAL**

- \_\_\_\_\_ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.
- \_\_\_\_\_ Don position badge.
- \_\_\_\_\_ Sign in on White Marker Board in EOF Services Area.
- \_\_\_\_\_ Establish log of activities sufficient to conduct turnover for on-coming shift.
- \_\_\_\_\_ Ensure that the EOF Services Area is set up.
- \_\_\_\_\_ Provide administrative office support and supplies, such as:
  - Office supplies and equipment
  - Secretarial/clerical services
  - Copy center/fax services

**NOTE:** Personnel without badge access will need to be escorted into the EOF by the Assistant EOF Director, EOF Emergency Planner, EOF Services Manager, or their Mentor. { 61 }

- \_\_\_\_\_ Provide for personal needs of ERO, such as:
  - Food and beverage
  - Air travel, hotel, and car rental arrangements
  - Tables and chairs
  - Tents
  - Portable toilets
  - Trash receptacles
- \_\_\_\_\_ **IF** requested, provide in-house craft resources.
- \_\_\_\_\_ **IF** needed, contact additional personnel for support.
- \_\_\_\_\_ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

INITIALS \_\_\_\_\_ PRINTED NAME \_\_\_\_\_

**Enclosure 6.11**  
**EOF Services Administration/Commissary**  
**Checklist {71}**

SR/**0**/A/2000/003  
Page 2 of 2

**EOF FACILITY POST-EVENT CHECKLIST**

\_\_\_\_\_ Secure the EOF Services Area.

\_\_\_\_\_ Restock office supplies.

\_\_\_\_\_ **IF** needed,

- Ensure return of relocated office equipment.
- Notify hotels/motels of release of rooms.
- Assist personnel needing transportation home.
- Notify vendors to pick up furniture and equipment not needed for recovery.

\_\_\_\_\_ Notify vendors to discontinue food services to EOF.

**ACTION LIST FOR CHANGING FROM EMERGENCY TO RECOVERY MODE**

\_\_\_\_\_ Replenish supplies.

\_\_\_\_\_ Determine additional space requirements.

\_\_\_\_\_ Prepare weekly work schedules.

\_\_\_\_\_ Determine hotel/motel accommodations and travel requirements and contact Travel Services for securing these requirements.

\_\_\_\_\_ Notify food vendors to arrange shift operations to support recovery efforts for meals and breaks (snacks) with times and locations for serving.

\_\_\_\_\_ Notify chairs and table suppliers for appropriate needs and quantities.

\_\_\_\_\_ Notify tent suppliers for appropriate needs and quantities.

\_\_\_\_\_ Notify portable toilet suppliers for appropriate needs and quantities.

\_\_\_\_\_ Notify trash receptacle suppliers for appropriate needs and quantities.

\_\_\_\_\_ Establish shift coverage of commissary personnel to support total recovery efforts.

**Enclosure 6.12**  
**Accident Assessment Manager Checklist**

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Page 1 of 3

INITIAL

**NOTE:** Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

\_\_\_\_\_ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

\_\_\_\_\_ Don position badge.

\_\_\_\_\_ Sign in on EOF staffing board.

\_\_\_\_\_ Establish log of activities sufficient to conduct turnover for on-coming shift.

\_\_\_\_\_ **IF** needed to support emergency, request staffing by Reactor Physics.

\_\_\_\_\_ Obtain copy of applicable "Classification of Emergency" procedure.

- Catawba: RP/0/A/5000/001
- McGuire: RP/0/A/5700/000
- Oconee: RP/0/A/1000/001

\_\_\_\_\_ **IF** Oconee is affected, obtain copy of "Oconee Nuclear Site Emergency Action Level Description Guidelines" Manual.

\_\_\_\_\_ Ensure PC is on and displaying plant status.

\_\_\_\_\_ Post changes in Fission Product Barrier status on the Fission Product Barrier Status Board in the EOF Director's Area.

\_\_\_\_\_ Provide I/C number and description for ENF Line 4 to Offsite Agency Communicators.

\_\_\_\_\_ Assist the Radiological Assessment Manager (RAM) in determining Protective Actions using:

- ☐ Enclosure 6.2, Catawba Offsite Protective Actions
- ☐ Enclosure 6.3, McGuire Offsite Protective Actions
- ☐ Enclosure 6.4, Oconee Offsite Protective Actions

**NOTE:** Definitions for ENF Line 8 are in Steps 2.4, 2.5, and 2.6 in the body of this procedure.

\_\_\_\_\_ Provide Event Prognosis for ENF Line 8 to Offsite Agency Communicators. {1} {7}

\_\_\_\_\_ Provide appropriate information for ENF Line 10 to Offsite Agency Communicator.

INITIALS \_\_\_\_\_ PRINTED NAME \_\_\_\_\_

**Enclosure 6.12**  
**Accident Assessment Manager Checklist**

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Page 2 of 3

**NOTE:** The Affected Unit on Line 11 is tied to the I/C on Line 4. Examples may not be all inclusive of events that may affect all units.

\_\_\_\_\_ Provide Affected Unit(s) for ENF Line 11 to Offsite Agency Communicators:

- Evaluate the following for classification for both units (CNS and MNS) or all three units (ONS). {28} {29}
  - Security event
  - Seismic event
  - Tornado on site
  - Hurricane force winds on site
  - Loss of both switch yards
  - Fire in SSF
  - Fire affecting shared safety related equipment
  - Condition A for Keowee Hydro Project Dam/Dike (ONS).
- **IF** event at Catawba or McGuire affects both units equally, check All. {28} {29}
- **IF** event at Oconee affects more than one unit equally, check All.
- **IF** event only affects one (1) unit **OR** one unit has a higher classification, check appropriate unit. {28} {29}

\_\_\_\_\_ Provide Unit Status for ENF Line 12 to Offsite Agency Communicators.

\_\_\_\_\_ **IF** an upgrade in classification occurs, notify Offsite Agency Communicator.

\_\_\_\_\_ Coordinate the following functions:

- Accident Assessment Interface
- Operations Interface
- Reactor Physics (as needed)

**Accident Assessment Manager Checklist**

- \_\_\_\_\_ Prepare for EOF Briefings using Enclosure 6.24 (EOF Briefing Guideline).
- \_\_\_\_\_ Assist TSC Emergency Coordinator as requested upon entry into Severe Accident Management Guidelines (SAMGs).
- \_\_\_\_\_ Conduct turnover for on-coming shift, if needed.
- \_\_\_\_\_ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

**Enclosure 6.13**  
**Accident Assessment Interface Checklist**

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INITIAL

**NOTE:** Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

- \_\_\_\_\_ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.
- \_\_\_\_\_ Don position badge.
- \_\_\_\_\_ Make Accident Assessment Manager aware this position is staffed.
- \_\_\_\_\_ Establish log of activities sufficient enough to conduct turnover for on-coming shift.
- \_\_\_\_\_ Ensure PCs are on and displaying affected station and unit plant status.

**NOTE:** Communications are established after the beep.

- \_\_\_\_\_ Establish bridge line for Operations Loop for affected station:
  - ☐ Catawba: 9-803-701-3994
  - ☐ McGuire: 9-980-875-4500
  - ☐ Oconee: 9-1-864-873-4908
- \_\_\_\_\_ **IF** needed for McGuire, establish communications link with Engineering Manager, 9-980-875-4954.
- \_\_\_\_\_ **IF** Oconee event, establish communications with Operations Interface, 9-1-864-873-3696.
- \_\_\_\_\_ Obtain copy of Classification of Emergency procedure for affected station.
  - ☐ Catawba: RP/0/A/5000/001
  - ☐ McGuire: RP/0/A/5700/000
  - ☐ Oconee: RP/0/A/1000/001

INITIALS \_\_\_\_\_ PRINTED NAME \_\_\_\_\_

## Accident Assessment Interface Checklist

\_\_\_\_\_ Obtain copy of Core Damage Assessment procedure for affected station.

- ☐ Catawba: RP/0/A/5000/015
- ☐ McGuire: RP/0/A/5700/019
- ☐ Oconee: RP/0/B/1000/018.

\_\_\_\_\_ Gather plant status information using Accident Assessment Initial Information Request Form on page 4 or 5 of this enclosure.

\_\_\_\_\_ **IF AT ANY TIME** General Emergency is declared, **RECOMMEND IMMEDIATELY** to Accident Assessment Manager **AND** RAM protective actions using:

- ☐ Enclosure 6.2 - Catawba Offsite Protective Actions
- ☐ Enclosure 6.3 - McGuire Offsite Protective Actions
- ☐ Enclosure 6.4 - Oconee Offsite Protective Actions

\_\_\_\_\_ Perform the following steps as needed throughout event:

\_\_\_\_\_ **IF** condition warrants, determine analysis of reactor core and containment conditions in regard to:

- Core sub-cooling
- Decay heat generation
- Heat removal capabilities (core and containment)
- Fission product release potential (core and containment).

\_\_\_\_\_ **IF** condition warrants, provide:

- Estimates of core uncover times
- Interpretations of reactor water level data.

\_\_\_\_\_ Monitor status of Emergency Operations Procedures (EOPs) and discuss with Accident Assessment Manager.

\_\_\_\_\_ Confer with Radiological Assessment group in EOF.

\_\_\_\_\_ Consult with Operations Interface on anticipated course of events.

\_\_\_\_\_ Update status board in Accident Assessment room.

\_\_\_\_\_ Confer with Accident Assessment Manager on the following:

- Anticipated course of events
- Diagnosis of the accident and mitigation strategies
- Analysis of core and containment
- Core damage and fission product release potential
- Background information of system design
- Emergency classifications.

**Enclosure 6.13**  
**Accident Assessment Interface Checklist**

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Page 3 of 5

- \_\_\_\_\_ Support Engineering Manager in TSC in accident and mitigation strategies.
- \_\_\_\_\_ Assist TSC as an evaluator upon entry into Severe Accident Management Guidelines (SAMG) (as requested).
- \_\_\_\_\_ **IF** McGuire has entered SAMG, **REFER TO** Enclosure 6.20 (Establishing Communications Links between McGuire SAMG Evaluators).
- \_\_\_\_\_ Conduct turnover for on-coming shift, if needed.
- \_\_\_\_\_ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

## Accident Assessment Interface Checklist

## Catawba or McGuire Initial Information Request

| Initial Information Request  | Results |
|--|---------|
|  |         |
| <b>Emergency Classification Status</b>                               |         |
| EAL Declaration Chronology   |         |
| Protective Actions Status  |         |
| <b>Reactor/Turbine Status</b>  |         |
| Power Level  |         |
| Time of Trip & On What Signal  |         |
| Any Abnormal Response  |         |
| NC Pump Status   |         |
| Core Cooling Status (subcooled margin/<br>RVLIS/natural circulation) |         |
| Orange or Red CSFs Alarms Received                                   |         |
| <b>Safety Injection</b>  |         |
| When Actuated & on What Signal                                       |         |
| NV, NI, ND, Ice Condenser Status                                     |         |
| <b>Feedwater</b>   |         |
| CF and CA Status   |         |
| <b>Main Steam</b>  |         |
| Isolation Status   |         |
| SMSV, SM PORV, SB Status   |         |
| <b>Electric Power</b>  |         |
| 600V, 4160V, D/G Status  |         |
| <b>Containment</b>   |         |
| Isolation Status   |         |
| NS and VX Status   |         |
| <b>Security/Fire/Flooding/HAZMAT/Other Hazards</b>                   |         |
| Plant Conditions Status  |         |
| <b>Off-site Releases</b>   |         |
| Status   |         |

## Accident Assessment Interface Checklist

## Oconee Initial Information Request

| Initial Information Request  | Results |
|--|---------|
|  |         |
| <b>Emergency Classification Status</b>                               |         |
| EAL Declaration Chronology   |         |
| Protective Actions Status  |         |
| <b>Reactor/Turbine Status</b>  |         |
| Power Level  |         |
| Time of Trip & On What Signal  |         |
| Any Abnormal Response  |         |
| Reactor Coolant Pump Status  |         |
| Core Cooling Status (subcooled margin/<br>RVLIS/natural circulation) |         |
| <b>Safety Injection</b>  |         |
| When Actuated & on What Signal                                       |         |
| HPI, LPI Status  |         |
| <b>Feedwater</b>   |         |
| Feedwater and Emergency Feedwater Status                             |         |
| <b>Main Steam</b>  |         |
| Isolation Status   |         |
| MSSV Status  |         |
| <b>Electric Power</b>  |         |
| 600V, 4160V, Keowee, Lee Status                                      |         |
| <b>Containment</b>   |         |
| Isolation Status   |         |
| RBS, RBCU Status   |         |
| <b>Security/Fire/Flooding/HAZMAT/Other Hazards</b>                   |         |
| Plant Conditions Status (Keowee Hydro Dam<br>status)                 |         |
| <b>Off-site Releases</b>   |         |
| Status   |         |

**Enclosure 6.14**  
**Operations Interface Checklist**

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INITIAL \_\_\_\_\_

|   |
|---|
| <b>NOTE:</b> This enclosure does not apply to Oconee. |
|---|

|   |
|---|
| <b>NOTE:</b> Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable. |
|---|

- \_\_\_\_\_ **I**f reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.
- \_\_\_\_\_ Don position badge.
- \_\_\_\_\_ Sign in on EOF staffing board.
- \_\_\_\_\_ Establish log of activities sufficient to conduct turnover for on-coming shift.
- \_\_\_\_\_ Perform following steps as needed throughout event:
  - \_\_\_\_\_ Provide communications interface between Accident Assessment Group and TSC Operations Group.
  - \_\_\_\_\_ Advise Accident Assessment Group on the following:
    - Emergency Operations Procedures (EOPs)
    - Diagnosis of accident and mitigation strategies
    - Emergency classification.
  - \_\_\_\_\_ Advise TSC of anticipated course of events.
- \_\_\_\_\_ Conduct turnover for on-coming shift, if needed.
- \_\_\_\_\_ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

INITIALS \_\_\_\_\_ PRINTED NAME \_\_\_\_\_

**Enclosure 6.15**  
**Reactor Physics Checklist**

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INITIAL

**NOTE:** Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

- \_\_\_\_\_ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.
- \_\_\_\_\_ Don position badge.
- \_\_\_\_\_ Sign in on EOF staffing board.
- \_\_\_\_\_ Establish log of activities sufficient to conduct turnover for on-coming shift.
- \_\_\_\_\_ Obtain any applicable nuclear design calculations from Nuclear Engineering office area.
- \_\_\_\_\_ Establish communications with TSC Reactor Engineer.
- \_\_\_\_\_ **IF** conditions warrant, determine analysis of reactor core and fuel with respect to:
  - Reactor Physics parameters
  - Core subcriticality.
- \_\_\_\_\_ Provide Accident Assessment Manager with information concerning any abnormal core conditions.
- \_\_\_\_\_ Conduct turnover for on-coming shift, if needed.
- \_\_\_\_\_ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

INITIALS \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

**Enclosure 6.16**  
**Emergency Planner Checklist**

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Page 1 of 13

INITIAL

**NOTE:** Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

- \_\_\_\_\_ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.
- \_\_\_\_\_ Don position badge.
- \_\_\_\_\_ Sign in on EOF staffing board.
- \_\_\_\_\_ Establish log of activities sufficient to conduct turnover for on-coming shift.
- \_\_\_\_\_ Log in to Emergency Planner computer.
- \_\_\_\_\_ (MNS and CNS only) Obtain Emergency Planner wireless phone and headset from Emergency Planner Desk area and access EP bridge line, 9-803-701-4010.

**NOTE:** Have on hand all emergency notification forms (ENFs) transmitted to state and local agencies up to this time. Be prepared to answer questions concerning information on the ENFs as well as any other information requested by ECOC Director when called back. {21}

- \_\_\_\_\_ Contact the Enterprise Crisis Operations Center (ECOC) Director by email at [ECOCDirectors@duke-energy.com](mailto:ECOCDirectors@duke-energy.com) **OR** by phoning the Enterprise Security Console at 2-8851 or 9-1-800-943-7584, ask them to contact the ECOC Director about the EOF activation, and provide your call back number.{IER L1-13-10}{77}

**NOTE:** Personnel without badge access will need to be escorted into the EOF by the Assistant EOF Director, EOF Emergency Planner, EOF Services Manager, or their Mentor. {61}

- \_\_\_\_\_ Support EOF Director with the following:
  - \_\_\_\_\_ Provide escorted access to EOF for personnel without badge access. {61}
  - \_\_\_\_\_ Document names of personnel escorted in log. {73}
  - \_\_\_\_\_ Complete EOF Director Checklist items as requested.
  - \_\_\_\_\_ Clarify Emergency Plan and Emergency Plan Implementing Procedure information.
  - \_\_\_\_\_ Interface with federal, state and local agencies.
- \_\_\_\_\_ Assist Off-Site Agency Communicators in preparation of emergency notifications.

