

INDIANA & MICHIGAN ELECTRIC COMPANY

P.O. BOX 16631
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January 27, 1984
AEP:NRC:0870

Donald C. Cook Nuclear Plant
Docket Nos. 50-315 and 50-316
License Nos. DPR-58 and DPR-74
NRC REPORT NO. 50-315/83-18(DE); 50-316/83-19(DE)

Mr. James G. Keppler
U. S. Nuclear Regulatory Commission
Region III
799 Roosevelt Road
Glen Ellyn, Illinois 60137

Dear Mr. Keppler:

This letter responds to Mr. R. L. Spessard's letter dated December 30, 1983, which forwarded the subject Inspection Report of the special safety inspection conducted by your staff at AEPSC Corporate Offices and at the Donald C. Cook Nuclear Plant during the periods of June 27 through July 1, and October 18-20, 1983. The Notice of Violation attached to Mr. Spessard's letter identified ten (10) items on noncompliance. Our response to each noncompliance is contained in the attachment to this letter.

The ten (10) items of noncompliance were also the subject of your November 17, 1983 Confirmatory Action Letter which we responded to on January 20, 1984 (AEP:NRC:0858).

Nine (9) of the ten (10) items of noncompliance pertain to deficiencies in the AEPSC Nuclear Safety and Design Review Committee (NSDRC) activities. For these nine (9) items, our "Actions Taken To Preclude Recurrence" consist partially of revising the NSDRC and NSDRC Subcommittee charters and procedures to ensure that all commitments and requirements will be met. The revised charters and/or procedures will set forth in part:

- The responsibilities of each committee.
- The committee membership.
- How the committee will conduct their business.
- That committee meeting minutes will be generated and that minority opinions will be documented in these minutes.
- That committee meeting minutes and reports will be distributed to all NSDRC members and alternates.

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- The review and approval process for committee minutes and reports.
- Committee membership training.
- Maintenance and management of committee records.

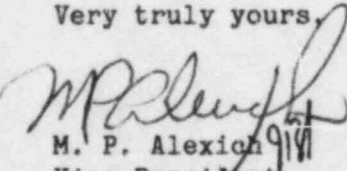
The schedule for charter and procedure revision is as follows:

- NSDRC Charter - Revision 0 approved 1/10/84*
- NSDRC Procedures - approved 1/10/84
- Subcommittee Charters - approved 1/10/84
- Subcommittee Procedures - 3/31/84

*NSDRC Charter has been incorporated into the NSDRC Procedures Manual. Revision 8 of the old charter is now designated as Revision 0.

This document has been prepared following Corporate procedures which incorporate a reasonable set of controls to ensure its accuracy and completeness prior to signature by the undersigned.

Very truly yours,


M. P. Alexich
Vice President

MPA/jb

cc: John E. Dolan
W. G. Smith, Jr. - Bridgman
R. C. Callen
G. Charnoff
E. R. Swanson, NRC Resident Inspector - Bridgman

bc: J. G. Feinstein/P. A. Barrett
H. N. Scherer, Jr./S. H. Horowitz/R. C. Carruth
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ATTACHMENT

ITEM 1

Technical Specification 6.5.2.7.e requires the Nuclear Safety and Design Review Committee (NSDRC) to review "Violations of codes, regulations, orders, technical specifications, license requirements, or internal procedures or instructions having nuclear safety significance."

Contrary to the above, the reviews performed by the NSDRC did not include all NRC inspection findings, QA audit findings, and significant non-reportable condition reports which involved violations of technical specifications or internal procedures having nuclear safety significance. Examples of NRC inspection findings not reviewed by the NSDRC included:

- a. Noncompliance identified in NRC Inspection Report 315/81-08; 316/81-12 regarding adherence to procedures governing QA documentation of material.
- b. Noncompliance regarding violation of the Limiting Condition for Operation on spray additive tanks identified in NRC Inspection Report 315/81-05; 316/81-05.
- c. Three security related violations identified in NRC Inspection Report 315/81-04; 316/81-04.
- d. Violations described in Paragraphs 5 and 7 of NRC Inspection Report 315/81-09; 316/81-13 regarding the performance of surveillances and adherence to procedures.

This is a Severity Level IV violation (Supplement I).

