

DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
SECOND INTERVAL, THIRD PERIOD, FIRST OUTAGE (1991)  
CLASS 1 ALL STATUS COMPONENTS

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REACTOR PRESSURE VESSEL

				N I O	
ZONE NUMBER: 001				S O N G T	
				T R S E H	
SUMMARY EXAMINATION AREA				A E I O E	REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T C G H R **CALIBRATION BLOCK**
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3PSRV1 REF. DWG. NO. 3-V01					
000100	3-WR-18 FLANGE TO UPPER SHELL CTMT, 58' LEVEL	B-A B1.30	UT 0 UT 45 UT 45T UT 60 UT 60T UT 50/70 UT 50/70T	TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0	C X - - - 1/11/91 - PERFORMED BY SWRI, EXAMS 33, X - - - 34R, 35R, 36R, 37, 38, AND 39; LIMITED X - - - EXAM DUE TO FLANGE X - - - X - - - **UT-1** X - - - X - - -
000200	3-WR-33 UPPER SHELL TO INTERMEDIATE SHELL CTMT, 58' LEVEL	B-A B1.11	UT 0 UT 45 UT 45T UT 60 UT 60T UT 50/70 UT 50/70T	TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0	C X - - - 1/11/91 EXAMS 25, 26, 27, 28, 29, 30, X - - - 31, AND 32: EXAMS 25A, 27A, 28A, 29A, X - - - 30A, 31A AND 32A RUN DUE TO FAILED X - - - CALIBRATION CHECK X - - - **UT-1** X - - - X - - -
000300	3-WR-10 INTERMEDIATE SHELL TO LOWER SHELL CTMT, 58' LEVEL	B-A B1.11	UT 0 UT 45 UT 45T UT 60 UT 60T UT 50/70 UT 50/70T	TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0	C X - - - 1/11/91 - PERFORMED BY SWRI, EXAMS 17, X - - - 18, 19, 20, 21, 22, 23, AND 24 X - - - X - - - X - - - **UT-1** X - - - X - - -
000400	3-WR-31 LOWER SHELL TO LOWER HEAD RING CTMT, 58' LEVEL	B-A B1.21	UT 0 UT 45 UT 45T UT 60 UT 60T UT 50/70 UT 50/70T	TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0	C X - - - 1/11/91 - EXAM PERFORMED BY SWRI, EXAMS X - - - 9, 10, 10A, 11, 12, 12A, 13, 13A, 14, X - - - 15, 16, AND 16A; LIMITED EXAM DUE TO X - - - ANTIROTATION LUGS X - - - **UT-1** X - - - X - - -
000500	3-WR-9 LOWER HEAD RING TO BOTTOM HEAD CTMT, 58' LEVEL	B-A B1.21	UT 0 UT 45 UT 45T UT 60 UT 60T UT 50/70 UT 50/70T	TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0 TKY-AUT 15/0	C X - - - 1/8/91 - PERFORMED BY SWRI, EXAMS 1, 2, X - - - 3, 4, 5, 5A, 6, 7, 8, AND 8A; LIMITED X - - - EXAM DUE TO INSTRUMENTATION TUBES X - - - X - - - **UT-1, UT-3** X - - - X - - -

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PDR ADOCK 05000251  
Q PDR



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NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E
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					REMARKS
					**CALIBRATION BLOCK**
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3PSRV1 REF. DWG. NO. 3-V04					
000600	3-DI-A	B-D	UT 0	TKY-AUT 15/0	C X - - - 1/11/91 - PERFORMED BY SWRI, EXAMS 42,
	INLET NOZZLE TO SHELL @ 80	B3.90	UT 5	TKY-AUT 15/0	X - - - 43R, AND 54, GEOMETRIC REFLECTOR FROM
	DEG.		UT 45	TKY-AUT 15/0	- - X - THE NOZZLE SUPPORT LUG
	CTHT, 58' LEVEL		UT 45T	TKY-AUT 15/0	X - - -
			UT 60T	TKY-AUT 15/0	X - - - **UT-1, UT-15, UT-32**
			UT 50/70	TKY-AUT 15/0	X - - -
			UT 50/70T	TKY-AUT 15/0	X - - -
000700	3-DO-A	B-D	UT 0	TKY-AUT 15/0	A X - - - 1/11/91 - PERFORMED BY SWRI, EXAMS 44,
	OUTLET NOZZLE TO SHELL @ 130	B3.90	UT 45	TKY-AUT 15/0	- - X - 45, AND 56; LIMITED EXAM DUE TO INTEGRAL
	DEG.		UT 45T	TKY-AUT 15/0	X - - - EXTENSION; SUPPORT LUG AND INTEGRAL
	CTHT, 58' LEVEL		UT 60T	TKY-AUT 15/0	X - - - EXTENSION GEOMETRY
			UT 50/70	TKY-AUT 15/0	X - - - **UT-1, UT-15, UT-32**
			UT 50/70T	TKY-AUT 15/0	X - - -
000800	3-DI-C	B-D	UT 0	TKY-AUT 15/0	C X - - - 01/91 - PERFORMED BY SWRI, EXAMS 46, 47
	INLET NOZZLE TO SHELL @ 200	B3.90	UT 5	TKY-AUT 15/0	X - - - AND 58; NOZZLE SUPPORT LUG GEOMETRY
	DEG.		UT 45	TKY-AUT 15/0	- - X -
	CTHT, 58' LEVEL		UT 45T	TKY-AUT 15/0	X - - -
			UT 60T	TKY-AUT 15/0	X - - - **UT-1, UT-15, UT-32**
			UT 50/70	TKY-AUT 15/0	X - - -
			UT 50/70T	TKY-AUT 15/0	X - - -
000900	3-DO-C	B-D	UT 0	TKY-AUT 15/0	A X - - - 1/11/91 - PERFORMED BY SWRI, EXAMS 48,
	OUTLET NOZZLE TO SHELL @ 250	B3.90	UT 45	TKY-AUT 15/0	- - X - 49, AND 60; INTEGRAL EXTENSION AND
	DEG.		UT 45T	TKY-AUT 15/0	X - - - SUPPORT LUG GEOMETRY; LIMITED EXAM DUE
	CTHT, 58' LEVEL		UT 60T	TKY-AUT 15/0	X - - - TO INTEGRAL EXTENSION
			UT 50/70	TKY-AUT 15/0	X - - - **UT-1, UT-15, UT-32**
			UT 50/70T	TKY-AUT 15/0	X - - -
001000	3-DI-B	B-D	UT 0	TKY-AUT 15/0	C X - - - 1/11/91 - PERFORMED BY SWRI, EXAMS 50,
	INLET NOZZLE TO SHELL @ 320	B3.90	UT 5	TKY-AUT 15/0	X - - - 51, AND 62; NOZZLE SUPPORT LUG GEOMETRY
	DEG.		UT 45	TKY-AUT 15/0	- - X -
	CTHT, 58' LEVEL		UT 45T	TKY-AUT 15/0	X - - -
			UT 60T	TKY-AUT 15/0	X - - - **UT-1, UT-15, UT-32**
			UT 50/70	TKY-AUT 15/0	X - - -
			UT 50/70T	TKY-AUT 15/0	X - - -

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NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS	
					T C G H R	**CALIBRATION BLOCK**	
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3PSRV1 REF. DWG. NO. 3-V04							
001100	3-DO-B	B-D	UT 0	TKY-AUT 15/0	A X - - -	1/11/91 - PERFORMED BY SWRI, EXAMS 40,	
	OUTLET NOZZLE TO SHELL @ 10	B3.90	UT 45	TKY-AUT 15/0	- - X -	41, AND 52; LIMITED EXAM DUE TO INTEGRAL	
	DEG.		UT 45T	TKY-AUT 15/0	X - - -	EXTENSION, NOZZLE SUPPORT LUG GEOMETRY	
	CTMT, 58' LEVEL		UT 60T	TKY-AUT 15/0	X - - -		
			UT 50/70	TKY-AUT 15/0	X - - -	**UT-1, UT-15, UT-32**	
			UT 50/70T	TKY-AUT 15/0	X - - -		
001200	3-DI-A-IRS	B-D	UT 50/70	TKY-AUT 15/0	C X - - -	1/8/91 - PERFORMED BY SWRI, EXAMS 55 AND	
	INLET NOZZLE INNER RADIUS	B3.100				64	
	CTMT, 58' LEVEL					**UT-32**	
001300	3-DO-A-IRS	B-D	UT 50/70	TKY-AUT 15/0	A X - - -	1/6/91 - PERFORMED BY SWRI, EXAM 57	
	OUTLET NOZZLE INNER RADIUS	B3.100					
	CTMT, 58' LEVEL					**UT-32**	
001400	3-DI-C-IRS	B-D	UT 50/70	TKY-AUT 15/0	C X - - -	1/8/91 - PERFORMED BY SWRI, EXAMS 59 AND	
	INLET NOZZLE INNER RADIUS	B3.100				65	
	CTMT, 58' LEVEL					**UT-32**	
001500	3-DO-C-IRS	B-D	UT 50/70	TKY-AUT 15/0	A X - - -	1/6/91 - PERFORMED BY SWRI, EXAM 61	
	OUTLET NOZZLE INNER RADIUS	B3.100		TKY-AUT15			
	CTMT, 58' LEVEL					**UT-32**	
001600	3-DI-B-IRS	B-D	UT 50/70	TKY-AUT 15/0	C X - - -	1/8/91 - PERFORMED BY SWRI, EXAMS 63	
	INLET NOZZLE INNER RADIUS	B3.100				AND 66	
	CTMT, 58' LEVEL					**UT-32**	
001700	3-DO-B-IRS	B-D	UT 50/70	TKY-AUT 15/0	A X - - -	1/6/91 - PERFORMED BY SWRI, EXAM 53	
	OUTLET NOZZLE INNER RADIUS	B3.100		TKY-AUT15			
	CTMT, 58' LEVEL					**UT-32**	



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NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE		A E I O E	REMARKS
						T C G H R	**CALIBRATION BLOCK**
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<u>INTERIOR OF REACTOR VESSEL REF. DWG. NO. 3-V01</u>							
002100	VESSEL INSTRUMENTATION PENETRATIONS CTMT, 58' LEVEL	B-N-1 B13.10	VT-3	ISI-88	C X - - -		1/91 - VT COMPLETE, EXAMINED 100% OF PENETRATIONS  **N/A**
002200	RPV OUT NOZ TO CORE BARREL IR MATTING SU CTMT, 58' LEVEL	B-N-1 B13.10	VT-3	ISI-88	C X - - -		1/91 - VT COMPLETE, EXAMINED NOZZLES AT 10, 130, AND 250 DEGREES  **N/A**
002500	RPV INLET NOZZLE INNER RADIUS CTMT, 58' LEVEL	B-N-1 B13.10	VT-3	ISI-88	C X - - -		1/91 - VT COMPLETE, EXAMINED NOZZLES AT 80, 200, AND 320 DEGREES  **N/A**
002800	VESSEL BOTTOM  CTMT, 58' LEVEL	B-N-1 B13.10	VT-3	ISI-88	C X - - -		1/91 - VT COMPLETE, EXAMINED 100% OF BOTTOM  **N/A**
003000	RV TO HEAD MATING SURFACE ON VESSEL CTMT, 58' LEVEL	B-N-1 B13.10	VT-3	ISI-88	C X - - -		1/91 - VT COMPLETE, EXAMINED 100% OF SURFACE  **N/A**
003100	REACTOR VESSEL RADIAL SUPPORT KEYWAYS CTMT, 58' LEVEL	B-N-2 B13.31	VT-3	ISI-88	C X - - -		1/91 - VT COMPLETE, EXAMINED KEYWAYS AT 0, 90, 180, AND 270 DEGREES, LIGHT RUB MARKS AT 90 DEGREES **N/A**
003500	THERMOCOUPLES, CONNECTIONS SUPPORT INST CTMT, 58' LEVEL	B-N-3 B13.32	VT-3	ISI-88	C X - - -		1/91 - VT COMPLETE, EXAMINED THERMOCOUPLE CONDUITS AT 59, 149, 239, AND 329 DEGREES **N/A**

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					T C G H R **CALIBRATION BLOCK**

INTERIOR OF REACTOR VESSEL REF. DWG. NO. 3-V01

003900	INSTRUMENTATION COLUMNS	B-N-3	VT-3	ISI-88	C X - - - 1/91 - VT COMPLETE, EXAMINED COLUMNS AT 59, 149, 239, AND 329 DEGREES
	CTMT, 58' LEVEL	B13.32			**N/A**

004300	UPPER SUPPORT PLATE KEYWAYS	B-N-3	VT-3	ISI-88	C X - - - 1/91 - VT COMPLETE, EXAMINED ALL LOCATIONS
	CTMT, 58' LEVEL	B13.32			**N/A**

004700	FLOW MIXER DEVICES AND FASTENERS	B-N-3	VT-3	ISI-88	C X - - - 1/91 - VT COMPLETE, EXAMINED ENTIRE 360 DEGREES
	CTMT, 58' LEVEL	B13.32			**N/A**

INTERIOR OF REAVTOR VESSEL REF. DWG. NO. 3-V01

005100	SUPPORT COLUMNS AND FASTENERS	B-N-3	VT-3	ISI-88	C X - - - 1/91 - VT COMPLETE, EXAMINED ENTIRE 360 DEGREES
	CTMT, 58' LEVEL	B13.32			**N/A**

INTERIOR OF REACTOR VESSEL REF. DWG. NO. 3-V01

005500	GUIDE TUBES (EXTERIOR ONLY) AND FASTENERS	B-N-3	VT-3	ISI-88	C X - - - 1/91 - VT COMPLETE, EXAMINED ENTIRE 360 DEGREES
	CTMT, 58' LEVEL	B13.32			**N/A**

RPV CORE SUPPORT STRUCTURE REF. DWG. NO. 003-V01

005900	UPPER CORE PLATE AND FUEL ASSEMBLY GUIDE PINS	B-N-3	VT-3	ISI-88	C X - - - 1/91 - VT COMPLETE, EXAMINED ENTIRE 360 DEGREES
	CTMT	B13.32			**N/A**

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NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G M R	**CALIBRATION BLOCK**
<u>INTERIOR OF REACTOR VESSEL REF. DWG. NO. 3-V01</u>						
006300	UPPER CORE PLATE ALIGN. KEYWAYS AND FASTEN CTMT, 58' LEVEL	B-N-3 B13.32	VT-3	ISI-88	C X - - -	1/91 - VT COMPLETE, EXAMINED KEYWAYS AT 0, 90, 180, AND 270 DEGREES, LIGHT RUB MARKS **N/A**
006800	UPPER CORE PLATE  CTMT, 58' LEVEL	B-N-3 B13.32	VT-3	ISI-88	C X - - -	1/91 - VT COMPLETE, EXAMINED ENTIRE 360 DEGREES  **N/A**
007200	CORE BARREL FLANGE FLOW NOZZLES CTMT, 58' LEVEL	B-N-3 B13.32	VT-3	ISI-88	C X - - -	1/91 - VT COMPLETE, EXAMINED ENTIRE 360 DEGREES  **N/A**
007600	CORE BARREL AND VESSEL HEAD ALIGN. PINS CTMT, 58' LEVEL	B-N-3 B13.32	VT-3	ISI-88	C X - - -	1/91 - VT COMPLETE, EXAMINED ALL LOCATIONS  **N/A**
008000	FLANGE TO UPPER BARREL WELD  CTMT, 58' LEVEL	B-N-3 B13.32	VT-3	ISI-88	C X - - -	1/91 - VT COMPLETE, EXAMINED ENTIRE 360 DEGREES OF WELD  **N/A**
008800	UPPER CORE PLATE ALIGNMENT KEYS IN CORE BARREL CTMT, 58' LEVEL	B-N-3 B13.32	VT-3	ISI-88	C X - - -	1/91 - VT COMPLETE, EXAMINED KEYS AT 0, 90, 180, AND 270 DEGREES, LIGHT RUB MARKS **N/A**
009200	BAFFLE BOLTS AND LOCKING DEVICES IN TOP TWO ROWS OF FORMERS CTMT, 58' LEVEL	B-N-3 B13.32	VT-3	ISI-88	C X - - -	1/91 - COMPLETE, EXAMINED ENTIRE 360 DEGREES OF BOLTING AND LOCKING DEVICES  **N/A**

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INTERIOR OF REACTOR VESSEL REF. DWG. NO. 3-V01

009600	LOWER CORE PLATE FOR DEBRIS	B-N-3	VT-3	ISI-88	C X - - -	1/91 - VT COMPLETE, EXAMINED 100% OF PLATE
	CTMT, 58' LEVEL	B13.32				
						**N/A**

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NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
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INTERIOR OF REACTOR VESSEL REF. DWG. NO. 3-V01

009700	LOWER CORE PLATE SUPPORT	B-N-3	VT-3	ISI-88	C X - - -	1/91 - VT COMPLETE, EXAMINED ALL BOLTING
	COLUMN BOLTING	813.32				
	CTMT, 58' LEVEL					

\*\*N/A\*\*



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010100	LOWER CORE PLATE INSTRUMENTA- TION GUIDE TUBE NUTS CTMT, 58' LEVEL	B-N-3 B13.32	VT-3	ISI-88	C C	1/91 - VT COMPLETE, EXAMINED ENTIRE 360 DEGREES OF NUTS  **N/A**	
010500	LOWER CORE PLATE ACCESS COVER BOLTING CTMT 58' LEVEL	B-N-3 B13.32	VT-3	ISI-88	C C	1/91 - VT COMPLETE, EXAMINED 100% OF BOLTING  **N/A**	
010600	LOWER CORE PLATE FUEL ASSEMBLY GUIDE PINS CTMT, 58' LEVEL	B-N-3 B13.32	VT-3	ISI-88	C X - - -	1/91 - VT COMPLETE, EXAMINED ENTIRE 360 DEGREES OF PINS  **N/A**	
1000	IRRADIATION SPECIMEN BASKET ATTACHMENT WELDS CTMT, 58' LEVEL	B-N-2 B13.30	VT-3	ISI-88	C X - - -	1/91 - VT COMPLETE, EXAMINED WELDS AT 30, 40, 50, 150, 230, 270, 280, AND 290 DEGREES **N/A**	
011800	OUTLET NOZZLE TO VESSEL INTERFACE SURFACES CTMT, 58' LEVEL	B-N-3 B13.32	VT-3	ISI-88	C X - - -	1/91 - VT COMPLETE, EXAMINED NOZZLE SURFACES AT 10, 130, AND 250 DEGREES  **N/A**	
012200	CORE BARREL RADIAL SUPPORT KEYS CTMT, 58' LEVEL	B-N-3 B13.32	VT-3	ISI-88	C X - - -	1/91 - VT COMPLETE, EXAMINED KEYS AT 0, 90, 180, AND 270 DEGREES  **N/A**	
012600	SECONDARY CORE SUPPORT STRUCTURE CTMT, 58' LEVEL	B-N-3 B13.32	VT-3	ISI-88	C X - - -	1/91 - VT COMPLETE, EXAMINED ENTIRE 360 DEGREES OF STRUCTURE  **N/A**	





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INTERIOR OF REACTOR VESSEL REF. DWG. NO. 3-V01

013000	THERMAL SHIELD TO CORE BARREL	B-N-3	VT-3	ISI-88	C X - - -	1/91 - VT COMPLETE, EXAMINED BOTTOM
	ATTACHMENTS AT BOTTOM	813.32				ATTACHMENTS AT 35, 90, 140, 210, 270,
	(FLEXURE)					AND 330 DEGREES
	CTMT, 58' LEVEL					

\*\*N/A\*\*



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NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T	C	G	H	R
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<u>3PSRV1 REF. DWG. NO. 3-V02</u>									
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014500	3-WH-12	B-A	MT	NDE 2.2-126	C	-	-	-	X
	FLANGE TO DOME WELD	B1.40	MT	NDE 2.2-132	X	-	-	-	
	CTMT, 58' LEVEL		MT	91-1007	X	-	-	-	
			UT 0	NDE 5.14-3	X	-	-	-	
			UT 45	NDE 5.14-3	X	-	-	-	
			UT 45T	NDE 5.14-3	X	-	-	-	
			UT 60	NDE 5.14-3	X	-	-	-	
			UT 60T	NDE 5.14-3	X	-	-	-	
			UT 0	NDE 5.18-13	X	-	-	-	
			CNR	91-3-052					
			NCR	N91-0372					
			PWO	WA910403093259					

REACTOR VESSEL INTERIOR REF. DWG. NO. 003-V01

014505	VESSEL TO CLOSURE HEAD MATING	B-N-1	VT-3	NDE 4.3-294	C	-	-	X 8/26/91 - VT COMPLETE, MECHANICAL DAMAGE
	SURFACE ON HEAD	B13.10	CNR	91-3-060				FROM STUD HOLE 38 THROUGH 41, FOUND
	CTMT		NCR	90-120				DURING PREVIOUS OUTAGES, NCR 90-120
								ACCEPTS AS-IS
								**N/A**

SYSTEM NO. 43 BOLTING REF. DWG. NO. 003-V12

014520	3-CH-S-41 THRU 58	B-G-1	UT 60	NDE 5.7-12	C	X	-	- 3/19/91 - UT COMPLETE; 3/20/91 - VT
	RPV STUDS	B6.30	VT-1	NDE 4.1-153	X	-	-	COMPLETE; 3/21/91 - MT COMPLETE,
	CTMT		MT	NDE 2.2-130	X	-	-	EXAMINED STUDS 41 THROUGH 58
								**UT-11**
014525	EXTRA STUDS	B-G-1	MT	NDE 2.2-133	A	X	-	- 9/3/91 - MT AND UT COMPLETE ON STUDS
	RPV STUDS	B6.30	MT	NDE 2.2-134	X	-	-	F-18 AND K-22, 9/4/91 - MT AND UT
	CTMT		MT	NDE 2.2-135	X	-	-	COMPLETE ON STUDS E-15 AND E-17, 9/5/91
			MT	NDE 2.2-136	X	-	-	- MT AND UT COMPLETED ON STUDS A-2, A-4,
			UT 60	NDE 5.7-16	X	-	-	A-9, B-5, C-11, D-13, F-19, G-20, H-21,
			UT 60	NDE 5.7-17	X	-	-	M-23, AND M-24, BASELINE EXAMINATIONS
			UT 60	NDE 5.7-18	X	-	-	**UT-11**
			UT 60	NDE 5.7-19	X	-	-	

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REACTOR PRESSURE VESSEL CLOSURE HEAD

ZONE NUMBER: 002		ASME			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G H R	**CALIBRATION BLOCK**

SYSTEM NO. 43 BOLTING REF. DWG. NO. 003-V12

014540	3-CH-N-41 THRU 58 RPV NUTS CTHT	B-G-1 B6.10	MT UT 45	NDE 2.2-129 NDE 5.10-7	C X - - - X - - -	3/21/91 - MT AND UT COMPLETE, EXAMINED NUTS 41 THROUGH 58  **UT-25**
014560	3-CH-LW-41 THRU 58 RPV LARGE WASHERS CTHT	B-G-1 B6.50	VT-1	NDE 4.1-154	C X - - -	3/20/91 - VT COMPLETE, EXAMINED WASHERS 41 THROUGH 58  **N/A**
014580	3-CH-SW-41 THRU 58 RPV SMALL WASHERS CTHT	B-G-1 B6.50	VT-1	NDE 4.1-155	C X - - -	3/20/91 - VT COMPLETE, EXAMINED SMALL WASHERS 41 THROUGH 58  **N/A**

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STEAM GENERATOR C PRIMARY SIDE

ZONE NUMBER: 005		ASHE				N I O	
		SEC. XI				S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM				T R S E H
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T C G H R	A E I O E	REMARKS
-----	-----	-----	-----	-----	-----	-----	-----

REF. DWG. NO. 3-V09C

041510	3-SGC-SL-1 THRU 4 SUPPORT LEGS	F-A F1.10	VT-3 CNR	NDE 4.3-283 91-3-057	C - - - X	3/21/91 - VT COMPLETE, EVIDENCE OF MOVEMENT BY ELONGATED HOLE, CHIPPED CONCRETE, ACCEPTED AS-IS BY ENGINEERING, ELONGATED HOLE IS PART OF DESIGN **N/A**
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PRESSURIZER WELD LOCATIONS

ZONE NUMBER: 006		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**

SYSTEM NO. 41 REF. DWG. NO. 3-V05

042000	04-PRZ-SUPPORT	F-A	VT-3	NDE 4.3-234	C X - - - 2/11/91 - VT COMPLETE
	PRESSURIZER VESSEL SUPPORT	F1.10			
	CTHT				

\*\*N/A\*\*

042100	03-PCW-4	B-B	UT 0	NDE 5.1-36	C X - - - 2/26/91 - UT COMPLETE, LIMITED
	HEAD TO LOWER SHELL	82.11	UT 45	NDE 5.1-36	X - - - EXAMINATION DUE TO 1" PIPING
	CTHT		UT 45T	NDE 5.1-36	X - - - (INSTRUMENTATION) AND LUGS ABOVE AND
			UT 60	NDE 5.1-36	X - - - BELOW WELD
			UT 60T	NDE 5.1-36	X - - - **UT-8**

042200	03-PLW-3	B-B	UT 0	NDE 5.1-35	C X - - - 2/26/91 - UT COMPLETE, 12 INCHES OF LONG
	LOWER SHELL LONG SEAM	82.12	UT 45	NDE 5.1-35	X - - - SEAM EXAMINED
	CTHT		UT 45T	NDE 5.1-35	X - - -
			UT 60	NDE 5.1-35	X - - -
			UT 60T	NDE 5.1-35	X - - - **UT-6**

SYSTEM NO. 41 REF. DWG. NO. 3-V06

043100	RV-03-551B-IR	B-D	UT 60	NDE 5.13-11	C X - - - 2/11/91 - UT COMPLETE
	SAFETY NOZZLE INNER RADIUS	83.120			
	SECTION				

\*\*UT-8\*\*

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REACTOR COOLANT SYSTEM LOOP A INTERMEDIATE LEG

ZONE NUMBER: 007	ASHE				N I O	
	SEC. XI				S O N G T	
SUMMARY EXAMINATION AREA	CATGY	EXAM			T R S E H	
NUMBER IDENTIFICATION	ITEM NO	METHOD	PROCEDURE		A E I O E	REMARKS
-----	-----	-----	-----	-----	T C G M R	**CALIBRATION BLOCK**

SYSTEM NO. 41, 5613-P-766-S SH. 1 OF 1 REF. DWG. NO. 3-A01

044500	31"-RCS-1301-10	B-J	PT	NDE 3.3-380	C X - - -	3/13/91 - PT COMPLETE, FAINT INDICATIONS
	ELBOW TO PUMP CASING	B9.11	UT 45	NDE 5.5-23	- - X -	AT TOES OF WELD, 360 DEGREES
	CTMT		UT 45T	NDE 5.5-23	X - - -	INTERMITTENT, DETERMINED TO BE NON-RELEVANT; 3/14/91 - UT COMPLETE, ROOT GEOMETRY **UT-26**



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REACTOR COOLANT SYSTEM LOOP A HOT LEG

ZONE NUMBER: 008		ASME			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G H R	**CALIBRATION BLOCK**

SYSTEM NO. 41, 5613-P-766-S SH. 1 OF 1 REF. DWG. NO. 3-A02

044700	29"-RCS-1304-1 RPV NOZZLE TO PIPE CTMT	B-F B5.10	UT 0 UT 45 UT 45RL UT 45RLT UT 50/70 UT 50/70T	TKY-AUT 14/0 TKY-AUT 14/0 TKY-AUT 14/0 TKY-AUT 14/0 TKY-AUT 14/0 TKY-AUT 14/0	A X - - - - - X - - - X - - - X - X - - - X - - -	1/11/91 - PERFORMED BY SWRI, EXAMS 69, 75, 81, 81S, AND 87, WELD METAL/ INCONEL/BASE MATERIAL GEOMETRY  **UT-32**
044800	29"-RCS-1304-2 PIPE TO PIPE CTMT, 25'8"	B-J B9.11	PT UT 45 UT 45T	NDE 3.3-383 NDE 5.5-25 NDE 5.5-25	C X - - - - - X - X - - -	3/19/91 - PT COMPLETE, NON-RELEVANT INDICATIONS CAUSED BY GRINDING MARKS; UT COMPLETE, ROOT GEOMETRY **UT-12, UT-46**
044900	2"-RCS-1304-BC-2 2" BRANCH CONNECTION TO 2"-SI-1305 CTMT, 26"	B-J B9.32	PT	NDE 3.3-383	C X - - -	3/19/91 - PT COMPLETE

\*\*N/A\*\*

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REACTOR COOLANT SYSTEM LOOP A COLD LEG

ZONE NUMBER: 009	ASME				N I O	
	SEC. XI				S O N G T	
SUMMARY EXAMINATION AREA	CATGY	EXAM			T R S E H	
NUMBER IDENTIFICATION	ITEM NO	METHOD	PROCEDURE		A E I O E	REMARKS
-----	-----	-----	-----	-----	T C G H R	**CALIBRATION BLOCK**
SYSTEM NO. 41, 5613-P-766-S SH. 1 OF 1 REF. DWG. NO. 3-A03						
045500 2"-RCS-1307-BC-1 2" 2" BRANCH CONNECTION CTMT, 25'8"	B-J B9.32	PT	NDE 3.3-379	C X - - -	3/13/91 - PT COMPLETE	**N/A**
045700 10"-RCS-1307-BC-2 BRANCH CONNECTION TO 10" SI-1301 CTMT, 25'8"	B-J B9.31	PT UT 45 UT 45T	NDE 3.3-379 NDE 5.5-22 NDE 5.5-22	C X - - - - - X - X - - -	3/13/91 - PT AND UT COMPLETE, INNER RADIUS GEOMETRY	**UT-12, UT-46**
045800 3"-RCS-1307-BC-3 BRANCH CONNECTION TO 3" CH-1302 CTMT, 25'8"	B-J B9.32	PT	NDE 3.3-379	C X - - -	3/13/91 - PT COMPLETE	**N/A**
046000 27.5"-RCS-1307-14 ELBOW TO NOZZLE CTMT, 25'8"	B-F B5.10	UT 0 UT 50/70 UT 50/70T	TKY-AUT 14/0 TKY-AUT 14/0 TKY-AUT 14/0	P X - - - X - - - X - - -	1/11/91 - PERFORMED BY SWRI, EXAMS 68 AND 74; SURFACE EXAM TO BE PERFORMED NEXT OUTAGE	**UT-32**



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REACTOR COOLANT SYSTEM LOOP B INTERMEDIATE LEG

ZONE NUMBER: 010		ASME			N I O
		SEC. XI			S O N G T
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**
<u>SYSTEM NO. 41, 5614-P-766-S SH. 1 OF 2 REF. DWG. NO. 3-A04</u>					
046900	31"-RCS-1302-10	B-J	PT	NDE 3.3-381	C X - - - 3/15/91 - PT COMPLETE, NON-RELEVANT
	ELBOW TO PUMP CASING	B9.11	UT 45	NDE 5.5-24	- - X - INDICATIONS AT TOE OF WELD; 3/15/91 - UT
	CTHT, 17.0833'		UT 45T	NDE 5.5-24	X - - - COMPLETE, ROOT GEOMETRY
					**UT-26**

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REACTOR COOLANT SYSTEM LOOP B HOT LEG

ZONE NUMBER: 011		ASME			N I O
		SEC. XI			S O N G T
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 41, 5613-P-766-S SH. 1 OF 1 REF. DWG. NO. 3-A05

047100	29"-RCS-1305-1	B-F	UT 0	TKY-AUT 14/0	A X - - - 1/91 - PERFORMED BY SWR1, EXAMS 67, 73,
	RPV NOZZLE TO PIPE	85.10	UT 45	TKY-AUT 14/0	- - X - 79, 79S, AND 85, WELD/BASE METAL/INCONEL
	CTMT, 25'8"		UT 45RL	TKY-AUT 14/0	- - X - INTERFACE GEOMETRY
			UT 45RLT	TKY-AUT 14/0	X - - -
			UT 50/70	TKY-AUT 14/0	X - - - **UT-32**
			UT 50/70	TKY-AUT 14/0	X - - -

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REACTOR COOLANT SYSTEM LOOP B COLD LEG

ZONE NUMBER: 012		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E
					T C G H R
					REMARKS
					**CALIBRATION BLOCK**

SYSTEM NO. 41, 5613-P-766-S SH. 1 OF 1 REF. DWG. NO. 3-A06

048000	2"-RCS-1306-BC-1	B-J	PT	NDE 3.3-391	C X - - -	3/22/91 - PT COMPLETE
	2" BRANCH CONNECTION	B9.32				
	CTMT, 25'8"					