INITIALS \_\_\_\_\_ PRINTED NAME \_\_\_\_\_

**Enclosure 6.16**  
**Emergency Planner Checklist**

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- \_\_\_\_\_ **IF** a security event at MNS requires assembling MNS TSC/OSC ERO at EOF, complete "MNS Security Event, TSC/OSC Assembled at EOF Checklist," page 11 of 13 of this enclosure.
- \_\_\_\_\_ **IF** a Beyond Design Basis External Event (BDBEE) or Extended Loss of Offsite AC Power (ELAP) event at MNS requires assembling TSC/OSC ERO at the EOF, complete "MNS BDBEE/ELAP, TSC/OSC Assembled at EOF Checklist," page 11 of 13 of this enclosure. {76}
- \_\_\_\_\_ **IF** a security event at CNS requires assembling the duty CNS TSC ERO at the EOF, complete "CNS Security Event, TSC ERO Assembled at EOF Checklist," page 12 of 13 of this enclosure. {41}

**NOTE:** 1. EOF Duty Roster is available on DAE using Nuclear Generation Duty Roster application. EOF information is under General Office location. {51}

2. Consider hours previously worked prior to ERO activation in determining shift turnover schedules for 24-hour staffing. {69}

- \_\_\_\_\_ Complete 24-Hour Staffing Log for each EOF position, pages 4 through 9 of this enclosure.
- \_\_\_\_\_ Ensure that 24-hour staffing plans are established and maintained for all EOF positions for the duration of the entire emergency. {IER L1-13-10}
- \_\_\_\_\_ **IF** EPZ roadblocks have been established, prepare for emergency worker re-entry using page 12 of this enclosure.
- \_\_\_\_\_ Verify Public Affairs personnel have considered 24-hour staffing by calling the JIC Admin. Manager at 2-0548.
- \_\_\_\_\_ Record EOF Exercise/Drill/Event Duke Energy employee participation as follows:
  - ☐ **IF** scheduled drill, activate eRoster program and scan **OR** enter Duke Energy employee ID number.
  - ☐ **IF** not a scheduled drill **OR** scanner-inoperable, request participants sign Exercise/Drill/Event/Training Attendance Sheet. {61}

**Enclosure 6.16**  
**Emergency Planner Checklist**

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- \_\_\_\_\_ Request Duke Energy participants sign Drill and Event Participation Roster (AD-EP-ALL-0802, Conducting Drills and Exercises, Attachment 4, Drill and Event Participation Roster). {61}
- \_\_\_\_\_ Conduct turnover for on-coming shift, if needed.
- \_\_\_\_\_ Upon deactivation of the EOF, forward a copy of the Drill and Event Participation Roster (AD-EP-ALL-0802, Conducting Drills and Exercises, Attachment 4, Drill and Event Participation Roster) to each DEC site's Emergency Preparedness Manager.
- \_\_\_\_\_ Upon deactivation of EOF, collect all completed paperwork and forward to appropriate Emergency Preparedness Manager.
- \_\_\_\_\_ Upon deactivation of EOF, complete "EOF Post Event Checklist," page 10 of this enclosure.

**Enclosure 6.16**  
**Emergency Planner Checklist**

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**EOF DIRECTOR AREA**

**24-HOUR POSITION EOF STAFFING LOG {33}**

|                                    | <b>Primary</b> |                            | <b>Relief</b> |                            |
|------------------------------------|----------------|----------------------------|---------------|----------------------------|
| <b>Position</b>                    | <b>Name</b>    | <b>*Shift<br/>Schedule</b> | <b>Name</b>   | <b>*Shift<br/>Schedule</b> |
| EOF Director                       |                |                            |               |                            |
| Assistant EOF Director             |                |                            |               |                            |
| EOF<br>Log Recorder                |                |                            |               |                            |
| EOF<br>Emergency Planner           |                |                            |               |                            |
| Radiological Assessment<br>Manager |                |                            |               |                            |
| Accident Assessment<br>Manager     |                |                            |               |                            |
|                                    |                |                            |               |                            |

\* List hours of coverage: i.e., 0800-2000, or 8am -8pm.

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**DOSE ASSESSMENT AREA**  
**24-HOUR POSITION EOF STAFFING LOG**

|                                 | <b>Primary</b> |                            | <b>Relief</b> |                            |
|---------------------------------|----------------|----------------------------|---------------|----------------------------|
| <b>Position</b>                 | <b>Name</b>    | <b>*Shift<br/>Schedule</b> | <b>Name</b>   | <b>*Shift<br/>Schedule</b> |
| EOF<br>Dose Assessor            |                |                            |               |                            |
| EOF<br>Dose Assessor            |                |                            |               |                            |
| EOF<br>Dose Assessor            |                |                            |               |                            |
| EOF Dose<br>Assessor (HPN)      |                |                            |               |                            |
| Field Monitoring<br>Coordinator |                |                            |               |                            |
| Radio<br>Operator               |                |                            |               |                            |
|                                 |                |                            |               |                            |

\* List hours of coverage: i.e., 0800-2000, or 8am -8pm.

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**ACCIDENT ASSESSMENT AREA**

**24-HOUR POSITION EOF STAFFING LOG**

|   | <b>Primary</b> |                            | <b>Relief</b> |                            |
|---|----------------|----------------------------|---------------|----------------------------|
| <b>Position</b>                               | <b>Name</b>    | <b>*Shift<br/>Schedule</b> | <b>Name</b>   | <b>*Shift<br/>Schedule</b> |
| Accident Assessment<br>Interface              |                |                            |               |                            |
| Reactor Physics<br>(As Needed)                |                |                            |               |                            |
| Operations<br>Interface<br>(MNS and CNS only) |                |                            |               |                            |

\* List hours of coverage: i.e., 0800-2000, or 8am -8pm.

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**Emergency Planner Checklist**

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**OFFSITE AGENCY COMMUNICATOR**  
**24-HOUR POSITION EOF STAFFING LOG**

|   | <b>Primary</b> |                            | <b>Relief</b> |                            |
|---|----------------|----------------------------|---------------|----------------------------|
| <b>Position</b>                             | <b>Name</b>    | <b>*Shift<br/>Schedule</b> | <b>Name</b>   | <b>*Shift<br/>Schedule</b> |
| Lead EOF Off-Site<br>Agency<br>Communicator |                |                            |               |                            |
| EOF Off-Site Agency<br>Communicator         |                |                            |               |                            |
| EOF Off-Site Agency<br>Communicator         |                |                            |               |                            |
|   |                |                            |               |                            |

\* List hours of coverage: i.e., 0800-2000, or 8am -8pm.

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**EOF SERVICES AREA**

**24-HOUR POSITION EOF STAFFING LOG**

|                                  | <b>Primary</b> |                            | <b>Relief</b> |                            |
|----------------------------------|----------------|----------------------------|---------------|----------------------------|
| <b>Position</b>                  | <b>Name</b>    | <b>*Shift<br/>Schedule</b> | <b>Name</b>   | <b>*Shift<br/>Schedule</b> |
| EOF Services<br>Manager          |                |                            |               |                            |
| EOF Services<br>Admin/Commissary |                |                            |               |                            |
| EOF Data<br>Coordinator          |                |                            |               |                            |

\* List hours of coverage: i.e., 0800-2000, or 8am -8pm.

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[illegible]

**Enclosure 6.16**  
**Emergency Planner Checklist**

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**EOF FACILITY POST EVENT CHECKLIST**

\_\_\_\_\_ Obtain copy of TSC/EOF Log Printout.

\_\_\_\_\_ Retrieve:

- Completed Procedures
- Notes
- Log Sheets

\_\_\_\_\_ Turn off:

- Video monitors
- Projectors

**NOTE:** EOF Services completes Enclosures 13.4 and 13.5 from procedure ST/0/A/4600/086.

- \_\_\_\_\_ Complete applicable enclosures of ST/0/A/4600/086 to replenish procedure inventories
- \_\_\_\_\_ Clean tables off
- \_\_\_\_\_ Put all trash in containers
- \_\_\_\_\_ Erase status boards
- \_\_\_\_\_ Verify all Fax machines have paper supply replenished
- \_\_\_\_\_ Verify all printers have paper supply replenished.
- \_\_\_\_\_ Verify cordless phones are left in cradles to be charged.

Replenish Position Specific Notebooks (1 copy of procedure body and minimum 3 copies of applicable enclosures, checklists and log sheets):

- \_\_\_\_\_ EOF Director (also include minimum 3 copies each of Enclosure 6.2, 6.3 and 6.4)
- \_\_\_\_\_ Radiological Assessment Manager (also include minimum 3 copies each of Enclosures 6.2, 6.3, and 6.4). {24}
- \_\_\_\_\_ EOF Dose Assessor
- \_\_\_\_\_ Field Monitoring Coordinator
- \_\_\_\_\_ Radio Operator
- \_\_\_\_\_ EOF Offsite Agency Communicator (also include 1 copy of EP FAM 3.15 Attachment 3.15.3.3)
  
- \_\_\_\_\_ Accident Assessment Manager (also include minimum 3 copies each of Enclosures 6.2, 6.3, and 6.4). {24}
- \_\_\_\_\_ Accident Assessment Interface
- \_\_\_\_\_ EOF Operations Interface
- \_\_\_\_\_ Reactor Physics
- \_\_\_\_\_ EOF Emergency Planner
- \_\_\_\_\_ EOF Log Recorder (also include 1 copy of EP FAM 3.15 Attachment 3.15.3.2)
- \_\_\_\_\_ EOF Data Coordinator
- \_\_\_\_\_ EOF Services Manager

**Enclosure 6.16**  
**Emergency Planner Checklist**

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**MNS SECURITY EVENT, TSC/OSC ASSEMBLED AT EOF CHECKLIST**

- \_\_\_\_\_ Notify Energy Center Building Security, 2-1234, that TSC/OSC offsite responders are assembling at EOF. {61}
- \_\_\_\_\_ Request that TSC/OSC responders assemble in EOF break area.
- \_\_\_\_\_ Coordinate selection of first response team that will activate TSC/OSC when Security Event is terminated.
- \_\_\_\_\_ Move first response team into EOF work area to obtain plant status and recovery strategies.
- \_\_\_\_\_ **IF** needed, obtain copies of RP/0/A/5700/012, Activation of the Technical Support Center, (TSC) and RP/0/A/5700/020, Activation of the Operations Support Center (OSC), from the McGuire procedure cabinet.
- \_\_\_\_\_ Determine 24-hour staffing for each TSC/OSC position.
- \_\_\_\_\_ **IF** EOF break area is too crowded, determine whether to send TSC/OSC relief members to Energy Center Cafeteria.
- \_\_\_\_\_ **WHEN** Security Event is terminated and onsite TSC/OSC is to be activated, ensure that first response team to TSC/OSC is briefed prior to dispatch to site.
- \_\_\_\_\_ Send relief TSC/OSC members home, if possible, with their assigned relief time.

**MNS BDBEE/ELAP EVENT, TSC/OSC ASSEMBLED AT EOF CHECKLIST {76}**

- \_\_\_\_\_ Notify Energy Center Building Security at 2-1234 that TSC/OSC offsite responders are assembling at EOF.
- \_\_\_\_\_ Request that TSC/OSC responders assemble in EOF break area.
- \_\_\_\_\_ Assist TSC Emergency Planner in establishing priorities for transport of MNS ERO personnel to the site.
- \_\_\_\_\_ Assist TSC Emergency Planner in determining 24-hour staffing for each TSC/OSC and alternate TSC/OSC position.
- \_\_\_\_\_ **IF** needed, obtain copies of RP/0/A/5700/012, Activation of the Technical Support Center, (TSC) and RP/0/A/5700/020, Activation of the Operations Support Center (OSC), from the McGuire procedure cabinet.
- \_\_\_\_\_ **IF** EOF break area is too crowded, determine whether to send TSC/OSC relief members to Energy Center Cafeteria.

**Enclosure 6.16**  
**Emergency Planner Checklist**

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**CNS SECURITY EVENT, TSC ERO ASSEMBLED AT EOF CHECKLIST**

- \_\_\_\_\_ Notify Energy Center Building Security, 2-1234, that CNS TSC duty responders are assembling at EOF. {61}
  
- \_\_\_\_\_ Have CNS TSC responders assemble in EOF break area.
  
- \_\_\_\_\_ Obtain RP/0/A/5000/020 Enclosure 4.20 from CNS procedure cabinet and distribute to assembled TSC ERO.
  
- \_\_\_\_\_ **IF** CNS TSC Emergency Planner does not respond within 75 minutes of declaration, assist Assistant TSC Emergency Coordinator with assigned tasks.
  
- \_\_\_\_\_ **WHEN** decision is made to access Catawba and staff the TSC and OSC, ensure choice of facility (normal or alternate) TSC and OSC is known prior to TSC staff departure. {41}

EMERGENCY WORKER/SPECIAL EQUIPMENT RE-ENTRY AFTER ROAD BLOCKS ARE  
ESTABLISHED IN THE EPZ

**NOTE:** TSC Emergency Planner is to work with RP to determine if off going shift will need to leave their personnel vehicles onsite and leave in the relief bus.

- 1.0 **IF** roadblocks are in place in 10 mile EPZ **AND** affected site's Emergency Planner has asked the EOF to prepare for emergency worker re-entry for on site relief, perform the following:
  - 1.1 Request EOF Services Manager obtain bus(es) to be used for re-entry of relief workers.
  - 1.2 Coordinate with TSC Emergency Planner to verify re-entry path to be used, working with Field Monitoring Coordinator and Radiological Assessment Manager to ensure the path selected avoids the plume foot print.
  - 1.3 Coordinate with State representative at EOF to contact re-entry county EOC to obtain Highway Patrol escorts for bus.
  - 1.4 Ensure State representative requests county EOC to notify roadblock selected for re-entry with Estimated Time of Arrival for the bus(es) with Highway Patrol escort.
- 2.0 **IF** roadblocks are **NOT** established, inform TSC Emergency Planner access will be normal.
- 3.0 **IF** roadblocks are in place when special equipment is to be brought to plant, use process in step 1.0 for equipment to pass through roadblock.

**Enclosure 6.17**  
**EOF Log Recorder Checklist**

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**NOTE:** Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

INITIAL

- \_\_\_\_\_ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.
- \_\_\_\_\_ Don position badge.
- \_\_\_\_\_ Sign in on EOF staffing board.

**NOTE:** On the Log Recorder's PC, the PC Screen is Screen 2. The left projector is Screen 1 and the right projector is Screen 3.

- \_\_\_\_\_ Ensure PC is on.
- \_\_\_\_\_ Ensure Projectors are powered up.
- \_\_\_\_\_ Refer to EP FAM Section 3.15, Attachment 3.15.3.2, for WebEOC Logging instructions.

**NOTE:** Applications viewed on the three main display screens in the EOF can be controlled by the Log Recorder's PC. The Log Recorder's PC normally controls the left and right projectors only; the Communicator's PC normally controls the center projector. The Log Recorder's PC is designated as Computer 1 and the Communicator's PC is designated as Computer 2.

\_\_\_\_\_ Setup EOF Director's Area displays as follows:

- **Left Projector** - Facility Log (Remains on Comp 1, PC Screen 1)
- **Center Projector** - Swap projector to Comp 2 (Communicator's Notification Form)
- **Right Projector** - SDS (Remains on Comp 1, PC Screen 3)
  - Launch application from DAE. Application will launch on Log Recorder's monitor.
  - If application opens full screen, click Restore Down button, located to the right of the minimize button.
  - Click top of application screen and hold left mouse button down.
  - Drag application to desired screen.
  - Maximize application.

INITIALS \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

**Enclosure 6.17**  
**EOF Log Recorder Checklist**

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- NOTE:**
1. Incorrect log entries may be corrected by making the needed correction for the specific entry and flagging it as a "corrected item".
  2. The EOF Log Recorder should enter EOF specific information and other information as directed by the EOF Director or Assistant EOF Director.
  3. Log activities must be detailed enough to "tell the story" if necessary to reconstruct events for the NRC and to have an effective turnover to EOF staff.

\_\_\_\_\_ Establish official log of all significant EOF activities and EOF Director decisions using WebEOC computer program sufficient to conduct turnover for the on-coming shift.

\_\_\_\_\_ Log entries should include, but are not limited to, the following examples:

- EOF Director and any change in EOF Director (staffing)
- Time of EOF activation
- Emergency classification, changes in classification, time of declaration
- Protective Action Recommendations
- Approval/transmittal of Emergency Notification Forms
- Approval/distribution of News Releases
- Plant Conditions (Unit 1, 2, and 3):
  - Core Cooling information (i.e., Time To Boiling, etc.)
  - Safety Systems Degraded
  - Power Supply Status
  - Fission Product Barrier Degradation
  - Radiation Releases.
- Procedures in effect and any transition to another procedure
- Actions taken that are not part of an approved procedure
- Any abnormal or unexpected plant response
- Major equipment manipulations
- Major mitigation actions taken
- Site assembly, relocation, or evacuation of all or any part of the plant
- Personnel Injuries
- Facility priorities
- Recovery Action(s) in Progress
- Summary of facilities briefings
- Expected time of next Time-Out
- Any parameter that shows how drill/event is managed (ex. releases, time, communication)

\_\_\_\_\_ **IF** WebEOC computer program is not available, establish manual log of all significant EOF activities and EOF Director decisions.

