

TURKEY POINT PLANT

UNIT 3

1994 INSERVICE INSPECTION REPORT

Executive Summary

The Inservice Inspection examinations performed during Turkey Point Unit 3's refueling outage, and the cumulative total of exams meet the requirements of ASME Section XI.

100% of the A, B, and C steam generator tubes were eddy current tested. As a result of the examinations, the following tubes have been plugged during this outage (reference: NIS-BB form dated 5/17/94 attached.):

Steam Generator A; 1 tube

Steam Generator B; 1 tube

Steam Generator C; 2 tubes

The NIS-1 abstract includes an explanation of Reactor Coolant piping branch connection welds examined for a "set in" rather than a "set-on" configuration. The abstract also includes a matrix of the affected welds.

The NIS-2 forms discuss the repairs and replacements which took place since the previous Unit 3 submittal and the completion of the 1994 refueling/maintenance outage.

Visual examination and functional testing of snubbers was completed in accordance with ASME Section XI and the plant Technical Specifications. Visual examinations did not reveal any failures. Functional testing activities identified one (1) snubber from the augmented test sample which deviated from the specified criteria. This failed snubber was replaced with a satisfactorily tested spare.

The inservice inspection summary tables detail the examinations performed during the first outage of the first period of the third ten-year interval.

Selected Class 1 and Class 2 piping and supports were examined with surface, volumetric, and visual examination techniques in accordance with Section XI of the ASME Boiler and Pressure Vessel Code.

FORM NIS-1 OWNERS' DATA REPORT FOR INSERVICE INSPECTIONS

Page 1 of 9

1. Owner: Florida Power and Light Company, 700 Universe Blvd. Juno Beach, Florida 33408
2. Plant: Turkey Point Nuclear Power Plant, P.O. Box 3088, Florida City, Florida 33034
3. Plant Unit: 3
4. Owner Certificate of Authorization (if required) N/A
5. Commercial Service Date : December 14, 1972
6. National Board Number for Unit: N/A
7. Components Inspected:

Component or Appurtenance	Manufacturer or Installer	Manufacturer or Installer Serial No.	State or Province No.	Nat'l Board No.
Reactor Pressure Vessel	Babcock and Wilcox	610-0116 3PSRV1	N/A	N-160
Steam Generator B	Westinghouse	16A-5885-2 FSGT-3002 3E210B	N/A	N-742
Pressurizer	Westinghouse	3T200	N/A	N/A
Reactor Coolant Pump A	Westinghouse	3P200A	N/A	N/A
Reactor Coolant Pump B	Westinghouse	3P200B	N/A	N/A
Regenerative Heat Exchanger	Westinghouse	3E200	N/A	N/A
Reactor Coolant System	Bechtel	N/A	N/A	N/A
Safety Injection System	Bechtel	N/A	N/A	N/A
Chemical and Volume Control System	Bechtel	N/A	N/A	N/A
Residual Heat Removal	Bechtel	N/A	N/A	N/A
Steam Generator Blowdown System	Bechtel	N/A	N/A	N/A



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Component or Appurtenance	Manufacturer or Installer	Manufacturer or Installer Serial No.	State or Province No.	Nat'l Board No.
Main Feedwater System	Bechtel	N/A	N/A	N/A

8. Examination Dates : From 04/04/94 to 5/18/94
9. Inspection Period Identification : First Period - 02/22/94 to 02/21/97
10. Inspection Interval Identification: Third Interval, from 02/22/94 to 02/21/04
11. Applicable Edition of Section XI 1989 Addenda none
12. Date/Revision of Inspection Plan: 3/23/94 Rev. 1
13. Abstract of examinations and test. Include a list of examinations and tests and a statement concerning status of work required for the inspection plan.

An Inservice Examination of selected Class 1, 2, and 3 components and piping systems of Florida Power and Light's Turkey Point Unit 3 was performed during the 1994 Refuel Outage. This outage began on April 4, 1994 and ended on May 18, 1994. This was the first outage of the first period of the third ten year interval.

The components and piping systems examined were selected in accordance with the Third Ten Year Inservice Inspection Program, which was prepared in accordance with the requirements of the ASME Section XI, 1989 Edition.

Manual ultrasonic, visual, magnetic particle, and liquid penetrant non-destructive techniques were used to examine components, piping, and their supports. The examinations were performed by FPL personnel, supported by examiners supplied by Ebasco Services Inc.

Eddy Current examinations on Steam Generators A, B, and C were conducted by FPL personnel from April 18 through April 25, 1994. A total of 9580 tubes were examined. Four tubes were plugged

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during this outage. See the attached NIS-BB report for the summary of examination results.

The Feedwater Nozzle piping augmented examinations were conducted during this outage on all three Steam Generators. The entire area from the nozzle ramp to a point one pipe diameter out on the far side of the elbow was examined with ultrasonics. No reportable indications were noted.

Snubber functional testing and visual examinations were conducted in accordance with Turkey Point Plant Technical Specifications. Examination and testing services were supplied by Siemens Power Corporation.

System Pressure testing was conducted by the plant to applicable Plant Technical Specifications and Procedures.

A listing of examinations performed is attached to this summary.

Approximately one-half of the scheduled examinations for the first period were performed. The remainder of the first period examinations are scheduled for the next refueling outage. This meets the requirements of Program B of Section XI.

14. Abstract of Results of Examinations and Tests.

Class 1

Reactor Pressure Vessel

The accessible RPV internals were visually examined using a remote camera. The flange to upper shell was ultrasonically examined from the flange surface. The threads in the flange and the head flange to dome weld were ultrasonically examined. The closure head mating surface was visually examined. No reportable indications were detected.



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Steam Generators

The lower head to tubesheet and the inlet and outlet nozzle inside radius sections on Steam Generator B were examined using ultrasonic techniques. No reportable indications were detected.

Eddy Current examinations were performed on the Steam Generator tubing. The results of the examinations are detailed in the NIS-BB report.

The inlet and outlet bolting on the primary side were examined visually. One damaged thread was noted on two bolts. These are acceptable per IWB-3517.

Pressurizer

The surge nozzle inner radius section was examined with ultrasonic techniques. No reportable indications were detected.

Reactor Coolant Pumps

The flywheel of Reactor Coolant Pump A was examined by Westinghouse during the pump motor refurbishment in Westinghouse facilities. The examinations met the 10 year volumetric and surface requirements of Regulatory Guide 1.14. No reportable indications were detected.

The bore and keyways of Reactor Coolant Pump B flywheel were volumetrically examined. No reportable indications were detected.

Regenerative Heat Exchanger

A VT-3 examination was performed near the beginning of the outage to look for accumulated boron crystals and a VT-2 exam during plant startup in accordance with a relief request. No reportable indications were detected.

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Reactor Coolant Piping

Reactor Coolant piping welds and supports were examined using surface, volumetric, and visual techniques. No reportable indications were detected.

Safety Injection Piping

Safety Injection piping welds and supports were examined using surface, volumetric, and visual techniques. No reportable indications were detected.

Baseline examinations were performed on a 2" valve and associated piping that was installed during this refueling outage.

Residual Heat Removal Piping

Residual Heat Removal piping welds, valve internal surfaces, valve bolting, and supports were examined using surface, volumetric, and visual techniques. No reportable indications were detected.

Chemical and Volume Control Piping

Chemical and Volume Control piping welds and supports were examined using surface, volumetric, and visual techniques. Inadequate thread engagement and a gouge in the baseplate was found on one support. These were accepted as-is by engineering evaluation. No other reportable indications were detected.

Other Class 1

During this outage, it was discovered that a number of Reactor Coolant piping branch connection welds were being examined incorrectly. The welds had been examined with Ultrasonic techniques that were designed for a "set-in" configuration. The true configuration of the welds were "set-on". This meant the Code required volumetric coverage was not attained. FPL has



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reported to the USNRC on previous Summary Report submittals that the volumetric coverage had been achieved on these welds. Review of these previous examinations shows the volumetric coverage did not meet Section XI requirements.

These welds were initially selected as part of the 25% additional sample. Since they were examined previously, they were selected for examination during the third interval.

The following welds are affected:

Turkey Point Unit 3

27.5"-RCS-1307-2	1991 Outage
29"-RCS-1305-BC3	1990 Outage
27.5"-RCS-1306-4	1987 Outage

Turkey Point Unit 4

27.5"-RCS-1407-20	1986 Outage
27.5"-RCS-1406-17	1991 Outage
27.5"-RCS-1409-16	1991 Outage
27.5"-RCS-1409-17	1991 Outage

A review of the Second Interval Examination requirements show that if these welds are not counted for credit, FPL still meets minimum requirements (Category B-J - 25% for Unit 3 and 28% for Unit 4.)

Class 2

Residual Heat Removal Piping

Residual Heat Removal piping welds and supports were examined using surface, volumetric, and visual techniques. No reportable indications were detected.

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Steam Generator Blowdown Piping

Steam Generator Blowdown piping welds and supports were examined using surface, volumetric, and visual techniques. No reportable indications were detected.

Main Feedwater Piping

Main Feedwater piping welds and supports were examined using surface, volumetric, and visual techniques. No reportable indications were detected.

Augmented examinations were performed on the piping off the Steam Generator Feedwater nozzles on all three loops. No reportable indications were detected.

15. Abstract of Corrective Measures

There were no corrective measures required due to ISI examinations. Every indication exceeding the acceptance criteria was evaluated by FPL Engineering to determine if it was acceptable for continued service. There were no failures that would preclude further service. However, as good practice, FPL choose to eliminate indications exceeding the acceptance criteria.

Residual Heat Removal piping support SR-54 was found to have two loose anchor bolt nuts. An Engineering evaluation showed there were no operability concerns or significant safety conditions. The anchor bolt nuts were tightened.

Chemical and Volume Control support SR-64 was found to have incomplete thread engagement and a gouge in the base plate. These were accepted as-is by engineering evaluation. The drawing will be updated to show the as found thread engagement.

Reactor Coolant System Pressurizer Surge piping support VS-1G-12 spring cans were found to be outside the acceptable tolerance.

~~An Engineering evaluation showed the support was not an~~ KL 8/9/94

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An Engineering evaluation showed the support was not an operability concern, however, the spring cans were reset.

Chemical Volume Control piping support PS-1 was found to have a loose bolt on the wall connection. An Engineering evaluation showed the support was operable. An attempt was made to tighten the bolting. Due to the presence of bolt shoulder, the applied torque would not result in a tight connection. This was reviewed by Engineering and found acceptable based on the welding present on the flanges and the resultant pin action of the bolt.



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We certify that a) the statements made in this report are correct, b) the examinations and tests meet the Inspection Plan as required by the ASME Code, Section XI, and c) corrective measures taken conform to the rules of the ASME Code, Section XI.

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

Date: Aug. 4, 1994 Signed: Florida Power & Light By J. P. Mottley

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, Massachusetts, have inspected the components described in this Owner's Report during the period 04/04/94 to 05/18/94, and state that to the best of my knowledge and belief, the Owner has performed examinations and tests and taken corrective measures described in the Owner's Data Report in accordance with the Inspection Plan and as required by the ASME Code, Section XI.

By signing this certificate, neither the inspector nor his employer makes any warranty, expressed or implied, concerning the examinations, tests, and corrective measures described in this Owner's 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. Blunk
Inspector's Signature

NB 8230 (N)(I)
National Board, State,
Province, and Endorsements

Date: August 5 1994



FORM NIS-BB OWNERS' DATA REPORT FOR EDDY CURRENT EXAMINATION RESULTS

As required by the provisions of the ASME CODE RULES

EDDY CURRENT EXAMINATION RESULTS

PLANT : Turkey Point Unit 3

EXAMINATION DATES: April 18, 1994 thru April 25, 1994

STEAM GENERATOR	TOTAL TUBES INSPECTED	TOTAL TUBES		TUBES PLUGGED AS PREVENTIVE MAINTENANCE	TUBES PLUGGED THIS OUTAGE	TOTAL PLUGGED TUBES IN S/G
		20% - 39%	40% - 100%			
3E210A	3198	24	1	NONE	1	17
3E210B	3199	48	1	NONE	1	16
3E210C	3183	42	NONE	2	2	33

LOCATION OF INDICATIONS
(20% - 100%)

STEAM GENERATOR	AVB BARS	SUPPORT LOCATIONS 1 THROUGH 6		FREESPAN 6H thru 6C	TOP OF TUBE SHEET TO # 1 SUPPORT		TOTAL INDICATIONS	
		COLD LEG	HOT LEG		C/L	H/L	20% - 39%	40% TO 100%
3E210A	10	5	4	9	1	2	30	1
3E210B	12	15	10	11	0	8	55	1
3E210C	42	1	3	21	1	1	69	0

Remarks:

CERTIFICATION OF RECORD

We certify that the statements in this report are correct and the tubes inspected were tested in accordance with the requirements of Section XI of the ASME Code.

Florida Power & Light Co.

