

TURKEY POINT PLANT
UNIT 4

1994 REFUELING OUTAGE INSERVICE INSPECTION REPORT

Executive Summary

Approximately one-third of the scheduled examinations for the first period were performed during the Turkey Point Unit 4 outage. The remainder of the first period examinations are scheduled for the next refueling outage.

100% of the A, B, and C steam generator tubes were eddy current tested. No tubes were plugged during this outage.

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 4 submittal and during the 1994 refueling/maintenance outage.

Visual examination and functional testing of snubbers was completed in accordance with ASME Section XI and Technical Specifications. Visual examinations did not reveal any failures. There were no snubber failures in the functional test sample.

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 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 and the Turkey Point Units 3 and 4 ISI Program. Selected class 2 piping was examined with volumetric examination techniques in accordance with Section XI of the ASME Boiler and Pressure Vessel Code and the Turkey Point Units 3 and 4 ISI Program.

TURKEY POINT UNIT 4
1994 REFUELING OUTAGE

Form NIS-1 Owners' Data Report for Inservice Inspections

FORM NIS-1 OWNERS' DATA REPORT FOR INSERVICE INSPECTIONS

Page 1 of 8

1. Owner: Florida Power & Light Company, 700 Universe Blvd.,
Juno Beach, Florida 33408
2. Plant: Florida Power & Light Company, Turkey Point
Nuclear Power Plant, P.O. Box 4332, Princeton,
Florida 33032
3. Plant Unit: 4
4. Owner Certificate of Authorization (if required) N/A
5. Commercial Service Date : September 7, 1973
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 4PSRV1	N/A	N-161
Steam Generator A	Westinghouse	16A-6341-1 FSGT-2991 4E210A	N/A	N-772
Steam Generator B	Westinghouse	16A-6341-2 FSGT-2992 4E210B	N/A	N-773
Steam Generator C	Westinghouse	16A-6341-3 FSGT-2993 4E210C	N/A	N-774
Reactor Coolant Pump A	Westinghouse	4P200A 5-618J713	N/A	N/A
Reactor Coolant Pump C	Westinghouse	4P200C 4-618J713	N/A	N/A
Regenerative Heat Exchanger	Westinghouse	4E200	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



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Component or Appurtenance	Manufacturer or Installer	Manufacturer or Installer Serial No.	State or Province No.	Nat'l Board No.
Residual Heat Removal	Bechtel	N/A	N/A	N/A
Steam Generator Blowdown System	Bechtel	N/A	N/A	N/A
Main Steam System	Bechtel	N/A	N/A	N/A
Main Feedwater System	Bechtel	N/A	N/A	N/A

8. Examination Dates : From 10/3/94 to 11/14/94
9. Inspection Period Identification : First Period - 04/15/94 to 04/14/97
10. Inspection Interval Identification: Third Interval, from 04/15/94 to 04/14/04
11. Applicable Edition of Section XI 1989 Addenda none
12. Date/Rev. of Inspection Plan: July 26, 1994, Rev. 1 Chg. 5
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 and 2 components and piping systems of Florida Power and Light's Turkey Point Unit 4 was performed during the 1994 Refueling Outage. This outage began on October 3, 1994 and ended on November 14, 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.



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

Eddy Current examinations on Steam Generators A, B, and C were conducted by FPL personnel from October 14, 1994 through October 17, 1994. A total of 9609 tubes were examined. No tubes were plugged during this outage. See the attached NIS-BB report for the summary of examination results. The examinations were performed by FPL personnel, supported by examiners supplied by ABB-Combustion Engineering, NDE Technology, and Ztec Inc.

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 Nuclear Power Services, Inc.

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

A listing of Class 1 and 2 examinations performed is attached to this summary.

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14. Abstract of Results of Examinations and Tests.

Class 1

Reactor Pressure Vessel

The accessible RPV internals were visually examined to the extent practical using a remote camera. The flange to upper shell was ultrasonically examined from the flange surface (the remaining required examinations will be conducted during the 10 year Reactor Vessel examination.) 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.

Steam Generators

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

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

The inlet and outlet bolting on the primary side were examined visually. No reportable indications were detected.

Reactor Coolant Pumps

The bore and keyways of Reactor Coolant Pump A and C flywheels were volumetrically examined. No reportable indications were detected.

Regenerative Heat Exchanger

A VT-3 examination was performed near the beginning of the outage

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to look for accumulated boron crystals and evidence of leakage. A VT-2 examinations was performed during the system pressure test during startup. These examinations were performed in accordance with Relief Request no. 3. No reportable indications were detected.

Reactor Coolant Piping

Reactor Coolant piping welds and supports were examined using surface, volumetric, and visual techniques. 11 acceptable linear indications and 3 acceptable round indications were found with penetrant 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 the associated piping welds that were installed during this outage to add a 2" valve. No reportable indications were found.

Residual Heat Removal Piping

Residual Heat Removal piping welds and supports were examined using surface, volumetric, and visual techniques. 2 acceptable linear indications, 1 unacceptable linear indication (procedure rejectable only, indication was located outside Section XI area) were found with penetrant techniques. The unacceptable linear indication was reduced to an acceptable size by flapping.

Chemical and Volume Control Piping

Chemical and Volume Control piping welds and supports were



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examined using surface and visual techniques. Two supports found with loose bolting were evaluated in the as-found condition by Engineering. Since the supports could still provide their intended function, no sample expansion was required. The bolting was tightened during this outage. No reportable indications were detected.

Baseline examinations were performed on the associated piping welds that were installed during this outage to replace a 2" valve. No reportable indications were found.

Other Class 1 Issues

During the last Unit 3 refueling outage, FPL discovered that a number of Reactor Coolant branch connection welds were being examined incorrectly. The technique used during previous outages was designed for a "set-in" branch connection configuration. Turkey Point's branch connections are of the "set-on" type. The ultrasonic technique used did not cover the Code required area.

FPL initiated a review of piping configurations as part of the corrective action. This review did not reveal any other types of weld configurations that had been misidentified. A second part of the corrective action was to reexamine the affected branch connections (7 on each unit, 14 total.) During this outage, 5 of the unit 4 branch connections were examined, including the high stress Pressurizer surge line weld. Calibration blocks were borrowed from Prairie Island and Beaver Valley in order to properly examine the welds. No reportable indications were noted. The remaining branch connections will be examined during the next Units 3 and 4 outages.

Class 2

Main Feedwater Piping

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



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6. National Board Number for Unit: N/A

indications were detected.

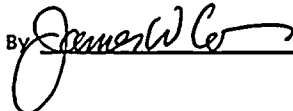
15. Abstract of Corrective Measures

Every indication found during ISI examinations was evaluated by FPL Engineering or an FPL Level III to determine if it was acceptable for continued service. There were no required sample expansions due to indications found during the outage. As good practice, FPL chose to eliminate or reduce in size every indication practical.

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6. National Board Number for Unit: N/A

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.

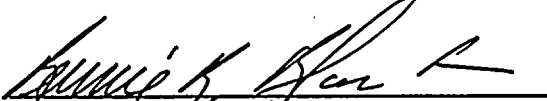
Certificate of Authorization No. N/A Expiration Date N/A

Date: 1/23/95 Signed: Florida Power and Light By: 

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 10/03/94 to 11/14/94, 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.


Inspector's Signature

NB 8230 FL 054
National Board, State,
Province, and Endorsements

Date: 1/31/95



TURKEY POINT UNIT 4
1994 REFUELING OUTAGE

Form NIS-BB Owners' Data Report for Eddy Current Examinations



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 4

EXAMINATION DATES: OCTOBER 14, 1994 thru OCTOBER 17, 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%			
4E210A	3198	4	NONE	NONE	NONE	16
4E210B	3206	6	NONE	NONE	NONE	8
4E210C	3205	10	NONE	NONE	NONE	9

LOCATION OF INDICATIONS

(20% - 100%)

STEAM GENERATOR	AVB BARS	SUPPORT LOCATIONS 1 THROUGH 6		TOP OF TUBE SHEET TO #1 SUPPORT		TOTAL INDICATIONS	
		COLD LEG	HOT LEG	COLD LEG	HOT LEG	20% - 39%	40% TO 100%
4E210A	NONE	3	1	NONE	1	5	NONE
4E210B	NONE	2	2	NONE	2	6	NONE
4E210C	2	8	3	NONE	NONE	13	NONE

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: 11/23/94

PREPARED BY:

A. Montalbane R.
S/G EDDY CURRENT COORDINATORDATE: 11/23/94

REVIEWED BY:

J.P. Deland
INSPECTIONS SUPERVISORDATE: 11/23/94

APPROVED BY:

R.R. Craig
S/G PROGRAM MANAGER



CUMMULATIVE DISTRIBUTION SUMMARY
TURKEY POINT UNIT # 4
10/94

COMPONENT : S/G A

Page : 1 of 1
Date : 11/22/94
Time : 0800

Examination Dates : 10/14/94 thru 10/17/94

Total Number of Tubes Inspected: 3198

Total Indications

Between 20% and 39%: 5
Greater than or equal to 40%: 0

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

Location Of Indications 20% to 100%

Hot Leg	Cold Leg
TSH -.5 to 01H -2.1 : 1	TSC -.5 to 01C -2.1 : 0
01H -2.0 to 06H +2.0 : 1	01C -2.0 to 06C +2.0 : 3
06H +2.1 to AV1 -3.1 : 0	06C +2.1 to AV4 -3.1 : 0
AV1 -3.0 to AV4 -3.0 : 0	



CUMULATIVE EXAMINATION REPORT

PTN-4

OUTAGE : 10/94

COMPONENT : S/G A

DESCRIPTION : 205 TO100% INDICATIONS

Page : 1 of 1

Date : 11/29/94

Time : 0800

				Extent		Reel	Probe	Location	10/94				N/A			
Row	Col	Leg	Req	Tst	Note				Volts	Deg	Ch	%	Diff	Location	Volts	Deg
28	14	C	TEC	TEH		AC004	A-720-M/ULC	01H 43.1	1.6	144	1	31				
		C	TEC	TEH		AC004	A-720-M/ULC	02C 2.6	.8	149	1	27				
44	36	H	TEC	TEC		AH012	A-720-M/ULC	TSH .7	1.1	151	1	31				
14	82	H	TEC	TEC	PS	AH004	A-720-M/ULC	04C 9.4	1.2	156	1	25				
2	90	C	06C	06C	SC	AC012	A-720-M/ULC	02C 44.8	.4	140	1	37				

Number of RECORDS Selected from Current Outage : 5

Number of TUBES Selected from Current Outage : 4



CUMMULATIVE DISTRIBUTION SUMMARY
TURKEY POINT UNIT # 4
10/94

COMPONENT : S/G B

Page : 1 of 1
Date : 11/22/94
Time : 0800

Examination Dates : 10/14/94 thru 10/17/94

Total Number of Tubes Inspected: 3206

Total Indications

Between 20% and 39%: 6
Greater than or equal to 40%: 0

Total Tubes Plugged as Preventive Maint : 0

Total Tubes Plugged: 0

Location Of Indications 20% to 100%

Hot Leg		Cold Leg	
TSH -.5 to 01H -2.1 :	2	TSC -.5 to 01C -2.1 :	0
01H -2.0 to 06H +2.0 :	2	01C -2.0 to 06C +2.0 :	2
06H +2.1 to AV1 -3.1 :	0	06C +2.1 to AV4 -3.1 :	0
AV1 -3.0 to AV4 -3.0 :	0		



CUMULATIVE EXAMINATION REPORT

PTN-4

OUTAGE : 10/94

COMPONENT : S/G B

DESCRIPTION : 20% TO 100% INDICATIONS

Page : 1 of 1

Date : 11/22/94

Time : 0800

										10/94				N/A				
			Extent															
Row	Col	Leg	Req	Tst/Note	Reel	Probe	Location		Volts	Deg	Ch	%	Diff	Location	Volts	Deg	Ch	%
3	24	C	06C	06C	SS	8C011	A-720-M/ULC	03C	25.6	1.0	154	1	27					
22	48	H	TEC	TEC	RC	BH022	A-720-M/ULC	TSH	6.1	.6	150	1	34					
42	48	H	TEC	TEC	SC	BH010	A-720-M/ULC	06C	.0	.5	120	P 1	29					
37	69	H	TEC	TEC	PS	BH028	A-720-M/ULC	TSH	21.6	.6	155	1	29					
13	75	H	TEC	TEC	PS	BH003	A-720-M/ULC	01H	48.2	1.1	146	1	39					
14	82	H	TEC	TEC	PS	BH004	A-720-M/ULC	02H	15.7	1.1	154	1	32					

Number of RECORDS Selected from Current Outage : 6

Number of TUBES Selected from Current Outage : 6



CUMMULATIVE DISTRIBUTION SUMMARY
TURKEY POINT UNIT # 4
10/94

COMPONENT : S/G C

Page : 1 of 1
Date : 11/22/94
Time : 0800

Examination Dates : 10/14/94 thru 10/17/94

Total Number of Tubes Inspected 3205

Total Indications

Between 20% and 39% 13
Greater than or equal to 40% 0

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

Location Of Indications 20% to 100%

Hot Leg

Cold Leg

TSH -.5 to 01H -2.1 :	0	TSC -.5 to 01C -2.1 :	0
01H -2.0 to 06H +2.0 :	3	01C -2.0 to 06C +2.0 :	8
06H +2.1 to AV1 -3.1 :	1	06C +2.1 to AV4 -3.1 :	0
AV1 -3.0 to AV4 -3.0 :	1		



CUMULATIVE EXAMINATION REPORT

PTN-4

OUTAGE : 10/94

COMPONENT : S/G C

DESCRIPTION : 20% TO 100% INDICATIONS

Page : 1 of 1

Date : 11/22/94

Time : 0800

										10/94				N/A				
		Extent																
Row	Col	Leg	Req	Tst/Note	Reel	Probe	Location		Volts	Deg	Ch	%	Diff	Location	Volts	Deg	Ch	%
22	7	C	TEH	TEH	PS	CC006	A-720-M/ULC	AV2 .0	.5		P 2	20						
3	52	C	06C	06C	PS	CC010	A-720-M/ULC	01C 29.4	.4	157	1	29						
24	56	H	TEC	TEC		CH007	A-720-M/ULC	04H 35.3	.8	143	1	37						
		H	TEC	TEC		CH007	A-720-M/ULC	04C 32.4	.9	146	1	34						
		H	TEC	TEC		CH007	A-720-M/ULC	02C 8.5	.9	141	1	38						
42	56	H	TEC	TEC	PL	CH010	A-720-M/ULC	06C -.6	1.1	125	P 1	28						
		H	TEC	TEC	SS	CH010	A-720-M/ULC	05C 32.8	.6	147	1	33						
24	62	H	TEC	TEC	PS	CH008	A-720-M/ULC	02C 34.9	.8	156	1	27						
32	70	H	TEC	TEC		CH009	A-720-M/ULC	AV1 .0	.6		P 2	20						
16	72	H	TEC	TEC		CH003	A-720-M/ULC	05H 42.7	.4	152	1	30						
30	72	H	TEC	TEC	SS	CH006	A-720-M/ULC	04C 21.1	.3	152	1	28						
37	72	H	TEC	TEC	SC	CH009	A-720-M/ULC	05H 44.5	.4	151	1	31						
23	77	H	TEC	TEC	PS	CH006	A-720-M/ULC	02C 50.4	.4	156	1	23						

Number of RECORDS Selected from Current Outage : 13

Number of TUBES Selected from Current Outage : 10

TURKEY POINT UNIT 4
1994 REFUELING OUTAGE

Form NIS-2 Owners' Data Report of Repairs and Replacements



NIS-2 Reports

Listing of Unit 4 NIS-2 reports since the last submittal.

NIS-2 Report	Date Signed
93-048-4	9/3/93
93-049-4	9/28/93
94-001-4	2/9/94
94-002-4	2/9/94
94-003-4	2/22/94
94-004-4	2/22/94
94-005-4	3/15/94
94-006-4	3/17/94
94-007-4	3/29/94
94-008-4	7/11/94
94-009-4	7/19/94
94-010-4	Canceled
94-011-4	8/3/94
94-012-4	8/19/94
94-013-4	8/30/94
94-014-4	9/9/94
94-015-4	11/3/94
94-016-4	11/10/94
94-017-4	11/11/94
94-018-4	Canceled
94-019-4	10/20/94
94-020-4	10/20/94
94-021-4	10/20/94
94-022-4	10/19/94
94-023-4	10/20/94
94-024-4	10/20/94
94-025-4	10/21/94
94-026-4	11/14/94

NIS-2 Report	Date Signed
94-027-4	Canceled
94-028-4	11/2/94
94-029-4	10/24/94
94-030-4	10/27/94
94-031-4	10/24/94
94-032-4	10/25/94
94-033-4	10/27/94
94-034-4	10/23/94
94-035-4	10/27/94
94-036-4	10/29/94
94-037-4	10/31/94
94-038-4	11/2/94
94-039-4	11/2/94
94-040-4	11/2/94
94-041-4	11/3/94
94-042-4	11/7/94
94-043-4	11/8/94
94-044-4	11/8/94
94-045-4	11/8/94
94-046-4	11/10/94
94-047-4	11/11/94
94-048-4	11/11/94
94-049-4	11/11/94
94-050-4	11/15/94
94-051-4	11/14/94

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 Sept. 3, 1993

Sheet 1 of 1

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

Unit 4

PWO: 8422 WO# 93021265

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 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)
Gate Vlv	Jenkins	N/A	N/A	4-50-354	Unk.	Replaced	No
Gate Vlv	Walworth	N/A	N/A	4-50-354	Unk.	Replacement	No

7. Description of Work Replaced valve at tag location 4-50-354 due to excessive seat leakage.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Other ☐
 Pressure 5 psi Test Temp. 84 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.