**Enclosure 6.17**  
**EOF Log Recorder Checklist**

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- \_\_\_\_\_ **IF** requested by EOF Director, prepare sequence of events list and revise it as necessary.
- \_\_\_\_\_ Maintain EOF Director's Area displays and status boards as directed or needed.
- \_\_\_\_\_ Record established priorities on EOF status board as requested by EOF Director.
- \_\_\_\_\_ Conduct turnover for on-coming shift, if needed.
- \_\_\_\_\_ Print copy of TSC/EOF Log Printout.
- \_\_\_\_\_ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

**Enclosure 6.18**  
**EOF Data Coordinator Checklist**

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**NOTE:** Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

**INITIAL**

\_\_\_\_\_ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.

\_\_\_\_\_ Don position badge.

\_\_\_\_\_ Sign in on EOF staffing board.

\_\_\_\_\_ Establish log of activities sufficient to conduct turnover for on-coming shift.

\_\_\_\_\_ Verify EOF computer hardware, software, and data display equipment is operational per EP FAM 3.8, EOF Data Coordinator's Reference Manual.

\_\_\_\_\_ Provide computer support as required:

- Software and hardware applications support
- Data acquisition support
- Communication with TSC Data Coordinator

\_\_\_\_\_ **IF** another site declares an emergency requiring activation of the EOF for support, obtain three additional computers (laptop or PC) within one hour for use by Accident Assessment Manager, Radiological Assessment Manager, and Offsite Agency Communicators. {62}.

\_\_\_\_\_ Conduct turnover for on-coming shift, if needed.

\_\_\_\_\_ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

INITIALS \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

**Enclosure 6.19**  
**EOF Services Manager Checklist**

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**NOTE:** Steps in this checklist may be performed in any order appropriate to the specific event conditions or they may be omitted if not applicable.

**INITIAL**

- \_\_\_\_\_ **IF** reporting to EOF outside your normal work hours, complete a Fitness for Duty Questionnaire.
- \_\_\_\_\_ Don position badge.
- \_\_\_\_\_ Sign in on EOF staffing board.
- \_\_\_\_\_ Activate the EOF Services Function by establishing duty function contacts for EOF service areas and post in EOF Service area:
  - Administration/Commissary
  - Communications (24-hour number is 2-1961)
  - Transportation Services
  - Risk Management and Insurance
  - Procurement
  
- \_\_\_\_\_ Establish log of activities sufficient to conduct turnover for on-coming shift.
- \_\_\_\_\_ Provide general administrative support and office supplies.
- \_\_\_\_\_ Ensure office equipment is functioning properly.

**NOTE:** Personnel without badge access will need to be escorted into the EOF by the Assistant EOF Director, EOF Emergency Planner, EOF Services Manager, or their Mentor. {61}

- \_\_\_\_\_ **IF** needed, provide escorted access to EOF for personnel without badge access, and document names of personnel escorted in log. {62, 73}
  
- \_\_\_\_\_ Provide food and beverages to meet nutritional needs.
  
- \_\_\_\_\_ Provide facilities to meet personal needs (dining facilities, toilets, trash receptacles and disposal) as required.

INITIALS \_\_\_\_\_ PRINTED NAME \_\_\_\_\_

**Enclosure 6.19**  
**EOF Services Manager Checklist**

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- NOTE:**
1. The INPO phone number may be obtained from the Consolidated Emergency Phone Directory for the Emergency Operations Facility (EOF).
  2. The INPO Emergency Resources Manual provides a list of contacts at each US commercial nuclear power site, and an emergency equipment list. The INPO Emergency Resources Manual can be found on the INPO Website or the bookcase in the EOF Director's Area.

\_\_\_\_\_ **IF** needed, perform the following:

- Request Communications to troubleshoot and repair telephone systems, mobile radios and cell phones.
- Request Transportation Services or others arrange for necessary equipment for movement of materials and personnel.
- Request Transportation Services or others to arrange necessary equipment and personnel for debris removal in order to access the DEC nuclear sites. {IER L1-11-14}
- Obtain accommodations for personnel.
- Request Risk Management and Insurance serve as liaison between Duke Energy and insurance companies in gathering data and establishing claims offices to disburse emergency assistance funds to evacuees.
- Request Procurement coordinate all activities related to the purchase of materials, equipment and services from outside supplies including arranging for transportation and receiving as required.
- Contact INPO for additional resources (human resources, emergency equipment, technical expertise). {75}{IER L1-13-10}
- **IF** a Beyond Design Basis External Event (BDBEE)/Extended Loss of Offsite AC Power (ELAP) event at MNS, request Transportation Services implement the MNS BDBEE/ELAP ERO Transportation Plan insert to the Fleet Storm EOF Manual. {76}

\_\_\_\_\_ **IF** 24-hour staffing is required,

- Notify additional personnel and arrange schedule for continuous support.
- Conduct turnover for on-coming shift.

\_\_\_\_\_ Ensure that all trash and left over food products are properly contained and arrange for disposal.

\_\_\_\_\_ Notify Facility Services to clean the EOF following deactivation.

\_\_\_\_\_ Obtain Procedure ST/0/A/4600/086, Standard Procedure for Periodic Verification of Communication Equipment Operation and Equipment/Supply Inventory, Enclosures 13.4 and 13.5 and complete checklists.

\_\_\_\_\_ Provide all completed paperwork to Emergency Preparedness upon deactivation of EOF.

\_\_\_\_\_ Notify duty functions contacts advising that the drill/event has been terminated.

**Enclosure 6.19**  
**EOF Services Manager Checklist**

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\_\_\_\_\_ **IF** needed, perform the following:

- Request Communications secure radio base stations.
- Request Communications return portable communications equipment to storage locations.
- Request Procurement transfer information on outstanding requisitions to normal procurement contacts.
- Request Transportation Services return relocated equipment to original location.
- Request Transportation Services provide transportation home for ERO personnel.
- Request Risk Management and Insurance notify insurance companies of change in drill/event status.

**ESTABLISHING COMMUNICATIONS  
LINKS BETWEEN MCGUIRE SAMG  
EVALUATORS**

INITIAL

**NOTE:** Operations Procedure Support in the TSC will serve as the lead SAMG evaluator and will be assisted by Reactor Engineer and Systems Engineer in the TSC, as well as Accident Assessment Interface in the EOF. OPS Procedure Support is expected to **direct** the other evaluators in what they should be looking at strategically, **plus** ensure that SAEG-1 is completed appropriately as directed by the guidelines.

\_\_\_\_\_ **ESTABLISH** communications links between the SAMG evaluators (TSC OPS Procedure Support, TSC Reactor Engineer, TSC System Engineering Manager, and EOF Accident Assessment Interface) by dialing RP spare bridge 9-980-875-4833 (6-party bridge line).

\_\_\_\_\_ **EVALUATE** using an alternate bridge line listed below if for some reason the RP spare bridge is unavailable or if other communications links are desired or needed. Dial the number listed as desired to determine if that bridge is currently being used. If the desired bridge line is not being used, then the appropriate parties may dial in to use it.

EP Controller bridge (12 - party) 9-980-875-4575

McGuire site bridge (6 - party) 9-980-875-3030

McGuire site bridge (6 - party) 9-980-875-3200

INITIALS \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

## 1. Recovery Guidelines

The Recovery Manager shall be responsible for the following:

- ☐ 1.1 Initiate RP/0/B/1000/027, Reentry Recovery Procedure.
- ☐ 1.2 Announce as follows:

"Agreement has been reached between Duke Energy, the State of South Carolina and the NRC that the General Emergency classification is terminated. Recovery Operations are being initiated at the site. Actions are underway to determine when people who have been evacuated from their homes can return. As this information is made available, it will be released to the public."

**NOTE:** The offsite recovery organization will stay at the EOF and work with the counties and state if radiological Conditions exist beyond the ONS site boundary. The onsite recovery organization will be established by the Emergency Coordinator.

- ☐ 1.3 Establish Recovery Organization to handle offsite consequences.
- ☐ 1.4 Make the following assignments:
  - Recovery Manager \_\_\_\_\_
  - Radiological Assessment Manager \_\_\_\_\_
  - Field Monitoring Coordinator \_\_\_\_\_
  - Emergency Preparedness Manager \_\_\_\_\_
  - EOF Services Manager \_\_\_\_\_
- ☐ 1.5 Ensure staffing for long-term operation.

**NOTE:** Once recovery has been determined, the emergency notification message forms are no longer used.

- ☐ 1.6 Confer with SEMD (State Emergency Management Director) regarding work in progress at EOF and determine communication channels and notifications expected.

INITIALS \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

**Enclosure 6.21**  
**Oconee Recovery**

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- ☐ 1.7 Consult with each manager regarding activities in progress.
  - ☐ 1.7.1 Radiological Assessment Responsibilities
    - Provide ingestion pathway dose assessments
    - Provide ongoing communications with DHEC Nuclear Emergency Preparedness
    - Evaluate environmental concentrations within the radiological footprint
    - Provide technical assistance to Joint Information Center
    - Help plan for reactor building purge as needed
  - ☐ 1.7.2 Emergency Preparedness Responsibilities
    - Communications to the State and County Management Directors
  - ☐ 1.7.3. EOF Services Manager Responsibilities
    - Ensure ANI (insurance) is set up for public inquiry
    - Provide services as required
  - ☐ 1.7.4. Joint Information Center Responsibilities
    - Providing news releases
    - Work with media/public to reduce rumors
    - Monitoring information being released by news media
- ☐ 1.8 Maintain Emergency Operations Facility activated and staffed until consensus is reached by Duke Energy and State of South Carolina there is no basis for continuous staffing.
  - ☐ 1.8.1 Record time and date that Emergency Operations Facility/Joint Information Center were closed.
    - A. EOF/JIC Closed \_\_\_\_\_  
Time/Date

**Enclosure 6.22**  
**Keowee Hydro Project Dams/Dikes**  
**Condition A/B Descriptions**

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- NOTE:**
- Duke Energy Hydro Group personnel are responsible for evaluation/inspection of Keowee Hydro Project Dams/Dikes **AND** determining if a Condition A or B exists.
  - Duke Energy Hydro Group personnel will communicate the results of evaluations/inspections to the Keowee Hydro Operator. The Keowee Hydro Operator will notify the OSM.

**1. Condition A - Failure is Imminent or has occurred**

A failure at the dam has occurred or is about to occur and minutes to days may be allowed to respond dependent upon the proximity to the dam. Response includes the immediate movement of downstream residents to higher ground. State and local governments will be notified. (Duke Energy Hydro-Electric Plant EAP)

INITIALS \_\_\_\_\_

PRINTED NAME \_\_\_\_\_

**Keowee Hydro Project Dams/Dikes  
Condition A/B Descriptions**

## **2. Condition B - Potentially Hazardous Situation is Developing**

A situation where failure may develop, but preplanned actions taken during certain events (such as major floods, earthquakes, evidence of piping) may prevent or mitigate failure. The potentially hazardous situation may allow days or weeks for response and time to take remedial action. (Duke Energy Hydro-Electric Plant EAP)

The following situations will result in a Condition B determination/declaration:

- Reservoir elevation at Keowee Hydro Station is  $\geq 805.0$  ft msl with all spillway gates open and lake elevation continuing to rise.
- Situations involving earth dam or abutments as follows:
  - a) Large increase or decrease in seepage readings OR seepage water is carrying a significant amount of soil particles;
  - b) New area of seepage or wetness, with large amounts of seepage water observed on dam, dam toe, or the abutments;
  - c) A slide or other movement of the dam or abutments which could develop into a failure.
- Developing failure involving the powerhouse or appurtenance structures is highly irregular to the point where the operator feels safety of the structures is questionable.
- Developing failure involving the concrete spillway or bulkhead is unusual and the safety of the structure is questionable.
- Any other situation involving plant structures which shows the potential for a developing failure.

## EOF Evacuation Checklist {54} {59}

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\_\_\_\_\_ **IF** conditions **DO NOT** allow for a controlled relocation of the facility, perform immediate actions to protect personnel.

- A. Notify personnel to re-assemble
  - Mint Street Parking Deck (Primary)
  - Firebird Statue in front of Bechtler Museum (Alternate) {80}
- B. Notify the TSC Emergency Coordinator of actions taken
  - Catawba 803-701-5870
  - McGuire 980-875-4950
  - Oconee 864-873-3921 {80}

\_\_\_\_\_ **IF** conditions allow for a controlled relocation of the facility, determine alternate EOF location:

- ☐ Catawba Event - McGuire Alternate TSC
- ☐ McGuire Event - Catawba Alternate TSC
- ☐ Oconee Event - Catawba Alternate TSC

\_\_\_\_\_ Request EOF Emergency Planner to obtain the following:

- 24-Hour Position EOF Staffing Log
- EOF Business Continuity Plan
- Catawba, McGuire, and Oconee Emergency Telephone Directories
- ERO Member Contact Information notebook {74}

\_\_\_\_\_ Announce to EOF personnel to exit EOF and move to assembly area with all their procedures and paperwork.

- Mint Street Parking Deck (Primary)
- Firebird Statue in front of Bechtler Museum (Alternate){80}

\_\_\_\_\_ Consider the need to escort NRC and offsite agency personnel from EOF to alternate EOF. {74}

\_\_\_\_\_ Turn over command and control of event to TSC Emergency Coordinator.

- Notify TSC Emergency Coordinator that EOF is evacuating due to (state reason)
  - Catawba 803-701-5870
  - McGuire 980-875-4950
  - Oconee 864-873-3921 {80}
- Provide TSC Emergency Coordinator current emergency classification and EAL number, current Protective Action Recommendations, and status of Emergency Notifications: Message number \_\_\_\_\_ due at \_\_\_\_\_

\_\_\_\_\_ Request the EOF Emergency Planner call the TSC Emergency Planner to request he call the unaffected site's control room and make them aware of the EOF relocation. {74}

|   |
|---|
| <b>NOTE:</b> The following actions are taken after exiting the EOF. |
|---|

- \_\_\_\_\_ Request leads in each EOF functional area perform accountability of EOF personnel using 24 hour EOF Position Staffing Log. {80}
- \_\_\_\_\_ Consult with Enterprise Security console personnel at 704-382-1234 to determine expected duration of EOF evacuation.
- \_\_\_\_\_ **IF** expected duration of evacuation is greater than 2 hours or unknown, perform the following:
  - Direct EOF Personnel to report to the Alternate EOF Location
    - Catawba Alternate TSC  
Catawba Nuclear Station Administration Building (Building 7720)  
4800 Concord Road  
York, SC 29745-9635
    - McGuire Alternate TSC  
McGuire Nuclear Station Administration Building (Building 7438)  
12700 Hagers Ferry Road  
Huntersville, NC 28078-9340 {80}
  - Inform the TSC Emergency Coordinator that EOF is relocating to Alternate EOF Location
  - Request TSC notify NRC of EOF relocation
- \_\_\_\_\_ Direct EOF Emergency Planner to conduct actions required by EOF Business Continuity Plan.
- \_\_\_\_\_ Return to Enclosure 6.1 of this procedure after reporting to Alternate EOF.