DATE: <u>5/17/94</u>	PREPARED BY: <u>Alvaro Montalbano</u> S/G EDDY CURRENT COORDINATOR
DATE: <u>5/17/94</u>	REVIEWED BY: <u>Q. M. P. P. O. J. J.</u> INSPECTIONS SUPERVISOR
DATE: <u>5/19/94</u>	APPROVED BY: <u>K. R. C. a. g.</u> S/G PROGRAM MANAGER

CUMMULATIVE DISTRIBUTION SUMMARY
TURKEY POINT UNIT # 3
03/94

COMPONENT : S/G A

Page : 1 of 1
Date : 05/16/94
Time : 1000

Examination Dates : 04/17/94 thru 04/25/94

Total Number of Tubes Inspected: 3198

Total Indications

Between 20% and 39%: 30
Greater than or equal to 40%: 1

Total Tubes Plugged as Preventive Maint : 0
Total Tubes Plugged: 1

Location Of Indications 20% to 100%

Hot Leg		Cold Leg	
TSH -.5 to 01H -2.1 :	2	TSC -.5 to 01C -2.1 :	1
01H -2.0 to 06H +2.0 :	4	01C -2.0 to 06C +2.0 :	5
06H +2.1 to AV1 -3.1 :	8	06C +2.1 to AV4 -3.1 :	1
AV1 -3.0 to AV4 -3.0 :	10		

CUMULATIVE EXAMINATION REPORT

PTN-3

OUTAGE : 03/94

COMPONENT : S/G A
DESCRIPTION : 20% to 100%

Page : 1 of 1
Date : 5/16/94
Time : 1000

										03/94				N/A					
Row	Col	Leg	Req	Tst/Note	Reel	Probe	Location	Volts	Deg	Ch	%	Diff	Location	Volts	Deg	Ch	%	Diff	Location
13	3	C	TEH	TEH	SC	AC001-01	A-720-M/ULC	03C	29.5	.3	152	1	27						
13	5	C	TEH	TEH	PS	AC001-01	A-720-M/ULC	TSH	4.5	1.1	154	1	25						
14	7	C	TEH	TEH	PL	AC001-01	A-720-M/ULC	TSH	4.4	.4	159	1	21						
9	21	C	TEH	TEH		AC019-06	A-720-M/ULC	06H	2.7	1.2	159	1	20						
9	23	C	TEH	TEH		AC019-06	A-720-M/ULC	06H	2.9	1.1	158	1	21						
33	41	C	TEH	TEH		AC015-05	A-720-M/ULC	AV1	.0	1.4		P 2	24						
		C	TEH	TEH		AC015-05	A-720-M/ULC	AV3	.0	.8		P 2	20						
38	45	C	TEH	TEH	PS	AC015-05	A-720-M/ULC	AV2	.0	1.9		P 2	28						
		C	TEH	TEH	PS	AC015-05	A-720-M/ULC	AV3	.0	.9		P 2	20						
37	47	C	TEH	TEH	PS	AC016-05	A-720-M/ULC	AV3	.0	.9		P 2	24						
22	52	H	TEC	TEC	PL	AH026-06	A-720-M/ULC	04H	41.0	.8	143	CMR	37						
30	52	H	TEC	TEC	PS	AH022-05	A-720-M/ULC	AV3	.0	.7		P 2	28						
30	58	H	TEC	TEC	PL	AH007-02	A-720-M/ULC	AV1	.0	1.5		P 2	37						
		H	TEC	TEC	PL	AH007-02	A-720-M/ULC	AV2	.0	1.4		P 2	36						
		H	TEC	TEC	PL	AH007-02	A-720-M/ULC	AV3	.0	2.1		P 2	41						
		H	TEC	TEC		AH007-02	A-720-M/ULC	AV4	.0	1.2		P 2	34						
28	59	H	TEC	TEC	PS	AH007-02	A-720-M/ULC	AV2	.0	.7		P 2	26						
		H	TEC	TEC	PS	AH007-02	A-720-M/ULC	AV3	.0	.5		P 2	21						
41	59	H	TEC	TEC	SS	AH010-03	A-720-M/ULC	06H	4.9	.7	157	1	27						
38	65	C	TEH	TEH	PS	AC018-06	A-720-M/ULC	AV3	.0	.7		P 2	23						
20	68	H	TEC	TEC	PS	AH002-01	A-720-M/ULC	04H	42.4	.4	149	1	33						
19	69	H	TEC	TEC	PS	AH002-01	A-720-M/ULC	03C	40.7	.3	146	1	36						
30	71	H	TEC	TEC	PL	AH004-02	A-720-M/ULC	04C	2.9	.3	142	1	37						
37	73	H	TEC	TEC		AH008-03	A-720-M/ULC	04H	36.6	.7	152	1	30						
13	75	H	TEC	TEC	PS	AH002-01	A-720-M/ULC	04H	44.9	.3	158	1	24						
9	76	H	TEC	TEC	PL	AH020-05	A-720-M/ULC	03C	43.0	.5	150	1	32						
		H	TEC	TEC		AH020-05	A-720-M/ULC	02C	16.5	1.4	149	1	33						
34	76	H	TEC	TEC		AH009-03	A-720-M/ULC	06H	3.0	.4	153	1	29						
1	81	C	06C	06C	PC	AC011-03	A-720-M/ULC	BAC	16.1	.4	139	1	37						
9	82	H	TEC	TEC	PL	AH021-05	A-720-M/ULC	06H	2.8	1.3	145	1	32						
9	90	H	TEC	TEC		AH021-05	A-720-M/ULC	06H	2.6	1.9	161	1	20						

Number of RECORDS Selected from Current Outage : 31

Number of TUBES Selected from Current Outage : 24

CUMMULATIVE DISTRIBUTION SUMMARY
TURKEY POINT UNIT # 3
03/94

COMPONENT : S/G B

Page : 1 of 1
Date : 05/16/94
Time : 1000

Examination Dates : 04/17/94 thru 04/25/94

Total Number of Tubes Inspected 3199

Total Indications

Between 20% and 39% 55
Greater than or equal to 40% 1

Total Tubes Plugged as Preventive Maint : 0

Total Tubes Plugged 1

Location Of Indications 20% to 100%

Hot Leg		Cold Leg	
TSH -.5 to 01H -2.1 :	8	TSC -.5 to 01C -2.1 :	0
01H -2.0 to 06H +2.0 :	10	01C -2.0 to 06C +2.0 :	15
06H +2.1 to AV1 -3.1 :	7	06C +2.1 to AV4 -3.1 :	4
AV1 -3.0 to AV4 -3.0 :	12		



CUMULATIVE EXAMINATION REPORT

PTN-3

OUTAGE : 03/94

COMPONENT : S/G B

DESCRIPTION : 20% TO 100%

Page : 1 of 2

Date : 5/16/94

Time : 1000

										03/94		N/A					
Row	Col	Leg	Req	Tst/Note	Reel	Probe	Location	Volts	Deg	Ch	%	Diff	Location	Volts	Deg	Ch	%
11	3	C	TEH	TEH	SS	BC001-01	A-720-M/ULC	02C	36.1	.5	141	1	38				
10	4	C	TEH	TEH	PS	BC024-06	A-720-M/ULC	02C	31.9	.4	143	1	35				
10	5	C	TEH	TEH	PS	BC024-06	A-720-M/ULC	02C	31.8	.9	158	1	23				
10	7	C	TEH	TEH	PS	BC024-06	A-720-M/ULC	02C	31.7	1.0	153	1	27				
5	8	C	TEH	TEH	PS	BC024-06	A-720-M/ULC	04H	15.1	2.3	149	1	30				
8	8	C	TEH	TEH	PL	BH031-07	A-720-M/ULC	01H	.7	2.3	101	CMR	44				
11	9	C	TEH	TEH	PS	BC001-01	A-720-M/ULC	02C	36.7	.3	149	1	33				
23	9	C	TEH	TEH	PC	BC005-02	A-720-M/ULC	06H	3.7	1.5	150	1	32				
		C	TEH	TEH	PC	BC005-02	A-720-M/ULC	05C	31.2	.7	151	1	31				
		C	TEH	TEH	PC	BC005-02	A-720-M/ULC	05C	18.8	.3	143	1	37				
11	10	C	TEH	TEH	PS	BC001-01	A-720-M/ULC	02C	36.8	.5	147	1	34				
23	10	C	TEH	TEH	PC	BC005-02	A-720-M/ULC	06H	4.2	1.5	151	1	31				
11	11	C	TEH	TEH	PC	BC001-01	A-720-M/ULC	02C	36.7	.6	154	1	28				
18	12	C	TEH	TEH	PS	BC001-01	A-720-M/ULC	05H	20.0	.4	149	1	33				
29	12	C	TEH	TEH	PS	BC005-02	A-720-M/ULC	AV1	.0	.3		P 2	21				
20	13	C	TEH	TEH	PL	BC001-01	A-720-M/ULC	04H	15.6	.2	155	1	28				
36	19	C	TEH	TEH	PS	BC006-02	A-720-M/ULC	AV2	.0	.3		P 2	27				
26	20	C	TEH	TEH	PS	BC005-02	A-720-M/ULC	AV4	.0	.6		P 2	23				
33	21	C	TEH	TEH		BC006-02	A-720-M/ULC	06H	5.2	1.2	156	1	27				
37	21	C	TEH	TEH		BC006-02	A-720-M/ULC	06H	5.7	2.0	162	1	23				
40	25	C	TEH	TEH	PL	BC013-04	A-720-M/ULC	05C	39.2	.6	154	1	28				
40	27	C	TEH	TEH		BC013-04	A-720-M/ULC	AV2	.0	.3		P 2	20				
28	28	C	TEH	TEH		BC011-03	A-720-M/ULC	03C	34.1	1.1	141	1	38				
34	31	C	TEH	TEH	PL	BC013-04	A-720-M/ULC	AV2	.0	.5		P 2	21				
5	34	H	TEC	TEC	PS	BH021-05	A-700-M/ULC	TSH	31.5	.6	153	1	30				
6	34	H	TEC	TEC	PS	BH021-05	A-700-M/ULC	TSH	38.4	.4	146	1	37				
32	34	C	TEH	TEH	PS	BC013-04	A-720-M/ULC	AV3	.0	.9		P 2	20				
5	35	H	TEC	TEC	PS	BH021-05	A-700-M/ULC	TSH	33.5	.4	143	1	39				
14	37	H	TEC	TEC	PS	BH018-04	A-720-M/ULC	02C	46.2	.3	158	1	26				
42	37	H	TEC	TEC		BH030-07	A-720-M/ULC	TSH	.7	.7	138	CMR	37				
34	38	C	TEH	TEH	PS	BC014-04	A-720-M/ULC	AV2	.0	2.3		P 2	32				
		C	TEH	TEH	PS	BC014-04	A-720-M/ULC	AV3	.0	2.3		P 2	32				
42	38	H	TEC	TEC		BH030-07	A-720-M/ULC	TSH	1.4	1.4	155	CMR	35				
		H	TEC	TEC	PL	BH012-03	A-720-M/ULC	TSH	3.2	.5	158	1	32				
11	39	C	TEH	TEH	PS	BC003-01	A-720-M/ULC	01H	12.2	.8	155	1	28				
14	42	C	TEH	TEH	PS	BC003-01	A-720-M/ULC	03H	21.1	.3	153	1	29				
21	43	H	TEC	TEC	SS	BH019-05	A-720-M/ULC	04C	49.3	.6	150	1	31				
6	44	C	TEH	TSH	PS	BC022-06	A-720-M/ULC	TSH	39.3	1.7	148	1	35				
19	44	C	TEH	TEH	PC	BC003-01	A-720-M/ULC	02H	31.7	.9	148	1	35				
34	46	C	TEH	TEH	PS	BC015-05	A-720-M/ULC	AV2	-.3	1.0		P 2	24				
		C	TEH	TEH	PS	BC015-05	A-720-M/ULC	AV3	-.6	1.9		P 2	31				
14	48	C	TEH	TEH		BC028-07	A-720-M/ULC	05C	2.0	.8	147	CMR	34				
45	49	H	TEC	TEC		BH011-03	A-720-M/ULC	AV4	.0	.4		P 2	25				



CUMULATIVE EXAMINATION REPORT

PTN-3

OUTAGE : 03/94

COMPONENT : S/G B
 DESCRIPTION : 20% TO 100%

Page : 2 of 2
 Date : 5/16/94
 Time : 1000

										03/94				N/A							
		Extent																			
Row	Col	Leg	Req	Tst/Note	Reel	Probe	Location		Volts	Deg	Ch	%	Diff	Location	Volts	Deg	Ch	%			
17	50	C	TEH	TEH	PS	BC004-02	A-720-M/ULC	03H	25.0	.4	157	1	26								
34	51	C	TEH	TEH	PS	BC016-05	A-720-M/ULC	AV2	.4	1.5		P 2	25								
34	53	C	TEH	TEH	PS	BC017-05	A-720-M/ULC	AV1	-.1	.4		P 2	22								
		C	TEH	TEH	PS	BC017-05	A-720-M/ULC	AV2	-.4	.8		P 2	24								
		C	TEH	TEH	PS	BC017-05	A-720-M/ULC	AV3	-.5	.4		P 2	22								
42	55	H	TEC	TEC		BH011-03	A-720-M/ULC	AV3	.0	1.3		P 2	31								
38	64	C	TEH	TEH	PS	BC018-05	A-720-M/ULC	03C	17.1	.3	146	1	35								
27	70	H	TEC	TEC	PS	BH006-02	A-720-M/ULC	06H	4.8	.4	143	1	38								
34	74	H	TEC	TEC	PC	BH010-03	A-720-M/ULC	06C	5.6	.9	159	1	24								
34	75	H	TEC	TEC	PC	BH010-03	A-720-M/ULC	06c	5.6	.6	148	1	35								
11	78	H	TEC	TEC	PS	BH003-01	A-720-M/ULC	01H	11.1	.4	150	1	33								
11	89	H	TEC	TEC	PC	BH005-02	A-720-M/ULC	02H	36.7	.5	148	1	36								
7	92	H	TEC	TEC	SS	BH025-06	A-700-M/ULC	TSH	.7	.8	151	1	32								
----	----	----	----	-----	-----	-----	-----	-----	-----	----	----	----	----	-----	-----	-----	----	-----			

Number of RECORDS Selected from Current Outage : 56

Number of TUBES Selected from Current Outage : 49

CUMMULATIVE DISTRIBUTION SUMMARY
TURKEY POINT UNIT # 3
03/94

COMPONENT : S/G C

Page : 1 of 1
Date : 05/16/94
Time : 1000

Examination Dates : 04/17/94 thru 04/25/94

Total Number of Tubes Inspected: 3183

Total Indications

Between 20% and 39%: 69
Greater than or equal to 40% ...: 0

Total Tubes Plugged as Preventive Maint : 2
Total Tubes Plugged: 2

Location Of Indications 20% to 100%

Hot Leg		Cold Leg	
TSH -.5 to 01H -2.1 :	1	TSC -.5 to 01C -2.1 :	1
01H -2.0 to 06H +2.0 :	3	01C -2.0 to 06C +2.0 :	1
06H +2.1 to AV1 -3.1 :	7	06C +2.1 to AV4 -3.1 :	14
AV1 -3.0 to AV4 -3.0 :	42		