\*\*N/A\*\*

048600	27.5"-RCS-1306-14	B-F	UT 0	TKY-AUT 14/0	P X - - -	1/11/91 - PERFORMED BY SWR1, EXAMS 72
	ELBOW TO RPV NOZZLE	B5.10	UT 50/70	TKY-AUT 14/0	X - - -	AND 78; SURFACE EXAM TO BE PERFORMED
	CTMT, 25'8"		UT 50/70T	TKY-AUT 14/0	X - - -	NEXT OUTAGE

\*\*UT-32\*\*



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REACTOR COOLANT SYSTEM LOOP C INTERMEDIATE LEG

ZONE NUMBER: 013		ASME			N I O
		SEC. XI			S O N G T
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**

SYSTEM NO. 41, 5613-P-766-S SH. 1 OF 1 REF. DWG. NO. 3-A07

048800	31"-RCS-1303-5	B-F	PT	NDE 3.3-378	C - X - X	3/8/91 - PT COMPLETE, 1 ACCEPTABLE ROUND
	STEAM GENERATOR NOZZLE TO	B5.70	PT	NDE 3.3-395	- X - -	AND 3 LINEAR; 3/11/91 - UT COMPLETE,
	ELBOW		UT 45	NDE 5.5-21	X - - -	ROOT GEOMETRY; 7/23/91 - RE-EXAM OF PT
	CTHT, 17.0833'		UT 45T	NDE 5.5-21	X - - -	INDICATIONS COMPLETE, LINEARS WERE
			CNR	91-3-049		DETERMINED TO BE A NORMAL SURFACE
			NCR	N91-0341		CONDITION
						**UT-26**
049000	31"-RCS-1303-7	B-J	PT	NDE 3.3-377	C - - - X	3/8/91 - PT COMPLETE, 2 ACCEPTABLE ROUND
	PIPE TO ELBOW	B9.11	UT 45	NDE 5.5-21	- - X -	INDICATIONS; 3/11/91 UT COMPLETE, ROOT
	CTHT, 17.0833'		UT 45T	NDE 5.5-21	X - - -	GEOMETRY
						**UT-12, UT-26, UT-46**







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REACTOR COOLANT SYSTEM LOOP C COLD LEG

ZONE NUMBER: 015		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**
-----					

SYSTEM NO. 41, 5613-P-766-S SH. 1 OF 1 REF. DWG. NO. 3-A09

051000	27.5"-RCS-1309-14	B-F	UT 0	TKY-AUT 14/0	P X - - -	1/91 - PERFORMED BY SWRI, EXAMS 70 & 76;
	ELBOW TO RPV NOZZLE	B5.10	UT 50/70	TKY-AUT 14/0	X - - -	SURFACE EXAMINATION SCHEDULED FOR NEXT
	CTMT, 25'8"		UT 50/70T	TKY-AUT 14/0	X - - -	OUTAGE
						**UT-32**

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REACTOR COOLANT SYSTEM PRESSURIZER SURGE LINE

ZONE NUMBER: 016		ASME	N I O			
		SEC. XI	S O N G T			
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H		
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G M R	**CALIBRATION BLOCK**
<u>SYSTEM NO. 41, 5613-P-766-S SH. 1 OF 1 REF. DWG. NO. 3-A10</u>						
051200	14"-RC-1302 & 12"-RC-1301 VISUAL GENERAL FOR EVIDENCE OF MOVEMENT CTHT	--- --- ---	VT-1 CNR NCR WCAP	NDE 4.1-151 91-3-048 N90-0092 12959	C - - - X	2/28/91 - VISUAL EXAMINATION OF ENTIRE LINE, INCOMPLETE THREAD ENGMENT, BENT RODS, BORIC ACID, DAMAGED INSULATION, SIMILAR TO 1988 AND 1990 EXAMINATIONS, ACCEPTABLE PER ENGINEERING EVALUATION **N/A**
051600	3-RC-F12 WHIP RESTRAINT CTHT	--- --- ---	VT-3 CNR NCR WCAP	NDE 4.3-274 91-3-048 N90-0092 12959	C - - - X	2/28/91 - VT COMPLETE, INCOMPLETE THREAD ENGAGEMENT, BENT ANCHOR BOLT, 1/10" GAP BETWEEN BASE SUPPORT AND CEILING, ACCEPTED AS-IS BY ENGINEERING EVALUATION, THIS RESTRAINT IS NOT A SECTION XI SUPPORT **W=D**
051700	3-RC-F13 WHIP RESTRAINT CTHT	--- --- ---	VT-3 CNR NCR WCAP	NDE 4.3-272 91-3-048 N90-0092 12959	C - - - X	2/28/91 - VT COMPLETE BENT ANCHOR BOLT, CHIPPED CONCRETE, DENTED INSULATION, DIAGONAL MEMBER BENT, ACCEPTABLE AS-IS, THIS IS NOT A SECTION XI SUPPORT **W=C, SWRI C**
051900	VS-IG-12 DUAL SPRING HANGER CTHT, 25'8"	F-C F3.50	VT-3 CNR NCR WCAP	NDE 4.3-271 91-3-048 N90-0092 12959	A - - - X	2/28/91 - VT COMPLETE, DRAWING DISCREPENCY ON NUMBER OF NUTS ON SPRING CAN **N/A**
052100	3-RC-F14 WHIP RESTRAINT CTHT	--- --- ---	VT-3 CNR NCR WCAP	NDE 4.3-273 91-3-048 N90-0092 12959	C - - - X	2-28-91 VT-3 COMPLETE; CHIPPED CONCRETE, DENTED INSULATION **W=A, SWIR A**

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REACTOR COOLANT SYSTEM PRESSURIZER SAFETY LOOP A

ZONE NUMBER: 017		ASME			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
-----		-----	-----	-----	T C G H R	**CALIBRATION BLOCK**

SYSTEM NO. 41, 5613-P-660-S SH. 3 OF 3 REF. DWG. NO. 3-A11

053800	VALVE 3-551A BOLTING	B-G-2	VT-1	NDE 4.1-139	C X - - -	2/7/91 - VT COMPLETE, 8 STUDS
	VALVE BOLTING	87.50				
	CTMT					

\*\*N/A\*\*

053900	4"-RC-1301-FB.	B-G-2	VT-1	NDE 4.1-140	A X - - -	2/7/91 - VT COMPLETE, 8 STUDS
	FLANGE BOLTING	87.50				
	CTMT					

\*\*N/A\*\*

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REACTOR COOLANT SYSTEM PRESSURIZER SAFETY LOOP B

ZONE NUMBER: 018		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**

SYSTEM NO. 41, 5613-P-660-S SH. 3 OF 3 REF. DWG. NO. 3-A12

054100	4"-RC-1302-1A	B-F	PT	NDE 3.3-362	C X - - - 2/7/91 - PT COMPLETE; 2/8/91 - UT
	NOZZLE TO SAFE END	B5.40	UT 45	NDE 5.11-3	- - X - COMPLETE, ROOT GEOMETRY, ANGLE SHIFT, 45
	CTHT		UT 45T	NDE 5.11-3	X - - - DEGREE EXAM ACHIEVED 50% COVERAGE AND 60
			UT 60	NDE 5.11-3	- - X - DEGREE EXAM ACHIEVED 25% COVERAGE
					**UT-53**

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REACTOR COOLANT SYSTEM PRESSURIZER SAFETY LOOP C

ZONE NUMBER: 019		ASME			N I O
		SEC. XI			S O N G T
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**

SYSTEM NO. 41, 5613-P-660-S SH. 2 OF 3 REF. DWG. NO. 3-A13

055500	4"-RC-1303-1A	B-F	PT	NDE 3.3-361	C X - - - 2/7/91 - PT COMPLETE; 2/8/91 - UT
	NOZZLE TO SAFE END	85.40	UT 45	NDE 5.11-4	- - X - COMPLETE, ROOT GEOMETRY AND ANGLE SHIFT,
	CTMT		UT 60	NDE 5.11-4	- - X - 45 DEGREE EXAM ACHIEVED 50% COVERAGE AND
					60 DEGREE EXAM ACHIEVED 25% COVERAGE
					**UT-53**

056600	4"-RC-1303-FB	B-G-2	VT-1	NDE 4.1-138	C X - - - 2/7/91 - VT COMPLETE, 8 STUDS
	FLANGE BOLTING	87.50			
	CTMT				

\*\*N/A\*\*

056700	VALVE 3-551C BOLTING	B-G-2	VT-1	NDE 4.1-143	C X - - - 2/8/91 - VT COMPLETE, 8 STUDS, 8 NUTS
	VALVE BOLTING	87.50			
	CTMT				

\*\*N/A\*\*

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TURKEY POINT NUCLEAR PLANT UNIT 3  
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REACTOR COOLANT SYSTEM PRESSURIZER SPRAY TO PRZ.

				N I O	
ZONE NUMBER: 020				S O N G T	
				T R S E H	
SUMMARY EXAMINATION AREA				A E I O E	REMARKS
NUMBER	IDENTIFICATION	CATGY	EXAM	T C G H R	**CALIBRATION BLOCK**
		ITEM NO	METHOD	PROCEDURE	

SYSTEM NO. 41 & 47, 5613-P-661-S SH. 4 OF 4 REF. DWG. NO. 3-A14

057800	DETAIL C RIGID STRUT CTMT, 21'-11"	F-B F2.10	VT-3 CNR	NDE 4.3-253 91-3-035	C - - - X	2/13/91 - VT COMPLETE, EVIDENCE OF PIPE MOVEMENT, MISALIGNMENT, DAMAGED INSULATION, LOOSE PIPE CLAMP; FOLLOWING INSULATION REMOVAL, CLAMP VERIFIED TO BE TIGHT; ACCEPTED AS-IS BY ENGINEERING EVALUATION **N/A**
060900	ABANDONED VALVE VALVE CTMT	---	VT-1 VT-1 CNR PWO PC/M	NDE 4.1-142 NDE 4.1-163 91-3-018 WA910211155513 90-0499	C - - - X X - - -	2/7/91 - VT-1 COMPLETE; EVIDENCE OF LEAKAGE, THIS CONDITION WILL BE CORRECTED UNDER PC/M 90-0499; 5/8/91 - VT COMPLETE ON NEW BOLTING; EXAMINED 8 STUDS AND 8 NUTS **N/A**
061100	4"-RC-1304-FW18 ELBOW TO TEE CTMT	B-J B9.11	PT UT 45 UT 45T UT 60	NDE 3.3-364 NDE 5.4-71 NDE 5.4-71 NDE 5.4-71	C X - - - X - - - X - - - - - X -	2/7/91 - PT COMPLETE; 2/14/91 - UT COMPLETE, ROOT GEOMETRY, 45 AND 60 DEGREE EXAMS ACHIEVED 70% COVERAGE **UT-53**
061300	4"-RC-1304-20 TEE TO TEE CTMT	B-J B9.11	PT UT 45 UT 45T UT 60	NDE 3.3-364 NDE 5.4-69 NDE 5.4-69 NDE 5.4-69	C X - - - - - X - X - - - - - X -	2/7/91 - PT COMPLETE; 2/8/91 - UT COMPLETE, ROOT AND COUNTERBORE **UT-53**
061500	4"-RC-1304-22 REDUCING TEE TO ELBOW CTMT	B-J B9.11	PT UT 45 UT 45T UT 60	NDE 3.3-364 NDE 5.4-69 NDE 5.4-69 NDE 5.4-69	C X - - - - - X - X - - - - - X -	2/7/91 - PT COMPLETE; 2/8/91 - UT COMPLETE, ROOT AND COUNTERBORE **UT-53**
061700	4"-RC-1304-23 ELBOW TO PIPE CTMT	B-J B9.11	UT 45 UT 45T UT 60	NDE 5.4-69 NDE 5.4-69 NDE 5.4-69	P X - - - X - - - X - - -	2/8/91 - UT COMPLETE **UT-53**



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REACTOR COOLANT SYSTEM PRESSURIZER SPRAY TO PRZ.

ZONE NUMBER: 020	ASME				N I O	
	SEC. XI				S O N G T	
SUMMARY EXAMINATION AREA	CATGY	EXAM			T R S E H	
NUMBER IDENTIFICATION	ITEM NO	METHOD	PROCEDURE		A E I O E	REMARKS
-----	-----	-----	-----	-----	T C G H R	**CALIBRATION BLOCK**

SYSTEM NO. 41 & 47, 5613-P-661-S SH. 4 OF 4 REF. DWG. NO. 3-A14

062000	4"-RC-1304-26	B-J	PT	NDE 3.3-360	C - - - X	2/7/91 - PT COMPLETE, 3 ACCEPTABLE ROUND
	PIPE TO SAFE-END	89.11	UT 45	NDE 5.4-69	- - X -	INDICATIONS; 2/8/91 - UT COMPLETE,
	CTMT		UT 45T	NDE 5.4-69	X - - -	COUNTERBORE GEOMETRY
			UT 60	NDE 5.4-69	- - X -	

\*\*UT-53\*\*

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REACTOR COOLANT SYSTEM PRESSURIZER SPRAY LINE

ZONE NUMBER: 021		ASME			N I O
		SEC. XI			S O N G T
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 41 & 47, 5613-P-661-S SH. 4 OF 4 REF. DWG. NO. 3-A15

066600	4"-RC-1305-13	B-J	PT	NDE 3.3-372	C X - - -	2/25/91 - PT COMPLETE, FAINT PINK
	PIPE TO ELBOW	89.11	UT 45	NDE 5.4-73	- - X -	INDICATION AT TOE OF WELD, CONSIDERED TO
	CTMT		UT 45T	NDE 5.4-73	X - - -	BE NON-RELEVANT; 2/25/91 - UT COMPLETE,
			UT 60	NDE 5.4-73	X - - -	ROOT GEOMETRY
						**UT-53**
068500	4"-RC-1305-19	B-J	PT	NDE 3.3-365	C X - - -	2/14/91 - PT AND UT COMPLETE, ROOT
	PIPE TO TEE	89.11	UT 45	NDE 5.4-72	X - - -	GEOMETRY, LIMITED EXAMINATION UPSTREAM
	CTMT		UT 45T	NDE 5.4-72	X - - -	DUE TO TEE CONFIGURATION, 60% COVERAGE
			UT 60	NDE 5.4-72	- - X -	ON THE UPSTREAM SIDE, 100% COVERAGE ON
						THE DOWNSTREAM SIDE
						**UT-53**

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REACTOR COOLANT SYSTEM PRESSURIZER RELIEF LINE

ZONE NUMBER: 022		ASME			N I O		
		SEC. XI			S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H		
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS	
					T C G H R	**CALIBRATION BLOCK**	
<u>SYSTEM NO. 41, 5613-P-660-S SH. 1 OF 3 REF. DWG. NO. 3-A16</u>							
069100	4"-RC-1306-4 ELBOW TO PIPE CTMT	B-J B9.11	PT UT 45 UT 45T UT 60	NDE 3.3-363 NDE 5.4-70 NDE 5.4-70 NDE 5.4-70	C X - - - X - - - X - - - X - - -	2/7/91 - PT COMPLETE; 2/8/91 - UT COMPLETE	
						**UT-53**	
069400	4"-RC-1306-7 TEE TO REDUCER CTMT	B-J B9.11	PT UT 45 UT 45T UT 60	NDE 3.3-363 NDE 5.4-70 NDE 5.4-70 NDE 5.4-70	C X - - - X - - - X - - - X - - -	2/7/91 - PT COMPLETE; 2/8/91 - UT COMPLETE, LIMITED EXAMINATION DUE TO BRANCH CONNECTION, 83% COVERAGE ACHIEVED	
						**UT-53**	
069500	3-RCH-27 SPRING HANGER CTMT, 71'9"	F-C F3.50	VT-3,4 VT-3 CNR NCR PC/M CWO	NDE 4.3-229 M-91-5568 91-3-019 N91-0189 90-381 300161	C - - - X X - - -	2/7/91 - VT COMPLETE, BENT ROD AND LOOSE LOCK NUT, COLD SETTING DOES NOT AGREE WITH AS-BUILT DRAWING, SUPPORT WAS REWORKED UNDER PC/M, DISCREPENCIES WERE CORRECTED	
						**N/A**	
070700	3"-RC-1304-1 REDUCER TO ELBOW CTMT	B-J B9.21	PT	NDE 3.3-363	C X - - -	2/7/91 - PT COMPLETE	
						**N/A**	
071700	3"-RC-1305-3 ELBOW TO ELBOW CTMT	B-J B9.21	PT	NDE 3.3-363	C X - - -	2/7/91 - PT COMPLETE	
						**N/A**	
071900	VALVE 3-455C VALVE BOLTING CTMT	B-G-2 B7.70	VT-1	NDE 4.1-141	C X - - -	2/7/91 - VT COMPLETE	
						**N/A**	



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WASTE DISPOSAL SYSTEM - LIQUID, RC LOOP A DRAIN

ZONE NUMBER: 026		ASME	N I . O		
		SEC. XI	S O N G T		
		CATGY	EXAM	T R S E H	
SUMMARY	EXAMINATION AREA	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
NUMBER	IDENTIFICATION				T C G H R **CALIBRATION BLOCK**
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SYSTEM NO. 61, 5613-P-671-S SH. 1 OF 7 REF. DWG. NO. 3-A22

077500	2"-RC-1301-2	B-J	PT	NDE 3.3-373	C X - - - 2/25/91 - PT COMPLETE
	PIPE TO ELBOW	B9.40			
	CTHT				

\*\*\*N/A\*\*\*

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WASTE DISPOSAL SYSTEM - LIQUID, RC LOOP B DRAIN

ZONE NUMBER: 027		ASME	N I O			
		SEC. XI	S O N G T			
		CATGY	EXAM	T R S E H		
SUMMARY	EXAMINATION AREA	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
NUMBER	IDENTIFICATION				T C G M R	**CALIBRATION BLOCK**
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SYSTEM NO. 61, 5613-P-671-S SH. 4 OF 7 REF. DWG. NO. 3-A23

078500	2"-RC-1302-1	B-J	PT	NDE 3.3-374	C X - - -	2/25/91 - PT COMPLETE
	BRANCH CONNECTION TO PIPE	89.40				
	CTMT					

\*\*N/A\*\*

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WASTE DISPOSAL SYSTEM - LIQUID, RC LOOP C DRAIN

ZONE NUMBER: 028		ASME		N I O	
		SEC. XI		S O N G T	
SUMMARY EXAMINATION AREA		CATGY EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOO	PROCEDURE	A E I O E REMARKS
				T C G H, R	**CALIBRATION BLOCK**

SYSTEM NO. 61, 5613-P-671-S SH. 5 OF 7 REF. DWG. NO. 3-A24

079600	2"-RC-1301-1	B-J	PT	NDE 3.3-387	C X - - - 3/20/91 - PT COMPLETE
	BRANCH CONNECTION TO PIPE	89.40			
	CTHT				

\*\*N/A\*\*

080100	2"-RC-1303-5	B-J	PT	NDE 3.3-387	C X - - - 3/20/91 - PT COMPLETE
	VALVE 3-505A TO PIPE	89.40			
	CTHT				

\*\*N/A\*\*





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AUXILIARY SPRAY LINE

SUMMARY EXAMINATION AREA		ASME			N I O		
NUMBER	IDENTIFICATION	SEC. XI	CATGY	EXAM	PROCEDURE	T R S E H	REMARKS
		ITEM NO	METHOD			A E I O E	
						T C G M R	**CALIBRATION BLOCK**

SYSTEM NO. 41 & 47, 5613-P-661-S SH. 2 & 4 OF 4 REF. DWG. NO. 3-A31

116700	2"-RC-1310-11 ELBOW TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-382	C X - - -	3/18/91 - PT COMPLETE
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\*\*N/A\*\*

117800	2"-RC-1310-16 PIPE TO ELBOW CTMT	B-J B9.40	PT	NDE 3.3-382	C X - - -	3/18/91 - PT COMPLETE
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\*\*N/A\*\*

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RESIDUAL HEAT REMOVAL FROM RC LOOP C HOT LEG

ZONE NUMBER: 036		ASHE	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**
-----					
SYSTEM NO. 50, 5613-P-669-S SH. 1 OF 1 REF. DWG. NO. 3-A35					
121600	3-RCH-12 SPRING HANGER CTMT, 15'6"	F-C F3.50	VT-3,4 CNR PWO	NDE 4.3-213 91-3-013 WA910206104726	C - - - X 1/31/91 - VT COMPLETE, SETTINGS STAMPED ON SPRING CAN DO NOT AGREE WITH DRAWING, ACCEPTABLE AS-IS PER ENGINEERING EVALUATION **N/A**
122200	3-RCH-11 BOX RESTRAINT CTMT, 15'6"	F-B F2.10	VT-3	NDE 4.3-212	C X - - - 1/31/91 - VT COMPLETE  **N/A**
122400	14"-RHR-1301-9 ELBOW TO PIPE CTMT	B-J B9.11	PT UT 45 UT 45T UT 60 CNR	NDE 3.3-353 NDE 5.4-63 NDE 5.4-63 NDE 5.4-64 91-3-004	C - - - X 1/12/91 - PT COMPLETE, 3 ACCEPTABLE - - X - LINEAR INDICATIONS; 1/15/91 - UT X - - - COMPLETE, ROOT GEOMETRY - - X - **UT-30**
122600	3-RCH-10 DUAL SPRING SUPPORT CTMT, 15'6"	F-C F3.50	VT-3,4 VT-3,4 CNR PWO	NDE 4.3-191 NDE 4.3-290 91-3-001 WA910206100833	C - - - X 1/12/91 - U-BOLT ON SOUTH SIDE OF X - - - SUPPORT IS BENT, BROKEN GROUT, BOTH SCALES PAINTED, UNABLE TO READ SETTINGS; 6/3/91 - VT RE-EXAM COMPLETE AFTER REPAIRS **N/A**

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RESIDUAL HEAT REMOVAL TO RC LOOP A COLD LEG

ZONE NUMBER: 037		ASME			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G H R	**CALIBRATION BLOCK**

SYSTEM NO. 50, 5613-P-585-S SH. 1 OF 1 REF. DWG. NO. 3-A36

123300	3-875D VALVE INTERIOR SURFACES CTMT	B-M-2 B12.50	VT-3 CNR PWO	NDE 4.3-276 91-3-053 WA901215095843	C - - - X	3/18/91 - VT COMPLETE ON VALVE FLANGE SURFACE, VALVE BODY SEAT AND VALVE BOWL, A SMALL NICK .25" IN LENGTH, .05" DEPTH WAS OBSERVED ON THE FLANGE SEAT SURFACE, DURING PRESSURE TEST, NO LEAKAGE WAS DETECTED, ACCEPTABLE AS-IS **N/A**
125500	10"-SI-1301-17 PIPE TO ELBOW CTMT	B-J B9.11	PT UT 45 UT 45T UT 60	NDE 3.3-384 NDE 5.4-74 NDE 5.4-74 NDE 5.4-74	C X - - - - - X - X - - - X - - -	3/19/91 - PT AND UT COMPLETE, ROOT GEOMETRY   **UT-27**
125600	10"-SI-1301-18 ELBOW TO ELBOW CTMT	B-J B9.11	PT UT 45 UT 45T UT 60	NDE 3.3-384 NDE 5.4-74 NDE 5.4-74 NDE 5.4-74	C X - - - - - X - X - - - - - X -	3/19/91 - PT AND UT COMPLETE, ROOT GEOMETRY   **UT-27**
126000	8"-RHR-1301-1 TEE TO PIPE CTMT	B-J B9.11	PT UT 45 UT 45T UT 60 CNR	NDE 3.3-354 NDE 5.4-67 NDE 5.4-67 NDE 5.4-68 91-3-005	C - - - X X - - - X - - - X - - -	1/13/91 - PT COMPLETE, 7 ACCEPTABLE LINEAR AND 1 ACCEPTABLE ROUND INDICATION; 1/15/91 - UT COMPLETE; LIMITED EXAMINATION DUE TO TEE CONFIGURATION **UT-41**

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RESIDUAL HEAT REMOVAL TO RC LOOP B COLD LEG

ZONE NUMBER: 038	ASME SEC. XI				N I O S O N G T T R S E H A E I O E T C G M R	REMARKS
SUMMARY EXAMINATION AREA NUMBER IDENTIFICATION	CATGY ITEM NO	EXAM METHOD	PROCEDURE			**CALIBRATION BLOCK**
<u>SYSTEM NO. 50, 5613-P-586-S SH. 1 OF 1 REF. DWG. NO. 3-A37</u>						
127000 VALVE 3-875B BOLTING VALVE BOLTING CTMT	B-G-2 87.70	VT-1 VT-1 CNR PWO NCR	NDE 4.1-157 91-0990 91-3-059 WA910412080740 N91-0432	C - - - X X - - -		3/22/91 - VT COMPLETE, BORIC ACID ACCUMULATION, APPARENT REDUCTION IN BASE MATERIAL ON VALVE BONNET, STUDS AND BONNET WERE REPLACED, 16 STUDS AND NUTS WERE EXAMINED **N/A**
127100 10"-SI-1302-4 VALVE 3-875B TO ELBOW CTMT	B-J B9.11	PT UT 45 UT 45T UT 60	NDE 3.3-390 NDE 5.4-75 NDE 5.4-75 NDE 5.4-75	C X - - - - - X - X - - - X - - -		3/21/91 - PT AND UT COMPLETE, ROOT GEOMETRY, LIMITATION DOWNSTREAM DUE TO SWEEPOLETS, 85% COVERAGE FROM ELBOW SIDE AND 25% COVERAGE FROM VALVE SIDE **UT-27**
127300 10"-SI-1302-5 ELBOW TO PIPE CTMT	B-J B9.11	PT UT 45 UT 45T UT 60	NDE 3.3-390 NDE 5.4-75 NDE 5.4-75 NDE 5.4-75	C X - - - - - X - X - - - X - - -		3/21/91 - PT AND UT COMPLETE, ROOT GEOMETRY **UT-27**
128300 10"-SI-1302-14 PIPE TO ELBOW CTMT	B-J B9.11	PT UT 45 UT 45T UT 60 CNR	NDE 3.3-350 NDE 5.4-61 NDE 5.4-61 NDE 5.4-62 91-3-003	C - - - X - - X - X - - - - - X -		1/12/91 - PT COMPLETE, 6 ACCEPTABLE LINEAR INDICATIONS; 1/15/91 - UT COMPLETE, ROOT GEOMETRY **UT-27**
129100 8"-RHR-1302-2 PIPE TO ELBOW CTMT	B-J B9.11	PT UT 45 UT 45T UT 60	NDE 3.3-352 NDE 5.4-65 NDE 5.4-65 NDE 5.4-66	C - - - X X - - - X - - - X - - -		1/12/91 - PT COMPLETE, 1 ACCEPTABLE ROUND INDICATION; 1/15/91 - UT COMPLETE **UT-41**



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HIGH HEAD SAFETY INJECTION LOOP A INSIDE CTHT

ZONE NUMBER: 040		ASME			N I O
		SEC. XI			S O N G T.
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**
-----					

SYSEM NO. 62, 5613-P-583-S SH. 1 OF 1 REF. DWG. NO. 3-A39

135100	2"-SI-1301-5	B-J	PT	NDE 3.3-375	C X - - - 2/25/91 - PT COMPLETE
	PIPE TO ELBOW	B9.21			
	CTHT				

\*\*N/A\*\*

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HIGH HEAD SAFETY INJECTION LOOP B INSIDE CTMT

ZONE NUMBER: 041	ASME				N I O	
	SEC. XI				S O N G T	
SUMMARY EXAMINATION AREA	CATGY	EXAM			T R S E H	
NUMBER IDENTIFICATION	ITEM NO	METHOD	PROCEDURE		A E I O E	REMARKS
					T C G H R	**CALIBRATION BLOCK**

SYSTEM NO. 62, 5613-P-584-S SH. 1 OF 1 REF. DWG. NO. 3-A40

140700	8051-R-528-01 PIPE RESTRAINT CTMT, 27'5"	F-B F2.10	VT-3	NDE 4.3-247	C X - - -	2/12/91 - VT COMPLETE
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\*\*N/A\*\*

141100	2"-SI-1302-6 PIPE TO VALVE 3-868B CTHT	B-J B9.21	PT	NDE 3.3-366	C X - - -	2/20/91 - PT COMPLETE
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\*\*N/A\*\*

141300	2"-SI-1302-7 VALVE 3-868B TO PIPE CTHT	B-J B9.21	PT	NDE 3.3-367	C X - - -	2/20/91 - PT COMPLETE
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\*\*N/A\*\*





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HIGH HEAD SAFETY INJECTION LOOP C INSIDE CTMT

ZONE NUMBER: 042		ASME			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
-----	-----	-----	-----	-----	T C G M R	**CALIBRATION BLOCK**
<u>SYSTEM NO. 62, 5613-P-648-S SH. 1 OF 1 REF. DWG. NO. 3-A41</u>						
144600	2"-SI-1303-2 PIPE TO ELBOW CTMT	B-J B9.21	PT	NDE 3.3-355	C - - - X	1/15/91 - PT COMPLETE, 1 ACCEPTABLE ROUND INDICATION  **N/A**
145200	2"-SI-1303-6 PIPE TO VALVE 3-868C CTMT	B-J B9.21	PT	NDE 3.3-368	C X - - -	2/21/91 - PT COMPLETE  **N/A**
145400	2"-SI-1303-7 VALVE 3-868C TO PIPE CTMT	B-J B9.21	PT	NDE 3.3-368	C X - - -	2/21/91 - PT COMPLETE  **N/A**
145500	2"-SI-1303-8 PIPE TO ELBOW CTMT	B-J B9.21	PT PT CNR NCR PWO	NDE 3.3-349 91-0701 91-3-002 N91-0050 WA910311130758	C - - - X X - - -	1/14/91 - PT COMPLETE, 3 ACCEPTABLE ROUND INDICATION AND 1 UNACCEPTABLE CURVLINEAR; 3/28/91 - PT RE-EXAM COMPLETE AFTER REMOVAL OF INDICATION **N/A**
145700	2"-SI-1303-10 PIPE TO ELBOW CTMT	B-J B9.21	PT	NDE 3.3-351	C X - - -	1/12/91 - PT COMPLETE  **N/A**

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HIGH HEAD SAFETY INJECTION LOOP A INSIDE CTMT

ZONE NUMBER: 043		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**
-----					

SYSTEM NO. 62, 5613-P-764-S SH. 2 OF 2 REF. DWG. NO. 3-A42

148900	8080-H-010-01	F-B	VT-3	NDE 4.3-246	C - - - X	2/12/91 - VT COMPLETE, DRAWING
	PIPE RESTRAINT	F2.10	VT-3	91-1454	- - - X	DISCREPANCY, U-BOLT SHOWN ON DRAWING
	CTMT, 24"4"		VT-3	91-2071	X - - -	BOLTED TO SIDE IS IN CONFLICT WITH FIELD
			CNR	91-3-028.		DRAWING; 5/28/91 - VT COMPLETE, MISSING
			NCR	H91-0236		PARTS; 7/4/91 - VT RE-EXAM COMPLETE
			PWO	WA910405105313		**N/A**

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2 INCH HIGH PRESSURE SAFETY INJECTION A

ZONE NUMBER: 043		ASME	H I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G M R **CALIBRATION BLOCK**

FROM 29" RCS TO VALVE 3-866A REF. DWG. NO. 003-A42

152400	8080-H-010-06 PIPE RESTRAINT CTHT, 17'3"	F-B F2.10	VT-3	NDE 4.3-294	E X - - -	8/26/91 - VT COMPLETE, EXPANDED EXAM DUE TO FAILURE OF ADJACENT SPRING HANGER, 8080-H-010-14 **N/A**
153400	8080-H-010-14 SPRING HANGER	F-C F3.50	VT-3,4 VT-3 CNR NCR PWO	NDE 4.3-254 91-2328 91-3-036 N91-0239 WA910404085557	C - - - X X - - -	2/13/91 - VT COMPLETE, LOOSE NUTS AND COTTER PIN NOT SPREAD, BENT SPRING CAN; ENGINEERING EVALUATION DETERMINED SPRING CAN IS NOT FUNCTIONAL AND MUST BE REPLACED; 7/23/91 - VT RE-EXAM COMPLETE **N/A**

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2 INCH HIGH PRESSURE SAFETY INJECTION B

ZONE NUMBER: 044		ASME			N I O
		SEC. XI			S O N G T
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G M R **CALIBRATION BLOCK**