93-048-4

FORM NIS-2 (Back)

9. Remarks Mechanical connection. No welding performed.Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

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

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

Signed *William M. Smith Service Supr.* Date 9/3 1993
Owner or Owner's Designee, Title

CERTIFICATE OF INSPECTOR'S 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 5, 1993 to September 3, 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.

James J. Smith
Inspector's Signature

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

Date Sept 3 1993

43-048-4

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 Sept. 27, 1993

Sheet 1 of 1

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

Unit 4

PWO: 8087 WO#93018420

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 Boron Addition and Recycle System Quality Group B

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

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

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
FCV-4-113B Cover Bolts	Blaw-Knox	N/A	N/A	FCV-4-113B	N/A	Replacement	No

7. Description of Work Replaced four FCV-4-113B 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 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.

93-049-4

FORM NIS-2 (Back)

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

Signed *Mark Duffett Dawie* Date 9/28, 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 July 13, 1993 to September 27, 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.

Ernie H. Blum
 Inspector's Signature

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

Sept 28 19 93

93-049-4

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. 31, 1994Sheet 1 of 1

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

Unit 4

PWO: 6028 WO#93011316

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

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

Type Code Symbol Stamp N/AAuthorization No. N/AExpiration Date N/A

4. Identification of System Spent Fuel Cooling 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)
Valve Bonnet	ITT Grinnell	N/A	N/A	4-821	N/A	Replacement	No
Valve Stem	ITT Grinnell	N/A	N/A	4-821	N/A	Replacement	No

7. Description of Work Replaced valve stem and bonnet on valve 4-821.

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

Pressure 60 psi Test Temp. 78 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.

94-001-4

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 W. B. [Signature] MAINT. MGR. Date 2/4, 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 15, 1993 to January 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

Feb 9 19 94
Date

94-001-4

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. 31, 1994

Sheet 1 of 1

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

Unit 4

PWO: 0443 WO#93028051
Repair Organization P.O. No., Job No. etc.

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

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System Spent Fuel Cooling 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)
Body to Bonnet Nuts & Stud	Pacific Valves	N/A	N/A	4-819	N/A	Replacement	No

7. Description of Work Replaced one body to bonnet stud and two nuts on valve 4-819.

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 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.

94-002-1

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

T. = Code Symbol Stamp N/A

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

Signed MB WAY MAINT-MGR Date 2/4 , 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 December 3, 1993 to January 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 Endorsement

Feb 9 1994

94-002-4

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 Feb. 15, 1994

Sheet 1 of 1

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

Unit 4

PWO: 1227 WO#94002323

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 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	Mission Valve Co.	27074	N/A	4-50-311	Unk.	Replaced	No
Valve	Mission Valve Co.	18635	N/A	4-50-311	Unk.	Replacement	No

7. Description of Work Replaced check valve on 4A ICW pump discharge.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Other ☐
 Pressure 17 psi Test Temp. 85 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.

94-003-1

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 *Mat. S. Service S. Jr.* Date 2/22 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 Jan. 26, 1994 to February 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.

Francis J. [Signature] Commissions Factory Mutual Eng. Assoc.
Inspector's Signature 8230 (N) (I)
Date Feb 22 19 94 National Board, State, Province, and Endorsement

94-003-4

ENTERED
2-22-94

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 Feb. 15, 1994

Sheet 1 of 1

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

Unit 4

PWO: 0265 WO#92036908

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 77 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs : 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 4P9A	Johnston	N/A	N/A	4P9A IST-3	N/A	Replaced	No
Pump 4P9A	Johnston	N/A	N/A	4P9A IST- 3 4	N/A	Replacement	No

7. Description of Work Replaced 4A ICW Pump IST-3 with IST-~~3~~4

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Other ☐
Pressure 17 psi Test Temp. 85 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.

94-004-4

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 2/22 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 Jan. 26, 1994 to February 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 Endorsement

Date 2/22 19 94

94-104-4

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 8, 1994

Sheet 1 of 1

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

Unit 4

PWO: 2333 WO#92033791

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 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	Walworth	5202-AA	N/A	4-50-346	Unk.	Replaced	No
Valve	Powell	N/A	N/A	4-50-346	Unk.	Replacement	No

7. Description of Work Replaced drain valve to basket strainer due to valves inability to fully open.

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

Pressure 10 psi Test Temp. 75.4 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.

94-005-1

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 3/11, 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, 1992 to March 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.

[Signature]
Inspector's Signature

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

Date 3/15 19 94

94-005-4

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 March 16, 1994

Sheet 1 of 1

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

Unit 4

PWO: 1765 WO#94005672

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 B

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

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

6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Relief Valve	Crosby Vlv & Gage Co.	12915	N/A	RV-4-203	Unk.	Replaced	Yes
Relief Valve	Crosby Vlv & Gage Co.	N82705-00-0001	N/A	RV-4-203	Unk.	Replacement	Yes

7. Description of Work Replaced relief valve due to seat leakage.

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

Pressure 290 psi Test Temp. 289 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.

94-006-4

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 John J. [Signature] Date 3/17 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 10, 1994 to March 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.

[Signature]
Inspector's Signature

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

Date 3/17 19 94

94-006-4

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

<p>1. Owner <u>FLORIDA POWER & LIGHT</u> <small>Name</small> <u>P.O. BOX 029100, MIAMI, FL 33102</u> <small>Address</small></p> <p>2. Plant <u>TURKEY POINT</u> <small>Name</small> <u>P.O. BOX 3088, FLORIDA CITY, FL 33034</u> <small>Address</small></p> <p>3. Work Performed by <u>FLORIDA POWER & LIGHT</u> <small>Name</small> <u>P.O. BOX 3088, FLORIDA CITY, FL 33034</u> <small>Address</small></p> <p>4. Identification of System <u>TURKEY POINT</u></p>	<p>Date <u>03/27/94</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p>Unit <u>4</u> <u>WO 94002230 01</u> <small>Repair Organization P.O. No., Job No. etc.</small></p> <p>Type Code Symbol Stamp <u>N/A</u> Authorization No. <u>N/A</u> Expiration Date <u>N/A</u></p>
--	---

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)
80117-H-324-22	Berg Patterson	N/A	N/A	N/A	Unk.	Replaced	No
80117-H-324-22	Berg Patterson	N/A	N/A	N/A	Unk.	Replacement	No

7. Description of Work Restored support to the original design condition.

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

94-007--

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/ASigned [Signature] Date 3/28, 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 March 16, 1994 to March 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 Employer

Date 3/29, 19 94

94-007-4

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

Page 1 of 2

As Required by the Provisions of the ASME Code Section XI

1. Owner FLORIDA POWER & LIGHT

Date July 8, 1994

P.O. BOX 029100, MIAMI, FL 33102

Sheet 1 of 1

2. Plant TURKEY POINT

Unit 4

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

PWO:1797 WO#94005751

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

3. Work Performed by FLORIDA POWER & LIGHT

Type Code Symbol Stamp N/A

9700 SW 344 ST., FLORIDA CITY, FL 33034

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)
Studs 3/4" (36)	N/A	N/A	N/A	4E207C 1J-0043	Unk.	Replacement	No
Nuts 3/4" (100)	N/A	N/A	N/A	4E207C 1J-0019	Unk.	Replacement	No
Bolt 5/8" (4)	N/A	N/A	N/A	4E207C R94-1009	Unk.	Replacement	No

7. Description of Work Replaced all nuts, bolts and studs on 4C 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.

94-008-4

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] MAINT. MGR. Date 7-11, 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 17, 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.

[Signature]
Inspector's Signature

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

Date 7/11, 19 94

94-008-4

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 12, 1994

Sheet 1 of 1

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

Unit 4

PW0:3759 WO#94014833

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	4E207B R94-1009	Unk.	Replacement	No

7. Description of Work Replaced one bolt on 4B 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.

94-009-4

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 MGR. Date 7-14 . 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 13, 1994 to July 12, 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

July 19 1994

94-009-4

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
700 Universe Blvd. Juno Beach, FL 33408
Address

Date July 22, 1994

Sheet 1 of 1

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

Unit 4

PWO: 3524 WO#94013803

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 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	Mission Valve Co.	W6732	N/A	4-50-321	Unk.	Replaced	No
Check Valve	Mission Valve Co.	65500	N/A	4-50-321	Unk.	Replacement	No

7. Description of Work Replaced check valve on 4B ICW pump discharge.

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

Pressure 15.6 psi Test Temp. 89.6 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 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.

94-011-4

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 7/27 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 June 1, 1994 to July 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]
Inspector's Signature

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

94-011-4

APB

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
700 Universe Blvd. Juno Beach, FL 33408
Address

Date Aug. 8, 1994

Sheet 1 of 1

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

Unit 4

PWO: 4792 W0#94019317

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 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)
Nut (11)	N/A	N/A	N/A	BS-4-1403	N/A	Replacement	No

7. Description of Work Replaced eleven (11) worn nuts on basket strainer cover.

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 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.

94-012-4

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 *William M. Smith* Date 8/10, 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 Aug. 3, 1994 to Aug. 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.

William M. Smith
Inspector's Signature

Date 8/15 19 94

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

24-819-37
74-012-4

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
700 Universe Blvd. Juno Beach, FL 33408
Address

Date Aug. 29, 1994

Sheet 1 of 1

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

Unit 4

PWO: 8996 W0#93011219

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 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)
Strut (4)	Bergen Paterson	N/A	N/A	BP part # 2250 9/2/94	N/A	Replacement	No
Attachment (4)	Bergen Paterson	N/A	N/A	BP part # 1000	N/A	Replacement	No

7. Description of Work Installation of Unit-4 RHR Heat Exchanger A and B upper seismic restraint.

Implemented per PC/M 93-027 required per disposition of NCR N-92-0084.

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.

94-013-4

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] Date 8/30 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 Feb. 16, 1994 to Aug. 29, 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 8/30 1994

94-013-4

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
700 Universe Blvd. Juno Beach, FL 33408
Address

Date Sept. 2, 1994

Sheet 1 of 1

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

Unit 4

PWO: 4960 WO#94020377

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 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)
Nuts (32)	N/A	N/A	N/A	4E207B 1J0019	N/A	Replacement	No
Studs (16)	N/A	N/A	N/A	4E207B 1J0043	N/A	Replacement	No

7. Description of Work Replaced 32 worn nuts and 16 studs on heat exchanger outlet 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.

94-014-4

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 John P. Hume, Mkt. Spt. Service Supt. Date 9/17, 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 Aug. 12, 1994 to Sept. 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 F. Hume
Inspector's Signature

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

Sept 5 19 94

94-014-4

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 11/03/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

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

PWO #: 4209/64 WO #: 94016571
CWO #: 501480

3. Work Performed by Florida Power & Light
Name

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

P.O. Box 4332, Princeton, Fl. 33032
Address

Type Code Symbol Stamp N/A

Authorization No. N/A

Expiration Date N/A

4. Identification of System: CVCS System #: 47 Quality Group: A

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
CHECK VALVE 2 INCH	ROCKWELL EDWARD	N/A	N/A	4-298C	UNK.	Replaced	No
CHECK VALVE 2 INCH	ROCKWELL EDWARD	N/A	N/A	4-298C R92-4533	UNK.	Replacement	No

7. Description of Work: Replacement of valve 4-298C for SOER inspection.

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

Other VT-2 Pressure 3150 psig Test Temperature 63 °F

FORM HIS-2 (Back)

9. Remarks: ALL WELDING PERFORMED IN ACCORDANCE WITH APPROVED PLANT 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.

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Daniel R. Thompson, Technical Manager Date November 3 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 07/01/94 to 11/03/94 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.

Daniel R. Thompson
Inspectors Signature

Factory Mutual Eng. Assoc.
NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date 11/3 19 94

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 11/10/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #:2087/64 WO #: 94006340

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

Expiration Date N/A

PO BOX 4332, PRINCETON, FLA. 33032
Address

4. Identification of System: CVCS System #: 47 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, 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
RELIEF VLV	CROSBY	N82705-00 0001	N/A	RV-4-203	UNK.	Replaced	No
RELIEF VLV	CROSBY	N82705-00 0002	N/A	RV-4-203 R94-3139	UNK.	Replacement	No

7. Description of Work: RV-4-203 REPLACED DUE TO SEAT LEAKAGE.

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

Other VT-2 Pressure 2280 psig Test Temperature 525 °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/ACertificate of Authorization No. N/A Expiration Date N/ASigned David P. D'Amico Technical Manager Date November 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 03/30/94 to 10/22/94 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.

David P. D'Amico
Inspectors Signature

Commissions Factory Mutual Eng. Assoc.
8230 (N) (1)
National Board, State, Providence, and Endorsements

Date 11/10 19 94

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

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

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

3. Work Performed by Florida Power & Light
Name

P.O. Box 4332, Princeton, Fl. 33032
Address

Date 11/10/94

Sheet 1 of 2

Unit 4
PWO #:4207/64 WO #: 94016568

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: CVCS System #: 47 Quality Group: A

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
CHECK VALVE 2 INCH	ROCKWELL EDWARD	SK251N	N/A	4-298E	UNK.	Replaced	No
CHECK VALVE 2 INCH	ROCKWELL EDWARD	72ABY	N/A	4-298E R92-4533	UNK.	Replacement	No
PIPE 2" SCH 160 SS	N/A	N/A	N/A	R91-1758	UNK.	Replacement	No
ELBOW 2" 6004B	N/A	N/A	N/A	R92-0498	UNK.	Replacement	No

7. Description of Work: REPLACED 4-298E AND ASSOCIATED PIPING FOR SOER INSPECTION.

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

Other VT-2 Pressure 2280 psig Test Temperature 525 °F

FORM HIS-2 (Back)

9. Remarks: ALL WELDING PERFORMED IN ACCORDANCE WITH APPROVED PLANT PROCEDURES.

CERTIFICATE OF COMPLIANCE

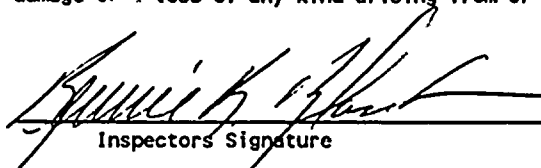
We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.

Type Code-Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned David L. Fitzgerald, Technical Manager Date November 11 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 07/01/94 to 11/10/94 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 loss of any kind arising from or connected with this inspection.


Inspectors Signature

Commissions

Factory Mutual Eng. Assoc.

NB 8230 (H)(1)

National Board, State, Providence, and Endorsements

Date 11/11 19 94

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

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

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

3. Work Performed by Florida Power & Light
Name

P.O. Box 4332 Princeton Fl. 33032
Address

Date 10/20/94

Sheet 1 of 2

Unit 4

WO #: 94019726

MPIL: 94-019M CWO #: 501430

PCM #: 89-567

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: Residual Heat Removal System #: 50 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, N/A 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
4-1014	Bergen Patterson	N/A	N/A	SR-3	Unk	Replaced	No
4-1014	Pacific Scientific	N/A	N/A	SR-3	Unk	Replacement	No

7. Description of Work: Replaced transition tube assembly at tag location 4-1014.

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

Other VT-3 Pressure _____ psig Test Temperature _____ °F

FORM NIS-2 (Back)

9. Remarks: All welding performed with approved plant 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.

Type Code Symbol Stamp _____ N/A _____

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

Signed Paul Benzert for DCPowell TECH SEPT MGR Date 10/20 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 08/11/94 to 10/19/94 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.

Samuel B. Dant
Inspector's Signature

Commissions 8230 (N) (I)
National Board, State, Providence, and Endorsements

Date 10/20 1994

94-019-4

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 10/20/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

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

WO #: 94019726
MPIL: 94-019M CWO #: 501430 PCN #: 89-567

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

P.O. Box 4332, Princeton Fl. 33032
Address

Expiration Date N/A

4. Identification of System: Residual Heat Removal System #: 50 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, N/A 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
4-1015	Pacific Scientific	117	N/A	SR-3	1980	Replaced	No
4-1015	Pacific Scientific	17872	N/A	SR-3	1988	Replacement	No
4-1015	Bergen Patterson	N/A	N/A	SR-3	Unk	Replaced	No
4-1015	Pacific Scientific	N/A	N/A	SR-3	Unk	Replacement	No

7. Description of Work: Replaced mechanical shock arrestor and transition tube assembly at snubber tag
location 4-1015.

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

Other VT-3 Pressure _____ psig Test Temperature _____ °F

FORM NIS-2 (Back)

9. Remarks: All welding performed in accordance with approved plant 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.

Type Code Symbol Stamp _____ N/A

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

Signed Paul Banay for DR Powell TECH DCA m62 Date 10/20 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 08/11/94 to 10/19/94 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.

James B. Hart
Inspectors Signature

Commissions 8230 (N) (1)
National Board, State, Providence, and Endorsements

Date 10/20/ 19 94

94-020-4

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 10/20/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #:4389/64 WO #: 94017496

CWO #: 501431

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

Expiration Date N/A

P.O. Box 4332, Princeton Fl. 33032.
Address

4. Identification of System: Intake Cooling Water System #: 19 Quality Group: C

5. (a) Applicable Construction Code ANSI 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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 30"	Pratt	1056-10-468	N/A	4-50-324	Unk.	Replaced	No
Butterfly Valve	Pratt	S09615-2	N/A	4-50-324	Unk.	Replacement	No
Butterfly Valve Bolting	Unk.	N/A	N/A	4-50-324 Bolting	Unk.	Replacement	No

7. Description of Work: Replaced Pratt 30" butterfly valve and 2 bolts with spare valve and new bolts..

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

Other _____ Pressure 4 psig Test Temperature 79 °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 Paul Benard for DR Powell Date 10/20 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 10/08/94 to 10/21/94 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.