CUMULATIVE EXAMINATION REPORT

PTN-3

OUTAGE : 03/94

COMPONENT : S/G C

DESCRIPTION : 20% TO 100%

Page : 1 of 2

Date : 5/16/94

Time : 1000

										03/94				N/A				
Row	Col	Leg	Req	Tst/Note	Reel	Probe	Location		Volts	Deg	Ch	%	Diff	Location	Volts	Deg	Ch	%
3	10	H	06C	06C	PS	CH017-04	A-680-SF/RM	02H 35.0	.9	141	1	38						
31	15	C	TEH	TEH	SC	CC008-03	A-720-M/ULC	AV1 .0	.3		P 2	21						
30	17	C	TEH	TEH	SC	CC007-02	A-720-M/ULC	AV1 .0	.3		P 2	21						
30	18	C	TEH	TEH		CC007-02	A-720-M/ULC	AV1 .0	.5		P 2	23						
33	24	C	TEH	TEH		CC015-04	A-720-M/ULC	AV4 .0	.4		P 2	22						
37	26	C	TEH	TEH		CC015-04	A-720-M/ULC	AV4 .0	.5		P 2	23						
37	28	C	TEH	TEH	PL	CC015-04	A-720-M/ULC	AV4 .0	.8		P 2	27						
27	30	C	TEH	TEH	PC	CC013-03	A-720-M/ULC	AV3 8.0	2.0	153	1	30						
30	30	C	TEH	TEH	PL	CC013-03	A-720-M/ULC	AV4 .0	.6		P 2	21						
39	30	C	TEH	TEH		CC016-04	A-720-M/ULC	AV2 18.7	1.1	156	1	27						
30	31	C	TEH	TEH		CC013-03	A-720-M/ULC	AV3 .0	.8		P 2	25						
33	31	C	TEH	TEH		CC016-04	A-720-M/ULC	AV3 .0	.6		P 2	24						
34	31	C	TEH	TEH		CC016-04	A-720-M/ULC	AV2 .0	.6		P 2	25						
		C	TEH	TEH		CC016-04	A-720-M/ULC	AV3 .0	.4		P 2	21						
33	32	C	TEH	TEH		CC016-04	A-720-M/ULC	AV2 .0	.6		P 2	24						
		C	TEH	TEH		CC016-04	A-720-M/ULC	AV3 .0	.4		P 2	20						
4	33	H	TEC	TEC	PS	CH018-04	A-720-M/ULC	TSC 28.3	.5	157	1	24						
43	33	H	TEC	TEC		CH013-04	A-720-M/ULC	AV3 .0	.6		P 2	20						
35	35	C	TEH	TEH		CC017-04	A-720-M/ULC	AV3 .0	.6		P 2	23						
35	36	C	TEH	TEH		CC017-04	A-720-M/ULC	AV2 .0	.5		P 2	21						
		C	TEH	TEH		CC017-04	A-720-M/ULC	AV3 .0	.7		P 2	25						
34	41	C	TEH	TEH		CC017-04	A-720-M/ULC	AV1 .0	1.0		P 2	27						
		C	TEH	TEH		CC017-04	A-720-M/ULC	AV3 .0	.7		P 2	23						
		C	TEH	TEH		CC017-04	A-720-M/ULC	AV4 .0	1.0		P 2	27						
33	43	C	TEH	TEH	PS	CC017-04	A-720-M/ULC	AV2 .0	.6		P 2	22						
		C	TEH	TEH	PS	CC017-04	A-720-M/ULC	AV3 .0	.6		P 2	22						
35	43	C	TEH	TEH		CC017-04	A-720-M/ULC	AV1 .0	.5		P 2	20						
		C	TEH	TEH		CC017-04	A-720-M/ULC	AV2 .0	1.0		P 2	28						
		C	TEH	TEH		CC017-04	A-720-M/ULC	AV3 .0	1.2		P 2	30						
		C	TEH	TEH		CC017-04	A-720-M/ULC	AV4 .0	.9		P 2	27						
13	44	C	TEH	TEH	PS	CC004-01	A-720-M/ULC	02H 51.1	.8	154	1	29						
34	44	C	TEH	TEH	PS	CC018-05	A-720-M/ULC	AV3 .0	.5		P 2	22						
35	44	C	TEH	TSH	PS	CC018-05	A-720-M/ULC	AV2 .0	1.5		P 2	34						
		C	TEH	TEH	PL	CC024-06	A-720-M/ULC	AV2 .0	1.8		P 2	34						
		C	TEH	TEH	PL	CC024-06	A-720-M/ULC	AV3 .0	2.0		P 2	34						
		C	TEH	TSH	PS	CC018-05	A-720-M/ULC	AV3 .0	1.5		P 2	34						
		C	TEH	TEH		CC024-06	A-720-M/ULC	AV4 .0	.8		P 2	27						
		C	TEH	TSH	PS	CC018-05	A-720-M/ULC	AV4 .0	.7		P 2	25						
23	45	H	TEC	TEC		CH025-06	A-720-M/ULC	AV3 .3	.7		P 2	21						
35	45	H	TEH	TEC		CH029-07	A-720-M/ULC	AV1 .0	.5		P 2	23						
		C	TEH	TEH	PS	CC018-05	A-720-M/ULC	AV2 .0	1.8		P 2	36						
		H	TEH	TEC		CH029-07	A-720-M/ULC	AV3 .0	.7		P 2	25						
		C	TEH	TEH	PS	CC018-05	A-720-M/ULC	AV3 .0	.5		P 2	23						

CUMULATIVE EXAMINATION REPORT

PTN-3

OUTAGE : 03/94

COMPONENT : S/G C

DESCRIPTION : 20% TO 100%

Page : 2 of 2

Date : 5/16/94

Time : 1000

										03/94				N/A			
Row	Col	Leg	Req	Tst/Note	Reel	Probe	Location	Volts	Deg	Ch	%	Diff	Location	Volts	Deg	Ch	%
		C	TEH	TEH	PS	CC018-05	A-720-M/ULC	AV4	.0	.4	P 2	21					
		H	TEH	TEH		CH029-07	A-720-M/ULC	AV4	.0	.5	P 2	23					
4	46	C	TEH	TSH		CC024-06	A-720-M/ULC	TSH	28.6	.9	162	1	21				
30	46	H	TEC	TEC		CH025-06	A-720-M/ULC	AV1	.1	2.7	P 2	38					
		H	TEC	TEC		CH025-06	A-720-M/ULC	AV2	.1	2.6	P 2	37					
		H	TEC	TEC		CH025-06	A-720-M/ULC	AV3	.2	1.2	P 2	26					
		H	TEC	TEC		CH028-07	A-720-M/ULC	AV3	.0	1.5	P 2	29					
30	48	H	TEC	TEC		CH026-06	A-720-M/ULC	AV2	.0	1.2	P 2	26					
		H	TEC	TEC		CH026-06	A-720-M/ULC	AV3	.1	2.2	P 2	34					
35	49	C	TEH	TEH	SC	CC018-05	A-720-M/ULC	AV4	.0	.6	P 2	23					
35	52	C	TEH	TEH	PS	CC019-05	A-720-M/ULC	AV3	.0	.4	P 2	24					
43	53	H	TEC	TEC	PS	CH012-03	A-720-M/ULC	06C	3.5	.4	140	1	38				
39	54	C	TEH	TEH	PS	CC019-05	A-720-M/ULC	AV3	.0	.4	P 2	24					
26	58	H	TEC	TEC	PS	CH009-03	A-720-M/ULC	AV2	.2	.6	P 2	25					
30	61	H	TEC	TEC		CH009-03	A-720-M/ULC	AV2	.0	.8	P 2	26					
25	62	H	TEC	TEC		CH009-03	A-720-M/ULC	AV2	.0	.4	P 2	24					
		H	TEC	TEC		CH009-03	A-720-M/ULC	AV3	.0	.4	P 2	24					
24	63	H	TEC	TEC	PS	CH010-03	A-720-M/ULC	AV2	.0	.4	P 2	24					
		H	TEC	TEC	PS	CH010-03	A-720-M/ULC	AV3	.0	.5	P 2	25					
38	65	C	TEH	TEH		CC020-05	A-720-M/ULC	AV2	.0	.8	P 2	27					
		C	TEH	TEH		CC020-05	A-720-M/ULC	AV3	.0	.6	P 2	23					
		C	TEH	TEH	PS	CC020-05	A-720-M/ULC	AV4	.0	1.0	P 2	29					
28	66	H	TEC	TEC		CH010-03	A-720-M/ULC	06C	3.5	.6	151	1	28				
38	71	H	TEC	TEC		CH010-03	A-720-M/ULC	AV3	.0	.8	P 2	26					
1	76	C	06C	06C	PC	CC012-03	A-720-M/ULC	02C	4.7	1.6	149	1	37				
13	84	H	TEC	TEC		CH006-02	A-720-M/ULC	04H	40.7	.6	154	1	27				

Number of RECORDS Selected from Current Outage : 69

Number of TUBES Selected from Current Outage : 42



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 May 26, 1993
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 WO# 93013576 PWO# 6900
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 Chemical and Volume Control 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)
Cylinder Block	Union Pump	N/A	N/A	3P201C	N/A	Replaced	No
Cylinder Block	Union Pump	MC25741	N/A	3P201C	N/A	Replacement	No

7. Description of Work Replaced Cylinder Block on Charging Pump 3P201C.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Other ☐
Pressure 2325 psi Test Temp. 109 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

93-001-3

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 6/2, 19 93
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 26, 1993 to May 22, 1993, 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 Engineering Assoc.
NB 8230 (N) (I)
National Board, State, Province, and Endorsements

Date June 4 19 93

93-001-3



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
Name
P.O. BOX 029100, MIAMI, FL 33102
Address

Date June 22, 1993

Sheet 1 of 1

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

Unit 3

WO# 93014239 PWO# 7018

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)
Heat Exchanger	EFCO	N/A	N/A	3E207B	N/A	Replaced	No

7. Description of Work Replaced Water Box Boll.

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

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

93-002-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Replaced bolting, 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 MON Date 6/23, 1993
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 17, 1993 to June 22, 1993, 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 Engineering Assoc.
NB 8230 (N) (I)
National Board, State, Province, and Endorsements

Date June 23 1993

93-002-3

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 JULY 14, 1993

Sheet 1 of 1

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

Unit 3

WO# 92035392 PWO# 9056
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 SPEPT FUEL POOL COOLING 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)
VALVE BONNET 2"	GRINNELL	N/A	N/A	3-798B	N/A	REPLACEMENT	NO

7. Description of Work REPLACED VALVE BONNET ON VALVE 3-798B

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

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.

93-003-3

FORM NIS-2 (Back)

9. Remarks OPEN ENDED SYSTEM NO PRESSURE TEST
Applicable Manufacturer's Data Reports to be attached
PERFORMED. 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. MGR Date 7/28, 1993
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 _____ to _____, 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 30 1993

93-003-3

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 5, 1993

Sheet 1 of 1

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

Unit 3

PWO: 9388/63 W093026553 01

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)
PRESSURIZER MANWAY BOLTING	Westinghouse	N/A	N/A	3T200	EST. 1965	Replacement	No

7. Description of Work Replaced 16 studs on pressurizer manway.

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.

~~91-052-3~~ 93-006-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 SM Franzone, Acting Maint. Mgr Date 10/5 19 93
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 Sept 30, 1993 to Oct. 5, 1993, 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 Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsements

Date 10/6/93 19 93

BB 10/11/93
BB 10/5/93

93-006-3

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 Oct. 18, 1993

Sheet 1 of 1

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

Unit 3

PWO: 1277 WO#92032416

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 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)
Expansion Joint	Garlock Inc.	N/A	N/A	XJ-3-1406	N/A	Replacement	No

7. Description of Work Replaced expansion joint on 3A ICW Pump.

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

Pressure 22 psi Test Temp. 88.9 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.

93-007-3



FORM NIS-2 (Back)

9. Remarks Mechanical connection, no welding required.

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 Supt Service Supt Date 10/20, 19 93
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 26, 1993 to October 18, 1993, 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 Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date Oct 20 19 93

93-007-3

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 Oct. 18, 1993

Sheet 1 of 1

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

Unit 3

PWO: 1416 W0#92032422

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 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)
Check Valve	Mission Vlv.	N/A	N/A	3-50-311	N/A	Replacement	No

7. Description of Work Replaced discharge check valve on 3A ICW Pump.

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

Pressure 22 psi Test Temp. 88.9 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.

93-008-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 10/90, 1992
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 26, 1993 to October 18, 1993, 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 Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsements

Date Oct 20 1993

93-008-3



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 Oct. 19, 1993

Sheet 1 of 1

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

Unit 3

PWO: 8565 WO#93023312

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 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)
Pump 3P9A	Johnson	N/A	N/A	3P9A IST-8	N/A	Replaced	No
Pump 3P9A	Johnson	N/A	N/A	3P9A IST-5	N/A	Replacement	No

7. Description of Work Replaced, 3A ICW Pump IST-8 with IST-5.

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

Pressure 22 psi Test Temp. 88.9 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.

93-009-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 10/30, 19 93
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 26, 1993 to October 19, 1993, 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 Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsements

Date Oct 20 19 93

93-000-3 009 3/21/94

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 Dec. 6, 1993

Sheet 1 of 1

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

Unit 3

PWO: 9439 WO#93026676
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 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)
3A CCW HX	Engineering and Fabricating	N/A	N/A	3E207A	N/A	Replacement	No
3B CCW HX	Engineering and Fabricating	N/A	N/A	3E207B	N/A	Replacement	No
3C CCW HX	Engineering and Fabricating	N/A	N/A	3E207C	N/A	Replacement	No

7. Description of Work Replaced 3A, 3B and 3C CCW Hx Inlet door bolts and nuts.

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

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.

93-010-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 12/9, 19 93
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 Oct. 1, 1993 to Dec. 6, 1993, 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 Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date Dec 9 19 93

93-010-3

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 Jan. 7, 1994

Sheet 1 of 1

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

Unit 3

PWO: 2632 WO#9203268 WA#920326072127

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

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., 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 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)
Valve	Powell	1793S	N/A	3-50-346	Unk.	Replaced	No
Valve	Crane	125S	N/A	3-50-346	Unk.	Replacement	No

7. Description of Work Replaced drain valve to basket strainer due to packing glands studs corroded beyond use.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Other ☐
 Pressure 17.8 psi Test Temp. 88.6 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.

94-001-3

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FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 1/10, 1994
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 8, 1992 to January 7, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date Jan. 11 1994

94-001-3

BNS



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 31, 1994

Sheet 1 of 1

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

Unit 3

PWO: 2438 WO#94004773

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

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., 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 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 1989, Edition, No 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)
Lateral Support	Basic Engineers	N/A	N/A	J	Unk.	Replacement	No

7. Description of Work Installed new hanger per PCM-94-002 Lateral Restraint for Unit 3 ICW Line
to CCW Heat Exchangers.

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

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.

94-002-3



FORM NIS-2 (Back)

9. Remarks All welding was performed per WPS-11 Welding Procedure Specification.

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 MGR. Date 3/31 19 94
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. 28, 1994 to March 31, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 3/31 19 94

94-002-3



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 March 22, 1994

Sheet 1 of 1

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

Unit 3

PWO: 8631 WO#93023581

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 Aux. Feedwater System Stm Supply to AFW Pp's 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 Vlv	Rockwell	N/A	N/A	3-10-085	N/A	Replacement	No

7. Description of Work Replaced B AFW Pumps Steam Supply Check Valves Studs and Nuts.

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

94-003-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 4/8, 19 94
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 30, 1993 to March 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 the inspection.

[Signature] Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
Inspector's Signature National Board, State, Province, and Endorsements
Date 4/8 19 94

14-003-3



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 Date March 31, 1994
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 PW0: 6638 WO#93011783
Repair Organization P.O. No., Job No. etc.
3. Work Performed by FLORIDA POWER & LIGHT Type Code Symbol Stamp N/A
Name
9700 SW 344 ST., FLORIDA CITY, FL 33034
Address Authorization No. N/A
Expiration Date N/A
4. Identification of System Intake Cooling Water 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)
Valve	Powell	N/A	N/A	3-50-326	Unk.	Replaced	No
Valve	Crane	125S	N/A	3-50-326	Unk.	Replacement	No

7. Description of Work: Replaced drain valve to basket strainer due to packing leak & rusted bolting.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Other ☐
Pressure 7.5 psi Test Temp. 74 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.

