



January 26, 2018
L-2018-028
10 CFR 50.55a

U. S. Nuclear Regulatory Commission
Attn: Document Control Desk
Washington, D. C. 20555-00001

Re: Turkey Point Unit 4
Docket No. 50-251
Inservice Inspection Program
Owner's Activity Report (OAR-1)

Attached find the Owner's Activity Report (Form OAR-1), for Turkey Point Unit 4 Fifth Inservice Inspection Interval, First Period, Second Outage (PTN 4-30). The Form OAR-1, Owner's Activity Report, implements Code Case N-532-5.

Should there be any questions concerning this report, please contact Mr. Mitch Guth, Licensing Manager, at 305-246-6698.

Sincerely,

A handwritten signature in black ink, appearing to read 'Mitch Guth'.

Mitch Guth
Licensing Manager
Turkey Point Nuclear Plant

SM
Attachment

cc: Regional Administrator, Region II, USNRC
Senior Resident Inspector, USNRC, Turkey Point Plant

AD47
NRR

FORM OAR-1 OWNER'S ACTIVITY REPORT

Plant: Turkey Point Nuclear Power Plant Unit 4
9760 SW 344th Street
Homestead, Florida 33035

Commercial Service Date: September 7, 1973

Refueling Outage No.: PTN 4-30

Current Inspection Interval: ISI-Fifth, IWE-Second and IWL-Second

Current Inspection Period: ISI Fifth Interval-First, IWE-Third and IWL-45th Year

Edition and Addenda of Section XI applicable to the inspection plans: ISI Fifth Interval-2007 Edition with Addenda through 2008, IWE & IWL-2001 ASME Section XI 2001 Addition through 2003 Addenda.

Date and Revision of inspection plans: ISI Fifth Interval Effective-June 22, 2016 Rev.1, and IWE-April 5, 2016, Rev.1 and IWL-May, 23, 2016 Rev.1

Edition and Addenda of Section XI applicable to repairs and replacements, if different than the inspection plan: ASME Section XI 2007 Edition through 2008 Addenda, IWE & IWL ASME Section XI 2001 Edition through the 2003 Addenda.

Code Cases Used: Approved Code Cases listed in Inspection Plan

CERTIFICATE OF CONFORMANCE

I 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) the repair/replacement activities and evaluations supporting the completion of PTN4-30 conform to the requirements of Section XI.

Signed



FEET PROGRAMS EVAL MGR.

Owner or Owner's Designee, Title

R. D. GIL

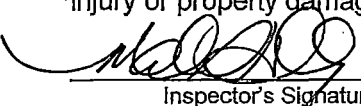
Date

1/24/18

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Georgia and employed by the Hartford Steam Boiler Inspection and Insurance Company of Connecticut have inspected the items described in this Owner's Activity Report, and state that, to the best of my knowledge and belief, the Owner has performed all activities represented by this report in accordance with the requirements of Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the repair/replacement activities and evaluation described in this 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.


Inspector's Signature

Commissions

NB 14292 I, N, R GA 983

National Board, State, Province and Endorsements

Date

JANUARY 26, 2018

All items identified in this OAR-1 meet the requirements of Section XI. Additional NIS-2A packages not required to be listed in Table 2 are still under review and being tracked via the corrective action program.

FORM OAR-1 OWNER'S ACTIVITY REPORT

TABLE 1 ITEMS WITH FLAWS OR RELEVANT CONDITIONS THAT REQUIRED EVALUATION FOR CONTINUED SERVICE		
Examination Category and Item Number	Item Description	Evaluation Description
None	None	None

FORM OAR-1 OWNER'S ACTIVITY REPORT

TABLE 2 ABSTRACT OF REPAIR/REPLACEMENT ACTIVITIES REQUIRED FOR CONTINUED SERVICE				
Code Class	Item Description	Description Of Work	Date Completed	Repair/Replacement Plan Number
None	None	None	None	None