James B. Blum
Inspector's Signature

Commissions 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date 10/20 19 94

94-021-4

3 BB

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 10/19/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

WO #: 94026133

CWO #: 501412

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

Expiration Date N/A

P.O. Box 4332, Princeton Fl. 33032
Address

4. Identification of System: Residual Heat Removal System #: 50 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, N/A 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
14"-RHR-1401-9	Unk	UNK	Unk	Pipe	Unk	Repaired	No

7. Description of Work: Removed linear indication by buffing.

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

Other _____ Pressure _____ psig Test Temperature _____ °F

94-021-4
20
uni

FORM NIS-2 (Back)

9. Remarks: No welding associated with this repair.

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.

Type Code Symbol Stamp _____ N/A

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

Signed Raul Barajas for DR Powell TECH DEPT
Owner or Owner's Designee, Title MANAGER Date 10/19 1994

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 10/17/94 to 10/19/94 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.

Factory Metal Engineering Assoc.

James B. Blum
Inspectors Signature

Commissions 8230 (N) (1)
National Board, State, Providence, and Endorsements

Date 10/19 1994

*WB
3/13*

94-022-4

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 10/20/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

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

PWO #:4472/64 WO #: 94017845

CWO #: 501377

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

P.O. Box 4332, Princeton, Fl. 33032
Address

Expiration Date N/A

4. Identification of System: Inatke Cooling Water 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, N/A 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
4-24"-13-L	N/A	N/A	N/A	ICW Bolting	Unk.	Replacement	No

7. Description of Work: Installed 4 studs and 8 nuts on north flange of line 4-24"-13-L, 90° elbow

next to weld 162 on Dwg. 5614-P-507-S Sh. 1. Installed 4 studs and 8 nuts on southwest on throat of

36" tee - next to weld 142 on Dwg. 5614-P-507-S Sh. 1.

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

Other _____ Pressure _____ psig Test Temperature _____ °F

FORM NIS-2 (Back)

9. Remarks: 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.

Type Code Symbol Stamp _____ N/A

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

Signed Karl Benayel for DCPowell TECH DEPT MGR Date 10/20 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 09/29/94 to 10/20/94 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]
Inspector's Signature

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

Date 10/20 19 94

94-023-4

2 P13

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 10/20/94

700 Universe Blvd; Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

WO #: 94023965

CWO #: 400044

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

Expiration Date N/A

P.O. Box 4332, Princeton Fl. 33032
Address

4. Identification of System: Intake Cooling Water 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, N/A 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	Mission Valve Co.	18635	N/A	4-50-311	Unk.	Replaced	No
Butterfly Valve	Mission Valve Co.	69149	N/A	4-50-311	Unk.	Replacement	No
Valve Bolting	N/A	N/A	N/A	4-50-311	Unk.	Replacement	No

7. Description of Work: Replaced ICW pump 4A discharge check valve 4-50-311 and bolting (20 studs and nuts).

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

Other _____ Pressure 23 psig Test Temperature 80 °F

94-024 - 4

FORM NIS-2 (Back)

9. Remarks: 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.

Type Code Symbol Stamp _____ N/A

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

Signed Raul Gonzalez for Dr. Powell TECH DIST MGR Date 10/20 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 09/28/94 to 10/20/94 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]
Inspector's Signature

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

Date 10/20 19 94

94-024-4

NB
B11

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 10/21/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #: 5512/64 WO #: 94023641
CWO #: 501480

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

Expiration Date N/A

P.O. Box 4332, Princeton, Fl. 33032
Address

4. Identification of System: Chemical/Volume Control System #: 47 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, N/A 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
Check Valve	Rockwell International	AU668	N/A	4-305	1980	Replaced	No
Check Valve	Rockwell International	55	N/A	4-305	Unk.	Replacement	No

7. Description of Work: Replaced check valve for SOER inspection.

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

Other Pressure 188 psig Test Temperature 60 °F

FORM NIS-2 (Back)

9. Remarks: All welding performed in accordance with approved plant 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.

Type Code Symbol Stamp _____ N/A _____
 Certificate of Authorization No. _____ N/A _____ Expiration Date _____ N/A _____
 Signed Arul Banerjee for DePoull Tech Dept MGR Date 10/21 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 09/16/94 to 10/21/94 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 NB 8230(N)(1)
 Inspectors Signature National Board, State, Providence, and Endorsements

Date 10/21 19 94

94-025-4

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 11/14/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #:1466/64 WO #: 93033816

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

Expiration Date N/A

P.O. Box 4332, Princeton, Fl. 33032
Address

4. Identification of System: CVCS System #: 47 Quality Group: B

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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 VLV 4 INCH	FISHER CONTROLS CO.	UNK	N/A	4-270 MODEL A31A	UNK.	Replaced	No
BUTTERFLY VLV 4 INCH	FISHER CONTROLS CO.	60771-1A	N/A	4-270 R93-0324 MODEL A31A	UNK.	Replacement	No
THREADED ROD 5/8"-11UNC-2AX6'	N/A	N/A	N/A	4-270 1J0199 (8 STUDS MADE FROM ROD)	UNK.	Replacement	No
HEAVY HEX NUTS 5/8"-11UNC-2B	N/A	N/A	N/A	4-270 R94-1769 (16 NUTS REPLACED)	UNK.	Replacement	No

7. Description of Work: VALVE BEING REPLACED. MECHANICAL CONNECTION.

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

Other VT-2 Pressure 24 psig Test Temperature 86 °F

FORM HIS-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 Daniel R. Powell Technical Manager Date 11/14 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 02/15/94 to 11/14/94 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]
Inspectors Signature

Commissions

Factory Mutual Eng. Assoc.

NB 8230 (N)(1)

National Board, State, Providence, and Endorsements

Date 11/14 1994

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

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

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

3. Work Performed by Florida Power & Light
Name

P.O. Box 4332, Princeton, Fl. 33032
Address

Date 11/01/94

Sheet 1 of 2

Unit 4
PWO #:3961/64 WO #: 94015754

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: REACTOR COOLANT SYSTEM System #: 41 Quality Group: A

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
HEAVY HEX NUTS SA-194 GR 2H (4)	N/A	N/A	N/A	MOV-4-536 1J0019 3/4"-10 UNC-2 NUTS	UNK.	Replacement	No

7. Description of Work: REPLACED BODY TO BONNET NUTS ON MOV-4-536.

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

Other VT-1 Pressure _____ psig Test Temperature _____ °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 David J. Fitzgerald, Technical Manager Date November 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 06/28/94 to 11/01/94 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.

James B. Glen
Inspectors Signature

Commissions

Factory Mutual Eng. Assoc.
NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date 11/2 19 94

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 10/24/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4
WO #: 94026321

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

Expiration Date N/A

PO BOX 4332, PRINCETON FLA. 33032
Address

4. Identification of System: CVCS System #: 47 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, 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
SUPPORT SR-942	N/A	N/A	N/A	SR-942	UNK.	Repaired	No

7. Description of Work: RETORQUED BOLTING. CONDITION IDENTIFIED DURING ASME SECTION XI INSPECTION.

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

Other VI-3 Pressure _____ psig Test Temperature _____ °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 repair 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 Daniel J. Fitzgerald, Technical Manager Date October 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 10/20/94 to 10/24/94 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.

Daniel J. Fitzgerald
Inspector's Signature

Commissions NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date 10/24 19 94

94-029-4

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

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

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

3. Work Performed by Florida Power & Light
Name

P.O. Box 4332, Princeton, Fl. 33032
Address

Date 10/27/94

Sheet 1 of 2

Unit 4

PWO #:5456/64 WO #: 93007683

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: EDG System #: 23 Quality Group: C

5. (a) Applicable Construction Code ASME SECTION III 1986 Edition, NA Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
CHECK VLV	ANDERSON - GREENWOOD	N24959	N/A	4-70-351B	UNK.	Replaced	Yes
CHECK VLV	ANDERSON - GREENWOOD	N28439	N/A	4-70-351B R93-3444	UNK.	Replacement	Yes

7. Description of Work: CHECK VALVE REPLACED FOLLOWING SOER INSPECTION.

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

Other VT-2 Pressure 200 psig Test Temperature 83 °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/ACertificate of Authorization No. N/A Expiration Date N/ASigned Samuel B. Bryant, Technical Manager Date October 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 03/10/93 to 10/26/94 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.

Samuel B. Bryant
Inspector's Signature

Commissions

Factory Mutual Eng. Assoc.

NB 8230 (N)(I)

National Board, State, Providence, and Endorsements

Date 10/27 19 94

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

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

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

3. Work Performed by FLORIDA POWER & LIGHT
Name

PO BOX 4332, PRINCETON FLA. 33032
Address

Date 10/24/94

Sheet 1 of 2

Unit 4
WO #: 94026319

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: CVCS System #: 47 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, 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
SUPPORT 4-VCH-63	N/A	N/A	N/A	4-VCH-63	UNK.	Repaired	No

7. Description of Work: BOLTING RETORQUED. CONDITION IDENTIFIED DURING ASME SECTION XI INSPECTION.

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

Other VT-3 Pressure _____ psig Test Temperature _____ °F

FORM HIS-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 repair 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 Daniel R. Funguel Technical Manager Date October 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 10/19/94 to 10/24/94 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.

Daniel R. Funguel
Inspectors Signature

Commissions NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date 10/24 19 94

94-031-4

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 10/25/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

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

CWO #: 501391

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

Expiration Date N/A

PO BOX 4332, PRINCETON FLA 33032
Address

4. Identification of System: REATOR COOLANT System #: 71 Quality Group: B

5. (a) Applicable Construction Code ANSI B31.1 1955 Edition, NO 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
BOLTING (8)	N/A	N/A	N/A	R94-3360	UNK.	Replacement	No

7. Description of Work: STEAM GENERATOR HANDHOLE COVER AND INSPECTION PORT BOLTING REPLACEMENT. A S/G

WO#94019555, B S/G WO#94019556, C S/G WO#94019563.

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

Other _____ Pressure _____ psig Test Temperature _____ °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 Daniel J. Mazzanti, Technical Manager Date October 25, 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 08/04/94 to 10/24/94 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]
Inspector's Signature

Commissions NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date 10/25 19 94

94-032-4

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

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

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

3. Work Performed by Florida Power & Light
Name

P.O. Box 4332, Princeton, Fl. 33032
Address

Date 10/26/94

Sheet 1 of 2

Unit 4
PWO #:0105/64 WO #: 93019455

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 #: 74 Quality Group: 8

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
BONNET STUDS (9)	N/A	N/A	N/A	R86-3161	UNK.	Replacement	No
NUTS (7)	N/A	N/A	N/A	R87-7362	UNK.	Replacement	No

7. Description of Work: NINE BODY TO BONNET STUDS REPLACED AND SEVEN NUTS REPLACED.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____
Other _____ Pressure _____ psig Test Temperature _____ °F

FORM NIS-2 (Back)

9. Remarks: MECHANICAL CONNECTION, NO WELDING REQUIRED.

CERTIFICATE OF COMPLIANCE

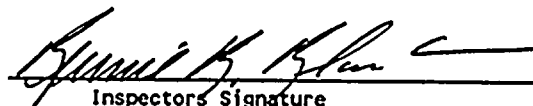
We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Samuel H. Frazee, Technical Manager Date October 27 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 11/10/93 to 10/26/94 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.


Inspectors Signature

Commissions

Factory Mutual Eng. Assoc.

NB 8230 (H)(1)

National Board, State, Providence, and Endorsements

Date 10/27 1994

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 10/26/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4
PWO #:5854/64 WO #: 94025797

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

Expiration Date N/A

P.O. Box 4332, Princeton, FL. 33032
Address

4. Identification of System: CVCS System #: 47 Quality Group: 8

5. (a) Applicable Construction Code 831.1 1955 Edition, NA Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
STUDS (4)	N/A	N/A	N/A	R90-0831	UNK.	Replacement	No
NUTS (4)	N/A	N/A	N/A	R94-2263	UNK.	Replacement	No

7. Description of Work: FOUR STUDS AND FOUR NUTS REPLACED.

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

Other VT-1 Pressure _____ psig Test Temperature _____ °F

FORM HIS-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 repair conforms to the rules of the ASME Code, Section XI.

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

Signed *Donald J. Thompson* Date October 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 10/12/94 to 10/26/94 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.

Donald J. Thompson
 Inspectors Signature

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

Date 10/27 19 94

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 10/27/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

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

PWO #:3400/64 WO #: 94003163

CWO #: 501431

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

P.O. Box 4332, Princeton, Fl. 33032
Address

Expiration Date N/A

4. Identification of System: ICW System #: 19 Quality Group: C

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
VALVE 30" BUTTERFLY	TRITON XR-70	7-61465-1	N/A	4-50-344	UNK.	Replaced	No
VALVE 30" BUTTERFLY	HENRY PRATT R1/R1A	SO-7560-2	N/A	4-50-344	UNK.	Replacement	No
STUDS (1) 1 1/4-7UNC*8 1/2	N/A	N/A	N/A	R93-3195	UNK.	Replacement	No
STUDS (3) 1 1/4-7UNC*8 1/2	N/A	N/A	N/A	R92-5338	UNK.	Replacement	No

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

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

Other VT-2 Pressure 2 psig Test Temperature 80 °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 Daniel J. Fitzgerald, Technical Manager Date October 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 08/09/94 to 10/27/94 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.

Daniel B. Black
Inspectors Signature

Commissions

Factory Mutual Eng. Assoc.

NB 8230 (N)(1)

National Board, State, Providence, and Endorsements

Date 10/27 19 94

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

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

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

3. Work Performed by Florida Power & Light
Name

P.O. Box 4332, Princeton, Fl. 33032
Address

Date 10/29/94

Sheet 1 of 2

Unit 4

WO #: 94014263

CWO #: 300778

PS #: 94-013M

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: SAFETY INJECTION System #: 62 Quality Group: A

5. (a) Applicable Construction Code 831.1 1955 Edition, NA Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
GATE VALVE 2 INCH	VELAN	941068	N/A	4-957 X08-30548-13AA R94-2305	UNK.	Replacement	No

7. Description of Work: INSTALLATION OF U4 HOT LEG SAFETY INJECTION CROSS-TIE VALVE PER PCM 93-072.

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

Other VT-2 Pressure 2470 psig Test Temperature 63 °F

FORM NIS-2 (Back)

9. Remarks: WELDING PERFORMED IN ACCORDANCE WITH APPROVED PROCEDURES.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A Expiration Date N/ASigned Stanley Ameyant, Technical Manager Date October 29 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 07/08/94 to 10/29/94 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.

Stanley B. Ameyant
Inspectors Signature

Commissions

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

Date 10/29 1994

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

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

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

3. Work Performed by Florida Power & Light
Name

P.O. Box 4332, Princeton, Fl. 33032
Address

Date 10/31/94

Sheet 1 of 2

Unit 4

WO #: 94026556

CWO #: 501483

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: Mainsteam System #: 72 Quality Group: B

5. (a) Applicable Construction Code 831.1 1955 Edition, NA Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
PIPE CLAMP 26 INCH	N/A	N/A	N/A	IC-13-0901	UNK.	Repaired	No
ROUND BAR A-564 TYPE 630	N/A	N/A	N/A	R94-3569 M&S 097-14105-4	UNK.	Replacement	No
HEAVY HEX NUT SA194 GR2H 1 1/2"	N/A	N/A	N/A	R93-2201 M&S 030-57650-4	UNK.	Replacement	No
PSA-35 LOAD PIN	PSA	N/A	N/A	R94-1252 M&S 006-70897-8	UNK.	Replacement	No
1" CS A-36 PLATE	N/A	N/A	N/A	R94-2250 M&S 032-73766-1	UNK.	Replacement	No

7. Description of Work: Repair pipe clamp hole elongation, replace load pin at snubber and pipe clamp.

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

Other VI-3 Pressure _____ psig Test Temperature _____ °F

FORM NIS-2 (Back)

9. Remarks: ALL WELDING PERFORMED IN ACCORDANCE WITH APPROVED PLANT PROCEDURES.

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp _____ N/A

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

Signed David B. Mayhew Date October 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 10/23/94 to 10/31/94 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.

James B. Glaser
Inspectors Signature

Commissions

Factory Mutual Eng. Assoc.
NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date 10/31 1994

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 11/01/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4
PWO #:4427/64 WO #: 94017673

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

Expiration Date N/A

P.O. Box 4332, Princeton, Fl. 33032
Address

4. Identification of System: ICW System #: 19 Quality Group: C

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
BOLT 1 1/4"X8 1/4" (5)	N/A	N/A	N/A	4P9B R94-1893	UNK.	Replacement	No
1 1/4" THREADED ROD (3 STUDS)	N/A	N/A	N/A	4P9B R91-3856	UNK.	Replacement	No

7. Description of Work: PUMP REMOVED DUE MECHANICAL JOINT LEAKS. REPLACED 5 BOLTS AND 3 STUDS.

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

Other VT-1 Pressure _____ psig Test Temperature _____ °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/ACertificate of Authorization No. N/A Expiration Date N/A

Signed David B. Glanville, Technical Manager Date November 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 10/18/94 to 11/01/94 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.

David B. Glanville
 Inspectors Signature

Commissions

Factory Mutual Eng. Assoc.

