

CONTROL BLOCK:

| | | | | | | |
|--|--|--|--|--|--|---|
| | | | | | | 1 |
|--|--|--|--|--|--|---|

 (PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

CON'T

| | |
|---|---|
| 0 | 1 |
| 7 | 8 |

REPORT SOURCE

| | | | | | | | | | | | | | | | | | | | | | | | | |
|---------------|----|---|---|---|---|---|---|---|----|------------|---|---|---|---|-------------|----|----|---|---|---|---|---|---|----|
| L | 6 | 0 | 5 | 0 | 0 | 0 | 3 | 1 | 6 | 7 | 1 | 1 | 1 | 9 | 7 | 9 | 8 | 1 | 2 | 1 | 9 | 7 | 9 | 9 |
| 60 | 61 | | | | | | | | 68 | 69 | | | | | | 74 | 75 | | | | | | | 80 |
| DOCKET NUMBER | | | | | | | | | | EVENT DATE | | | | | REPORT DATE | | | | | | | | | |

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

| | | | | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|--|----|
| 0 | 7 | | | | | | | | | | |
| 0 | 8 | | | | | | | | | | |
| 7 | 8 | 9 | | | | | | | | | 80 |

| | | | | | | | | | | | | | | | |
|----------------------|----|----------------------|----|--------------------------------|----|---------------------------|----|-------------------------------|----|---------------------------|----|-----------------------------------|----|--------------------|----|
| 09 | | SYSTEM CODE I B | | CAUSE CODE E | | CAUSE SUBCODE A | | COMPONENT CODE I N S T R U | | | | COMP. SUBCODE X | | VALVE SUBCODE Z | |
| 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| LER/RO REPORT NUMBER | | EVENT YEAR 7 9 | | SEQUENTIAL REPORT NO. 0 4 6 | | OCCURRENCE CODE 0 3 | | REPORT TYPE L | | REVISION NO. 0 | | ACTION TAKEN A | | FUTURE ACTION Z | |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 |
| SHUTDOWN METHOD Z | | EFFECT ON PLANT Z | | HOURS 0 0 0 0 | | ATTACHMENT SUBMITTED Y | | NPRD-4 FORM SUB. Y | | PRIME COMP. SUPPLIER N | | COMPONENT MANUFACTURER W 1 2 0 | | 39 | 40 |
| 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 |

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

7 8 9 FACILITY STATUS (28) 10 11 12 % POWER (29) 13 14 15 OTHER STATUS (30) 16 17 18 METHOD OF DISCOVERY (31) 19 20 21 DISCOVERY DESCRIPTION (32) 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50

ACTIVITY CONTENT
RELEASED OF RELEASE AMOUNT OF ACTIVITY (35)
1 6 Z (33) Z (34) NA
7 8 9 10 11 44

LOCATION OF RELEASE (36)
NA
45 80

| PERSONNEL EXPOSURES | | | | | | | | | |
|---------------------|---|------|------|--------------|--|--|--|--|--|
| NUMBER | | | TYPE | DESCRIPTION | | | | | |
| 1 | 7 | 0 | 0 | 0 | | | | | |
| | | (37) | Z | (38) NA (39) | | | | | |

| 7 | | 8 | | 9 | | 11 | | 12 | | 13 | | 80 | |
|--------------------|--|---|--|---|--|------------------|--|----|--|------|--|----|--|
| PERSONNEL INJURIES | | | | | | | | | | | | | |
| NUMBER | | | | | | DESCRIPTION (41) | | | | | | | |
| 1 | | 8 | | 0 | | 0 | | 0 | | (40) | | NA | |
| 1 | | 8 | | 0 | | 0 | | 0 | | (40) | | NA | |

| | | | | | | |
|--|---|--|----|---|-------------------------------|------|
| 7 | 8 | 9 | 11 | 12 | | 80 |
| | | | | | LOSS OF OR DAMAGE TO FACILITY | (43) |
| | | | | | TYPE DESCRIPTION | |
| <div style="border: 1px solid black; padding: 2px; width: fit-content;">1 9</div> | | <div style="border: 1px solid black; padding: 2px; width: fit-content;"><div>Z</div>(42)</div> | | NA 7912270598 | | |

| | | | | | |
|-----------|---|-------------|------|------|--------------|
| 7 | 8 | 9 | 10 | | 80 |
| PUBLICITY | | | | (45) | NRC USE ONLY |
| ISSUED | | DESCRIPTION | | | |
| 2 | 0 | N | (44) | NA | |

PHONE: 616-465-5901



SUPPLEMENT TO LER # 79-046/03L-0

SUPPLEMENT TO CAUSE DESCRIPTION

FOR THE DURATION OF THE REFUELING PERIOD. AFTER REFUELING
WAS COMPLETED, PERMANENT CABLES WERE INSTALLED.



10-11-68

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