94-004-3

FORM NIS-2 (Back)

9. Remarks Mechanical connection, no welding required.

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 Mat Safford* Date 3/31 19 94
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 24, 1993 to March 31, 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 the inspection.

James H. Glen
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 3/31 19 94

94-004-3



ENTERED
4-19-94

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 15, 1994

Sheet 1 of 1

2. Plant TURKEY POINT

Name

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

Address

Unit 3

PWO: 4112 WO#92051389

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

3. Work Performed by FLORIDA POWER & LIGHT

Name

9700 SW 344 ST., 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 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 1989, Edition, No 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)
Spring Can	Bergen Paterson	N/A	N/A	3-ACH-69	Unk.	Replacement	No

7. Description of Work Replaced Bergen Paterson Size 13 VSIF Variable Support with Bergen Paterson

3100-F-12 Variable Support.

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

Pressure _____ psi Test Temp. 86 Degree's F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 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.

94-006-3



FORM NIS-2 (Back)

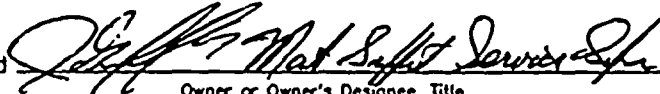
9. Remarks All welding was performed per WPS-11 Welding Procedure Specification.Applicable Manufacturer's Data Reports to be attached

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 4/15 19 94

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 14, 1993 to April 15, 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 the inspection.



Inspector's Signature

Commissions

Factory Mutual Eng. Assoc.
8230 (N) (I)

National Board, State, Province, and Endorsements

Date 4/15 19 9494-006-3

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
Name
P.O. BOX 029100, MIAMI, FL 33102
Address

Date April 16, 1994

Sheet 1 of 1

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

Unit 3

PWO: 9114 WO#93023800
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., 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 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 1989, Edition, No 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)
Relief Vlv	Dresser	TH18076	N/A	RV-3-1426	Unk.	Replaced	Yes
Relief Vlv	Dresser	TJ66822	N/A	RV-3-1426	92	Replacement	Yes

7. Description of Work Replaced Relief Valve RV-3-1426.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒
 Pressure 64 psi Test Temp. 92 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.

94-007-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical Connection no welding required.

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 4/18, 19 94
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 Sept. 16, 1993 to April 17, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 4/19, 19 94

94-007-3



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 Date April 16, 1994
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: 9115 WO#93023801
Repair Organization P.O. No., Job No. etc.
3. Work Performed by FLORIDA POWER & LIGHT Type Code Symbol Stamp N/A
Name
9700 SW 344 ST., FLORIDA CITY, FL 33034
Address
Authorization No. N/A
Expiration Date N/A
4. Identification of System Component Cooling Water 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 1989, Edition, No 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)
Relief Vlv	Dresser	TH18075	N/A	RV-3-1427	Unk.	Replaced	Yes
Relief Vlv	Dresser	TJ66823	N/A	RV-3-1427	92	Replacement	Yes

7. Description of Work Replaced Relief Valve RV-3-1427.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒
Pressure 64 psi Test Temp. 92 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)

Page 2 of 2

9. Remarks Mechanical Connection no welding required.

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 11/18 19 94
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 Sept. 16, 1993 to April 17, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsements

Date 4/19 19 94

94-008-3



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 Date May 2, 1994
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 WO#93027678 CWO 501143
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 Intake Cooling Water 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 1989, Edition, No 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)
1 1/8" Stud (20)	N/A	N/A	N/A	R94-0393	Unk.	Replacement	No
1 1/8" Nuts (40)	N/A	N/A	N/A	R94-0393	Unk.	Replacement	No
1 1/4" Bolt (1)	N/A	N/A	N/A	R94-0060	Unk.	Replacement	No
1 1/4" Stud (21)	N/A	N/A	N/A	R94-0060	Unk.	Replacement	No
1 1/4" Nuts (42)	N/A	N/A	N/A	R94-0831	Unk.	Replacement	No

7. Description of Work 1 1/8" studs, nuts used for replacement of insulation kit assembly on ICW Pump 3C (3P9C) Discharge Check Vlv. 1 1/4" bolt, studs & nuts used for ICW Train "C", B Header piping flange joints.

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

94-009-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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

Donald MithLEAD
CONSTRUCTION
SUPERVISORDate 5-11-94

, 19

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 31, 1994 to May 2, 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 the inspection.

James B. [Signature]
Inspector's Signature

Commissions

Factory Mutual Eng. Assoc.
8230 (N) (I)

National Board, State, Province, and Endorsement

Date 5/11 19 94

94-009-3



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 April 28, 1994

Sheet 1 of 1

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

Unit 3

WO#94008453 CR94-297

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 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 1989, Edition, No 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	41194	N/A	3-50-321	Unk.	Replaced	No
Check Valve	TRW	W6730	N/A	3-50-321	Unk.	Replacement	No

7. Description of Work Replaced 3B ICW Pumps discharge check valve due to broken torsion spring per CR94-297.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Other ☐
Pressure 23.8 psi Test Temp. 83.4 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 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.

94-010-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 Donald D. Miller Date 4/28 19 94
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 18, 1994 to April 28, 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 the inspection.

Bennie H. [Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 4/28 19 94

94-010-3



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
Name
P.O. BOX 029100, MIAMI, FL 33102
Address

Date April 21, 1994

Sheet 1 of 1

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

Unit 3

PWO: 2324 WO#92052020

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

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., 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 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 1989, Edition, No 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)
Restraint	Bergen Paterson	N/A	N/A	3-CCH-11	Unk.	Replacement	No

7. Description of Work Replaced U-Bolt, 10 inch diameter pipe, long tangent with 4 nuts.

Bergen Paterson: 6502

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

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.

94-011-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical Connection no welding required.

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 *Mark S. Smith* Date 4/22 19 94
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 Oct. 14, 1992 to April 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 the inspection.

Sumit D. Bhattacharya
Inspector's Signature

Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsement

Date 4/22 19 94

94-011-3

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 33102
Address

Date April 22, 1994

Sheet 1 of 1

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

Unit 3
WO#92050595
Repair Organization P.O. No., Job No. etc.

3. Work Performed by Becthel 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 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 1989, Edition, No 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)
Pipe Saddle	Bergen Paterson	N/A	N/A	3-ARH-124	Unk.	Replacement	No

7. Description of Work Support 3-ARH-124 modified per PC/M No. 92-182. Bergen Paterson part # 6606.

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

94-012-3



FORM NIS-2 (Back)

9. Remarks Welding performed in accordance with approved plant 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 J. Marchese Date 2/22 19 94
Owner or Owner's Designee, Title
SITE CONSTRUCTION SERVICE'S MANAGER

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 1, 1993 to April 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 the inspection.

James J. Blum
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 4/22 19 94

94-012-3



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 Date April 22, 1994
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 WO#94008120
Repair Organization P.O. No., Job No. etc.

3. Work Performed by Becthel 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 Component Cooling Water 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 1989, Edition, No 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)
Pipe Support	N/A	N/A	N/A	SR-299	Unk.	Repaired	No

7. Description of Work Support SR-299 restored to original design condition by adding the 1/4" fillet weld to the bottom of the four lugs as indicated on FPL DWG 5613-H-603 sht 4.

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

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 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.

94-013-3



FORM NIS-2 (Back)

9. Remarks Welding performed in accordance with approved plant 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/ACertificate of Authorization No. N/A Expiration Date N/ASigned Joseph Marchese

Owner or Owner's Designee, Title

SITE CONSTRUCTION SERVICES MANAGERDate 4/2219 9394* ORIGINAL DATE WAS MISTAKENLY DATED 1993 DM 7/29/94

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 9, 1994to April 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 the inspection.

James A. Blue
 Inspector's Signature

Commissions

Factory Mutual Eng. Assoc.

8230 (N) (I)

National Board, State, Province, and Endorsements

Date 4/22 19 94

94-013-3

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
Name
P.O. BOX 029100, MIAMI, FL 33102
Address

Date April 22, 1994

Sheet 1 of 1

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

Unit 3

WO#92055296

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

3. Work Performed by BECHTEL ma 4/25/94
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 Charging and Volume Control 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 1989, Edition, No 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)
Pipe Clamp	Bergen Paterson	N/A	N/A	423-A	Unk.	Replacement	No

7. Description of Work Support 423-A support for snubber 3-1075 pipe clamp replaced. Bergen Paterson part number 6202. Work performed per PC/M 93-202.

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

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 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.

94-014-3

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 Donald Dhillon Proj Const. Spvr Date 4-25-94 19 94
 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 9, 1994 to April 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 the inspection.

Bennie H. Blum
 Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
 8230 (N) (I)
 National Board, State, Province, and Endorsements

Date 4/25 19 94

94-014-3



11/11/11

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 April 25, 1994
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 WO#92054888
Repair Organization P.O. No., Job No. etc.
3. Work Performed by FLORIDA POWER & LIGHT Type Code Symbol Stamp N/A
Name Authorization No. N/A
9700 SW 344 ST., FLORIDA CITY, FL 33034 Expiration Date N/A
Address
4. Identification of System Component Cooling Water 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 1989, Edition, No 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 Support	N/A	N/A	N/A	3-SR-345	Unk.	Repaired	No

7. Description of Work Replaced welded eye rod #4 and threaded rod #7 of DWG 5613-H-612 sht 8.
Also replaced existing welded eye shear bolt with a longer bolt IAW NCR 92-0242.
Reset load setting on spring can support to spec. load described in NCR 92-0242.

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

94-015-3



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 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 Donald Smith Proj. Const. Spec Date 4-25 . 19 94
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 Sept. 28, 1993 to April 25, 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 the inspection.

Bruce S. Allen
Inspector's Signature

Commissions

Factory Mutual Eng. Assoc.
 8230 (N) (I)

National Board, State, Province, and Endorsements

Date 4/25 19 94

94-015-3



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 Date April 25, 1994
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
BECHTEL PLD 4/25/94
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 High Head 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 1989, Edition, No 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	Velan	N/A	N/A	3-957	Unk.	Replacement	No

7. Description of Work Installed Velan Bolted Bonnet Gate Valve 2" per PC/M 93-051.

8. Tests Conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐
 Pressure 2500 psi Test Temp. 87.7 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.

94-016-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Welding performed in accordance with approved 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 Donald D. Miller Date 4-25 19 94
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 Nov. 8, 1993 to April 25, 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 the inspection.

James H. Blum
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 4/25 19 94

94-016-3



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 33102
Address

Date April 26, 1994Sheet 1 of 1

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

Unit 3WO#94009776Repair 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/A

4. Identification of System Component Cooling Water 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 1989, Edition, No 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 Vlv's Flanged Piping	N/A	N/A	N/A	CV-3-2906	Unk.	Repaired	No

7. Description of Work Performed butt weld to align the centerlines of the upstream and downstream flange faces into parrallel alignment. Hydro test not required due to pressure boundary not breached.

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

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 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.

94-017-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Welding performed in accordance with approved 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 4-26-94 ~~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. Smith Date 4/27 19 94
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, 1994 to April 26, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 4/27 19 94

94-017-3



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 26, 1994

Sheet 1 of 1

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

Unit 3

PWO 2631 W0#91058360
Repair Organization P.O. No., Job No. etc.

3. Work Performed by Florida Power & Light
Name
9700 SW 344 STREET 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 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 1989, Edition, No 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	Rockwell Edwards	N/A	N/A	CV-3-2906	Unk.	Replacement	No

7. Description of Work Valve body flange bolting (nuts and bolts) replaced.

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

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 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.

94-018-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 Matiff Serrano Sfr Date 4/28 19 94
 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 24, 1992 to April 27, 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 the inspection.

James A. Blum
 Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
 8230 (N) (I)
 National Board, State, Province, and Endorsements

Date 5/2 19 94

94-018-3

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
Name
P.O. BOX 029100, MIAMI, FL 33102
Address

Date April 28, 1994

Sheet 1 of 1

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

Unit 3
PWO 63/0068 W0#92036130 NCR92-0071
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 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 1989, Edition, No 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)
Spring Can Support	N/A	N/A	N/A	800177-H-331-02	Unk.	Repaired	No

7. Description of Work Installed new shim plate IAW NCR 92-0071 and CR 94-328.

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

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 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.

94-019-3



FORM NIS-2 (Back)

9. Remarks Welding performed in accordance with approved 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 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/A

Signed Donald D. Smith Date 4/28/94 19 94
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, 1993 to April 28, 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 the inspection.

James F. Blum
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 4/28 19 94

94-019-3

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 April 28, 1994
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: 3168 WO#94008283 CR 94-216
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT Type Code Symbol Stamp N/A
Name
9700 SW 344 ST., FLORIDA CITY, FL 33034
Address Authorization No. N/A
Expiration Date N/A

4. Identification of System Spent Fuel Cooling 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 1989, Edition, No 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)
Heat Exchanger	N/A	N/A	N/A	3E208	Unk.	Repaired	No

7. Description of Work Torqued the heat exchangers west side of the west support nut per CR 94-216.

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

94-020-3

FORM NIS-2 (Back)

9. Remarks Mechanical connection, no welding required.Applicable Manufacturer's Data Reports to be attached

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 [Signature] Date 5/2 19 94
 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 20, 1994 to April 28, 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 the inspection.

[Signature]
 Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
 National Board, State, Province, and Endorsements

Date 5/2 19 94

94-020-3



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
Name
P.O. BOX 029100, MIAMI, FL 33102
Address

Date May 2, 1994

Sheet 1 of 1

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

Unit 3

PWO 2421 W0#94004680 PC/M 93-171

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

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., 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 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 1989, Edition, No 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 Support	Bergen Paterson	N/A	N/A	3-ACH-158	1994	Replacement	No

7. Description of Work Installed new support 3-ACH-158 as shown on drawing 5613-H-622 shts 13A-13D per

PC/M 93-171.

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

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 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.

94-021-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Welding performed in accordance with approved plant 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 Mat. Diff. Sewer Lh Date 5/2 19 94
 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. 25, 1994 to May 2, 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 the inspection.

James B. Blawie
 Inspector's Signature

Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
 National Board, State, Province, and Endorsements

Date 5/2 19 94

94-021-3



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
Name
P.O. BOX 029100, MIAMI, FL 33102
Address

Date May 2, 1994

Sheet 1 of 1

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

Unit 3

WO#94009888 PC/M 94-043 CR 94-364

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 System 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 1989, Edition, No 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	24410	N/A	3-1032	1983	Repaired	Yes

7. Description of Work Transition Tube Assembly shortened to achieve "L" Dimension of 14" +/- 1/8" per PC/M 94-043.

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

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.

94-022-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Welding performed in accordance with approved plant 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 Russell Mulp, Constr. Supv Date 5-5 19 94
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 25, 1994 to May 2, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/5 19 94

94-022-3

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 May 3, 1994
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 WO#94010314 CR94-378
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 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 1989, Edition, No 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)
Spring Can	Bergen Paterson	065013	N/A	VS-1G-12	Unk.	Repaired	No

7. Description of Work Reset Spring Can and stamped Hot and Cold settings. Hot setting set at 2 5/16".
Cold setting set at 1 3/4".