NB 8230 (N)(I)

National Board, State, Providence, and Endorsements

Date 11/2 19 94

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

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

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

3. Work Performed by Florida Power & Light
Name

P.O. Box 4332, Princeton, Fl. 33032
Address

Date 11/01/94

Sheet 1 of 2

Unit 4
PWO #:5027/64 WO #: 94020723 CR #: 94-0793

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: CVCS System #: 47 Quality Group: B

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
HEAVY HEX NUTS SA-194 GR 2H (6)	N/A	N/A	N/A	CV-4-204 1J0019 3/4"-10 UNC-2B	UNK.	Replacement	No
ROD THREADED SA-193 GR B7 (STUDS 6)	N/A	N/A	N/A	CV-4-204 1J0043 3/4"-10UNC-2AX6'	UNK.	Replacement	No

7. Description of Work: BODY TO BONNET BOLTING REPLACED.

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

Other VT-1 Pressure _____ psig Test Temperature _____ °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/ACertificate of Authorization No. N/A Expiration Date N/ASigned *Robert J. Fong* Date November 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 08/26/94 to 11/01/94 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.

James B. Fong
Inspectors Signature

Commissions

Factory Mutual Eng. Assoc.

NB 8230 (N)(I)

National Board, State, Providence, and Endorsements

Date 11/2 19 94

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 11/02/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4
PWO #:1581/64 WO #: 94004494

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

P.O. Box 4332, Princeton, Fl. 33032
Address

Expiration Date N/A

4. Identification of System: CCW System #: 30 Quality Group: C

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
RELIEF VALVE 1 1/2" TYPE 1970-2	DRESSER	TH18084	N/A	RV-4-1428	1988	Replaced	Yes
RELIEF VALVE 1 1/2" TYPE 1970-2	DRESSER	DK36208	N/A	RV-4-1428 R94-3270	1994	Replacement	Yes

7. Description of Work: RELIEF VALVE REPLACED WITH SPARE.

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

Other VT-2 Pressure 42 psig Test Temperature 63 °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/ACertificate of Authorization No. N/A Expiration Date N/A

Signed Daniel J. Fitzgerald, Technical Manager Date November 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 02/23/94 to 11/01/94 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]
 Inspectors Signature

Commissions

Factory Mutual Eng. Assoc.

NB 8230 (N)(I)

National Board, State, Providence, and Endorsements

Date 11/2 19 94

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

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

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

3. Work Performed by Florida Power & Light
Name

P.O. Box 4332, Princeton, Fl. 33032
Address

Date 11/03/94

Sheet 1 of 2

Unit 4
PWO #:8655/64 WO #: 93022128

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

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

4. Identification of System: COMPONENT COOLING WATER System #: 30 Quality Group: C

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
FLOW INDICATOR	BROOKS	N/A	N/A	FI-4-636	UNK.	Replaced	No
FLOW INDICATOR	BROOKS	8901HC030811-1	N/A	FI-4-636 R90-1679	UNK.	Replacement	No

7. Description of Work: INLINE FLOW INDICATOR OFF OF C RCP THERMAL BARRIER REPLACED.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure X
Other VT-2 Pressure 92 psig Test Temperature 80 °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/ACertificate of Authorization No. N/A Expiration Date N/A

Signed Donald A. Fitzgerald, Technical Manager Date November 3 19 94
 Owner of 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 08/15/94 to 11/03/94 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.

Donald A. Fitzgerald
 Inspector's Signature

Commissions

Factory Mutual Eng. Assoc.

NB 8230 (N)(1)

National Board, State, Providence, and Endorsements

Date 11/3 19 94

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 11/07/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

PWO #:6257/64 WO #: 94027665

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

Expiration Date N/A

P.O. Box 4332, Princeton, Fl. 33032
Address

4. Identification of System: PRIMARY WATER SYSTEM System #: 20 Quality Group: B

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
2" VALVE	HANCOCK	N/A	N/A	4-10-582	UNK	Replaced	No
2" VALVE	HENRY VOGT	N/A	N/A	4-10-582 11-7-94 R91-718-7118	UNK	Replacement	No

7. Description of Work: PRIMARY WATER VALVE 4-10-582 REPLACED DUE TO LLRT FAILURE.

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

Other VT-2 Pressure 225 psig Test Temperature 78 °F

94-042-4

FORM NIS-2 (Back)

9. Remarks: ALL WELDING PERFORMED ACCORDING TO APPROVED PLANT 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.

Type Code Symbol Stamp _____ N/A

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

Signed Daniel J. Fitzgerald, Technical Manager Date November 7 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 11/04/94 to 11/07/94 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]
 Inspector's Signature

Commissions

Factory Mutual Eng. Assoc.

NB 8230 (N)(I)

National Board, State, Providence, and Endorsements

Date 11/7 1994

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 11/08/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

CR #: 94-1039

CWO #: 501388

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

Expiration Date N/A

P.O. Box 4332, Princeton, Fl. 33032
Address

4. Identification of System: MAIN STEAM SYSTEM System #: 72 Quality Group: B

5. (a) Applicable Construction Code 831.1 1955 Edition, NA Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
SHUBBER PSA-35	PSA	6989	N/A	IC-13-0901 4-1039	1980	Replaced	Yes
SHUBBER PSA-35	PSA	12988	N/A	IC-13-0901 4-1039	1988	Replacement	Yes

7. Description of Work: PSA-35 SHUBBER REPLACED WITH SPARE DUE TO FUNCTIONAL TEST FAILURE.

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

Other VT-3 Pressure _____ psig Test Temperature _____ °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/ACertificate of Authorization No. N/A Expiration Date N/ASigned *David H. Thompson*, Technical Manager Date November 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 10/04/94 to 11/08/94 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.

James J. Glan
Inspector's Signature

Commissions

Factory Mutual Eng. Assoc.

NB 8230 (N)(1)

National Board, State, Providence, and Endorsements

Date 11/8 19 94

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 11/08/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4

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

CWO #: 501388

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

P.O. Box 4332, Princeton, Fl. 33032
Address

Expiration Date N/A

4. Identification of System: MAIN FEEDWATER SYSTEM System #: 74 Quality Group: B

5. (a) Applicable Construction Code 831.1 1955 Edition, NA Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
SNUBBER PSA-10	PSA	11315	N/A	4-1071 80116-R-006-02	1981	Replaced	Yes
SNUBBER PSA-10	PSA	16247	N/A	4-1071 80116-R-006-02	1988	Replacement	Yes

7. Description of Work: PSA-10 SNUBBER REPLACED WITH SPARE.

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

Other VT-3 Pressure _____ psig Test Temperature _____ °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 Daniel J. Fitzgerald, Technical Manager Date November 8 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 10/04/94 to 11/08/94 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.

Daniel J. Fitzgerald Commissions
Inspectors Signature

Factory Mutual Eng. Assoc.

NB 8230 (N)(1)

National Board, State, Providence, and Endorsements

Date 11/8 1994

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

1. Owner Florida Power & Light
Name

700 Universe Blvd., Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

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

3. Work Performed by Florida Power & Light
Name

P.O. Box 4332, Princeton, Fl. 33032
Address

Date 11/08/94

Sheet 1 of 2

Unit 4
PWO #:6206/64 WO #: 94027378

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

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

4. Identification of System: COMPONENT COOLING WATER System #: 30 Quality Group: B

5. (a) Applicable Construction Code 831.1 1955 Edition, NA Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
THREADED ROD 1/2"-13UNC-2A	N/A	N/A	N/A	4-738 R94-3198 (9 STUDS MADE FROM ROD)	UNK.	Replacement	No
NUTS 1/2"-13UNC-2B	N/A	N/A	N/A	4-738 R93-4137 (18 NUTS REPLACED)	UNK.	Replacement	No

7. Description of Work: STUDS AND NUTS REPLACED.

8. Tests Conducted: Hydrostatic: _____ Pneumatic: _____ Nominal Operating Pressure _____
Other _____ Pressure _____ psig Test Temperature _____ °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/ACertificate of Authorization No. N/A Expiration Date N/A

Signed *Donald J. Farnsworth* Date November 8 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 11/01/94 to 11/08/94 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.

James D. Farnsworth
 Inspector's Signature

Commissions Factory Mutual Eng. Assoc.
NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date 11/8 1994

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 11/10/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4
PWO #:0817/64 WO #: 94000062

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

Expiration Date N/A

P.O. Box 4332, Princeton, Fl. 33032
Address

4. Identification of System: REACTOR COOLANT SYSTEM System #: 41 Quality Group: A

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
THREADED ROD 1 1/8" 8UN-2AX6	N/A	N/A	N/A	PCV-4-456 R2J-0761 (6 STUDS MADE FROM ROD)	UNK.	Replacement	No
NUT HEAVY HEX 1 1/8" 8UN-2B	N/A	N/A	N/A	PCV-4-456 R90-2830 (3) R90-3244 (3)	UNK.	Replacement	No

7. Description of Work: BODY TO BONNET BOLTING BEING REPLACED ON PCV-4-456. SIX STUDS AND SIX NUTS

REPLACED.

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

Other VT-1&2 Pressure 2280 psig Test Temperature 525 °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/ACertificate of Authorization No. N/A Expiration Date N/ASigned *David H. Bennett, Technical Manager* Date 11/10 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 01/10/94 to 11/10/94 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.

Thomas B. Bennett
Inspectors Signature

Commissions Factory Mutual Eng. Assoc.
NB 8230 (N)(1)
National Board, State, Providence, and Endorsements

Date 11/10 19 94

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

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

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

3. Work Performed by Florida Power & Light
Name

P.O. Box 4332, Princeton, Fl. 33032
Address

Date 11/11/94

Sheet 1 of 2

Unit 4
PWO #:0866/64 WO #: 94000359

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: REACTOR COOLANT SYSTEM System #: 41 Quality Group: A

5. (a) Applicable Construction Code 831.1 1955 Edition, N/A Addenda, N/A Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
RELIEF VLV	CROSBY VLV & GAGE CO.	N69877-01 0009	N/A	RV-4-551C	UNK.	Replaced	Yes
RELIEF VLV	CROSBY VLV & GAGE CO.	H51249- 1361	N/A	RV-4-551C	UNK.	Replacement	Yes
THREADED ROD 1 1/4"-8UN-2AX6'	N/A	N/A	N/A	RV-4-551C R94-0321 (7 STUDS MADE FROM ROD)	UNK.	Replacement.	No
HEAVY HEX NUTS 1 1/4"-8UN-2B	N/A	N/A	N/A	RV-4-551C R94-1956 (3 NUTS REPLACED)	UNK.	Replacement	No
THREADED ROD 1 1/4"-7UNCX8"	N/A	N/A	N/A	RV-4-551C R94-1520 (1 STUD MADE FROM ROD)	UNK.	Replacement	No

7. Description of Work: VALVE BEING REPLACED WITH REBUILT SPARE.

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

Other VT-1&2 Pressure 2280 psig Test Temperature 525 °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/ACertificate of Authorization No. N/A Expiration Date N/ASigned Donald A. Fitzgerald, Technical Manager Date November 11 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 01/06/94 to 11/11/94 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.

Inspector's Signature Donald A. FitzgeraldCommissions Factory Mutual Eng. Assoc.
NB 8230 (N)(I)
National Board, State, Providence, and EndorsementsDate 11/11 19 94

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

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

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

3. Work Performed by Florida Power & Light
Name

P.O. Box 4332, Princeton, Fl. 33032
Address

Date 11/11/94

Sheet 1 of 2

Unit 4
PWO #:0864/64 WO #: 94000356

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: REACTOR COOLANT SYSTEM System #: 41 Quality Group: A

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
RELIEF VLV	CROSBY VLV & GAGE CO.	H51249- RV434WEP	N/A	RV-4-551A	UNK.	Replaced	Yes
RELIEF VLV	CROSBY VLV & GAGE CO.	H51249- 1362	N/A	RV-4-551A	UNK.	Replacement	Yes

7. Description of Work: VALVE BEING REPLACED WITH REBUILT SPARE.

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

Other VT-2 Pressure 2280 psig Test Temperature 525 °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 Donald J. Funguenti, Technical Manager Date November 11 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 and employed by Arkwright Mutual Insurance Company of Norwood, Ma. have inspected the components described in this Owners Report during the period 01/06/94 to 11/11/94 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.

Donald J. Funguenti
 Inspectors Signature

Commissions

Factory Mutual Eng. Assoc.

NB 8230 (N)(1)

National Board, State, Providence, and Endorsements

Date 11/11 1994

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

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

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

3. Work Performed by Florida Power & Light
Name

P.O. Box 4332, Princeton, Fl. 33032
Address

Date 11/11/94

Sheet 1 of 2

Unit 4
PWO #:0865/64 WO #: 94000358

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: REACTOR COOLANT SYSTEM System #: 41 Quality Group: A

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
RELIEF VLV	CROSBY VLV & GAGE CO.	H69877-01 0008	N/A	RV-4-551B	UNK.	Replaced	Yes
RELIEF VLV	CROSBY VLV & GAGE CO.	H51249- 1360	N/A	RV-4-551B	UNK.	Replacement	Yes

7. Description of Work: VALVE BEING REPLACED WITH REBUILT SPARE.

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

Other VT-2 Pressure 2280 psig Test Temperature 525 °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/ACertificate of Authorization No. N/A Expiration Date N/A

Signed *Samir K. Amari* Technical Manager Date November 11 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 01/06/94 to 11/11/94 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.

Samir K. Amari
 Inspectors Signature

Commissions

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

Date 11/11 19 94

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 11/14/94

700 Universe Blvd. Juno Beach Fl. 33408
Address

Sheet 1 of 2

2. Plant Turkey Point Plant
Name

Unit 4
PWO #:2055/64 WO #: 94006322

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

Expiration Date N/A

P.O. Box 4332, Princeton, Fl. 33032
Address

4. Identification of System: MAINSTEAM System #: 72 Quality Group: B

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
GLOBE VLV BONNET 2" MODEL 3652-XW	CRANE	N/A	N/A	MOV-4-1401	UNK.	Replaced	No
GLOBE VLV BONNET 2" MODEL 3652-XW	CRANE	N/A	N/A	MOV-4-1401 R94-3140	UNK.	Replacement	No

7. Description of Work: BONNET ASSEMBLY REPLACED DUE TO RECURRING PACKING LEAK.

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

Other VT-2 Pressure 960 psig Test Temperature 220 °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 David R. Powell Technical Manager Date 11/14 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 03/30/94 to 11/14/94 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.

Robert J. Blawie
 Inspector's Signature

Commissions

Factory Mutual Eng. Assoc.
 NB 8230 (N)(1)

National Board, State, Providence, and Endorsements

Date 11/15 19 94

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

700 Universe Blvd. Juno Beach Fl. 33408
Address

2. Plant Turkey Point Plant
Name

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

3. Work Performed by Florida Power & Light
Name

P.O. Box 4332, Princeton, Fl. 33032
Address

Date 11/14/94

Sheet 1 of 2

Unit 4

PWO #:3301/64 WO #: 94012554

PCM #: 93-165

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: INTAKE COOLING WATER System #: 19 Quality Group: C

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

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 Edition, N/A 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
PUMP 4P9B	JOHNSTON	N/A	N/A	4P9B IST-2	UNK.	Replaced	No
PUMP 4P9B	JOHNSTON	N/A	N/A	4P9B IST-8	UNK.	Replacement	No

7. Description of Work: REPLACING IST-2 PUMP WITH IST-8

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

Other VI-2 Pressure 15.6 psig Test Temperature 89 °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 David R. Powell Technical Manager Date 11/14 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 06/17/94 to 11/14/94 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.

James S. Blum
Inspectors Signature

Commissions

Factory Mutual Eng. Assoc.

NB 8230 (N)(1)

National Board, State, Providence, and Endorsements

Date 11/14 19 94

TURKEY POINT UNIT 4
1994 REFUELING OUTAGE

Summary of Visual Examinations and Functional Testing of Snubbers

FLORIDA POWER & LIGHT Co.
TURKEY POINT NUCLEAR PLANT UNIT 4
REFUELING OUTAGE 1994
SIEMENS POWER CORPORATION
FINAL REPORT

INTRODUCTION:

Siemens Power Corporation (SPC) was contracted to provide snubber test equipment and visual examination personnel under the direction of Florida Power and Light Co. (FPL) during Turkey Point Unit 4's Fall Refueling Outage. The work was scheduled for performance 3 October 1994 through 29 October 1994.

This narrative summarizes the significant aspects of the activity. It contains summary tables of visual examination results, functional test results, disassembly evaluations and deviation reports. Original visual examination documentation, functional test plots, deviation reports, disassembly evaluations and the Project Plan (which are incorporated in this report by reference) were turned over to the customer's designated representative (Mr. Frank Rihl), prior to the conclusion of on-site activities.

The initial work scope included the visual examination of 91 mechanical shock arrestors, the functional testing of 10 snubbers as part of the original sample plan, 6 snubbers as part of partial rebuild program and 5 snubbers as part of augmented testing.

Visual examination activities consisted of as-found VT-3 of 88 mechanical shock arrestors (as-found VT-3 examinations for MSA's installed at tag locations 4-1014, 4-1015 and 4-1058 were performed by others) and 23 as-left VT-3 examinations. These activities identified 3 MSA's which deviated from the specified criteria. The three deviating conditions were determined to be maintenance items. Therefore, none of these conditions constituted visual failures. A summary of Visual Examination Results is provided in the summary section of this report.

The purchase order required that snubbers installed at tag locations 4-1017, 4-1044, 4-1046, 4-1048, 4-1051 and 4-1071 be partially disassembled (only as far as required to remove excess grease from the capstan area), cleaned, evaluated and reassembled, snubber condition permitting. Rebuild activities consisted of cleaning, inspection of 8 snubbers from the unit, 1 spare snubber from the dry storage warehouse and partial rebuild of six snubbers from the unit & the spare PSA 10 from the dry storage warehouse. A summary of inspection, cleaning and rebuild activities is provided in the summary section of this report.