NOTE: Items listed here are suggested topics for routine update briefings (not all topics need be addressed at each briefing). Items actually selected should be based on existing or projected plant conditions and current priorities.

| <b>Attributes of Excellent Briefings</b>   |  |
|--|--|
| <ul style="list-style-type: none"> <li>• 5-10 minutes duration</li> <li>• Brief for status, not to solve problems</li> <li>• Crisp, focused and well controlled</li> </ul>   | <ul style="list-style-type: none"> <li>• Speak to be heard (use PA if needed)</li> <li>• Repeat back required actions</li> <li>• <b>ALL</b> personnel are attentive</li> </ul> |
| <b>1. EOF Director (open and lead briefing)</b> <ul style="list-style-type: none"> <li>• Pre-announce -- 5 minute warning brief is about to occur</li> <li>• Start Briefing by stating "Attention in the EOF," observe participants to confirm they are ready</li> <li>• Overview of emergency conditions</li> <li>• Station priorities</li> <li>• Offsite actions being taken</li> <li>• NRC activities related to emergency</li> </ul> <b>Notes:</b> _____   |  |
| <b>2. Assistant EOF Director</b> <ul style="list-style-type: none"> <li>• Facility staffing issues and status of additional support requested</li> <li>• Facility operations expectations (noise levels, procedure use, log keeping, etc.)</li> <li>• Status of offsite agency communications</li> <li>• Status of relief shift</li> </ul> <b>Notes:</b> _____   |  |
| <b>3. Accident Assessment Manager</b> <ul style="list-style-type: none"> <li>• Current Emergency Classification and EAL number/description</li> <li>• Key parameters/potential paths for Emergency Classification Upgrade</li> <li>• Reactor condition, core damage assessment.</li> <li>• Review of key plant conditions (power level, shutdown, trends)</li> <li>• Fission Product Barrier Status, trends, prognosis</li> <li>• Core Cooling System Status</li> <li>• Emergency/abnormal procedures entered or exited</li> <li>• Severe accident guideline status</li> <li>• Status of NRC Communications</li> </ul> <b>Notes:</b> _____ |  |

|           |   |
|-----------|---|
| <b>4.</b> | <b>Radiological Assessment Manager</b> <ul style="list-style-type: none"><li>• Status of radiological release compared to EAL thresholds, dose projections, offsite radiological conditions, PARs.</li><li>• Meteorological conditions</li><li>• Field Monitoring Team reports</li><li>• Radiation Protection problem areas being worked and/or needing resolution</li><li>• Chemistry activities and results. (e.g. dose equivalent iodine, sample status)</li></ul> <b>Notes:</b> _____   |
| <b>5.</b> | <b>Emergency Planner</b> <ul style="list-style-type: none"><li>• <b><u>IF</u></b> a security event is in progress, plant access restrictions, status of site security, offsite Local Law Enforcement Agencies assistance requested and/or provided</li><li>• <b><u>IF</u></b> a medical emergency response (MERT) is in progress, number of victims, whether radiologically or chemically contaminated, offsite EMS response</li><li>• <b><u>IF</u></b> a fire response is in progress, status of fire, offsite FD response</li><li>• Status of site assembly and site evacuation</li></ul> <b>Notes:</b> _____ |
| <b>6.</b> | <b>Offsite Agency Communicator</b> <ul style="list-style-type: none"><li>• Status of offsite agency communications and time next message due</li></ul> <b>Notes:</b> _____  |
| <b>7.</b> | <b>EOF Log Recorder</b> <ul style="list-style-type: none"><li>• Items of interest from TSC Log</li><li>• TSC Priorities</li></ul> <b>Notes:</b> _____   |
| <b>8.</b> | <b>Corporate Communications</b> <ul style="list-style-type: none"><li>• Status of news releases and press conferences</li><li>• Rumors being addressed</li><li>• Internal/External notifications made (Duke Energy leadership team, ECOC, JIC, state government, INPO, ANI)</li></ul> <b>Notes:</b> _____   |
| <b>9.</b> | <b>EOF Director (close briefing)</b> <ul style="list-style-type: none"><li>• <b><u>IF</u></b> offsite agencies representatives are present, provide them with opportunity to contribute to brief</li><li>• <b><u>IF</u></b> the NRC is present, provide them with opportunity to contribute to brief</li><li>• Ask if any others need to report "Important information"</li><li>• Summarize priorities</li><li>• Ask if there are any questions</li><li>• State "END OF BRIEF"</li></ul>  |

**Setup of Catawba Alternate EOF in McGuire  
Admin Bldg.**

## INITIAL

\_\_\_\_\_ **IF** cell phones with headsets can be obtained from McGuire TSC, take them to alternate EOF location (Administration Building layout on Page 3 of 3 of this enclosure).

\_\_\_\_\_ Locate assigned Administration Building area shown on the layout drawing on Page 3 of 3 of this enclosure

- NOTE:**
1. Alternate TSC phone sets are stored in the CRX Equipment Room, Room 112.
  2. The EOF Emergency Planner and EOF Data Coordinator can assist with phone and computer connections.
  3. **IF** a computer is needed, a computer that is not being used for another ERO function (e.g., Regulatory Compliance section, Business Management group, Human Resources group) may be used.
  4. **IF** access to the CBX equipment Room, Room 112, is needed prior to the arrival of the EOF Emergency Planner, a key to the door can be obtained from Security at the SAS.
  5. Printer paths for McGuire Nuclear Station Administration Building Mail Room Printers are MNADM106 and MNADMDP1.

\_\_\_\_\_ Set up assigned location as follows:

- \_\_\_\_\_ • Obtain phone equipment necessary to conduct ERO function at assigned location and connect to wall and ceiling outlets.
- \_\_\_\_\_ • **IF** a computer is needed, request help from EOF Data Coordinator.
- \_\_\_\_\_ • **IF** necessary, obtain copies of position procedure enclosure from procedure SR/0/B/2000/003, Activation of the EOF, located in Emergency Preparedness Procedures cabinet.
- \_\_\_\_\_ • **IF** printing capability is needed, setup printers using DAE Printer Selector Program.

INITIALS \_\_\_\_\_

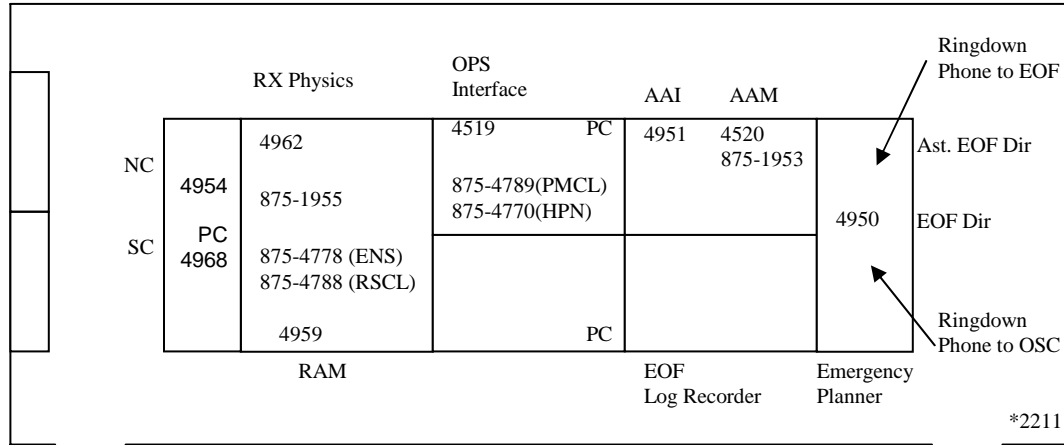
PRINTED NAME \_\_\_\_\_

**Setup of Catawba Alternate EOF in McGuire  
Admin Bldg.**

- \_\_\_\_\_ • **IF** copies of plant procedures are required, perform one of the following:
  - For Emergency Plan Implementing Procedures (RPs, SHs, and SRs), make copy from Control Copy located in Emergency Preparedness Procedures cabinet.
  - For all other procedures, print a copy from NEDL Portal on DAE using McGuire Admin Building Mail Room printer MNADM106 or MNADMDP1.
- \_\_\_\_\_ • Assume or continue ERO role according to procedure SR/0/B/2000/003, Activation of the EOF.

**Setup of Catawba Alternate EOF in McGuire  
Admin Bldg.**

(Executive Board Room 111, Admin. Building)



**Other EOF Position Locations**

- Others (EP Room 114) - \*4458, \*4977, \*875-1951.
- Offsite Communicator (EP Room 115B -- \*4970, \*SSN 315, \*Radio, \*875-1951.
- Data Coordinator (CBX Equipment Room 112) -- \*4999.
- Dose Assessor (SCR Room 100D) -- \*4405.
- Offsite Monitoring (McGuire TSC) \*4969, \*4976
- Public Affairs (Rooms 118 and 141) -- \*4400, \*4402, \*4233.
- NRC (NRC Office, Room 126) -- \*875-1681.
- Other, use Jaguar Room as needed (Room 144, EOF Services Mgr.) -- \*4826.

**Office Equipment**

- FAX (Mail Room, Room 116) -- \*875-4506.
- FAX (EP Room 114) -- \*875-4382.
- Copier (Mail Room, Room 116).
- Copier (SA Room 170).
- CBX (CBX Office in Admin. Building Lobby).

\* Indicates existing phones. All others are to be plugged in when the Alternate TSC is activated.

**Setup of McGuire or Oconee Alternate EOF in  
Catawba Admin Bldg.**

## INITIAL

\_\_\_\_\_ **IF** cell phones with headsets can be obtained from Catawba TSC, take them to alternate EOF location (Administration Building layout on Page 2 of 3 of this enclosure).

\_\_\_\_\_ Locate assigned Administration Building area shown on the layout drawing on Page 2 of 3 of this enclosure

- NOTE:**
1. The EOF Emergency Planner and EOF Data Coordinator can assist with computer connections.
  2. **IF** a computer is needed, a computer that is not being used for another ERO function (e.g., Regulatory Compliance section, Performance Improvement Team, Human Resources group) may be used.
  3. Printer paths for Catawba Nuclear Station Administration Building Printers are CNSADM2 for Copier Room (Room 143) and CNADM127 for Room 127.

\_\_\_\_\_ Set up assigned location as follows:

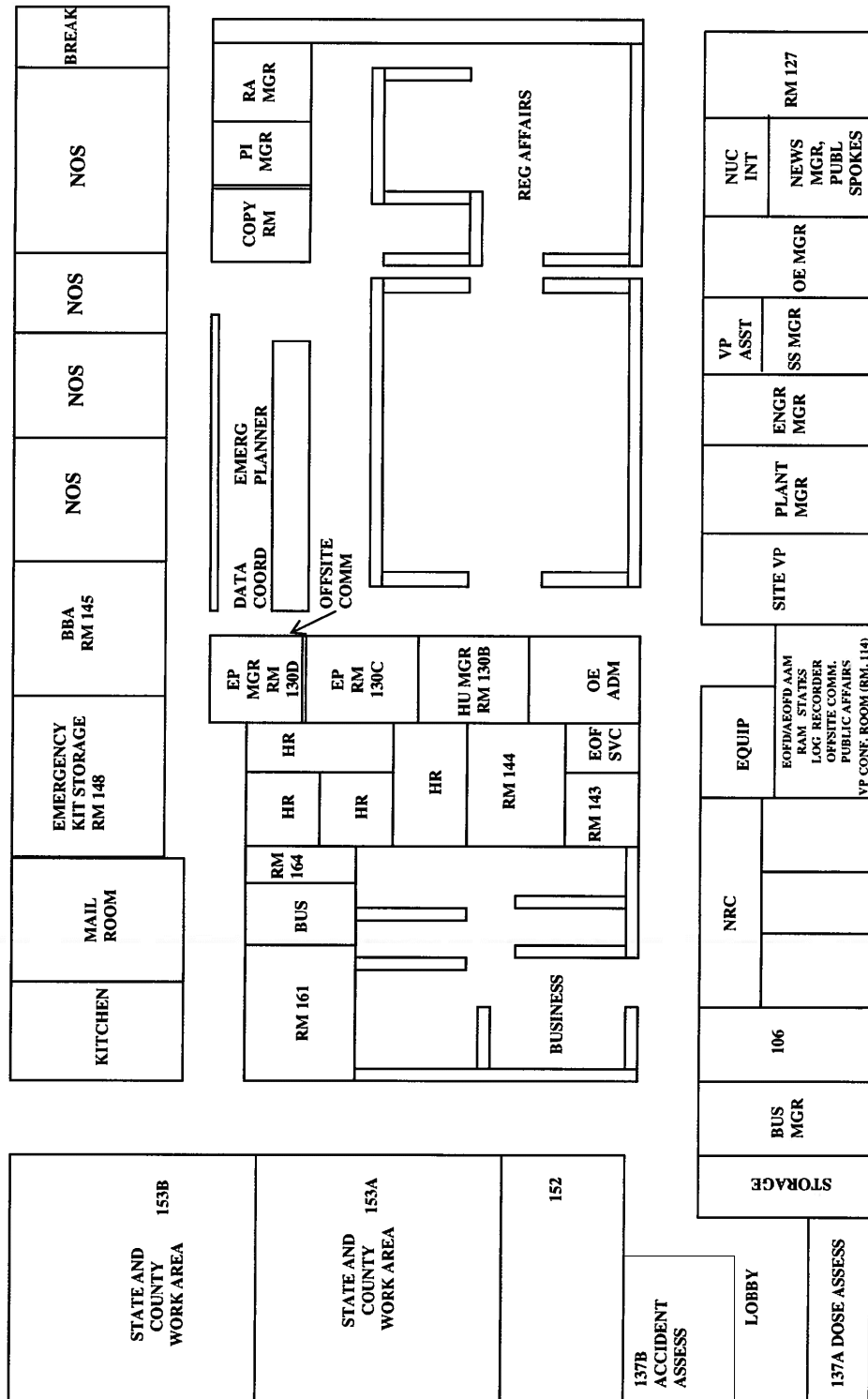
- \_\_\_\_\_ • **IF** a computer is needed, request help from EOF Data Coordinator.
- \_\_\_\_\_ • **IF** necessary, obtain copies of position procedure enclosure from procedure SR/0/B/2000/003, Activation of the EOF, located in Emergency Preparedness procedures cabinet.
- \_\_\_\_\_ • **IF** printing capability is needed, setup printers using DAE Printer Selector Program.
- \_\_\_\_\_ • **IF** copies of plant procedures are required, perform one of the following:
  - For Emergency Plan Implementing Procedures (RPs, SHs, and SRs), make copy from Control Copy located in Emergency Preparedness Procedures cabinet.
  - For all other procedures, print a copy from NEDL Portal on DAE using Catawba Admin Building Mail Room printer CNSADM2.
- \_\_\_\_\_ • Assume or continue ERO role according to procedure SR/0/B/2000/003, Activation of the EOF.

INITIALS \_\_\_\_\_

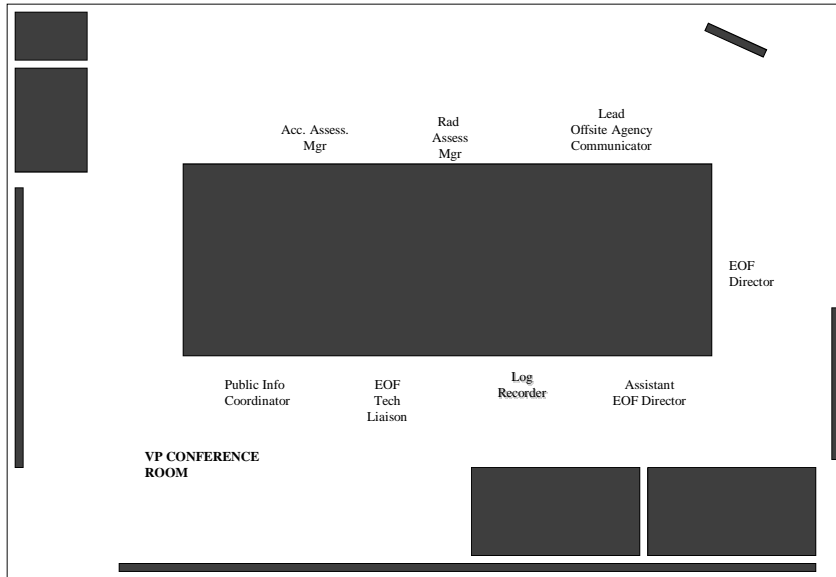
PRINTED NAME \_\_\_\_\_

Setup of McGuire or Oconee Alternate EOF in  
Catawba Admin Bldg.

ALTERNATE EOF IN THE CNS ADMIN BLDG



**Setup of McGuire or Oconee Alternate EOF in  
Catawba Admin Bldg.**



**EOF Functional Areas:**

VP Conference Room – Command & Control Center (EOF Director, Accident Assessment Manager, Rad Assessment Manager, Lead Offsite Agency Communicator, EOF Log Recorder, EOF Tech Liaison, Public Information Coordinator, State EM Representatives)

EP Manager's Office – Offsite Communicators

EP Cubes – Data Coordinator, EOF Emergency Planner

Touchdown Room 142 - EOF Services

PA Manager Office - News Manager, Public Spokesperson

Room 153 A/B - State and County Work Area

NRC Resident Inspector Offices - NRC Site Team

Room 137A - Dose Assessment

Room 137B - Accident Assessment

Catawba TSC (Not Shown) - Offsite Monitoring

**Enclosure 6.27**  
**NRC Response Team Briefing**

SR/0/A/2000/003  
Page 1 of 2

**A) Emergency Classification**

Time Declared: \_\_\_\_\_ am/pm (Current Class)

Unusual Event                      Alert

Site Area Emergency              General Emergency

EAL Descriptor Text: \_\_\_\_\_

\_\_\_\_\_

Provide a brief summary of the event and mitigating actions in progress: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**B) Fission Product Barrier Status**

Fuel      RCS      CTMT

Intact:

Potential Loss:

Lost:

**C) Plant Conditions**

Mode 1 - Power Operations \_\_\_\_\_ %

Mode 2 - Startup

Mode 3 - Hot Standby

Mode 4 - Hot Shutdown

Mode 5 - Cold Shutdown

Mode 6 - Refueling

Time of shutdown: \_\_\_\_\_ am/pm

Stable                                      Improving

Unstable                                      Deteriorating

-----

Briefly describe equipment, instrument or other problems: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**D) Radiological Release**

None or

Imminent

Controlled

In Progress

Uncontrolled

Terminated

Start Time: \_\_\_\_ am/pm

Estimated Duration: \_\_\_\_\_

**E) Onsite Protective Actions**

None or

Site Assembly / Accountability

Local Area Evacuation

Protected Area Evacuated

Site Evacuated

Offsite Assembly

Emergency Exposures Authorized

Potassium Iodide Issued

**F) Response Facilities Activated**

None or

Technical Support Center

Operations Support Center

Emergency Operations Facility

Joint Information Center

**G) Offsite Assistance Requested**

None or

Medical                                      \_\_\_\_\_ am/pm

Fire Department                                      \_\_\_\_\_ am/pm

Law Enforcement                                      \_\_\_\_\_ am/pm

**H) Offsite Notifications**

County                                      INPO

State                                      ANI

News Release

**I) Protective Action Recommendations**

None or

Evacuate: \_\_\_\_\_

Shelter: \_\_\_\_\_

**J) Offsite Actions/Response**

None issued, or:

Schools                                      Recreation Areas

Other: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Evacuate: \_\_\_\_\_

Shelter: \_\_\_\_\_

Underway -- OR -- Completed

**K) Additional Notes**

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NOTE: This briefing is intended to provide general information related to the event. More detailed information will be available from individual licensee counterparts.

