

SALEM GENERATING STATION
EMERGENCY PLAN
EMERGENCY PLAN PROCEDURES INDEX
October 21, 1983

SECTION I - ON-SITE PROCEDURES

No. 101
U.S. NRC, Dir. of NRR
Washington, D.C. 20555
Mr. S.A. Varga, Chief, Oper.
Reactors BR#1, Div. of Licensi

REV. NO.

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	Part 2 Operational		
	Part 3 Fire/Natural/Security		
	Part 4 Miscellaneous		
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EP I-4	General Emergency		5
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EP I-6	Radioactive Spill		1
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EMERGENCY PROCEDURE
EP I-1
NOTIFICATION OF UNUSUAL EVENT/SIGNIFICANT EVENT

ACTION STATEMENTS - SECTION I - EMERGENCY COORDINATOR

Initials

The Senior Shift Supervisor shall:

- _____ 1. Assume the responsibilities of the Emergency Coordinator.
(see page 4 for responsibilities)
- _____ 2. Determine classification of the event to be an Unusual
Event as defined by EP I-0; or a Significant Event as de-
fined by Attachment 1 of this procedure.

EP I-0 Part _____, No. _____
and/or Significant Event No. _____

- _____ 3. Check appropriate boxes and provide brief description of
the event on the Initial Contact Message Form (Attachment
2 to this procedure).

Note:

If Event is already terminated complete the statement
at the end of Section III of the Initial Contact
Message Form.

- _____ 4. Direct technically qualified persons to commence
collecting data required for Operational and Radiological
sections of the Station Status Checklist (Attachment 3
to this procedure).

Note:

If Event is already terminated only one complete Station
Status Checklist need be completed.

ACTION STATEMENTS - SECTION I (continued)Initials

- _____ 5. Direct the Designated Communicator to make the notifications on the Communications Log (Attachment 4 to this procedure) within the time limits specified.
- _____ 6. Direct the communicator to respond to calls from State or local officials by providing the information on the Station Status Checklist or Press release received from the Public Affairs Manager - Nuclear and have the name and affiliation of the person calling recorded on the Station Status Checklist.
- _____ 7. Review Station Status Checklists and provide to the designated communicator every thirty minutes (or immediately if a significant change in Station Status occurs. (e.g. changes in event classification, reactor status or release information).
- _____ 8. Direct the Communicator to refer requests for information from the media to the Public Affairs Manager - Nuclear (phone numbers may be found in Addendum 1).
- _____ 9. Refer to EP I-7, "Station Fire," to conduct fire fighting actions. If outside assistance is required, have the Salem Fire Dispatcher called. Give the location, type of fire, and where vehicles will be met by Security personnel to communicator.
- _____ 10. If this is a security event, coordinate with the Security Lieutenant (Extension 4001) to implement the Contingency Plan and Procedures.

ACTION STATEMENTS - SECTION I (continued)

Initials

- _____ 11. Forward all completed forms to the Senior Operating Supervisor. Attach any other completed EP's or attachments used.

ACTION STATEMENTS - SECTION II - COMMUNICATOR

The Designated Communicator shall:

1. When directed by the Senior Shift Supervisor/Emergency Duty Officer use the data provided on Attachment 2, Initial Contact Message Form, to notify persons listed on Attachment 4, Communications Log, within the time limits specified.
2. Upon receipt of a phone call from the New Jersey Bureau of Radiation Protection (BRP) or Delaware Division of Emergency Planning and Operations (DEPO) do the following:
 - a) Verify that caller, if from New Jersey, is listed on the Designated State Officials List (Attachment 5 to this procedure).
 - b) Provide the Station Status Checklist (Attachment 3 to this procedure) at current level of completion.
 - c) Obtain from the official making the contact a telephone number to which followup Station Status Checklists should be directed.
 - d) Provide Station Status Checklist updates to the States every thirty (30) minutes or immediately if a significant change in Station Status occurs.

Note:

If Event was terminated with the initial contact inform the State official calling that only one Station Status Checklist will be transmitted.

3. When directed by the Senior Shift Supervisor/
Emergency Duty Officer contact the Salem Fire
Dispatcher at 935-4404 or 935-4505 and provide the
following message:

- a) This is the Communicator at Salem Generating
Station. This is a notification of a fire.
- b) We request fire company support.
- c) The type of fire is _____.
- d) The location of the fire is _____.
- e) The fire truck(s) will be met at _____
and directed to the location of the fire by our
security force.

Notify security (ext. 4000) of location of the fire,
location where fire truck(s) should be met and type
of fire.

4. When directed by the Senior Shift Supervisor/Emer-
gency Duty Officer, make the notifications on the
Termination Call List, Attachment 6 to this proce-
dure.

ACTION LEVEL

Whenever an action level listed in EP I-0 as an Unusual Event has been reached, notification of an Unusual Event will be made to offsite authorities and designated personnel within the time limits listed in Attachment 4.

Whenever an action level described as a Significant Event (Attachment 1) is reached, notification of a Significant Event will be made to offsite authorities and designated personnel within the time limits listed in Attachment 4.

NOTE

Notification shall be reperformed for additional events, as defined in EP I-0 or Attachment 1 to this procedure.

An Event which satisfies both the definition of an Unusual Event and a Significant Event shall be classified as an Unusual Event.

LIMITS ON AUTHORITY

The person acting as the Emergency Coordinator (Senior Shift Supervisor, Emergency Duty Officer, or Emergency Response Manager) has the authority and responsibility to immediately and unilaterally initiate any emergency action including the decision to notify and provide protective action recommendations to authorities responsible for implementing off site emergency measures.