Functional testing consisted of thirty functional tests which are divided into four categories: Initial Sample, Augmented, Post cleaning and Spares. These activities identified 3 snubbers which deviated from the specified criteria.

Functional testing of the 10 original sample snubbers (Sample 1 : 4-1010, 4-1011, 4-1018, 4-1021, 4-1033, 4-1041, 4-1066, 4-1068, 4-1069, and 4-1081) identified no snubbers deviating from the specified criteria.



FLORIDA POWER & LIGHT Co.
TURKEY POINT NUCLEAR PLANT UNIT 4
REFUELING OUTAGE 1994
SIEMENS POWER CORPORATION
FINAL REPORT

Augmented functional testing of five (5) snubbers (4-1035, 4-1039, 4-1054, 4-1055 and 4-1097) identified two (2) snubbers not meeting the specified criteria. These snubbers were installed at tag locations 4-1039 and 4-1055.

Functional testing of 6 Snubbers (4-1017, 4-1044, 4-1046, 4-1048, 4-1051 and 4-1071) prior to inspection, cleaning and rebuild activities identified that the snubber installed at tag location 4-1044 did not meet the specified criteria for acceleration. These 6 snubbers were functionally tested after rebuild and all met the specified criteria.

2 spare snubbers were functionally tested to be used as replacement snubbers. Spare 1 (PSA 10, S/N 16247) was rebuilt prior to testing and installed at tag location 4-1071. Spare 2 (PSA 35, S/N 12688) was installed at tag location 4-1039.

Summaries of functional test results for the Initial Sample, Augmented Tests, post cleaning/rebuild tests and Spares tests are provided in the summary section of this report.

Visual examination, functional testing, evaluation and partial rebuild activities were performed at Turkey Point Unit 4 under the direction of the Turkey Point site representative. Work performed was in accordance with referenced FP&L procedures and in accordance with SPC Quality Assurance Program.

6 Deviation Reports were generated as result of visual examination, cleaning/rebuild and functional testing activities. These reports were submitted to the site representative for disposition instructions. Upon receipt of disposition instructions, the instructions were completed and verified, thus closing the report. A summary of Deviation Reports is provided in the summary section of this report.

The customer's representative generated four condition reports, 94-992, 94-1011, 94-1038 and 94-1039, addressing conditions identified by SPC's deviation reports. Summaries of these condition reports are provided in the summary section of this report.



FLORIDA POWER & LIGHT Co.
TURKEY POINT NUCLEAR PLANT UNIT 4
REFUELING OUTAGE 1994
SIEMENS POWER CORPORATION
FINAL REPORT

PROGRAM SUMMARIES:

VISUAL EXAMINATION SUMMARY

<u>TAG #</u>	<u>SERIAL #</u>	<u>VT-3DATE</u>	<u>VTRSLT</u>	<u>A/F DEVO.</u>
4-1000	184	10/16/94	PASS	
4-1001	18010	10/16/94	PASS	
4-1002	18016	10/16/94	PASS	
4-1003	18008	10/16/94	PASS	
4-1004	3168	10/11/94	PASS	
4-1005	1206	10/11/94	PASS	
4-1006	8087	10/11/94	PASS	
4-1007	11928	10/11/94	PASS	
4-1008	6485	10/11/94	PASS	
4-1009	1228	10/12/94	PASS	
4-1010	1204	10/12/94	PASS	
4-1011	10573	10/12/94	PASS	
4-1012	16154	10/16/94	PASS	
4-1013	17418	10/16/94	PASS	
4-1014	17177	10/18/94	PASS	
4-1015	17872	10/18/94	PASS	
4-1016	122	10/16/94	PASS	
4-1017	118	10/16/94	PASS	
4-1018	17420	10/16/94	PASS	
4-1019	17426	10/16/94	PASS	
4-1020	27101	10/12/94	PASS	
4-1021	128	10/12/94	PASS	
4-1022	21381	10/12/94	PASS	



FLORIDA POWER & LIGHT Co.
TURKEY POINT NUCLEAR PLANT UNIT 4
REFUELING OUTAGE 1994
SIEMENS POWER CORPORATION
FINAL REPORT

TAG #	SERIAL #	VT-3DATE	VTRSLT	A/F DEVO.
-----	-----	-----	-----	-----
4-1032	3707	10/14/94	PASS	
4-1033	7001	10/14/94	PASS	
4-1034	16243	10/15/94	PASS	
4-1035	11439	10/15/94	PASS	
4-1036	11461	10/15/94	PASS	
4-1037	11930	10/15/94	PASS	
4-1038	29497	10/15/94	PASS	
4-1039	6998	10/14/94	DEV.	3-PTN-94-4-1039
4-1040	17419	10/15/94	PASS	
4-1041	19721	10/13/94	PASS	
4-1042	19727	10/13/94	PASS	
4-1043	27099	10/13/94	PASS	
4-1044	3919	10/15/94	PASS	5-PTN-94-4-1044
4-1045	3905	10/15/94	PASS	
4-1046	187	10/15/94	PASS	
4-1047	185	10/15/94	PASS	
4-1048	4251	10/15/94	PASS	
4-1049	10169	10/15/94	PASS	
4-1050	12374	10/15/94	PASS	
4-1051	11125	10/15/94	PASS	
4-1052	16251	10/15/94	PASS	
4-1053	11446	10/15/94	PASS	
4-1054	15718	10/15/94	PASS	
4-1055	7782	10/15/94	PASS	
4-1056	17841	10/15/94	PASS	



FLORIDA POWER & LIGHT Co.
 TURKEY POINT NUCLEAR PLANT UNIT 4
 REFUELING OUTAGE 1994
 SIEMENS POWER CORPORATION
 FINAL REPORT

TAG #	SERIAL #	VT-3DATE	VTRSLT	A/F DEVO.
-----	-----	-----	-----	-----
4-1057	27080	10/15/94	PASS	
4-1058	21379	10/15/94	PASS	
4-1059	27103	10/13/94	PASS	
4-1061	19722	10/13/94	PASS	
4-1062	27076	10/13/94	PASS	
4-1063	27098	10/13/94	PASS	
4-1064	27077	10/13/94	PASS	
4-1065	20873	10/13/94	PASS	
4-1066	27094	10/15/94	PASS	
4-1067	27097	10/13/94	PASS	
4-1068	27085	10/13/94	PASS	
4-1069	10033	10/14/94	PASS	
4-1070	10036	10/14/94	PASS	
4-1071	11315	10/14/94	PASS	
4-1072	16235	10/14/94	PASS	
4-1073	3941	10/14/94	PASS	
4-1074	19298	10/13/94	PASS	
4-1075	19297	10/13/94	PASS	
4-1076	24414A	10/15/94	PASS	
4-1077	18014	10/13/94	PASS	
4-1078	24430A	10/13/94	PASS	
4-1079	23227	10/15/94	PASS	
4-1080	24431	10/15/94	PASS	
4-1081	19295	10/13/94	PASS	
4-1082	19296	10/15/94	PASS	
4-1083	24408A	10/15/94	PASS	



FLORIDA POWER & LIGHT Co.
TURKEY POINT NUCLEAR PLANT UNIT 4
REFUELING OUTAGE 1994
SIEMENS POWER CORPORATION
FINAL REPORT

<u>TAG #</u>	<u>SERIAL #</u>	<u>VT-3DATE</u>	<u>VTRSLT</u>	<u>A/F DEVO.</u>
4-1084	23229	10/15/94	PASS	
4-1085	33622	10/13/94	PASS	
4-1086	12993	10/12/94	PASS	
4-1087	12994	10/12/94	PASS	
4-1088	12995	10/11/94	PASS	
4-1089	12996	10/11/94	PASS	
4-1090	12997	10/12/94	PASS	
4-1091	12998	10/12/94	PASS	
4-1092	12999	10/11/94	PASS	
4-1093	17868	10/12/94	PASS	
4-1094	17869	10/12/94	PASS	
4-1095	17870	10/12/94	PASS	
4-1096	17871	10/12/94	PASS	
4-1097	17852	10/12/94	PASS	
4-1098	17873	10/12/94	PASS	
4-1099	17423	10/12/94	PASS	
4-1100	29498	10/13/94	DEV.	1-PTN-94-4-1100

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FUNCTIONAL TEST SUMMARIES

SAMPLE 1 Functional Test Summary

TAG #: 4-1010

MODEL: 35

FTRSLT: PASS
TBKAWY: 167.6
TIDRAG: 167.6
TAIDRAG: 55.9
TTST LOAD: 44370
TACTV.: 0.018
TFDRAG: 184.6
TFADRAG: 92.2

FDATE: 10/16/94
CBKAWY: 234.2
CIDRAG: 234.2
CADRAG: 106.5
CTST LOAD: 45430
CACTV.: 0.018
CFDRAG: 166.6
CFADRAG: 68.3

SERIAL #: 1204
BKAWY RSLT: PASS
IDRAG RSLT: PASS
AVDRAG RSLT: PASS
TEST LOAD RSLT: PASS
ACTV. RSLT: PASS
FDRAG RSLT: PASS
TFADRAG RSLT: PASS

TAG #: 4-1011

MODEL: 35

FTRSLT: PASS
TBKAWY: 238.4
TIDRAG: 252.3
TAIDRAG: 138.4
TTST LOAD: 49870
TACTV.: 0.018
TFDRAG: 216.3
TFADRAG: 86.5

FDATE: 10/16/94
CBKAWY: 221.1
CIDRAG: 242.2
CADRAG: 162.1
CTST LOAD: 49920
CACTV.: 0.014
CFDRAG: 262.0
CFADRAG: 195.3

SERIAL #: 10573
BKAWY RSLT: PASS
IDRAG RSLT: PASS
AVDRAG RSLT: PASS
TEST LOAD RSLT: PASS
ACTV. RSLT: PASS
FDRAG RSLT: PASS
TFADRAG RSLT: PASS

TAG #: 4-1018

MODEL: 3

FTRSLT: PASS
TBKAWY: 27.1
TIDRAG: 27.1
TAIDRAG: 13.8
TTST LOAD: 5611.9
TACTV.: 0.013
TFDRAG: 21.3
TFADRAG: 11.5

FDATE: 10/16/94
CBKAWY: 9.6
CIDRAG: 37.7
CADRAG: 9.8
CTST LOAD: 5340.5
CACTV.: 0.009
CFDRAG: 27.0
CFADRAG: 11.7

SERIAL #: 17420
BKAWY RSLT: PASS
IDRAG RSLT: PASS
AVDRAG RSLT: PASS
TEST LOAD RSLT: PASS
ACTV. RSLT: PASS
FDRAG RSLT: PASS
TFADRAG RSLT: PASS

TAG #: 4-1021

MODEL: 3

FTRSLT: PASS
TBKAWY: 25.6
TIDRAG: 35.5
TAIDRAG: 21.6
TTST LOAD: 5904.0
TACTV.: 0.014
TFDRAG: 28.8
TFADRAG: 13.8

FDATE: 10/16/94
CBKAWY: 29.3
CIDRAG: 35.3
CADRAG: 19.0
CTST LOAD: 5573.3
CACTV.: 0.010
CFDRAG: 32.2
CFADRAG: 14.5

SERIAL #: 128
BKAWY RSLT: PASS
IDRAG RSLT: PASS
AVDRAG RSLT: PASS
TEST LOAD RSLT: PASS
ACTV. RSLT: PASS
FDRAG RSLT: PASS
TFADRAG RSLT: PASS



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SAMPLE 1 Functional Test Summary (continued)

TAG #: 4-1033

MODEL: 35

FTRSLT: PASS
TBKAWY: 169.2
TIDRAG: 457.7
TAIDRAG: 90.1
TTST LOAD: 46540
TACTV.: 0.018
TFDRAG: 239.1
TFADRAG: 83.0

FDATE: 10/18/94
CBKAWY: 164.5
CIDRAG: 164.5
CADRAG: 38.4
CTST LOAD: 48940
CACTV.: 0.018
CFDRAG: 228.8
CFADRAG: 70.1

SERIAL #: 7001
BKAWY RSLT: PASS
IDRAG RSLT: PASS
AVDRAG RSLT: PASS
TEST LOAD RSLT: PASS
ACTV. RSLT: PASS
FDRAG RSLT: PASS
TFADRAG RSLT: PASS

TAG #: 4-1041

MODEL: 3

FTRSLT: PASS
TBKAWY: 16.3
TIDRAG: 30.6
TAIDRAG: 16.6
TTST LOAD: 5494.6
TACTV.: 0.013
TFDRAG: 42.5
TFADRAG: 24.3

FDATE: 10/18/94
CBKAWY: 28.2
CIDRAG: 53.9
CADRAG: 33.0
CTST LOAD: 5390.8
CACTV.: 0.009
CFDRAG: 44.8
CFADRAG: 30.5

SERIAL #: 19721
BKAWY RSLT: PASS
IDRAG RSLT: PASS
AVDRAG RSLT: PASS
TEST LOAD RSLT: PASS
ACTV. RSLT: PASS
FDRAG RSLT: PASS
TFADRAG RSLT: PASS

TAG #: 4-1066

MODEL: 3

FTRSLT: PASS
TBKAWY: 51.0
TIDRAG: 88.6
TAIDRAG: 44.9
TTST LOAD: 5602.5
TACTV.: 0.011
TFDRAG: 51.2
TFADRAG: 29.7

FDATE: 10/17/94
CBKAWY: 39.1
CIDRAG: 56.8
CADRAG: 38.1
CTST LOAD: 5786.3
CACTV.: 0.008
CFDRAG: 51.9
CFADRAG: 36.9

SERIAL #: 27094
BKAWY RSLT: PASS
IDRAG RSLT: PASS
AVDRAG RSLT: PASS
TEST LOAD RSLT: PASS
ACTV. RSLT: PASS
FDRAG RSLT: PASS
TFADRAG RSLT: PASS

TAG #: 4-1068

MODEL: 3

FTRSLT: PASS
TBKAWY: 32.9
TIDRAG: 54.4
TAIDRAG: 30.2
TTST LOAD: 5623.1
TACTV.: 0.010
TFDRAG: 55.8
TFADRAG: 29.0

FDATE: 10/18/94
CBKAWY: 43.0
CIDRAG: 50.7
CADRAG: 34.5
CTST LOAD: 5184
CACTV.: 0.006
CFDRAG: 50.5
CFADRAG: 35.8

SERIAL #: 27085
BKAWY RSLT: PASS
IDRAG RSLT: PASS
AVDRAG RSLT: PASS
TEST LOAD RSLT: PASS
ACTV. RSLT: PASS
FDRAG RSLT: PASS
TFADRAG RSLT: PASS

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SAMPLE 1 Functional Test Summary (continued)

TAG #: 4-1069

MODEL: 35

FTRSLT: PASS
TBKAWY: 195.3
TIDRAG: 212.3
TAIDRAG: 99.3
TTST LOAD: 46390
TACTV.: 0.020
TFDRAG: 271.4
TFADRAG: 146.8

FDATE: 10/18/94
CBKAWY: 172.1
CIDRAG: 271.0
CADRAG: 147.2
CTST LOAD: 43650
CACTV.: 0.020
CFDRAG: 227.5
CFADRAG: 56.8

SERIAL #: 10033
BKAWY RSLT: PASS
IDRAG RSLT: PASS
AVDRAG RSLT: PASS
TEST LOAD RSLT: PASS
ACTV. RSLT: PASS
FDRAG RSLT: PASS
TFADRAG RSLT: PASS

TAG #: 4-1081

MODEL: 3

FTRSLT: PASS
TBKAWY: 25.0
TIDRAG: 25.9
TAIDRAG: 12.2
TTST LOAD: 5653.1
TACTV.: 0.014
TFDRAG: 21.4
TFADRAG: 8.6

FDATE: 10/17/94
CBKAWY: 13.6
CIDRAG: 21.7
CADRAG: 8.7
CTST LOAD: 5259.8
CACTV.: 0.011
CFDRAG: 26.0
CFADRAG: 13.1

SERIAL #: 19295
BKAWY RSLT: PASS
IDRAG RSLT: PASS
AVDRAG RSLT: PASS
TEST LOAD RSLT: PASS
ACTV. RSLT: PASS
FDRAG RSLT: PASS
TFADRAG RSLT: PASS



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Post Cleaning Functional Test Summary

TAG #: 4-1017

MODEL: 10

A/L FTRSLT: PASS	A/L FDATE: 10/18/94	SERIAL #: 118
TBKAWY: 24.0	CBKAWY: 26.5	BKAWY RSLT: PASS
TIDRAG: 37.9	CIDRAG: 38.1	IDRAG RSLT: PASS
TAIDRAG: 19.1	CADRAG: 22.0	AVDRAG RSLT: PASS
TTST LOAD: 13992.6	CTST LOAD: 13374.1	TEST LOAD RSLT: PASS
TACTV.: 0.017	CACTV.: 0.010	ACTV. RSLT: PASS
TFDRAG: 35.9	CFDRAG: 36.1	FDRAG RSLT: PASS
TFADRAG: 23.3	CFADRAG: 19.2	TFADRAG RSLT: PASS

TAG #: 4-1044

MODEL: 10

A/L FTRSLT: PASS	A/L FDATE: 10/19/94	SERIAL #: 3919
TBKAWY: 19.0	CBKAWY: 25.5	BKAWY RSLT: PASS
TIDRAG: 44.1	CIDRAG: 144.5	IDRAG RSLT: PASS
TAIDRAG: 26.4	CADRAG: 45.2	AVDRAG RSLT: PASS
TTST LOAD: 14435.5	CTST LOAD: 13973.1	TEST LOAD RSLT: PASS
TACTV.: 0.017	CACTV.: 0.009	ACTV. RSLT: PASS
TFDRAG: 44.9	CFDRAG: 137.0	FDRAG RSLT: PASS
TFADRAG: 21.6	CFADRAG: 48.9	TFADRAG RSLT: PASS

TAG #: 4-1046

MODEL: 10

FTRSLT: PASS	FDATE: 10/18/94	SERIAL #: 187
TBKAWY: 17.4	CBKAWY: 23.0	BKAWY RSLT: PASS
TIDRAG: 30.0	CIDRAG: 32.2	IDRAG RSLT: PASS
TAIDRAG: 16.6	CADRAG: 16.1	AVDRAG RSLT: PASS
TTST LOAD: 13792.6	CTST LOAD: 12989.6	TEST LOAD RSLT: PASS
TACTV.: 0.020	CACTV.: 0.012	ACTV. RSLT: PASS
TFDRAG: 30.6	CFDRAG: 30.3	FDRAG RSLT: PASS
TFADRAG: 18.1	CFADRAG: 15.8	TFADRAG RSLT: PASS

TAG #: 4-1048

MODEL: 10

FTRSLT: PASS	FDATE: 10/18/94	SERIAL #: 4251
TBKAWY: 11.3	CBKAWY: 33.5	BKAWY RSLT: PASS
TIDRAG: 335.9	CIDRAG: 78.3	IDRAG RSLT: PASS
TAIDRAG: 17.5	CADRAG: 30.3	AVDRAG RSLT: PASS
TTST LOAD: 13666.8	CTST LOAD: 13606.7	TEST LOAD RSLT: PASS
TACTV.: 0.020	CACTV.: 0.014	ACTV. RSLT: PASS
TFDRAG: 47.4	CFDRAG: 63.1	FDRAG RSLT: PASS
TFADRAG: 30.1	CFADRAG: 20.3	TFADRAG RSLT: PASS

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Post Cleaning Functional Test Summary (Cont.)