**Additional Discussion Items:**

1. Personnel safety (as applicable)
  - a. Personnel accountability requirements
  - b. Radiation protection requirements
  - c. Industrial safety requirements
  - d. Protective equipment requirements
  - e. Reporting emergency situation (e.g., fire/medical)
2. Emergency evacuation
  - a. Location of exits
  - b. Location of emergency assembly areas
3. Personal comfort
  - a. Location of restrooms
  - b. Location of water, beverages, and food
  - c. Location of quiet area
4. Facility specific information
  - a. Prohibited activities (e.g., use of cell phones, cameras, cordless phones, etc.)
  - b. Facility telephones (how to call outside the facility, reserve phones, etc.)
  - c. Telephone numbers (e.g., response facility phone directory/phone listing)
  - d. Reference locations and access
  - e. Making photo copies
  - f. Sending/receiving facsimiles
  - g. Logistical assistance/support

- {1} PIP 0-M97-4210 NRC-1
- {2} PIP 0-M96-1645
- {3} PIP 2-C96-0273
- {4} PIP 0-C98-3123
- {5} PIP 0-M98-3522
- {6} PIP 0-M98-2065
- {7} PIP 0-C00-3830
- {8} PIP 0-M99-3800, DocTracks NGO-2012-000119
- {9} PIP M-99-2593
- {10} PIP M-00-1107
- {11} PIP G-02-00399(deleted Meteorologist Checklist, replaced with new enclosure)
- {12} PIP M-01-3565
- {13} PIP M-01-3711
- {14} PIP M-99-5381
- {15} PIP C-02-5851
- {16} PIP G-02-00360
- {17} N/A
- {18} PIP M-02-2412, C.A.17
- {19} PIP M-03-2174
- {20} Deleted
- {21} PIP M-03-2808, C.A. 1
- {22} PIP M-03-3294, C.A. 10
- {23} PIP G-03-606
- {24} PIP M-04-2742, C.A. 10
- {25} PIP C-04-1367, C.A. 9
- {26} PIP-M-03-2538, C.A. 3

- {27} PIP-M-03-3483, C.A. 1
- {28} PIP-M-03-3294, C.A. 21
- {29} PIP-C-04-2486, C.A. 2
- {30} PIP-C-03-4471, C.A.1
- {31} Deleted
- {32} PIP-M-04-0735, C.A. 10
- {33} PIP-M-04-0238, C.A.2
- {34} Deleted
- {35} PIP-M-05-3631
- {36} PIP-C-05-4854
- {37} PIP-C-05-2064, C.A. 11
- {38} PIP-C-06-3808, CA. 9
- {39} PIP-G-07-0127
- {40} PIP-C-04-2631, C.A.2
- {41} PIP-C-06-6053, C.A.11
- {42} PIP-C-06-8633, C.A.6
- {43} PIP-M-06-5137, C.A.3
- {44} PIP-G-07-0944, C.A. 4
- {45} PIP-G-07-0959, C.A. 12
- {46} PIP-C-05-2064, C.A. 12
- {47} PIP M-07-3471, C.A. 6
- {48} PIP G-08-1053, C.A. 4
- {49} PIP C-09-3308, C.A. 3
- {50} PIP M-09-2521, C.A. 15
- {51} PIP M-09-4514, C.A. 19
- {52} PIP G-09-1159, C.A. 11

- {53} PIP G-08-1195
- {54} PIP G-09-0697, C.A. 2
- {55} PIP M-10-3598, C.A. 25
- {56} PIP O-10-2906
- {57} PIP M-10-3598, C.A. 21
- {58} PIP O-10-6861, C.A. 4
- {59} PIP G-10-1128, C.A. 1
- {60} PIP O-10-11050, C.A. 21
- {61} PIP G-11-1177, DocuTracks NGO-2012-000122
- {62} PIP M-11-6252, C.A. 2
- {63} PIP O-10-11050, C.A. 23
- {64} PIP G-11-1389, C.A. 11
- {65} PIP C-11-4972, C.A. 1
- {66} PIP G-11-1352, C.A. 6
- {67} PIP G-12-0276, C.A. 2
- {68} PIP G-12-1158, C.A. 2, 4, and 7
- {69} PIP C-12-3794, C.A. 4
- {70} PIP G-12-1057, C.A. 3
- {71} PIP G-10-0955
- {72} PIP G-13-0488
- {73} PIP M-13-7757
- {74} PIP G-13-1838
- {75} PIP G-13-1461, C.A. 19
- {76} PIP M-12-2339, C.A. 34
- {77} IER L1-13-10
- {78} IER L1-11-14

**Enclosure 6.28**

Commitments for SR/0/A/2000/03

SR/**0**/A/2000/003

Page 4 of 4

{79} PIP G-14-0577

{80} PIP G-14-2208

{81} PIP G-14-2211

{82} PIP O-14-9103, C.A. 2

|   |   |
|---|---|
| <div>Duke Energy</div> <div>Standard Procedure for CNS, MNS &amp; ONS</div> <div>Notification to States and Counties from the Emergency Operations Facility for Catawba, McGuire and Oconee</div> | Procedure No.<br><b>SR/0/A/2000/004</b>     |
|   | Revision No.<br><b>004</b>                  |
|   | Electronic Reference No.<br><b>SHR0005Q</b> |
| <b>PERFORMANCE</b>  |   |
| <div>***** UNCONTROLLED FOR PRINT *****</div> <div><b>(ISSUED) - PDF Format</b></div>   |   |

## Notifications to States and Counties from the Emergency Operations Facility

### 1. Purpose

- 1.1 This procedure describes the instructions for the prompt notification of State and Local response organizations in the event of a declared emergency at a Duke nuclear station.

### 2. Definitions

- 2.1 Initial Notification: The first notification made to offsite response organizations upon declaration of any emergency classification, or upgrade in classification, (Notification of Unusual Event, Alert, Site Area Emergency, or General Emergency), or change in Protective Action Recommendations.
- 2.2 Follow-up Notifications: Periodic notifications to provide update information to offsite response organizations following an Initial Notification. (Enclosure 6.1 (Emergency Notification Form (ENF) Completion) Step 1)
- 2.3 Termination Notification: The last notification sent to offsite response organizations communicating termination of the emergency.
- 2.4 WebEOC: An electronic emergency response communication system used to provide information within the licensee's emergency response facility and can be used as an option to provide information to offsite response organizations.
- 2.5 Emergency Notification Form (ENF): The document prepared by the licensee to communicate Initial and Follow-up Notifications to the offsite response organizations.
- 2.6 Other Information: Information not directly associated with the event, but important to communicate to offsite response organizations as part of the Initial or Follow-up Notifications.
- 2.7 Selective Signaling System: The primary communication method used by the licensee to communicate emergency information to offsite response organizations. The selective signaling system provides an open line capable of simultaneously connecting all offsite response organizations. The line is always active and there is no dial tone.
- 2.8 Authentication Code: A controlled list of numbers and corresponding words provided by the state(s) to "authenticate" communications between various parties. The authentication code provides assurance to the communication "receiver" that information from the "transmitter" is valid. Message authentication is only required if the message transmission is via a method other than the Selective Signaling System.

### 3. Procedure

**NOTE:**

1. Steps of this procedure may be performed out of sequence at the discretion of the communicator.
2. All notifications are expected to be accurate and timely. If an error is discovered after information has been communicated, immediately (< 15 minutes) correct the information using a follow-up notification. Corrected PARs should be discussed immediately with local emergency management officials using the decision line or other agency communications means. The decision to act upon the corrected information is made by the off-site agencies.
3. The first Offsite Agency Communicator to arrive should begin to perform the procedure regardless of which role they expect to perform.

- ☐ 3.1 Obtain position notebook from book shelf in EOF Director's area.
- ☐ 3.2 Ensure SR/0/A/2000/003 Enclosure 6.10 (EOF Offsite Agency Communicator Checklist) is completed.
- ☐ 3.3 Circle which Site has declared the Emergency, i.e., **McGuire or Catawba or Oconee**.
- ☐ 3.4 Power up/check printers, fax machines, copiers, PC, etc.
- ☐ 3.5 Log on to WebEOC, referring to EP FAM 3.15 Enclosure 3.15.3.3, as needed.
- ☐ 3.6 Acquire turnover information using Enclosure 6.9 (Turnover Checklist), as follows:
  - **IF** TSC has activated, contact affected site(s) TSC Offsite Communicator.
  - **IF** emergency situation prevents activating TSC within 75 minutes of declaration, contact affected site(s) Control Room.
- ☐ 3.7 Provide copies of previously transmitted message forms to:
  - ☐ All positions in EOF Director's area.
  - ☐ Wall Folder (4 copies).

- ☐ 3.8 Obtain a copy of Authentication Code list from:
  - ☐ Catawba – the Catawba procedure cabinet in the EOF Director's area.
  - ☐ McGuire - the McGuire procedure cabinet in the EOF Director's area.
  - ☐ Oconee - the Oconee procedure cabinet in the EOF Director's area.
- ☐ 3.9 Update Status Boards in EOF with information from Step 3.6 (i.e., next message due, etc.).
  - EOF Director's Area
  - Offsite Agency Communicator's Area.
- ☐ 3.10 Inform EOF Director, Accident Assessment Manager and Radiological Assessment Manager when next notification is due.
- ☐ 3.11 Review appropriate enclosure for your role:
  - Enclosure 6.5, Lead Offsite Agency Communicator Duties
  - Enclosure 6.6, ENF Communicator Duties
  - Enclosure 6.7, Telephone Communicator Duties
- ☐ 3.12 Ensure EOF will have adequate time to develop and provide next notification before EOF Director activates EOF.
- ☐ 3.13 **WHEN** EOF Communicators are prepared to accept communication responsibilities from site, notify EOF Director.
- ☐ 3.14 **WHEN** EOF activated:
  - ☐ 3.14.1 Contact site to inform them that EOF has responsibility for emergency notifications.
  - ☐ 3.14.2 Prepare for next ENF transmission.
- ☐ 3.15 Complete ENF using Enclosure 6.1 (Emergency Notification Form Completion).
- ☐ 3.16 Send ENF using Enclosure 6.2 (Emergency Notification Form (ENF) Transmission).

#### **4. References**

- 4.1 Catawba Nuclear Station (CNS) Emergency Plan
- 4.2 McGuire Nuclear Station (MNS) Emergency Plan
- 4.3 Oconee Nuclear Station (ONS) Emergency Plan
- 4.4 AD-EP-ALL-0102, WebEOC® Maintenance and Administration
- 4.5 AD-EP-ALL-0202, Emergency Response Offsite Dose Assessment

#### **5. Records**

- \_\_\_\_\_ 5.1 Ensure all checklists, logs and forms completed as the result of implementing this procedure are collected at the end of the event and provided to the EOF Emergency Planner.
- \_\_\_\_\_ 5.2 Ensure EOF Director signs "Procedure Completion Approved"

#### **6. Enclosures**

- 6.1 Emergency Notification Form (ENF) Completion
- 6.2 Emergency Notification Form (ENF) Transmission
- 6.3 Authentication Guideline
- 6.4 Fax Instructions
- 6.5 Lead Offsite Agency Communicator Duties
- 6.6 ENF Communicator Duties
- 6.7 Telephone Communicator Duties
- 6.8 Emergency Notification Form Quick Reference
- 6.9 Turnover Checklist

**Emergency Notification Form (ENF)  
Completion**

- ☐ 1. Review the following criteria for notifications.

**Initial Notifications**

1. Initial notifications to the State(s) and counties must be made within 15 minutes of event declaration.
2. For upgrade in classification prior to or while transmitting initial message:
  - Notification for lesser emergency classification must be made within 15 minutes of lesser classification declaration time.
  - Agencies must be informed that an upgrade in classification will be coming.
  - Upgraded classification message must be transmitted within 15 minutes of upgraded classification declaration time.
3. Initial messages in General Emergency classification that provide upgrade in PARs shall be communicated to offsite agencies as soon as possible and within 15 minutes.

**Follow-up Notifications**

1. Follow-up notifications to State(s) and Counties must be made as follows:

|   |  |   |
|---|--|---|
| <u>Catawba</u><br>-For NOUE, ALERT, SAE, or GE, every hour until emergency is terminated. | <u>McGuire</u><br>-For NOUE, every 4 hours until emergency is terminated.<br>-For ALERT, SAE, or GE, every hour until emergency is terminated. | <u>Oconee</u><br>-For NOUE, a follow-up is not required.<br>-For ALERT, SAE, or GE, every 60 minutes until emergency is terminated. |
|---|--|---|

**OR**

|  |  |  |
|--|--|--|
| <u>Catawba</u><br>-If there is any significant change to the situation, make notification as soon as possible. See NOTE* below for examples. | <u>McGuire</u><br>-If there is any significant change to the situation, make notification as soon as possible. See NOTE* below for examples. | <u>Oconee</u><br>-If there is any significant change to the situation, make notification as change occurs. See NOTE* below for examples. |
|--|--|--|

**OR**

|   |   |  |
|---|---|--|
| <u>Catawba</u><br>-As agreed upon with an Emergency Management official from <u>each</u> individual agency. Documentation shall be maintained for any agreed upon schedule change.<br>-Interval <u>shall not</u> be greater than 4 hours to any agency. | <u>McGuire</u><br>-As agreed upon with an Emergency Management official from each individual agency. Documentation shall be maintained for any agreed upon schedule change.<br>-Interval for ALERT, SAE, and GE <u>shall not</u> be greater than 2 hours to any agency. | <u>Oconee</u><br>-Required every 60 minutes from notification time on Line 2 for ALERT, SAE, or GE.<br>-This frequency <u>may be</u> changed at the request of offsite agencies. |
|---|---|--|

\*NOTE: Examples of significant plant changes include: evacuation/relocation of site personnel, fires onsite, MERT activation and/or injured personnel transported offsite, start/stop of a release, chemical spills, explosions, any event that would cause or require offsite agency response, or Condition "A" or "B" for Keowee Hydro Project Dams/Dikes (Oconee only).

2. **IF** follow-up is due and an upgrade to higher classification is declared, do not complete follow-up ENF. Offsite agencies must be notified that follow-up is being superseded by upgrade to a higher classification and information will be provided.

**Emergency Notification Form (ENF)  
Completion**

## 2. Complete Emergency Notification Form (ENF):

- ☐ 2.1 **IF** WebEOC available, access WebEOC ENF per EP FAM 3.15, (Attachment 3.15.3.3). **GO TO** Step 2.4
- ☐ 2.2 **IF** using pre-printed ENF, obtain preprinted ENF for event declared. **GO TO** Step 2.4
- ☐ Catawba
- ☐ McGuire
- ☐ Oconee
- ☐ 2.3 **IF** using blank ENF, obtain blank ENF:
- ☐ Catawba
- ☐ McGuire
- ☐ Oconee

**NOTE:** Messages are sequentially numbered throughout drill/event. The first message for a drill/event is message number 1.

## 2.4 Complete Line 1 as follows:

- ☐ 2.4.1 Select or mark **A** for Drill or **B** for Actual Event.
- ☐ 2.4.2 Ensure or record appropriate message number.
- ☐ 2.4.3 **IF** termination message, **GO TO** Step 2.6.

**NOTE:** Notification Time, Date, and Authentication Number will be completed during message transmission from the WebEOC Emergency Notification Fax Management panel.

- ☐ 2.5 On Line 2 select or mark appropriate box for:
- ☐ 2.5.1 **A** **Initial**
- ☐ 2.5.2 **B** **Follow-up**
- ☐ 2.5.3 Leave NOTIFICATION: TIME and DATE blank.
- ☐ 2.5.4 Leave AUTHENTICATION # blank.

**Emergency Notification Form (ENF)  
Completion**

- ☐ 2.6 Complete Line 3
  - ☐ 2.6.1 Record or ensure appropriate Site.
  - ☐ 2.6.2 Record, select, or ensure appropriate confirmation telephone number.
  - ☐ 2.6.3 **IF** termination message, **GO TO** Step 2.14.
- ☐ 2.7 Complete Line 4 (Data provided by Accident Assessment Manager (AAM)).
  - ☐ 2.7.1 Select, record or verify correct emergency classification.
  - ☐ 2.7.2 Select, record or verify correct Emergency Action Level (EAL) number.
  - ☐ 2.7.3 Record or verify correct EAL description.

