

CONTROL BLOCK:

							(1)
--	--	--	--	--	--	--	-----

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

0	1	G	A	E	I	H	2	2	0	0	-	0	0	0	0	0	-	0	0	3	4	1	1	1	1	4			5	
7	8	LICENSEE CODE						14	15	LICENSE NUMBER										25	26	LICENSE TYPE					30	57	CAT 58	

CON'T

0	1
---	---

REPORT SOURCE

L	6	0	5	0	0	0	3	6	6	7	0	8	1	3	8	0	8	1	2	1	6	8	2	9
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

DOCKET NUMBER

EVENT DATE

REPORT DATE

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

[02] | While performing routine surveillance on the Torus/Drywell Vacuum

03 | Breakers per Tech. Specs. Section 4.6.4.1.A, the "J" Vacuum Breaker fail,

04 | ed to give the proper light indication. On 8/27/80, while performing

05 | surveillance per Tech. Specs. Section 3.6.4.1.A, the "I" Vacuum Breaker

06 | failed to give the proper light indication. The health and safety of the

[07] public were not affected by this repetitive event as last reported on

08 | LER 50-366/1980-108.

0 9		SYSTEM CODE		CAUSE CODE		CAUSE SUBCODE		COMPONENT CODE				COMP. SUBCODE		VALVE SUBCODE			
7	8	S	A	E		B		V	A	L	V	O	P	D	Z		
		9	10	11	12	13		14					15	16			
LER/RO REPORT NUMBER		EVENT YEAR		SEQUENTIAL REPORT NO.		OCCURRENCE CODE		REPORT TYPE		REVISION NO.							
17		8	0		1	2	4		0	3	X	1					
		21	22	23	24	25	26	27	28	29	30	31					
ACTION TAKEN		FUTURE ACTION		EFFECT ON PLANT		SHUTDOWN METHOD		HOURS		ATTACHMENT SUBMITTED		NPRD-4 FORM SUB.		PRIME COMP. SUPPLIER		COMPONENT MANUFACTURER	
E		Z		Z		Z		0	0	0	0	N		N		N	
33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

1 0 The air control valves were found to be out of adjustment. The air

11 control valves were adjusted and the "J" and "I" Vacuum Breakers were

[1][2] | satisfactorily functionally tested per the "SUPPRESSION CHAMBER TO DRY-

[1][3] | WELL VACUUM BREAKER SYSTEM OPERABILITY" procedure and returned to

[1] 4 | service on September 29, 1980.

FACILITY STATUS % POWER OTHER STATUS METHOD OF DISCOVERY DISCOVERY DESCRIPTION

1 5 E 28 0 9 9 29 NA B 31 Operator Observation 32

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

ACTIVITY CONTENT
RELEASED OF RELEASE

1 6 Z 33 Z 34

AMOUNT OF ACTIVITY (35) NA

LOCATION OF RELEASE (36) NA

PERSONNEL EXPOSURES									
NUMBER			TYPE	DESCRIPTION					
1	7	0	0	0	(37) Z (38) NA				

PERSONNEL INJURIES		80	
NUMBER	DESCRIPTION	(41)	
1 8	0 0 0 (40)	NA	

1		9		Z		42		NA		43		80	
1		9		Z		42		NA		43		80	

8 9 10
PUBLICITY
ISSUED DESCRIPTION (45) NA
2 0 N (44) S
8212300325 821216
PDR ADOCK 05000366
S PDR
NRC USE ONLY
80

NAME OF PREPARER S. B. Tipps

PHONE (912) 367-7851