ATTACHMENTS

- Attachment 1 - Significant Event Classification
- Attachment 2 - Initial Contact Message Form
- Attachment 3 - Station Status Checklist
- Attachment 4 - Communications Log
- Attachment 5 - Designated State Officials List
- Attachment 6 - Termination Call List

Prepared By: C. Burge

Reviewed By: *Tommy* 10/25/83
Department Head Date

Reviewed By: *Cheryl Adams for* 10/25/83
Nuclear Emergency Planning Engineer Date

Reviewed By: *D. C. Perkins* 10/25/83
Station Quality Assurance Review Date
(if required see EP VI-2)

SORC Meeting Number: 83-148 *J* 11/30/83
Date

Approved By: *J. M. Zingales* 11/30/83
General Manager - Salem Operations Date

Approved By: *W. A. Muth* 12/2/83
Manager - Nuclear Site Protection Date

ATTACHMENT 1
SIGNIFICANT EVENT CLASSIFICATION

DIRECTIONS

The Emergency Coordinator shall review the initiating conditions listed below to determine if significant event notification is required. Notification shall be made as indicated in Attachment 4 to this procedure, as required by 10CFR50.71.

SIGNIFICANT EVENT INITIATING CONDITIONS

- | | |
|---|---|
| 1. Any event requiring initiating any section(s) of the Station Emergency Plan Procedures, except for EP I-5, for injuries requiring less than 48 hour hospital stay. | As evaluated by the
Emergency Coordinator |
| 2. Any accidental, unplanned, or uncontrolled radioactive release. (Normal or expected releases from maintenance or other operational activities are not included.) | As evaluated by the
Emergency Coordinator |
| 3. Any serious personnel radioactive contamination requiring extensive onsite decontamination or outside assistance. | As evaluated by the
Emergency Coordinator |
| 4. Any event that results in the plant not being in a controlled or expected condition (Mode 1-6). | As evaluated by the
Emergency Coordinator. |
| 5. Union strikes affecting the availability of operating personnel or the security personnel. | As evaluated by the
Emergency Coordinator. |
| 6. Any fatality or serious injury occurring on-site and requiring off-site medical assistance (hospital stay greater than 48 hours). | As evaluated by the
Emergency Coordinator. |
| 7. Any event involving nuclear material which has or may have: | As evaluated by the
Emergency Coordinator |
| a) Exposure of the whole body to 25 rems or more; exposure of the skin of the whole body to 150 rems or more; or exposure of the feet, ankles, hands or forearms to 375 rems or more. | |

ATTACHMENT 1
SIGNIFICANT EVENT CLASSIFICATION

- b) The release of radioactive material in concentrations which, if averaged over a period of 24 hours, would exceed 5,000 times the limits specified for such materials in Appendix B, Table II of 10CFR20.
 - c) A loss of one working week or more of the operation of any facilities affected.
 - d) Damage to property in excess of \$200,000.
8. Any event involving nuclear material which has or may have:
- As evaluated by the
Emergency Coordinator
- a) Exposure of the whole body to 5 rems or more; exposure of the skin of the whole body to 30 rems or more; or exposure of the feet, ankles, hands, or forearms to 75 rems or more.
 - b) The release of radioactive material in concentrations which, if averaged over a period of 24 hours, would exceed 500 times the limits specified for such materials in Appendix B, Table II of 10CFR20.

ATTACHMENT 2
INITIAL CONTACT MESSAGE FORM

Upon completion of the below prepared message the Emergency Coordinator or the Designated Communicator shall make the required notifications using Attachment 4 to this procedure.

NOTE: In the event of a test, drill or exercise, preface and complete each message with the phrase "THIS IS A DRILL, THIS IS A DRILL".

SECTION I (Provide to all)

THIS IS _____,
(NAME) (TITLE)

SALEM NUCLEAR GENERATING STATION, UNIT NO. _____

THIS IS A NOTIFICATION OF:

- ☐ a SIGNIFICANT EVENT ☐ an UNUSUAL EVENT

THIS EVENT WAS DECLARED AT _____ ON _____
(TIME - 24 HOUR CLOCK) (DATE)

- ☐ THERE IS NO RELEASE IN PROGRESS.
☐ WE HAVE A NORMAL RELEASE IN PROGRESS.
☐ WE HAVE AN UNCONTROLLED RELEASE IN PROGRESS.

SECTION II (Provide to New Jersey and Delaware Only)

- ☐ NO PROTECTIVE ACTIONS ARE RECOMMENDED AT THIS TIME
☐ WE RECOMMEND SHELTERING FOR THE FOLLOWING SECTOR(S) _____/
(Distance-Miles)
☐ WE RECOMMEND EVACUATION FOR THE FOLLOWING SECTOR(S) _____/
(Distance-Miles)

SECTION III (Provide to all)

DESCRIPTION OF EVENT _____

THIS EVENT WAS TERMINATED AT _____ ON _____
(TIME - 24 HOUR CLOCK) (DATE)

Use back of sheet if necessary.

ATTACHMENT 3
STATION STATUS CHECK LIST

Salem Generating Station Unit No. _____

Transmitted By: Name _____ Position: _____

1. Date and Time Event Declared: Date _____ Time _____ (24 hr clock)
2. Accident Classification: ☐ Significant Event ☐ Unusual Event
3. Cause of Incident:

Primary Initiating Condition used for declaration of incident

EPI-0 Part _____, Number _____ and/or

Significant Event No. _____

Description of the incident _____

4. Status of Reactor: ☐ Tripped/Time _____ ☐ At Power
☐ Hot Shutdown ☐ Cold Shutdown
5. Pressurizer Pressure _____ psig Core Exit TC _____ / _____ °F
Hottest / Average
6. Is offsite power available? ☐ YES ☐ NO
7. Are two or more diesel generators operable? ☐ YES ☐ NO
8. Did the emergency safeguards system activate? ☐ YES ☐ NO
9. Has the containment been isolated? ☐ YES ☐ NO

10. Other pertinent information _____

Approved _____
SSS/TSS/SSM

Station Status Checklist - Radiological Information

11. Gaseous Release: ☐ YES ☐ NO
(START TIME) _____

(A) Release Terminated: ☐ YES ☐ NO

(B) Anticipated or Known Duration of Release _____ Hours

(C) Type of Release: ☐ GROUND ☐ ELEVATED

(D) Wind Speed: _____ MPH Wind Direction: (Toward) _____
Divide by 2 to get _____ M/Sec (From) _____
Delta Temp: _____ (Degrees)

(E) Stability Class: ☐ Unstable ☐ Neutral ☐ Stable

(F) Release Rate Iodine _____ Ci/Sec.