TAG #: 4-1051

MODEL: 10

A/L FTRSLT: PASS	A/L FDATE: 10/18/94	SERIAL #: 11125
TBKAWY: 55.2	CBKAWY: 30.1	BKAWY RSLT: PASS
TIDRAG: 120.9	CIDRAG: 57.0	IDRAG RSLT: PASS
TAIDRAG: 31.7	CADRAG: 34.0	AVDRAG RSLT: PASS
TTST LOAD: 14948.8	CTST LOAD: 13658.0	TEST LOAD RSLT: PASS
TACTV.: 0.018	CACTV.: 0.010	ACTV. RSLT: PASS
TFDRAG: 95.7	CFDRAG: 52.2	FDRAG RSLT: PASS
TFADRAG: 33.4	CFADRAG: 27.3	TFADRAG RSLT: PASS

TAG #: 4-1097

MODEL: 10

A/L FTRSLT: PASS	A/L FDATE: 10/17/94	SERIAL #: 17852
TBKAWY: 33.5	CBKAWY: 34.6	BKAWY RSLT: PASS
TIDRAG: 69.1	CIDRAG: 42.6	IDRAG RSLT: PASS
TAIDRAG: 41.7	CADRAG: 25.0	AVDRAG RSLT: PASS
TTST LOAD: 14353.6	CTST LOAD: 14657.9	TEST LOAD RSLT: PASS
TACTV.: 0.018	CACTV.: 0.011	ACTV. RSLT: PASS
TFDRAG: 53.0	CFDRAG: 45.7	FDRAG RSLT: PASS
TFADRAG: 34.7	CFADRAG: 28.1	TFADRAG RSLT: PASS

TAG #: SPARE 1

MODEL: 10

A/L FTRSLT: PASS	A/L FDATE: 10/18/94	SERIAL #: 16247
TBKAWY: 40.6	CBKAWY: 37.1	BKAWY RSLT: PASS
TIDRAG: 66.3	CIDRAG: 38.7	IDRAG RSLT: PASS
TAIDRAG: 40.6	CADRAG: 25.5	AVDRAG RSLT: PASS
TTST LOAD: 14419.0	CTST LOAD: 14353.8	TEST LOAD RSLT: PASS
TACTV.: 0.017	CACTV.: 0.013	ACTV. RSLT: PASS
TFDRAG: 40.7	CFDRAG: 48.8	FDRAG RSLT: PASS
TFADRAG: 26.2	CFADRAG: 35.6	TFADRAG RSLT: PASS

Spare Functional Test Summary

TAG #: SPARE 2

MODEL: 35

FTRSLT: PASS	FDATE: 10/19/94	SERIAL #: 12998
TBKAWY: 394.7	CBKAWY: 544.8	BKAWY RSLT: PASS
TIDRAG: 738.4	CIDRAG: 601.9	IDRAG RSLT: PASS
TAIDRAG: 351.4	CADRAG: 206.2	AVDRAG RSLT: PASS
TTST LOAD: 43770	CTST LOAD: 46550	TEST LOAD RSLT: PASS
TACTV.: 0.017	CACTV.: 0.017	ACTV. RSLT: PASS
TFDRAG: 829.7	CFDRAG: 572.6	FDRAG RSLT: PASS
TFADRAG: 445.6	CFADRAG: 146.7	TFADRAG RSLT: PASS



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DEVIATION REPORT SUMMARY

TAG #: 4-1039

DEVIATION #: 04-PTN-94-4-1039 INT. DATE:10/18/94 CLOSE DATE:10/20/94

CONDITION: This MSA exceeded the specified criteria for acceleration by 0.001G in both tension and compression.

DISPOSITION: Examine snubber internal to determine cause of failure.
Condition addressed in condition report 94-1039.

TAG #: 4-1039

DEVIATION #: 06-PTN-94-4-1039 INT. DATE:10/19/94 CLOSE DATE:10/20/94

CONDITION: 1) Loose bolts on pipe clamp. (Jam nuts were tight)
2) Load pin holes in pipe clamp are elongated 1/8".
3) load pin hole in TTA paddle is elongated 3/16".

DISPOSITION: No further action required by Siemens. Condition addressed in condition report 94-1039

TAG #: 4-1044

DEVIATION #: 05-PTN-94-4-1044 INT. DATE:10/16/94 CLOSE DATE:10/20/94

CONDITION: This MSA exceeded the maximum specified "L" dim. by 1/8".

DISPOSITION: No further action required by Siemens. Condition addressed in condition report 94-1038.

TAG #: 4-1055

DEVIATION #: 02-PTN-94-4-1055 INT. DATE:10/18/94 CLOSE DATE:10/20/94

CONDITION: This MSA exceeded the specified criteria for acceleration by 0.001G in the tension direction.

DISPOSITION: Partially rebuild snubber and retest. Condition addressed in condition report 94-1038.

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TAG #: 4-1071

Deviation #: 03-PTN-94-4-1071 INT. DATE:10/18/94 CLOSE DATE:10/20/94

Condition: Partial disassembly identified excessive corrosion inside the snubber housing, on the inertia mass, the ball screw shaft and the torque transfer drum.

Disposition: Partially rebuild Spare 1, S/N 16247, and functionally test. Upon satisfactory test, reinstall tested spare at tag location 4-1071

TAG #: 4-1100

DEVIATION #: 01-PTN-94-4-1100 INT. DATE:10/14/94 CLOSE DATE:10/14/94

CONDITION: The "L" dimension of this MSA is 3/8" less than the specified minimum.

DISPOSITION: No further action required by Siemens. Condition addressed in condition report 94-992.

Condition Report Summary

Condition Report #: 94-992

Condition: The "L" dimension of the MSA installed at tag location 4-1100 is not within specified limits.

Corrective action: FPL Engineering Dept. is to issue a CRN correcting the drawing error.

Condition Report #: 94-1011

Condition: The "L" dimension of the MSA installed at tag location 4-1044 is not within specified limits.

Corrective action: Adjust MSA transition tube assembly to bring "L" dimension within limits.

Condition Report #: 94-1038

Condition: The MSA's installed at tag locations 4-1044 & 4-1055 exhibited high acceleration values during functional testing.

Corrective action: Inspect to determine cause, partially rebuild and functionally test.



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Condition Report #: 94-1039

Condition: The MSA installed at tag location 4-1039 exhibited high acceleration values during functional testing. Additionally, the transition tube assembly and pipe clamp exhibited wear in the pin area.

Corrective action: Inspect to determine cause of high acceleration values, site construction organization is to repair clamp and transition tube assembly.

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OVERHAUL SUMMARY

TAG#: 4-1017

Overhaul Report #: PTN-94-4-1017 Serial #: 118

Description: This MSA was manufactured during the time period when PSA 10 snubbers were shipped with excess grease.

Remarks: This snubber was partially disassembled (only as far as required to remove excess grease from the capstan area) cleaned, evaluated and reassembled.

TAG#: 4-1039

Overhaul Report #: PTN-94-4-1039 Serial #: 6698

Description: This MSA was partially disassembled to determine the cause of high acceleration values.

Remarks: This snubber was partially disassembled, (only as far as required to inspect the capstan spring and the capstan area) cleaned and evaluated. Evaluation identified what appeared to be an excess of grease in the capstan area. While the other functional parameters of this snubber were within specified limits, the snubber's performance indicated possible wear. The snubber was not reassembled and was scrapped at the direction of the customer's representative.

TAG#: 4-1044

Overhaul Report #: PTN-94-4-1044 Serial #: 3919

Description: This MSA was manufactured during the time period when PSA 10 snubbers were shipped with excess grease.

Remarks: This snubber was partially disassembled, (only as far as required to remove excess grease from the capstan area) cleaned, evaluated and reassembled.

TAG#: 4-1046

Overhaul Report #: PTN-94-4-1046 Serial #: 187

Description: This MSA was manufactured during the time period when PSA 10 snubbers were shipped with excess grease.

Remarks: This snubber was partially disassembled, (only as far as required to remove excess grease from the capstan area) cleaned, evaluated and reassembled.

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TAG#: 4-1048

Overhaul Report #: PTN-94-4-1048 Serial #: 4251

Description: This MSA was manufactured during the time period when PSA 10 snubbers were shipped with excess grease.

Remarks: This snubber was partially disassembled, (only as far as required to remove excess grease from the capstan area) cleaned, evaluated and reassembled.

TAG#: 4-1051

Overhaul Report #: PTN-94-4-1051 Serial #: 11125

Description: This MSA was manufactured during the time period when PSA 10 snubbers were shipped with excess grease.

Remarks: This snubber was partially disassembled, (only as far as required to remove excess grease from the capstan area) cleaned, evaluated and reassembled.

TAG#: 4-1055

Overhaul Report #: PTN-94-4-1055 Serial #: 7782

Description: This MSA was partially disassembled to determine the cause of high acceleration values.

Remarks: This snubber was partially disassembled, (only as far as required to inspect the capstan spring and the capstan area) cleaned and evaluated. Evaluation identified what appeared to be an excess of grease in the capstan area. The snubber was reassembled for retest. Test results were within specified parameters.

TAG#: 4-1071

Overhaul Report #: PTN-94-4-1071 Serial #: 11315

Description: This MSA was manufactured during the time period when PSA 10 snubbers were shipped with excess grease.

Remarks: This snubber was partially disassembled, (only as far as required to remove excess grease from the capstan area) cleaned and evaluated. Evaluation identified excessive corrosion inside the snubber housing, on the inertia mass, the ball screw shaft and the torque transfer drum. The snubber was left partially disassembled and returned to the dry storage warehouse to be scrapped at the direction of the customer's representative.



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TAG#: 4-1097

Overhaul Report #: PTN-94-4-1097

Serial #: 17852

Description: This MSA was partially disassembled to determine the cause of high acceleration values.

Remarks: This snubber was partially disassembled (only as far as required to inspect the capstan spring and the capstan area) cleaned and evaluated. Evaluation identified what appeared to be an excess of grease in the capstan area. The snubber was reassembled.

TAG#: SPARE 1

Overhaul Report #: PTN-94-4-SPARE 1

Serial #: 16247

Description: This MSA was partially disassembled at the direction of the customer's representative prior to testing.

Remarks: This snubber was partially disassembled (only as far as required to remove excess grease from the capstan area), cleaned, evaluated and reassembled.

This completed the scope of the SPC's visual examination, functional testing and evaluation activities.

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PERSONNEL AND EQUIPMENT USED:

PERSONNEL

NAME	POSITION	FUNCTION
M.L. Miller	Q.C. Supervisor	Q.C. & Site Lead
D.E. Moore	Visual Examiner	Lead VT Examiner
T.W. Marshall	Visual Examiner	VT Examiner
F.W. Musgrove	Technician	Machine Operator
M.L. Miller Jr.	Technician	Test Technician

Personnel performing examination and testing activities were qualified and certified in accordance with SPC's Quality Assurance Program. A copy of personnel certifications is provided in the Project Plan.

TEST EQUIPMENT

Equipment used in support of testing activities was calibrated in accordance with SPC's Quality Assurance Program. Copies of equipment calibration certificates are included in the Project Plan.

REFERENCES:

FPL Procedures:

FPL ADM 0190.83	Mechanical Shock Arrestors Surveillance Program
FPL OP 0209.9	Visual Examination of Mechanical Shock Arrestors
FPL ADM 0190.85	Functional Testing of Mechanical Shock Arrestors
FPL 0-CMM-105.1	Snubber Removal and Replacement
	TPN General Maintenance items for MSA

SPC Procedures:

SPC	Quality Assurance Manual Rev. 14
SNPS-PP-3319-TPN	Project Plan
SNPS-CAL-1.2, REV. 1	Daily Verification of Test Equipment
SNPS-EXM-1.1, REV. 0	Visual Examination of Mechanical
SNPS-TST-1.1, REV. 0	Functional Testing of Pacific Scientific Mechanical Snubbers
SNPS-MNT-3.1, REV. 0	Disassembly and Repair of PSA Snubbers

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MATERIAL SUPPLIED BY FPL:

- 1) Replacement bolts, spacer washers and load pins
- 2) Safety Wire for Forward Brackets and Transition Tube Assemblies on PSA Snubbers
- 3) Washers, retainer rings, keeper rings & NRRG 159
- 4) Spare PSA 10 & PSA 35 snubbers

TURKEY POINT UNIT 4
1994 REFUELING OUTAGE

Summary of Inservice Inspection Examinations



Examination Tables

DATE: 01/19/95 (A)
REVISION: 0 (B)

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS (C)

(D) PAGE: 17

REACTOR COOLANT SYSTEM LOOP A COLD LEG (E)				N I O			
ZONE NUMBER: 4-009 (F)				S O N G T			
SUMMARY EXAMINATION AREA				T R S E H			
NUMBER IDENTIFICATION				A E I O E			
				T C G M R			
				REMARKS			
				CALIBRATION BLOCK			

SYSTEM NO. 41 (REF. DWG. NO. 5613-P-570-S SH. 1) (G)

091000	2"-RC-1305-28 (I)	(L) 8-J	PT	NDE 3.3-1	(P)	C	X	-	-	(R)
(H)	ELBOW TO PIPE (J)	(M) 89.40	UT 45	NDE 5.5-4			-	-	X	
	CTMT, 24'0" (K)		(N)	(O)			(Q)			

** (S) **

- (A) Date the report was printed
- (B) Current revision number of the report tables
- (C) Which status items were printed
- (D) Page number of the table
- (E) System designation
- (F) Zone number
- (G) System No. and Isometric drawing
- (H) Summary number of the record (administrative purposes only)
- (I) Component or weld identification number
- (J) Component or weld description
- (K) Location and/or elevation of component
- (L) ASME Code category
- (M) ASME Code item number
- (N) NDE methods used
- (O) Procedure number and data sheet
- (P) Status code for the required examinations

- A - Augmented
- B - Baseline
- C - Completed
- E - Expanded Scope
- L - Limited Examination
- P - Partial

(Q) "X" shows the type of indication found for each NDE method

N	I	O	
O	N	G	T
R	S	E	H
E	I	O	E
C	G	M	R
Other types of Indications			
Geometric Indications			
Insignificant Indications			
No Recordable Indications			

- (R) Examination remarks
- (S) Ultrasonic calibration block

Inspection Report Table Format

DATE: 01/19/95
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

PAGE: 1

REACTOR PRESSURE VESSEL

ZONE NUMBER: 4-001		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**

RPV WELDS (REF. DWG. NO. 5614-M-4000)

000100	4-WR-18	B-A	UT 1.5	NDE 5.12-1	P X - - -	10/9/94 - UT COMPLETE, EXAMINED FROM THE
	FLANGE TO UPPER SHELL	B1.30	UT 6.5	NDE 5.12-1	X - - -	FLANGE SURFACE, 50% OF WELD EXAMINATION
	CTMT		UT 11.5	NDE 5.12-1	X - - -	COMPLETE
						UT-1, UT-14

001900	4-WH-12	B-A	MT	NDE 2.2-1	L X - - -	10/12/94 - MT COMPLETE, 10/21/94 - UT
	FLANGE TO DOME WELD	B1.40	UT 0	NDE 5.1-2	X - - -	COMPLETE, ACCEPTABLE INCLUSIONS, ONE
	CTMT		UT 45	NDE 5.1-2	X - - -	SIDED EXAMINATION, LIMITED DUE TO
			UT 60	NDE 5.1-2	- - - X	LIFTING LUGS AND 'ZERO' ARROW, SEE
			UT 70	NDE 5.1-2	X - - -	RELIEF REQUEST NO. 13
						UT-2