FROM 29" RCS TO VALVE 3-866B REF. DWG. NO. 003-A43

154800	8080-R-009-01 BOX RESTRAINT	F-B F2.10	VT-3	NDE 4.3-237	C X - - - 2/12/91 - VT COMPLETE
**N/A**					
157200	8080-H-009-07 BOX RESTRAINT CTMT, 20'10"	F-B F2.10	VT-3 CNR NCR	NDE 4.3-251 91-3-034 N91-0242	C - - - X 2/13/91 - VT COMPLETE, INCOMPLETE THREAD ENGAGEMENT, ACCEPTED AS-IS BY ENGINEERING EVALUATION **N/A**
158400	8080-H-009-05 U-BOLT RESTRAINT	F-B F2.10	VT-3 CNR	NDE 4.3-245 91-3-027	C X - - - 2/13/91 - VT COMPLETE, DRAWING DISCREPENCY BETWEEN AS-BUILT DRAWING AND ACTUAL FIELD CONDITION, ACCEPTABLE AS-IS PER ENGINEERING EVALUATION **N/A**



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3 INCH CHEMICAL & VOLUME CONTROL LINE C

ZONE NUMBER: 045		ASME		H I O	
		SEC. XI		S O N G T	
SUMMARY EXAMINATION AREA		CATGY EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
				T C G H R **CALIBRATION BLOCK**	
-----					

FROM 29" RCS HOT LEG TO REGEN. HT. EX REF. DWG. NO. 003-A44

165700	3"-CH-1301-41	B-J	PT	NDE 3.3-369	C X - - - 2/21/91 - PT COMPLETE
	VALVE 3-312B TO PIPE	B9.21			

\*\*N/A\*\*



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3 INCH CHEMICAL & VOLUME CONTROL LINE A

ZONE NUMBER: 046		ASME			N I O
		SEC. XI			S O N G T
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**
-----					

FROM 27.5" RCS TO VALVE 3-310A REF. DWG. NO. 003-A45

169900	3"-CH-1302-23	B-J	PT	NDE 3.3-370	C X - - - 2/21/91 - PT COMPLETE
	ELBOW TO PIPE	B9.21			

\*\*N/A\*\*

170000	3"-CH-1302-24	B-J	PT	NDE 3.3-370	C X - - - 2/21/91 - PT COMPLETE
	PIPE TO ELBOW	B9.21			

\*\*N/A\*\*





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INCH CHEMICAL & VOLUME CONTROL LINE

ZONE NUMBER: 047		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**

FROM REGEN. HEAT EXCHANGER TO VLV 3-312C REF. DWG. NO. 003-A46

171600	3-VCH-29	F-B	VT-3	NDE 4.3-255	C X - - - 2/12/91 - VT COMPLETE
	U-BOLT RESTRAINT	F2.10			
	27'6"				

\*\*\*N/A\*\*\*

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2 INCH CHEMICAL & VOLUME CONTROL LINE

ZONE NUMBER: 048		ASME	N I O			
		SEC. XI	S O N G T			
		CATGY	EXAM	T R S E H		
SUMMARY	EXAMINATION AREA	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
NUMBER	IDENTIFICATION				T C G H R	**CALIBRATION BLOCK**

FROM REGEN. HT. EX. TO 27.5" RCS PIPING REF. DWG. NO. 003-A47

175000	FSK-M-146	F-B	VT-3	NDE 4.3-256	C - - - X	2/13/91 - VT COMPLETE, GAP BETWEEN BASE
	BOX RESTRAINT	F2.10	VT-3	NDE 4.3-291	X - - -	PLATE AND CEILING, LOOSE NUTS AND
			CNR	91-3-038		WASHERS ON SOUTH SIDE OF BASE PLATE;
			NCR	N91-0241		5/17/91 - VT RE-EXAM COMPLETE, GAP IS
			PWO	WA910327085313		ACCEPTABLE PER NCR 91-0241
						**N/A**

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2 INCH CHEMICAL & VOLUME CONTROL LINE A

ZONE NUMBER: 050		ASME	H I O			
		SEC. XI	S O N G T			
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H		
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G M R	**CALIBRATION BLOCK**

FROM RCP A TO VALVE 3-298D REF. DWG. NO. 003-A49

181300	1.5"-CH-1301-FB-1 FLANGE BOLTING	B-G-2 87.50	VT-1	NDE 4.1-150	C X - - -	2/25/91 - VT COMPLETE, 4 STUDS AND 8 NUTS
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\*\*N/A\*\*

181500	1.5"-CH-1301-2 PIPE TO REDUCER	B-J 89.21	PT	NDE 3.3-376	C X - - -	2/25/91 - PT COMPLETE
--------	-----------------------------------	--------------	----	-------------	-----------	-----------------------

\*\*N/A\*\*

182100	2"-CH-1303-5 ELBOW TO PIPE	B-J 89.21	PT	NDE 3.3-376	C X - - -	2/25/91 - PT COMPLETE
--------	-------------------------------	--------------	----	-------------	-----------	-----------------------

\*\*N/A\*\*

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INCH CHEMICAL & VOLUME CONTROL LINE C

ZONE NUMBER: 051		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G M R **CALIBRATION BLOCK**

FROM RCP C TO VALVE 3-298F REF. DWG. NO. 003-A50

183700	2"-CH-1304-6 ELBOW TO PIPE	B-J B9.21	PT	NDE 3.3-371	C X - - - 2/21/91 - PT COMPLETE
--------	-------------------------------	--------------	----	-------------	---------------------------------

\*\*N/A\*\*

185300	H-4 RESTRAINT CTHT, 27'8"	F-B F2.10	VT-3 NCR	91-2622 91-0766	C X - - - 8/23/91 - VT COMPLETE, EXAMINED WITH NCR 91-0766
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\*\*N/A\*\*



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INCH CHEMICAL & VOLUME CONTROL LINE A

ZONE NUMBER: 053		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T . C G H R **CALIBRATION BLOCK**

FROM RCP A TO VALVE 3-306A REF. DWG. NO. 003-A52

188900	454A-1	F-B	VT-3	NDE 4.3-238	C X - - - 2/12/91 - VT COMPLETE
	BOX RESTRAINT	F2.10			

\*\*N/A\*\*

189600	454A-3	F-B	VT-3	NDE 4.3-239	C X - - - 2/12/91 - VT COMPLETE
	DUAL RIGID STRUTS	F2.10			

\*\*N/A\*\*

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REACTOR COOLANT PUMP A

ZONE NUMBER: 056		ASME	N I O			
		SEC. XI	S O N G T			
		CATGY	EXAM	T R S E H		
SUMMARY	EXAMINATION AREA			A E I O E		
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T C G M R	REMARKS
-----						
<u>3P200A REF. DWG. NO. 003-V13A</u>						
201300	RCP-FSA-1 thru 24 MAIN FLANGE STUDS	B-G-1 B6.180	UT 60	NDE 5.7-13	C X - - -	3/22/91 - UT COMPLETE  **UT-18**
201400	RCP-FHA-1 thru 24 MAIN FLANGE NUTS	B-G-1 B6.200	VT-1	NDE 4.1-152	C X - - -	3/19/91 - VT COMPLETE, 24 NUTS IN-PLACE  **N/A**
201600	RCP-A-F FLYWHEEL CTMT	RG 1.14	UT	NDE 5.15-1	C X - - -	5/15/91 - UT COMPLETE  **FLYWHEEL**
201700	RCP-SPA-L1 thru L3 INTEGRAL ATTACHMENTS	B-K-1 B10.20	PT	NDE 3.3-386	C X - - -	3/20/91 - PT INCOMPLETE, FOR LIMITATIONS, SEE RELIEF REQUEST NO. 9  **N/A**
201800	RCP-SPA-L1 thru L3 PUMP SUPPORTS	F-A F1.10	VT-3 VT-3 VT-3 CNR	NDE 4.3-277 NDE 4.3-278 NDE 4.3-279 91-3-054	C - - - X - - - X - - - X	3/19/91 - VT COMPLETE, RCP-SPA-L1 THRU L3, EVIDENCE OF MOVEMENT, ACCEPTED AS-IS BY ENGINEERING EVALUATION, ELONGATED HOLE IS PART OF DESIGN **N/A**





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REACTOR COOLANT PUMP B

ZONE NUMBER: 057		ASME			S O N G T		
		SEC. XI			T R S E H		
SUMMARY EXAMINATION AREA		CATGY	EXAM		A E I O E	REMARKS	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T C G H R	**CALIBRATION BLOCK**	
-----							
3P2008 REF. DWG. NO. 003-V13B							
202400	RCP-FSB-1 thru 24 MAIN FLANGE STUDS	B-G-1 B6.180	UT 60	NDE 5.7-14	C X - - -	3/22/91 - UT COMPLETE	
						**UT-18**	
202500	RCP-FNB-1 thru 24 MAIN FLANGE NUTS	B-G-1 B6.200	VT-1	NDE 4.1-156	C X - - -	3/22/91 - VT COMPLETE	
						**N/A**	
202700	RCP-B-F FLYWHEEL CTMT	RG 1.14	UT	NDE 5.15-2	C X - - -	6/18/91 - UT COMPLETE	
						**FLYWHEEL**	
202800	RCP-SPB-L1 thru L3 INTEGRAL ATTACHMENTS	B-K-1 B10.20	PT PT PT PT CNR NCR PWO	NDE 3.3-388 NDE 3.3-389 91-1532 91-1548 91-3-056 N91-0433 WA910416124712	C - - - X - - - X - - - X X - - -	3/20/91 - PT COMPLETE LUG 2, UNACCEPTABLE LINEAR, PT COMPLETE ON LUGS 1 & 3, 4 ACCEPTABLE LINEARS; 6/3/91 - PT RE-EXAM AFTER GRINDING, 3 LINEARS; 6/3/91 - PT RE-EXAM COMPLETE AFTER FURTHER GRINDING	
						**N/A**	
202900	RCP-SPB-L1 thru L3 PUMP SUPPORTS	F-A F1.10	VT-3 VT-3 VT-3 CNR	NDE 4.3-280 NDE 4.3-281 NDE 4.3-282 91-3-055	C - - - X - - - X - - - X	3/21/91 - RCP-SPB-L1 THRU L3, VT COMPLETE, EVIDENCE OF MOVEMENT, ACCEPTED AS-IS BY ENGINEERING EVALUATION, ELONGATED HOLES ARE PART OF DESIGN	
						**N/A**	



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REACTOR COOLANT PUMP C

ZONE NUMBER: 058		ASME			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G M R	**CALIBRATION BLOCK**
<u>3P200C REF. DWG. NO. 003-V20C</u>						
203100	3-RCP-C-A PUMP CASING WELD A	B-L-1 B12.10	VT-1	NDE 4.1-159	C X - - -	4/24/91 - VT COMPLETE  **N/A**
203200	3-RCP-C-B PUMP CASING WELD B	B-L-1 B12.10	VT-1	NDE 4.1-160	C X - - -	4/24/91 - VT COMPLETE  **N/A**
203300	3-RCP-C-C PUMP CASING WELD C	B-L-1 B12.10	VT-1	NDE 4.1-161	C X - - -	4/24/91 - VT COMPLETE  **N/A**
<u>3P200C REF. DWG. NO. 003-V13C</u>						
203500	RCP-FSC-1 thru 24 MAIN FLANGE STUDS	B-G-1 B6.180	UT 60	NDE 5.7-15	C X - - -	3/22/91 - UT COMPLETE  **UT-18**
203600	RCP-FNC-1 thru 24 MAIN FLANGE NUTS	B-G-1 B6.200	VT-1	NDE 4.1-158	C X - - -	3/22/91 - VT COMPLETE, 24 NUTS EXAMINED  **N/A**
203900	RCP-SPC-L1 thru L3 INTEGRAL ATTACHMENTS	B-K-1 B10.20	PT PT	NDE 3.3-394 NDE 3.3-393	C X - - - X X - - -	3/24/91 - PT COMPLETE ON LUG 3, 3 ACCEPTABLE LINEAR INDICATIONS; 4/24/91 - PT COMPLETE ON LUGS 1 AND 2, LUG 2 HAS 3 ACCEPTABLE ROUND AND 2 ACCEPTABLE LINEAR INDICATIONS **N/A**

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REACTOR COOLANT PUMP C

ZONE NUMBER: 058		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**
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3P200C REF. DWG. NO. 003-V13C

204000	RCP-SPC-L1 thru L3 PUMP SUPPORTS	F-A F1.10	VT-3	NDE 4.3-284	C - - - X	3/22/91 - VT COMPLETE, EVIDENCE OF MOVEMENT, ACCEPTABED AS-IS BY ENGINEERING EVALUATION, THIS SUPPORT WAS DESIGNED TO MOVE **N/A**
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REGENERATIVE HEAT EXCHANGER

ZONE NUMBER: 059		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**
<u>3E200 REF. DWG. NO. 003-V11</u>					
209200	RGX 3E200	---	VT-3	NDE 4.3-201	C X - - - 1/3/91 - VT-3 COMPLETE; 10/21/91 - VT-2
	NRC REQUIRED EXAMINATIONS	---	VT-2	NDE 4.2-1	X - - - COMPLETE; EXAMINED IN ACCORDANCE WITH RELIEF REQUEST 3 **N/A**



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STEAM GENERATOR C SECONDARY SIDE

ZONE NUMBER: 062		ASME			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO.	METHOD	PROCEDURE	A E I O E	REMARKS
-----		-----	-----	-----	T C G H R	**CALIBRATION BLOCK**

3E210C REF. DWG. NO. 003-V10C.

212000	3-SG-C-CL	C-A	UT 0	NDE 5.1-38	C X - - -	2/27/91 UT 0 AND 45 COMPLETE; 2/28/91 -
	TRANSITION TO UPPER SHELL WELD	C1.10	UT 45	NDE 5.1-38	- - X X	UT 60 COMPLETE, 1 ACCEPTABLE SLAG
			UT 45T	NDE 5.1-38	X - - -	INCLUSION AND SPOT INDICATION
			UT 60	NDE 5.1-38	- - - X	
			UT 60T	NDE 5.1-38	X - - -	**UT-7**
			UT	ID CREEPER	- - - X	
			UT-AUTO	P-SCAN	- - - X	
			CNR	91-3-050		



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14 INCH RESIDUAL HEAT REMOVAL A

ZONE NUMBER: 063		ASME	N I O			
		SEC. XI	S O N G T			
		CATGY	EXAM	T R S E H		
SUMMARY EXAMINATION AREA		ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
NUMBER	IDENTIFICATION				T C G H R	**CALIBRATION BLOCK**

FROM RHR PUMP A TO VALVE 3-751 REF. DWG. NO. 003-801

216800	3-ACH-12	F-C	VT-3,4	NDE 4.3-228	C - - - X	1/31/91 - VT COMPLETE, DISCREPENCY
	SPRING SUPPORT	F3.50	CNR	91-3-017		BETWEEN COLD LOAD SETTINGS IDENTIFIED ON
	--2'-9"		NCR	N91-0151		DRAWING AND THOSE MARKED ON SPRING CAN,
			PWO	WA910323115155		ACCEPTABLE AS-IS BY ENGINEERING
						EVALUATION
						**N/A**

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10 INCH RESIDUAL HEAT REMOVAL LOOP A

ZONE NUMBER: 072		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**

FROM RHE TO VALVE 3-759A REF. DWG. NO. 003-B07

239900	3-ACH-29	F-B	VT-3	NDE 4.3-193	C X - - - 1/15/91 - VT COMPLETE
	DUAL RIGID STRUTS	F2.10			

\*\*N/A\*\*

DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
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6 INCH HIGH HEAD SAFETY INJECTION LINE

ZONE NUMBER: 077		ASME			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G H R	**CALIBRATION BLOCK**

FROM RWST TANK TO 10 INCH SIS LINE REF. DWG. NO. 003-B12

247000	16"-SI-2301-5 PIPE TO VALVE 3-864B	C-F C5.11	PT	NDE 3.3-357	C - - - X	1/17/91 - PT COMPLETE, 1 ACCEPTABLE LINEAR INDICATION, NON-RELEVANT INDICATIONS AT TOE OF WELD; NO EXAM WAS PERFORMED ON THE AS CAST VALVE BODY **N/A**
247100	16"-SI-2301-6 VALVE 3-864B TO TEE	C-F C5.11	PT PT PT CNR NCR PWO	NDE 3.3-356 91-0722 NDE 3.3-396 91-3-006 N91-0155 WA910305091819	C - - - X X - - - X - - -	1/17/91 PT COMPLETE, 3 LINEAR INDICATIONS, 1 UNACCEPTABLE; 4/4/91 - PT RE-EXAM COMPLETE AFTER REMOVAL OF INDICATIONS **N/A**
248900	3-SIH-118 BOX RESTRAINT 12'1"	F-B F2.10	VT-3	NDE 4.3-215	C X - - -	1/31/91 - VT COMPLETE  **N/A**
249100	3-SIH-119 BOX RESTRAINT 12'1"	F-B F2.10	VT-3	NDE 4.3-214	C X - - -	1/31/91 - VT COMPLETE  **N/A**

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TURKEY POINT NUCLEAR PLANT UNIT 3  
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0 INCH RESIDUAL HEAT REMOVAL SYSTEM C

ZONE NUMBER: 080		ASME			N I O
		SEC. XI			S O N G T
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**

FROM ACCUMULATOR C TO VALVE 3-875F REF. DWG. NO. 003-B17

252600	SR-50	F-B	VT-3	NDE 4.3-216	C - - - X 1/31/91 - VT COMPLETE, PAINTED SPHERICAL
	RIGID STRUT	F2.10	VT-3	NDE 4.3-288	X - - - BEARINGS; 4/22/91 - VT RE-EXAM COMPLETE
	22'6"		CNR	91-3-014	
			PWO	WA910206104726	

\*\*N/A\*\*

DATE: 12/05/91  
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TURKEY POINT NUCLEAR PLANT UNIT 3  
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3 INCH RESIDUAL HEAT REMOVAL A

ZONE NUMBER: 084

ASME  
SEC. XI

N I O  
S O N G T  
T R S E H

SUMMARY EXAMINATION AREA  
NUMBER IDENTIFICATION

CATGY EXAM  
ITEM NO METHOD PROCEDURE

A E I O E REMARKS  
T C G H R \*\*CALIBRATION BLOCK\*\*

FROM VALVE 3-876A TO 10"X8" REDUCER REF. DWG. NO. 003-B22

259700	SR-5	F-B	VT-3	NDE 4.3-204	C - - - X	1/31/91 - VT COMPLETE; INADEQUATE THREAD
	PIPE SLEEVE	F2.10	VT-3	H-91-0872	X - - -	ENGAGEMENT, BASE PLATE AND ANCHOR BOLTS
			CNR	91-3-008		ARE BEING REPLACED; 2/26/91 - VT RE-EXAM
			PCM	90-0311		COMPLETE
						**N/A**
259800	3-SIH-90	F-B	VT-3	NDE 4.3-217	A - - - X	1/31/91 - VT COMPLETE, CHIPPED GROUT AND
	RIGID STRUT	F2.10	CNR	91-3-015		PAINTED SPHERICAL BEARINGS
						**N/A**



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8 INCH RESIDUAL HEAT REMOVAL SYSTEM B

ZONE NUMBER: 089		ASHE	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**
-----					
FROM PEN NO. 11 TO VALVE 3-8760 REF. DWG. NO. 003-B27					
269600	SR-6 BOX RESTRAINT CTHT, 17'0"	F-B F2.10	VT-3	NDE 4.3-218	C X - - - 1/31/91 - VT COMPLETE  **N/A**
270100	3-SIH-93A RIGID STRUT CTHT, 22'0"	F-C F3.10	VT-3 VT-3 CNR PWO	NDE 4.3-207 NDE 4.3-289 91-3-010 WA910206103832	C - - - X 1/31/91 - VT COMPLETE, PAINTED SPHERICAL X - - - BEARINGS; 4/22/91 - VT RE-EXAM COMPLETE  **N/A**
270400	3-SIH-94 RIGID STRUT CTHT, 22'0"	F-B F2.10	VT-3 VT-3 CNR PWO	NDE 4.3-206 NDE 4.3-287 91-3-009 WA910206103040	C - - - X 1/31/91 - VT COMPLETE, PAINTED SPHERICAL X - - - BEARINGS; 4/22/91 - VT RE-EXAM COMPLETE  **N/A**
270700	3-SIH-95 RIGID STRUT	F-B F2.10	VT-3	NDE 4.3-205	C X - - - 1/31/91 - VT COMPLETE  **N/A**

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INCH CONTAINMENT SPRAY LINE DISCHARGE A

ZONE NUMBER: 093	ASME SEC. XI				N I O S O N G T T R S E H A E I O E	REMARKS
SUMMARY EXAMINATION AREA NUMBER IDENTIFICATION	CATGY ITEM NO	EXAM METHOO	PROCEDURE		T C G M R	**CALIBRATION BLOCK**
<u>FROM CS PUMP A TO SPRAY HEADER REF. DWG. NO. 003-878</u>						
278000 SR-165 SPRING HANGER AUX BLDG, 26'0"	F-C F3.50	VT-3,4 VT-3,4 CNR PWO	NDE 4.3-258 NDE 4.3-285 91-3-039 WA910312075657	C - - - X X - - -		2/13/91 - VT-3 COMPLETE, H & C SEETINGS ON SPRING CAN DO NOT AGREE WITH DRAWING; 4/15/91 - VT AFTER ADJUSTMENT OF SPRING CAN COMPLETE **N/A**
278800 SR-166 SPRING HANGER 26'0"	F-C F3.50	VT-3,4 VT-4	NDE 4.3-259	C X - - -		2/13/91 - VT COMPLETE  **N/A**
279800 3-SIH-9 ROD HANGER 26'0"	F-B F2.10	VT-3 CNR	NDE 4.3-260 91-3-040	C - - - X		2/13/91 - VT COMPLETE, MISSING BOLTS, ACCEPTED AS-IS BY ENGINEERING EVALUATION  **N/A**
279900 SR-163 BOX RESTRAINT 26'0"	F-B F2.10	VT-3	NDE 4.3-261	C X - - -		2/13/91 - VT COMPLETE  **N/A**
280200 3-RCSH-107 U-BOLT RESTRAINT 34'5"	F-B F2.10	VT-3	NDE 4.3-257	C X - - -		2/13/91 - VT COMPLETE  **N/A**





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31 INCH MAIN STEAM C INSIDE CONTAINMENT

ZONE NUMBER: 099		ASME		N I O	
		SEC. XI		S O N G T	
SUMMARY EXAMINATION AREA		CATGY EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**
-----					

FROM STEAM GENERATOR C TO PEN. NO. C REF. DWG. NO. 003-B61

296700	31"-MSC-2303-1A	C-F	MT	NDE 2.2-123	C	X - - -	2/20/91 - MT AND UT COMPLETE, ROOT
	NOZZLE TO REDUCER	C5.21	UT 45	NDE 5.2-53	-	- X -	GEOMETRY
			UT 45T	NDE 5.2-53	X	- - -	
			UT 60	NDE 5.2-53	-	- X -	
**UT-21**							

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REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
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6 INCH MAIN STEAM C INSIDE CONTAINMENT

ZONE NUMBER: 099		ASHE			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G H R	**CALIBRATION BLOCK**
-----						
FROM STEAM GENERATOR C TO PEN. NO. C REF. DWG. NO. 003-B61						
296800	26"-MSC-2303-1 REDUCER TO ELBOW	C-F C5.21	MT UT 45 UT 45T UT 60	NDE 2.2-122 NDE 5.2-51 NDE 5.2-51 NDE 5.2-51	C X - - - - - X - X - - - - - X -	2/19/91 - MT AND UT COMPLETE, INSIDE SURFACE GEOMETRY   **UT-21**
296900	26"-MSC-2303-LS-1 ELBOW LONG SEAM US	C-F C5.22	MT UT 45 UT 45T UT 60	NDE 2.2-122 NDE 5.2-52 NDE 5.2-52 NDE 5.2-52	C X - - - X - - - X - - - X - - -	2/19/91 - MT AND UT COMPLETE    **UT-21**
299300	26"-MSC-2303-LS-8 ELBOW LONG SEAM DS	C-F C5.22	MT UT 45 UT 45T UT 60	NDE 2.2-127 NDE 5.2-55 NDE 5.2-55 NDE 5.2-55	C X - - - X - - - X - - - X - - -	3/20/91 - MT COMPLETE; 3/21/91 UT COMPLETE   **UT-21**
299400	26"-MSC-2303-9 ELBOW TO PIPE	C-F C5.21	MT UT 45 UT 45T UT 60	NDE 2.2-127 NDE 5.2-56 NDE 5.2-56 NDE 5.2-56	C X - - - - - X - X - - - - - X -	3/20/91 - MT COMPLETE; 3/21/91 - UT COMPLETE, ROOT GEOMETRY   **N/A**
299500	26"-MSC-2303-LS-9 PIPE LONG SEAM US	C-F C5.22	MT UT 45 UT 45T UT 60	NDE 2.2-127 NDE 5.2-55 NDE 5.2-55 NDE 5.2-55	C X - - - X - - - X - - - X - - -	3/20/91 - MT COMPLETE; 3/21/91 - UT COMPLETE   **UT-21**
300700	26"-MSC-2303-LS-12 PIPE LONG SEAM DS	C-F C5.22	MT UT 45 UT 45T UT 60	NDE 2.2-127 NDE 5.2-55 NDE 5.2-55 NDE 5.2-55	C X - - - - - X - X - - - X - - -	3/20/91 - MT COMPLETE; 3/21/91 - UT COMPLETE, ROOT GEOMETRY   **UT-21**

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26 INCH MAIN STEAM C INSIDE CONTAINMENT

ZONE NUMBER: 099		ASME		N I O	
		SEC. XI		S O N G T	
SUMMARY EXAMINATION AREA		CATGY EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**
-----					

FROM STEAM GENERATOR C TO PEN. NO. C REF. DWG. NO. 003-B61

300800	26"-MSC-2303-13	C-C	MT	NDE 2.2-128	C X - - - 3/20/91 - MT COMPLETE
	INTEGRAL ATTACHMENT	C3.20		NDE 5.2	
	CTMT				

\*\*N/A\*\*



DATE: 12/05/91  
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4 INCH MAIN STEAM A OUTSIDE CONTAINMENT

ZONE NUMBER: 100		ASME			N I O		
SUMMARY EXAMINATION AREA		SEC. XI			S O N G T		
NUMBER	IDENTIFICATION	CATGY	EXAM		T R S E H		
		ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS	
					T C G H R	**CALIBRATION BLOCK**	

FROM 26" LINE TO RELIEF VALVES 1400 & 1402 REF. DWG. NO. 003-B58

303500	14"-MSA-2301-1	C-F	HT	NDE 2.2-115	C X - - -	1/24/91 - HT COMPLETE; 1/30/91 - RT	
	WELDOLET TO PIPE	C5.21	RT	TS 9.3-6	X - - -	COMPLETE	

\*\*N/A\*\*

304000	A	F-B	VT-3	NDE 4.3-194	C X - - -	1/15/91 - VT COMPLETE	
	SLIDING STANCHION	F2.10					

\*\*N/A\*\*

FROM 26" LINE TO RELIEF VALVES 1401 & 1403 REF. DWG. NO. 003-B58

304500	14"-MSA-2302-2	C-F	PT	NDE 3.3-359	C X - - -	1/13/91 - RT COMPLETE, PERFORMED IN LIEU	
	REDUCING TEE TO FLANGE	C5.21	RT	TS 9.3-1	X - - -	OF UT DUE TO CONFIGURATION; 1/23/91 - PT	
						COMPLETE, PERFORMED IN LIEU OF HT DUE TO	
						CONFIGURATION	

\*\*N/A\*\*

305100	14"-MSA-2302-5	C-F	HT	NDE 2.2-112	C X - - -	1/13/91 - RT COMPLETE, PERFORMED IN LIEU	
	REDUCING TEE TO CAP	C5.21	RT	TS 9.3-2	X - - -	OF UT DUE TO CONFIGURATION; 1/22/91 - HT	
						COMPLETE	

\*\*N/A\*\*

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26 INCH MAIN STEAM C OUTSIDE CONTAINMENT

ZONE NUMBER: 102	ASME SEC. XI	CATGY	EXAM ITEM NO	PROCEDURE	N I O S O N G T T R S E H A E I O E T C G H R	REMARKS
SUMMARY EXAMINATION AREA						
NUMBER IDENTIFICATION						**CALIBRATION BLOCK**

FROM PEN. NO. 26C TO VALVE 3-10-006 REF. DWG. NO. 003-B62

309600	26"-HSC-2306-13A	C-F	MT	NDE 2.2-131	C X - - -	3/28/91 - MT AND UT COMPLETE, ROOT
	PIPE TO PIPE	C5.21	UT 45	NDE 5.2-57	X - - -	GEOMETRY; ALSO EXAMINED LONGITUDINAL
	HS PLATFORM		UT 45T	NDE 5.2-57	X - - -	SEAMS UPSTREAM AND DOWNSTREAM OF WELD;
			UT 60	NDE 5.2-57	- - X -	LIMITED EXAM DUE TO BRANCH CONNECTION
						**UT-21**
310000	26"-HSC-2306-17	C-F	MT	NDE 2.2-131	C X - - -	3/28/91 - MT AND UT COMPLETE; ALSO
	PIPE TO VALVE 3-CV-2606	C5.21	UT 45	NDE 5.2-57	X - - -	EXAMINED LONGITUDINAL SEAM DOWNSTREAM OF
	HS PLATFORM		UT 45T	NDE 5.2-57	X - - -	WELD
			UT 60	NDE 5.2-57	- - X -	
						**UT-21**

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TURKEY POINT NUCLEAR PLANT UNIT 3  
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14 INCH MAIN STEAM C OUTSIDE CONTAINMENT

ZONE NUMBER: 102	ASME				N I O	
	SEC. XI				S O N G T	
SUMMARY EXAMINATION AREA	CATGY	EXAM			T R S E H	
NUMBER IDENTIFICATION	ITEM NO	METHOD	PROCEDURE		A E I O E	REMARKS
-----	-----	-----	-----	-----	T C G H R	**CALIBRATION BLOCK**

FROM 26" LINE TO RELIEF VALVES 1409 & 1410 REF. DWG. NO. 003-B62

311800	14"-MSC-2305-1	C-F	MT	NDE 2.2-114	C X - - -	1/24/91 - MT COMPLETE; 2/2/91 - RT
	WELDOLET TO PIPE	C5.21	RT	TS 9.3-5	- - - X	COMPLETE, ACCEPTABLE SLAG AND POROSITY
						**N/A**

FROM 26" LINE TO RELIEF VALVES 1411 & 1413 REF. DWG. NO. 003-B62

312700	14"-MSC-2306-1	C-F	MT	NDE 2.2-113	C X - - -	1/13/91 - RT COMPLETE, PERFORMED IN LIEU
	WELDOLET TO REDUCING TEE	C5.21	RT	TS 9.3-3	X - - -	OF UT DUE TO CONFIGURATION; 1/22/91 - MT
						COMPLETE
						**N/A**

313100	14"-MSC-2306-4	C-F	PT	NDE 3.3-358	C X - - -	1/13/91 - RT COMPLETE, PERFORMED IN LIEU
	REDUCING TEE TO FLANGE	C5.21	RT	TS 9.3-4	X - - -	OF UT DUE TO CONFIGURATION; 1/23/91 - PT
						COMPLETE, PERFORMED IN LIEU OF MT DUE TO
						CONFIGURATION
						**N/A**





INCH STEAM GENERATOR BLOWDOWN C INSIDE CTMT.

SUMMARY EXAMINATION AREA		ASME SEC. XI			S O N G T		
NUMBER	IDENTIFICATION	CATGY	EXAM	PROCEDURE	A E I O E	REMARKS	
		ITEM NO	METHOD		T C G H R	**CALIBRATION BLOCK**	
<u>FROM STEAM GENERATOR C TO PEN. NO. 28C REF. DWG. NO. 003-B76</u>							
319300	6"-BDC-2303-FW1 VALVE SGB-3-005 TO REDUCER	C-F C5.21	MT UT 45 UT 45T UT 60	NDE 2.2-125 NDE 5.2-54 NDE 5.2-54 NDE 5.2-54	C X - - - - - X - X - - - - - X -	2/25/91 - MT AND UT COMPLETE, ROOT GEOMETRY, LIMITED EXAMINATION DUE TO REDUCER, 50% COVERAGE ACHIEVED '  **UT-22**	
319900	6"-BDC-2303-FW5 VALVE SGB-3-006 TO REDUCER	C-F C5.21	MT UT 45 UT 45T UT 60	NDE 2.2-125 NDE 5.2-54 NDE 5.2-54 NDE 5.2-54	C X - - - - - X - X - - - - - X -	2/25/91 - MT AND UT COMPLETE, ROOT GEOMETRY, LIMITED EXAMINATION DUE TO REDUCER, 50% COVERAGE OBTAINED  **UT-22**	
320000	6"-BDC-2303-FW6 PIPE TO VALVE SGB-3-006	C-F C5.21	MT UT 45 UT 45T UT 60	NDE 2.2-125 NDE 5.2-54 NDE 5.2-54 NDE 5.2-54	C X - - - X - - - X - - - - - X -	2/25/91 - MT AND UT COMPLETE, ROOT GEOMETRY   **UT-22**	
320100	78101B-H-322-07 RIGID STRUT	F-B F2.10	VT-3 VT-3 CNR PWO	NDE 4.3-270 91-0943 91-3-047 WA910402111920	C - - - X X - - -	2/21/91 - VT COMPLETE, LOOSE NUTS; 4/20/91 - VT RE-EXAM COMPLETE  **N/A**	
321200	78101B-H-322-05 RIGID STRUT CTMT, 21'8"	F-C F3.10	VT-3 CNR	NDE 4.3-269 91-3-043	E - - - X	2/15/91 - VT COMPLETE, INCOMPLETE THREAD ENGAGEMENT, ACCEPTED AS-IS, EXPANDED EXAM DUE TO FAILURE OF ADJACENT SNUBBER 78101B-H-322-04 **N/A**	
322300	78101B-H-322-03 BOX RESTRAINT	F-B F2.10	VT-3	NDE 4.3-268	E X - - -	2/15/91 - VT COMPLETE, EXPANDED SCOPE EXAMINATION DUE TO FAILURE OF ADJACENT SNUBBER 78101B-H-322-04 **N/A**	

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INCH STEAM GENERATOR BLOWDOWN C INSIDE CTMT.