RESPONSE TO ITEM 1

1. Corrective Action Taken

To ensure that conditions adverse to safety have not gone undetected, a historical review of Condition Reports, Noncompliance Reports, IE Inspection Reports and 10CFR21 data packages will be performed by the NSDRC Subcommittee on Corporate and Plant Occurrences utilizing the new Subcommittee procedures. To date there have been approximately 5146 condition Reports, 62 Noncompliance Reports, 280 IE Inspection Reports and 44 10CFR21 Data Packages generated. A statistical, random sample of 591 Condition Reports and 32 NRC Inspection reports will be reviewed. All of the AEPSC Noncompliance and 10CFR21 Data packages will be reviewed there reviews will be completed by April 1, 1985; and findings reported to the NSDRC.

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The procedures for the historical reviews will include criteria specifying corrective action to be taken should significant safety or quality concerns be found to exist. The statistical random samples will be deemed as representative of the effectiveness of past practices and activities in precluding the generation of significant safety or quality concerns provided the historical reviews do not identify any such concerns.

2. Actions Taken To Preclude Recurrence

The Subcommittee on Corporate and Plant Occurrences, has been and currently is reviewing Licensee Event Reports for adequacy of corrective action. Commencing April 1, 1984, the NSDRC Subcommittee on Corporate and Plant Occurrences will expand it's review to include evaluating all violations of codes, regulations, orders, Technical Specifications, license requirements or internal procedures or instructions. Such violations are documented in Licensee Event Report, Cook Plant Condition Reports, AEPSC Noncompliance Reports, NRC Inspection Reports, and 10CFR21 Data Packages. These reviews and evaluation will determine whether significant safety problems exist or are developing and whether the corrective actions taken were adequate.

3. Date of Full Compliance

Full compliance will be scheduled as follows:

- Corrective Action will be completed by April 1, 1985
- Actions Taken to preclude Reoccurrence - April, 1, 1984.

Item 2

2. 10CFR50, Appendix B, Criterion II, requires regular reviews of the status and adequacy of the quality assurance program.

The QA Program for the Donald. C. Cook Nuclear Plant, Section 1.2.2, sic.[1.7.4.2] 1.7.4.2 requires that the NSDRC regularly assess the scope, implementation, and effectiveness of the QA Program to comply with 10 CFR 50, Appendix B,, Criteria.

ANSI N18.7-1976, Paragraph 4.5, states in part, "Periodic review of the audit program shall be performed by the independent review body or by a management representative at least semiannually to assure that audits are being accomplished in accordance with requirements of technical specification and of this Standard."

Contrary to the above, the NSDRC did not periodically review the audit program. audit reports, and audit results in order to assess the scope implementation, and effectiveness of the QA program.

This is a Severity Level IV violation (Supplement I).

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Response to Item 2

1. Corrective Actions Taken

The NSDRC Subcommittee on Audits has now identified all NSDRC audit reports for the last three (3) audit cycles which have not been subjected to all of the reviews as described under actions taken to preclude reoccurrence for this item. As a remedial action, the Audit Subcommittee will conduct reviews, for status and adequacy of these reports. These reviews, carried out in accordance with detailed review methods contained in the new Subcommittee Procedures, will be completed by June 30, 1984. The reason for limiting the remedial review to the past three (3) audit cycles is that any deficiencies would have reoccurred during this period and would have been identified during subsequent audits on the same subject during the three (3) cycles.

In addition, the Chairman of the NSDRC has solicited proposals from several outside consultants to perform an indepth review of the Quality Assurance programs for the Donald C. Cook Nuclear Plant. It is anticipated that this review will be completed by June 1, 1984.

2. Actions Taken To Preclude Recurrence

The charter for the NSDRC Subcommittee on Audits has been extensively revised to define expanded responsibilities and contains the following significant features:

- NSDRC Audits of facility and committee activities to be performed by the AEPSC QA Division under the cognizant of the NSDRC.
- Audit teams will be comprised of a fully qualified Lead Auditor and usually include a regular or alternate member of the NSDRC as Audit Team Leader.
- The requirements for independent reviews of NSDRC Audit Reports, the QA Program and QA Audit Reports.

The procedures for the Subcommittee on Audits have been completely rewritten to strengthen the NSDRC audit program and to formalize the Subcommittee's expanded review functions and to institute reporting of audit findings and results of independent reviews to the NSDRC. Significant features of the new procedures are as follows:

- Definition of the interface and delineation of the responsibilities for the conduct of NSDRC Audits between the AEPSC QA Department and the Subcommittee.