(G) Release Rate Noble Gas: _____ Ci/Sec.

12. Liquid Release: ☐ YES ☐ NO
(Start Time) _____

(A) Release Terminated: ☐ YES ☐ NO

(B) Anticipated or Known Duration of Release _____ Hours

(C) Estimated Concentration _____ pico Curies/Liter

(D) Release Rate _____ Liters/Hour

13. Projected Off-site Dose Rates (As Soon As Data Is Available):

	Adult	
Distance (miles)	Whole Body (mrem/hr)	Child Thyroid (mrem/hr)
_____	_____	_____
_____	_____	_____
_____	_____	_____

14. Updates to States:

	Name	Time	Initials
<input type="checkbox"/> State of New Jersey	_____	_____	_____
<input type="checkbox"/> State of Delaware	_____	_____	_____
<input type="checkbox"/> Others	_____	_____	_____
	Name		
	Agency		
	Name		
	Agency		

Approved _____

SSS/RPS/RSM

COMMUNICATION LOG

TIME LIMIT IN (MINUTES)	PERSON TO BE CONTACTED	PERSON CONTACTED	DATE/ TIME	CONTACTED BY
15	Primary: EDO (Contact One) 1.L. Fry Office: 4523; Car: 342-5103; Beeper: 800-612-4532 Home: 678-7634; 2.L. Catalfomo Office: 4522; Car: 342-5103 Beeper: 800-612-4534 Home: 678-3176			
15	Secondary: TSS (Contact One) 1.L. Miller Office: 4455; Car: 342-5077 Beeper: 800-612-4531 Home: 769-1727 2.R. Newman Office: 4410; Car: 342-5077 Beeper: 800-612-4539 Home: 358-3678			
15	NEW JERSEY Primary: (Direct Line) Secondary: 882-2000			
15	DELAWARE Primary: (Direct Line) Secondary: 302-736-5851			
30	LAC Township Primary: (Direct Line) Secondary: 935-7300			
30	General Manager - Salem Operations (Contact One) J. Zupko Office: 4500; Car: 342-5036 Beeper: 342-5803; Home: 468-5527 J. Driscoll Office: 4497; Car: 302-428-9084 (Asst. GM) Beeper: 800-612-4539; Home: 302-366-8472 R. A. Uderitz Office: 4800; Car: 342-5110 (VP - Nuclear) Beeper: 342-5800; Home: 769-4175			

SCS

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Rev. 6

EP I-1
Attachment 4

COMMUNICATIONS LOG

TIME LIMIT IN (MINUTES)	PERSON TO BE CONTACTED	PERSON CONTACTED	DATE/ TIME	CONTACTED BY
30	Public Affairs Manager-Nuclear (Contact One) R. Silverio Office: 4699; Car: NA; Beeper: 342-5804; Home: 829-1546 W. Denman Office: 4480; Car: NA; Beeper: 342-5849; Home: 935-6349 B. Gorman Office: 4480; Car: NA; Beeper: 342-5851; Home: 228-1089			
60	NRC Primary: (ENS) Secondary: 202-951-0550 or 301-427-4056			
60	Hope Creek Project Primary: 935-6064 Secondary: 7-450-3271 (Union Security)			
60	NRC Resident (Contact One) Jim Linville- Office: 4479; Home: 234-4998 R. Summers - Office: 4479; Home: 848-6741			
90	New Jersey DOE Primary: (201) 648-6290 Secondary: A. Rizzolo Office: (201) 648-2403; Home: (201) 762-3621 V. Bozzo Office: (201) 648-6290; Home: (201) 763-5913 B. Patel Office: (201) 648-4858; Home: (609) 448-8441 L. Coleman Office: (201) 648-2744; Home: (201) 746-9522			
90	New Jersey BPU R. Hartung Office: (201) 648-2066; Home: (201) 583-4091 N. Aswoni Office: (201) 648-2270; Home: (201) 857-2915 M. VanEss Office: (201) 648-2057; Home: (201) 835-7192 R. Shikh Office: (201) 648-6907; Home: (201) 748-3751			

DESIGNATED STATE OFFICIALS LIST

NEW JERSEY

DEPARTMENT OF ENVIRONMENTAL PROTECTION -
BUREAU OF RADIATION PROTECTION

David Scott	Steven Kuhrtz
Eugene Fisher	Judith Chasar
Eileen Hotte	Kent Tosch
John Feeney	Gerald Nicholls
Rebecca Green	Michael Hobar
Jeanette Eng	

DIVISION OF STATE POLICE -
OFFICE OF EMERGENCY MANAGEMENT

Major Harold Spedding
Captain Ross Beyer
The Civilian Duty Officer or Alternate*
The Enlisted Duty Officer or Alternate*

* The Duty Officers comprise a duty roster of approximately 10 to 15 names. Provide information to any one identifying himself as the Duty Officer or alternate and record name on Station Status Checklist.

ATTACHMENT 6
TERMINATION CALL LIST

Upon completion of the below prepared message the Emergency Coordinator or the Designated Communicator shall make the required notifications of this attachment. No additional information is required to be given at this time.

NOTE: In the event of a test, drill or exercise, preface and complete each message with the phrase "THIS IS A DRILL, THIS IS A DRILL".