ZONE NUMBER: 105		ASME	N I O			
		SEC. XI	S O N G T			
		CATGY	EXAM	T R S E H		
SUMMARY EXAMINATION AREA		ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
NUMBER	IDENTIFICATION				T C G M R	**CALIBRATION BLOCK**
-----						
FROM STEAM GENERATOR C TO PEN. NO. 28C REF. DWG. NO. 003-B76						
323200	6"-BDC-2303-FW24	C-F	MT	NDE 2.2-125	C X - - -	2/25/91 - MT AND UT COMPLETE, ROOT
	PIPE TO ELBOW	C5.21	UT 45	NDE 5.2-54	X - - -	GEOMETRY
			UT 45T	NDE 5.2-54	X - - -	
			UT 60	NDE 5.2-54	- - X -	
						**UT-22**
323700	6"-BDC-2303-FW29	C-F	MT	NDE 2.2-121	C - - - X	2/8/91 - MT COMPLETE, 1 LINEAR
	REDUCER TO PIPE	C5.21	MT	91-0677	- - - X	INDICATION 1.375" IN LENGTH; 2/13/91 -
			MT	91-0808	X - - -	UT COMPLETE, ROOT GEOMETRY AND BEAM
			UT 45	NDE 5.2-49	- - X -	REDIRECTION; 4/9/91 - MT RE-EXAM
			UT 45T	NDE 5.2-49	X - - -	COMPLETE
			UT 60	NDE 5.2-49	- - X -	**UT-22**
			CNR	91-3-024		
			NCR	N91-0195		
			PWO	WA910302110807		

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TURKEY POINT NUCLEAR PLANT UNIT 3  
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CLASS 2 ALL STATUS COMPONENTS

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6 INCH STEAM GENERATOR BLOWDOWN C OUTSIDE CTMT.

ZONE NUMBER: 108		ASME		N I O	
		SEC. XI		S O N G T	
SUMMARY EXAMINATION AREA		CATGY EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**

FROM PEN. NO. 28C TO VALVE CV-3-6275C REF. DWG. NO. 003-877

325500	6"-BDC-2306-FW30	C-F	MT	NDE 2.2-116	C - - - X	1/31/91 - MT COMPLETE, 1 UNACCEPTABLE
	REDUCER TO PIPE	C5.21	MT	91-0667	- - - X	LINEAR; 1/31/91 - UT COMPLETE, LIMITED
			MT	91-0672	X - - -	EXAM DUE TO REDUCER, INSIDE SURFACE
			UT 45	NDE 5.2-44	- - X -	GEOMETRY; 3/22/91 - MT RE-EXAM COMPLETE,
			UT 45T	NDE 5.2-44	X - - -	1 UNACCEPTABLE LINEAR; 3/25/91 - MT
			UT 60	NDE 5.2-44	- - X -	RE-EXAM COMPLETE AFTER REMOVAL OF
			CNR	91-3-007		INDICATION
			PWO	WA910305092518		**UT-22**
			NCR	N-91-0156		



DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
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CLASS 2 ALL STATUS COMPONENTS

PAGE: 75

RAIN FEEDWATER SYSTEM A

ZONE NUMBER: 109		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**

FROM STEAM GENERATOR A TO VLV FCV-3-478 REF. DWG. NO. 003-B66

330500	AUGMENTED EXAMINATION	---	UT 45	NDE 5.16-22	C - - X - 2/11/91 - UT COMPLETE, ROOT,
	FROM NOZZLE RAMP TO 1 DIAMETER	---	UT 60	NDE 5.16-22	- - X - COUNTERBORE, AND INSIDE SURFACE GEOMETRY
	ON ELBOW				

\*\*UT-20, UT-29\*\*



## MAIN FEEDWATER LINE LOOP B

ZONE NUMBER: 110				ASHE	SEC. XI	CATGY	EXAM	ITEM NO	METHOD	PROCEDURE	REMARKS
SUMMARY EXAMINATION AREA											
NUMBER IDENTIFICATION											

**FROM STEAM GENERATOR B TO VLV FCV-3-488 REF. DWG. NO. 003-B67**

332200	14"-FWB-2303-9 PENETRATION #27B TO PIPE	C-F C5.11	MT	NDE 2.2-120A	C X - - -	2/8/91 - MT COMPLETE
						**UT-20**
333300	14"-FWB-2303-16 PIPE TO ELBOW	C-F C5.21	MT UT 45 UT 45T UT 60	NDE 2.2-120A NDE 5.2-50 NDE 5.2-50 NDE 5.2-50	C X - - - - - X - X - - - - - X -	2/8/91 - MT COMPLETE; 2/12/91 - UT COMPLETE, ROOT AND BACKING BAR GEOMETRY
						**UT-20**
333800	AUGMENTED EXAMINATION FROM NOZZLE RAMP TO 1 DIAMETER ON ELBOW	--- ---	UT 45 UT 60	NDE 5.16-23 NDE 5.16-23	C - - X - - - X -	2/12/91 - UT COMPLETE, AUGMENTED EXAM , ROOT AND BACKING BAR GEOMETRY
						**UT-20, UT-29**



DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
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MAIN FEEDWATER SYSTEM C

ZONE NUMBER: 111		ASME			N I O		
		SEC. XI			T R S E H		
SUMMARY EXAMINATION AREA		CATGY	EXAM		A E I O E	REMARKS	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T C G M R	**CALIBRATION BLOCK**	
-----							
FROM STEAM GENERATOR C TO VLV FCV-3-498 REF. DWG. NO. 003-B68							
333925	14"-FWC-2306-1	C-F	MT	NDE 2.2-117	C X - - -	1/31/91 - MT AND UT COMPLETE, VALVE AND	
	VALVE FCV-3-498 TO PIPE	C5.21	UT 45	NDE 5.2-46	X - - -	ROOT GEOMETRY	
			UT 45T	NDE 5.2-46	- - X -		
			UT 60	NDE 5.2-46	- - X -		
						**UT-20**	
334100	7883-H-013-11	F-C	VT-3	NDE 4.3-219	C X - - -	1/31/91 - VT COMPLETE	
	WELDED RESTRAINT	F3.10					
						**H/A**	
334300	14"-FWC-2306-5	C-F	MT	NDE 2.2-117	C X - - -	1/31/91 - MT AND UT COMPLETE, BACKING	
	VALVE 3-20-333 TO ELBOW	C5.21	UT 45	NDE 5.2-46	- - X -	BAR GEOMETRY	
			UT 45T	NDE 5.2-46	X - - -		
			UT 60	NDE 5.2-46	- - X -		
						**UT-20**	
334500	14"-FWC-2305-1	C-F	MT	NDE 2.2-117	C X - - -	1/31/91 - MT AND UT COMPLETE, BACKING	
	PIPE TO ELBOW	C5.21	UT 45	NDE 5.2-46	- - X -	BAR GEOMETRY	
			UT 45T	NDE 5.2-46	X - - -		
			UT 60	NDE 5.2-46	- - X -		
						**UT-20**	
335200	14"-FWC-2305-6	C-F	MT	NDE 2.2-119	C X - - -	2/1/91 - MT AND UT COMPLETE, ROOT	
	PIPE TO PIPE	C5.21	UT 45	NDE 5.2-45	X - - -	GEOMETRY	
			UT 45T	NDE 5.2-45	X - - -		
			UT 60	NDE 5.2-45	- - X -		
						**UT-20**	
338100	18"-FWC-2305-24	C-F	MT	NDE 2.2-124	C X - - -	2/21/91 - MT COMPLETE; 2/26/91 - UT	
	NOZZLE EXTENSION TO NOZZLE	C5.21	UT 0	NDE 5.1-37	X - - -	COMPLETE, THERMAL SLEEVE GEOMETRY AND	
	CTMT		UT 45	NDE 5.1-37	- - X -	BEAM REDIRECTION	
			UT 45T	NDE 5.1-37	X - - -		
			UT 60	NDE 5.1-37	- - X -	**UT-10**	
			UT 60	NDE 5.1-37	X - - -		

DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
SECOND INTERVAL, THIRD PERIOD, FIRST OUTAGE (1991)  
CLASS 2 ALL STATUS COMPONENTS

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MAIN FEEDWATER SYSTEM C

ZONE NUMBER: 111		ASME			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G H R	**CALIBRATION BLOCK**
-----						

FROM STEAM GENERATOR C TO VLV FCV-3-498 REF. DWG. NO. 003-B68

338200	AUGMENTED EXAMINATION	---	UT 45	NDE 5.16-24	C - - X -	2/21/91 - UT COMPLETE, ROOT, BACKING
	FROM NOZZLE RAMP TO 1 DIAMETER	---	UT 60	NDE 5.16-24	- - X -	RING, AND COUNTERBORE GEOMETRY
	ON ELBOW					

\*\*UT-20, UT-29\*\*

DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
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2 INCH FEEDWATER BYPASS LINE B

ZONE NUMBER: 113		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**
-----					

FROM MAIN FEEDWATER LINE TO VALVE 3-489 REF. DWG. NO. 003-B70

339700	7883-H-013-04	F-C	VT-3	NDE 4.3-200	C X - - - 1/31/91 - VT COMPLETE
	BOX RESTRAINT	F3.10			

\*\*N/A\*\*

DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
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CLASS 2 ALL STATUS COMPONENTS

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6 INCH FEEDWATER BYPASS LINE C

ZONE NUMBER: 114		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**

FROM MAIN FEEDWATER LINE TO VALVE 3-499 REF. DWG. NO. 003-B71

340600	7883-H-013-12 BOX RESTRAINT	F-C F3.10	VT-3	NDE 4.3-220	C X - - - 1/31/91 - VT COMPLETE
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\*\*N/A\*\*

340700	6"-FWC-2303-4 PIPE TO VALVE 3-20-332	C-F C5.11	MT	NDE 2.2-118	C X - - - 1/31/91 - MT COMPLETE
--------	---	--------------	----	-------------	---------------------------------

\*\*N/A\*\*

341000	6"-FWC-2303-7 PIPE TO WELDOLET	C-F C5.11	MT	NDE 2.2-118	C X - - - 1/31/91 - MT COMPLETE
--------	-----------------------------------	--------------	----	-------------	---------------------------------

\*\*N/A\*\*

DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
SECOND INTERVAL, THIRD PERIOD, FIRST OUTAGE (1991)  
CLASS 3 ALL STATUS COMPONENTS

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6 INCH COMPONENT COOLING WATER C OUTSIDE CTMT.

ZONE NUMBER: 120	ASME				N I O	
	SEC. XI				S O N G T	
SUMMARY EXAMINATION AREA	CATGY	EXAM			T R S E H	
NUMBER IDENTIFICATION	ITEM NO	METHOD	PROCEDURE		A E I O E	REMARKS
-----	-----	-----	-----	-----	T C G M R	**CALIBRATION BLOCK**

FROM CCW PUMP TO CCW HEAT EXCHANGER REF. DWG. NO. 003-C03

345500	SR-158 PIPE SUPPORT	F-B F2.10	VT-3	NDE 4.3-192	C X - - -	1/13/91 - VT COMPLETE, LIGHT RUST NOTED AROUND BASE PLATE
--------	------------------------	--------------	------	-------------	-----------	--

\*\*N/A\*\*

345510	SR-158 1A INTEGRAL ATTACHMENT	D-B D1.20	VT-3	NDE 4.3-192	C X - - -	1/13/91 - VT COMPLETE
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\*\*N/A\*\*

345700	3-ARH-92 SPRING HANGER	F-C F3.50	VT-3,4 VT-4	NDE 4.3-199	C X - - -	1/31/91 - VT COMPLETE
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\*\*N/A\*\*

345810	3-ARH-92 1A INTEGRAL ATTACHMENT	D-B D2.40	VT-3	NDE 4.3-199	C X - - -	1/31/91 - VT COMPLETE
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\*\*N/A\*\*



DATE: 12/05/91  
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TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
SECOND INTERVAL, THIRD PERIOD, FIRST OUTAGE (1991)  
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16 INCH COMPONENT COOLING WATER B OUTSIDE CTMT.

ZONE NUMBER: 121		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**

FROM CCW PUMP TO CCW HEAT EXCHANGER REF. DWG. NO. 003-C04

345900	3-ARH-104 SLIDING STANCHION	F-B F2.10	VT-3	NDE 4.3-240	C X - - -	2/13/91 - VT COMPLETE  **N/A**
345910	3-ARH-104 IA INTEGRAL ATTACHMENT	D-B D2.20	VT-3	NDE 4.3-240	C X - - -	2/13/91 - VT COMPLETE  **N/A**
346000	3-ARH-105 RIGID ROD HANGER WITH U-BOLT	F-B F2.10	VT-3 VT-3 CNR	NDE 4.3-249 M-91-1153 91-3-030	C - - - x X - - -	2/13/91 - VT COMPLETE, MISSING LOCK NUT; 3/8/91 - VT RE-EXAM COMPLETE  **N/A**
346010	3-ARH-105 IA INTEGRAL ATTACHMENT	D-B D2.20	VT-3	NDE 4.3-249	C X - - -	2/13/91 - VT COMPLETE  **N/A**





DATE: 12/05/91  
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TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
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8 INCH COMPONENT COOLING WATER C INSIDE CTMT

ZONE NUMBER: 124		ASME		N I O	
		SEC. XI		S O N G T	
SUMMARY EXAMINATION AREA		CATGY EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
				T C G M R **CALIBRATION BLOCK**	
-----					

FROM NORMAL CTMT COOLER TO 8" CCW REF. DWG. NO. 003-C07

348300	292A	F-B	VT-3	NDE 4.3-202	C X - - - 1/31/91 - VT COMPLETE
	U-BOLT RESTRAINT	F2.10			

\*\*N/A\*\*

DATE: 12/05/91  
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TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
SECOND INTERVAL, THIRD PERIOD, FIRST OUTAGE (1991)  
CLASS 3 ALL STATUS COMPONENTS

PAGE: 84

6 INCH COMPONENT COOLING WATER A & B INSIDE

ZONE NUMBER: 125	ASME				N I O	
	SEC. XI				S O N G T	
SUMMARY EXAMINATION AREA	CATGY	EXAM			T R S E H	
NUMBER IDENTIFICATION	ITEM NO	METHOD	PROCEDURE		A E I O E	REMARKS
					T C G M R	**CALIBRATION BLOCK**

FROM NORMAL CTMT COOLER A & B TO 8" CCW REF. DWG. NO. 003-C08

348500	3-CCH-49 SLIDING STANCHION CTMT	F-B F2.10	VT-3	NDE 4.3-203	C X - - -	1/31/91 - VT COMPLETE
--------	---------------------------------------	--------------	------	-------------	-----------	-----------------------

\*\*N/A\*\*

348510	3-CCH-49 1A INTEGRAL ATTACHMENT	D-B D2.20	VT-3	NDE 4.3-203	C X - - -	1/31/91 - VT COMPLETE
--------	------------------------------------	--------------	------	-------------	-----------	-----------------------

\*\*N/A\*\*

DATE: 12/05/91  
REVISION: 1

**TURKEY POINT NUCLEAR PLANT UNIT 3  
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SECOND INTERVAL, THIRD PERIOD, FIRST OUTAGE (1991)  
CLASS 3 ALL STATUS COMPONENTS**

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### INCH COMPONENT COOLING WATER SYSTEM

**ZONE NUMBER: 135**

**ASME**  
**SEC. XI**

N I O  
 S O N G T  
 T R S E H

## SUMMARY EXAMINATION AREA

CATGY	EXAM
1	1
2	2
3	3
4	4
5	5
6	6
7	7
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10	10
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92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

A E I O E REMARKS

NUMBER	IDENTIFICATION
1	100-100000000
2	100-100000000
3	100-100000000
4	100-100000000
5	100-100000000
6	100-100000000
7	100-100000000
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97	100-100000000
98	100-100000000
99	100-100000000
100	100-100000000

ITEM NO	METHOD	PROCEDURE
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T C G M R \*\*CALIBRATION BLOCK\*\*

FROM CTMT. PEN TO BA EVAPORATOR 3E216 REF. DWG. NO. 003-C18

354900 3-ACH-48A  
U-BOLT HANGER

F-8	VT-3
F2.10	CNR
	NCR

NDE 4.3-232  
91-3-022  
N91-0193

C - - - X

2/8/91 - VT COMPLETE, EYE ROD AND U-BOLT  
BENT, ACCEPTABED AS-IS BY ENGINEERING  
EVALUATION  
\*\*N/A\*\*

355200 3-BAH-7  
SPRING SUPPORT

F-C	VT-3,4
F3.50	CNR
	NCR
	PWO

NDE 4.3-231  
91-3-021  
N91-0193  
WA910402140545

A - - - X

2/8/91 - VT COMPLETE, BEAM WELD PULLED AWAY, CORROSION, SPRING CAN SETTINGS ARE NOT THE SAME AS SHOWN ON AS-BUILT DRAWING, ACCEPTED AS-IS BY ENGINEERING EVALUATION  
\*\*\*N/A\*\*\*

355310 3-BAH-7 1A  
INTEGRAL ATTACHMENT

**D-8**  
**D2.40**

**VT-3**

**NDE 4.3-231**

C X - - -

2/8/91 - VT COMPLETE

\*\*\*N/A\*\*\*



DATE: 12/05/91

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TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
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4 INCH COMPONENT COOLING WATER A

ZONE NUMBER: 137

ASME

SEC. XI

SUMMARY EXAMINATION AREA

NUMBER IDENTIFICATION

CATGY

EXAM

ITEM NO

METHOD

PROCEDURE

N I O

S O N G T

T R S E H

A E I O E

T C G H R

REMARKS

\*\*CALIBRATION BLOCK\*\*

FROM CONTAINMENT PENETRATION 44A REF. DWG. NO. 003-C20356200 3-SMH-15  
ROD HANGER

F-B

VT-3

NDE 4.3-251

C - - - X

2/13/91 - VT COMPLETE, LOOSE BOLTS

F2.10

VT-3

91-2327

X - - -

IDENTIFIED; 7/23/91 - RE-EXAM COMPLETE  
AFTER NUTS WERE TIGHTENED

CNR

91-3-032

NCR

N91-0237

PWO

WA910323124441

\*\*N/A\*\*

DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
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CLASS 3 ALL STATUS COMPONENTS

PAGE: 87

10 INCH COMPONENT COOLING WATER C

ZONE NUMBER: 138

ASME

N I O  
S O N G T

SEC. XI

T R S E H

SUMMARY EXAMINATION AREA

CATGY

EXAM

A E I O E

REMARKS

NUMBER IDENTIFICATION

ITEM NO

METHOD

PROCEDURE

T C G H R

\*\*CALIBRATION BLOCK\*\*

FROM CONTAINMENT PENETRATION 44C REF. DWG. NO. 003-C21

356600	SR-296	F-B	VT-3	NDE 4.3-236	C X - - -	2/13/91 - VT COMPLETE
	ROD HANGER	F2.10				

\*\*N/A\*\*

356610	SR-296 1A	D-B	VT-3	NDE 4.3-236	C X - - -	2/13/91 - VT COMPLETE
	INTEGRAL ATTACHMENT	D2.20				

\*\*N/A\*\*

DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
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CLASS 3 ALL STATUS COMPONENTS

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2 INCH COMPONENT COOLING WATER

ZONE NUMBER: 141

ASME  
SEC. XI

N I O  
S O N G T  
T R S E H

SUMMARY EXAMINATION AREA  
NUMBER IDENTIFICATION

CATGY EXAM  
ITEM NO METHOD PROCEDURE

A E I O E REMARKS  
T C G M R \*\*CALIBRATION BLOCK\*\*

FROM NON-REGENERATIVE HEAT EXCHANGER REF. DWG. NO. 003-C24

357800 3-ACH-143  
RIGID ROD HANGER

F-C VT-3 NDE 4.3-248  
F3.10 CNR 91-91-029

C - - - X 2/13/91 - VT COMPLETE, INCOMPLETE THREAD  
ENGAGEMENT, DRAWING DISCREPANCY,  
ACCEPTABLE AS-IS PER ENGINEERING  
EVALUATION  
\*\*\*N/A\*\*\*

DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
SECOND INTERVAL, THIRD PERIOD, FIRST OUTAGE (1991)  
CLASS 3 ALL STATUS COMPONENTS

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3 INCH COMPONENT COOLING TO NON-REGEN.HX.

ZONE NUMBER: 141		ASME		N I O	
		SEC. XI		S O N G T	
SUMMARY EXAMINATION AREA		CATGY EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**

FROM SEAL WATER HEAT EXCHANGER REF. DWG. NO. 003-C24

358100	3-ACH-75	F-B	VT-3	NDE 4.3-242	C X - - - 2/13/91 - VT COMPLETE
	U-BOLT RESTRAINT	F2.10			

\*\*N/A\*\*



DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
SECOND INTERVAL, THIRD PERIOD, FIRST OUTAGE (1991)  
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12 INCH COMPONENT COOLING WATER

ZONE NUMBER: 142		ASME		N I O	
		SEC. XI		S O N G T	
SUMMARY EXAMINATION AREA		CATGY EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOO	PROCEDURE	A E I O E REMARKS
					T C G H R **CALIBRATION BLOCK**

FROM VALVE 3-787H REF. DWG. NO. 003-C25

358200	3-ARH-114	F-B	VT-3	NDE 4.3-250	C - - - X 2/13/91 - VT COMPLETE, DRAWING
	ROD HANGER & U-BOLT	F2.10	VT-3	91-0939	X - - - DISCREPANCY, MISSING LOCK NUTS; 4/20/91
			CNR	91-3-031	- VT RE-EXAM COMPLETE
			PWO	WA910328090031	
					**N/A**

FROM VALVE 3-835E REF. DWG. NO. 003-C25

358600	SR-313	F-B	VT-3	NDE 4.3-241	C X - - - 2/13/91 - VT COMPLETE
	ANCHOR	F2.10			
					**N/A**

358610	SR-313 1A	D-B	VT-3	NDE 4.3-241	C X - - - 2/13/91 - VT COMPLETE
	INTEGRAL ATTACHMENT	D2.20			
					**N/A**

DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
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COMPONENT COOLING TO RHX B

ZONE NUMBER: 146		ASME	N I O			
		SEC. XI	S O N G T			
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H		
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G H R	**CALIBRATION BLOCK**

FROM PEN 72 & 43 TO RHX 3E206B REF. DWG. NO. 003-C29

360810	3-ACH-4	F-B	VT-3	NDE 4.3-244	C - - - X	2/13/91 - VT COMPLETE, LOOSE NUT;
	U-BOLT HANGER	F2.10	VT-3	91-0940	- - - X	4/20/91 - MISSING PARTS; 6/14/91 -
			VT-3	91-1726	- - - X	SUPPORT DID NOT MATCH DRAWING; 6/26/91 -
			VT-3	91-1942	X - - -	VT RE-EXAM COMPLETE AFTER CORRECTION OF
			CNR	91-3-026		DEFICIENCIES
			NCR	N91-0504		**N/A**
			PWO	WA910328090752		

360820	3-ACH-4 IA	D-B	VT-3	NDE 4.3-244	C X - - -	2/13/91 - VT COMPLETE
	INTEGRAL ATTACHMENT	D2.20				

\*\*N/A\*\*

TO RESIDUAL HEAT EXCHANGER 3E206B REF. DWG. NO. 003-C29

360900	SR-300/ACH-5	F-C	VT-3	NDE 4.3-263	C X - - -	2/13/91 - VT COMPLETE
	BOX RESTRAINT	F3.10				

\*\*N/A\*\*

360910	SR-300/ACH-5 IA	D-B	VT-3	NDE 4.3-263	C X - - -	2/13/91 - VT COMPLETE
	INTEGRAL ATTACHMENT	D2.20				

\*\*N/A\*\*

FROM VALVE 3-835C REF. DWG. NO. 003-C29

361200	SR-314	F-B	VT-3	NDE 4.3-262	C X - - -	2/13/91 - VT COMPLETE
	ANCHOR	F2.10				

\*\*N/A\*\*

361210	SR-314 IA	D-B	VT-3	NDE 4.3-262	C X - - -	2/13/91 - VT COMPLETE
	INTEGRAL ATTACHMENT	D2.20				

\*\*N/A\*\*

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COMPONENT COOLING TO RHX B

ZONE NUMBER: 146		ASME	N I O			
		SEC. XI	S O N G T			
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H		
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G M R	**CALIBRATION BLOCK**
-----						

TO PEN 72 REF. DWG. NO. 003-C29

361300	3-ACH-6	F-B	VT-3	NDE 4.3-264	C X - - -	2/13/91 - VT COMPLETE
	U-BOLT RESTRAINT	F2.10				

\*\*N/A\*\*

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3 INCH COMPONENT COOLING WATER

ZONE NUMBER: 148

ASME

N I O

SEC. XI

S O N G T

SUMMARY EXAMINATION AREA

CATGY

EXAM

T R S E H

NUMBER IDENTIFICATION

ITEM NO

METHOD

PROCEDURE

A E I O E

REMARKS

T C G H R

\*\*CALIBRATION BLOCK\*\*

FROM BORIC ACID EVAPORATOR 3T240 REF. DWG. NO. 003-C31

361800 3-BAH-25

F-B

VT-3

NDE 4.3-235

C X - - - 2/13/91 - VT COMPLETE

U-BOLT RESTRAINT

F2.10

\*\*N/A\*\*



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TURKEY POINT NUCLEAR PLANT UNIT 3  
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10 INCH COMPONENT COOLING WATER

ZONE NUMBER: 150		ASME		N I O	
		SEC. XI		S O N G T	
SUMMARY EXAMINATION AREA		CATGY EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G M R **CALIBRATION BLOCK**

FROM CTMT. PEN P-22 REF. DWG. NO. 003-C33

363500	3-CCH-25 U-BOLT RESTRAINT	F-B F2.10	VT-3	NDE 4.3-265	C X - - - 2/13/91 - VT COMPLETE
--------	------------------------------	--------------	------	-------------	---------------------------------

\*\*N/A\*\*

363510	3-CCH-25 1A INTEGRAL ATTACHMENT	D-B D2.20	VT-3	NDE 4.3-265	C X - - - 2/13/91 - VT COMPLETE
--------	------------------------------------	--------------	------	-------------	---------------------------------

\*\*N/A\*\*



DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
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4 INCH COMPONENT COOLING WATER

ZONE NUMBER: 151	ASME				N I O	
	SEC. XI				S O N G T	
SUMMARY EXAMINATION AREA	CATGY	EXAM			T R S E H	
NUMBER IDENTIFICATION	ITEM NO	METHOD	PROCEDURE		A E I O E	REMARKS
-----	-----	-----	-----	-----	T C G M R	**CALIBRATION BLOCK**

FROM CV-3-2814 & CV-3-2908 REF. DWG. NO. 003-C34

364100	8074-A-368-01	F-B	VT-3	NDE 4.3-266	C - - - X	2/13/91 - VT COMPLETE, INCOMPLETE THREAD
	ANCHOR	F2.10	CNR	91-3-041		ENGAGEMENT, ACCEPTED AS-IS BY
	12'0"		NCR	N91-0243		ENGINEERING EVALUATION .
						**N/A**
364110	8074-A-368-01 1A	D-B	VT-3	NDE 4.3-266	C X - - -	2/13/91 - VT COMPLETE
	INTEGRAL ATTACHMENT	D2.20				
	12'0"					
						**N/A**





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COMPONENT COOLING WATER SYSTEM

ZONE NUMBER: 152		ASME			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G M R	**CALIBRATION BLOCK**

FROM PEN. NO. 4 REF. DWG. NO. 003-C36

364700	3-BAH-26 SPRING HANGER	F-C F3.50	VT-3,4 CNR	NDE 4.3-231 91-3-023	A - - - X	2/8/91 - VT COMPLETE, BEAM PULLED AWAY, BROKEN WELD, SEE 3-BAH-7 MULTIPLE SUPPORT, ACCEPTED AS-IS PER ENGINEERING EVALUATION **N/A**
--------	---------------------------	--------------	---------------	-------------------------	-----------	--

364710	3-BAH-26 IA INTEGRAL ATTACHMENT	D-B D2.40	VT-3	NDE 4.3-231	C X - - -	2/8/91 - VT COMPLETE
--------	------------------------------------	--------------	------	-------------	-----------	----------------------

\*\*N/A\*\*

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COMPONENT COOLING WATER FROM R.H.X. "A" SUPPORTS

ZONE NUMBER: 153		ASME		H I O	
		SEC. XI		S O N G T	
SUMMARY EXAMINATION AREA		CATGY EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G M R **CALIBRATION BLOCK**
-----					

REF. DWG. NO. 003-C37

365800	3-ACH-7	F-C	VT-3	91-2087	C X - - -	7/8/91 - VT COMPLETE, EXAMINED AS PART
	U-BOLT RESTRAINT	F3.10	NCR	91-0677		OF NCR 91-0677

\*\*N/A\*\*

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INCH AUXILIARY FEEDWATER DISCHARGE

ZONE NUMBER: 162		ASME	N I O			
		SEC. XI	S O N G T			
		CATGY	EXAM	T R S E H		
SUMMARY	EXAMINATION AREA			A E I O E		
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	T C G H R	REMARKS
*****						
FROM AFW PUMPS A, B, AND C REF. DWG. NO. 003-C46						
371800	80117-H-322-09 PIPE SUPPORT	F-B F2.10	VT-3	NDE 4.3-198	C X - - -	1/31/91 - VT COMPLETE  **N/A**
371900	80117-H-322-09 1A INTEGRAL ATTACHMENT 20"5"	D-A D1.20	VT-3	NDE 4.3-198	C X - - -	1/31/91 - VT COMPLETE  **N/A**
372400	SR-113 ROD HANGER 29"1"	F-B F2.10	VT-3	NDE 4.3-196	C X - - -	1/31/91 - VT COMPLETE, EXAMINED AS SUPPORT 3-AFH-47  **N/A**
372500	3-AFH-45 ROD HANGER	F-B F2.10	VT-3	NDE 4.3-197	C X - - -	1/31/91 - VT COMPLETE  **N/A**
372600	80117-A-324-02 PIPE ANCHOR	F-B F2.30	VT-3	NDE 4.3-195	C X - - -	1/31/91 - VT COMPLETE  **N/A**
372610	80117-A-324-02 1A INTEGRAL ATTACHMENT	D-A D1.20	VT-3	NDE 4.3-195	C X - - -	1/31/91 - VT COMPLETE  **N/A**

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6 INCH AUXILIARY FEEDWATER SYSTEM

ZONE NUMBER: 163		ASME			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOO	PROCEDURE	A E I O E	REMARKS
					T C G H R	**CALIBRATION BLOCK**

FROM MAIN FEEDWATER LINE DISCHARGE REF. DWG. NO. 003-C47

372900	3-CSTH-143	F-B	VT-3	NDE 4.3-221	C - - - X	1/30/91 - VT COMPLETE, NUT ON TOP OF
	ROO HANGER	F2.10	VT-3	NDE 4.3-292	X - - -	CLAMP IS NOT FLUSH WITH CLAMP; 6/10/91 -
	30"6"		CNR	91-3-016		VT RE-EXAM COMPLETE
			PWO	WA910206105043		**N/A**
373000	80117-A-321-01	F-B	VT-3	NDE 4.3-222	C X - - -	1/30/91 - VT COMPLETE
	ANCHOR	F2.10				**N/A**
	30"6"					
373100	80117-A-321-01 1A	D-A	VT-3	NDE 4.3-222	C X - - -	1/30/91 - VT COMPLETE
	INTEGRAL ATTACHMENT	D1.20				**N/A**
	30"6"					