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- Detailed methods for the review and analysis of each NSDRC audit report for scope and depth of audits, and for the review of NSDRC audit reports for trends detrimental to quality and implications of findings to establish the status and adequacy of the NSDRC Audit Program.
- Detailed instructions for the independent review each six months, of the QA audit program and of QA audit reports for significant findings in order to ensure adequacy and status of the QA Audit Program.

Described below are some of the new review functions and the dates when instituted:

- Since January 1982, audit team leaders have been supplied, for their review, with past audits covering their assigned audit subjects. In many instances, their audit plans covered items of apparent weaknesses in previous audits.
- Since January 1983, NSDRC audit reports have been reviewed by the members of the NSDRC.
- Since June 1982, AEPSC QA audit reports have been reviewed by the Subcommittee for trends and the effectiveness of the QA program.

3. Date of Full Compliance

Corrective actions will be completed and full compliance achieved by June 1, 1984.

Item 3

Technical Specification 6.5.2.7.1 requires the NSDRC to review the "reports and meeting minutes of the PNSRC."

Contrary to the above, the Plant Nuclear Safety Review Committee (PNSRC) reports and minutes were not reviewed by the NSDRC.

This is a Severity IV violation (Supplement I).

Response to Item 3

1. Corrective Action Taken

A historical review of PNSRC meeting minutes will be performed by the NSDRC Subcommittee on Corporate and Plant Occurrences on a statistical random sample of 125 meeting minutes prior to meeting number 1450. This review will be completed by December 31, 1984, and findings reported to the NSDRC.

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2. Actions Taken to Preclude Recurrences

Starting with the minutes of Plant Nuclear Safety Review Committee (PNSRC) November, 1983 meeting number 1450, the Subcommittee on Corporate and Plant Occurrences will review the minutes of each PNSRC meeting to ensure that conditions adverse to safety were adequately controlled.

3. Date of Full Compliance

Full compliance will be achieved by December 31, 1984.

Item 4

Technical Specification 6.5.2.8.a requires an audit under the cognizance of the NSDRC of "the conformance of facility operation to provisions contained within the Technical Specification and applicable license conditions at least once per 12 months."

Contrary to the above, NSDRC audits failed to examine the Technical Specification Limiting Conditions for Operation or the NSDRC Activities.

This is a Severity Level IV violation (Supplement I).

Response to Item 4

1. Corrective Actions Taken

Since an audit is a "snapshot" taken at a specific time, corrective actions for this item are not feasible. Therefore, we are taking the following actions to preclude recurrence.

2. Action Taken to Preclude Recurrence

Effective January 1, 1984, the AEPSC QA Department, at the direction of the AEPSC Nuclear Safety and Design Review Committee (NSDRC), will initiate a program to audit facility conformance to Technical Specifications. This program will be comprised of two parts; (1) verification that Technical Specification surveillance requirements and license conditions are being met and (2) verification that Limiting Conditions for Operation (LCO) are being met and that the Action Statement is complied with.

For the surveillance verification portion, the program will audit each section of the Technical Specifications for each unit twice per year on a sampling basis. Each audit will focus on a different surveillance requirements and its associated procedure(s).

The verification of compliance with LCOs will be accomplished by review of daily control room logs with the auditor noting any action statement entries. Depending upon the number of action statement entries all, or a significant sample, will be audited for Action Statement compliance.

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The NSDRC Audit Subcommittee will review and the NSDRC will approve the audit plans for this program. The Subcommittee will review the resulting audit reports and will report those items deemed to have significant importance to plant safety to the full NSDRC. The Subcommittee will utilize this program for its audits focusing on areas that appear to have problems as determined by this program.

The AEPSC QA Department will develop a plan to ensure that applicable license conditions are audited either as part of the NSDRC or AEPSC QA audit programs. A complete review of the Cook Plant license has been initiated by AEPSC QA to; (1) confirm the applicable license conditions, (2) determine whether these conditions are currently being audited and by whom, and (3) generate revisions to audit schedules to accommodate those conditions not currently being audited. This effort will be completed by April 15, 1984 and the results communicated to the NRC by May 1, 1984 as an update to our Regulatory Performance Improvement Program (R.P.I.P.)

3. Date of Full Compliance

Full compliance will be achieved by May 1, 1984.