**NOTE:** **Condition A** - Failure is Imminent or has Occurred - A failure at the dam has occurred or is about to occur, and minutes to days may be allowed to respond, dependent upon the proximity to the dam. Response includes the immediate movement of downstream residents to higher ground. State and local governments will be notified. (Duke Hydro-Electric Plant EAP)

- ☐ 2.8 Complete Line 5 (Data provided by RAM)
  - ☐ 2.8.1 **IF** Notification of Unusual Event **OR** Alert, check or verify A (None) is selected **AND GO TO** Step 2.9.
  - ☐ 2.8.2 **IF** Site Area Emergency for Catawba **OR** McGuire, check or verify A (None) is selected **AND GO TO** Step 2.9.
  - ☐ 2.8.3 **IF** Site Area Emergency for Oconee **AND NO** Condition A exists for Keowee Hydro Project Dam/Dike, check or verify A (None) is selected **AND GO TO** Step 2.9.
  - ☐ 2.8.4 **IF** Site Area Emergency for Oconee **AND** a Condition A exists for Keowee Hydro Project Dam/Dike, **GO TO** Step 2.8.6.

**Emergency Notification Form (ENF)  
Completion**

- ☐ 2.8.5 **IF** General Emergency, record Protective Action Recommendations as directed by RAM.

**WARNING:** Once a zone is accurately selected for evacuation, it should not be removed.

- ☐ A. Verify, select or mark ☐ B (Evacuate) **AND** verify, select or record zones for evacuation.
- ☐ B. Verify, select or mark ☐ C (Shelter) **AND** verify, select or record zones for sheltering.
- ☐ C. **IF** dose projections or field measurements indicate Thyroid dose will be equal to or greater than 5 Rem, verify, select or mark box ☐ D. {PIP-G-03-606}
- ☐ D. For any other Protective Action Recommendations, select or mark ☐ E (Other) **AND** record information.
- ☐ 2.8.6 **IF** Condition A exists for Keowee Hydro Project Dam/Dike:
- ☐ A. Verify, select or record ☐ B (Evacuate) **AND** select or record *Move residents living downstream of the Keowee Hydro Project dams to higher ground.*
- ☐ B. Verify, select or record ☐ E (Other) **AND** select or record *Prohibit traffic flow across bridges identified on your inundation maps until the danger has passed.*

**Emergency Notification Form (ENF)  
Completion**

**NOTE:** An Emergency Release is an unplanned, quantifiable radiological release to the environment during an emergency event. The release does not have to be related to the declared emergency. {AD-EP-ALL-0002}

☐ 2.9 Complete Line 6 (Data provided by RAM)

- ☐ 2.9.1 **IF** release not in progress or has not occurred, verify, select or mark **A** (None)
- ☐ 2.9.2 **IF** there is indication of an emergency release in progress, verify, select or mark **B** (Is Occurring)
- ☐ 2.9.3 **IF** a release has occurred but is no longer in progress, verify, select, or mark **C** (Has Occurred)

**NOTE:** A current dose run may not be available and is not required for initial notifications.

☐ 2.10 Confer with Radiological Assessment Manager (RAM) to determine whether current dose run is to be imported.

- ☐ 2.10.1 **IF** current dose run is **NOT** to be imported, **GO TO** Step 2.11.
- ☐ 2.10.2 Select "Import Dose Projection Data" button at bottom of ENF.
- ☐ 2.10.3 Verify imported information is correct on Lines 7, 14, 15 and 16.

☐ 2.11 Complete Line 7 (Data provided by RAM)

- ☐ 2.11.1 **IF** release not in progress or has not occurred, verify, select or mark **A** (Not applicable) **AND GO TO** Step 2.12.
- ☐ 2.11.2 **IF** release has occurred, verify, select or mark **A** (Not applicable) **AND GO TO** Step 2.12.
- ☐ 2.11.3 **IF** release significance is known, verify, select or mark **B** (Within normal operating limits) **OR C** (Above normal operating limits) **AND GO TO** Step 2.12.

**NOTE:** Selecting **D** (Under Evaluation) will clear any Dose Projection data imported in Step 2.10.

- ☐ 2.11.4 **IF** release significance is unknown, verify, select or mark **D** (Under Evaluation).

**Emergency Notification Form (ENF)  
Completion**

- ☐ 2.12 Complete Line 8 by selecting or marking appropriate block (Data provided by Accident Assessment Manager:

☐ (Improving)

☐ (Stable)

☐ (Degrading)

**NOTE:** 1. Information for Line 9 may **not** be available and is **not** required for initial notifications.

2. When using WebEOC, Line 9 information can be typed in **OR** loaded by selecting "Import Plant/MET Data" button on the ENF.

- ☐ 2.13 **IF** Follow-up Notification, complete Line 9 (Data provided by RAM)

- ☐ 2.13.1 **IF** meteorological data was imported into WebEOC ENF with the "Import Plant/MET Data" button, verify data is correct.

**OR**

- ☐ 2.13.2 Record wind direction.
- ☐ 2.13.3 Record wind speed.
- ☐ 2.13.4 Record precipitation (inches per 15 minute period).
- ☐ 2.13.5 Mark appropriate stability class.

**Emergency Notification Form (ENF)  
Completion**

**NOTE:** Format for time is ##### and date is MM/DD/YYYY.

- ☐ 2.14 Complete Line 10 (Data provided by Accident Assessment Manager)
- ☐ 2.14.1 Select or mark ☐ A (Declaration) **OR** ☐ B (Termination).
- ☐ 2.14.2 Record time and date of declaration **OR** termination.
- A. **IF** using WebEOC ENF, select **Get Date** button to acquire current date **AND** edit as needed.
- OR**
- B. Enter time and date of declaration **OR** termination.
- ☐ 2.15 **IF** termination notification, **GO TO** Step 2.24.

**Emergency Notification Form (ENF)  
Completion**

**NOTE:** The following list provides examples of events that could affect more than one unit. The list may not be all inclusive.

- Events involving CAS or SAS
- Security event.
- Seismic event.
- Tornado on site.
- Hurricane force winds on site.
- Loss of both switch yards.
- SSF event.
- Fire affecting shared safety related equipment.
- Toxic gas event

☐ 2.16 Complete Line 11 (Data provided by Accident Assessment Manager)

☐ 2.16.1 **IF** event affects emergency class on more than one unit equally, select or mark All.

☐ 2.16.2 **IF** event only affects one (1) unit **OR** one (1) unit has a higher emergency class, select or mark appropriate unit.

**NOTE:** 1. Unaffected Unit(s) status not required for Initial Notifications.  
2. In WebEOC ENF, **Get Date** button will load current date in specific line field in appropriate format. Edit as needed.

☐ 2.17 Complete Line 12 (Data provided by Accident Assessment Manager)

☐ 2.17.1 **IF** Unit is shutdown, record 0% power, **AND** record shutdown time and date.

☐ 2.17.2 **IF** Unit is **NOT** shutdown, select "Import Plant/MET Data" button to auto-populate Line 12A.

**Emergency Notification Form (ENF)  
Completion**

**NOTE:** Enclosure 6.5 (Lead Offsite Communicator Duties) page 3 of 4 provides examples for Line 13 information.

☐ 2.18 Complete Line 13.

- ☐ 2.18.1 Record any additional information provided by EOF staff.
- ☐ 2.18.2 **IF** first message from EOF, include "EOF activated at \_\_\_\_\_ (time)."
- ☐ 2.18.3 **IF** message contains change in Protective Action Recommendations, include "PAR Change" and reason for PAR change in narrative.
- ☐ 2.18.4 **IF** event involves security threat, consult job aid (Nuclear Security Approved Messages for Security Related Events/Issues) in Offsite Agency Communicator's notebook for guidance.

**NOTE:** **IF** ENF has already been approved, the following update to agencies may be completed verbally during message transmission.

- ☐ 2.18.5 **IF** an upgrade in classification occurs prior to transmitting message, include "Upgrade to follow."
- ☐ 2.19 **IF** initial notification **AND** dose information is not available, **GO TO** Step 2.24.

**NOTE:** Information for Lines 14, 15, and 16 may not be available and is not required for initial notification due to Protective Action Recommendation change.

- ☐ 2.20 **IF** initial notification due to Protective Action Recommendation change **AND** dose information is not available, **GO TO** Step 2.24.
- ☐ 2.21 **IF** termination notification, **GO TO** Step 2.24.
- ☐ 2.22 **IF** **A** (None) selected on Line 6, **GO TO** Step 2.24.

Emergency Notification Form (ENF)  
Completion

**NOTE:** Liquid releases cannot be quantified by URI and are not the basis for Protective Action Recommendations. The RAM should recommend providing information on liquid releases in Line 13.

☐ 2.23 Complete Lines 14, 15, and 16 (Data provided by RAM)

☐ 2.23.1 **IF** using WebEOC ENF **AND** release is occurring

- ☐ A. Verify dose information imported into form from URI is correct.
- ☐ B. Line 14 TYPE - mark ☐ C Ground
- ☐ C. Line 14 UNITS - mark ☐ B Ci/sec.
- ☐ D. Line 14 FORM - check ☐ A (Airborne), **OR** ☐ B (Liquid) **AND** record release start and/or stop times, as appropriate.
- ☐ E. **GO TO** Step 2.25.

☐ 2.23.2 **IF** using manual form **AND** release is occurring

- ☐ A. Line 14 TYPE - mark ☐ C Ground
- ☐ B. Line 14 UNITS - mark ☐ B Ci/sec.
- ☐ C. Line 14 - Complete MAGNITUDE section for appropriate type of release.
- ☐ D. Line 14 FORM - check ☐ A (Airborne), **OR** ☐ B (Liquid) **AND** record release start and/or stop times as appropriate.
- ☐ E. Line 15 - Enter projection period (hours).
- ☐ F. Line 15 - Enter estimated release duration (hours).
- ☐ G. Line 15 - Enter projection performed Time/Date.
- ☐ H. Line 16 - Record projected doses provided by most current dose assessment.

☐ 2.23.3 **IF** using manual form **AND** release has occurred, complete Line 14 FORM - check ☐ A (Airborne), **OR** ☐ B (Liquid) **and** record release start and stop time and date.

**Emergency Notification Form (ENF)  
Completion**

- NOTE:** 1. **IF** data changes during review of the emergency notification form, it is a good practice to require the EOF staff to do a "clean sweep" through the form prior to approval.
2. The "Received by" and the "Received by Time and Date" sections of Line 17 are not used by Duke Energy and should be left blank.

- ☐ 2.24 **IF** using manual form, complete Line 17:
- ☐ A. Request EOF Director review and sign form
  - ☐ B. Enter EOF Director title
  - ☐ C. Enter Time and Date
  - ☐ D. Enter name of the Communicator to make notification call on "Notified By" line
  - ☐ E. Mark signed form with "ORIGINAL" stamp
  - ☐ F. **GO TO** Step 3
- ☐ 2.25 **IF** using WebEOC ENF, complete Line 17:
- ☐ 2.25.1 Ensure all sections except Line 17 are complete by reviewing form.
  - ☐ 2.25.2 Select **Validate** button at bottom of WebEOC ENF page.
  - ☐ 2.25.3 Obtain EOF Director's concurrence **AND**
    - ☐ A. Enter EOF Director's name in Approved By block.
    - ☐ B. Select appropriate title from pull down menu.
    - ☐ C. Select **Get Time** and **Get Date** buttons to acquire current time and date, **AND** edit as needed.
    - ☐ D. Enter name of Communicator to make notification call on "Notified By" line.

**Emergency Notification Form (ENF)  
Completion**

- ☐ 2.26 **WHEN** EOF Director verbally concurs that ENF is complete, select "Approve" button at bottom of WebEOC EN Form. (Emergency Notification FAX management panel will open.)
- ☐ 2.27 Document approval of WebEOC ENF
  - ☐ 2.27.1 Print copy of notification form.
    - A. Select "Save Draft" button to return to Emergency Notification Messages panel.
    - B. Select "View" button in EN Form column for applicable message.
    - C. Select "Print" button on EN Form to open pdf file.
    - D. Select Printer Icon on Web browser **OR** Adobe Reader and follow the prompts.
    - E. Close Web browser.
    - F. Select "Return" button on EN Form to open Emergency Notification Messages panel.
    - G. Select "Edit" button in Details column for applicable message to open EN Form.
  - ☐ 2.27.2 Request EOF Director to sign form next to "Approved by" line for official documentation purposes.
  - ☐ 2.27.3 Mark signed form with "ORIGINAL" stamp.
- ☐ 3. Transmit message to Offsite Agencies per Enclosure 6.2 (Emergency Notification Form (ENF) Transmission).

**Emergency Notification Form (ENF)  
Transmission****NOTE:**

1. Selective Signaling is the primary communication device. Commercial telephone (Conference Call) is first back-up. EOF Commercial Telephone line (Individual Line) is second back-up. EOF Satellite Phone is third back-up.
2. Information regarding back-up communication devices is located in:
  - CNS Emergency Phone Directory (EP Group Manual Section 5.3.6)
  - McGuire Procedure RP/0/A/5700/014 (Emergency Telephone Directory)
  - Oconee Nuclear Station Emergency Telephone Directory.
3. Selective Signaling is an open line capable of connecting all agencies together at the same time. It is always active (no dial tone). The handset has a “push to talk” button which must be pressed for the other parties to hear you. To use headset instead of handset, the switch on headset controller must be set to “headset” and handset removed from phone cradle.
4. Although the official transmittal time is when the first agency answers, the NRC requirement that **ALL** state and county agencies must be notified within 15 minutes of emergency declaration. Providing the information in Step 1.6 meets the 15 minute notification time requirement.

**1. Send message.**

- ☐ 1.1 **IF** manually faxing ENF, **GO TO** Enclosure 6.4 (Fax Instructions).

**Emergency Notification Form (ENF)  
Transmission**

**NOTE:**

1. Selecting the "Approve" button on the WebEOC EN Form will automatically open the WebEOC Emergency Notification Fax Management panel with the recipient name list auto-populated.
2. Clicking "EN Form" on the Control Panel under the "Boards" header will open the Emergency Notification Messages panel.
3. Clicking the "View" button in the "Fax" column in the Emergency Notification Messages panel will open the Emergency Notification Fax Management panel.
4. Clicking the "Cancel" button on the Emergency Notification Fax Management panel will close the panel and open the Emergency Notification Message panel.

- ☐ 1.2 **IF** using WebEOC ENF, fax notification form:

- ☐ 1.2.1 Access Emergency Notification Fax management panel for applicable EN Form.
- ☐ 1.2.2 Verify Fax "Recipient Name" list is correct.
- ☐ 1.2.3 Click "Send Fax" button.
- ☐ 1.2.4 Click OK. (The "Emergency Notification Messages" panel will open.)

- ☐ 1.3 Press appropriate group dial code.

| Site           | Group Dial Code |
|----------------|-----------------|
| <b>CATAWBA</b> | <b>*5</b>       |
| <b>MCGUIRE</b> | <b>*1</b>       |
| <b>OCONEE</b>  | <b>*4</b>       |

**NOTE:** Page 2 of a manual ENF may be used as a job aid.

- ☐ 1.3.1 Record each agency answering by checking off agency name.

**Emergency Notification Form (ENF)  
Transmission**

- ☐ 1.3.2 **IF** an offsite agency does not answer, dial individual Selective Signaling number **OR** request another communicator contact that agency by backup means using numbers below.

- CATAWBA**

| Agency                 | SELECTIVE<br>SIGNALING<br><br>Individual<br>number | COMMERCIAL<br>TELEPHONE                                 |
|------------------------|--|---|
|                        |  | Individual phone numbers<br>OR<br>One touch dial button |
| York County WP/EOC     | 513  | 9-1-803/329-1110  |
| Mecklenburg Co. WP/EOC | 116  | 9-704/336-2441 (WP)<br>9-704/432-4120 (EOC)             |
| Gaston County WP/EOC   | 112  | 9-704/866-3300  |
| North Carolina WP/EOC  | 314  | 9-1-919/733-3300 (Primary)<br>9-1-800/858-0368 (Alt.)   |
| South Carolina WP/EOC  | 518  | 9-1-803/737-8500 (Primary)<br>9-1-800/811-8045 (Alt.)   |
| North Carolina Alt. WP | 314  | 9-1-828/466-5500<br>9-1-828/466-5501                    |
| South Carolina Alt. WP | 516  | 9-1-803/896-9621  |

- McGUIRE**

| Agency                 | SELECTIVE<br>SIGNALING<br><br>Individual<br>number | COMMERCIAL TELEPHONE                                    |
|------------------------|--|---|
|                        |  | Individual phone numbers<br>OR<br>One touch dial button |
| Gaston County WP/EOC   | 112  | 9-704/866-3300/3243                                     |
| Lincoln County WP/EOC  | 113  | 9-1-704/735-8202/736-8511                               |
| Iredell County WP/EOC  | 114  | 9-1-704/878-3039  |
| Mecklenburg Co. WP/EOC | 116  | 9-704/336-2441 (WP)<br>9-704/432-4120 (EOC)             |
| Catawba County WP/EOC  | 118  | 9-1-828/464-3112  |
| Cabarrus County WP/EOC | 119  | 9-704/920-3000 (WP)<br>9-1-704/436-6519 (EOC)           |
| North Carolina EOC/WP  | 314  | 9-1-919/733-3300 (Primary)<br>9-1-800/858-0368 (Alt.)   |
| North Carolina Alt. WP | 314  | 9-1-828/466-5500<br>9-1-828/466-5501                    |

**Emergency Notification Form (ENF)  
Transmission**

**OCONEE**

**NOTE:** For Oconee only: Oconee County and Pickens County EMA **CANNOT** be reached between 1700 hours to 0800 hours.

| Agency                   | SELECTIVE<br>SIGNALING<br><br>Individual<br>number | COMMERCIAL<br>TELEPHONE                                 |
|--------------------------|--|---|
|                          |  | Individual phone numbers<br>OR<br>One touch dial button |
| Oconee County WP (LEC)   | 416  | 9-1-864/638-4111  |
| Pickens County WP (LEC)  | 410  | 9-1-864/898-5500  |
| Oconee County EOC (EMA)  | 417  | 9-1-864/638-4200  |
| Pickens County EOC (EMA) | 419  | 9-1-864/898-5943  |
| South Carolina WP/EOC    | 518  | 9-1-803/737-8500 (Primary)<br>9-1-800/811-8045 (Alt.)   |
| South Carolina Alt. WP   | 516  | 9-1-803/896-9621  |

☐ 1.4 Document time first party answered as notification time on Line 2.