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TURKEY POINT NUCLEAR PLANT UNIT 3  
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4 INCH AUXILIARY FEEDWATER SYSTEM

ZONE NUMBER: 163		ASME				N I O	
		SEC. XI				S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM			T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE		A E I O E	REMARKS
						T C G H R	**CALIBRATION BLOCK**

FROM MAIN FEEDWATER LINE DISCHARGE REF. DWG. NO. 003-C47

373300	80117-H-321-03 U-BOLT RESTRAINT 30'6"	F-B F2.10	VT-3	NDE 4.3-223	C X - - -	1/30/91 - VT COMPLETE, LIGHT RUST INSIDE SADDLE ON U-BOLT  **N/A**
373600	80117-R-321-01 BOX RESTRAINT 37'10"	F-B F2.10	VT-3	NDE 4.3-224	C X - - -	1/30/91 - VT COMPLETE  **N/A**
373800	80117-H-321-01 SPRING SUPPORT 41'6"	F-C F3.50	VT-3 VT-4	NDE 4.3-225	C X - - -	1/30/91 - VT COMPLETE, RUST ON SPRING CAN  **N/A**
374000	80117-H-321-01 IA INTEGRAL ATTACHMENT 41'6"	D-A D1.40	VT-3	NDE 4.3-225	C X - - -	1/30/91 - VT COMPLETE  **N/A**

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3 INCH AUXILIARY FEEDWATER SYSTEM

ZONE NUMBER: 170		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G M R **CALIBRATION BLOCK**
<u>FROM VALVE AFD-001 &amp; AFD-002 REF. DWG. NO. 003-C56</u>					
380300	80117-H-320-06 BOX RESTRAINT 38'4"	F-B F2.10	VT-3	NDE 4.3-226	C X - - - 1/31/91 - VT COMPLETE  **N/A**
380500	80117-H-320-08 DUAL RIGID STRUT 37'4"	F-C F3.10	VT-3 VT-3 CNR PWO	NDE 4.3-267 91-2821 91-3-042 N90-0125 WA910311123808	C - - - X 1/31/91 - VT COMPLETE, NO LUBRICATION, X - - - RUST ON SUPPORT; 9/12/91 - VT RE-EXAM COMPLETE AFTER CLEANING  **N/A**



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4 INCH AUXILIARY FEEDWATER SYSTEM

ZONE NUMBER: 171		ASME	N I O			
		SEC. XI	S O N G T			
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H		
NUMBER	IDENTIFICATION	ITEM NO	METHOO	PROCEDURE	A E I O E	REMARKS
					T C G H R	**CALIBRATION BLOCK**
<u>FROM AFW PUMPS DISCHARGE REF. DWG. NO. 003-C57</u>						
381500	80117-A-320-04 ANCHOR 30'10"	F-B F2.10	VT-3	NDE 4.3-209	C X - - -	1/30/91 - VT COMPLETE  **N/A**
381600	80117-H-320-20 DUAL RIGID STRUTS 29'6"	F-C F3.10	VT-3 VT-3 CNR PWO	NDE 4.3-211 NDE 4.3-286 91-3-012 WA910207103716	C - - - X - - - X	1/30/91 - VT COMPLETE, BEARING PUSHED OUT OF PADDLE END; 4/12/91 - VT RE-EXAM, BEARINGS PAINTED, NO LUBRICATION, THIS EXAM CLOSES CNR, ADDITIONAL INDICATIONS WILL BE FIXED AT A LATER TIME **N/A**
381800	80117-H-320-19 RIGID STRUT 29'6"	F-B F2.10	VT-3 VT-3 CNR PWO	NDE 4.3-210 NDE 4.3-293 91-3-011 WA910206104134	C - - - X X - - -	1/30/91 - VT COMPLETE, MISSING LOCKING RING ON LOAD PIN, NO EVIDENCE OF LUBRICATION, WHITE PLASTER OVER STRUT; 6/25/91 - VT RE-EXAM COMPLETE **N/A**

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5 INCH AUXILIARY FEEDWATER SYSTEM

ZONE NUMBER: 171		ASME		N I O	
		SEC. XI		S O N G T	
SUMMARY EXAMINATION AREA		CATGY EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
				T C G H R **CALIBRATION BLOCK**	
-----					

FROM AFW PUMPS DISCHARGE REF. DWG. NO. 003-C57

382200	80117-H-320-16	F-B	VT-3	NDE 4.3-208	C X - - - 1/30/91 - VT COMPLETE
	BOX RESTRAINT	F2.10			
	29"6"				

\*\*\*N/A\*\*\*

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TURKEY POINT NUCLEAR PLANT UNIT 3  
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AUGMENTED EXAMS

ZONE NUMBER: N/A		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E
					T C G H R
					REMARKS
					**CALIBRATION BLOCK**

6" REACTOR COOLANT LINE REF. DWG. NO. 5613-P-660

900000	3-PRH-7	---	VT-3	NDE 4.3-275	C - - - X	3/11/91 - VT COMPLETE, EXPANDED
	INTEGRAL WELDED PIPE SUPPORT	---	CNR	91-3-051		EXAMINATION DUE TO FAILURE OF ADJACENT
			PCM	90-381		SNUBBER, BORIC ACID RESIDUE AROUND BASE
			PWO	WA910318134739		PLATE, NO NUTS WERE USED AS IDENTIFIED
						ON AS-BUILT DRAWING; TO BE REWORKED
						UNDER PCM 90-381
						**N/A**

900005	3-RCH-26	---	VT-3,4	NDE 4.3-243	C - - - X	2/7/91 - VT COMPLETE
	SPRING HANGER WITH INTEGRAL	---	CNR	91-3-025		
	ATTACHMENT		PWO	WA910312131231		

\*\*N/A\*\*

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AUGMENTED EXAMS

ZONE NUMBER: 040		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G M R **CALIBRATION BLOCK**

2" HIGH HEAD SI "A" FROM 10" SI TO VALVE 3-873 REF. DWG. NO. 003-A39

900010	VALVE 3-868A BOLTING	---	VT-1	NDE 4.1-149	C - - - X	2/25/91 - VT COMPLETE, 2 BOLTS AND 2
	VALVE BOLTING	---	CNR	91-3-046		NUTS, BORIC ACID LEAKING FROM VALVE
			PWO	WA910227081716		PACKING
						**N/A**



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AUGMENTED EXAMS

ZONE NUMBER: 041		ASME				N I O
		SEC. XI				S O N G T
SUMMARY EXAMINATION AREA		CATGY	EXAM			T R S E H
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G H R	**CALIBRATION BLOCK**
<u>2" HIGH HEAD SI "B" FROM 10" SI TO VALVE 3-873B REF. DWG. NO. 003-A40</u>						
900020	VALVE 3-8688 BOLTING	---	VT-1	NDE 4.1-147	C - - - X	2/20/91 - VT COMPLETE, 2 BOLTS AND 2
	VALVE BOLTING	---	CNR	91-3-044		NUTS EXAMINED, BORIC ACID LEAKING FROM
			PWO	WA910226090813		PACKING, CLEANED BOLTING, THIS IS AN
						AUGMENTED EXAM
						***N/A***

DATE: 12/05/91  
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TURKEY POINT NUCLEAR PLANT UNIT 3  
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AUGMENTED EXAMS

ZONE NUMBER: 042		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E
					T C G M R
					REMARKS
					**CALIBRATION BLOCK**

2" HIGH HEAD SI "C" FROM 10" SI TO VALVE 3-873C REF. DWG. NO. 003-A41

900030	VALVE 3-868C BOLTING	---	VT-1	NDE 4.1-148	C - - - X	2/20/91 - VT COMPLETE, BORIC ACID
	VALVE BOLTING	---	CNR	91-3-045		LEAKING FROM VALVE PACKING, BOLTING
			PWO	WA910226092234		CLEANED, THIS IS AN AUGMENTED EXAM
						**N/A**

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AUGMENTED EXAMS

ZONE NUMBER: 043		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E
					REMARKS
					T C G H R
					**CALIBRATION BLOCK**

2" HIGH PRESS. SI "A" FROM 29" RCS TO VALVE 3-866A REF. DWG. NO. 003-A42

900040	3-866A	---	VT-1	NDE 4.1-145	C X - - -	2/12/91 - VT COMPLETE, 2 STUDS AND 4 NUTS
	VELAN VALVE BOLTING	---				

\*\*\*N/A\*\*\*



DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
SECOND INTERVAL, THIRD PERIOD, FIRST OUTAGE (1991)  
CLASS 1 ALL STATUS COMPONENTS

PAGE: 109

AUGMENTED EXAMS

ZONE NUMBER: 044		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E
					T C G H R
					REMARKS
					**CALIBRATION BLOCK**
<u>2" HIGH PRESS. SI "B" FROM 29" RCS TO VALVE 3-866B REF. DWG. NO. 003-A43</u>					
900050	VALVE 3-866B	---	VT-1	NDE 4.1-146	C - - - X 2/12/91 - VT COMPLETE, BORIC ACID BUILD
	VELAN VALVE BOLTING	---	VT-1	NDE 4.1-162	X - - - UP IDENTIFIED ON 2 STUDS AND 4 NUTS;
			CNR	91-3-037	5/1/91 - VT RE-EXAM COMPLETE AFTER
			PWO	WA910307153521	CLEANING OF BOLTING
					**N/A**

DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
SECOND INTERVAL, THIRD PERIOD, FIRST OUTAGE (1991)  
CLASS 1 ALL STATUS COMPONENTS

PAGE: 110

DOCUMENTED EXAMS

ZONE NUMBER: 020		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G M R **CALIBRATION BLOCK**
<u>4" RCS LINE "B" FROM PZR TO MAIN RCS LOOP PIPE B REF. DWG. NO. 003-A14</u>					
900060	4"-RC-1304	---	VT-3	NDE 4.3-144	C - - - X 2/12/91 - VT COMPLETE, BORIC ACID,
	WHIP RESTRAINTS	---	VT-3	NDE 4.3-164	X - - - INCOMPLETE THREAD ENGAGEMENT, CORROSION,
			CNR	91-3-033	NOT A SECTION XI EXAM; 5/13/91 - VT
			NCR	N91-0238	RE-EXAM COMPLETE
			PWO	WA910410102002	***N/A**



DATE: 12/05/91  
REVISION: 1

TURKEY POINT NUCLEAR PLANT UNIT 3  
INSERVICE INSPECTION SUMMARY REPORT  
SECOND INTERVAL, THIRD PERIOD, FIRST OUTAGE (1991)  
CLASS 1 ALL STATUS COMPONENTS

PAGE: 111

AUGMENTED EXAMS

ZONE NUMBER:	ASME				N I O	
	SEC. XI				S O N G T	
SUMMARY EXAMINATION AREA	CATGY	EXAM			T R S E H	
NUMBER IDENTIFICATION	ITEM NO	METHOD	PROCEDURE		A E I O E	REMARKS
					T C G H R	**CALIBRATION BLOCK**

MAIN REACTOR COOLANT SYSTEM REF. DWG. NO.

900070	THICKNESS MEASUREMENTS	---	UT 0	NDE 5.18-8	C X - - -	2/7/91 - UT COMPLETE, THICKNESS
		---	UT 0	NDE 5.18-9	X - - -	MEASUREMENTS ONLY
CTMT			UT 0	NDE 5.18-10	X - - -	
			UT 0	NDE 5.18-11	X - - -	
			UT 0	NDE 5.18-14	X - - -	**N/A**

REACTOR COOLANT COLD LEGS LOOPS A, B, AND C REF. DWG. NO.

900072	THICKNESS MEASUREMENTS	---	UT	NDE 5.18	C	
		---				
CTMT						

\*\*11W 800792\*\*

THICKNESS MEASUREMENTS REF. DWG. NO.

900080	VALVE 3-753A	---	UT 0	NDE 5.18-12	C X - - -	2/13/91 - THICKNESS MEASUREMENTS ONLY
	CHECK VALVE	---				

\*\*798394\*\*

EXAMINATION/TESTING

Visual examination (VT-3, VT-4 hand stroke) were performed on a total of one hundred and eleven (111) snubbers in and functional testing was performed on thirty one (31) snubbers.

TAG#	S/N	MODEL	SYSTEM	VT	FT	TEST SAMPLE	CORRECTIVE ACTION
3-1000	18015	PSA-1	AFW	SAT			NONE
3-1001	27095	PSA-3	AFW	SAT			NONE
3-1002	104	PSA-3	AFW	SAT			NONE
3-1003	29625	PSA-3	AFW	SAT			NONE
3-1004	101	PSA-3	FW	SAT	SAT	YES	NONE
3-1005	10035	PSA-35	HS	SAT	SAT	YES	NONE
3-1006	3051	PSA-35	HS	SAT			NONE
3-1007	4590	PSA-35	HS	SAT			NONE
3-1008	8084	PSA-35	HS	SAT			SNUBBER WAS FOUND TO BE INSTALLED 180 DEGREES FROM DESIGN. ADDRESSED ON NCR N- 91-0092.
3-1009	1203	PSA-35	HS	SAT			NONE
3-1010	11931	PSA-35	HS	SAT			NONE
3-1011	12376	PSA-10	HS	SAT			NONE
3-1012	8086	PSA-35	HS	SAT	SAT		NONE
3-1013	33624	PSA-1/4	CCW	SAT			NONE
3-1014	1722	PSA-1/4	RHR	SAT			NONE
3-1015	18009	PSA-10	SIS	SAT			NONE
3-1016	18012	PSA-1	SIS	SAT			SNUBBER WAS FOUND TO BE INSTALLED 180 DEGREES FROM DESIGN. ADDRESSED ON NCR N- 91-0107.
3-1017	18003	PSA-1	SIS	SAT			NONE

TAG#	S/N	MODEL	SYSTEM	VT	FT	TEST SAMPLE	CORRECTIVE ACTION
3-1018	18013	PSA-1	SIS	SAT			NONE
3-1019	1889	PSA-3	SIS	SAT			NONE
3-1020	103	PSA-3	SIS	SAT			NONE
3-1021	16725	PSA-1/2	SIS	SAT	SAT	YES	NONE
3-1022	18006	PSA-1	RHR	SAT			NONE
3-1023	23273	PSA-1	RHR	SAT			NONE
3-1024	17427	PSA-3	RHR	SAT			NONE
3-1025	100	PSA-3	RHR	SAT			NONE
3-1026	12394	PSA-10	RHR	SAT			SNUBBER WAS FOUND TO BE INSTALLED 180 DEGREES FROM DESIGN. ADDRESSED ON NCR N- 91-0107.
3-1027	12396	PSA-10	RHR	SAT			SNUBBER WAS FOUND TO BE INSTALLED 180 DEGREES FROM DESIGN. ADDRESSED ON NCR N- 91-0107.
3-1028	11135	PSA-10	RHR	SAT	SAT	YES	SNUBBER WAS FOUND TO BE INSTALLED 180 DEGREES FROM DESIGN. ADDRESSED ON NCR N- 91-0146.
3-1029	11330	PSA-10	RHR	SAT			SNUBBER WAS FOUND TO BE INSTALLED 180 DEGREES FROM DESIGN. ADDRESSED ON NCR N- 91-0146.
3-1030	11121	PSA-10	RHR	SAT			NONE
3-1031	27086	PSA-3	SG	SAT			NONE
3-1032	24410	PSA-3	SG	SAT			NONE
3-1033	19328	PSA-3	SG	SAT			NONE
3-1034	24415A	PSA-1	SG	SAT			SNUBBER WOULD NOT HANDSTROKE, FROZEN. ADDRESSED ON NCR N-91- 0208. INSTALLED SPARE S/N 24429. INSPECTED ADJACENT HANGERS 78101B-H-322-03 AND 05.
3-1035	19330	PSA-3	SG	SAT			NONE

TAG#	S/N	MODEL	SYSTEM	VT	FT	TEST SAMPLE	CORRECTIVE ACTION
3-1036	27100	PSA-3	SG	SAT			NONE
3-1037	11922	PSA-35	FW	SAT			NONE
3-1038	11934	PSA-35	FW	SAT			NONE
3-1039	16241	PSA-10	FW	SAT			NONE
3-1040	16239	PSA-10	FW	SAT			NONE
3-1041	16234	PSA-10	FW	SAT			NONE
3-1042	12365	PSA-10	FW	SAT			NONE
3-1043	17899	PSA-10	RCS	SAT			NONE
3-1044	17900	PSA-10	RCS	SAT			NONE
3-1045	17905	PSA-10	RCS	SAT	SAT		SNUBBER WOULD NOT HANDSTROKE, FROZEN. ADDRESSED ON NCR N-91-0168. INSTALLED SPARE S/N 7782. INSPECTED ADJACENT HANGERS 3-PRH-7 AND 3-PRH-5.
3-1046	17903	PSA-10	RCS	SAT			NONE
3-1047	17902	PSA-10	RCS	SAT	SAT		NONE
3-1048	17904	PSA-10	RCS	SAT			NONE
3-1049	16243	PSA-10	RCS	SAT			INSTALLED SPARE S/N 16245
3-1050	17906	PSA-10	RCS	SAT			NONE
3-1051	16249	PSA-10	RCS	SAT			SNUBBER WAS FOUND TO BE INSTALLED 180 DEGREES FROM DESIGN. ADDRESSED ON NCR N-91-0212.
3-1052	16233	PSA-10	RCS	SAT			SNUBBER WAS FOUND TO BE INSTALLED 180 DEGREES FROM DESIGN. ADDRESSED ON NCR N-91-0212.
3-1053	2462	PSA-10	RCS	SAT			NONE
3-1054	16248	PSA-10	RCS	SAT			SNUBBER WAS FOUND TO BE INSTALLED 180 DEGREES FROM DESIGN. ADDRESSED ON NCR N-91-0212.

TAG#	S/N	MODEL	SYSTEM	VT	FT	TEST SAMPLE	CORRECTIVE ACTION
3-1055	16238	PSA-10	RCS	SAT	SAT	YES	SNUBBER WAS FOUND TO BE INSTALLED 180 DEGREES FROM DRAWING. ADDRESSED ON NCR N- 91-0212. FT INDICATED A HIGH ACCELERATION RATE OF .02g, INSTALLED SPARE S/N 13697,
3-1057	27106	PSA-3	RCS	SAT			NONE
3-1058	27102	PSA-3	RCS	SAT			NONE
3-1060	19329	PSA-3	RCS	SAT	SAT	YES	NONE
3-1069	27072	PSA-3	RCS	SAT			NONE
3-1070	27079	PSA-3	RCS	SAT			NONE
3-1071	27069	PSA-3	RCS	SAT			NONE
3-1072	27073	PSA-3	RCS	SAT			NONE
3-1073	27090	PSA-3	RCS	SAT			NONE
3-1074	27104	PSA-3	RCS	SAT			NONE
3-1075	18074	PSA-1/2	CVCS	SAT	SAT	YES	NONE
3-1076	19275	PSA-3	CVCS	SAT			NONE
3-1077	16230	PSA-10	FW	SAT			NONE
3-1078	16229	PSA-10	FW	SAT			NONE
3-1079	10176	PSA-10	FW	SAT			NONE
3-1080	10173	PSA-10	FW	SAT			NONE
3-1081	11921	PSA-35	FW	SAT			NONE
3-1082	11932	PSA-35	FW	SAT			NONE
3-1083	11925	PSA-35	FW	SAT			NONE
3-1084	7000	PSA-35	FW	SAT			NONE
3-1091	27087	PSA-3	CVCS	SAT	SAT	YES	NONE





TAG#	S/N	MODEL	SYSTEM	VT	FT	TEST SAMPLE	CORRECTIVE ACTION
3-1092	27105	PSA-3	CVCS	SAT			NONE
3-1093	27091	PSA-3	CVCS	SAT			NONE
3-1094	27074	PSA-3	CVCS	SAT			NONE
3-1095	16733	PSA-1/2	CCW	SAT	SAT	YES	NONE
3-1096	11993	PSA-1/2	CCW	SAT			EXCEEDED "L" DIMENSION ACCEPTANCE CRITERIA. NCR N- 91-0209. USE AS IS.
3-1097	16724	PSA-1/2	CCW	SAT			NONE
3-1098	33628	PSA-1/4	CCW	SAT			NONE
3-1099	16727	PSA-1/2	CCW	SAT			EXCEEDED "L" DIMENSION ACCEPTANCE CRITERIA. NCR N- 91-0192. USE AS IS.
3-1100	17819	PSA-1/2	WD	SAT	SAT		NONE
3-1101	33626	PSA-1/4	WD	SAT	SAT	YES	NONE
3-1102	29451	PSA-1/4	WD	SAT			NONE
3-1103	11996	PSA-1/2	CVCS	SAT	SAT	YES	NONE
3-1104	24412	PSA-1	CVCS	SAT	SAT	YES	OUT OF ALIGNMENT ON THE HORIZONTAL AXIS. CORRECTED ON WA 910212153317
3-1105	16134	PSA-1	CCW	SAT	SAT		NONE
3-1106	29495	PSA-1/4	CCW	SAT			NONE
3-1110	16136	PSA-1	CCW	SAT	SAT		NONE
3-1111	2875	PSA-3	RHR	SAT			NONE
3-1112	27083	PSA-3	RHR	SAT			NONE
3-1120	18325	PSA-1/2	CCW	SAT			NONE
3-1121	24430	PSA-1	CCW	SAT			NONE
3-1123	12988	PSA-35	HS	SAT	SAT		NONE

TAG#	S/N	MODEL	SYSTEM	VT	FT	TEST SAMPLE	CORRECTIVE ACTION
3-1124	12991	PSA-35	HS	SAT	SAT		NONE
3-1125	12986	PSA-35	HS	SAT	SAT		NONE
3-1126	12989	PSA-35	HS	SAT	SAT		NONE
3-1127	12990	PSA-35	HS	SAT	SAT		NONE
3-1128	12985	PSA-35	HS	SAT	SAT		NONE
3-1129	12987	PSA-35	HS	SAT	SAT		NONE
3-1130	17840	PSA-10	HS	SAT	SAT		NONE
3-1131	17837	PSA-10	HS	SAT	SAT		NONE
3-1132	17838	PSA-10	HS	SAT	SAT		NONE
3-1133	17841	PSA-10	HS	SAT	SAT		FT INDICATED A HIGH ACCELERATION RATE .02g, INSTALLED SPARE S/N 13695.
3-1134	17836	PSA-10	HS	SAT	SAT		NONE
3-1135	17839	PSA-10	HS	SAT	SAT		NONE
3-1136	19884	PSA-1/2	CVCS	SAT			NONE
3-1137	19885	PSA-1/2	CVCS	SAT			NONE



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# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date July 19, 1990

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 1418 PC/M: 89-515 P/S: 90-236

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Intake Cooling Water

5. (a) Applicable Construction Code B31.1 1986 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Check Valve	TRW Mission	W6727	N/A	3-50-331	Est. 1970	Replaced	No
Check Valve	TRW Mission	18635	N/A	3-50-331	1989	Replacement	No

7. Description of Work Replaced valve at tag location 3-50-331.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Other ☐

Pressure 23 psi Test Temp. 80.4 Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

080007

A047 6/11

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Quality Group "C"

Applicable Manufacturer's Data Reports to be attached

Mechanical connection, No welding performed

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] MAINT. SVPT. Date 7/21, 19 90  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period February 10, 1990 to February 23, 1990, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
Inspector's Signature

Commissions Factory Mutual System  
4956 (N) (I)  
National Board, State, Province, and Endorsements

Date 7/25 19 90

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT Date August 9, 1990  
Name  
P.O. BOX 529100, MIAMI, FL 33152  
Address
2. Plant TURKEY POINT Unit #3  
Name N-90-0077  
P.O. BOX 3088, FLORIDA CITY, FL 33034 CWO: 300077, PCM: 86-077, PS-90-024  
Address Repair Organization P.O. No., Job No., etc.
3. Work Performed by BECHTEL CONSTRUCTION, INC. Type Code Symbol Stamp N/A  
Name N/A  
P.O. BOX 3218, FLORIDA CITY, FL 33034 Authorization No. N/A  
Address Expiration Date N/A
4. Identification of System Steam Generator Wet Lay-up System
5. (a) Applicable Construction Code B31.1, 19 83 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda
6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Gate Valve	N/A	N/A	N/A	SGWL-3-007	EST. 1970	Replaced	No
Gate Valve	Henry Vogt Machine Co.	3-215515	N/A	SGWL-3-007	1987	Replacement	No
Gate Valve	N/A	N/A	N/A	SGWL-3-025	EST. 1970	Replaced	No
Gate Valve	Henry Vogt Machine Co.	6-215515	N/A	SGWL-3-025	1987	Replacement	No
Gate Valve	N/A	N/A	N/A	SGWL-3-042	EST. 1970	Replaced	No
Gate Valve	Henry Vogt Machine Co.	5-215515	N/A	SGWL-3-042	1987	Replacement	No
Globe Valve	N/A	N/A	N/A	SGWL-3-011	EST. 1970	Replaced	No

7. Description of Work Replaced the Isolation Valves in the Stm. Gen. Wet Lay-up System.

Code Case N-416 invoked for welds associated with the installation of valves

( Cont. on Sht.2 )

8. Tests Conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☒ Other ☐

\*\* Pressure 1370 / 1315 psi Test Temp. N/A Degree's F

\*\* FW's for Valves SGWL-3-011, 3-031 and 3-049.

\* System Functional Test for FW's for SGWL-3-007, 3-025 and 3-042.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding was performed in accordance with the FP&L Weld Control Manual and Site Procedures. Quality Group "B".

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned W.D. Brown SITE MANAGER Date 8-23, 1990  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.have inspected the components described in this Owner's Report during the period JAN. 31, 1990 to JULY 12, 1990, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

D. E. Boyer  
Inspector's SignatureCommissions Factory Mutual System  
4956 (N) (I)  
National Board, State, Province, and EndorsementsDate 8/24 1990



# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

Page 3 of 4

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 529100, MIAMI, FL 33152  
Address

Date August 9, 1990

Sheet 2 of 3

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit #3

CWO: 300077, PCM: 86-077, NS-90-0077  
Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Steam Generator Wet Lay-up System

5. (a) Applicable Construction Code B31.1 1983 Edition, 83 N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Globe Valve	Henry Vogt Machine Co.	9-215515	N/A	SGWL-3-011	1987	Replacement	No
Globe Valve	N/A	N/A	N/A	SGWL-3-031	EST. 1970	Replaced	No
Globe Valve	Henry Vogt Machine Co.	11-215515	N/A	SGWL-3-031	1987	Replacement	No
Globe Valve	N/A	N/A	N/A	SGWL-3-049	EST. 1970	Replaced	No
Globe Valve	Henry Vogt Machine Co.	10-215515	N/A	SGWL-3-049	1987	Replacement	No
2" Piping	N/A	N/A	N/A	N/A	EST. 1970	Repaired	No

7. Description of Work SGWL-3-007, 3-025, 3-042. A System Functional Test was performed to verify pressure boundry integrity. A Hydrostatic Pressure Test will be performed during the next scheduled hydro of the associated Steam Generator. A linear indication in

( Cont. on Sht. 3 )



# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

Page 4 of 4

1. Owner FLORIDA POWER & LIGHT

Name

P.O. BOX 529100, MIAMI, FL 33152

Address

Date August 9, 1990

Sheet 3 of 3

2. Plant TURKEY POINT

Name

P.O. BOX 3088, FLORIDA CITY, FL 33034

Address

Unit #3

CWO: 300077, PCM: 86-077, N-90-0077  
PS-90-024

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.

Name

P.O. BOX 3218, FLORIDA CITY, FL 33034

Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Steam Generator Wet Lay-up System

5. (a) Applicable Construction Code B31.1 1983 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)

7. Description of Work Existing piping to Valve SGWL-3-049 was repaired by light buffing.

NDE was performed to verify removal of the indication and pipe wall thickness.



# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

Page 1 of 2

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date August 10, 1990

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 1038

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Reactor Coolant System

5. (a) Applicable Construction Code B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Valve	Copes Vulcan	N/A	N/A	3-455A	Est. 1970	Replaced	No

7. Description of Work Replaced the blind flange studs and nuts in the abandoned valve body located in the pressurizer spray line, tag location 3-455A.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒  
 Pressure 2335 psi Test Temp. 547 Degree's F

\* RCS Overpressure Test per OP 1004.1

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Quality Group "A"

Applicable Manufacturer's Data Reports to be attached

Mechanical connection, No welding performed

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned *Chad M. Smith* Date 8/13, 19 90  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.

have inspected the components described in this Owner's Report during the period February 7, 1990 to May 19, 1990, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*D. Boyer*  
Inspector's Signature

Commissions Factory Mutual System  
4956 (N) (I)  
National Board, State, Province, and Endorsements

Date 8/14 19 90

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date September 11, 1990

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2459 NCR: 89-0232

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Chemical and Volume Control

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
CVCS Piping	N/A	N/A	N/A	N/A	Est. 1970	Replacement	No

7. Description of Work Replaced defective section of piping. Support MK# 4, integral attachment weld

had to be removed and rewelded to facilitate installation of new piping.

8. Tests Conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure 190 psi Test Temp. 70 Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

90-001-3

## FORM NIS-2 (Back)

9. Remarks Quality Group "B"

Applicable Manufacturer's Data Reports to be attached

All welding performed in accordance with the FP&L Weld Control Manualand site procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed

MAINT. SUP.  
 Owner or Owner's Designee, Title

Date 9/13 19 90

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period January 8, 1990 to August 22, 1990, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

D. C. Roger  
 Inspector's Signature

Commissions

Factory Mutual System  
 4956 (N) (I)

National Board, State, Province, and Endorsements

Date 9/13 19 90



# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT Date 10-1-90  
Name  
P.O. BOX 529100, MIAMI, FL 33152  
Address
2. Plant TURKEY POINT Unit 3  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address  
 CWO: 200054 NCR-C-0690-87  
 PCM: 89-046 MPIL: 90-056M  
 Repair Organization P.O. No., Job No., etc.
3. Work Performed by BECHTEL CONSTRUCTION, INC. Type Code Symbol Stamp N/A  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address  
 Authorization No. N/A  
 Expiration Date N/A
4. Identification of System Reactor Coolant System
5. (a) Applicable Construction Code B31.1, 1955 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda
6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Snubber	Pacific Scientific	116	N/A	FPL Tag# 3-1047	N/A	Replaced	Yes
Snubber	Pacific Scientific	17902	N/A	FPL Tag# 3-1047	1989	Replacement	No
Snubber	Pacific Scientific	16242	N/A	FPL Tag# 3-1048	1983	Replaced	Yes
Snubber	Pacific Scientific	17904	N/A	FPL Tag# 3-1048	1989	Replacement	No
Snubber	Pacific Scientific	111	N/A	FPL Tag# 3-1049	N/A	Replaced	Yes
Snubber	Pacific Scientific	16243	N/A	FPL Tag# 3-1049	1983	Replacement	Yes

7. Description of Work Replaced existing PSA-10(10Kip) snubbers, with PSA-10(15Kip) snubbers,  
on the Pressurizer Relief Line between the pressurizer and the pressurizer control  
valve 3-456. Support No. 3-PRH-5 modified to accomodate replacement snubbers.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ N/A  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

90-002-3

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding performed in accordance with the FP&L Welding Control Manual  
and site procedures.Quality Group A

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned W.D. Brown SITE MANAGER Date 10-10, 1990  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.have inspected the components described in this Owner's Report during the period Feb. 9, 1990 to APRIL 23, 1990, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

D.E. Boyer  
Inspector's SignatureCommissions Factory Mutual System  
4956 (N) (I)  
National Board, State, Province, and EndorsementsDate 10/11 1990

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**  
As Required by the Provisions of the ASME Code Section XI

Page 1 of 2

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date DECEMBER 31, 1990

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO:2166 PCM:90-339 P/S:90-1299 NCR-C-0920-87  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Spent Fuel Pit Cooling

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping	N/A	N/A	N/A	H-690-05	Est. 1970	Replacement	No

7. Description of Work Removed and replaced pipe lugs on pipe support H-690-05 due to weld discrepancies.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

90-003-3

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

# FORM NIS-2 (Back)

Page 2 of 2

## 9. Remarks Quality Group "C"

Applicable Manufacturer's Data Reports to be attached

All welding performed in accordance with the FP&L Weld Control Manual and Site  
procedures.

### CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] For FBW/and Maint. Supt. Date JAN 29, 19 91  
Owner or Owner's Designee, Title

### CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Florida and employed by Arkwright Mutual Insurance of Norwood, MA.

have inspected the components described in this Owner's Report during the period November 5, 1990 to December 11, 1990, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

Charles A. Lillo  
Inspector's Signature

Commissions Factory Mutual System  
NB7719  
National Board, State, Province, and Endorsements

Date 1-29 19 91

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT Date January 19, 1991  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address  
 2. Plant TURKEY POINT Unit 3  
Name MPIL 90-207M  
P.O. BOX 3088, FLORIDA CITY, FL 33034 CWO:200100 PCM:90-388 MPIL 90-202M  
Address Repair Organization P.O. No., Job No., etc.  
 3. Work Performed by BECHTEL CONSTRUCTION, INC. Type Code Symbol Stamp N/A  
Name Authorization No. N/A  
P.O. BOX 3218, FLORIDA CITY, FL 33034 Expiration Date N/A  
Address

4. Identification of System Spent Fuel Pool Cooling System

Quality Group: A ☐ B ☐ C ☒ ANSI B31.1 1986 Ed.  
 ASME III 1980, Summer 1981

5. (a) Applicable Construction Code B31.1, 1987 Edition; N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
10" Gate Valve	Anchor Darling Vlv.	E-6370-2-1	N/A	3-913	1979	Replacement	No
4" Gate Valve	Crane-Aloyco	27230889	N/A	3-918A	UNK.	Replacement	No
SFP Cooling Piping	N/A	N/A	N/A	N/A	1990	Replacement	No

7. Description of Work Modified the 4" and 10" piping and valves listed above. Also,  
modified Supports - H-690-08 and H-690-10.

8. Tests Conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐  
 Pressure 167 psi Test Temp. 60 Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

LOG # 91-001-3

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding was performed in accordance with the FP&L Weld Control Manualand Site Procedures.Quality Group "C".

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed WJ Brown SITE MANAGER Date 2-14, 1991  
 Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of DELAWARE GEORGIA and employed by Arkwright Mutual Insurance Company of Norwood, MA

have inspected the components described in this Owner's Report during the period OCT. 21, 1990 to FEBRUARY 21, 1994, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

W. R. Brown Factory Mutual System  
 Inspector's Signature Commissions 4175 (N) (I)  
(National Board, State, Province, and Endorsements)  
 Date 2/14 1991

\*Revised Copy Page 1 of 2

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date March 13, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2754 NCR: 90-0110

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Residual Heat Removal

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
RHR Piping	N/A	N/A	N/A	PS-54	Est. 1970	Repaired	No

7. Description of Work Variable Spring Support MK# PS-54 was found to be out of tolerance. Reset Spring  
Can to its proper cold load setting.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded, at the top of this form.

91-002-3

## FORM NIS-2 (Back)

9. Remarks Quality Group "B"

Applicable Manufacturer's Data Reports to be attached

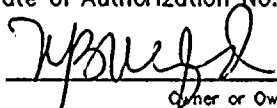
Mechanical connection, No welding performed.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed

MAINT-SUPTDate 4-11, 19 91

Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Georgia and employed by

Arkwright Mutual Insurance Company of Norwood, MA.have inspected the components described in this Owner's Report during the period February 22, 1987to February 22, 1991, and state that to the best of my knowledge and belief,

the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

  
 Inspector's Signature

Commissions

Factory Mutual System  
4175 (N) (I)

National Board, State, Province, and Endorsements

Date 4-11 19 91



# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date March 13, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2766 NCR: 90-0093

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Component Cooling Water

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
CCW Piping	N/A	N/A	N/A	SR-308	Est. 1970	Repaired	No

7. Description of Work Variable Spring Support MK# SR-308 was found to be out of tolerance. Reset

Spring Cans (both) to its proper cold load setting.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-003-3

# FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Quality Group "C"

Applicable Manufacturer's Data Reports to be attached

Mechanical connection, No welding performed.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] MAINT SURF Date 4.11, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Georgia and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period February 22, 1987 to February 22, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
Inspector's Signature

Commissions Factory Mutual System  
4175 (N) (I)  
National Board, State, Province, and Endorsements

Date 4.11 19 91

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date March 13, 1991Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2776 NCR: 90-0116

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/AAuthorization No. N/AExpiration Date N/A4. Identification of System Chemical and Volume Control5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
CVCS Piping	N/A	N/A	N/A	SR-43	Est. 1970	Repaired	No

7. Description of Work Variable Spring Support MK# SR-43 was found to be out of tolerance. Reset SpringCan to its proper cold load setting.8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐Pressure                      psiTest Temp.                      Degree's F

N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-004-3

## FORM NIS-2 (Back)

9. Remarks Quality Group "A"

Applicable Manufacturer's Data Reports to be attached

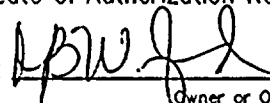
Mechanical connection, No welding performed.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed

MAINT SUPTDate 4-11, 19 91

Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Georgia and employed by

Arkwright Mutual Insurance Company of Norwood, MA.have inspected the components described in this Owner's Report during the period February 22, 1987to February 22, 1991, and state that to the best of my knowledge and belief,

the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

  
 Inspector's Signature

Commissions

Factory Mutual System  
4175 (N) (I)

National Board, State, Province, and Endorsements

Date 4-11 19 91

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 03/18/91Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3CWO: 300351PCM: 90-311PS: 90-1305

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/AAuthorization No. N/AExpiration Date N/A4. Identification of System Residual Heat RemovalQuality Group: A ☐ B ☒ C ☐5. (a) Applicable Construction Code B31.1, 1967 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
RHR Piping System	N/A	N/A	N/A	N/A	N/A	Replacement	No

7. Description of Work Modified support SR-5 by replacing baseplate.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ N/A  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedWelding performed in accordance with the FP & L Weld Control Manual and  
site procedures.Quality Group B.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this Replacement conforms  
to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned W.D. Brown SITE MANAGER Date 3-21, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel  
Inspectors and the State or Province of GEORGIA and employed byArkwright Mutual Insurance Company of Norwood, MA.  
have inspected the components described in this Owner's Report during the period FEB. 22, 1991  
to FEB. 22, 1994, and state that to the best of my knowledge and belief,the Owner has performed examinations and taken corrective measures described in this Owner's Report  
in accordance with the requirements of ASME Code, Section XI.By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or  
implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore,  
neither the Inspector nor his employer shall be liable in any manner for any personal injury or property  
damage or a loss of any kind arising from or connected with this inspection.William R. D. Commissions Factory Mutual System  
Inspector's Signature 4175 I, N  
National Board, State, Province, and Endorsements  
Date MARCH 21 1991

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT

Date March 26, 1991

P.O. BOX 029100, MIAMI, FL 33102

Sheet 1 of 1

2. Plant TURKEY POINT

Unit 3

P.O. BOX 3088, FLORIDA CITY, FL 33034

PWO: 2745 NCR: 90-0078 CNR: 90-3-0014

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT

Type Code Symbol Stamp N/A

P.O. BOX 3088, FLORIDA CITY, FL 33034

Authorization No. N/A

Expiration Date N/A

4. Identification of System Feed Water

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
FW Piping	N/A	N/A	N/A	14"-FWC-2305-21	Est. 1970	Repaired	No

7. Description of Work Repaired, by flapping, one (1) linear indication adjacent to FW# 21.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure                      psi Test Temp.                      Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-006-3

## FORM NIS-2 (Back)

9. Remarks Quality Group "B"

Applicable Manufacturer's Data Reports to be attached

No welding performed.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repaired conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned *Asst Maint Supt* Date 3/27, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Georgia and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period February, 22, 1987 to February 22, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*William R. D.*  
 Inspector's Signature

Commissions Factory Mutual System  
4175 (N) (I)  
 National Board, State, Province, and Endorsements

Date 3/27 19 91



Page 1 of 2

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date April 19, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2281 NCR# N-91-0050 CNR# 91-3-002

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Safety Injection System Quality Group A

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping SIS	N/A	N/A	N/A	Line# 2"-SI-1303-8	EST. 1970	Repaired	No

7. Description of Work Repaired, by grinding, one (1) linear indication adjacent to FW# 8, on coupling down stream from valve 3-868C.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure \_\_\_\_\_ psi Test Temp \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-007-3

# FORM NIS-2 (Back)

Page 2 of 2

9. Remarks No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed *John L. Francisco* Date 4/22, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period January 14, 1991 to March 28, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*Charles A. Fialla* Commissions Factory Mutual System  
Inspector's Signature NB7719  
Date 4-23 19 91 National Board, State, Province, and Endorsements

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date April 30, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 0716 NCR# N-91-0156 CNR# 91-3-007

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Steam Generator Blowdown Quality Group B

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping SGBD	N/A	N/A	N/A	Line# 6"-BDC-2306-FW30	EST. 1970	Repaired	No

7. Description of Work Repaired, by buffing, one (1) linear indication adjacent to FW# 30.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-008-3

# FORM NIS-2 (Back)

Page 2 of 2

9. Remarks No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct, and this repair conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed *And Mark Saff* Date 5/6, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period March 7, 1991 to March 27, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*James B. Glavin*  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date 5/13 19 91

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date May 11, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2288 NCR# N-91-0195 CNR# 91-3-024

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Steam Generator Blowdown Quality Group B

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping SGBD	N/A	N/A	N/A	Line# 6"-BDC-2303-FW29	EST. 1970	Repaired	No

7. Description of Work Repaired, by buffing, two (2) linear indications adjacent to FW# 29.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure \_\_\_\_\_ psi Test Temp \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-009-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks No welding performed.

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct, and this repair conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] MAINT. SUPT. Date 5/13 19 91  
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period March 4, 1991 to April 9, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date 5/14 19 91

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

Page 1 of 2

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Date June 7, 1991

Sheet 1 of 1

Unit 3

PWO: 2313 CNR# 91-3-031  
Repair Organization P.O. No., Job No. etc.

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Component Cooling Water Quality Group C

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping CCW	N/A	N/A	N/A	3-ARH-114	EST. 1970	Replacement	No

7. Description of Work Replaced, four (4) missing lock nuts on Support Mark# 3-ARH-114

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ Degree's F      N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-010-3

# FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical Connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.   
 repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] Asst. Maint. Supt. Date 6/10, 19 91   
 Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period February 14, 1991 to April 23, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]   
 Inspector's Signature

Commissions Factory Mutual System   
 8230 (N) (I)   
 National Board, State, Province, and Endorsements

Date 6/10 19 91



Page 1 of 2

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date June 7, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 9056 CNR# 91-3-039  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Containment Spray System Quality Group B

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Containment Spray Piping	N/A	N/A	N/A	MK# SR-165	EST. 1970	Repaired	No

7. Description of Work Spring Can Support MK# SR-165 was found to be out of tolerance. Reset Spring Can to its proper cold load setting.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-011-3

# FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical Connections, No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] Date 6/10, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period November 14, 1991 to May 8, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date 6/10 19 91

Page 1 of 2

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date June 7, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2308 NCR# N-91-0372 CNR# 91-3-052  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Reactor Vessel System Quality Group A

5. (a) Applicable Construction Code ASME SEC. III 19 65 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Reactor Vessel	Babcock & Wilcox	610-0116	N-160	3PSRV1	1969	Repaired	Yes

7. Description of Work Repaired, by grinding, several linear indications on the Reactor Vessel

Head Flange weld.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-012-3

# FORM NIS-2 (Back)

Page 2 of 2

9. Remarks No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] Date 6/10, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period March 29, 1991 to May 8, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date 6/10 19 91

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT

Date June 8, 1991

P.O. BOX 029100, MIAMI, FL 33102

Sheet 1 of 1

2. Plant TURKEY POINT

Unit 3

P.O. BOX 3088, FLORIDA CITY, FL 33034

PWO: 9061 CNR# 91-3-012

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT

Type Code Symbol Stamp N/A

P.O. BOX 3088, FLORIDA CITY, FL 33034

Authorization No. N/A

Expiration Date N/A

4. Identification of System Auxiliary Feedwater System

Quality Group C

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping AFW	N/A	N/A	N/A	80117-H-320-20	EST. 1970	Repaired	No

7. Description of Work Repaired Spherical bearing on the south top strut of Support MK# 80117-H-320-20

due to the bearing not be seated in the paddle.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-014-3

## FORM NIS-2 (Back)

9. Remarks Mechanical connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct, and this repair conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed *[Signature]* Date 6/10, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period February 4, 1991 to May 8, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*[Signature]*  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date 6/10 19 91

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date June 8, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2312 CNR# 91-3-047

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Steam Generator Blowdown System Quality Group B

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping SGBD	N/A	N/A	N/A	78101B-H-322-07	EST. 1970	Repaired	No

7. Description of Work During ISI examination of Support MK# 78101B-H-322-07, the pipe clamp was found to be loose and slipped 1 inch of center line. Adjusted and tightened clamp nuts.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-013-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] [Signature] Date 6/10, 19 91  
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.

have inspected the components described in this Owner's Report during the period February 22, 1991 to April 23, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date 6/10 19 91



# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date June 26, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2307 NCR# N-91-0234 CNR# 91-3-020

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Reactor Coolant System Quality Group A

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping RCS	N/A	N/A	N/A	3-RCH-31	EST. 1970	Replacement	No

7. Description of Work During ISI examination of Support MK# 3-RCH-31, the rod and clevis assembly lock nuts were found loose. Tightened lock nuts and replaced missing clamp lock nuts.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure                      psi Test Temp.                      Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-015-3

## FORM NIS-2 (Back)

9. Remarks Mechanical connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed *John P. Sullivan* Date 6/28, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period February 12, 1991 to May 7, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*James H. Blum*  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date 6/28 1991

Page 1 of 2

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date June 27, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 9061 CNR# 91-3-016

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Auxiliary Feedwater System Quality Group ☒ C

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping AFW	N/A	N/A	N/A	3-CSTH-143	EST. 1970	Repaired	No

7. Description of Work During ISI examination of Support MK# 3-CSTH-143, the top clamp nut did not have full thread engagement. Tightened nut to achieve full thread engagement.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-016-3

## FORM NIS-2 (Back)

9. Remarks Mechanical connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed *[Signature]* *Chief Maint Dept* Date 6/28, 19 91  
 Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period February 4, 1991 to June 12, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*[Signature]*  
 Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
 National Board, State, Province, and Endorsements

Date July 1 19 91

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**  
As Required by the Provisions of the ASME Code Section XI

Page 1 of 2

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date June 28, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 9056 NCR# N-91-0155 CNR# 91-3-006

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Safety Injection System Quality Group B

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Gate Valve	Anchor Darling	N/A	N/A	MOV-3-864B	EST. 1970	Repaired	No

7. Description of Work Repaired, by flapping, one (1) linear indication adjacent to FW# 6, on the  
machined taper of valve MOV-3-864B.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐  
Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-017-3

## FORM NIS-2 (Back)

Page 2 of 2

9. Remarks No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed *John J. Blum* Date 6/25, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period January 17, 1991 to April 5, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*James M. Blum*  
Inspector's Signature

Commissions

Factory Mutual System  
8230 (N) (I)

National Board, State, Province, and Endorsements

Date July 1 19 91

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT Date July 13, 1991  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

2. Plant TURKEY POINT Unit 3  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address PWO: 9061 CNR# 91-3-011  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT Type Code Symbol Stamp N/A  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address Authorization No. N/A  
Expiration Date N/A

4. Identification of System Auxiliary Feedwater System Quality Group C

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping AFW	N/A	N/A	N/A	80117-H-320-19	EST. 1970	Replacement	No

7. Description of Work During ISI examination of Support MK# 80117-H-320-19, the top locking ring on

the load pin was found to be missing. Replaced locking ring with new cotter pin.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-018-3

## FORM NIS-2 (Back)

9. Remarks Mechanical connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct, and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed

Owner or Owner's Designee, Title

Date July 15, 19 91

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period February 1, 1991 to June 25, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

Inspector's Signature

Commissions

Factory Mutual System  
8230 (N) (I)

National Board, State, Province, and Endorsements

Date July 15 19 91



Page 1 of 2

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date July 15, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2311 NCR# N-91-0504 CNR# 91-3-026  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Component Cooling Water Quality Group C

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping CCW	N/A	N/A	N/A	3-ACH-4	EST. 1970	Replaced	No

7. Description of Work Replaced missing U'Bolt and re-aligned the pipe saddle to it's original design requirements.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-019-3

## FORM NIS-2 (Back)

9. Remarks Mechanical connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed *mpw* MAINT. Supt. Date July 15, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period April 23, 1991 to June 28, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*James B. Glen*  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date July 15, 1991

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date July 17, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 9056 NCR# N-91-0236 CNR# 91-3-028

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Safety Injection System Quality Group A

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping SIS	N/A	N/A	N/A	8080-H-010-01	EST. 1970	Repaired	No
Piping SIS	N/A	N/A	N/A	8051-H-685-03	EST. 1970	Repaired	No

7. Description of Work Restored pipe Supports 8080-H-010-01 and 8051-H-685-03 to it's original design requirements.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-020-3

## FORM NIS-2 (Back)

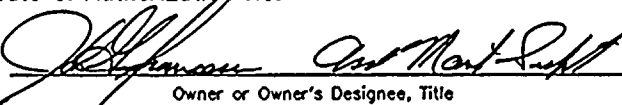
9. Remarks Mechanical connection, No welding performed.Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct, and this repair conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed



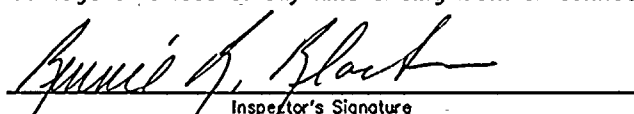
Owner or Owner's Designee, Title

Date 7/18, 19 91

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period February 14, 1991 to July 8, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.



Inspector's Signature

Commissions

Factory Mutual System  
8230 (N) (I)

National Board, State, Province, and Endorsements

Date July 18 19 91

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date July 19, 1990

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 1609 PC/M: 89-182 P/S: 90-246

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Safety Injection System

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Check Valve	Anchor Darling	N/A	N/A	3-875A	Est. 1970	Replacement	No

7. Description of Work Replaced bonnet studs and nuts at tag location 3-875A.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒

Pressure 2335 psi Test Temp. 547 Degree's F

\* RCS Overpressure Test per OP 1004.1

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Quality Group "A"

Applicable Manufacturer's Data Reports to be attached

Mechanical connection, No welding performed

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] MAINT. SUPT Date 7/21, 1990  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period February 27, 1990 to July 2, 1990, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
Inspector's Signature

Commissions Factory Mutual System  
4956 (N) (I)  
National Board, State, Province, and Endorsements

Date 7/25 1990

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**  
As Required by the Provisions of the ASME Code Section XI

Page 1 of 2

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date July 24, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 9056 CNR# 91-3-001  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Residual Heat Removal Quality Group A

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping RHR	N/A	N/A	N/A	3-RCH-10	EST. 1970	Replacement	No

7. Description of Work Replaced bent U'Bolt and installed new nuts on Support MK# 3-RCH-10.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐  
Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-022-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] Date 7/25, 19 91  
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period January 14, 1991 to June 5, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date July 25 19 91



Page 1 of 2

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT

Date July 24, 1991

Name  
P.O. BOX 029100, MIAMI, FL 33102

Sheet 1 of 1

Address

2. Plant TURKEY POINT

Unit 3

Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034

PWO: 2389 NCR# N-91-0677

Address

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT

Type Code Symbol Stamp N/A

Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034

Authorization No. N/A

Address

Expiration Date N/A

4. Identification of System Component Cooling Water Quality Group C

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping CCW	N/A	N/A	N/A	3-ACH-7	EST. 1970	Replacement	No

7. Description of Work Restored pipe Support MK# 3-ACH-7 to it's original design requirements by

welding in a shim plate to obtain proper clearances.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure                      psi

Test Temp.                      Degree's F

N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-021-3

## FORM NIS-2 (Back)

9. Remarks All welding was performed in accordance with the FPL Weld Control Manual and site  
procedures.  
Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct, and this replacement conforms  
to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed *Robert M. Smith* Date 7/24, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel  
Inspectors and the State or Province of Dade County, Florida and employed by  
Arkwright Mutual Insurance Company of Norwood, MA.  
have inspected the components described in this Owner's Report during the period June 18, 1991  
to July 8, 1991, and state that to the best of my knowledge and belief,  
the Owner has performed examinations and taken corrective measures described in this Owner's Report  
in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or  
implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore,  
neither the inspector nor his employer shall be liable in any manner for any personal injury or property  
damage or a loss of any kind arising from or connected with the inspection.

*Robert M. Smith*  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date July 24 19 91

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date July 26, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit #3

CWO:300318, PCM: N/A, PS91-503, N-91-0398  
Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Safety Injection System Quality Group B

5. (a) Applicable Construction Code B31.1 1955 Edition N/A Addenda N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
High Head S.I. System	N/A	N/A	N/A	N/A	Est. 1970	Replacement	No

7. Description of Work Support # SR-272 - Installed 2 missing angles. Support # B - Installed one new Item #3 - 1'4"X 4"X 3/4" plate. Restored supports to original design.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ N/A  
 Pressure N/A psi Test Temp. N/A Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-023-3

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding was performed in accordance with the FP&L Weld Control Manual  
and Site Procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms  
to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned W.D. Brown SITE MANAGER Date 8-2 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel  
Inspectors and the State or Province of Dade County, Florida and employed by  
Arkwright Mutual Insurance Company of Norwood, MAhave inspected the components described in this Owner's Report during the period April 4, 1991  
to August 5, 1991, and state that to the best of my knowledge and belief,  
the Owner has performed examinations and taken corrective measures described in this Owner's Report  
in accordance with the requirements of ASME Code, Section XI.By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or  
implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore,  
neither the Inspector nor his employer shall be liable in any manner for any personal injury or property  
damage or a loss of any kind arising from or connected with this inspection.James B. Glatton Commissions Factory Mutual System  
Inspector's Signature 8230 (N) (I)  
Date Aug. 5 1991 National Board, State, Province, and Endorsements

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date July 26, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit #3

CWO:300318, PCM:N/A, PS:91-382, N-91-0267  
Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Chemical and Volume Control System Quality Group B

5. (a) Applicable Construction Code B31.1, 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
CVCS Piping To RCS Pump Seals	N/A	N/A	N/A	N/A	EST. 1970	Replacement	No

7. Description of Work Support # 1C - Replaced missing 2" U-Bolt after plug welding existing

holes and re-drilling new holes.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ N/A  
 Pressure N/A psi Test Temp. N/A Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-024-3

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding was performed in accordance with the FP&L Weld Control Manual and Site Procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned W.D. Brown SITE MANAGER Date 8-2, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.have inspected the components described in this Owner's Report during the period May 7, 1991 to August 5, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

James H. Clark Commissions Factory Mutual System  
Inspector's Signature 8230 (N) (I)  
Aug 5 19 91 National Board, State, Province, and Endorsements

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date July 27, 1990

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 1608 PC/M: 89-182 P/S: 90-085

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Residual Heat Removal

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Check Valve	Anchor Darling	N/A	N/A	3-876B	Est. 1970	Replacement	No

7. Description of Work Replaced bonnet studs and nuts at tag location 3-876B.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒

Pressure 2335 psi Test Temp. 547 Degree's F

\* RCS Overpressure Test per OP 1004.1

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Quality Group "A"

Applicable Manufacturer's Data Reports to be attached

Mechanical connection, No welding performed

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed *J. J. [Signature]* Date 8/1, 19 90  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period December 2, 1990 to July 26, 1990, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*D. Boyer*  
Inspector's Signature

Commissions Factory Mutual System  
4956 (N) (I)  
National Board, State, Province, and Endorsements

Date 8/2 19 90



# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT

Name

P.O. BOX 029100, MIAMI, FL 33102

Address

Date July 29, 1991

Sheet 1 of 1

2. Plant TURKEY POINT

Name

P.O. BOX 3088, FLORIDA CITY, FL 33034

Address

Unit 3

PWO: 2324 NCR# N-91-0433 CNR# 91-3-056

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT

Name

P.O. BOX 3088, FLORIDA CITY, FL 33034

Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Reactor Coolant System

Quality Group

A

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping RCS	N/A	N/A	N/A	RCP-SPB-L2	EST. 1970	Repaired	No

7. Description of Work Repaired, by grinding, one (1) linear indication, on the RCP "B" support lug.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure \_\_\_\_\_ psi

Test Temp. \_\_\_\_\_ Degree's F

N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-025-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks No welding performed.

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct, and this repair conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] Date 7/31, 19 91  
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period April 11, 1991 to July 22, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date July 31 19 91

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT

Name

P.O. BOX 029100, MIAMI, FL 33102

Address

Date August 1, 1991

Sheet 1 of 1

2. Plant TURKEY POINT

Name

P.O. BOX 3088, FLORIDA CITY, FL 33034

Address

Unit 3

PWO: 9056 NCR# N-91-0237 CNR# 91-3-032

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT

Name

P.O. BOX 3088, FLORIDA CITY, FL 33034

Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Component Cooling Water

Quality Group C

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping CCW	N/A	N/A	N/A	3-SMH-15	EST. 1970	Repaired	No

7. Description of Work During ISI examination of Support MK# 3-SMH-15, clamp bolting was found to be loose. Tightened clamp bolting.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure                      psi Test Temp.                      Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-026-3

## FORM NIS-2 (Back)

9. Remarks Mechanical connection. No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct, and this repair conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed *[Signature]* Date 8/15, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period March 28, 1991 to July 24 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*[Signature]*  
 Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
 National Board, State, Province, and Endorsements

Date Aug 22 19 91

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Page 1 of 2

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date August 5, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2309 NCR# N-91-0239 CNR# 91-3-036  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Safety Injection System Quality Group A

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping SIS	N/A	N/A	N/A	8080-H-010-14	EST. 1970	Replacement	No

7. Description of Work During ISI examination of Support MK# 8080-H-010-14, the spring can was found to be bent. Replaced damaged can with new Bergen Paterson can, Model# VS1A-2.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-027-3

# FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] Date 8/8 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period February 15, 1991 to July 24 1991 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Aug 9 19 91

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT

Date August 7, 1991

P.O. BOX 029100, MIAMI, FL 33102

Sheet 1 of 1

2. Plant TURKEY POINT

Unit 3

P.O. BOX 3088, FLORIDA CITY, FL 33034

PWO: 2388 NCR# N-91-0677

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT

Type Code Symbol Stamp N/A

P.O. BOX 3088, FLORIDA CITY, FL 33034

Authorization No. N/A

Expiration Date N/A

4. Identification of System Component Cooling Water

Quality Group

C

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping CCW	N/A	N/A	N/A	3-ACH-3	EST. 1970	Replacement	No

7. Description of Work Restored support MK# 3-ACH-3 to it's original design requirements by installing

a new U-bolt and tightening all loose nuts.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure \_\_\_\_\_ psi

Test Temp. \_\_\_\_\_ Degree's F

N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-028-3

## FORM NIS-2 (Back)

9. Remarks Mechanical connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct, and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned [Signature] Carl Mark Deft Date 8/7 . 19 92  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period June 18, 1991 to July 31, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
 Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
 National Board, State, Province, and Endorsements

8 19 99

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11-07-91

Page 1 of 2

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT Date August 8, 1991  
Name  
P.O. BOX 029 100, MIAMI, FL 33152  
Address
2. Plant TURKEY POINT Unit 3/4  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address  
 CWO:300316,PS 91-797, PC/M:90-362  
 CWO:300318,PS 91-705,NCR-II-01-0659  
Repair Organization P.O. No., Job No., etc.
3. Work Performed by BECHTEL CONSTRUCTION, INC. Type Code Symbol Stamp N/A  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address  
 Authorization No. N/A  
 Expiration Date N/A
4. Identification of System AUXILIARY FEEDWATER Quality Group C
5. (a) Applicable Construction Code B31.1 19 55 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda
6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
PIPING AFW	NA	NA	NA	80117-H-321-03	EST. 1970	REPLACED	NO
PIPING AFW	NA	NA	NA	3-AFH-83	EST. 1970	REPAIRED	NO
PIPING AFW	NA	NA	NA	80117-H-320-09	EST. 1970	REPAIRED	NO
PIPING AFW	NA	NA	NA	80117-H-320-10	EST. 1970	REPAIRED	NO
PIPING AFW	NA	NA	NA	80117-H-320-21	EST. 1970	REPAIRED	NO

7. Description of Work Support 80117-H-321-03 modified in accordance with MEP 90-362,  
3-AFH-83 adjusted threaded Rod, Supports 80117-H-09,10,21 pipe clamp and strut adjusted to achieve proper alignment

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ N/A  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-029-3

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING PERFORMED IN ACCORDANCE WITH FP & L WELD CONTROL MANUAL AND  
SITE PROCEDURES.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR & REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned J. Marchese Date 6/12, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.have inspected the components described in this Owner's Report during the period June 1991 to November 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

James H. Blum  
Inspector's SignatureCommissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and EndorsementsDate Nov 14 1991

B/B

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT Date August 8, 1991  
Name  
P.O. BOX 029 100, MIAMI, FL 33152  
Address
2. Plant TURKEY POINT Unit #3/4  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address CWO:300316, PCM:90-362, PS-91-797  
Repair Organization P.O. No., Job No., etc.
3. Work Performed by BECHTEL CONSTRUCTION, INC. Type Code Symbol Stamp N/A  
Name Authorization No. N/A  
P.O. BOX 3218, FLORIDA CITY, FL 33034 Expiration Date N/A  
Address
4. Identification of System Auxiliary Feedwater Piping System Quality Group ☒ C
5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda
6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Auxiliary Feedwater P.	N/A	N/A	N/A	N/A	EST. 1970	Replacement	No

7. Description of Work Removed and abandoned Support No. 3-AFH-47, and modified SupportNo. 80117-H-321-03.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ N/A  
 Pressure N/A psi Test Temp. N/A Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-029-3

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding was performed in accordance with the FP&L Weld Control Manual and Site Procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this Replacement conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned W.D. Brown SITE MANAGER Date 8 - 12, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MAhave inspected the components described in this Owner's Report during the period July 1, 1991 to July 12, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Benjamin K. [Signature]  
Inspector's SignatureCommissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and EndorsementsDate Aug. 13 19 91

BIB

Page 1 of 2

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date August 12, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2413, 2107 NCR# 88-0076  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Containment Spray System Quality Group B

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping CSS	N/A	N/A	N/A	SR-164	EST. 1970	Replacement	No

7. Description of Work Replaced threaded rod to obtain proper thread engagement and reset spring can to it's original design requirements on Support MK# SR-164.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-030-3

## FORM NIS-2 (Back)

9. Remarks Mechanical connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct, and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned *Ant Mait Selt* Date 8/10, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period March 7, 1989 to July 8, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*James R. Black*  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Aug. 13 19 91

*AK*

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**  
As Required by the Provisions of the ASME Code Section XI

Page 1 of 2

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date August 14, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2202 NCR# N-91-0170  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Safety Injection System (Accumulator) Quality Group B

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Globe Valve	N/A	N/A	N/A	3-881F	EST. 1970	Replaced	No
Globe Valve	Rockwell	N/A	N/A	3-881F	1990	Replacement	No

7. Description of Work Replaced valve at tag location 3-881F due to excessive seat leakage.

8. Tests Conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure 875 psi Test Temp. 87 Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-031-3

## FORM NIS-2 (Back)

9. Remarks All welding was performed in accordance with the FPL Weld Control Manual and site

Applicable Manufacturer's Data Reports to be attached

procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed *[Signature]* Date 8/10, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by

Arkwright Mutual Insurance Company of Norwood, MA.

have inspected the components described in this Owner's Report during the period March 1, 1991

to June 26, 1991, and state that to the best of my knowledge and belief,

the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*[Signature]*  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date Aug 22 19 91



# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

Page 1 of 2

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date August 14, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2403

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Residual Heat Removal Quality Group B

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Mechanical Shock Arrestor	Pacific Scientific	12396	N/A	3-1027	1982	Replaced	No
Mechanical Shock Arrestor	Pacific Scientific	16237	N/A	3-1027	1983	Replacement	No

7. Description of Work Replaced Mechanical Shock Arrestor at tag location 3-1027. The spherical bearing was found to be frozen.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-032-3

# FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed *John J. [Signature]* Date 8/15, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period July 19, 1991 to July 22, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*Francis G. [Signature]*  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date Aug. 22 19 91

BB

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**  
As Required by the Provisions of the ASME Code Section XI

Page 1 of 2

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date August 30, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 9057 NCR# N-91-0766

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Chemical and Volume Control Quality Group A

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping CVCS	N/A	N/A	N/A	H-4	EST. 1970	Replacement	No

7. Description of Work Restored Support MK# H-4 to it's original design by installing missing U' Bolt  
and installing a shim to facilitate installation.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐  
Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-026-4

## FORM NIS-2 (Back)

9. Remarks All welding was performed in accordance with the FPL Weld Control Manual and site  
procedures.  
Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms  
to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] Date 9/16, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel  
Inspectors and the State or Province of Dade County, Florida and employed by  
Arkwright Mutual Insurance Company of Norwood, MA.  
have inspected the components described in this Owner's Report during the period August 3, 1991  
to August 26, 1991, and state that to the best of my knowledge and belief,  
the Owner has performed examinations and taken corrective measures described in this Owner's Report  
in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or  
implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore,  
neither the inspector nor his employer shall be liable in any manner for any personal injury or property  
damage or a loss of any kind arising from or connected with the inspection.