MESSAGE

THIS IS _____, _____
(NAME) (TITLE)

SALEM NUCLEAR GENERATING STATION, UNIT NO. _____

THIS IS A NOTIFICATION OF THE TERMINATION OF: an ALERT

OR

THIS IS A NOTIFICATION OF THE REDUCTION IN EMERGENCY STATUS FROM:

an ALERT

to

an UNUSUAL EVENT

THIS REDUCTION IN CLASSIFICATION OCCURRED AT _____ ON
(DATE) (TIME - 24 HOUR CLOCK)

ATTACHMENT 6
TERMINATION CALL LIST

DATE/TIME	TITLE OF PERSON TO BE CONTACTED	PERSON CONTACTED	CONTACTED BY
_____	Emergency Response Manager (if EOF has been activated)	_____	_____
_____	Emergency Duty Officer	_____	_____
_____	Senior Shift Supervisor	_____	_____
_____	New Jersey State Police	_____	_____
_____	Delaware State Police	_____	_____
_____	General Manager - Salem Operations	_____	_____
_____	General Manager - Hope Creek Operations	_____	_____
_____	Public Affairs Manager-Nuclear	_____	_____
_____	Security - Salem	_____	_____
_____	Hope Creek Project	_____	_____
_____	LAC	_____	_____
_____	NRC (ENS line)	_____	_____
_____	NRC Resident Inspector	_____	_____
_____	New Jersey DOE	_____	_____
_____	New Jersey BPU	_____	_____

See Addendum 1 for telephone numbers to be used.

Reviewed By: _____
Emergency Coordinator Date

EMERGENCY PROCEDURE
EP I-2
ALERT

ACTION STATEMENTS - SECTION I - EMERGENCY COORDINATOR

Part A - Classification and Activation

The Senior Shift Supervisor/Emergency Duty Officer shall:

NOTE

These steps shall be performed by the Senior Shift Supervisor until relieved of the Emergency Coordinator duties by the Emergency Duty Officer. This relief shall be documented by signing below.

Senior Shift Supervisor

Date / Time

1. Determine classification of the event to be an Alert event as classified by EP I-0.

EP I-0 Part _____, No. _____

2. If the event has not already been terminated:
 - a. Direct that the Radiation Alert Alarm be sounded and the following be announced over the Station Page:
"Attention, Attention, Unit # _____ is in an Alert condition. All emergency response personnel report to your emergency duty stations". (Repeat)
 - b. Contact Security (ext. 4000) and request that the Technical Support Center be unlocked.
 - c. Direct the Shift Radiation Protection Technician to initiate procedure EP IV-101, TSC Initial Response.

ACTION STATEMENTS - SECTION I (continued)

3. Check appropriate boxes and provide a description of the event on the Initial Contact Message Form (Attachment 1 to this procedure). Protective Action Recommendations are to be based upon EP IV-108, Protective Action Recommendations, as information becomes available.

NOTE

If the Event is already terminated complete termination statement at end of Section III of the Initial Contact Message Form.

4. Direct the Designated Communicator to make the notifications on the Communications Log (Attachment 2 to this procedure) and maintain communications with the NRC Operations Center when directed to do so by the NRC duty officer.
5. Direct technically qualified persons to commence collecting data required for the Operational and Radiological sections of the Station Status Check List (Attachment 3 to this procedure).

NOTE

If the event is terminated only one complete Station Status Checklist need be completed.

6. Direct the communicator to respond to call from State or local officials by providing the information on the Station Status Checklist.

ACTION STATEMENTS - SECTION I (continued)

7. Station Status Checklists should be reviewed and provided to the designated Communicator every thirty minutes (or immediately if a significant change in station status occurs (eg. changes in event classification, or reactor status , or release information).
8. Direct the Communicator to refer requests for information from the media to the Public Affairs Manager - Nuclear (phone numbers may be found in Addendum 1).
9. Direct the Communicator to contact the Emergency Response Manager in accordance with EP II-4, Emergency Response Support Callout.
10. Discuss the necessity for activation of the Emergency Operations Facility with the Emergency Response Manager.
11. If the Emergency Operations Facility is to be activated:
 - a. Direct the Designated Communicator to activate the emergency response support callout by implementing EP II-4, Emergency Response Support Callout.
 - b. Notify Security of Emergency Operations Facility activation.
12. Evaluate the status of the unaffected unit using Operations Directive No. 47.
13. If necessary, account for personnel in accordance with EP I-8, Personnel Accountability.
14. If the Emergency Operations Facility is activated, initiate transfer of the Emergency Coordinator duties from the Emergency Duty Officer to the Emergency Response Manager and document by signing below.

EDO

Date / Time

ACTION STATEMENTS - SECTION I (continued)

14. Continue by going to the appropriate section of this procedure based on the initiating event classification:
 - a) Radiological Emergencies - Part B of this Section
 - b) Operational Emergencies - Part C of this Section,
 - c) Fire/Natural Event/Security Emergencies - Part D of this Section,
 - d) Miscellaneous Emergencies - Part E of this Section.
 - e) Termination or De-escalation - Part F of this Section.

Part B - Radiological Emergencies

The Senior Shift Supervisor/Emergency Duty Officer shall:

1. Coordinate emergency on and off-site radiation surveys in accordance with EP IV-110A, Field Monitoring by the TSC, with the Shift Radiation Protection Technician and the Radiation Protection personnel assigned to the Technical Support Center.
2. If a radioactive spill caused the emergency, refer to EP I-6, Radioactive Spill.
3. Insure the actions required of Emergency Instruction I-4.16, Radiation Incident, are or have been taken as applicable.
4. If a fuel handling incident occurred, refer to Emergency Instruction I-4.25, Fuel Handling Incident.
5. If any personnel have been injured or exposed to radiation in excess of 10CFR20 limits, refer to EP I-5, Personnel Emergency.

ACTION STATEMENTS - SECTION I (continued)

6. If site evacuation becomes necessary, evacuate in accordance with EP I-12, Site Evacuation.
7. Complete an Operational Incident Report in accordance with Administrative Procedure No. 6.
8. When necessary to terminate or de-escalate the event go to Part F - Termination or De-escalation.