INTERIOR OF REACTOR VESSEL

010000	VESSEL INTERIOR	B-N-1	VT-3	NDE 4.3-10	C X - - -	10/21/94 - VT-3 COMPLETE, EXAMINED
	ACCESSIBLE AREAS	B13.10				ACCESSIBLE SURFACES
	CTMT					
011793	VESSEL TO CLOSURE HEAD MATING	B-N-1	VT-3	NDE 4.3-10	C X - - -	10/21/94 - VT-3 COMPLETE, EXAMINED WITH
	SURFACE ON VESSEL	B13.10				REACTOR VESSEL INTERIOR
	CTMT					

INTERIOR OF REACTOR VESSEL

011795	VESSEL HEAD MATING SURFACE ON	B-N-1	VT-3	NDE 4.3-6	C X - - -	10/12/94 - VT-3 COMPLETE
	RPV HEAD	B13.10				
	CTMT					

REACTOR PRESSURE VESSEL BOLTING (REF. DWG. NO. 5614-M-4001)

023500	4-CH-S-1 THRU 20	B-G-1	MT	NDE 2.2-3	C X - - -	10/14/94 - MT COMPLETE, 10/16/94 - UT
	RPV STUDS	B6.30	UT 80	NDE 5.7-1	X - - -	COMPLETE
	CTMT		UT 50 FRWD	NDE 5.7-1	X - - -	
			UT 50 BACK	NDE 5.7-1	X - - -	
						UT-11

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REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 4

INSERVICE INSPECTION SUMMARY

PAGE: 2

THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)

CLASS 1 CAEPBL STATUS COMPONENTS

REACTOR PRESSURE VESSEL

ZONE NUMBER: 4-001		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**	

REACTOR PRESSURE VESSEL BOLTING (REF. DWG. NO. 5614-M-4001)

029300	4-CH-N-1 THRU 20 RPV NUTS CTMT	B-G-1 B6.10	MT UT 45	NDE 2.2-2 NDE 5.10-1	C X - - - X - - -	10/16/94 - MT AND UT COMPLETE
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UT-25

035000	4-CH-LW 1 THRU 20 RPV LARGE WASHERS CTMT	B-G-1 B6.50	VT-1	NDE 4.1-2	C X - - -	10/15/94 - VT-1 COMPLETE
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040800	4-CH-SW-1 THRU 20 RPV SMALL WASHERS CTMT	B-G-1 B6.50	VT-1	NDE 4.1-4	C X - - -	10/15/94 - VT-1 COMPLETE
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THREADS IN FLANGE (REF. DWG. NO. 5614-M-4001)

040800	4-LIG-1 THRU 20 THREADS IN FLANGE CTMT	B-G-1 B6.40	UT 0	NDE 5.12-2	C X - - -	10/9/94 - UT COMPLETE
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UT-14

DATE: 01/19/95
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

PAGE: 3

STEAM GENERATOR A PRIMARY SIDE

ZONE NUMBER: 4-003		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>(REF. DWG. NO. 5614-M-4003)</u>					
050800	4-SGA-Z HEAD TO TUBESHEET WELD CTMT	B-B B2.40	UT 0 UT 45 UT 60 UT 70	NDE 5.1-1 NDE 5.1-1 NDE 5.1-1 NDE 5.1-1	C X - - - 10/10/94 - UT COMPLETE, ACCEPTABLE - - X X INCLUSIONS AND TUBESHEET GEOMETRY - - X X X - - - **UT-8**
050900	4-SGA-I-IRS INLET NOZZLE INNER RADIUS SECTION CTMT	B-D B3.140	UT 45	NDE 5.13-1	L X - - - 10/26/94 - UT COMPLETE, LIMITED EXAMINATION DUE TO SUPPORTS, LUGS, AND VESSEL SURFACE **STEAM GENERATOR MOCKUP**
051000	4-SGA-O-IRS OUTLET NOZZLE INNER RADIUS SECTION CTMT	B-D B3.140	UT 45	NDE 5.13-1	L X - - - 10/26/94 - UT COMPLETE, LIMITED EXAMINATION DUE TO SUPPORTS, LUGS, AND VESSEL SURFACE **STEAM GENERATOR MOCKUP**
051100	4-SGA-I BOLTING INLET MANWAY BOLTING CTMT	B-G-2 B7.30	VT-1	NDE 4.1-5	C X - - - 10/15/94 - VT-1 COMPLETE
051200	4-SGA-O BOLTING OUTLET MANWAY BOLTING CTMT	B-G-2 B7.30	VT-1	NDE 4.1-3	C X - - - 10/12/94 - VT-1 COMPLETE

DATE: 01/19/95
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

PAGE: 4

SURIZER

ZONE NUMBER: 4-006

SUMMARY EXAMINATION AREA
NUMBER IDENTIFICATION

ASME

SEC. XI

CATGY

EXAM

ITEM NO

METHOD

PROCEDURE

N I O

S O N G T

T R S E H

A E I O E

T C G M R

REMARKS

CALIBRATION BLOCK

SYSTEM NO. 41 (REF. DWG. NO. 5614-M-4002)

055500 4-PZR-1 THRU 16
MANWAY BOLTING
CTMT

B-G-2
B7.20

VT-1

NDE 4.1-5

C X - - -

10/19/94 - VT-1 COMPLETE, EXAMINED DUE
TO INSTALLATION OF MANWAY PLUG

11

11



DATE: 01/19/95
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

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REACTOR COOLANT SYSTEM LOOP A INTERMEDIATE LEG

ZONE NUMBER: 4-007	ASME				N I O	
	SEC. XI				S O N G T	
SUMMARY EXAMINATION AREA	CATGY	EXAM			T R S E H	
NUMBER IDENTIFICATION	ITEM NO	METHOD	PROCEDURE		A E I O E	REMARKS
					T C G M R	**CALIBRATION BLOCK**

SYSTEM NO. 41 (REF. DWG. NO. 5614-P-766-S SH. 1)

055800	31"-RCS-1401-5 STEAM GENERATOR NOZZLE TO ELBOW CTMT	B-F B5.70	PT UT 45	NDE 3.3-3 NDE 5.5-5	L - - - X - - X -	10/11/94 - PT COMPLETE, ONE ACCEPTABLE LINEAR INDICATION, 10/11/94 - UT COMPLETE, ROOT GEOMETRY, LIMITED EXAMINATION DUE TO NOZZLE CONFIGURATION **UT-26R**
056100	31"-RCS-1401-8 ELBOW TO PIPE CTMT	B-J B9.11	PT UT 45	NDE 3.3-4 NDE 5.5-2	L X - - - - - X -	10/9/94 - PT COMPLETE, 10/11/94 - UT COMPLETE, ROOT GEOMETRY, LIMITED EXAMINATION DUE TO WELD GEOMETRY **UT-12, UT-26R, UT-46**
056300	31"-RCS-1401-10 ELBOW TO RC PUMP CASING CTMT	B-J B9.11	PT UT 45	NDE 3.3-9 NDE 5.5-5	L - - - X - - X -	10/11/94 - PT COMPLETE, 10 ACCEPTABLE LINEAR INDICATIONS, 10/11/94 - UT COMPLETE, ROOT GEOMETRY, LIMITED EXAMINATION DUE TO PUMP CONFIGURATION **UT-26R**
056500	31"-RCS-1401-16 2" BRANCH CONNECTION CTMT	B-J B9.32	PT	NDE 3.3-10	C X - - -	10/11/94 - PT COMPLETE
056540	31"-RCS-1401-23 PIPE TO CAP CTMT	B-J B9.21	PT	NDE 3.3-4	C X - - -	10/8/94 - PT COMPLETE

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REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

PAGE: 6

INSPECTION FOR COOLANT SYSTEM LOOP A HOT LEG

ZONE NUMBER: 4-008		ASME			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G H R	**CALIBRATION BLOCK**

SYSTEM NO. 41 (REF. DWG. NO. 5614-P-766-S SH. 1)

056700	29"-RCS-1404-2 PIPE TO PIPE CTMT	B-J B9.11	PT UT 45	NDE 3.3-5 NDE 5.5-3	C X - - - - - X -	10/8/94 - PT COMPLETE, 10/11/94 - UT COMPLETE, ROOT AND COUNTERBORE GEOMETRY **UT-12, UT-46**
056900	29"-RCS-1404-4 ELBOW TO STEAM GENERATOR NOZZLE CTMT	B-F B5.70	PT UT 45	NDE 3.3-5 NDE 5.5-6	L X - - - - - X -	10/8/94 - PT COMPLETE, 10/11/94 - UT COMPLETE, ROOT GEOMETRY, LIMITED EXAMINATION DUE TO NOZZLE CONFIGURATION **UT-26R**
057100	29"-RCS-1404-18 14" BRANCH CONNECTION CTMT	B-J B9.31	PT UT 45 UT 70	NDE 3.3-5 NDE 5.5-1 NDE 5.5-1	L X - - - X - - - X - - -	10/8/94 - PT COMPLETE, 10/12/94 - UT COMPLETE, NO EXAMINATION FROM THE PIPE SIDE AND LIMITED EXAMINATION FROM THE BRANCH CONNECTION SIDE DUE TO WELD CONFIGURATION, CALIBRATION BLOCK BORROWED FROM BEAVER VALLEY **BV-12-2.91-SS**

DATE: 01/19/95
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

PAGE: 7

FOR COOLANT SYSTEM LOOP A COLD LEG

ZONE NUMBER: 4-009		ASME			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
					T C G H R	**CALIBRATION BLOCK**

SYSTEM NO. 41 (REF. DWG. NO. 5614-P-766-S SH. 1)

057200	27.5"-RCS-1407-11 RC PUMP CASE TO PIPE CTMT	B-J B9.11	PT UT 45	NDE 3.3-1 NDE 5.5-4	L X - - - - - X -	10/8/94 - PT COMPLETE, 10/11/94 - UT COMPLETE, COUNTERBORE GEOMETRY, LIMITED EXAMINATION ON THE PIPE SIDE DUE TO INSTRUMENTATION LINE **UT-12, UT-46**
057300	27.5"-RCS-1407-12 PIPE TO PIPE CTMT	B-J B9.11	PT UT 45	NDE 3.3-6 NDE 5.5-4	C X - - - - - X -	10/8/94 - PT COMPLETE, 10/11/94 - UT COMPLETE, ROOT AND COUNTERBORE GEOMETRY **UT-12, UT-46**
057700	27.5"-RCS-1407-20 10" BRANCH CONNECTION CTMT	B-J B9.31	PT UT 45 UT 60 UT 70	NDE 3.3-6 NDE 5.4-8 NDE 5.4-8 NDE 5.4-8	L X - - - - - X - X - - - - - X -	10/8/94 - PT COMPLETE, 10/12/94 - UT COMPLETE, ROOT AND INNER RADIUS GEOMETRY, CALIBRATION BLOCK BORROWED FROM PRAIRIE ISLAND, NO EXAMINATION FROM THE PIPE SIDE AND LIMITED EXAMINATION FROM THE BRANCH CONNECTION SIDE DUE TO WELD CONFIGURATION **502979-PI-60**
057800	27.5"-RCS-1407-21 2" BRANCH CONNECTION CTMT	B-J B9.32	PT	NDE 3.3-1	C X - - -	10/8/94 - PT COMPLETE

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REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

PAGE: 8

REACTOR COOLANT SYSTEM LOOP B HOT LEG

ZONE NUMBER: 4-011		ASME			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
-----		-----	-----	-----	T C G M R	**CALIBRATION BLOCK**

SYSTEM NO. 41 (REF. DWG. NO. 5614-P-766-S SH. 2)

059100	29"-RCS-1405-21	B-J	PT	NDE 3.3-24	L - - - X	10/21/94 - PT COMPLETE, ONE ACCEPTABLE
	12" BRANCH CONNECTION	B9.31	UT 45	NDE 5.4-12	- - X -	ROUND INDICATION, 10/21/94 - UT
	CTMT		UT 70	NDE 5.4-12	- - X -	COMPLETE, INSIDE SURFACE AND ROOT GEOMETRY, NO EXAM FROM PIPE SIDE AND LIMITED EXAM FROM BRANCH CONNECTION SIDE DUE TO WELD CONFIGURATION, CAL BLOCK FROM BEAVER VALLEY **BV-12-2.91-SS**



REVISION: 0

INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

ZONE NUMBER: 4-012

ASME

SEC. XI

CATGY

ITEM NO

EXAM

METHOD

PROCEDURE

N I O

S O N G T

T R S E H

A, E I O E

T C G M R

REMARKS

****CALIBRATION BLOCK****

SYSTEM NO. 41 (REF. DWG. NO. 5614-P-766-S SH. 2)

060000	27.5"-RCS-1406-18	8-J	PT	NDE 3.3-19	L X - - -	10/11/94 - PT COMPLETE, 10/12/94 - UT
	10" BRANCH CONNECTION	89.31	UT 45	NDE 5.4-10	- - X -	COMPLETE, ROOT AND INNER RADIUS
	CTMT		UT 60	NDE 5.4-10	X - - -	GEOMETRY, CLAIBRATION BLOCK BORROWED
			UT 70	NDE 5.4-10	- - X -	FROM PRAIRIE ISLAND, NO EXAMINATION FROM THE PIPE SIDE AND LIMITED EXAMINATION FROM THE BRANCH CONNECTION SIDE DUE TO WELD CONFIGURATION
						502979-PI-60

DATE: 01/19/95
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

PAGE: 11

DISPOSAL SYSTEM - LIQUID, RC LOOP A DRAIN

ZONE NUMBER: 4-026		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. 61 (REF. DWG. NO. 5614-P-577-S SH. 1)

082900	2"-RC-1401-3 ELBOW TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-17	C X - - - 10/12/94 - PT COMPLETE, ONE ACCEPTABLE ROUND INDICATION
083100	2"-RC-1401-5 TEE TO REDUCING INSERT CTMT	B-J B9.40	PT	NDE 3.3-18	C X - - - 10/12/94 - PT COMPLETE, ONE ACCEPTABLE ROUND INDICATION

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TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

PAGE: 12

HEAT REMOVAL FROM RCS LOOP A HOT LEG

ZONE NUMBER: 4-036		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. 50 (REF. DWG. NO. 5614-P-574-S SH. 1)</u>						
114800	14"-RHR-1401-1 BRANCH CONNECTION TO ELBOW CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-16 NDE 5.4-2 NDE 5.4-2	L X - - - - - X - - - X -	10/13/94 - PT COMPLETE, 10/15/94 - UT COMPLETE, ROOT GEOMETRY, NO EXAMINATION FROM THE BRANCH CONNECTION SIDE AND LIMITED EXAMINATION FROM THE PIPE SIDE DUE TO WELD CONFIGURATION **UT-30**
115200	14"-RHR-1401-5 PIPE TO VALVE MOV-4-750 CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-21 NDE 5.4-3 NDE 5.4-3	L - - - X - - X - - - X -	10/13/94 - PT COMPLETE, 2 LINEAR INDICATIONS, 10/14/94 - RE-EXAMINATION OF INDICATIONS COMPLETE, 2 ACCEPTABLE INDICATIONS; 10/15/94 - UT COMPLETE, ROOT GEOMETRY, NO EXAMINATION FROM THE VALVE SIDE DUE TO ITS CONFIGURATION **UT-30**
115400	14"-RHR-1401-6 VALVE MOV-4-750 TO PIPE CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-16 NDE 5.4-1 NDE 5.4-1	L X - - - - - X - - - X -	10/13/94 - PT COMPLETE, 10/15/94 - UT COMPLETE, ROOT GEOMETRY, NO EXAMINATION FROM THE VALVE SIDE DUE TO ITS CONFIGURATION **UT-30**
115650	4-ACH-180 DOUBLE ACTING RESTRAINT CTMT	F-A F1.10B	VT-3 VT-3 WR	NDE 4.3-4 NDE 4.3-11 94015360	C - - - X X - - -	10/15/94 - VT-3 COMPLETE, STRUT WILL NOT MOVE AND BEARING IS NOT LUBRICATED (STRUT IS LOADED), 10/25/94 - VT-3 EXAMINATION COMPLETE AFTER LUBRICATION
115800	14"-RHR-1401-9 ELBOW TO PIPE CTMT	B-J B9.11	PT PT UT 45 UT 60	NDE 3.3-22 NDE 3.3-23 NDE 5.4-11 NDE 5.4-11	L - - - X - - - X - - X - - - X -	10/13/94 - PT COMPLETE, 1 UNACCEPTABLE LINEAR OUTSIDE SECTION XI AREA, 10/14/94 - PT RE-EXAM COMPLETE, ACCEPTABLE AFTER ADDITIONAL SURFACE PREP, 10/18/94 - UT COMPLETE, ROOT GEOMETRY, LIMITED EXAMINATION DUE TO WELD CONFIGURATION **UT-30**

1994, 1995, 1996, 1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 26

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TURKEY POINT NUCLEAR PLANT UNIT 4

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INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

ANNUAL HEAT REMOVAL TO RC LOOP A COLD LEG

ZONE NUMBER: 4-037		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 M R **CALIBRATION BLOCK**

SYSTEM NO. 50 (REF. DWG. NO. 5614-P-509-S SH. 1)