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

94-023-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 5/4/94 19 94
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 30, 1994 to May 3, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/4 19 94

94-023-3

FORM NIS-2 OWNERS REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Florida Power & Light
Name

Date 05/04/94

P. O. Box 029100, Miami, Fl. 33102
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 3
PWO #:0545/63 WO #: 92033420

9700 SW 344 Street, Florida City, Fl. 33034
Address

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

3. Work Performed by FLORIDA POWER & LIGHT
Name

Type Code Symbol Stamp N/A

Authorization No. N/A

9700 SW 344 ST. FLORIDA CITY, FLA. 33034
Address

Expiration Date N/A

4. Identification of System: ICW System #: 19 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 1989 Edition, NO Addenda, N/A Code Case

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board	Other Identification	Year Built	Repaired Replaced or Replacement	ASME Code Stamp Yes/No
BUTTERFLY VALVE	PRATT	809615-2	N/A	3-50-344	UNK.	Replaced	No
BUTTERFLY VALVE	PRATT	7-6999579-3	N/A	3-50-344	UNK.	Replacement	No

7. Description of Work: VALVE BEING REPLACED DUE TO SEAT LEAKAGE.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X

Other _____ Pressure 17.8 psig Test Temperature 88 °F



FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

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.

Type Code Symbol Stamp _____ N/A _____

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

Signed [Signature] MAINT MGR. Date 5-12 19 94
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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 07/16/92 to 05/04/94 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owners Report in accordance with the requirements of the 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 Owner's 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) (1)
Inspector's Signature National Board, State, Providence, and Endorsements

Date 5/12 19 94

94-024-3

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 May 16, 1994

Sheet 1 of 1

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

Unit 3

PW0:1143 W0#92033253

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

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., 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 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989, Edition, No 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)
Studs 1 3/8" (8)	N/A	N/A	N/A	MOV-3-869 R93-4143	Unk.	Replacement	No
Nuts 1 3/8" (16)	N/A	N/A	N/A	MOV-3-869 R93-4143	Unk.	Replacement	No

7. Description of Work Replaced MOV-3-869's body to bonnet bolting.

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

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 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.

94-025-3



FORM NIS-2 (Back)

9. Remarks Mechanical connection, no welding required.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/AExpiration Date N/A

Signed



Owner or Owner's Designee, Title

Date 5/16, 19 94

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 Nov. 29, 1993 to May 16, 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 the inspection.



Inspector's Signature

Commissions

Factory Mutual Eng. Assoc.
8230 (N) (I)

National Board, State, Province, and Endorsements

Date 5/16 19 9494-025-3

1312



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 May 10, 1994

Sheet 1 of 1

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

Unit 3

PWO: 9580 WO#93027112

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

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., 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 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 1989, Edition, No 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)
Heat Exchanger Bolting	Engineering & Fabricating	N/A	N/A	3E207B	Unk.	Replacement	No

7. Description of Work Replaced heat exchanger inlet flange bolting. (Nuts and Studs)

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

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.

94-026-3



FORM NIS-2 (Back)

9. Remarks Mechanical connection, no welding required.

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

Owner or Owner's Designee. Title

Date 5/10, 1997

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 October 6, 1993
to May 10, 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 the inspection.

Inspector's Signature

Commissions

Factory Mutual Eng. Assoc.
8230 (N) (I)

National Board, State, Province, and Endorsement

Date 3/11 1994

94-026-3



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 33102
Address

Date May 10, 1994

Sheet 1 of 1

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

Unit 3

PW0:8932 WO#93024543
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., FLORIDA CITY, FL 33034
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Main Steam System 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 1989, Edition, No 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)
Studs 1 3/8" (12)	N/A	N/A	N/A	RV-3-1405 R93-4143	Unk.	Replacement	No
Nuts 1 3/8" (24)	N/A	N/A	N/A	RV-3-1405 R93-4143	Unk.	Replacement	No

7. Description of Work Replaced RV-3-1405's body to bonnet bolting.

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

94-027-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 5/15 19 94
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, 1993 to May 10, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/15 19 94

94-027-3



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 May 10, 1994

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

PW0:3656 W0#92054930

Address

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

3. Work Performed by FLORIDA POWER & LIGHT

Type Code Symbol Stamp N/A

Name
9700 SW 344 ST., FLORIDA CITY, FL 33034

Authorization No. N/A

Address

Expiration Date N/A

4. Identification of System Main Steam 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 1989, Edition, No 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)
Studs 1 3/8" (12)	N/A	N/A	N/A	RV-3-1413 R93-4143	Unk.	Replacement	No
Nuts 1 3/8" (24)	N/A	N/A	N/A	RV-3-1413 R93-4143	Unk.	Replacement	No

7. Description of Work Replaced RV-3-1413's body to bonnet bolting.

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

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.

94-028-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 5/15, 19 94
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, 1993 to May 10, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/15 19 94

94-028-3



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 May 10, 1994

Sheet 1 of 1

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

Unit 3
PW0:8931 W0#93024542
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., FLORIDA CITY, FL 33034
Address

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

4. Identification of System Main Steam 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 1989, Edition, No 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)
Studs 1 3/8" (12)	N/A	N/A	N/A	RV-3-1400 R93-4143	Unk.	Replacement	No
Nuts 1 3/8" (24)	N/A	N/A	N/A	RV-3-1400 R93-4143	Unk.	Replacement	No

7. Description of Work Replaced RV-3-1400's body to bonnet bolting.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐
 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" X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet numbered and the number of sheets is recorded at the top of this form.

94-029-3

FORM NIS-2 (Back)

9. Remarks Mechanical connection, no welding required.

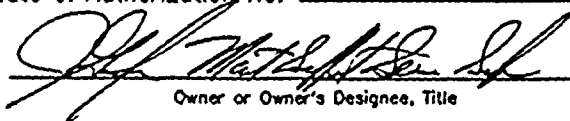
Applicable Manufacturer's Data Reports to be attached

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/AExpiration Date N/A

Signed



Owner or Owner's Designee, Title

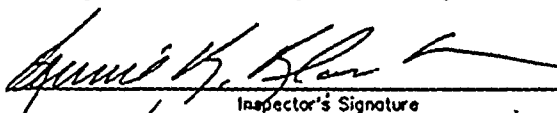
Date 5/15 19 94

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, 1993 to May 10, 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 the inspection.



Inspector's Signature

Commissions

Factory Mutual Eng. Assoc.
8230 (N) (I)

National Board, State, Province, and Endorsements

Date 5/15 19 94

94-029-3

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
Name
P.O. BOX 029100, MIAMI, FL 33102
Address

Date May 10, 1994

Sheet 1 of 1

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

Unit 3

PWO:3655 WO#92054931

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

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., FLORIDA CITY, FL 33034
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Main Steam System 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 1989, Edition, No 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)
Studs 1 3/8" (12)	N/A	N/A	N/A	RV-3-1412 R93-4143	Unk.	Replacement	No
Nuts 1 3/8" (24)	N/A	N/A	N/A	RV-3-1412 R93-4143	Unk.	Replacement	No

7. Description of Work Replaced RV-3-1412's body to bonnet bolting.

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

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.

94-030-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 5/15, 19 94
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, 1993 to May 10, 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 the inspection.

[Signature]
Inspector's Signature
Date 5/15 19 94

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

94-030-3



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
Name
P.O. BOX 029100, MIAMI, FL 33102
Address

Date May 10, 1994

Sheet 1 of 1

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

Unit 3

PW0:3649 W0#92054938

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

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., FLORIDA CITY, FL 33034
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Main Steam 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 1989, Edition, No 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)
Studs 1 3/8" (12)	N/A	N/A	N/A	RV-3-1408 R93-4143	Unk.	Replacement	No
Nuts 1 3/8" (24)	N/A	N/A	N/A	RV-3-1408 R93-4143	Unk.	Replacement	No

7. Description of Work Replaced RV-3-1408's body to bonnet bolting.

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

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.

94-031-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 5/15 19 94
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, 1993 to May 10, 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 the inspection.

[Signature]
Inspector's Signature

Commissions

Factory Mutual Eng. Assoc.
8230 (N) (I)

National Board, State, Province, and Endorsements

Date 5/15 19 94

94-031-3



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 May 10, 1994

Sheet 1 of 1

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

Unit 3

PW0:3650 WO#92054939

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

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., FLORIDA CITY, FL 33034
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Main Steam 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 1989, Edition, No 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)
Studs 1 3/8" (12)	N/A	N/A	N/A	RV-3-1411 R93-4143	Unk.	Replacement	No
Nuts 1 3/8" (24)	N/A	N/A	N/A	RV-3-1411 R93-4143	Unk.	Replacement	No

7. Description of Work Replaced RV-3-1411's body to bonnet bolting.

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

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 X 11in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet numbered and the number of sheets is recorded at the top of this form.

94-032-3

FORM NIS-2 (Back)

Page 2 c

9. Remarks Mechanical connection, no welding required.

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 5/15, 19 94
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, 1993 to May 10, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/15, 19 94

94-032-3



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 May 10, 1994
 Sheet 1 of 1

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

Unit 3
PW0:3651 W0#92054937
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., FLORIDA CITY, FL 33034
Address

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

4. Identification of System Main Steam 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 1989, Edition, No 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)
Studs 1 3/8" (12)	N/A	N/A	N/A	RV-3-1406 R93-4143	Unk.	Replacement	No
Nuts 1 3/8" (24)	N/A	N/A	N/A	RV-3-1406 R93-4143	Unk.	Replacement	No

7. Description of Work Replaced RV-3-1406's body to bonnet bolting.

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

94-033-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 5/15, 19 94
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, 1993 to May 10, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/15 19 94

94-033-3

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 33102
Address

Date May 10, 1994

Sheet 1 of 1

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

Unit 3

PWO:3653 WO#92054935
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., FLORIDA CITY, FL 33034
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Main Steam System 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 1989, Edition, No 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)
Studs 1 3/8" (12)	N/A	N/A	N/A	RV-3-1407 R93-4143	Unk.	Replacement	No
Nuts 1 3/8" (24)	N/A	N/A	N/A	RV-3-1407 R93-4143	Unk.	Replacement	No

7. Description of Work Replaced RV-3-1407's body to bonnet bolting.

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

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.

94-034-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 5/15, 19 94
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, 1993 to May 10, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/15 19 94

94-034-3

BB

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 May 10, 1994
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:3652 WO#92054936
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT Type Code Symbol Stamp N/A
Name
9700 SW 344 ST., FLORIDA CITY, FL 33034
Address Authorization No: N/A
Expiration Date N/A

4. Identification of System Main Steam 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 1989, Edition, No 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)
Studs 1 3/8" (12)	N/A	N/A	N/A	RV-3-1403 R93-4143	Unk.	Replacement	No
Nuts 1 3/8" (24)	N/A	N/A	N/A	RV-3-1403 R93-4143	Unk.	Replacement	No

7. Description of Work Replaced RV-3-1403's body to bonnet bolting.

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

94-035-3

FORM NIS-2 (Back)

9. Remarks Mechanical connection, no welding required.

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 5/15, 19 94
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, 1993 to May 10, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/15 19 94

94-035-3

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 Date May 10, 1994
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 PW0:3654 WO#92054934
Repair Organization P.O. No., Job No. etc.
3. Work Performed by FLORIDA POWER & LIGHT Type Code Symbol Stamp N/A
Name Authorization No. N/A
9700 SW 344 ST., FLORIDA CITY, FL 33034 Expiration Date N/A
Address
4. Identification of System Main Steam 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 1989, Edition, No 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)
Studs 1 3/8" (12)	N/A	N/A	N/A	RV-3-1401 R93-4143	Unk.	Replacement	No
Nuts 1 3/8" (24)	N/A	N/A	N/A	RV-3-1401 R93-4143	Unk.	Replacement	No

7. Description of Work Replaced RV-3-1401's body to bonnet bolting.

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

94-036-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 5/15 19 94
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, 1993 to May 10, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsement

Date 5/15 19 94

94-036-3

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 May 10, 1994
 Sheet 1 of 1

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

Unit 3
PW0:8933 W0#93024544
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., FLORIDA CITY, FL 33034
Address

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

4. Identification of System Main Steam 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 1989, Edition, No 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)
Studs 1 3/8" (12)	N/A	N/A	N/A	RV-3-1410 R93-4143	Unk.	Replacement	No
Nuts 1 3/8" (24)	N/A	N/A	N/A	RV-3-1410 R93-4143	Unk.	Replacement	No

7. Description of Work Replaced RV-3-1410's body to bonnet bolting.

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

94-037-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 5/15, 19 94
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, 1993 to May 10, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/15 19 94

94-037-3

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 May 10, 1994

Name

P.O. BOX 029100, MIAMI, FL 33102

Address

Sheet 1 of 1

2. Plant TURKEY POINT

Unit 3

Name

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

Address

PWO:8930 W0#93018804

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

3. Work Performed by FLORIDA POWER & LIGHT

Type Code Symbol Stamp N/A

Name

9700 SW 344 ST., FLORIDA CITY, FL 33034

Address

Authorization No. N/A

Expiration Date N/A

4. Identification of System Main Steam 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 1989, Edition, No 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)
Studs 1 3/8" (12)	N/A	N/A	N/A	RV-3-1402 R93-4143	Unk.	Replacement	No
Nuts 1 3/8" (24)	N/A	N/A	N/A	RV-3-1402 R93-4143	Unk.	Replacement	No

7. Description of Work Replaced RV-3-1402's body to bonnet bolting.

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

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.

94-038-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 5/15 19 94
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, 1993 to May 10, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/15 19 94

94-038-3



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 May 15, 1994

Sheet 1 of 1

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

Unit 3

PWO 9053 WO#93024968
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., 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 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 1989, Edition, No 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)
Piston Check Vlv.	Rockwell	N/A	N/A	3-298D	Unk.	Replaced	No
Piston Check Vlv.	Rockwell	N/A	N/A	3-298D	Unk.	Replacement	No

7. Description of Work Replaced valve to perform SOER inspection.

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

Pressure 2280 psi Test Temp. >525 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.