☐ 1.4.1 **IF** using WebEOC:

- A. Access Emergency Notification Fax Management panel for appropriate message (EN Form).
- B. Enter Time and Date first agency responded into Notification Time and Date fields.
- C. Select "Save" button to auto-populate EN Form with Notification Time and Date on line 2.

☐ 1.4.2 **IF** using manual ENF, document notification time and date on Line 2 of signed original notification form.

**NOTE:** Message authentication is only required if message transmittal is other than via Selective Signaling or if requested by an offsite agency.

☐ 1.5 **REFER TO** Enclosure 6.3 (Authentication Guideline) as needed.

**Emergency Notification Form (ENF)  
Transmission**

- ☐ 1.6 **WHEN** agencies are "on line," say, *"This is the Duke Energy Emergency Operations Facility."*

- ☐ 1.6.1 **IF** Initial or follow-up notification, say

*This is a Drill/an Actual Emergency.  
Catawba/McGuire/Oconee has (just declared) an  
Unusual Event/Alert/Site Area Emergency/General Emergency based on  
EAL # \_\_\_\_\_.*

*A copy of message #\_\_\_\_ has been faxed to you (and it has also been posted on  
WebEOC). Does everyone have this message?*

- ☐ 1.6.2 **IF** Termination message, say

*This is a Drill/an Actual Emergency.  
Catawba/McGuire/Oconee has terminated the  
Unusual Event/Alert/Site Area Emergency/General Emergency.*

*A copy of message #\_\_\_\_ has been faxed to you (and it has also been posted on  
WebEOC). Does everyone have this message?*

- ☐ 1.7 **IF** all answers are yes, **GO TO** Step 1.10.

- ☐ 1.8 **IF** any answer is no, send fax again to appropriate agencies.

|   |
|---|
| <b>NOTE:</b> If message has to be transmitted verbally, read slowly to allow time for recipients to copy down the notification message. |
|---|

- ☐ 1.9 **IF** any of agencies have not received faxed message on second fax attempt, transmit message verbally as follows:

- ☐ 1.9.1 Request appropriate agencies to obtain a blank notification form.

- ☐ 1.9.2 Read Emergency Notification Message line by line to agencies.

- ☐ 1.10 Provide agencies with Communicator's name.

**Emergency Notification Form (ENF)  
Transmission**

- NOTE:**
1. Incoming calls other than Selective Signaling must be authenticated.
  2. A representative from South Carolina Department of Health and Environmental Control (SC DHEC) will typically call in on the confirmation line with questions about the event. (**CNS and ONS only**)
  3. Date and time do not need to be transferred to the back of the form if all parties were on line at the time of message transmission.

☐ 1.11 Ask for questions☐ 1.11.1 **IF** no questions, **GO TO** Step 1.12.☐ 1.11.2 **IF** a question is in reference to information on Emergency Notification Form, provide information to requesting agency.☐ 1.11.3 **IF** a question is not in reference to information on Emergency Notification Form, perform the following:

A. Document question in Communicator's personal log.

B. Document name of agency making request.

C. Document name of individual making request.

D. Request EOF Director to answer question.

E. Document answer provided by EOF Director or designee in Communicator's personal log.

F. Request EOF Director to sign and date answer recorded in Communicator's personal log.

G. Contact requesting agency.

H. Provide answer to requesting agency.

I. Document time answer was provided to requesting agency in Communicator's personal log.

**Emergency Notification Form (ENF)  
Transmission**

- ☐ 1.12 Obtain names of each agency representative by saying:

*"I need to verify the name of each agency representative. When I call out your agency, please give your name."*

**AND** performing a roll call.

- ☐ 1.12.1 Document name of individuals.

- ☐ A. **IF** using WebEOC ENF:

1. Access Emergency Notification Fax Management panel for appropriate message (EN Form).
2. Record fax recipient names in the Government Agencies Notified "Received By" field and enter items and dates.
3. Select "Update" Button.

- ☐ B. **IF** using manual form, record names on back of Emergency Notification Form.

- ☐ 1.13 Inform agencies that message transmission is complete by saying:

*"This concludes this message. EOF clear."*

- ☐ 1.14 **IF** a Keowee dam/dike condition "A" or "B" or external flood condition exists for Oconee, fax ENF to GEMA, NWS, Hart County EMA, and Elbert County EMA using Enclosure 6.4, Fax Instructions, Page 4 of 4.

- NOTE:**
1. Authentication is **NOT** required when using the Selective Signaling phone unless requested by an Off-site Agency.
  2. The Authentication Code List is a controlled listing of numbers and corresponding words provided by the state(s). This listing is used by the site and the off-site agencies to "authenticate" communications between the various parties. This listing provides assurance to the communication "*receiver*" that information from the "*transmitter*" is valid and authentic. Communication authentication may be performed anytime the *receiver* of information wishes to assure the information is authentic. This is accomplished by having the *receiver* provide a number from the code word list and then having the *transmitter* provide the corresponding word to that specified number from the list.
  3. The Authentication Code List (EP Functional Area Manual 3.14.4.2) is located in:
    - Procedure file cabinet.
    - Off-site Communicator Notebook under the "Authentication Code List" tab.
    - WebEOC on the Emergency Notification Fax Management panel using "Get Authentication Code" button.
  4. The Authentication field on Line 2 of the EN Form is complete when it is filled in with an Authentication number or an N/A (if no authentication is performed).

## **1. Placing a Call**

- ☐ 1.1 **IF** using Authentication Code List:
  - ☐ 1.1.1 Ask State or County Representative if they want Authentication.
  - ☐ 1.1.2 **IF** Authentication is **NOT** desired, enter N/A in AUTHENTICATION # field on (Line 2) EN Form.
  - ☐ 1.1.3 **IF** Authentication is desired, request State or County Representative to provide a number from Authentication Code list.
    - A. Provide code word(s) corresponding to number from Authentication Code List.
    - B. Document number in AUTHENTICATION # field on (Line 2) Emergency Notification Form.

- ☐ 1.2 **IF** using WebEOC:
  - ☐ 1.2.1 Access Emergency Notification Fax Management panel for appropriate message (EN Form).
  - ☐ 1.2.2 Ask the State or County Representative if they want Authentication.
  - ☐ 1.2.3 **IF** Authentication is requested:
    - A. Request State or county Representative to provide a number from the Authentication Code list.
    - B. Enter number provided by Agency into AUTHENTICATION # field.
    - C. Select "Get Authentication Code" (the Code Word(s) will appear).
    - D. Provide Code Word(s).
    - E. Select Save to auto-populate EN Form.
  - ☐ 1.2.4 **IF** Authentication is **NOT** requested:
    - A. Enter N/A into AUTHENTICATION # field.
    - B. Select Save to auto-populate EN Form.

## **2. Receiving a Call**

- ☐ 2.1 **IF** receiving a call from off site and identity of party calling is **NOT** known,
  - ☐ 2.1.1 Provide a number from Authentication Code List to caller.
  - ☐ 2.1.2 Obtain word corresponding with number on Authentication Code List from caller.
  - ☐ 2.1.3 Document questions and answers in Communicator's personal log.

**Enclosure 6.4**  
**Fax Instructions**

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## **1. Group Fax Instructions**

- ☐ 1.1 **IF** sending a fax to all counties and state(s) for a site:
  - ☐ 1.1.1 Place ENF face up in Off-site Communicator Fax machine.
  - ☐ 1.1.2. Press appropriate site's one-touch speed dial button:

| Site    | One-touch<br>number | Label  |
|---------|---------------------|--------|
| Catawba | 1                   | CNS Gr |
| McGuire | 2                   | MNS Gr |
| Oconee  | 3                   | ONS Gr |

- ☐ 1.1.3 Press **Start**
- ☐ 1.1.4 Ensure off-site agencies have received fax by returning to Enclosure 6.2, Step 1.3, or individual calls.

## 2. Single Fax Using One-touch Button Instructions

- ☐ 2.1 **IF** sending fax to a single location:
  - ☐ 2.1.1 Place ENF face up in Off-site Communicator Fax machine.
  - ☐ 2.1.2 Press appropriate location's one-touch speed dial button:

|   |
|---|
| <p><b>NOTE:</b> For one-touch numbers 21 through 40, press "21-40" button, then one-touch number.</p> |
|---|

### CATAWBA

| One-touch number | Label   | Agency Name                               |
|------------------|---------|---|
| 4                | NC EOC  | North Carolina WP/EOC                     |
| 5                | SC WP   | South Carolina WP/EOC                     |
| 8                | Gas WP  | Gaston County WP                          |
| 11               | Mec WP  | Mecklenburg County WP                     |
| 12               | Yor WP  | York County WP                            |
| 15               | CNS EQ  | CNS - OPS Training Center                 |
| 16               | CNS Com | CNS TSC Offsite Agency Communicators      |
| 20               | JIC     | Joint Information Center                  |
| 22               | NC W Br | North Carolina EM Western Branch Office   |
| 24               | NC Hwp  | North Carolina Alternate State WP         |
| 25               | SC Hwp  | South Carolina Highway Patrol (WP Backup) |
| 28               | Gas Eoc | Gaston County EOC                         |
| 31               | Mec Eoc | Mecklenburg County EOC                    |
| 32               | ECOC    | Enterprise Crisis Operation Center        |
| 35               | CNS Tsc | Catawba TSC                               |
| 38               | NRC OC  | NRC Headquarters Operations Center        |
| 39               | NRC R2  | NRC Region 2 Operations Center            |

**OR**

**Enclosure 6.4**  
**Fax Instructions**

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**McGUIRE**

| One-touch number | Label   | Agency Name                             |
|------------------|---------|---|
| 4                | NC EOC  | North Carolina WP/EOC                   |
| 6                | Cabb WP | Cabarrus County WP                      |
| 7                | Cata WP | Catawba County WP                       |
| 8                | Gas WP  | Gaston County WP                        |
| 9                | Ired WP | Iredell County WP                       |
| 10               | Lin WP  | Lincoln County WP                       |
| 11               | Mec WP  | Mecklenburg County WP                   |
| 17               | MNS EE  | McGuire Energy Explorium (News Group)   |
| 20               | JIC     | Joint Information Center                |
| 22               | NC W Br | North Carolina EM Western Branch Office |
| 24               | NC Hwp  | North Carolina Alternate State WP       |
| 26               | Cab Eoc | Cabarrus County EOC                     |
| 27               | Cat Eoc | Catawba County EOC                      |
| 28               | Gas Eoc | Gaston County EOC                       |
| 29               | Ire Eoc | Iredell County EOC                      |
| 30               | Lin Eoc | Lincoln County EOC                      |
| 31               | Mec Eoc | Mecklenburg County EOC                  |
| 32               | ECOC    | Enterprise Crisis Operation Center      |
| 37               | MNS Tsc | McGuire TSC                             |
| 38               | NRC OC  | NRC Headquarters Operations Center      |
| 39               | NRC R2  | NRC Region 2 Operations Center          |

**OR**

**OCONEE**

| One-touch number | Label   | Agency Name                               |
|------------------|---------|---|
| 5                | SC WP   | South Carolina WP/EOC                     |
| 13               | Oco WP  | Oconee County WP (LEC)                    |
| 14               | Pic WP  | Pickens County WP (LEC)                   |
| 19               | ONS     | Oconee TSC Offsite Agency Communicators   |
| 20               | JIC     | Charlotte Joint Information Center        |
| 25               | SC Hwp  | South Carolina Highway Patrol (WP Backup) |
| 32               | ECOC    | Enterprise Crisis Operation Center        |
| 33               | Oco Eoc | Oconee County EOC (EMA)                   |
| 34               | Pic Eoc | Pickens County EOC (EMA)                  |
| 38               | NRC OC  | NRC Headquarters Operations Center        |
| 39               | NRC R2  | NRC Region 2 Operations Center            |
| 40               | ONS JIC | Oconee Joint Information Center           |

- ☐ 2.1.3 Press **Start**
- ☐ 2.1.4 Ensure off-site agencies have received fax by returning to Enclosure 6.2, Step 1.3, or individual calls.

### 3. Single Fax Dialing Manually Instructions

- ☐ 3.1 **IF** sending fax to a single location:
  - ☐ 3.1.1 Place ENF face up in Off-site Communicator Fax machine.
  - ☐ 3.1.2 Dial appropriate fax number using keypad.
  - ☐ 3.1.3 Press **Start**

**NOTE:** Georgia Emergency Management Agency (GEMA), Hart County EMA, Elbert County EMA and National Weather Service (NWS) are provided faxed copies of the ENF whenever a Condition A or Condition B exists for a Keowee Hydro Project Dam/Dike. GEMA and NWS phone numbers are available in the Consolidated Emergency Plan Telephone Directory for the Emergency Operations Facility (EOF).

#### **OCONEE - Keowee Hydro Project Dam/Dike**

| Agency         |      | Fax Number                           |
|----------------|------|--------------------------------------|
| GEMA           | dial | 9-1-404-635-7205                     |
| NWS            | dial | 9-1-864-848-5072<br>9-1-864-848-1582 |
| Hart Co. EMA   | dial | 9-1-706-856-5316                     |
| Elbert Co. EMA | dial | 9-1-706-283-2029                     |

- ☐ 3.1.4 Ensure off-site agencies have received fax by verbal communication.

**Lead Offsite Agency Communicator Duties**

- ☐ Sign in on white board in EOF Director's area as "Offsite Agency Communicator."
- ☐ Ensure adequate staffing of Offsite Agency Communicators (OACs).
- ☐ Arrange for 24-hour OAC coverage.
- ☐ Ensure ENF Communicator reviews Enclosure 6.6 (ENF Communicator Duties).
- ☐ Ensure Telephone Communicator reviews Enclosure 6.7 (Telephone Communicator Duties).

## Lead Offsite Agency Communicator Duties

- ☐ Review the following criteria for notifications.

**Initial Notifications**

1. Initial notifications to State(s) and counties must be made within 15 minutes of event declaration time.
2. For upgrade in classification prior to or while transmitting initial message:
  - Notification for lesser emergency classification must be made within 15 minutes of lesser classification declaration time.
  - Agencies must be informed that an upgrade in classification will be coming.
  - Upgraded classification message must be transmitted within 15 minutes of upgraded classification declaration time.
3. Initial messages in General Emergency classification that involve upgrade in PARs shall be communicated to offsite agencies as soon as possible and within 15 minutes.

**Follow-up Notifications**

1. Follow-up notifications to State(s) and Counties must be made as follows:

|   |  |  |
|---|--|--|
| <u>Catawba</u><br>-For NOUE, ALERT, SAE, or GE, every hour until the emergency is terminated.   | <u>McGuire</u><br>-For NOUE, every 4 hours until the emergency is terminated.<br>-For ALERT, SAE, or GE, every hour until the emergency is terminated.   | <u>Oconee</u><br>-For NOUE, a follow-up is not required.<br>-For ALERT, SAE, or GE, every 60 minutes until the emergency is terminated.  |
| <b>OR</b>   |  |  |
| <u>Catawba</u><br>-If there is any significant change to the situation, make notification as soon as possible. See NOTE* below for example of changes.  | <u>McGuire</u><br>-If there is any significant change to the situation, make notification as soon as possible. See NOTE* below for example of changes.   | <u>Oconee</u><br>-If there is any significant change to the situation, make notification as the change occurs. See NOTE* below for examples of changes.                          |
| <b>OR</b>   |  |  |
| <u>Catawba</u><br>-As agreed upon with an Emergency Management official from <u>each</u> individual agency. Documentation shall be maintained for any agreed upon schedule change.<br>-Interval <u>shall not</u> be greater than 4 hours to any agency. | <u>McGuire</u><br>-As agreed upon with an Emergency Management official from each individual agency. Documentation shall be maintained for any agreed upon schedule change.<br>-Interval for ALERT, SAE, or GE <u>shall not</u> be greater than 2 hours to any agency. | <u>Oconee</u><br>-Required every 60 minutes from notification time on Line 2 for ALERT, SAE, or GE.<br>-This frequency <u>may be</u> changed at the request of offsite agencies. |

\*NOTE: Examples of significant plant changes include: evacuation/relocation of site personnel, fires onsite, MERT activation and/or injured personnel transported offsite, start/stop of a release, chemical spills, explosions, any event that would cause or require offsite agency response, or Condition "A" or "B" for Keowee Hydro Project Dams/Dikes (Oconee only).

