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ALL REQUIRED INFORMATION)

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

CON'T

0	1
7	8

REPORT SOURCE

L	6	0	5	0	0	0	4	1	6	7	0	1	1	2	8	3	8	0	2	1	1	8	3	9
60	61	DOCKET NUMBER						68	69	EVENT DATE						74	75	REPORT DATE						80

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

0 2 | On January 12, an alarm was received for two fire rated doors in the Auxiliary
0 3 | Building (1A211, N. Stairwell and 1A215, S. Stairwell) and would not reset. The
0 4 | following day an alarm was received for a fire rated temporary door in the Control
0 5 | Building (OCT05, 133 feet elevation - west side) and would not reset. The event had
0 6 | no effect on the health and safety of the public and did not constitute a threat
0 7 | to plant safety. Hourly fire watches were established in accordance with T.S.3.7.7.
0 8 | The event is reported pursuant to T.S.6.9.1.13.b.

09		SYSTEM CODE A B		11	CAUSE CODE X		12	CAUSE SUBCODE Z		13	COMPONENT CODE Z Z Z Z Z Z						14	COMP. SUBCODE Z		15	VALVE SUBCODE Z		16
7	8	9	10		11	12		12		13						14		15		16			
17		LER RD REPORT NUMBER		EVENT YEAR 8 3		21	22	SEQUENTIAL REPORT NO. 0 2 2		24	25	26	OCCURRENCE CODE 0 3		28	29	REPORT TYPE L		30	REVISION NO. 0		32	
33		ACTION TAKEN X		18	FUTURE ACTION Z		19	EFFECT ON PLANT Z		20	SHUTDOWN METHOD Z		21	HOURS 0 0 0		22	23	ATTACHMENT SUBMITTED N		24	NPRD-4 FORM SUB. N		25
33		34		35		36		37		38		39		40		41		42		43		44	
33		PRIME COMP. SUPPLIER Z		25	COMPONENT MANUFACTURER Z 9 9 9		26															47	
33		34		35		36		37		38		39		40		41		42		43		44	

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

1 0 | The alarms were cleared and the doors were restored to operability on January

1 1 | 14. A maintenance investigation revealed the following: OCT05 required adjustment

1 2 | of a limit switch and 1A211 required replacing the door strike. The alarm for door

1 3 | 1A215 is attributed to spurious actuation. This is a final report.

1 4 | _____

FACILITY STATUS			% POWER			OTHER STATUS			METHOD OF DISCOVERY			DISCOVERY DESCRIPTION		
1	5	G	0	0	0	NA			A	Planned Condition				
ACTIVITY CONTENT			AMOUNT OF ACTIVITY			LOCATION OF RELEASE								
1	6	Z	Z	NA		NA								
PERSONNEL EXPOSURES			DESCRIPTION											
1	7	0	0	0	Z	NA								
PERSONNEL INJURIES			DESCRIPTION			8302170362 830211								
1	8	0	0	0		NA			PDR ADOCK 05000416					
LOSS OF OR DAMAGE TO FACILITY			DESCRIPTION						S PDR					
1	9	Z	NA											
PUBLICITY			DESCRIPTION						NRC USE ONLY					
2	0	N	NA											

NAME OF PREPARER Original signed by Ron Byrd

PHONE