Part C - Operational Emergencies

The Senior Shift Supervisor/Emergency Duty Officer shall:

1. If the Reactor Protection System fails to bring the plant to Mode 3 when required refer to Emergency Instruction I-4.3, Reactor Trip.
2. On a loss of on or off-site power systems, as noted in the Action Levels, refer to Emergency Instruction I-4.9, Blackout.
3. Complete an Operational Incident Report in accordance with Administrative Procedure No. 6.
4. When necessary to terminate or de-escalate the event go to Part F - Termination or De-escalation.

Part D - Fire/Natural Event/Security Emergencies

The Senior Shift Supervisor/Emergency Duty Officer shall:

1. If the Delaware River level is greater than 10.0 feet Mean Sea Level (99 feet PSE&G datum) and is approaching 11.5 feet Mean Sea Level (100.5 feet PSE&G datum):

ACTION STATEMENTS - SECTION I - Part D (cont.)

- a) Implement Emergency Instruction I-4.1, Flooding/High Wind Conditions.
 - b) If necessary, evacuate the site in accordance with EP-12, Site Evacuation.
2. If sustained winds are forecast to be 95 mph:
- a) Implement Emergency Instruction I-4.1, Flooding/High Wind Conditions.
 - b) If necessary, evacuate the site in accordance with EP-12, Site Evacuation.
3. If a seismic event occurs with a force greater than 0.1g but less than 0.2g consider placing the plant in Hot Standby or Cold Shutdown as appropriate.
4. Refer to EP I-7, Station Fire, to conduct fire fighting actions.
- If outside assistance is required have the Salem Fire Dispatcher called. Give the location and type of fire and where vehicles will be met by the security personnel to Communicator. Notify security of incoming emergency vehicles.
5. If the Classification is due to a Security Event coordinate with the Security Lieutenant to implement the Contingency Plan and Procedures.
6. Complete an Operational Incident Report in accordance with Administrative Procedure No. 6.
7. When necessary to terminate or de-escalate the event go to Part F - Termination or De-escalation.

ACTION STATEMENTS - SECTION I (cont.)Part E - Miscellaneous Emergencies

The Senior Shift Supervisor/Emergency Duty Officer shall:

1. If toxic gas, e.g., chlorine, acid vapors, etc., present a safety hazard contact Technical Manager and/or Chemical Engineer for further direction. (Phone numbers may be found in Addendum 1).
2. If the Control Room must be evacuated for any reason refer to Emergency Instruction I-4.10, Control Room Evacuation.
3. Complete an Operational Incident Report in accordance with Administrative Procedure No. 6.
4. When necessary to terminate or de-escalate the event go to Part F - Termination or De-escalation.

Part F - Termination or De-escalation

The Senior Shift Supervisor/Emergency Duty Officer, Emergency Response Manager shall:

1. Terminate when the following conditions are met.
 - a) None of the action levels defined in EP I-0 are applicable, or
 - b) The affected unit is in a recovery status and
 - c) Concurrence of the Emergency Coordinator is obtained.
2. De-escalate to a lower event classification when the initiating conditions referred to in EP I-0 for this event class have changed and warrant a reduction in classification.

ACTION STATEMENTS - SECTION II - COMMUNICATOR
INITIALS

3. Upon full completion of step 1 or 2 of this section. Check the appropriate boxes on page 1 of 2 of the Termination Call List, Attachment 4 to this procedure. Direct the designated Communicator to use the Termination Call List (Attachment 4 to this procedure) to make the required notifications.
4. Forward all completed forms to the Senior Operating Supervisor. Attach any other completed EPs or attachments used.

When directed by the Emergency Coordinator, the Designated Communicators shall:

1. Use the data provided on Attachment 1, Initial Contact Message Form, to notify persons listed on Attachment 2, Communications Log, within the time limits specified.

NOTE

If initial contact with a State cannot be accomplished within the 15 minutes allowed, notify the Senior Shift Supervisor/Emergency Duty Officer and then contact the appropriate Counties directly using Attachment 2 to this procedure.

2. When directed by the Senior Shift Supervisor/Emergency Duty Officer initiate the emergency response support callout by contacting the Emergency Response Manager in accordance with EP II-4, Emergency Response Support Callout.

ACTION STATEMENTS - SECTION II (continued)Initials

3. Upon receipt of the initial phone call from the New Jersey Bureau of Radiation Protection or Delaware Division of Emergency Planning and Operations do the following:
 - a) Verify that caller, if from New Jersey, is listed on Designated State Officials List (Attachment 5 to this procedure).
 - b) Provide the Station Status Checklist (Attachment 3 to this procedure at the current level of completion to authorized callers.
 - c) Obtain from the official making that contact a telephone number to which followup Station Status Checklist should be directed.
 - d) Provide Station Status Checklist updates to the States every 30 minutes or immediately if a significant change in Station Status occurs.

NOTE

If Event was terminated with the initial contact inform State official calling that only one Station Status Checklist will be transmitted.

4. When directed by the Senior Shift Supervisor/Emergency Duty Officer to activate the emergency response support callout.
 - a) Implement EP II-4, Emergency Response Support Callout.
 - b) Contact the security force Shift Lieutenant (ext. 4001) and use the following message:

This is the Communicator for the Senior Shift Supervisor/Emergency Duty Officer. We are activating the Emergency Operations Facility. Please implement procedure EP III-2 to open and secure the Emergency Operations Facility at the Nuclear Training Center in Salem.

ACTION STATEMENTS - SECTION II (continued)Initials

5. When directed by the Senior Shift Supervisor/Emergency Duty Officer contact the Salem Fire Dispatcher at 935-4404 or 935-4505 and provide the following message:
- a) This is the Communicator at Salem Generating Station.
This is a notification of a fire.
 - b) We request fire company support.
 - c) The type of fire is _____.
 - d) The location of the fire is _____.
 - e) The fire truck(s) will be met at _____
and directed to the location of the fire by our security force.