[Signature] Commissions Factory Mutual System  
Inspector's Signature 8230 (N) (I)  
National Board, State, Province, and Endorsements  
Date Sept. 10, 1991

Page 1 of 2

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date September 12, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2464 NCR# N-91-0800  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Auxiliary Feedwater Quality Group C

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping AFW	N/A	N/A	N/A	80117-R-332-04	EST. 1970	Replacement	No

7. Description of Work Replaced sway strut assy. on Support MK# 80117-R-332-04. The existing strut assemble was found to be bent.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-033-3

## FORM NIS-2 (Back)

9. Remarks All welding was performed in accordance with the FPL Weld Control Manual and site  
procedures.  
Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct, and this replacement conforms  
to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed *[Signature]* Date 9/14, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel  
Inspectors and the State or Province of Dade County, Florida and employed by  
Arkwright Mutual Insurance Company of Norwood, MA.  
have inspected the components described in this Owner's Report during the period August 27, 1991  
to September 7, 1991, and state that to the best of my knowledge and belief,  
the Owner has performed examinations and taken corrective measures described in this Owner's Report  
in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or  
implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore,  
neither the inspector nor his employer shall be liable in any manner for any personal injury or property  
damage or a loss of any kind arising from or connected with the inspection.

*[Signature]*  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date 9/17 1991

BS

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 9-18-91Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3CWO: 300318 N-91-0815PCM: N/A P/S 91-965

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/AAuthorization No. N/AExpiration Date N/A4. Identification of System Intake Cooling WaterQuality Group C

5. (a) Applicable Construction Code ANSI B31.1, 1955 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
ICW piping	N/A	N/A	N/A	M-196-2	est. 1970	Replacement	No

7. Description of Work Replaced stanchion with single new 6" sch.40 pipe. A 3/8" diameter weep hole was provided. Replaced threaded coupling and 4" pipe. Shims replaced. for M-196-2.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒ N/A  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding performed in accordance with the FP&L Weld Control Manual and site procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this Replacement conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Joseph Marchese Date 9/26, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MAhave inspected the components described in this Owner's Report during the period 8/91 to 9/91, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

August B. Blawie Commissions Factory Mutual System  
Sept 27 19 91 8230 (N) (I)  
 Inspector's Signature National Board, State, Province, and Endorsements

B3



**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 9-18-91Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

CWO: 500438 NCR-C-0741-87  
 PCM: 91/048 MPIL: 91-0403M  
 Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A  
 Authorization No. N/A  
 Expiration Date N/A

4. Identification of System Safety Injection (SIS)

Quality Group

**B**

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
High Head S.I. System	N/A	N/A	N/A	SR-242	EST. 1970	Replacement	No
High Head S.I. System	N/A	N/A	N/A	7744-H-302-11	EST. 1970	Replacement	No
High Head S.I. System	N/A	N/A	N/A	7744-H-302-12	EST. 1970	Replacement	No

7. Description of Work Replaced support SR-242. Supports 7744-H-302-11 and 7744-H-302-12

Replaced U-bolt.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒ N/A

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding performed in accordance with FP&L Weld Control Manual and Site procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this Replacement conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Joseph Marchese for W.D. Brown Date 9/26 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.have inspected the components described in this Owner's Report during the period 6/91 to 8/91, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Joseph B. Brown  
Inspector's SignatureCommissions 8230 (N) (I)  
Factory Mutual System  
National Board, State, Province, and EndorsementsDate Sept 27 19 91

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 9-23-91Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3/4CWO:300165 PCM:90-440 P.S.91-528

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/AAuthorization No. N/AExpiration Date N/A4. Identification of System CVCS Boron Addition and Recycle System

Quality Group

B5. (a) Applicable Construction Code ANST B31.1, 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Boric Acid Tanks	NA	NA	NA	NA	Est. 1970	Replacement	No

7. Description of Work Modified the pedestal bolting and installed rigid sway struts to the supporting steel for the Boric Acid Tanks, A, B, and C.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ NA

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-037-3

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding performed in accordance with the FP&L Weld Control Manual and  
site procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms  
to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Joseph Marchese Date 9/26, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel  
Inspectors and the State or Province of Dade County, Florida and employed byArkwright Mutual Insurance Company of Norwood, MA.have inspected the components described in this Owner's Report during the period 5/91  
to 6/91, and state that to the best of my knowledge and belief,  
the Owner has performed examinations and taken corrective measures described in this Owner's Report  
in accordance with the requirements of ASME Code, Section XI.By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or  
implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore,  
neither the Inspector nor his employer shall be liable in any manner for any personal injury or property  
damage or a loss of any kind arising from or connected with this inspection.Inspector's Signature Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and EndorsementsDate Sept 27 1991

BIB

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT Date 9-23-91  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address
2. Plant TURKEY POINT Unit 3  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address  
 CWO: 300333 PC/M: 90-266 MPIL: 90-273M  
 NCR'S C-0263, 0573, 0626, 0648 and 0715-87S  
Repair Organization P.O. No., Job No., etc.
3. Work Performed by BECHTEL CONSTRUCTION, INC. Type Code Symbol Stamp N/A  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address  
 Authorization No. N/A  
 Expiration Date N/A
4. Identification of System CVCS Boron Addition & Recycle Quality Group B
5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda
6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
CVCS piping	N/A	N/A	N/A	H-A	est. 1970	Replacement	No
CVCS piping	N/A	N/A	N/A	H-3	est. 1970	Replacement	No
CVCS piping	N/A	N/A	N/A	H-7	est. 1970	Replacement	No
CVCS piping	N/A	N/A	N/A	H-9A	est. 1970	Replacement	No
CVCS piping	N/A	N/A	N/A	H-11	est. 1970	Replacement	No
CVCS piping	N/A	N/A	N/A	H-11A	est. 1970	Replacement	No
CVCS piping	N/A	N/A	N/A	H-13A	est. 1970	Replacement	No

7. Description of Work Supports H-A Replaced items 1-4. H-3 Replaced item 1. H-7 Replaced item 1. H-9A Replaced items 1-3. H-11 Replaced items 1-5. H-11A Replaced items 1-4. H-13A Replaced items 1-3.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒ N/A.  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding performed in accordance with FP&L Weld Control Manual and site procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this Replacement conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Joseph Marchese Date 9/26, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.have inspected the components described in this Owner's Report during the period 5/91 to 6/91, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Benjamin J. Blue  
Inspector's SignatureCommissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and EndorsementsDate Sept 27 1991

B/B

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 9-23-91

Sheet 2 of 2

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3  
 CWO: 300333 PC/M: 90-266 MPIL: 90-273M  
 NCR'S C-0263, 0573, 0626, 0648, and 0715-87S  
 Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A  
 Authorization No. N/A  
 Expiration Date N/A

4. Identification of System CVCS Boron Addition & Recycle

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
CVCS piping	N/A	N/A	N/A	H-14	est. 1970	Replacement	No
CVCS piping	N/A	N/A	N/A	H-31	est. 1970	Replacement	No

7. Description of Work Support H-14 Replaced items 1-5. H-31 Replaced items 1-6.





**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**  
As Required by the Provisions of the ASME Code Section XI

Page 1 of 2

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date September 24, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3  
CNR#91-3-059 N-91-0432  
PWO: 2320 PC/M#89-182 P/S#91-460 NCR#N-91-0517  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A  
Authorization No. N/A  
Expiration Date N/A

4. Identification of System Safety Injection System Quality Group A

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Check Valve	Anchor Darling	N/A	N/A	3-875B	EST. 1970	Replacement	No

7. Description of Work Replaced the bonnet, studs and nuts on valve tag# 3-875B, due to corrosion.

8. Tests Conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure 2280 psi Test Temp. 547 Degree's F

RCS Overpressure Test.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-038-3

## FORM NIS-2 (Back)

9. Remarks Mechanical connection, No welding performed.Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] for NBW, Maint. Supt. Date 9/24, 19 91  
 Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period April 27, 1991 to September 24, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
 Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
 National Board, State, Province, and Endorsements

Date Sept 24 19 91

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# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date September 25, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3  
CNR# 91-3-042, 90-3-005  
PWO: 0725 NCR# N-90-055, N-90-0125  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A  
 Authorization No. N/A  
 Expiration Date N/A

4. Identification of System Auxiliary Feedwater Quality Group C

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping AFW	N/A	N/A	N/A	80117-H-320-08	EST. 1970	Replacement	No
Piping AFW	N/A	N/A	N/A	80117-H-320-09	EST. 1970	Replacement	No
Piping AFW	N/A	N/A	N/A	80117-H-320-10	EST. 1970	Replacement	No

7. Description of Work Replaced sway strut bearing assy's on Support MK# 80117-H-320-08, 09, and 10 due to the bearing assy's were found to be frozen.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-039-3

## FORM NIS-2 (Back)

9. Remarks Mechanical connection, No welding performed.Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] Date 9/26, 19 91  
 Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period March 5, 1990 to September 12, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
 Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
 National Board, State, Province, and Endorsements

Date Oct 1 19 91

13/5

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 9-27-91

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3  
 CWO: 300312 PC/M: 90-354 P/S: 91-750  
NCR-91-0565 N-91-0818  
 Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A  
 Authorization No. N/A  
 Expiration Date N/A

4. Identification of System Containment Spray Quality Group B

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Containment Spray	N/A	N/A	N/A	3-RCSH-101	est. 1970	Replacement	No
Containment Spray	N/A	N/A	N/A	3-RCSH-102	est. 1970	Replacement	No
Containment Spray	N/A	N/A	N/A	3-RCSH-103	est. 1970	Replacement	No

7. Description of Work Supports 3-RCSH-101, 3-RCSH-102 and 3-RCSH-103 Replaced items 1 thru 8.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒ N/A  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding performed in accordance with FP&I Weld Control Manual and site procedure.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this Replacement conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Joseph Marchese Date 10/9, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.have inspected the components described in this Owner's Report during the period 6/91 to 9/91, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

James B. Blackman Commissions 8230 (N) (I)  
Inspector's Signature National Board, State, Province, and Endorsements  
Date Oct 9 1991

134

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT

Name

P.O. BOX 029100, MIAMI, FL 33152

Address

Date 9-30-91Sheet 1 of 12. Plant TURKEY POINT

Name

P.O. BOX 3088, FLORIDA CITY, FL 33034

Address

Unit 3CWO:500550,PCM:90-499,P.S.91-306

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.

Name

P.O. BOX 3218, FLORIDA CITY, FL 33034

Address

Type Code Symbol Stamp N/AAuthorization No. N/AExpiration Date N/A4. Identification of System Reactor Coolant System

Quality Group

A5. (a) Applicable Construction Code ANSI B31.1, 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
RCS-Pressurizer Spray Line	NA	NA	NA	PCV-3-455A	Est. 1970	Replacement	No
RCS-Pressurizer Spray Line	NA	NA	NA	PCV-3-455B	Est. 1970	Replacement	No

7. Description of Work Modified the abandoned spray valve bodies, (Abandoned Valves,PCV-3-455A & B), by installation of a welded plate (0.75 inch thick) to provide an additional barrier against leakage.8. Tests Conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒Pressure 2280 psi Test Temp. 547 Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-041-3

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attached

All welding performed in accordance with the FPL Weld Control Manual, IWA-4000  
of ASME Section XI, 1980 Edition, and site procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed Joseph Marchese Date 10/9, 1991  
 Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.

have inspected the components described in this Owner's Report during the period 2/91 to 9/91, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Muriel D. Glavin Commissions 8230 (N) (I)  
 Inspector's Signature  
 Date Oct 9 1991  
 National Board, State, Province, and Endorsements

B4



# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT

Name

P.O. BOX 029100, MIAMI, FL 33152

Address

Date 10-04-91Sheet 1 of 22. Plant TURKEY POINT

Name

P.O. BOX 3088, FLORIDA CITY, FL 33034

Address

Unit 3

PC/M: 90-367 CWO: 300404 NCR's:

N-91-0556, N-91-0626, N-91-0646, N-91-0647.

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.

Name

P.O. BOX 3218, FLORIDA CITY, FL 33034

Address

Type Code Symbol Stamp N/AAuthorization No. N/AExpiration Date N/A4. Identification of System Component Cooling WaterQuality Group C

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
CCW Piping	N/A	N/A	N/A	H-B	est. 1970	Replacement	No
CCW Piping	N/A	N/A	N/A	H-A	est. 1970	Replacement	No
CCW Piping	N/A	N/A	N/A	3-ACH-129A	est. 1970	Replacement	No
CCW Piping	N/A	N/A	N/A	3-ACH-141	est. 1970	Replacement	No
CCW Piping	N/A	N/A	N/A	3-ACH-138	est. 1970	Replacement	No
CCW Piping	N/A	N/A	N/A	B	est. 1970	Replacement	No
CCW Piping	N/A	N/A	N/A	H4	est. 1970	Replacement	No

7. Description of Work Supports: H-B, H-A, 3-ACH-129A, 3-ACH-141, 3-ACH-138, B, H4, H5, 3-CCH-19, 3-ACH-157, and 3-ACH-130A; modified to restore piping to original analysis condition. Supports: 3-CCH-59 and 3-ACH-118; installed newly designed supports to restore piping to original design analysis condition.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒ N/A  
 Pressure N/A psi Test Temp. N/A Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-042-3

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding performed in accordance with the FP & L Weld Control Manual andSite Procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this Replacement conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed Joseph Marchese Date 10/9, 1991  
 Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.

have inspected the components described in this Owner's Report during the period 7/91 to 9/91, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

James P. Blue Commissions Factory Mutual System  
 Inspector's Signature 8230 (N) (I)  
 Date Oct 9 1991 National Board, State, Province, and Endorsements

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# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name

P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 10-04-91

Sheet 2 of 2

2. Plant TURKEY POINT  
Name

P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3  
NCR's: N-91-0651, N-91-0654, N-91-0669,  
N-91-0681 PS's: 91-811, 91-846  
Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name

P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Component Cooling Water Quality Group C

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case  
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
CCW Piping	N/A	N/A	N/A	H5	est. 1970	Replacement	No
CCW Piping	N/A	N/A	N/A	3-CCH-59	est. 1970	Replacement	No
CCW Piping	N/A	N/A	N/A	3-CCH-19	est. 1970	Replacement	No
CCW Piping	N/A	N/A	N/A	3-ACH-157	est. 1970	Replacement	No
CCW Piping	N/A	N/A	N/A	3-ACH-118	est. 1970	Replacement	No
CCW Piping	N/A	N/A	N/A	3-ACH-130A	est. 1970	Replacement	No

7. Description of Work (see page 1 of 3)

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 10-10-91Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3CWO: 500675PC/M: 90-500MPIL: 91-486M

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/AAuthorization No. N/AExpiration Date N/A4. Identification of System Main SteamQuality Group ☒ C

5. (a) Applicable Construction Code ANSI B31.1, 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Main Steam	N/A	N/A	N/A	SR-144	est. 1970	Replacement	No

7. Description of Work Support SR-144 Replaced items. 3 thru 10.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ N/A

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding was performed in accordance with the FPL Weld Control Manual and site procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this Replacement conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Joseph Marchese Date 10/22, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.have inspected the components described in this Owner's Report during the period 8/91 to 9/91, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions Factory Mutual System  
8230 (N) (I)  
 National Board, State, Province, and Endorsements

Inspector's Signature  
 Date 10/22 1991

BM

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 10-10-91

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PC/M: 90-318 CWO: 300146 PS: 91-045

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Intake Cooling Water Quality Group C

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
ICW Piping	N/A	N/A	N/A	Spool No. 55	est. 1970	Replacement	No
ICW Piping	N/A	N/A	N/A	Spool No. 61	est. 1970	Replacement	No

7. Description of Work Replaced a 36" x 36" x 24" flanged tee and a 24" flanged pipe  
10'-8 1/2" long.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Other ☐

Pressure 17 psig Test Temp. Ambient Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-044-3

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding performed in accordance with FP & L Weld Control Manual andsite procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this Replacement conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed Joseph Marchese Date 10/22/91, 19 91  
 Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.

have inspected the components described in this Owner's Report during the period 2/91 to 7/91, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

James H. Blank Commissions Factory Mutual System  
 Inspector's Signature 8230 (N) (I)  
 Date Oct 24 19 91 National Board, State, Province, and Endorsements

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# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS.

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 10-10-91

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3/4  
 PC/H: 90-393 CWO: 300317  
 NCR: N-91-0607 PS: 91-890  
Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A  
 Authorization No. N/A  
 Expiration Date N/A

4. Identification of System Auxiliary Steam Quality Group C

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition N/A Addenda N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Auxiliary Steam Piping	N/A	N/A	N/A	80117-H-331-04	est. 1970	Replacement	No
Auxiliary Steam Piping	N/A	N/A	N/A	80117-H-332-03	est. 1970	Replacement	No
Auxiliary Steam Piping	N/A	N/A	N/A	80117-H-332-01	est. 1970	Replacement	No

7. Description of Work Supports 80117-H-331-04, 80117-H-332-03, and 80117-H-332-01 were modified to restore original design function.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒ N/A  
 Pressure N/A psi Test Temp. N/A Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.



## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding was performed in accordance with the FP & L Weld Control Manual  
and site procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this Replacement conforms  
to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Joseph Marchese Date 10/24 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel  
Inspectors and the State or Province of Dade County, Florida and employed by  
Arkwright Mutual Insurance Company of Norwood, MAhave inspected the components described in this Owner's Report during the period 7/91  
to 9/91, and state that to the best of my knowledge and belief,  
the Owner has performed examinations and taken corrective measures described in this Owner's Report  
in accordance with the requirements of ASME Code, Section XI.By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or  
implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore,  
neither the Inspector nor his employer shall be liable in any manner for any personal injury or property  
damage or a loss of any kind arising from or connected with this inspection.Inspector's Signature

Commissions

Factory Mutual System

8230

(N) (I)

National Board, State, Province, and Endorsements

Date 10/24 1991

BM

Page 1 of 2

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date October 18, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 0686 WA# 910128110746  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Auxiliary Feedwater Quality Group C

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Check Valve	Velcan Valve Co.	N/A	N/A	3-10-081	EST. 1970	Replaced	No
Check Valve	Pacific Valve Co.	N/A	N/A	3-10-081	1991	Replacement	No

7. Description of Work Replaced valve tag# 3-10-081 due to degraded valve seat and disc assy.

8. Tests Conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure 1400 psi Test Temp. 77 Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-047-3

## FORM NIS-2 (Back)

9. Remarks All welding was performed in accordance with the FPL Weld Control Manual and site  
Applicable Manufacturer's Data Reports to be attached  
procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms  
 to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] ARKWRIGHT MUTUAL Date 10/22, 1991  
 Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel  
 Inspectors and the State or Province of Dade County, Florida and employed by  
Arkwright Mutual Insurance Company of Norwood, MA.  
 have inspected the components described in this Owner's Report during the period January 31, 1991  
 to April 3, 1991, and state that to the best of my knowledge and belief,  
 the Owner has performed examinations and taken corrective measures described in this Owner's Report  
 in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or  
 implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore,  
 neither the inspector nor his employer shall be liable in any manner for any personal injury or property  
 damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
 Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
 National Board, State, Province, and Endorsements

Doc 10/23 1991

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 10/21/91

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

CWO: 300318 MPIL 91-0400M

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System COMPONENT COOLING WATER Quality Group B

5. (a) Applicable Construction Code B31.1, 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
COMPONENT COOLING WATER	N/A	N/A	N/A	3-ARH-114	EST. 1970	REPAIRED	NO

7. Description of Work INSTALLED (2) 7/8" LOCKNUTS ON U BOLT AND (2) 3/4" LOCKNUTS

ON EYE RODS - RESTORED SUPPORT 3-ARH-114 BACK TO ORIGINAL DESIGN

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ N/A

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedBOLTED CONNECTIONS NO WELDING PERFORMED

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed *Marchese* Date 11/04/91, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.

have inspected the components described in this Owner's Report during the period June 26, 1991 to Aug 6, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

*James F. Blum* Commissions 8230 (N) (I)  
Inspector's Signature  
Date Nov 5 1991  
Factory Mutual System  
National Board, State, Province, and Endorsements

1343

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**  
As Required by the Provisions of the ASME Code Section XI

Page 1 of 2

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date October 22, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2477 WA# 910904122549  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Containment Spray Quality Group B

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
CTMT Spray Pmp Pull Out Assy.	Goulds Pumps Inc	416929	N/A	3P214B	1986	Replaced	No
CTMT Spray Pmp Pull Out Assy.	Goulds Pumps Inc	N488823-1	N/A	3P214B	1989	Replacement	No

7. Description of Work Replaced the CTMT Spray Pump Pullout Assembly due to excessive seal leakage.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Other ☐

Pressure 295 psi Test Temp. 94 Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-049-3

# FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] MAINT. SUPT. Date 10-22, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period September 9, 1991 to September 18, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date Oct 23 19 91

mk

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date October 23, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3  
PWO: 2473 WA#910902174746  
PWO: 2858 WA#900421014517  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A  
Authorization No. N/A  
Expiration Date N/A

4. Identification of System Chemical & Volume Control Quality Group A

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case  
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Control Valve	Copes Vulcan	N/A	N/A	CV-3-310A	EST. 1970	Replacement	No

7. Description of Work Replaced the bonnet, studs and nuts on valve at tag location CV-3-310A.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒

Pressure 2280 psi Test Temp. 547 Degree's F

\*RCS Overpressure Test was performed in accordance with OP 1004.1 on 9/22/91

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-050-3



## FORM NIS-2 (Back)

9. Remarks Mechanical connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed

MAINT SUPT.Date 10/26, 19 91

Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.

have inspected the components described in this Owner's Report during the period January 1, 1991 to October 18, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

James H. [Signature]  
 Inspector's Signature

Commissions

Factory Mutual System  
 8230 (N) (I)

National Board, State, Province, and Endorsements

Date 10/28 19 91

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**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**  
As Required by the Provisions of the ASME Code Section XI

Page 1 of 2

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date October 25, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 1032 WA# 901214170247

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Reactor Coolant System Quality Group A

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Isol. Valve	N/A	N/A	N/A	3-500	EST. 1970	Replacement	No

7. Description of Work Replaced bonnet studs and nuts on valve at tag location 3-500.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒

Pressure 2280 psi Test Temp. 530 Degree's F

\*RCS Overpressure Test performed in accordance with OP 1004.1

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-051-3

## FORM NIS-2 (Back)

9. Remarks Mechanical connection, No welding performed.Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] MAINT. SUPP. Date 10/29, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period December 12, 1990 to September 23, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date Oct 30 19 91

BAB

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT

Name

P.O. BOX 029100, MIAMI, FL 33102

Address

2. Plant TURKEY POINT

Name

P.O. BOX 3088, FLORIDA CITY, FL 33034

Address

3. Work Performed by FLORIDA POWER & LIGHT

Name

P.O. BOX 3088, FLORIDA CITY, FL 33034

Address

Date October 29, 1991

Sheet 1 of 1

Unit 3

PWO: 0629 NCR# N-91-0306

Repair Organization P.O. No., Job No. etc.

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Condensate Storage Quality Group C

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Condensate Storage Tank	N/A	N/A	N/A	3TB	EST. 1970	Repaired	No

7. Description of Work Repaired several pits on manway, 1/16" in depth, by welding.

8. Tests Conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure Static Head psi Test Temp. 81.6 Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-052-3

# FORM NIS-2 (Back)

Page 2 of 2

9. Remarks All welding was performed in accordance with the FPL Weld Control Manual and site

Applicable Manufacturer's Data Reports to be attached

procedures.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repaired conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed *Chris Mont Siff* Date 10/31, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.

have inspected the components described in this Owner's Report during the period May 20, 1991 to September 7, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*James B. Glanville*  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date Oct 31 19 91

BB

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 10-30-91Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3  
CWO: 300318 PS: 91-651NCR: N-91-0571

Report Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/AAuthorization No. N/AExpiration Date N/A4. Identification of System STEAM GENERATOR SYSTEM

Quality Group

B5. (a) Applicable Construction Code B31.1, 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
STEAM GEN. BLOWDOWN	WSTGHSE	NA	NA	78101b-H-322-03	EST. 1970	REPAIRED	NO

7. Description of Work a shim was added to support 78101B-H-322-03 to provide the propergap per 5613-H-797 sht. 9D r.O.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒ NA  
 Pressure NA psi Test Temp. NA Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING WAS PERFORMED IN ACCORDANCE WITH THE FPL CONTROL MANUAL AND  
SITE PROCEDURES.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms  
to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Joseph Marchese Date 10/31, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel  
Inspectors and the State or Province of Dade County, Florida and employed by  
Arkwright Mutual Insurance Company of Norwood, MAhave inspected the components described in this Owner's Report during the period 2/91  
to 8/91, and state that to the best of my knowledge and belief,  
the Owner has performed examinations and taken corrective measures described in this Owner's Report  
in accordance with the requirements of ASME Code, Section XI.By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or  
implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore,  
neither the Inspector nor his employer shall be liable in any manner for any personal injury or property  
damage or a loss of any kind arising from or connected with this inspection.James P. Blum Commissions Factory Mutual System  
Inspector's Signature 8230 (N) (I)  
National Board, State, Province, and Endorsements  
Date 11/1 1991

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# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 10-31-91

Sheet 1 of 2

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3  
 CWO: 300318 PS: 91-894  
 NCR: N-91-0664  
Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A  
 Authorization No. N/A  
 Expiration Date N/A

4. Identification of System COMPONENT COOLING SYSTEM Quality Group C

5. (a) Applicable Construction Code B31.1 19 55 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
COMPONENT COOLING	NA	NA	NA	3-ACH-4	EST. 1970	repaired	NO
COMPONENT COOLING	NA	NA	NA	3-ABH-118	EST. 1970	repaired	NO
COMPONENT COOLING	NA	NA	NA	3-ACH-53	EST. 1970	repaired	NO

7. Description of Work THE ABOVE MENTIONED SUPPORTS HAVE BEEN RESTORED TO THEIR ORIGINAL DESIGN PER 5613-H-604 SHEETS 2, 8, & 12 ALL REV. 0

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒ NA  
 Pressure NA psi Test Temp. NA Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.



## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING WAS PERFORMED IN ACCORDANCE WITH THE FPL CONTROL MANUAL AND SITE PROCEDURES.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Joseph Marchese Date 11/01, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.have inspected the components described in this Owner's Report during the period 6/91 to 11/91, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions 8230 (N) (I)  
 Inspector's Signature National Board, State, Province, and Endorsements  
 Date Nov 4 19 91

B/B

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 10-31-91

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3  
 CWO: 300318 PS: 91-731  
 NCR: N-91-0649  
Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A  
 Authorization No. N/A  
 Expiration Date N/A

4. Identification of System COMPONENT COOLING SYSTEM Quality Group C

5. (a) Applicable Construction Code B31.1, 19 55 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
COMPONENT COOLING	NA	NA	NA	3-CCH-14	EST. 1970	REPAIRED	NO

7. Description of Work SUPPORT 3-CCH-14 was reworked to its original design per  
5613-H-588 sht. 1 rev. 0

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒ NA  
 Pressure NA psi Test Temp. NA Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING WAS PERFORMED IN ACCORDANCE WITH THE FPL CONTROL MANUAL AND SITE PROCEDURES.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Joseph Marchese Date 10/31, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MAhave inspected the components described in this Owner's Report during the period June 6, 1991 to October 31, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Inspector's Signature [Signature] Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements  
Date 11/1 1991

B/B

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 11-1-91Sheet 1 of 2

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3CWO: 300318 MPIL: 91-384M

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/AAuthorization No. N/AExpiration Date N/A4. Identification of System COMPONENT COOLING SYSTEM

Quality Group

C5. (a) Applicable Construction Code B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
COMPONENT COOLING	NA	NA	NA	253-1	EST. 1970	REPAIRED	NO

7. Description of Work REWORKED SUPPORT 253-1 TO ORIGINAL DESIGN PER 5613-H-588 sht. 6 rev. 08. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒ NAPressure NA psi Test Temp. NA Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING WAS PERFORMED IN ACCORDANCE WITH THE FPL CONTROL MANUAL AND SITE PROCEDURES.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Joseph Marchese Date 11/01, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MAhave inspected the components described in this Owner's Report during the period 6/91 to 11/91, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

James B. Glavin Commissions Factory Mutual System  
 Inspector's Signature 8230 (N) (I)  
 Date Nov 4 19 91 National Board, State, Province, and Endorsements

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# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date November 4, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2118 WA# 900810084651

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Containment Spray Quality Group B

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
CTMT Spray Pmp Pull Out Assy.	Goulds Pumps Inc	N/A	N/A	3P214A	Est. 1970	Replaced	No
CTMT Spray Pmp Pull Out Assy.	Goulds Pumps Inc	N/A	N/A	3P214A	1989	Replacement	No

7. Description of Work Replaced the CTMT Spray Pump Pullout Assembly due to excessive seal leakage.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Other ☐

Pressure 292 psi Test Temp. 142 Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-057-3

## FORM NIS-2 (Back)

9. Remarks Mechanical connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct, and this replacement conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned *Ant Mart-Sytle* Date 11/4, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period January 25, 1991 to September 4, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

*James B. Blanton*  
 Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
 National Board, State, Province, and Endorsements

Date Nov 5 19 91

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# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 11-04-91

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3  
 CWO: 300318 PS: 91-506  
 NCR: N-91-0467

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A  
 Authorization No. N/A  
 Expiration Date N/A

4. Identification of System RESIDUAL HEAT REMOVAL SYSTEM Quality Group B

5. (a) Applicable Construction Code B31.1 19 55 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
RESIDUAL HEAT REMOVAL SYS	NA	NA	NA	SR-5	EST. 1970	REPAIRED	NO

7. Description of Work SUPPORT SR-5 WAS RESTORED TO ORIGINAL DESIGN PER 5613-H-585 SHT 6

REV. 0

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒ NA  
 Pressure NA psi Test Temp. NA Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-058-3



## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING WAS PERFORMED IN ACCORDANCE WITH THE FPL CONTROL MANUAL AND SITE PROCEDURES.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Joseph Marchese Date 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MAhave inspected the components described in this Owner's Report during the period March, 1991 to June 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

James G. Blum Commissions Factory Mutual System  
Nov 5 19 91 8230 (N) (I)  
 Date Inspector's Signature National Board, State, Province, and Endorsements

BB

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date 11-6-91Sheet 1 of 2

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3  
CH0:DI-3127 MPIL:89-011M  
NCR-II-89-0327  
Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A  
 Authorization No. N/A  
 Expiration Date N/A

4. Identification of System COMPONENT COOLING WATER Quality Group C

5. (a) Applicable Construction Code B31.1 19 55 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
CCW PIPING	N/A	N/A	N/A	3-ARH-92	EST. 1970	REPAIRED	NO
CCW PIPING	N/A	N/A	N/A	3-ARH-114/SR-343	EST. 1970	REPLACEMENT	NO
CCW PIPING	N/A	N/A	N/A	3-ARH-124	EST. 1970	REPAIRED	NO
CCW PIPING	N/A	N/A	N/A	3-ARH-128	EST. 1970	REPAIRED	NO
CCW PIPING	N/A	N/A	N/A	3-ARH-137	EST. 1970	REPAIRED	NO
SI PIPING	N/A	N/A	N/A	3-SIH-2	EST. 1970	REPAIRED	NO
SI PIPING	N/A	N/A	N/A	SB-166	EST. 1970	REPAIRED	NO

7. Description of Work MODIFIED SUPPORTS 3-ARH-92, 3-ARH-114/SR-343, 3-ARH-124, 3-ARH-128, 3-ARH-137, 3-SIH-2 AND SR-166 TO RESTORE THEM TO ORIGINAL DESIGN.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ N/A  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING WAS PERFORMED IN ACCORDANCE WITH FP&L WELD CONTROL MANUAL AND SITE PROCEDURES.QUALITY GROUP "C".