94-039-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Welding performed IAW approved plant 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 5/10, 19 84
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 Sept. 14, 1993 to May 15, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/15 19 94

94-039-3

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 May 15, 1994

Sheet 1 of 1

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

Unit 3
PWO 8044 W0#93021329
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., 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 1989, Edition, No 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)
Relief Valve	Crosby Vlv. & Gage Co.	3RV551B 51249	N/A	RV-3-551B	Unk.	Replaced	Yes
Relief Valve	Crosby Vlv. & Gage Co.	N69877-00-0004	N/A	RV-3-551B	Unk.	Replacement	Yes

7. Description of Work Replaced relief valve with refurbished spare and valve to flange studs and nuts replaced.

8. Tests Conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐
 Pressure 2280 psi Test Temp. >525 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)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 5/15 19 94
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 4, 1993 to May 15, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/15 19 94

94-040-3



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 Date May 15, 1994
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 8040 W0#93021326
Repair Organization P.O. No., Job No. etc.
3. Work Performed by FLORIDA POWER & LIGHT Type Code Symbol Stamp N/A
Name Authorization No. N/A
9700 SW 344 ST., FLORIDA CITY, FL 33034 Expiration Date N/A
Address
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 1989, Edition, No 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)
Relief Valve	Crosby Vlv. & Gage Co.	1362 3RV551A/51249	N/A	RV-3-551A	Unk.	Replaced	Yes
Relief Valve	Crosby Vlv. & Gage Co.	1579 4RV551A/51249	N/A	RV-3-551A	Unk.	Replacement	Yes

7. Description of Work Replaced relief valve with refurbished spare.

8. Tests Conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐
 Pressure 2280 psi Test Temp. >525 Degree's F

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

94-041-1

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 5/10 19 94
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 4, 1993 to May 15, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/15 19 94

94-041-3



10



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 May 13, 1994

Sheet 1 of 1

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

Unit 3

B92691-01146 CWO 501158

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

3. Work Performed by SIEMENS POWER CORPORATION
5959 SHALLOWFORD RD. SUITE 531,
CHATTANOOGA, TN 37421
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 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 1989, Edition, No 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)
PSA-3 Snubber	Pacific Scientific	27074	N/A	3-1094	1983	Replaced	Yes
PSA-3 Snubber	Pacific Scientific	4388	N/A	3-1094	1978	Replacement	Yes

7. Description of Work Snubber replaced with overhauled spare.

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

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.

94-042-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 Donald Miller Date MAY 13 1994
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 7, 1994 to May 13, 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 the inspection.

James H. Blum
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/16 1994

94-042-3



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 May 13, 1994

Sheet 1 of 1

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

Unit 3

B92691-01146 CWO 501158

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

3. Work Performed by SIEMENS POWER CORPORATION
5959 SHALLOWFORD RD. SUITE 531,
CHATTANOOGA, TN 37421
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Mainsteam System 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 1989, Edition, No 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)
PSA-35 Load Pin	Pacific Scientific	N/A	N/A	3-1084 R94-1252	N/A	Replacement	No

7. Description of Work Snubber load pin on snubber end replaced.

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

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.

94-043-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 Donald Mith Date MAY 13 19 94
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 7, 1994 to May 13, 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 the inspection.

James D. Allen R Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
Inspector's Signature National Board, State, Province, and Endorsements
Date 5/16 19 94

94-043-3

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 & LIGHTDate May 13, 1994
P.O. BOX 029100, MIAMI, FL 33102
Name
Address
Sheet 1 of 12. Plant TURKEY POINTUnit 3
P.O. BOX 3088, FLORIDA CITY, FL 33034
Name
Address
B92691-01146 CWO 501158Repair Organization P.O. No., Job No. etc.3. Work Performed by SIEMENS POWER CORPORATIONType Code Symbol Stamp N/A
5959 SHALLOWFORD RD. SUITE 531,
CHATTANOOGA, TN 37421
Address
Authorization No. N/AExpiration Date N/A4. Identification of System Component Cooling Water SystemQuality Group C5. (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 1989, Edition, No 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)
PSA-1/4 Snubber	Pacific Scientific	29495	N/A	3-1106	1982	Replaced	Yes
PSA-1/4 Snubber	Pacific Scientific	38479	N/A	3-1106	1988	Replacement	Yes

7. Description of Work Snubber replaced with spare.8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☒

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.

94-044-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 Donald D. Smith Date MAY 13 1994
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 7, 1994 to May 13, 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 the inspection.

James H. [Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/15 1994

94-044-3

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
Name
P.O. BOX 029100, MIAMI, FL 33102
Address

Date May 15, 1994

Sheet 1 of 1

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

Unit 3

PWO 8045 W0#93021330
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., 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 1989, Edition, No 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)
Relief Valve	Crosby Vlv. & Gage Co.	1361	N/A	RV-3-551C	Unk.	Replaced	Yes
Relief Valve	Crosby Vlv. & Gage Co.	1581	N/A	RV-3-551C	Unk.	Replacement	Yes

7. Description of Work Replaced relief valve with refurbished spare and valve to flange studs and nuts replaced.

8. Tests Conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Other ☐
 Pressure 2280 psi Test Temp. >525 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.

94-045-3



FORM NIS-2 (Back)

9. Remarks Mechanical connection, no welding required.

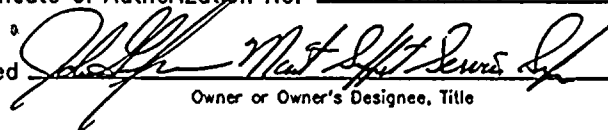
Applicable Manufacturer's Data Reports to be attached

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 5/15 19 94

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 4, 1993 to May 15, 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 the inspection.


 Inspector's Signature

Commissions

Factory Mutual Eng. Assoc.
8230 (N) (I)

National Board, State, Province, and Endorsements

Date

4/15-5/15/94
 19 94 5/15/94

94-045-3

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
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
9700 SW 344 ST., FLORIDA CITY, FL 33034
Address

Date May 15, 1994

Sheet 1 of 1

Unit 3

PWO 0898 W0#92032064
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 Feedwater System 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 1989, Edition, No 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)
Stud (1)	N/A	N/A	N/A	FCV-3-498 R86-3161	Unk.	Replacement	No

7. Description of Work Replaced one stud on FCV-3-498 body to bonnet.

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

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.

94-046-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 5/15, 19 94
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 26, 1993 to May 15, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/15 19 94

94-046-3

6/1



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 May 13, 1994

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

B92691-01146 CWO 501158

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

3. Work Performed by SIEMENS POWER CORPORATION

Type Code Symbol Stamp N/A

5959 SHALLOWFORD RD. SUITE 531,

Authorization No. N/A

CHATTANOOGA, TN 37421

Expiration Date N/A

Address

4. Identification of System Feedwater System

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 1989, Edition, No 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)
PSA-10 Snubber	Pacific Scientific	16229	N/A	3-1078	1983	Replaced	Yes
PSA-10 Snubber	Pacific Scientific	16244	N/A	3-1078	1983	Replacement	Yes
PSA-10 Snubber	Pacific Scientific	10173	N/A	3-1080	1981	Replaced	Yes
PSA-10 Snubber	Pacific Scientific	12396	N/A	3-1080	1982	Replacement	Yes

7. Description of Work Snubbers replaced with overhauled spares.

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

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.

94-041-3

047

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 Donald Smith Date 5-13, 1994
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 7, 1994 to May 13, 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 the inspection.

James P. Blunt
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/10 1994

94-047-3



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 May 16, 1994

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

WO#94005426

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

3. Work Performed by Bechtel Construction Inc.

Type Code Symbol Stamp N/A

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

Authorization No. N/A

Expiration Date N/A

4. Identification of System Steam Generator 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 1989, Edition, No 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)
Bolts 3/4" Dia. (8)	Westinghouse P/N 651B293H31	N/A	N/A	3E210B R94-1168	Unk.	Replacement	No

7. Description of Work Steam Generator Inspection Port secondary side handhole cover bolts replaced.

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

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 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.

94-048-3



FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 Donald Mitha Date 5-16 19 94
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 8, 1994 to May 16, 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 the inspection.

James A. Black
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsement

Date 5/16 19 94

94-048-3



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 Date May 18, 1994
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:7726 WO#93018421
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT Type Code Symbol Stamp N/A
Name
9700 SW 344 ST., 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 1989, Edition, No 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)
SA/A 193 Grade B6 Bolts (4)	N/A	N/A	N/A	FCV-3-113B	Unk.	Replaced	No
SA 564 Type 630 Bolts (4)	N/A	N/A	N/A	FCV-3-113B R93-3186	Unk.	Replacement	No

7. Description of Work Replaced FCV-3-113B's cover head bolts due to incident at Seabrook Station, in July 1992, where there was an occurrence of fractured cover bolts.

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

94-049-.3



FORM NIS-2 (Back)

9. Remarks Mechanical connection, no welding required.

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 Joseph Marchese for M. Wayland date 5/21 19 94
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 Sept. 13, 1993 to May 18, 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 the inspection.

Amos R. R.
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/23 19 94

94-049-3

BB

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 May 23, 1994
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 8199 WO#93014511
Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT Type Code Symbol Stamp N/A
Name
9700 SW 344 ST., FLORIDA CITY, FL 33034
Address 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 1955 Edition, N/A Addenda, N/A Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989, Edition, No 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)
Stud (1)	N/A	N/A	N/A	CV-3-2900 R86-3161	Unk.	Replacement	No

7. Description of Work Replaced one stud on CV-3-2900 body to bonnet.

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

94-050-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 Joe Marchese Date 5/24, 19 94
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 11, 1993 to May 23, 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 the inspection.

James P. Plaster
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 5/25 19 94

94-050-3

BB



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 June 28, 1994
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 2176 W0#92035620
Address Repair Organization P.O. No., Job No. etc.

3. Work Performed by FLORIDA POWER & LIGHT Type Code Symbol Stamp N/A
Name Authorization No. N/A
9700 SW 344 ST., FLORIDA CITY, FL 33034 Expiration Date N/A
Address

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 1989, Edition, No 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)
1 1/2 Gate Valve	Henry Vogt	N/A	N/A	3-20-706	Unk.	Replacement	No

7. Description of Work Replaced valve 3-20-706 due to seat leakage.

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

Pressure 2050 psi Test Temp. 79.7 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.

94-051-3

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks All welding performed in accordance with approved plant 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] MAINT-MGR. Date 7-12 19 94
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 Oct 8, 1992 to June 28, 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 the inspection.

[Signature]
Inspector's Signature

Commissions Factory Mutual Eng. Assoc. 8230 (N) (I)
National Board, State, Province, and Endorsements

Date July 12 19 94

94-049-3

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
Name
P.O. BOX 029100, MIAMI, FL 33102
Address

Date July 8, 1994

Sheet 1 of 1

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

Unit 3

PW0:4351 W0#94015647

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

3. Work Performed by FLORIDA POWER & LIGHT
Name
9700 SW 344 ST., 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 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 1989, Edition, No 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)
Bolt 3/4" (1)	N/A	N/A	N/A	3E207C R91-1220	Unk.	Replacement	No

7. Description of Work Replaced one bolt on 3C CCW Heat Exchanger inlet door.

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

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.

94-052-~~4~~3

7/14/94
 per Telecom
 Frank R. hl

FORM NIS-2 (Back)

Page 2 of 2

9. Remarks Mechanical connection, no welding required.

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 JBW MAINT. MGR. Date 7-12 . 19 94
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 21, 1994 to July 8, 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 the inspection.

Benjamin B. Ben R
Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (I)
National Board, State, Province, and Endorsements

Date 7/11 19 94

94-052-3

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 1

FOR PRESSURE VESSEL

ZONE NUMBER: 3-001		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**

3PSRV1 (REF. DWG. NO. 3-V01)

000100	3-WR-18	B-A	UT 1.5	NDE 5.12-1	C X - - - 4/11/94 - UT COMPLETE, EXAMINED ENTIRE
	FLANGE TO UPPER SHELL	B1.30	UT 6.5	NDE 5.12-1	X - - - LENGTH OF WELD FROM THE FLANGE SEAL
	CTMT		UT 11.5	NDE 5.12-1	X - - - SURFACE
					UT-14

THREADS IN FLANGE (LIGAMENTS) (REF. DWG. NO. 3-V03A)

001900	3-LIG-19 THRU 40	B-G-1	UT 0	NDE 5.12-2	C X - - - 4/11/94 - UT COMPLETE, EXAMINED FROM
	THREADS IN FLANGE	B6.40			STUD HOLES 19 THRU 40
	CTMT				
					UT-14

INTERIOR OF REACTOR VESSEL

003000	VESSEL INTERIOR	B-N-1	VT-3	NDE 4.3-39	C X - - - 4/27/94 - VT COMPLETE ON ACCESSIBLE
	ACCESSABLE AREAS	B13.10			AREAS OF VESSEL, RUST AND NORMAL WEAR
	CTMT				PATTERNS NOTED



PAGE: 2



DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 3

STEAM GENERATOR B PRIMARY SIDE

ZONE NUMBER: 3-004		ASME	H 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

(REF. DWG. NO. 3-V09B)						
040200	3-SGB-Z	B-B	UT 0	NDE 5.1-2	C - - - X	5/4/94 - UT COMPLETE, TUBESHEET
	HEAD TO TUBESHEET WELD	B2.40	UT 45	NDE 5.1-2	- - - X	GEOMETRY, ACCEPTABLE INCLUSIONS
	CTMT		UT 60	NDE 5.1-2	- - - X	
			UT 70	NDE 5.1-2	- - - X	
UT-8						
040300	3-SGB-I-IRS	B-D	UT 45	NDE 5.13-2	C X - - -	5/6/94 - UT COMPLETE, EXAM LIMITED DUE
	INLET NOZZLE INNER RADIUS	B3.140				TO SUPPORTS AND 5 WELDED PADS
	SECTION					
	CTMT					
STEAM GENERATOR MOCK-UP						
040400	3-SGB-O-IRS	B-D	UT 45	NDE 5.13-2	C X - - -	5/6/94 - UT COMPLETE, LIMITED EXAM DUE
	OUTLET NOZZLE INNER RADIUS	B3.140				TO SUPPORT AND 4 WELDED PADS
	SECTION					
	CTMT					
STEAM GENERATOR MOCK-UP						
040500	3-SGB-I BOLTING	B-G-2	VT-1	NDE 4.1-3	C - - - X	4/21/94 - VT COMPLETE, ACCEPTABLE
	INLET MANWAY BOLTING	B7.30				DAMAGED THREAD
	CTMT					
040600	3-SGB-O BOLTING	B-G-2	VT-1	NDE 4.1-4	C - - - X	4/21/94 - VT COMPLETE, ACCEPTABLE
	OUTLET MANWAY BOLTING	B7.30				DAMAGED THREAD
	CTMT					

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 4

SURIZER

ZONE NUMBER: 3-006		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)

041800	3-SRGN-01-IR	B-D	UT 30	NDE 5.13-1	C X - - - 4/22/94 - UT COMPLETE
	SURGE NOZZLE INNER RADIUS	B3.120	UT 60	NDE 5.13-1	X - - -
	SECTION				
	CTMT 58'-0"				

UT-8

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 5

REACTOR COOLANT SYSTEM LOOP B INTERMEDIATE LEG

ZONE NUMBER: 3-010		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
						CALIBRATION BLOCK

SYSTEM NO. 41, 5613-P-766-S SH. 2 OF 3 (REF. DWG. NO. 3-A04)