Notify security (ext. 4001) of location of the fire, location where fire truck(s) should be met and type of fire.

6. When directed by the Emergency Coordinator make the notifications on the Termination Call List - Attachment 4 to this procedure.
-

ACTION LEVEL

Whenever an action level described in EP I-0 as an Alert is exceeded, notifications of an Alert will be made to offsite authorities within the time limits specified on Attachment 2.

NOTE

Notifications shall be re-performed for each additional event defined in EP I-0.

LIMITS ON AUTHORITY

The person acting as the Emergency Coordinator (Senior Shift Supervisor, Emergency Duty Officer, or Emergency Response Manager) has the authority and responsibility to immediately and unilaterally initiate any emergency action including the decision to notify and provide protective action recommendations to authorities responsible for implementing off site emergency measures.

ATTACHMENTS

- Attachment 1 - Initial Contact Message Form
- Attachment 2 - Communications Log
- Attachment 3 - Station Status Checklist
- Attachment 4 - Termination Call List
- Attachment 5 - Designated State Officials List

Prepared By: C. A. Burge

Reviewed By: *Infay as.* 10/25/83
Department Head Date

Reviewed By: *Cheryl Sakenas for* 10/25/83
Nuclear Emergency Planning Engineer Date

Reviewed By: *QC Perlema* 10/25/83
Station Quality Assurance Review Date
(if required see EP VI-2)

SORC Meeting No.: 83-14E *J* 11/30/83
Date

Approved By: *J. M. Zupko* 11/30/83
General Manager - Salem Operations Date

Approved By: *Paul H. Muth* 12/2/83
Manager - Nuclear Site Protection Date

ATTACHMENT 1
INITIAL CONTACT MESSAGE FORM

Upon completion of the below prepared message the Emergency Coordinator or the Designated Communicator shall make the required notifications using Attachment 3 to this procedure.

NOTE: In the event of a test, drill or exercise, preface and complete each message with the phrase "THIS IS A DRILL, THIS IS A DRILL".

SECTION I (Provide to all)

THIS IS _____,
(NAME) (TITLE)

SALEM NUCLEAR GENERATING STATION, UNIT NO. _____

THIS IS A NOTIFICATION OF:

- | | |
|--|--|
| <input type="checkbox"/> a SIGNIFICANT EVENT | |
| <input type="checkbox"/> an UNUSUAL EVENT | <input type="checkbox"/> a SITE AREA EMERGENCY |
| <input type="checkbox"/> an ALERT | <input type="checkbox"/> a GENERAL EMERGENCY |

THIS EVENT WAS DECLARED AT _____ ON _____
(TIME - 24 HOUR CLOCK) (DATE)

- ☐ THERE IS NO RELEASE IN PROGRESS.
- ☐ WE HAVE A NORMAL RELEASE IN PROGRESS.
- ☐ WE HAVE AN UNCONTROLLED RELEASE IN PROGRESS.

SECTION II (Provide to New Jersey and Delaware Only)

- ☐ NO PROTECTIVE ACTIONS ARE RECOMMENDED AT THIS TIME
- ☐ WE RECOMMEND SHELTERING FOR THE FOLLOWING SECTOR(S) _____ / _____
(Distance-Miles)
- ☐ WE RECOMMEND EVACUATION FOR THE FOLLOWING SECTOR(S) _____ / _____
(Distance-Miles)

SECTION III (Provide to PSE&G personnel only)

DESCRIPTION OF EVENT _____

Use back of sheet if necessary.

COMMUNICATION LOG

TIME LIMIT IN (MINUTES)	PERSON TO BE CONTACTED	PERSON CONTACTED	DATE/ TIME	CONTACTED BY
15	Primary: EDO (Contact One) 1.L. Fry Office: 4523; Car: 342-5103; Beeper: 800-612-4532 Home: 678-7634; 2.L. Catalfomo Office: 4522; Car: 342-5103 Beeper: 800-612-4534 Home: 678-3176			
15	Secondary: TSS (Contact One) 1.L. Miller Office: 4455; Car: 342-5077 Beeper: 800-612-4531 Home: 769-1727 2.R. Newman Office: 4410; Car: 342-5077 Beeper: 800-612-4539 Home: 358-3678			
15	NEW JERSEY Primary: (Direct Line) Secondary: 882-2000			
15	DELAWARE Primary: (Direct Line) Secondary: 302-736-5851			
30	LAC Township Primary: (Direct Line) Secondary: 935-7300			
30	General Manager - Salem Operations (Contact One) J. Zupko Office: 4500; Car: 342-5036 Beeper: 342-5803; Home: 468-5527 J. Driscoll Office: 4497; Car: 302-428-9084 (Asst. GM) Beeper: 800-612-4539; Home: 302-366-8472 R. A. Uderitz Office: 4800; Car: 342-5110 (VP - Nuclear) Beeper: 342-5800; Home: 769-4175			

SGS

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Rev. 5

EP I-2
Attachment 2

COMMUNICATION LOG

TIME LIMIT IN	PERSON TO BE CONTACTED	PERSON CONTACTED	DATE/ TIME	CONTACTED BY
30	Public Affairs Manager - Nuclear (Contact One) R. Silverio Office: 4699; Car: NA; Beeper: 342-5804; Home: 829-1546 W. Denman Office: 4480; Car: NA; Beeper: 342-5849; Home: 935-6349 B. Gorman Office: 4480; Car: NA; Beeper: 342-5851; Home: 228-1089			
30	Security-Site (Shift Lieutenant) Primary: 4001 Secondary: 935-2392			
60	NRC Primary: (ENS) Secondary: 202-951-0550 or 301-427-4056			
60	Hope Creek Project Primary: 4 935-6064 Secondary: 7-450-3271 (Union Security)			
60	Second Sun Visitor's Center Primary: 4480 Secondary: 935-2660			
60	NRC Resident (Contact One) J. Linville - Office: 4479; Home: 234-4998 R. Summers - Office: 4479; Home: 848-6741			