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR & REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Joseph Marchese Date 11/07/91, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.have inspected the components described in this Owner's Report during the period May, 1991 to November, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

James B. Blawie Commissions Factory Mutual System  
Inspector's Signature 8230 (N) (I)  
Date Nov 8 19 91 National Board, State, Province, and Endorsements

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
NameDate 11/7/91P.O. BOX 029100, MIAMI, FL 33152  
AddressSheet 1 of 12. Plant TURKEY POINT  
NameUnit 3/4P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

CWO:300318 P.S. 91-588

NCR - H-91-0545

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
NameType Code Symbol Stamp N/AP.O. BOX 3218, FLORIDA CITY, FL 33034  
AddressAuthorization No. N/AExpiration Date N/A4. Identification of System Auxiliary Feedwater

Quality Group

C5. (a) Applicable Construction Code B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
AFW Piping	N/A	N/A	N/A	80117-H-341-18	Est. 1970	Replacement	No

7. Description of Work Modified Support 80117-H-341-18 to restore it to original design.8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ N/A

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-061-3

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedAll welding was performed in accordance with FP&L Weld Control Manual and site procedures.Quality Group "C".

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned J. Marchese Date 11/07, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MAhave inspected the components described in this Owner's Report during the period May, 1991 to November, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

James L. Blach Commissions Factory Mutual System  
Nov 8 1991 8230 (N) (I)  
 Inspector's Signature National Board, State, Province, and Endorsements

5/3

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT

Date November 7, 1991

P.O. BOX 029100, MIAMI, FL 33102

Sheet 1 of 1

2. Plant TURKEY POINT

Unit 3

P.O. BOX 3088, FLORIDA CITY, FL 33034

PWO: 2777, NCR# N-91-0090, 87-0112

3. Work Performed by FLORIDA POWER & LIGHT

Type Code Symbol Stamp N/A

P.O. BOX 3088, FLORIDA CITY, FL 33034

Authorization No. N/A

Expiration Date N/A

4. Identification of System Feedwater System

Quality Group B

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Control Valve	Anchor Darling	N/A	N/A	CV-3-6275B	EST. 1970	Replacement	No

7. Description of Work Replaced the bonnet, repaired two gouges in valve body on valve CV-3-6275B.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Other ☐

Pressure OPERATING psi Test Temp OPERATING Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-060-3

# FORM NIS-2 (Back)

Page 2 of 2

9. Remarks All welding was performed in accordance with the FPL Weld Control Manual and site  
procedures.  
Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms  
repair or replacement  
to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed *[Signature]* Date 11/12, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel  
Inspectors and the State or Province of Dade County, Florida and employed by  
Arkwright Mutual Insurance Company of Norwood, MA.  
have inspected the components described in this Owner's Report during the period February 8, 1991  
to November 6, 1991, and state that to the best of my knowledge and belief,  
the Owner has performed examinations and taken corrective measures described in this Owner's Report  
in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or  
implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore,  
neither the inspector nor his employer shall be liable in any manner for any personal injury or property  
damage or a loss of any kind arising from or connected with the inspection.

*[Signature]*  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date Nov. 13 19 91

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date November 8, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3  
 CHW: 300318  
 MPII: 91-767 NCR-N-91-0635  
Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A  
 Authorization No. N/A  
 Expiration Date N/A

4. Identification of System COMPONENT COOLING

Quality Group B

5. (a) Applicable Construction Code B31.1 19 55 Edition N/A Addenda N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
PIPING CC	NA	NA	NA	3-BAH-30	EST. 1970	REPAIR	NO
PIPING CC	NA	NA	NA	80143-A-003-01	EST. 1970	REPAIR	NO
PIPING CC	NA	NA	NA	80143-H-003-01	EST. 1970	REPAIR	NO
PIPING CC	NA	NA	NA	80143-H-003-02	EST. 1970	REPAIR	NO
PIPING CC	NA	NA	NA	80143-H-005-06	EST. 1970	REPLACEMENT	NO
PIPING CC	NA	NA	NA	80143-H-006-02	EST. 1970	REPLACEMENT	NO

7. Description of Work 3-BAH-30-WELDED ITEM3, 80143-A-003-01-WELDED ITEM2 to PIPE, 80143-H-003-01 R MOVED AND REWELDED ITEM3 TO ITEM2, 80143-H-003-02 REMOVED AND REWELDED ITEM5, 80143-H-005-06-REMOVED, REFAB & WELD NEW SHIM, 80143-H-006-02-REMOVED-REFAB AND WELD ITEM4

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ NA.  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.



## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING PERFORMED IN ACCORDANCE WITH THE FP&L WELD CONTROL MANUAL AND  
SITE PROCEDURES.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR & REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned J. Marchese Date 11/12, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MAhave inspected the components described in this Owner's Report during the period June 1991 to November, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Francis H. Blum  
Inspector's SignatureCommissions Factory Mutual System  
8230 (N) (I)Date Nov 14 1991

National Board, State, Province, and Endorsements

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT

Date November 12, 1991

Name  
P.O. BOX 029100, MIAMI, FL 33102

Sheet 1 of 1

Address

2. Plant TURKEY POINT

Unit 3

Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034

PWO: 2413 NCR# 88-0076

Address

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT

Type Code Symbol Stamp N/A

Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034

Authorization No. N/A

Address

Expiration Date N/A

4. Identification of System Containment Spray System Quality Group B

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping CSS	N/A	N/A	N/A	3-SIH-1	EST. 1970	Repaired	No
Piping CSS	N/A	N/A	N/A	3-SIH-2	EST. 1970	Repaired	No
Piping CSS	N/A	N/A	N/A	3-SIH-9	EST. 1970	Repaired	No

7. Description of Work Restored support MK#s 3-SIH-1, 3-SIH-2 and 3-SIH-9 to it's original design requirements.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-063-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, No welding performed.

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct, and this repair conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] and [Signature] Date 11/13, 1997  
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period March 1989 to July 9, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

\*See Below

Commissions

Factory Mutual System  
8230 (N) (I)

Inspector's Signature

National Board, State, Province, and Endorsements

\*Presented to ANII. ANII has elected not to sign NIS-2 prior to his arrival on site.

Date 19

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT Date 11-12-91  
Name  
P.O. BOX 029 100, MIAMI, FL 33152  
Address
2. Plant TURKEY POINT Unit 3  
Name CWO:300318 PS:91-923  
P.O. BOX 3088, FLORIDA CITY, FL 33034 NCR-N-91-0558  
Address Repair Organization P.O. No., Job No., etc.
3. Work Performed by BECHTEL CONSTRUCTION, INC. Type Code Symbol Stamp N/A  
Name Authorization No. N/A  
P.O. BOX 3218, FLORIDA CITY, FL 33034 Expiration Date N/A  
Address
4. Identification of System Safety Injection System Quality Group B
5. (a) Applicable Construction Code B31.1 19 55 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda
6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Safety Injection	NA	NA	NA	8080-H-005-01	EST. 1970	Repaired	NA
Safety Injection	NA	NA	NA	8080-H-006-03	EST. 1970	Repaired	NA
Safety Injection	NA	NA	NA	8080-H-007-01	EST. 1970	Replacement	NA
Safety Injection	NA	NA	NA	8080-H-007-06	EST. 1970	Repaired	NA
Safety Injection	NA	NA	NA	8080-H-007-09	EST. 1970	Replacement	NA
Safety Injection	NA	NA	NA	8080-R-007-01	EST. 1970	Repaired	NA

7. Description of Work Restored supports to original design per 5177-M-56 Rev 7 and removed anchor bolts per CN-2.24 Rev 6

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ NA  
 Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING WAS PERFORMED IN ACCORDANCE WITH FP&L WELD CONTROL MANUAL AND  
SITE PROCEDURES

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR AND REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned J. Marek Date 11/15 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MAhave inspected the components described in this Owner's Report during the period August 1991 to November 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Thomas B. Black  
Inspector's SignatureCommissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and EndorsementsDate 11/27 1991

15/15

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
NameP.O. BOX 029100, MIAMI, FL 33152  
AddressDate NOVEMBER 12, 1991Sheet 1 of 22. Plant TURKEY POINT  
NameP.O. BOX 3088, FLORIDA CITY, FL 33034  
AddressUnit 3

CWO: 300318, PS 91-618, 626, 649, 951

NCR: N-91-0550, 0551, 0552, 0761

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
NameP.O. BOX 3218, FLORIDA CITY, FL 33034  
AddressType Code Symbol Stamp N/AAuthorization No. N/AExpiration Date N/A4. Identification of System HIGH HEAD SAFETY INJECTIONQuality Group A5. (a) Applicable Construction Code B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
PIPING SIS	NA	NA	NA	SUPPORT "F"	EST. 1970	REPLACEMENT	NO
PIPING SIS	NA	NA	NA	SUPPORT "E"	EST. 1970	REPAIR	NO
PIPING SIS	NA	NA	NA	SUPPORT "D"	EST. 1970	REPAIR	NO
PIPING SIS	NA	NA	NA	SUPPORT "427B"	EST. 1970	REPLACEMENT	NO
PIPING SIS	NA	NA	NA	8051-R-528-01	EST. 1970	REPLACEMENT	NO
PIPING SIS	NA	NA	NA	PSIII	EST. 1970	REPLACEMENT	NO
PIPING SIS	NA	NA	NA	PSII	EST. 1970	REPAIR	NO

7. Description of Work SUPPORT "F"-REPLACED ITEM#4 AND INSTALLED(4) LOCKNUTS, SUPPORT "E" ADJUSTED ITEMS 2,3 AND ADDED(4) LOCKNUTS, SUPPORT "D"-ADJUSTED U BOLT AND ADDED(2) JAM NUTS, SUPPORT 427B-REMOVED ITEMS 1,6 AND REPLACED WITH NEW ITEM 6, SUPPORT 8051-R-528-01-REPLACED U BOLT ITEM 23, SUPPORT PSIII-REMOVED EXISTING ITEMS 3,25 AND REPLACED WITH NEW ITEMS 3,25, PSII-INSTALLED LOCKNUT

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ N/A

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-065-3

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING PERFORMED IN ACCORDANCE WITH THE FP&L WELD CONTROL MANUAL AND  
SITE PROCEDURES.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR & REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Donald D. Miller <sup>FOR J. MARCHESE</sup> SITE CONST. SVCS. MGR Date 11-27, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.have inspected the components described in this Owner's Report during the period May 1991 to October 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions Factory Mutual System  
Inspector's Signature 8230 (N) (I)  
Date 11-27 1991 National Board, State, Province, and EndorsementsB/S

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date November 12, 1991

Sheet 2 of 2

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3  
 CWO: 300318, PS 91-618,626,649,951  
 NCR:H-91-0550,0551,0552,0761  
Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A  
 Authorization No. N/A  
 Expiration Date N/A

4. Identification of System HIGH HEAD SAFETY INJECTION

5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
PIPING SIS	NA	NA	NA	8080-H-009-05	EST. 1970	REPAIRED	NO
PIPING SIS	NA	NA	NA	8080-H-010-08	EST. 1970	REPLACED	NO
PIPING SIS	NA	NA	NA	8080-H-010-09	EST. 1970	REPLACED	NO
PIPING SIS	NA	NA	NA	8080-H-010-10	EST. 1970	REPAIRED	
PIPING SIS	NA	NA	NA	8080-H-010-11	EST. 1970	REPAIRED	NO
PIPING SIS	NA	NA	NA	8080-H-009-02	EST. 1970	REPAIRED	NO
PIPING SIS	NA	NA	NA	8080-H-009-09	EST. 1970	REPAIRED	NO

7. Description of Work SUPPORT 8080-H-009-05-ADJUSTED EXISTING U BOLT, SUPPORT 8080-H-010-08-REPLACED MISSING U BOLT, SUPPORT 8080-H-010-09-REPLACED ITEM3, SUPPORT 8080-H-010-10-11 ADJUSTED EXISTING U BOLT AND REPAIRED WELD ON ITEM TO EMBED, SUPPORT 8080-H-009-02-TIGHTENED EXISTING NUTS, SUPPORT 8080-H-009-09- EXISTING EYE ROD WAS CUT TO SUIT



Page 1 of 2

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date November 14, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3  
PWO:6208 PC/M#91-077 NCR#N-91-0147 P/S#91-786  
Repair Organization P.O. No., Job No. etc.

3. Work Performed by COMBUSTION ENGINEERING INC.  
Name  
1000 PROSPECT HILL RD, WINDSOR, CT. 06095  
Address

Type Code Symbol Stamp N/A  
 Authorization No. N/A  
 Expiration Date N/A

4. Identification of System Reactor Vessel Quality Group A

5. (a) Applicable Construction Code ASME Section III 19 65 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Reactor Pressure Vessel	Babcock & Wilcox	610-0116	N-160	3PSRV1	1969	Repaired	Yes

7. Description of Work Repaired the Core Exit Thermocouple Port 51 by cutting and installing welded tube plug.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒

Pressure 2280 psi Test Temp. 547 Degree's F

\*Performed RCS Overpressure Test in accordance with OP 1004.1

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-068-3

## FORM NIS-2 (Back)

9. Remarks All welding was performed in accordance with the FPL Weld Control Manual and site procedures.
- Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] MAINT. Supt. Date 11-15, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA. have inspected the components described in this Owner's Report during the period May 1991 to September 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date Nov 27 19 91

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33102  
Address

Date November 14, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

PWO: 2110 NCR# 90-0094 CNF# 90-3-0021

Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Component Cooling Water Quality Group C

5. (a) Applicable Construction Code ANSI B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping CCW	N/A	N/A	N/A	3-BAH-26	EST. 1970	Repaired	No

7. Description of Work Repaired defective weld and reset spring can to it's proper cold load setting.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F. N/A

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-067-3

## FORM NIS-2 (Back)

9. Remarks All welding was performed in accordance with the FPL Weld Control Manual and site  
procedures.  
Applicable Manufacturer's Data Reports to be attached

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms  
to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed [Signature] MAINT. SPT Date 11/15, 19 91  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel  
Inspectors and the State or Province of Dade County, Florida and employed by  
Arkwright Mutual Insurance Company of Norwood, MA.  
have inspected the components described in this Owner's Report during the period March 29, 1990  
to July 25, 1991, and state that to the best of my knowledge and belief,  
the Owner has performed examinations and taken corrective measures described in this Owner's Report  
in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or  
implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore,  
neither the inspector nor his employer shall be liable in any manner for any personal injury or property  
damage or a loss of any kind arising from or connected with the inspection.

[Signature]  
Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

Date 11/27 19 91

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT

Name

P.O. BOX 029 100, MIAMI, FL 33152

Address

Date NOVEMBER 15, 1991Sheet 1 of 22. Plant TURKEY POINT

Name

P.O. BOX 3088, FLORIDA CITY, FL 33034

Address

Unit 3CWO:300318, PS 91-580, NCR-N-88-0087

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.

Name

P.O. BOX 3218, FLORIDA CITY, FL 33034

Address

Type Code Symbol Stamp N/AAuthorization No. N/AExpiration Date N/A4. Identification of System HIGH HEAD SAFETY INJECTIONQuality Group B5. (a) Applicable Construction Code B31.1, 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
PIPING SIS	NA	NA	NA	SR-121	EST. 1970	REPLACEMENT	NO
PIPING SIS	NA	NA	NA	SR-122	EST. 1970	REPAIRED	NO
PIPING SIS	NA	NA	NA	3-SIH-69	EST. 1970	REPAIRED	NO
PIPING SIS	NA	NA	NA	SR-125	EST. 1970	REPAIRED	NO
PIPING SIS	NA	NA	NA	SUPPORT "C"	EST. 1970	REPAIRED	NO
PIPING SIS	NA	NA	NA	SUPPORT "A" 5613-H-597/SHT 25 B	EST. 1970	REPLACEMENT	NO
PIPING SIS	NA	NA	NA	SUPPORT "A" 5613-H-597/SHT 26 B	EST. 1970	REPAIRED	NO

7. Description of Work SR-121-REPLACED HEX NUTS, SR-122-REMOVED SHIM PLATE ITEM 6, 3-SIH-69-READJUST U BOLT AND ADD 2 HEX NUTS, SR-125-OBTAINED PROPER CLEARANCE AND ADDED 4 HEX NUTS, SUPPORT "C"-READJUST & TIGHTEN LOAD BOLT ITEM #1, SUPPORT "A" 5613-H-597/SHT 25B-REPLACED ITEM 3, SUPPORT "A" 5613-H-597/SHT 26B-ADJUSTED TO U BOLT8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ NA

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING PERFORMED IN ACCORDANCE WITH FP&L WELD CONTROL MANUEL AND SITE PROCEDURES.

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR & REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Donald D. Miller FOR J. MARCHESE  
SITE CONST. SVCS. MGR. Date NOVEMBER 27, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.have inspected the components described in this Owner's Report during the period May 1991 to October 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Futhermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

James H. Black  
Inspector's Signature  
Date Nov 27 19 91Commissions Factory Mutual System  
8230 (N) (I)  
National Board, State, Province, and Endorsements

13/6

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date NOVEMBER 15, 1991

Sheet 2 of 2

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

CWO: "300318, PS 91-580, NCR-N-88-0087

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System HIGH HEAD SAFETY INJECTION

5. (a) Applicable Construction Code B31.1 19 <sup>55</sup> Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
PIPING SIS	NA	NA	NA	3-SIH-66	EST. 1970	REPAIRED	NO
PIPING SIS	NA	NA	NA	SUPPORT "A" 5613-H-597 SHEET 30B	EST. 1970	REPAIRED	NO
PIPING SIS	NA	NA	NA	3-SIH-64	EST. 1970	REPAIRED...	NO
PIPING SIS	NA	NA	NA	3-SIH-72	EST. 1970	REPAIRED	NO
PIPING SIS	NA	NA	NA	3-SIH-74	EST. 1970	REPAIRED	NO
PIPING SIS	NA	NA	NA	3-SIH-22	EST. 1970	REPAIRED	NO
PIPING SIS	NA	NA	NA	3-SIH-23	EST. 1970	REPAIRED	NO
PIPING SIS	NA	NA	NA	3-SIH-139	EST. 1970	REPAIRED	NO

3-SIH-66-ADJUSTED U BOLT ITEM#1, SUPPORT "A" 5613-H-597/SHT 30B-ADDED COTTER PIN TO ITEM#1, 3-SIH-64-ADDED WELD BETWEEN SHIM PLATE AND ITEM

7. Description of Work

2, 3-SIH-72-ADJUST U BOLT ITEM3, 3-SIH-74-ADJUST ITEMS 1, 2 U BOLTS AND ADD 2 HEX NUTS TO ITEM2, 3-SIH-22ADJUST CLEVIS AND TIGHTEN LOAD BOLT NUT, 3-SIH-23-ADJUST AND TIGHTEN

CLEVIS, 3-SIH-139-ADJUST U BOLT AND ADD HEX NUTS





**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date NOVEMBER 18, 1991Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3CWO:500438, PS 91-645, IICR-N-91-0077

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/AAuthorization No. N/AExpiration Date N/A4. Identification of System REACTOR COOLANT

Quality Group

A5. (a) Applicable Construction Code B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter, 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
PIPING RCS	CAMERON IRON WORKS Inc.	NA	na	NA	EST. 1970	REPAIRED	NO

7. Description of Work A GOUGE (APPROX. 3/32" DEEP X 1 3/4" LONG) LOCATED ON INTERMEDIATE

RCS LOOP C IN THE VICINITY OF BRANCH CONNECTION FOR VALVE 3-509 WAS REPAIR WELDED  
ALSO PRIOR TO WELD REPAIR A LINEAR INDICATION ADJACENT TO THE GOUGE WAS REPAIRED BY  
SUPERFICIAL HAND FILING AND P.T. ACCEPTED.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒Pressure 2,280 psi Test Temp. 547 Degree's F

\*PERFORMED RCS OVER PRESSURE TEST IN ACCORDANCE WITH OP 1004.1

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-070-3

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING PERFORMED IN ACCORDANCE WITH FP & L WELD CONTROL MANUAL AND  
SITE PROCEDURES

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIR conforms  
to the rules of the ASME Code, Section XI. repair or replacementType Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Donald D. Smith FOR J. MARCHESE  
SITE CONST. SVCS. MGR. Date NOVEMBER 27, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel  
Inspectors and the State or Province of Dade County, Florida and employed by  
Arkwright Mutual Insurance Company of Norwood, MAhave inspected the components described in this Owner's Report during the period May 1991  
to October 1991, and state that to the best of my knowledge and belief,  
the Owner has performed examinations and taken corrective measures described in this Owner's Report  
in accordance with the requirements of ASME Code, Section XI.By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or  
implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore,  
neither the Inspector nor his employer shall be liable in any manner for any personal injury or property  
damage or a loss of any kind arising from or connected with this inspection.Donald D. Smith Commissions Factory Mutual System  
Inspector's Signature 8230 (N) (I)  
Date Nov 27 1991 National Board, State, Province, and Endorsements

BMB

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address

Date NOVEMBER 19, 1991

Sheet 1 of 1

2. Plant TURKEY POINT  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

Unit 3

CH0:300318, PS-91-787, H-91-0655

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
Name  
P.O. BOX 3218, FLORIDA CITY, FL 33034  
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System COMPONENT COOLING WATER Quality Group ☒ C

5. (a) Applicable Construction Code B31.1 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
PIPING CCW	NA	NA	NA	SUPPORT DET. F	EST. 1970	REPLACEMENT	NO

7. Description of Work ITEM 1 OF SUPPORT WAS REPLACED WITH A NEW ITEM 1

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ NA.

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING PERFORMED IN ACCORDANCE WITH FP & L WELD CONTROL MANUALSITE PROCEDURES

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed Donald D. Miller FOR J. MARCHESE Date NOVEMBER 27, 1991  
SITE CONST. SVCS. MGR.  
 Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA

have inspected the components described in this Owner's Report during the period May 1991 to October 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage, or a loss of any kind arising from or connected with this inspection.

James B. Black Commissions 8230 (N) (I)  
 Inspector's Signature  
 Date Dec 21 19 91 National Board, State, Province, and Endorsements

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT

Name

P.O. BOX 029100, MIAMI, FL 33152

Address

Date NOVEMBER 20, 1991Sheet 1 of 12. Plant TURKEY POINT

Name

P.O. BOX 3088, FLORIDA CITY, FL 33034

Address

Unit 3CWO:300161, MPIL: 91-476M, PC/M 90-381

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.

Name

P.O. BOX 3218, FLORIDA CITY, FL 33034

Address

Type Code Symbol Stamp N/AAuthorization No. N/AExpiration Date N/A4. Identification of System REACTOR COOLANT

Quality Group

A5. (a) Applicable Construction Code B31.1, 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
PIPING RCS	NA	NA	NA	3-RCH-27	EST. 1970	REPLACEMENT	NO

7. Description of Work REPLACED SUPPORT ITEM#6 (3/4" ALL THREAD ROD) WITH A NEWITEM#6 (3/4" ALL THREAD ROD)8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ NA

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WORK PERFORMED IN ACCORDANCE WITH FP&L APPROVED PROCEDURES

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed Donald D. Miller FOR J. MARCHESE  
SITE CONST. SVCS. MGR Date NOVEMBER 27, 1991  
 Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA.

have inspected the components described in this Owner's Report during the period May 1991 to October 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions Factory Mutual System  
Inspector's Signature 8230 (N) (I)  
Date Nov 27 1991 National Board, State, Province, and Endorsements

BB

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT

Name

P.O. BOX 029100, MIAMI, FL 33152

Address

Date NOVEMBER 20, 1991Sheet 1 of 12. Plant TURKEY POINT

Name

P.O. BOX 3088, FLORIDA CITY, FL 33034

Address

Unit 3

CWO:300318, NCR-N-91-0565

MPIL:91-315M, PS 91-755

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.

Name

P.O. BOX 3218, FLORIDA CITY, FL 33034

Address

Type Code Symbol Stamp N/AAuthorization No. N/AExpiration Date N/A4. Identification of System CONTAINMENT SPRAY

Quality Group

**B**5. (a) Applicable Construction Code B31.1, 19 55 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
PIPING CS	NA	NA	NA	3-RCSH-107	EST. 1970	REPLACEMENT	NO

7. Description of Work REPLACED SUPPORT ITEM 3 (3"X3"X3/8" ANGLE) & INSTALLED NEWITEM 3 (3" X 3" X 3/8" ANGLE)8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐ NA

Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING PERFORMED IN ACCORDANCE WITH THE FP&L WELD CONTROL MANUALAND SITE PROCEDURES

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed Donald D. Miller FOR J. MARCHESE. Date NOVEMBER 27, 1991  
SITE CONST. SVCS. MGR  
 Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA

have inspected the components described in this Owner's Report during the period May, 1991 to October 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

James K. Blum Commissions 8230 (N) (I)  
 Inspector's Signature  
 Date Nov 27, 1991  
 Factory Mutual System  
 National Board, State, Province, and Endorsements



**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
NameDate NOVEMBER 21, 1991P.O. BOX 029100, MIAMI, FL 33152  
AddressSheet 1 of 22. Plant TURKEY POINT  
NameUnit 3P.O. BOX 3088, FLORIDA CITY, FL 33034  
AddressCWO: 300085, MPIL'S 90-002M, 005M, PC/M 86-237  
Repair Organization P.O. No., Job No., etc.3. Work Performed by BECHTEL CONSTRUCTION, INC.  
NameType Code Symbol Stamp N/AP.O. BOX 3218, FLORIDA CITY, FL 33034  
AddressAuthorization No. N/AExpiration Date N/A4. Identification of System COMPONENT COOLING WATERQuality Group C5. (a) Applicable Construction Code B31.1 19 55 Edition, N/A Addenda, N/A Code Case  
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
PIPING CCW	NA	NA	NA	RV-3-1424	EST 1970	REPLACED	NO
PIPING CCW	DRESSER INDUSTRIES, INC.	TH-18073	NA	RV-3-1424	1988	REPLACEMENT	NO
PIPING CCW	NA	NA	NA	RV-3-1425	EST 1970	REPLACED	NO
PIPING CCW	DRESSER INDUSTRIES, INC.	TH-18074	NA	RV-3-1425	1988	REPLACEMENT	NO
PIPING CCW	NA	NA	NA	RV-3-1426	EST 1970	REPLACED	NO
PIPING CCW	DRESSER INDUSTRIES, INC.	TH-18075	NA	RV-3-1426	1988	REPLACEMENT	NO
PIPING CCW	NA	NA	NA	RV-3-1427	EST 1970	REPLACED	NO

7. Description of Work VALVES RV-3-1424, 1425, 1426, 1427, 1428, 1429, 1430, 1431 WERE REPLACED WITHNEW VALVES ALSO.8. Tests Conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐Pressure 165 psiTest Temp. AMBIENT Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING PERFORMED IN ACCORDANCE WITH THE FPL WELD CONTROL MANUAL AND SITEPROCEDURES.

## CERTIFICATION OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms  
to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed Donald D. Miller FOR J. MARCHESE  
SITE CONST. SVCS. MGR. Date NOVEMBER 27, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA have inspected the components described in this Owner's Report during the period May, 1991 to October 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Donald D. Miller  
Inspector's Signature

Commissions

Factory Mutual System  
8230 (N) (1)  
National Board, State, Province, and Endorsements

Date Nov. 27 1991

BMS

# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT Date NOVEMBER 21, 1991  
Name  
P.O. BOX 029100, MIAMI, FL 33152 Sheet 2 of 2  
Address
2. Plant TURKEY POINT Unit 3  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034 CWO: 300085, PC/M 86-237, MPIL'S 91-002M, 91-005M  
Address Repair Organization P.O. No., Job No., etc.
3. Work Performed by BECHTEL CONSTRUCTION, INC. Type Code Symbol Stamp N/A  
Name Authorization No. N/A  
P.O. BOX 3218, FLORIDA CITY, FL 33034 Expiration Date N/A  
Address
4. Identification of System COMPONENT COOLING WATER
5. (a) Applicable Construction Code B31.1 19 55 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
PIPING CCW	DRESSER INDUSTRIES, INC.	TH-18076	NA	RV-3-1427	1988	REPLACEMENT	NO
PIPING CCW	NA	NA	NA	RV-3-1428	EST 1970	REPLACED	NO
PIPING CCW	DRESSER INDUSTRIES, INC.	TH-18077	NA	RV-3-1428	1988	REPLACEMENT	NO
PIPING CCW	NA	NA	NA	RV-3-1429	EST 1970	REPLACED	NO
PIPING CCW	DRESSER INDUSTRIES, INC.	TH-18078	NA	RV-3-1429	1988	REPLACEMENT	NO
PIPING CCW	NA	NA	NA	RV-3-1430	EST 1970	REPLACED	NO
PIPING CCW	DRESSER INDUSTRIES, INC.	TH-18086	NA	RV-3-1430	1988	REPLACEMENT	NO
PIPING CCW	NA	NA	NA	RV-3-1431	EST 1970	REPLACED	NO
PIPING CCW	DRESSER INDUSTRIES, INC.	TH-18087	NA	RV-3-1431	1988	REPLACEMENT	NO

7. Description of Work THE NEW VALVES ARE FLANGED CONNECTION VALVES. MODIFIED THE 1 1/2" & 1" PIPING

TO FACILITATE THE INSTALLATION OF THE FLANGED CONNECTIONS.



# FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT Date NOVEMBER 25, 1991  
Name  
P.O. BOX 029100, MIAMI, FL 33152  
Address
2. Plant TURKEY POINT Sheet 1 of 1  
Name  
P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address Unit 3  
CWO:300127, PC/M 90-055, MPIL 90-282M  
Repair Organization P.O. No., Job No., etc.
3. Work Performed by BECHTEL CONSTRUCTION, INC. Type Code Symbol Stamp N/A  
Name Authorization No. N/A  
P.O. BOX 3218, FLORIDA CITY, FL 33034 Expiration Date N/A  
Address
4. Identification of System CVCS CHARGING & LETDOWN Quality Group B
5. (a) Applicable Construction Code B31.1 1955 Edition, N/A Addenda, N/A Code Case  
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda
6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
PIPING CVCS	NA	NA	NA	CHARGING PUMP 3A	EST. 1970	REPLACEMENT	NO
PIPING CVCS	NA	NA	NA	CHARGING PUMP 3B	EST. 1970	REPLACEMENT	NO
PIPING CVCS	NA	NA	NA	CHARGING PUMP 3C	EST. 1970	REPLACEMENT	NO

7. Description of Work MODIFIED CHARGING PUMP'S 3A, 3B, 3C DISCHARGE DRAINS, RELIEF VALVE PIPING, AND SUPPORTS.

8. Tests Conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐  
 Pressure 3500 psi Test Temp. 91° Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.

Applicable Manufacturer's Data Reports to be attached

ALL WELDING PERFORMED IN ACCORDANCE WITH FP&L WELD CONTROL MANUAL AND SITE

PROCEDURES

## CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed Donald D. Miller FOR J. MARCHESE Date NOVEMBER 27, 1991  
SITE CONST. SVCS. MGR  
 Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA

have inspected the components described in this Owner's Report during the period May 1991 to October 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
 Inspector's Signature

Commissions Factory Mutual System  
8230 (N) (I)  
 National Board, State, Province, and Endorsements

Date Nov 27 1991

BA3

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT  
NameDate December 3, 1991P.O. BOX 029100, MIAMI, FL 33152  
AddressSheet 1 of 12. Plant TURKEY POINT  
NameUnit 3P.O. BOX 3088, FLORIDA CITY, FL 33034  
Address

CWO: 500645 N-91-0220

P.S. 91-727

Repair Organization P.O. No., Job No., etc.

3. Work Performed by BECHTEL CONSTRUCTION, INC.  
NameType Code Symbol Stamp N/AAuthorization No. N/AP.O. BOX 3218, FLORIDA CITY, FL 33034  
AddressExpiration Date N/A4. Identification of System SAFETY INJECTIONQuality Group B5. (a) Applicable Construction Code B31.1 19 55 Edition, N/A Addenda, N/A Code Case  
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1980, Edition, Winter 1981 Addenda

## 6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Piping SIS	N/A	N/A	N/A	Line # 10"-SI-151R	Est. 1970	Replacement	No

7. Description of Work Replacement of a piping section that was discovered leaking during a scheduledHydrostatic Test upstream of Valve 3-8878. Tests Conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐Pressure 250 psiTest Temp. 60 Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2-in. X 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

91-077-3

## FORM NIS-2 (Back)

9. Remarks Examinations performed by FPL Construction Quality Control personnel.Applicable Manufacturer's Data Reports to be attachedALL WELDING PERFORMED IN ACCORDANCE WITH THE FPL WELD CONTROLMANUAL AND SITE PROCEDURES.

## CERTIFICATION OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conforms  
to the rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/A

Signed Joseph Marchese Date 12/05, 1991  
Owner or Owner's Designee, Title

## CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Dade County, Florida and employed by Arkwright Mutual Insurance Company of Norwood, MA

have inspected the components described in this Owner's Report during the period June 6, 1991 to Nov. 1, 1991, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of ASME Code, Section XI.

By signing this certificate neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owners Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Francis B. Glavin  
Inspector's Signature

Commissions

8230 Factory Mutual System  
(N) (1)  
National Board, State, Province, and Endorsements

Date Nov 6 1991

B/B