Item 5

10CFR50, Appendix B, Criterion XVIII, requires audits to determine the effectiveness of the licensee's QA program.

The QA Program for the Donald C. Cook Nuclear Plant, Section 1.7.4.10, requires that the NSDRC conduct periodic audits of plant operations pursuant to established criteria.

ANSI N45.2.12-1977, to which the licensee is committed, requires in Paragraph 4.4.4 that each audit report include a summary of results which includes "an evaluation statement regarding the effectiveness of the quality assurance program elements which were audited."

Contrary to the above, most of the NSDRC audit reports for audits conducted over the last several years contained no evaluation statements.

This is a Severity Level IV violation (Supplement I).

Response to Item 5

1. Corrective Actions Taken

Please refer to "Corrective Actions Taken" for Item 2 above.

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2. Action Taken to Preclude Recurrence

NSDRC audits are being conducted in accordance with QA procedures which require an evaluation regarding the effectiveness of the QA program elements audited in the broader aspect of safety plant operation, of which QA is an integral part. The NSDRC Subcommittee on Audits will ensure continued compliance regarding the "Effectiveness Statement" with respect to NSDRC Audits.

3. Date of Full Compliance

Full compliance will be achieved by June 1, 1984.

Item 6 and 7

Item 6

TS 6.5.2.10.c requires that audit reports be forwarded to the Senior Executive Vice President within 30 days after completion of the audit.

ANSI N.45.2.12-1977, Paragraph 4.4, requires the audit report to be issued within thirty days after the post-audit conference.

The NSDRC procedure required that "the completed audit checklist (the licensee's detailed report), other audit documentation verifying compliance, and copies of all issued CARs. . . be distributed within 30 days after completion of the audit."

Contrary to the above, audit reports examined for the last four and one-half years revealed that the audit reports has seldom been issued or forwarded to the Senior Executive Vice President within 30 days after completion of the audit.

This is a Severity Level V violation (Supplement I).

Item 7

10CFR50, Appendix B, Criterion V, requires that activities affecting quality be accomplished in accordance with documented instructions, procedures, or drawings of a type appropriate to the circumstances. Criterion XVI requires that measures be established to assure that conditions adverse to quality are promptly identified and corrected,.

The QA Program for the Donald C. Cook Nuclear Plant, Section 1.7.4.5 and 1.7.4.16, requires that activities affecting quality be conducted as directed by appropriate instructions, procedures, or drawings and that conditions adverse to quality be reported to management.

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ANSI N45.2.12-1977, Paragraph 4.5.1, requires that "The response shall clearly state the corrective action taken or planned to prevent recurrence. In the event that corrective action cannot be completed within thirty days, the audited organization's response shall include a scheduled date for the corrective action."

Contrary to the above, the licensee's NSDRC audit procedure was inadequate in that it allowed a response time of 45 days after a Corrective Action Request was issued and the Audit Cover Sheet was inadequate in that it allowed 46 days, rather than the required 30 days. Additionally, there were numerous examples of late responses to CARs. (Audit 74 on Staff Performance, Qualifications, and Training, July 1981, contained four CARs, none of which were responded to in less than 70 days.)

This is a Severity Level IV violation (Supplement I).

Response to Item 6 and 7

1. Corrective Action Taken

Corrective actions are not feasible with regard to the specific items cited for either Item 6 or 7 in that the violation involves late issuance of past reports and responses to Corrective Action Requests.

2. Actions Taken to Preclude Recurrence

All 1984 and subsequent NSDRC audits will be developed and administered by the AEPSC QA Department (QA) under the cognizance of the NSDRC and its Subcommittee on Audits. The conduct of these audits will be governed by the revised Subcommittee procedures and existing QA and AEPSC General Procedures. These require the completion and issuance of audit reports within 30 days, the issuance of Corrective Action Requests (CAR) within 14 days of the post audit conference and the response to CARs within 30 days of issuance. In addition, the CAR response due date and the disposition due date of any commitments made in response to a CAR will be entered into and tracked by the computerized commitment list in accordance with existing procedures.

Furthermore, the Audits Subcommittee Secretary is required to follow-up on the timeliness of each audit and to report regularly to the Subcommittee on the overall progress of the NSDRC audit program.

3. Date of Full Compliance

Full compliance was achieved on January 1, 1984.