119450	SR-450C SPRING HANGER CTMT	F-A F1.10C	VT-3	NDE 4.3-5	C X - - - 10/15/94 - VT-3 COMPLETE
119700	10"-SI-1401-11 PIPE TO PIPE CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-11 NDE 5.4-5 NDE 5.4-5	C X - - - 10/15/94 - PT AND UT COMPLETE, ROOT - - X - GEOMETRY - - X - **UT-27**
119900	10"-SI-1401-19 2" BRANCH CONNECTION CTMT	B-J B9.32	PT	NDE 3.3-11	C X - - - 10/15/94 - PT COMPLETE
120300	10"-SI-1401-14 VALVE 4-875A TO PIPE CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-11 NDE 5.4-7 NDE 5.4-7	L X - - - 10/15/94 - PT AND UT COMPLETE, ROOT AND - - X - COUNTERBORE GEOMETRY, NO EXAMINATION - - X - FROM THE VALVE SIDE DUE TO ITS GEOMETRY **UT-27**
120650	10"-SI-1401-21 ELBOW TO PIPE CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-11 NDE 5.4-5 NDE 5.4-5	C X - - - 10/15/94 - PT AND UT COMPLETE, ROOT X - - - GEOMETRY - - X - **UT-27**
120700	10"-SI-1401-18 PIPE TO BRANCH CONNECTION CTMT	B-J B9.11	PT UT 45 UT 60	NDE 3.3-11 NDE 5.4-4 NDE 5.4-4	L X - - - 10/15/94 - PT AND UT COMPLETE, ROOT - - X - GEOMETRY, LIMITED EXAMINATION FROM THE - - X - BRANCH CONNECTION SIDE DUE TO ITS CONFIGURATION **UT-27**

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TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

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HEAD SAFETY INJECTION LOOP A INSIDE CTMT

ZONE NUMBER: 4-040		ASME	N I O				
		SEC. XI	S O N G T				
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H			
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS	
					T C G M R	**CALIBRATION BLOCK**	

SYSTEM NO. 62 (REF. DWG. NO. 5614-P-512-S SH. 2)

130400	2"-SI-1401-25 PIPE TO COUPLING CTMT	B-J B9.40	PT	NDE 3.3-12	C X - - -	10/15/94 - PT COMPLETE
130500	2"-SI-1401-26 COUPLING TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-12	C X - - -	10/15/94 - PT COMPLETE
130900	2"-SI-1401-30 ELBOW TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-12	C X - - -	10/15/94 - PT COMPLETE
131000	2"-SI-1401-31 PIPE TO BRANCH CONNECTION CTMT	B-J B9.40	PT	NDE 3.3-12	C X - - -	10/15/94 - PT COMPLETE

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TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY

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THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

HEAD SAFETY INJECTION LOOP B INSIDE CTMT

ZONE NUMBER: 4-041		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 M R **CALIBRATION BLOCK**

SYSTEM NO. 62 (REF. DWG. NO. 5614-P-513-S SH. 1)

134400	2"-SI-1402-20	B-J	PT	NDE 3.3-13	C X - - - 10/15/94 - PT COMPLETE
	ELBOW TO PIPE	B9.40			
	CTMT				



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TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

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HEAD SAFETY INJECTION LOOP A INSIDE CTMT

ZONE NUMBER: 4-043		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 M R **CALIBRATION BLOCK**
<u>SYSTEM NO. 62 (REF. DWG. NO. 5614-P-792-S SH. 2)</u>					
143040	8081-H-001-14 SPRING HANGER CTMT	F-A F1.10C	VT-3	NDE 4.3-7	C X - - - 10/15/94 - VT-3 COMPLETE
143100	2"-SI-1405-20 PIPE TO ELBOW CTMT	B-J B9.40	PT	NDE 3.3-8	C X - - - 10/15/94 - PT COMPLETE
143500	2"-SI-1404-2 PIPE TO ELBOW CTMT	B-J B9.40	PT	NDE 3.3-8	C X - - - 10/15/94 - PT COMPLETE
143900	2"-SI-1404-6 PIPE TO ELBOW CTMT	B-J B9.40	PT	NDE 3.3-8	C X - - - 10/15/94 - PT COMPLETE
144300	2"-SI-1404-10 PIPE TO BRANCH CONNECTION CTMT	B-J B9.40	PT	NDE 3.3-8	C X - - - 10/15/94 - PT COMPLETE

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TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

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HEAD SAFETY INJECTION LOOP B INSIDE CTMT

ZONE NUMBER: 4-044		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 (REF. DWG. NO. 5614-P-792-S SH. 1)						
146010	2"-SI-1406-49 PIPE TO VALVE 4-957 CTMT	B-J B9.40	PT	PC/M 93-072	B X - - -	10/17/94 - PT COMPLETE, BASELINE EXAMINATION PERFORMED BY QC, EXAMINED AS WELD FW-1 IN PC/M 93-072
146020	2"-SI-1406-50 VALVE 4-957 TO PIPE CTMT	B-J B9.40	PT	PC/M 93-072	B X - - -	10/10/94 - PT COMPLETE, BASELINE EXAMINATION PERFORMED BY QC, EXAMINED AS WELD FW-2 IN PC/M 93-072
146030	2"-SI-1406-51 PIPE TO ELBOW CTMT	B-J B9.40	PT	PC/M 93-072	B X - - -	10/17/94 - PT COMPLETE, BASELINE EXAMINATION PERFORMED BY QC, EXAMINED AS WELD FW-3 IN PC/M 93-072
146040	2"-SI-1406-52 ELBOW TO PIPE CTMT	B-J B9.40	PT	PC/M 93-072	B X - - -	10/10/94 - PT COMPLETE, BASELINE EXAMINATION PERFORMED BY QC, EXAMINED AS WELD FW-4 IN PC/M 93-072
146050	2"-SI-1406-53 PIPE TO COUPLING CTMT	B-J B9.40	PT	PC/M 93-072	B X - - -	10/19/94 - PT COMPLETE, BASELINE EXAMINATION PERFORMED BY QC, EXAMINED AS WELD FW-5 IN PC/M 93-072
146060	2"-SI-1406-54 COUPLING TO PIPE CTMT	B-J B9.40	PT	PC/M 93-072	B X - - -	10/17/94 - PT COMPLETE, BASELINE EXAMINATION PERFORMED BY QC, EXAMINED AS WELD FW-6 IN PC/M 93-072

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TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

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LOCAL & VOLUME CONTROL TO RC LOOP A COLD LEG

ZONE NUMBER: 4-046		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 M R	**CALIBRATION BLOCK**

<u>SYSTEM NO. 47 (REF. DWG. NO. 5614-P-782-S SH. 3)</u>						
160500	3"-CH-1402-34 ELBOW TO PIPE CTMT	B-J B9.21	PT	NDE 3.3-7	C X - - -	10/9/94 - PT COMPLETE
160600	3"-CH-1402-35 PIPE TO ELBOW CTMT	B-J B9.21	PT	NDE 3.3-7	C X - - -	10/9/94 - PT COMPLETE
161000	3"-CH-1402-39 PIPE TO ELBOW CTMT	B-J B9.21	PT	NDE 3.3-7	C X - - -	10/9/94 - PT COMPLETE
161100	3"-CH-1402-40 ELBOW TO PIPE CTMT	B-J B9.21	PT	NDE 3.3-7	C X - - -	10/9/94 - PT COMPLETE
161200	3"-CH-1402-41 PIPE TO ELBOW CTMT	B-J B9.21	PT	NDE 3.3-7	C X - - -	10/9/94 - PT COMPLETE
161300	3"-CH-1402-42 ELBOW TO PIPE CTMT	B-J B9.21	PT	NDE 3.3-7	C X - - -	10/9/94 - PT COMPLETE
161350	SR-942 DOUBLE ACTING RESTRAINT CTMT	F-A F1.10B	VT-3 VT-3 CR	NDE 4.3-3 NDE 4.3-9 94-1009	C - - - X X - - -	10/15/94 - VT-3 COMPLETE, LOOSE NUT AND BOLT, EVALUATED BY ENGINEERING IN THE AS-FOUND CONDITION, NO SIGNIFICANT AFFECT ON SUPPORT CAPACITY OR PIPE STRESSES, 10/22/94 - VT-3 REEXAMINATION COMPLETE AFTER BOLTING WAS TIGHTENED
161600	3"-CH-1402-45 PIPE TO BRANCH CONNECTION CTMT	B-J B9.21	PT	NDE 3.3-14	C X - - -	10/14/94 - PT COMPLETE

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TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

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MECHANICAL AND VOLUME CONTROL TO REGENERATIVE HX

ZONE NUMBER: 4-047		ASME			N I O	
		SEC. XI			S O N G T	
SUMMARY EXAMINATION AREA		CATGY	EXAM		T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
-----		-----	-----	-----	T C G M R	**CALIBRATION BLOCK**
<u>SYSTEM NO. 47 (REF. DWG. NO. 5614-P-551-S SH. 1)</u>						
163050	4-VCH-63	F-A	VT-3	NDE 4.3-2	C - - - X	10/15/94 - VT-3 COMPLETE, LOOSE NUT AT
	DOUBLE ACTING RESTRAINT	F1.10B	VT-3	NDE 4.3-8	X - - -	BOTTOM OF BEAM, EVALUATED BY ENGINEERING
	CTMT		CR	94-1008		IN THE AS-FOUND CONDITION AND FOUND TO
						NOT HAVE ANY SIGNIFICANT AFFECT ON
						SUPPORT CAPACITY OR PIPE STRESSES,
						10/22/94 - VT-3 REEXAMINATION COMPLETE
						AFTER NUT WAS TIGHTENED
163100	3"-CH-1403-5	B-J	PT	NDE 3.3-15	C X - - -	10/15/94 - PT COMPLETE
	PIPE TO ELBOW	B9.21				
	CTMT					

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TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

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MECHANICAL & VOLUME CONTROL SEAL INJECTION LOOP A

ZONE NUMBER: 4-050		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. 47 (REF. DWG. NO. 5614-P-556-S SH. 1)					
174700	2"-CH-1403-26 PIPE TO FLANGE CTMT	B-J B9.40	PT	NDE 3.3-2	C X - - - 10/10/94 - PT COMPLETE
174750	2"-CH-1403-FB FLANGE BOLTING CTMT	B-G-2 B7.50	VT-1	NDE 4.1-1	C X - - - 10/10/94 - VT-1 COMPLETE
174800	2"-CH-1403-27 FLANGE TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-2	C X - - - 10/10/94 - PT COMPLETE
174900	2"-CH-1403-28 PIPE TO ELBOW CTMT	B-J B9.40	PT	NDE 3.3-2	C X - - - 10/10/94 - PT COMPLETE
175000	2"-CH-1403-29 ELBOW TO PIPE CTMT	B-J B9.40	PT	NDE 3.3-2	C X - - - 10/10/94 - PT COMPLETE
175500	1.5"-CH-1401-FB FLANGE BOLTING CTMT	B-G-2 B7.50	VT-1	NDE 4.1-6	C X - - - 10/19/94 - VT-1 COMPLETE
175700	1.5"-CH-1401-4 PIPE TO FLANGE CTMT	B-J B9.40	PT	NDE 3.3-2	C X - - - 10/10/94 - PT COMPLETE

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TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

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MECHANICAL & VOLUME CONTROL SEAL INJECTION LOOP B

ZONE NUMBER: 4-051		ASME	N I O		
		SEC. XI	S O N G T		
SUMMARY EXAMINATION AREA		CATGY	EXAM	T R S E H	
NUMBER	IDENTIFICATION	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
					T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 47 (REF. DWG. NO. 5614-P-554-S SH. 1)

179210	2"-CH-1404-28 PIPE TO VALVE 4-298E CTMT 24'8"	B-J B9.40	PT	WO# 94016568	B X - - -	10/17/94 - BASELINE PT COMPLETE, EXAMINATION PERFORMED BY QC
179250	VALVE 4-298E VALVE CTMT	---	---	WO# 94016568	B - - - -	10/17/94 - NEW VALVE INSTALLED
179300	2"-CH-1404-29 VALVE 4-298E TO PIPE CTMT	B-J B9.40	PT	WO# 94016568	B X - - -	10/17/94 - BASELINE PT COMPLETE, EXAMINATION PERFORMED BY QC
179310	2"-CH-1404-40 PIPE TO TEE CTMT	B-J B9.40	PT	WO# 94016568	B X - - -	10/17/94 - BASELINE PT COMPLETE, EXAMINATION PERFORMED BY QC

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TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

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MECHANICAL & VOLUME CONTROL SEAL INJECTION LOOP C

ZONE NUMBER: 4-052		ASME	N I O		
		SEC. XI	S O N G T		
		CATGY EXAM	T R S E H		
SUMMARY	EXAMINATION AREA	ITEM NO	METHOD	PROCEDURE	A E I O E REMARKS
NUMBER	IDENTIFICATION				T C G M R **CALIBRATION BLOCK**

SYSTEM NO. 47 (REF. DWG. NO. 5614-P-555-S SH. 1)

181900	2"-CH-1405-1	B-J	PT	CWO 501480	B X - - - 10/21/94 - PT COMPLETE, BASELINE
	VALVE 4-298C TO PIPE	B9.40			EXAMINATION PERFORMED BY QC, CWO 501480
	CTMT				

DATE: 01/19/95
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

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FOR COOLANT PUMP A

ZONE NUMBER: 4-056		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 M R **CALIBRATION BLOCK**

SYSTEM NO. 41 (REF. DWG. NO. 5614-M-4006)

196900	4-RCP-FSA-1 THRU 24 FLANGE STUDS CTMT	B-G-1 B6.180	UT 80 UT 52 UT 52	NDE 5.7-2 NDE 5.7-2 NDE 5.7-2	P X - - - X - - - X - - -	10/22/94 - UT COMPLETE, EXAMINED 21 STUDS, 3 STUDS NOT EXAMINED DUE TO INTERFERENCE FROM ADJACENT LINES (STUDS 5, 6, AND 11), STUDS WILL BE SCHEDULED FOR EXAMINATION WHEN INTERFERENCES ARE REMOVED **UT-18**
197100	4-RCP-FNA-1 THRU 24 FLANGE NUTS CTMT	B-G-1 B6.200	VT-1	NDE 4.1-7	C X - - -	10/24/94 - VT-1 COMPLETE, EXAMINED 24 NUTS
197300	4-RCP-A-FLYWHEEL FLYWHEEL CTMT	RG 1.14	MT UT 10	NDE 2.2 NDE 5.15-1	C - - - - X - - -	10/17/94 - UT COMPLETE, NO SURFACE EXAMINATIONS REQUIRED THIS OUTAGE



DATE: 01/19/95
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

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FOR COOLANT PUMP C

ZONE NUMBER: 4-058		ASME	N I O			
		SEC. XI	S O N G T			
		CATGY	EXAM	T R S E H		
SUMMARY	EXAMINATION AREA	ITEM NO	METHOD	PROCEDURE	A E I O E	REMARKS
NUMBER	IDENTIFICATION				T C G M R	**CALIBRATION BLOCK**

SYSTEM NO. 41 (REF. DWG. NO. 5614-M-4008)

199100	4-RCP-C-FLYWHEEL	RG 1.14	MT	NDE 2.2	C - - - -	10/17/94 - UT COMPLETE, NO SURFACE
	FLYWHEEL		UT 10	NDE 5.15-2	X - - -	EXAMINATIONS REQUIRED THIS OUTAGE
	CTMT					

DATE: 01/19/95
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 1 CAEPBL STATUS COMPONENTS

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PHYSICAL & VOLUME CONTROL, REGENERATIVE HEAT EXCH

ZONE NUMBER: 4-059		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 M R	**CALIBRATION BLOCK**	
-----		-----	-----	-----	-----	-----	
(REF. DWG. NO. 5614-M-4009)							
199290	RGX 4E200	---	VT-2	NDE 4.2-1	/ C X - - -	10/4/94 - VT-3 COMPLETE, 11/10/94 - VT-2	
	VISUAL FOR LEAKAGE	---	VT-3	NDE 4.3-1	X - - -	COMPLETE	
	CTMT						



DATE: 01/19/95
REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 4
INSERVICE INSPECTION SUMMARY
THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)
CLASS 2 CAEPBL STATUS COMPONENTS

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FEEDWATER SYSTEM LOOP A

ZONE NUMBER: 4-111		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 M R **CALIBRATION BLOCK**

SYSTEM NO. 74 (REF. DWG. NO. 5614-P-557-S SH. 1)

284460	AUGMENTED EXAM	AUG	UT 45	NDE 5.16-1	C - - X - 10/8/94 - UT COMPLETE, ROOT AND
	FROM NOZZLE RAMP TO 1 PIPE		UT 60	NDE 5.16-1	- - X - COUNTERBORE GEOMETRY AT THE
	DIA. ON ELBOW				CIRCUMFERENTIAL WELDS

UT-20, UT-29

DATE: 01/19/95

REVISION: 0

TURKEY POINT NUCLEAR PLANT UNIT 4

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INSERVICE INSPECTION SUMMARY

THIRD INTERVAL, FIRST PERIOD, FIRST OUTAGE (94RF)

CLASS 2 CAEPBL STATUS COMPONENTS

FEEDWATER SYSTEM LOOP B

ZONE NUMBER: 4-112		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 (REF. DWG. NO. 5614-P-558-S SH. 1)

286980	AUGMENTED EXAM FROM NOZZLE RAMP TO 1 PIPE DIA. ON ELBOW	AUG	UT	NDE 5.16-2	C - - X X	10/8/94 - UT COMPLETE, ROOT, COUNTERBORE, AND CHILL RING GEOMETRY FOUND AT CIRCUMFERENTIAL WELDS, ACCEPTABLE INSIDE SURFACE ANOMOLIES **UT-20, UT-29**
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289650	AUGMENTED EXAM	AUG	UT 45	NDE 5.16-3	C - - X -	10/8/94 - UT COMPLETE, ROOT AND
	FROM NOZZLE RAMP TO 1 DIA. ON		UT 60	NDE 5.16-3	- - X -	COUNTERBORE GEOMETRY AT THE
	ELBOW					CIRCUMFERENTIAL WELDS, ACCEPTABLE INSIDE
						SURFACE ANOMOLIES
						UT-20, UT-29

