

LICENSEE EVENT REPORT

CONTROL BLOCK:

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

01 M N P I N 1 0 0 - 0 0 0 0 0 - 0 0 3 4 1 1 1 1 4

7 8 9 14 15 25 26 30 31 32 33 34 35 36 37 38 39 40

LICENSEE CODE LICENSE NUMBER LICENSE TYPE

CONT

01 REPORT SOURCE L 6 0 5 0 0 0 2 8 2 0 5 3 1 7 9 6 0 6 2 9 7 9

7 8 60 61 68 69 74 75 80 81 82 83 84 85 86 87 88 89 90

DOCKET NUMBER EVENT DATE REPORT DATE

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

02 As a result of management review of the surveillance program, it was discovered that

03 SP-1187, Diesel Fire Pump Weekly Battery Inspection, was not performed the fifth week

04 of January 1979. Functional test of the diesel fire pump the same week proved over-

05 ability of the battery. Not repetitive. No effect on public health and safety. Sub-

06 sequent inspections have a been satisfactory.

07

08

09

SYSTEM CODE CAUSE CODE CAUSE SUBCODE COMPONENT CODE COMP. SUBCODE VALVE SUBCODE

9 10 11 12 13 14 15 16

A B D Z Z Z Z Z Z Z Z

17 LER/RO REPORT NUMBER 7 9 0 1 8 0 3 L 0

21 22 23 24 25 26 27 28 29 30 31 32

EVENT YEAR SEQUENTIAL REPORT NO. OCCURRENCE CODE REPORT TYPE REVIEW NO.

33 34 35 36 37 38 39 40 41 42 43 44

ACTION TAKEN FUTURE ACTION EFFECT ON PLANT SHUTDOWN METHOD HOURS ATTACHMENT SUBMITTED NPD-4 FORM SUB PRIME COMP SUPPLIER COMPONENT MANUFACTURER

G G Z Z 0 0 0 0 N N Z Z 9 9 9 9

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

10 The data sheet for this test is used for one month and contained only four signature

11 blocks. Procedure has been changed so there is a fifth signature block for the

12 months that have five weekly inspections.

13

14

15 FACILITY STATUS % POWER OTHER STATUS METHOD OF DISCOVERY DISCOVERY DESCRIPTION

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

E 1 0 0 N/A A Review of surveillance program

16 ACTIVITY CONTENT RELEASED OF RELEASE AMOUNT OF ACTIVITY LOCATION OF RELEASE

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

Z Z NA NA

17 PERSONNEL EXPOSURES NUMBER TYPE DESCRIPTION

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

0 0 0 Z NA

18 PERSONNEL INJURIES NUMBER DESCRIPTION

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

0 0 0 NA

19 LOSS OF OR DAMAGE TO FACILITY TYPE DESCRIPTION

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

Z NA

20 PUBLICITY ISSUED DESCRIPTION

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

N NA

POOR ORIGINAL

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