2. If follow-up is due and an upgrade to higher classification is declared, there is no need to complete follow-up ENF. Offsite agencies must be notified that follow-up is being superseded by upgrade to a higher classification and information will be provided.

## Lead Offsite Agency Communicator Duties

- ☐ Inform EOF Director informed of progress in preparing to take turnover from site.

**NOTE:** In addition to Emergency Action Level information entered on Line 4 of Emergency Notification Form (ENF), any event, which has the potential to affect the public, needs to be reported on Line 13. The following list is not all-inclusive. Each event should be carefully evaluated and discussed with the EOF Director. Notification to Offsite Agencies should take place as soon as possible.

- Other unrelated classifiable events (for example, during an Alert, an event which, by itself would meet the conditions for an Unusual Event)
- Major/Key Equipment Out of Service
- Emergency response actions underway
- Fire(s) onsite
- Flooding related to the emergency
- Explosions
- Loss of Offsite Power
- Core Uncovery
- Core Damage
- Medical Emergency Response Team activation
- Personnel injury or death
- Transport of injured individual(s) offsite - specify whether contaminated or not
- Site Evacuation/relocation of site personnel
- Saboteurs/Intruders/Suspicious devices/Threats
- Chemical or Hazardous Material Spills or Releases
- Extraordinary noises audible offsite
- Events causing/requiring offsite agency response
- Events causing increased media attention.
- Event which has the potential to affect the public.
- Protective Action Recommendation change and reason for the change.
- **IF** an upgrade in classification occurs prior to or while transmitting an initial message, include "Upgrade to follow" (if time permits, otherwise, this information can be made verbally).

- ☐ Monitor events for potential inclusion on ENF.
- ☐ Ensure events (e.g., injuries, fires, intruders, etc.) are reported and later ENFs follow-up on events and report resolution ("close the loop").
- ☐ Coordinate Communications function with EOF Director.

**Lead Offsite Agency Communicator Duties**

**NOTE:** It takes several minutes to calculate doses so be sure that Dose Assessment has a 15 minute warning their data is needed. If they aren't comfortable with their data or if they run low on time, get the Radiological Assessment Manager involved at once.

- ☐ Coordinate with Radiological Assessment Manager to ensure notification time requirements are met.
- ☐ Ensure all messages (ENFs) are accurate, complete, and timely.
- ☐ Inform EOF Director that approval is needed several minutes before transmittal deadline, if possible.
- ☐ Review manual ENF prior to providing to EOF Director for approval, allowing EOF Director sufficient time to revise if needed.
- ☐ Serve as a backup Telephone Communicator if all agencies are not on the primary communications tool.
- ☐ Document topics that should be discussed in critique.
- ☐ Participate in critique.
- ☐ Determine what role was filled by each communicator and document any comments/questions concerning their actions.

**Enclosure 6.6**  
**ENF Communicator Duties**

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- ☐ Complete ENFs **PER** Enclosure 6.1.
- ☐ Ensure Lead OAC and EOF Director review draft ENF.
- ☐ Copy and distribute each signed ENF promptly.

## Telephone Communicator Duties

- ☐ Review the following criteria for notifications.

**Initial Notifications**

1. Initial notifications to State(s) and counties must be made within 15 minutes of event declaration.
2. For upgrade in classification prior to or while transmitting initial message:
  - Notification for lesser emergency classification must be made within 15 minutes of lesser classification declaration time.
  - Agencies must be informed that an upgrade in classification will be coming.
  - Upgraded classification message must be transmitted within 15 minutes of upgraded classification declaration time.
3. Initial messages in General Emergency classification that provide upgrade in PARs shall be communicated to offsite agencies as soon as possible and within 15 minutes.

**Follow-up Notifications**

1. Follow-up notifications to State(s) and Counties must be made as follows:

|   |  |   |
|---|--|---|
| <u>Catawba</u><br>-For NOUE, ALERT, SAE, or GE, every hour until emergency is terminated. | <u>McGuire</u><br>-For NOUE, every 4 hours until emergency is terminated.<br>-For ALERT, SAE, or GE, every hour until emergency is terminated. | <u>Oconee</u><br>-For NOUE, a follow-up is not required.<br>-For ALERT, SAE, or GE, every 60 minutes until emergency is terminated. |
|---|--|---|

**OR**

|  |  |  |
|--|--|--|
| <u>Catawba</u><br>-If there is any significant change to the situation, make notification as soon as possible. See NOTE* below for examples. | <u>McGuire</u><br>-If there is any significant change to the situation, make notification as soon as possible. See NOTE* below for examples. | <u>Oconee</u><br>-If there is any significant change to the situation, make notification as the change occurs. See NOTE* below for examples. |
|--|--|--|

**OR**

|   |   |  |
|---|---|--|
| <u>Catawba</u><br>-As agreed upon with an Emergency Management official from <u>each</u> individual agency. Documentation shall be maintained for any agreed upon schedule change.<br>-Interval <u>shall not</u> be greater than 4 hours to any agency. | <u>McGuire</u><br>-As agreed upon with an Emergency Management official from each individual agency. Documentation shall be maintained for any agreed upon schedule change.<br>-Interval for ALERT, SAE or GE <u>shall not</u> be greater than 2 hours to any agency. | <u>Oconee</u><br>-Required every 60 minutes from notification time on Line 2 for ALERT, SAE, or GE.<br>-This frequency <u>may be</u> changed at the request of offsite agencies. |
|---|---|--|

\*NOTE: Examples of significant plant changes include: evacuation/relocation of site personnel, fires onsite, MERT activation and/or injured personnel transported offsite, chemical spills, start/stop of a release, explosions, any event that would cause or require offsite agency response, or Condition "A" or "B" for Keowee Hydro Project Dams/Dikes (Oconee only).

2. If follow-up is due and an upgrade to higher classification is declared, do not complete follow-up ENF. Offsite agencies must be notified that follow-up is being superseded by upgrade to a higher classification and information will be provided.

**Enclosure 6.7**  
**Telephone Communicator Duties**

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- ☐ Send messages per Enclosure 6.2.

**NOTE:** This applies to all ENFs regardless of site or origination - Control Room, TSC, and EOF.

- ☐ Update EOF Director's Area and OAC status boards as each ENF is completed with next message due number and time.
- ☐ Continue to track event and required transmittal times.

**Enclosure 6.8**  
**ENF Quick Reference**

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|                  |  |
|------------------|--|
| Line 1<br>*      | <ul style="list-style-type: none"> <li>Select/Mark <b>A</b> for <b>Drill</b> or <b>B</b> for <b>Actual Event</b>.</li> <li>Ensure or Record Message Number</li> </ul>  |
| Line 2           | Select/Mark <b>A</b> for <b>Initial</b> or <b>B</b> for <b>Follow-up</b><br>NOTE: Notification Time/Date and Authentication will be completed during message transmission and populated from the WebEOC Emergency Notification Fax Management panel.   |
| Line 3<br>*      | <ul style="list-style-type: none"> <li>Ensure or record appropriate <b>Site</b> (e.g., Catawba)</li> <li>Ensure, Record, or Select appropriate <b>Confirmation Phone Number</b></li> </ul>   |
| Line 4<br>*      | Select/Ensure correct <b>Event Classification</b><br>Select/Ensure correct <b>EAL #</b><br>Select/Ensure <b>EAL Description</b> matches EAL Number   |
| Line 5<br>*      | <b>Protective Action Recommendations</b> <ul style="list-style-type: none"> <li><b>IF</b> Unusual Event, Alert, or Site Area Emergency <b>AND NO</b> Condition A for Keowee Hydro Project Dam/Dike, Select/Mark <b>A</b> None</li> <li><b>IF</b> Site Area Emergency <b>AND</b> Condition A for Keowee Hydro Project Dam/Dike, Select/Mark <b>B</b> Evacuate and <b>E</b> Other per Enclosure 6.1, Step 2.10.6</li> <li><b>IF</b> General Emergency, Select/Mark <b>B</b> Evacuate and <b>C</b> Shelter, then Select/Record appropriate zones. If circumstances warrant, Select/Mark <b>D</b> KI and/or <b>E</b> Other as appropriate</li> </ul>                                 |
| Line 6 *         | <b>Emergency Release</b> Select/Mark as appropriate: <b>A</b> - None <b>B</b> - Is Occurring <b>C</b> - Has Occurred   |
| Line 7           | <b>Release Significance</b> <ul style="list-style-type: none"> <li><b>IF</b> No Release is in progress Select/Mark <b>A</b> None</li> <li><b>IF</b> Release is known, Select/Mark <b>B</b> (Within normal operating limits) OR <b>C</b> (Above normal operating limits) as appropriate.</li> <li><b>IF</b> release significance is unknown, Select/Mark <b>D</b> (Under evaluation)</li> </ul>   |
| Line 8           | <b>Event Prognosis</b> Select/Mark <b>Improving</b> , <b>Stable</b> , or <b>Degrading</b> as appropriate.  |
| Line 9<br>*      | <b>Meteorological Data</b> (Not required on initial notifications but if available and time allows)<br>Record/import Met data by one of the following methods: <ul style="list-style-type: none"> <li>Select the "Import Plant/MET" Data button on the WebEOC EN Form to auto-populate Line 9.</li> <li>Record Wind Speed and Wind Direction along with Precipitation and Stability Class.</li> <li>Verify imported information is current.</li> </ul>   |
| Line 10<br>*     | Select/Mark <b>A</b> for <b>Declaration</b> or <b>B</b> for <b>Termination</b> as appropriate and enter the time utilizing one of the following methods. <ul style="list-style-type: none"> <li><b>IF</b> using WebEOC ENF select Get Date button, <b>THEN</b>, adjust as needed.</li> <li>Manually type or write time and date of declaration or termination as appropriate.</li> </ul>   |
| Line 11<br>*     | <b>Affected Units</b> - <b>IF</b> event affects the emergency class on more than one unit equally, select or check All. <b>IF</b> the event only affects one unit or one unit has a higher emergency class, select or check appropriate unit.  |
| Line 12          | <b>Unit Status</b> - <b>IF</b> Unit is Shutdown, record 0% power <b>AND</b> Shutdown Time and Date. <b>IF</b> Unit is <b>NOT</b> Shutdown, record % power only. <ul style="list-style-type: none"> <li>Select the "Import Plant/MET Data" button to auto-populate Line 12.A, % Power if the unit is <b>NOT</b> shutdown.</li> </ul>  |
| Line 13          | <b>Remarks:</b> Record any additional information. (Reference Enclosure 6.5)   |
| Lines 14<br>- 16 | <b>Radiological Information</b> <ul style="list-style-type: none"> <li>Select the "Import Dose Projection Data" button to auto-populate Lines 14, 15, and 16.</li> <li><b>IF</b> using WebEOC Electronic Notification Form, verify imported information is correct.</li> <li><b>IF</b> using Manual Form and release is occurring, have RAM provide information.</li> </ul>  |
| Line 17          | Complete Line 17 per one of the following methods: <ul style="list-style-type: none"> <li><b>IF</b> using WebEOC ENF, (1) Assure all sections are complete by clicking Validate button at bottom of page, (2) Enter Approver's name in "Approved by" block (3) Select appropriate title from pull down menu, (4) Enter Time &amp; Date, (5) Record name of Communicator making call on "Notified by" line. (6) Print form and have EOF Director review and sign, and (7) Select "Approve" at bottom of form.</li> <li><b>IF</b> using Manual Form, (1) Print form (2) Have EOF Director review and complete Line 17, and (3) Record name of Communicator making call.</li> </ul> |
|                  | Fax form per instructions in Enclosure 6.2.  |

\* Performance Indicator Accuracy Measure

**Emergency Notification Form Completion Briefing Order**

**Line 1 - Communicator**

**Line 2 - Communicator**

**Line 3 - Communicator**

**Line 4 - Accident Assessment Manager**

**Line 5 - Radiation Assessment Manager**

**Line 6 - Radiation Assessment Manager**

**Line 7 - Radiation Assessment Manager**

**Line 8 - Accident Assessment Manager**

**Line 9 - Radiation Assessment Manager**

**Line 10 - Accident Assessment Manager**

**Line 11 - Accident Assessment Manager**

**Line 12 - Accident Assessment Manager**

**Line 13 - Any one**

**Line 14 - Radiation Assessment Manager**

**Line 15 - Radiation Assessment Manager**

**Line 16 - Radiation Assessment Manager**

**Line 17 - EOF Director**

**Enclosure 6.9**  
**Turnover Checklist**

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- ☐ Obtain most recent notification
- ☐ Emergency Classification (check):  
☐ NOUE, ☐ Alert, ☐ Site Area Emergency, ☐ General Emergency  
Emergency Declared at (time): \_\_\_\_\_
- ☐ Last Emergency Notification Form Message # \_\_\_\_\_  
Transmitted at \_\_\_\_\_ (time)  
Using (check): ☐ WebEOC, ☐ Pre-printed ENF, ☐ Manual ENF
- ☐ Next Message Due at \_\_\_\_\_ (time)
- ☐ Alternate Facility Activated: TSC: ☐ Yes ☐ No OSC: ☐ Yes ☐ No

**Communications Status**

**Catawba**

| <b>Indicate which agencies have been contacted</b> | <b><u>Yes</u></b> | <b><u>No</u></b> |
|--|-------------------|------------------|
| York County WP/EOC                                 |                   |                  |
| Mecklenburg County WP/EOC                          |                   |                  |
| Gaston County WP/EOC                               |                   |                  |
| North Carolina EOC/WP                              |                   |                  |
| South Carolina WP/EOC                              |                   |                  |
| South Carolina DHEC                                |                   |                  |

**McGuire**

| <b>Indicate which agencies have been contacted</b> | <b><u>Yes</u></b> | <b><u>No</u></b> |
|--|-------------------|------------------|
| Gaston County WP/EOC                               |                   |                  |
| Lincoln County WP/EOC                              |                   |                  |
| Iredell County WP/EOC                              |                   |                  |
| Mecklenburg County WP/EOC                          |                   |                  |
| Catawba County WP/EOC                              |                   |                  |
| Cabarrus County WP/EOC                             |                   |                  |
| North Carolina EOC/WP                              |                   |                  |

**Enclosure 6.9**  
**Turnover Checklist**

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**Oconee**

| <b>Indicate which agencies have been contacted</b> | <b><u>Yes</u></b> | <b><u>No</u></b> |
|--|-------------------|------------------|
| Oconee County Law Enforcement Center               |                   |                  |
| Oconee County Emergency Management Agency          |                   |                  |
| Pickens County Law Enforcement Center              |                   |                  |
| Pickens County Emergency Management Agency         |                   |                  |
| South Carolina WP/EOC                              |                   |                  |
| South Carolina DHEC                                |                   |                  |

☐ Communications Problems:

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☐ Site Evacuation: ☐ Yes ☐ No Time Evacuation Initiated: \_\_\_\_\_

Number of persons being evacuated: \_\_\_\_\_

**Site Evacuation Location:**

**Catawba**

| <b>Indicate site evacuation location:</b>    | <b><u>Yes</u></b> | <b><u>No</u></b> |
|--|-------------------|------------------|
| Site Allen (Plant Allen, Belmont, NC)        |                   |                  |
| Site York (York Operations Center, York, SC) |                   |                  |
| Home   |                   |                  |

**McGuire**

| <b>Indicate relocation site:</b>                     | <b><u>Yes</u></b> | <b><u>No</u></b> |
|--|-------------------|------------------|
| TTC (Bldg. 7403)                                     |                   |                  |
| Cowans Ford Dam Service Bay                          |                   |                  |
| Mt. Holly Training Center                            |                   |                  |
| McGuire Office Complex (MOC) Auditorium (Bldg. 7422) |                   |                  |
| Home   |                   |                  |

**Enclosure 6.9**  
**Turnover Checklist**

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**Oconee**

| <b>Indicate site evacuation location:</b> | <b><u>Yes</u></b> | <b><u>No</u></b> |
|---|-------------------|------------------|
| Daniel High School                        |                   |                  |
| Keowee Elementary School                  |                   |                  |
| Home                                      |                   |                  |

- ☐ Other Pertinent Information (examples: fires/explosions onsite, MERT activation, injured personnel transported offsite, chemical spills, Condition "A" or "B" for Keowee Hydro dams/dikes, other events requiring offsite agency support)

\_\_\_\_\_

\_\_\_\_\_

- ☐ Turnover Completed by \_\_\_\_\_
- at (date/time): \_\_\_\_\_