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 CRUTCHFIELD, D. Operating Reactors Branch 5

SUBJECT: Responds to NRC draft evaluation for radiological portion of
 SEP Topic XV-19, re. LOCA doses, per 810929 ltr. Final
 assessment should include details of analysis assumptions.

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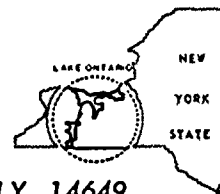
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JOHN E. MAIER
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October 29, 1981

Director of Nuclear Reactor Regulation
Attention: Mr. Dennis M. Crutchfield, Chief
Operating Reactors Branch No. 5
U. S. Nuclear Regulatory Commission
Washington, D.C. 20555

Subject: SEP Topic XV-19, LOCA Doses
R. E. Ginna Nuclear Power Plant
Docket No. 50-244



Dear Mr. Crutchfield:

This letter is in response to the NRC draft evaluation for the radiological portion of SEP Topic XV-19, which was provided by your letter dated September 29, 1981. We recommend that the final topic assessment include additional details concerning analysis assumptions. Also, we have identified one error in the draft evaluation, which does not affect the conclusions of the evaluation.

The evaluation states that we committed to purge less than 90 hours per year. At the NRC's request, an earlier commitment to this effect was superseded by our letter dated May 29, 1980 which included the commitment that "all purging and venting times [will be limited] to as low as achievable." Based on this current commitment, we believe that the assumption of closed purge valves is still appropriate.

Additional detail should be provided in the assessment. Spray flow rate and its effectiveness should be identified separately from recirculation ventilation filtration system flow rate and effectiveness. In this regard, it appears that no credit has been permitted for removal of organic iodine. This should be clarified. A reference for the 78% of containment which is assumed to be affected by iodine removal systems should be provided. The basis for a 50 gal/min seal leakage should also be provided.

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ROCHESTER GAS AND ELECTRIC CORP.

SHEET NO.

DATE October 29, 1981

TO Mr. Dennis M. Crutchfield, Chief

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With regard to removing the delay from the NaOH addition, we note that doses are acceptable even with the delay. Although the delay timer does exist, all reference to it and any suggestions regarding its use have been deleted from the Ginna Emergency Procedures. Further, operator training is based on not overriding NaOH addition. Since the delay timer is adjustable down to 10 seconds, an alternative to removing the delay would be to adjust it to a short enough time to provide adequate assurance that the NaOH will not be overridden. However, as noted in the assessment, there is no safety reason why such an adjustment would be required. The decisions to make the adjustment will be discussed during the Ginna Integrated Assessment.

Very truly yours,


John E. Maier



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