046200	31"-RCS-1302-5 STEAM GENERATOR NOZZLE TO ELBOW CTMT	B-F B5.70	PT UT 45	NDE 3.3-12 NDE 5.5-5	C X - - - - - X -	4/16/94 - PT COMPLETE; 4/19/94 - UT COMPLETE, ROOT AND COUNTERBORE GEOMETRY **UT-26R**
046500	31"-RCS-1302-8 ELBOW TO PIPE CTMT	B-J B9.11	PT UT 45	NDE 3.3-5 NDE 5.5-1	C X - - - - - X -	4/16/94 - PT AND UT COMPLETE, ROOT AND COUNTERBORE GEOMETRY **UT-12, UT-26R, UT-46**
046600	31"-RCS-1302-1 2" BRANCH CONNECTION CTMT	B-J B9.32	PT	NDE 3.3-7	C X - - -	4/16/94 - PT COMPLETE
046700	31"-RCS-1302-10 ELBOW TO PUMP CASING CTMT	B-J B9.11	PT UT 45	NDE 3.3-6 NDE 5.5-1	C X - - - - - X -	4/16/94 - PT AND UT COMPLETE, ROOT AND COUNTERBORE GEOMETRY **UT-26R**



DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 6

STEAM GENERATOR COOLANT SYSTEM LOOP B HOT LEG

ZONE NUMBER: 3-011		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 H R	**CALIBRATION BLOCK**
<u>SYSTEM NO. 41, 5613-P-766-S SH. 2 OF 3 (REF. DWG. NO. 3-A05)</u>						
047200	29"-RCS-1305-2 PIPE TO PIPE CTMT	B-J B9.11	PT UT 45	NDE 3.3-15 NDE 5.5-4	C X - - - - - X -	4/16/94 - PT COMPLETE; 4/19/94 - UT COMPLETE, ROOT GEOMETRY **UT-12, UT-46**
047500	29"-RCS-1305-BC3 12" BRANCH CONNECTION CTMT	B-J B9.31	PT UT 45	NDE 3.3-15 NDE 5.5	P X - - -	4/16/94 - PT COMPLETE **TO BE DETERMINED**
047600	29"-RCS-1305-3 PIPE TO ELBOW CTMT	B-J B9.11	PT UT 45	NDE 3.3-15 NDE 5.5-3	C X - - - - - X -	4/16/94 - PT COMPLETE; 4/18/94 - UT COMPLETE, ROOT AND COUNTERBORE GEOMETRY **UT-12, UT-26R, UT-46**
047700	29"-RCS-1305-4 ELBOW TO STEAM GENERATOR NOZZLE CTMT	B-F B5.70	PT UT 45	NDE 3.3-15 NDE 5.5-6	C X - - - - - X -	4/16/94 - PT COMPLETE; 4/26/94 - UT COMPLETE, INSIDE SURFACE GEOMETRY, LIMITED EXAM DUE TO GEOMETRY **UT-26R**

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 7

REACTOR COOLANT SYSTEM LOOP B COLD LEG

ZONE NUMBER: 3-012		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	REMARKS
-----		-----	-----	-----	T C G H R	**CALIBRATION BLOCK**

SYSTEM NO. 41, 5613-P-766-S SH. 2 OF 3 (REF. DWG. NO. 3-A06)

047900	27.5"-RCS-1306-11	B-J	PT	NDE 3.3-8	C X - - -	4/16/94 - PT COMPLETE, 4/19/94 - UT
	PUMP CASING TO PIPE	B9.11	UT 45	NDE 5.5-2	- - X -	COMPLETE, ROOT GEOMETRY
	CTMT					

UT-12, UT-26R, UT-46

048000	27.5"-RCS-1306-1	B-J	PT	NDE 3.3-8	C X - - -	4/16/94 - PT COMPLETE
	2" BRANCH CONNECTION	B9.32				
	CTMT					

048200	27.5"-RCS-1306-3	B-J	PT	NDE 3.3-8	C X - - -	4/16/94 - PT COMPLETE
	2" BRANCH CONNECTION	B9.32				
	CTMT					

048410	27.5"-RCS-1306-12	B-J	PT	NDE 3.3-8	C X - - -	4/16/94 - PT COMPLETE, 4/19/94 - UT
	PIPE TO PIPE	B9.11	UT 45	NDE 5.5-2	- - X -	COMPLETE, ROOT GEOMETRY
	CTMT					

UT-12, UT-46



DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 8

FOR COOLANT SYSTEM PRESSURIZER SURGE LINE

ZONE NUMBER: 3-016		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. 2 OF 3 (REF. DWG. NO. 3-A10)</u>						
051400	12"-RC-1301-1 NOZZLE TO PIPE CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-16 NDE 5.4-6 NDE 5.4-6	C X - - - - - X - - - X -	4/16/94 - PT COMPLETE; 4/18/94 - UT COMPLETE, ROOT GEOMETRY **UT-34**
051800	VS-1G-12 DUAL SPRING HANGER CTMT	F-A F1.10C	VT-3 VT-3 VT-3 CR	NDE 4.3-21 NDE 4.3-33 NDE 4.3-38 94-378	C - - - X - - - X X - - -	4/16/94 - VT COMPLETE, SPRING CAN OUT OF TOLERANCE, 4/27/94 - REEXAM AFTER LINE FILLED WITH WATER, SPRING CAN STILL OUTSIDE OF ACCEPTABLE TOLERANCES, SUPPORT IS FUNCTIONAL BY ENGINEERING EVALUATION; 5/2/94 - VT REEXAM COMPLETE AFTER CANS WERE RESET
052400	12"-RC-1301-8 PIPE TO REDUCER CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-20 NDE 5.4-10 NDE 5.4-10	C - - - X - - X - - - X -	4/20/94 - PT COMPLETE, ACCEPTABLE ROUND INDICATION; 4/23/94 - UT COMPLETE, ROOT AND COUNTERBORE GEOMETRY **UT-34**
052500	12"-RC-1301-8A REDUCER TO SAFE-END CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-21 NDE 5.11-1 NDE 5.11-1	C X - - - - - X - X - - -	4/20/94 - PT COMPLETE; 4/23/94 - UT COMPLETE, ROOT GEOMETRY **UT-30**
052600	12"-RC-1301-9 SAFE-END TO NOZZLE CTMT	B-F B5.40	PT UT 45 UT 60	NDE 3.3-22 NDE 5.11-2 NDE 5.11-2	C X - - - - - X - X - - -	4/26/94 - PT AND UT COMPLETE, INSIDE SURFACE GEOMETRY **UT-30**

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 9

FOR COOLANT SYSTEM PRESSURIZER SPRAY TO PRZ.

ZONE NUMBER: 3-020		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)

056900	4"-RC-1304-1 BRANCH CONNECTION TO PIPE CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-9 NDE 5.4-7 NDE 5.4-7	C X - - - - - X - - - X -	4/16/94 - PT COMPLETE; 4/20/94 - UT COMPLETE, ROOT GEOMETRY **UT-53**
057000	4"-RC-1304-2 PIPE TO ELBOW CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-9 NDE 5.4-8 NDE 5.4-8	C X - - - - - X - - - X -	4/16/94 - PT COMPLETE; 4/20/94 - UT COMPLETE, ROOT GEOMETRY **UT-53**
057700	4"-RC-1304-9 ELBOW TO PIPE CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-9 NDE 5.4-9 NDE 5.4-9	C X - - - - - X - - - X -	4/16/94 - PT COMPLETE; 4/20/94 - UT COMPLETE, ROOT AND COUNTERBORE GEOMETRY **UT-53**
	DETAIL C DOUBLE ACTING RESTRAINT CTMT 21'-11"	F-A F1.10B	VT-3 CR	NDE 4.3-20 94-373	C - - - X	4/17/94 - VT COMPLETE, DRAWING DISCREPENCY, AN ENGINEERING EVALUATION DETERMINED THIS WAS NOT A DRAWING DISCREPENCY
058000	4"-RC-1304-10 PIPE TO ELBOW CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-3 NDE 5.4-9 NDE 5.4-9	C X - - - - - X - - - X -	4/16/94 - PT COMPLETE; 4/20/94 - UT COMPLETE, ROOT GEOMETRY **UT-53**

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 10

WASTE DISPOSAL SYSTEM - LIQUID, RC LOOP B DRAIN

ZONE NUMBER: 3-027		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. 61, 5613-P-671-S SH. 4 OF 7 (REF. DWG. NO. 3-A23)

078500	2"-RC-1302-1 BRANCH CONNECTION TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-11	C X - - - 4/16/94 - PT COMPLETE
079000	2"-RC-1302-5 VALVE 3-515A TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-11	C X - - - 4/16/94 - PT COMPLETE

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 11

REMOVAL HEAT REMOVAL TO RC LOOP A COLD LEG

ZONE NUMBER: 3-037		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)

126300	VALVE 3-876A	B-M-2	VT-3	NDE 4.3-31	C X - - - 4/22/94 - VT COMPLETE
	VALVE INTERNAL SURFACE	B12.50			
	CTMT				
126400	VALVE 3-876A BOLTING	B-G-2	VT-1	NDE 4.1-5	C X - - - 4/28/94 - VT COMPLETE
	VALVE BOLTING	B7.70			
	CTMT				



DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 12

NEUTRAL HEAT REMOVAL TO RC LOOP B COLD LEG

ZONE NUMBER: 3-038		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-586-S SH. 1 OF 1 (REF. DWG. NO. 3-A37)

126600	10"-SI-1302-1 BRANCH CONNECTION TO ELBOW CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-19 NDE 5.4-5 NDE 5.4-5	C X - - - - - X - X - - -	4/16/94 - PT AND UT COMPLETE, ROOT GEOMETRY **UT-27**
127100	10"-SI-1302-4 VALVE 3-875B TO ELBOW CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-19 NDE 5.4-4 NDE 5.4-4	C X - - - - - X - - - X -	4/16/94 - PT COMPLETE, 4/18/94 - UT COMPLETE, ROOT GEOMETRY **UT-27**
127300	10"-SI-1302-5 ELBOW TO PIPE CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-19 NDE 5.4-4 NDE 5.4-4	C X - - - - - X - - - X -	4/16/94 - PT COMPLETE, 4/18/94 - UT COMPLETE, ROOT AND COUNTERBORE GEOMETRY **UT-27**



DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 13

VALVE HEAT REMOVAL TO RC LOOP C COLD LEG

ZONE NUMBER: 3-039		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-587-S SH. 1 OF 2 (REF. DWG. NO. 3-A38)

130000	VALVE 3-876E	B-M-2	VT-3	NDE 4.3-32	A X - - - 4/22/94 - VT COMPLETE, ACCEPTABLE
	VALVE INTERNAL SURFACE	B12.50			INDENTATIONS ON VALVE INTERNAL SURFACE
	CTMT				



DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 14

HEAD SAFETY INJECTION LOOP B INSIDE CTMT

ZONE NUMBER: 3-041		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)

143100	HGR#4 SINGLE ACTING RESTRAINT CTMT	F-A F1.10A	VT-3	NDE 4.3-24	C X - - -	4/17/94 - VT COMPLETE
143400	2"-SI-1302-22 PIPE TO ELBOW CTMT	B-J B9.40	PT	NDE 3.3-17	C X - - -	4/16/94 - PT COMPLETE
143900	2"-SI-1302-26 PIPE TO ELBOW CTMT	B-J B9.40	PT	NDE 3.3-17	C X - - -	4/16/94 - PT COMPLETE
144100	2"-SI-1302-28 PIPE TO BRANCH CONNECTION CTMT	B-J B9.40	PT	NDE 3.3-17	C X - - -	4/16/94 - PT COMPLETE



DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 15

HEAD SAFETY INJECTION LOOP A INSIDE CTMT

ZONE NUMBER: 3-043		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

<u>SYSTEM NO. 62, 5613-P-764-S SH. 2 OF 2 (REF. DWG. NO. 3-A42)</u>						
149200	2"-SI-1304-9 PIPE TO VALVE 3-957 CTMT	B-J B9.40	PT	IR 94-0376	B X - - -	4/23/94 - PT COMPLETE, BASELINE EXAMINATION, PC/M 93-051
149220	2"-SI-1304-10 VALVE 3-957 TO PIPE CTMT	B-J B9.40	PT	IR 94-0376	B X - - -	4/23/94 - PT COMPLETE, BASELINE EXAMINATION, PC/M 93-051
149230	2"-SI-1304-11 PIPE TO ELBOW CTMT	B-J B9.40	PT	IR 94-0376	B X - - -	4/23/94 - PT COMPLETE, BASELINE EXAMINATION, PC/M 93-051
149240	2"-SI-1304-12 ELBOW TO PIPE CTMT	B-J B9.40	PT	IR 94-0299	B X - - -	4/15/94 - PT COMPLETE, BASELINE EXAMINATION, PC/M 93-051
149250	2"-SI-1304-13 PIPE TO TEE CTMT	B-J B9.40	PT PT	IR 94-0376 IR 94-0358	B X - - - X - - -	4/21/94 - PT COMPLETE, BASELINE EXAMINATION, PC/M 93-051

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 16

HEAD SAFETY INJECTION LOOP B INSIDE CTMT

ZONE NUMBER: 3-044		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 H R	**CALIBRATION BLOCK**	

SYSTEM NO. 62, 5613-P-764-S SH. 1 OF 2 (REF. DWG. NO. 3-A43)

157000	8080-H-009-07 SINGLE AND DOUBLE ACTING RESTRAINT CTMT 23'-9"	F-A F1.10AB	VT-3	NDE 4.3-25	C X - - -	4/16/94 - VT COMPLETE
157700	2"-SI-1306-26 ELBOW TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-14	C X - - -	4/16/94 - PT COMPLETE
158400	8080-H-009-05 DOUBLE ACTING RESTRAINT CTMT 25'-9"	F-A F1.10B	VT-3	NDE 4.3-26	C X - - -	4/16/94 - VT COMPLETE
158500	2"-SI-1306-31 PIPE TO VALVE 3-874B CTMT	B-J B9.40	PT	NDE 3.3-13	C X - - -	4/16/94 - PT COMPLETE
158900	2"-SI-1306-34 ELBOW TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-13	C X - - -	4/16/94 - PT COMPLETE

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 17

MECHANICAL & VOLUME CONTROL TO RC LOOP C HOT LEG

ZONE NUMBER: 3-045		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. 1 OF 4 (REF. DWG. NO. 3-A44)

161900	3-VCH-115 DOUBLE ACTING RESTRAINT CTMT	F-A F1.10B	VT-3	NDE 4.3-27	C X - - -	4/16/94 - VT COMPLETE
162000	3-VCH-115 1A INTEGRAL ATTACHMENT CTMT	B-K B10.20	PT	NDE 3.3-18	C X - - -	4/16/94 - PT COMPLETE
162200	SR-64 SPRING HANGER CTMT	F-A F1.10C	VT-3 CR	NDE 4.3-19 94-374	C - - - X	4/17/94 - INCOMPLETE THREAD ENGAGEMENT, GOUGE IN FLOOR PLATE, ACCEPTED AS-IS BY ENGINEERING EVALUATION, DRAWING WILL BE UPDATED TO SHOW THREAD ENGAGEMENT