Item 8

Technical Specification 6.5.2.8.d requires audits of the "performance of activities required by the Quality Assurance Program to meet the criteria of Appendix B of 10 CFR 50. . ."

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Contrary to the above, NSDRC audits were insufficient and failed to examine any of the corporate office activities related to Appendix B requirements.

This is a Severity Level IV violation (Supplement I).

Response to Item 8

1. Corrective Action Taken

Since an audit is a "snapshot" taken at a specific time, corrective actions for the specific item cited are not feasible. Therefore, we are taking the following actions to preclude recurrence.

2. Actions Taken to Preclude Recurrence

The Plant and AEPSC QA programs are audited on a 24 month cycle by the AEPSC QA Department. The audit reports resulting from these audits are reviewed by the NSDRC Subcommittee on Audits and significant findings are reported to the full NSDRC. The overall audit schedules for AEPSC QA Department audits will be reviewed and approved by the NSDRC.

Review of audit results provides the initial determination of (a) adequate scope, (b) adequate audit process, and (c) program effectiveness from which the NSDRC can identify those areas requiring audit, reaudit or other forms of followup action. Those areas which appear to require most attention will be the subject of the NSDRC 24 months audits. Criteria examined by the NSDRC audits may vary and may not necessarily include all 18 Appendix B criteria on each audit.

However, each of the 18 criteria will have been reviewed for (a) (b) (c) above by virtue of the AEPSC QA audit program. The evaluation of adequacy/effectiveness is a primary purpose of audit review by the NSDRC, and is considered prudent to take the results of the QA audits on Plant and Service Corporation activities into account when assessing both plant and corporate QA programs. Furthermore, these QA audits are an ongoing activity as is the NSDRC review process.

In addition, please refer to the discussion under Item 2, "Actions to Preclude Recurrence" for additional information.

3. Date of Full Compliance

Full compliance was achieved on January 1, 1984.

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Item 9

10 CFR 50, Appendix B, Criterion III, requires that design control measures shall provide for design verification, provide for verifying or checking the adequacy of the design, and that design changes shall be subject to design control measures commensurate with those applied to the original design.

The QA Program for the Donald C. Cook Nuclear Plant, Section 1.7.4.3, requires that modifications to the plant are controlled to assure compliance with the existing design.

ANSI N45.2.11-1974, to which the licensee is committed, requires that design control measures be established, that design verifications be clearly documented with the identification of the vehicle clearly indicated, and that documentation of the verification results be auditable against the verification methods identified by the responsible design organization. The standard defines supervisory technical review as not satisfying the design verification requirement.

Contrary to the above:

- a. The licensee's procedures for design control were inadequate as evidenced by:
 - . Mechanical Engineering Design Procedure No. 10, "Design Control", Revision 1, referenced GP-25 which allowed design verification by the discipline engineer's section manager for AEPSC performed mechanical design activities.
 - . Electrical Generation - Electrical Engineering Procedure Manual, "RFC Procedure", dated May 22, 1981, referenced GP-25 which allowed design verification by the discipline engineer's section manager for AEPSC performed design activities.
- b. Design verification for the following Emergency Requests for Changes (RFCs) were inadequate:
 - . RFC 12-1803 had no documented design verification.
 - . RFC 02-1885 contained a sketch that had been initialed "OK", which was the extent of design verification.

This is a Severity Level IV violation (Supplement I).

AEP:NRC:08701. Corrective Action TakenPart a.

Although, according to the established QA programs for AEPSC and Cook Plant, the design verification requirements of ANSI N.45.2-11-1974 apply only to those design activities defined as safety-related, we have decided to expand our design verification review program to also include design changes classified as safety interface because of the possible safety implications. AEPSC will select a random, statistical sample of 50 safety-related/safety-interface engineering design change RFCs (Request for Change) from the approximately 400 such changes approved since 1977. Even though these changes were implemented using the design verification methods in place at the time in General Procedure No. 25, and in the various organizational specific procedures or accepted practices, a special team will be established to oversee the review of this random sample of RFCs under the design verification criterion as set forth in AEPSC General Procedure No. 3.0 and as implemented by the below discussed revision to General Procedure No. 25.

The purpose of this review is to process these RFCs through the upgraded design verification requirements to determine if there are any significant deficiencies or deviations. Any significant deficiencies or discrepancies will be corrected. Further reviews beyond the selected sample will depend upon the review team findings. The definition of what are significant findings and the criteria or making the decision for further reviews will commence during the week of June 4, 1984 and continue until completed. The review team will submit monthly reports to the NSDRC Subcommittee on Proposed Changes and the Chairman, AEPSC Change Control Board.