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Rev. 5

EP I-2
Attachment 2

TIME LIMIT IN	PERSON TO BE CONTACTED	PERSON CONTACTED	DATE/ TIME	CONTACTED BY
90	New Jersey DOE Primary: (201) 648-6290 Secondary: A. Rizzolo Office: (201) 648-2403; Home: (201) 762-3621 V. Bozzo Office: (201) 648-6290; Home: (201) 763-5913 B. Patel Office: (201) 648-4858; Home: (609) 448-8441 L. Coleman Office: (201) 648-2744; Home: (201) 746-9522			
90	New Jersey BPU R. Hartung Office: (201) 648-2966; Home: (201) 583-4091 N. Aswoni Office: (201) 648-2270; Home: (201) 857-2915 M. VanEss Office: (201) 648-2057; Home: (201) 835-7192 R. Shikh Office: (201) 648-6907; Home: (201) 748-3751			
90	American Nuclear Insurers Primary: (203) 677-7305			

COUNTY COMMUNICATION LOG

TIME LIMIT IN (MINUTES)*	PERSON TO BE CONTACTED	PERSON CONTACTED	DATE/ TIME	CONTACTED BY
15	Salem County Primary: (Direct Line) Secondary: 935-4404 or 935-4505			
15	Cumberland County Primary: (Direct Line) Secondary: 455-8500			
15	New Castle County Primary: (Direct Line) Secondary: 302-738-3131			
15	Kent County Primary: (Direct Line) Secondary: 302-734-6040			
15	U. S. Coast Guard Primary: 456-1376			

- * 1) When unable to contact the state of New Jersey within 15 minutes, contact Salem and Cumberland Counties and the U.S. Coast Guard directly and read the Initial Contact Message Form (Attachment 2) to this procedure.
- 2) When unable to contact the State of Delaware within 15 minutes, contact New Castle and Kent Counties directly and read the Initial Contact Message Form (Attachment 2) to this procedure.

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Rev. 5

EP 1 - 2
Attachment 2

ATTACHMENT 3
STATION STATUS CHECK LIST

Salem Generating Station Unit No. _____

Transmitted By: Name _____ Position: _____

1. Date and Time Event Declared: Date _____ Time _____ (24 hr clock)

2. Accident Classification: ☐ Alert

3. Cause of Incident:

Primary Initiating Condition used for declaration of incident

EPI-0 Part _____, Number _____ and/or

Significant Event No. _____

Description of the incident _____

4. Status of Reactor: ☐ Tripped/Time _____ ☐ At Power

☐ Hot Shutdown ☐ Cold Shutdown

5. Pressurizer Pressure _____ psig Core Exit TC _____ / _____ °F
Hottest / Average

6. Is offsite power available? ☐ YES ☐ NO

7. Are two or more diesel generators operable? ☐ YES ☐ NO

8. Did the emergency safeguards system activate? ☐ YES ☐ NO

9. Has the containment been isolated? ☐ YES ☐ NO

10. Other pertinent information _____

Approved _____
SSS/TSS/SSM

Station Status Checklist - Radiological Information

11. Gaseous Release: ☐ YES ☐ NO
(START TIME)

(A) Release Terminated: ☐ YES ☐ NO

(B) Anticipated or Known Duration of Release _____ Hours

(C) Type of Release: ☐ GROUND ☐ ELEVATED

(D) Wind Speed: _____ MPH Wind Direction: (Toward) _____
Divide by 2 to get _____ M/Sec (From) _____
Delta Temp: _____ (Degrees)

(E) Stability Class: ☐ Unstable ☐ Neutral ☐ Stable

(F) Release Rate Iodine _____ Ci/Sec.

(G) Release Rate Noble Gas: _____ Ci/Sec.

12. Liquid Release: ☐ YES ☐ NO
(Start Time)

(A) Release Terminated: ☐ YES ☐ NO

(B) Anticipated or Known Duration of Release _____ Hours

(C) Estimated Concentration _____ pico Curies/Liter

(D) Release Rate _____ Liters/Hour

13. Projected Off-site Dose Rates (As Soon As Data Is Available):

	Adult	
Distance (miles)	Whole Body (mrem/hr)	Child Thyroid (mrem/hr)
_____	_____	_____
_____	_____	_____
_____	_____	_____

14. Updates to States:

	Name	Time	Initials
<input type="checkbox"/> State of New Jersey	_____	_____	_____
<input type="checkbox"/> State of Delaware	_____	_____	_____
<input type="checkbox"/> Others	_____	_____	_____
	Agency		

Approved _____
SSS/RPS/RSM

ATTACHMENT 4
TERMINATION CALL LIST

Upon completion of the below prepared message the Emergency Coordinator or the Designated Communicator shall make the required notifications of this attachment. No additional information is required to be given at this time.

NOTE: In the event of a test, drill or exercise, preface and complete each message with the phrase "THIS IS A DRILL, THIS IS A DRILL".

MESSAGE

THIS IS _____ , _____
(NAME) (TITLE)

SALEM NUCLEAR GENERATING STATION, UNIT NO. _____

THIS IS A NOTIFICATION OF THE TERMINATION OF: an ALERT

OR

THIS IS A NOTIFICATION OF THE REDUCTION IN EMERGENCY STATUS FROM:

an ALERT

to

an UNUSUAL EVENT

THIS REDUCTION IN CLASSIFICATION OCCURRED AT _____ ON _____
(DATE) (TIME - 24 HOUR CLOCK)

ATTACHMENT 4
TERMINATION CALL LIST

DATE/TIME	TITLE OF PERSON TO BE CONTACTED	PERSON CONTACTED	CONTACTED BY
_____	Emergency Response Manager (if EOF has been activated)	_____	_____
_____	Emergency Duty Officer	_____	_____
_____	Senior Shift Supervisor	_____	_____
_____	New Jersey State Police	_____	_____
_____	Delaware State Police	_____	_____
_____	General Manager - Salem Operations	_____	_____
_____	General Manager - Hope Creek Operations	_____	_____
_____	Public Affairs Manager-Nuclear	_____	_____
_____	Security - Salem	_____	_____
_____	Hope Creek Project	_____	_____
_____	LAC	_____	_____
_____	NRC (ENS line)	_____	_____
_____	NRC Resident Inspector	_____	_____
_____	New Jersey DOE	_____	_____
_____	New Jersey BPU	_____	_____

See Addendum 1 for telephone numbers to be used.