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 18

HYDRAULIC & VOLUME CONTROL TO RC LOOP A COLD LEG

ZONE NUMBER: 3-046		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**

SYSTEM NO. 41 & 47, 5613-P-661-S SH. 3 OF 4 (REF. DWG. NO. 3-A45)

168700	3-VCH-120 SINGLE ACTING RESTRAINT CTMT	F-A F1.10A	VT-3	NDE 4.3-28	C X - - -	4/16/94 - VT COMPLETE
169400	PS-1 DOUBLE ACTING RESTRAINT CTMT	F-A F1.10B	VT-3 CR CWO	NDE 4.3-22 94-379 501137	C - - - X	4/16/94 - VT COMPLETE, LOOSE BOLT, SUPPORT IS OPERABLE BY ENGINEERING EVALUATION, BOLT WAS TIGHTENED AS FAR AS POSSIBLE, AN ENGINEERING REVIEW OF THE BOLTING FOUND IT TO BE ACCEPTABLE DUE TO THE OTHER WELDS ON THE SUPPORT AND RESULTANT PIN ACTION

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 19

HYDRAULIC & VOLUME CONTROL FROM RC LOOP B COLD LEG

ZONE NUMBER: 3-048		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. 47, 5613-P-653-S SH. 1 OF 1 (REF. DWG. NO. 3-A47)

174200	2"-CH-1301-1 BRANCH CONNECTION TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-10	C X - - -	4/16/94 - PT COMPLETE
174300	2"-CH-1301-2 PIPE TO ELBOW CTMT	B-J B9.40	PT	NDE 3.3-10	C X - - -	4/16/94 - PT COMPLETE
174400	2"-CH-1301-3 ELBOW TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-10	C X - - -	4/16/94 - PT COMPLETE
174500	2"-CH-1301-4 PIPE TO ELBOW CTMT	B-J B9.40	PT	NDE 3.3-10	C X - - -	4/16/94 - TP COMPLETE
174600	2"-CH-1301-5 ELBOW TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-10	C X - - -	4/16/94 - PT COMPLETE
174700	2"-CH-1301-6 PIPE TO VALVE 3-309D CTMT	B-J B9.40	PT	NDE 3.3-10	C X - - -	4/16/94 - PT COMPLETE
174900	2"-CH-1301-7 VALVE 3-309D TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-10	C X - - -	4/16/94 - PT COMPLETE



DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 20

MECHANICAL & VOLUME CONTROL SEAL INJECTION LOOP B

ZONE NUMBER: 3-052		ASME	N I O			
		SEC. XI	S O N G T			
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H		REMARKS
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	
-----		-----	-----	-----	T C G H R	**CALIBRATION BLOCK**

SYSTEM NO. 47, 5613-P-645-S SH. 2 OF 2 (REF. DWG. NO. 3-A51)

185840	1.5"-CH-1303-4 PIPE TO RC PUMP CTMT	B-J B9.40	PT	NDE 3.3-4	C X - - -	4/11/94 - PT COMPLETE
185880	1.5"-CH-1303-3 FLANGE TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-2	C X - - -	4/11/94 - PT COMPLETE
185900	1.5"-CH-1303-FB1 FLANGE BOLTING CTMT	B-G-2 B7.50	VT-1	NDE 4.1-1	C X - - -	4/11/94 - VT COMPLETE
186200	2"-CH-1305-1 ELBOW TO REDUCER CTMT	B-J B9.40	PT	NDE 3.3-4	C X - - -	4/11/94 - PT COMPLETE
186300	2"-CH-1305-2 PIPE TO ELBOW CTMT	B-J B9.40	PT	NDE 3.3-4	C X - - -	4/11/94 - PT COMPLETE
186400	H-4 DOUBLE ACTING RESTRAINT CTMT	F-A F1.10B	VT-3	NDE 4.3-15	C X - - -	4/11/94 - VT COMPLETE
186500	2"-CH-1305-3 ELBOW TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-4	C X - - -	4/11/94 - PT COMPLETE
186600	2"-CH-1305-4 PIPE TO ELBOW CTMT	B-J B9.40	PT	NDE 3.3-4	C X - - -	4/11/94 - PT COMPLETE



DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 21

CRITICAL & VOLUME CONTROL SEAL INJECTION LOOP B

ZONE NUMBER: 3-052		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. 47, 5613-P-645-S SH. 2 OF 2 (REF. DWG. NO. 3-A51)

187000	2"-CH-1305-FB2	B-G-2	VT-1	NDE 4.1-2	C X - - - 4/16/94 - VT COMPLETE
	FLANGE BOLTING	B7.50			
	CTHT				

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 22

MOTOR COOLANT PUMP A

ZONE NUMBER: 3-056		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-V13A)

201600	3-RCP-A-FLYWHEEL	RG 1.14	PT	80165-2	C - - - X	11/30/93 - FLYWHEEL EXAMINED IN
	FLYWHEEL		UT	348A30	X - - -	ACCORDANCE WITH REG GUIDE 1.14, UT OF
	CTMT					BORE AND KEYWAYS, PT OF KEYWAYS,
						INDICATIONS FROM TORN METAL, EXAMS
						PERFORMED BY WESTINGHOUSE DURING MOTOR
						REFURBISHMENT, MOTOR NO. 2S-76P499
						REPLACES 1S-86P763
						FLYWHEEL

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 23

FOR COOLANT PUMP B

ZONE NUMBER: 3-057		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-V13B)

202700	3-RCP-B-FLYWHEEL	RG 1.14	UT 10	NDE 5.15-1	C X - - - 4/25/94 - UT COMPLETE
	FLYWHEEL				
	CTMT				

FLYWHEEL

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPB STATUS COMPONENTS

PAGE: 24

GENERATIVE HEAT EXCHANGER

ZONE NUMBER: 3-059		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**	

(REF. DWG. NO. 3-V11)

209200	RGX 3E200	---	VT-2	NDE 4.2-1	C X - - -	4/20/94 - VT-3 COMPLETE; 5/15/94 - VT-2
	VISUALS FOR LEAKAGE	---	VT-3	NDE 4.3-29	X - - -	COMPLETE, EXAMINATION PERFORMED BY PLANT
	CTMT					PERSONNEL



DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 2 CAEPB STATUS COMPONENTS

PAGE: 25

HEAT REMOVAL SYSTEM INSIDE CONTAINMENT

ZONE NUMBER: 3-085		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-586-S SH. 1 OF 1 (REF. DWG. NO. 3-B23)

262000	SR-54	F-A	VT-3	NDE 4.3-18	C - - - X	4/16/94 - VT COMPLETE, LOOSE NUTS ON
	DOUBLE ACTING RESTRAINT	F1.208	VT-3	NDE 4.3-36	X - - -	FLOOR PLATE, CHIPPED GROUTING, ACCEPTED
			CR	94-372		AS-IS BY ENGINEERING EVALUATION; 4/28/94
			PWO	94009437		- VT RE-EXAM COMPLETE AFTER NUTS WERE
			CWO	501137		TIGHTENED



DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 2 CAEPB STATUS COMPONENTS

PAGE: 26

NUCLEAR HEAT REMOVAL SYSTEM INSIDE CONTAINMENT

ZONE NUMBER: 3-089		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. 50, 5613-P-587-S SH. 1 OF 2 (REF. DWG. NO. 3-B27)

268000	8"-SI-2309-20 PIPE TO ELBOW	C-F-1 C5.11	PT UT 45 UT 60	NDE 3.3-1 NDE 5.4-1 NDE 5.4-1	C X - - - - - X - - - X -	4/9/94 - PT COMPLETE, 4/11/94 - UT COMPLETE, ROOT GEOMETRY **UT-41**
268100	8"-SI-2309-21 ELBOW TO PIPE	C-F-1 C5.11	PT UT 45 UT 60	NDE 3.3-1 NDE 5.4-1 NDE 5.4-1	C X - - - - - X - - - X -	4/9/94 - PT COMPLETE, FAINT INDICATION AT TOE OF WELD, CONSIDERED NON-RELEVANT, 4/11/94 - UT COMPLETE, ROOT GEOMETRY **UT-41**
268200	8"-SI-2309-22 PIPE TO TEE	C-F-1 C5.11	PT UT 45 UT 60	NDE 3.3-1 NDE 5.4-3 NDE 5.4-3	C X - - - - - X - - - X -	4/9/94 - PT COMPLETE, SURFACE DEPRESSION, CONSIDERED NON-RELEVANT, 4/11/94 - UT COMPLETE, ROOT AND COUNTERBORE GEOMETRY **UT-41**
268300	8"-SI-2309-23 TEE TO ELBOW	C-F-1 C5.11	PT UT 45 UT 60	NDE 3.3-1 NDE 5.4-3 NDE 5.4-3	C X - - - - - X - - - X -	4/9/94 - PT COMPLETE, 4/11/94 - UT COMPLETE, ROOT GEOMETRY **UT-41**
268400	8"-SI-2309-24 PIPE TO VALVE 3-876E	C-F-1 C5.11	PT UT 45 UT 60	NDE 3.3-1 NDE 5.4-2 NDE 5.4-2	C X - - - X - - - X - - -	4/9/94 - PT COMPLETE, 4/11/94 - UT COMPLETE **UT-41**



DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 2 CAEPB STATUS COMPONENTS

PAGE: 27

STEAM GENERATOR A BLOWDOWN INSIDE CONTAINMENT

ZONE NUMBER: 3-103	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. 71, 5613-P-795-S SH. 2 OF 3 (REF. DWG. NO. 3-B72)

313500	6"-BDA-2301-1 REDUCER TO VALVE SGB-3-001 CTMT 32'-6"	C-F-2 C5.51	MT UT	NDE 2.2-1 NDE 5.2-1	C X - - - - - X -	4/9/94 - MT AND UT COMPLETE, ROOT GEOMETRY
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UT-22

313900	78101B-H-320-09 DOUBLE ACTING RESTRAINT CTMT 32'-6"	F-A F1.20B	VT-3	NDE 4.3-17	C X - - -	4/9/94 - VT COMPLETE
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313950	78101B-H-320-09 1A INTEGRAL ATTACHMENTS CTMT 32'-6"	C-C C3.20	MT	NDE 2.2-1	C X - - -	4/9/94 - MT COMPLETE
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314200	6"-BDA-2301-5 REDUCER TO VALVE SGB-3-002 CTMT 32'-6"	C-F-2 C5.51	MT UT	NDE 2.2-1 NDE 5.2-1	C X - - - - - X -	4/9/94 - MT AND UT COMPLETE, ROOT GEOMETRY
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UT-22

314300	6"-BDA-2301-6 VALVE SGB-3-002 TO ELBOW CTMT 32'-6"	C-F-2 C5.51	MT UT	NDE 2.2-1 NDE 5.2-1	C X - - - - - X -	4/9/94 - MT AND UT COMPLETE, ROOT GEOMETRY
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UT-22

314700	6"-BDA-2301-8 PIPE TO TEE CTMT 31'-0"	C-F-2 C5.51	MT UT	NDE 2.2-1 NDE 5.2-1	C X - - - - - X -	4/9/94 - MT AND UT COMPLETE, ROOT GEOMETRY
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UT-22

SYSTEM NO. 71, 5613-P-795-S SH. 1 OF 3 (REF. DWG. NO. 3-B72)

316300	6"-BDA-2301-18 PIPE TO ELBOW CTMT 25'-8"	C-F-2 C5.51	MT UT 45 UT 60	NDE 2.2-5 NDE 5.2-2 NDE 5.2-2	C X - - - - - X - - - X -	4/21/94 - MT COMPLETE; 4/23/94 - UT COMPLETE, ROOT AND COUNTERBORE GEOMETRY
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UT-22

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 2 CAEPB STATUS COMPONENTS

PAGE: 28

STEAM GENERATOR C BLOWDOWN INSIDE CONTAINMENT

ZONE NUMBER: 3-105		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. 71, 5613-P-797-S SH. 1 OF 3 (REF. DWG. NO. 3-B76)

322800	78101B-H-322-02	F-A	VT-3	NDE 4.3-30	C X - - - 4/19/94 - VT COMPLETE
	DOUBLE ACTING RESTRAINT	F1.20B			
	CTMT 24'9"				

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 2 CAEPB STATUS COMPONENTS

PAGE: 29

FEEDWATER SYSTEM LOOP A

ZONE NUMBER: 3-109		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
						CALIBRATION BLOCK

SYSTEM NO. 74, 5613-P-651-S SH. 1 OF 1 (REF. DWG. NO. 3-B66)

330300	14"-FWA-2301-21B NOZZLE EXTENSION TO NOZZLE EXTENSION	C-F-2 C5.51	MT	NDE 2.2-2 NDE 5.2	P X - - -	4/8/94 - MT COMPLETE, EXAMINED AS PART OF AUGMENTED PROGRAM
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UT-29

330400	14"-FWA-2301-FW2 NOZZLE EXTENSION TO NOZZLE	C-F-2 C5.51	MT	NDE 2.2-3 NDE 5.2	P - - - -	4/8/94 - MT COMPLETE, EXAMINED AS PART OF AUGMENTED PROGRAM
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UT-29

330500	AUGMENTED EXAMINATION FROM NOZZLE RAMP TO 1 DIAMETER ON ELBOW	AUG	UT 45 UT 60	NDE 5.16-1 NDE 5.16-1	C - - X - - - X -	4/9/94 - UT COMPLETE, ROOT AND CHILL RING GEOMETRY
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UT-20, UT-29

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 2 CAEPB STATUS COMPONENTS

PAGE: 30

FEEDWATER SYSTEM LOOP B

ZONE NUMBER: 3-110		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. 74, 5613-P-652-S SH. 1 OF 1 (REF. DWG. NO. 3-B67)

333800	AUGMENTED EXAMINATION	AUG	UT 45	NDE 5.16-2	C - - X - 4/9/94 - UT COMPLETE, ROOT, CHILL RING,
	FROM NOZZLE RAMP TO 1 DIAMETER		UT 60	NDE 5.16-2	- - X - AND COUNTERBORE GEOMETRY
	ON ELBOW				

UT-20, UT-29

DATE: 08/04/94
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 3
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 2 CAEPB STATUS COMPONENTS

PAGE: 31

FEEDWATER SYSTEM LOOP C

ZONE NUMBER: 3-111		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**	

SYSTEM NO. 74, 5613-P-178-S SH. 1 OF 1 (REF. DWG. NO. 3-B68)

338200	AUGMENTED EXAMINATION	AUG	UT 45	NDE 5.16-3	C - - X - 4/9/94 - UT COMPLETE, INSIDE SURFACE,
	FROM NOZZLE RAMP TO 1 DIAMETER		UT 60	NDE 5.16-3	- - X - ROOT, AND CHILL RING GEOMETRY
	ON ELBOW				

UT-20, UT-29