With respect to the design activities associated with the original design of the Cook Plant, AEPSC has initiated an effort to develop a description of the practices that were in place during that time frame. The objective of this effort is to demonstrate that these practices were at least as effective as a documented design verification, in ensuring that the design was adequate. We will look at some of the original design activities in the electrical, mechanical and structural area using the updated General Procedure No. 25 design verification requirements to verify that the past design practices were adequate. The description along with a schedule for completion of the aforementioned verification activities will be forwarded to the NRC by May 1, 1984 as an update to our R.F.I.P.

Part b.

The design verification for RFCs 12-1803 and 02-1885 was discussed as part of our response (AEP:NRC:752, 1/24/83) to MR. James M. Taylor's 11/1/82 letter which transmitted NRC Inspection Reports 50-315/82-17 and 50-316/82-17 (P.A.S. Inspection). These two RFCs will be included in the review discussed in Part a., first paragraph above.

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2. Actions Taken to Preclude Recurrence

AEPSC is revising its Corporate level procedure (General Procedure No. 25 Rev. 1) to more fully implement the design verification requirements on ANSI N.45.2.11-1974. These requirements are set forth in our top tier General Procedure No. 3.0. In certain cases, it will be necessary to supplement General Procedure No. 25 with lower tier organizational specific procedures. The following is our schedule for implementation of the ANSI N.45.2.11-1974 Design Verification requirements.

January 31, 1984 - Issue preliminary revision to General Procedure No. 25. This preliminary revision is to be used to perform design verification in the interim period until the formal procedure revision is issued.

Week of February 13, 1984 - Hold meeting to review comments and finalize revision to General Procedure No. 25.

Week of March 13, 1984 - Issue revision to General Procedure No. 25.

Week of May 28, 1984 - Issue all organizational specific new procedures or procedure revisions.

3. Date of Full Compliance

Procedural revision will be completed by June 1, 1984.

Item 10

10. Technical Specification 6.5.2.7.a requires that the NSDRC review safety evaluations for changes to equipment or systems.

GP-25 "Design Changes", Revision 0, Temporary Change No. 3 to GP-25, Revision 0, and PMI-5040. "Design Changes", Revision 4, described the processing of RFCs, including the preparation of a safety evaluation which was subsequently to be reviewed by the NSDRC in accordance with TS 6.5.2.7.a.

Contrary to the above, safety evaluations were reviewed at the Subcommittee level without review and approval by the full NSDRC.

This is a Severity Level V violation (Supplement I).

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Response to Item 10

1. Corrective Action Taken

Changes to equipment or systems have been made under either Requests for Changes (RFCs) or Plant Modifications (PMs) since the initial licensing of Unit 1 and the inception of the NSDRC in 1975. From 1975 through November 30, 1983 there have been a total of 1492 RFC's approved, of which 597 were classified as safety related or safety interface and there have been 85 PMs routed to AEPSC since the inception of the Plant Modification portion of the AEPSC Design Change Program.

The Subcommittee on Proposed Changes has reviewed 515 safety related or safety interface RFCs and 4 PMs as of November 30, 1983. Currently copies of all approved RFCs, and PMs that have been submitted to AEPSC, are being routed to the Subcommittee for review.

The Subcommittee on Proposed Changes will select and review a statistical, random sample of 80 existing safety related/safety interface RFCs and 13 PMs. This review will be completed by December 31, 1984, and findings reported to the NSDRC.

In the case of the above outlined "historical" review the sample will be deemed representative of past activities. It will be further deemed that past practices and activities were effective in precluding the generation of an unreviewed safety question provided the historical reviews do not identify any significant safety concerns.

2. Actions Taken to Preclude Recurrence

The revision to the Subcommittee on Proposed Changes Charter and Procedures will ensure that the required reviews are conducted by delineation of the methods by which the Subcommittee will review the safety evaluation for changes to procedures, equipment, or systems and tests or experiments completed under the provision of 10CFR50.59. The revised Charter and Procedures will ensure that the NSDRC is fully appraised of Subcommittee deliberations and conclusions.

3. Date of Full Compliance

Full compliance will be achieved by December 31, 1984.