Reviewed By: _____
Emergency Coordinator Date

DESIGNATED STATE OFFICIALS LIST

NEW JERSEY

DEPARTMENT OF ENVIRONMENTAL PROTECTION -
BUREAU OF RADIATION PROTECTION

David Scott	Steven Kuhrtz
Eugene Fisher	Judith Chasar
Eileen Hotte	Kent Tosch
John Feeney	Gerald Nicholls
Rebecca Green	Michael Hobar
Jeanette Eng	

DIVISION OF STATE POLICE -
OFFICE OF EMERGENCY MANAGEMENT

Major Harold Spedding
Captain Ross Beyer
The Civilian Duty Officer or Alternate*
The Enlisted Duty Officer or Alternate*

* The Duty Officers comprise a duty roster of approximately 10 to 15 names. Provide information to any one identifying himself as the Duty Officer or alternate and record name on Station Status Checklist.

EMERGENCY PROCEDURE
EP I-3
SITE AREA EMERGENCY

EP I-3

ACTION STATEMENTS - SECTION I - EMERGENCY COORDINATOR

Initials

Part A - Classification

The Senior Shift Supervisor/Emergency Duty Officer/Emergency Response Manager shall:

NOTE

These steps shall be performed by the Senior Shift Supervisor/Emergency Duty Officer until relieved of the Emergency Coordinator duties by the Emergency Response Manager. This relief shall be documented by signing below.

Senior Shift Supervisor/EDO

Date / Time

1. Determine classification of the event to be a Site Area Emergency as classified by EP I-0.

EP I-0 Part _____, No. _____

2. Check appropriate boxes and provide description of event on the Initial Contact Message Form (Attachment 1 to this procedure). Protective Action Recommendations are to be based upon EP IV-108, Protective Action Recommendations, as information becomes available.
3. Direct the Designated Communicator to make the notifications on the Communications Log (Attachment 2 to this procedure) and maintain communications with the U.S. Nuclear Regulatory Commission Operations Center when directed to do so by the U.S. Nuclear Regulatory Commission duty officer.

ACTION STATEMENTS - SECTION I (continued)Initials

4. Direct technically qualified persons to commence collecting the data required for the Operational and Radiological Sections of the Station Status Checklist (Attachment 3 to this procedure).
5. Station Status Checklists should be reviewed and provided to the designated Communicator every thirty minutes (or immediately if a significant change in station status occurs (eg. changes in event classification, or reactor status, or release information)).
6. Direct the communicator to respond to calls from State or local officials by providing the information on the Station Status Check List and have the name and affiliation of the person calling recorded on the Station Status Checklist.
7. Refer requests for information from the media to the Public Affairs Manager - Nuclear (phone numbers may be found in Attachment 3).

Part B - Activation

The Senior Shift Supervisor/Emergency Duty Officer shall:

NOTE

These steps shall be performed by the Senior Shift Supervisor until relieved by the Emergency Duty Officer. This relief shall be documented by signing below.

Senior Shift Supervisor/EDO

Date/Time

ACTION STATEMENTS - SECTION I (continued)InitialsPart B - Activation (cont.)

1. Direct that the Radiation Alert Alarm be sounded and the following be announced over the Station Page:

"Attention, Attention, Unit #___ is in a Site Area Emergency condition." (Repeat)

2. If emergency response support personnel have not been directed to report to their emergency duty stations, then:

- a) Direct that the following message be announced over the Station Page:

"All Emergency Response Personnel report to your emergency duty stations." (Repeat)

- b) Contact Security (ext. 4000) and request that the Technical Support Center be unlocked.

- c) Direct the Shift Radiation Protection Technician to initiate procedure EP IV-101 (TSC Initial Response).

- d) Direct technically qualified persons to commence data collection in accordance with the Operational and Radiological Status Boards (Figure 3 and 4 of the Emergency Plan Procedures Manual). Transmit this data to the Technical Support Center and Emergency Operations Facility, using the "Technical Support Center/Emergency Operations Facility Data" phones.

ACTION STATEMENTS - SECTION I (cont.)InitialsPart B - Activation (cont.)

3. If the Emergency Operations Facility has not been activated, direct the Designated Communicator to activate the emergency response support callout by implementing EP II-4, Emergency Response Support Callout, and notifying Security of Emergency Operations Facility activation.
4. Evaluate the status of the unaffected unit using Operations Directive No. 47.
5. If necessary, account for personnel in accordance with EP I-8, Personnel Accountability.
6. When the Emergency Operations Facility is activated, initiate transfer of the Emergency Coordinator duties from the Emergency Duty Officer to the Emergency Response Manager.
7. Continue by going to the appropriate section of this procedure based on the initiating event classification:
 - a) Radiological Emergencies - Part C of this Section
 - b) Operational Emergencies - Part D of this Section
 - c) Fire/Natural Event/Security Emergencies - Part E of this Section
 - d) Miscellaneous Emergencies - Part F of this Section.
 - e) Termination or De-escalation - Part G of this Section.

Part C - Radiological Emergencies

The Senior Shift Supervisor/Emergency Duty Officer shall:

1. Coordinate emergency on and off-site radiation surveys in accordance with EP IV-110A, Field Monitoring by the TSC,

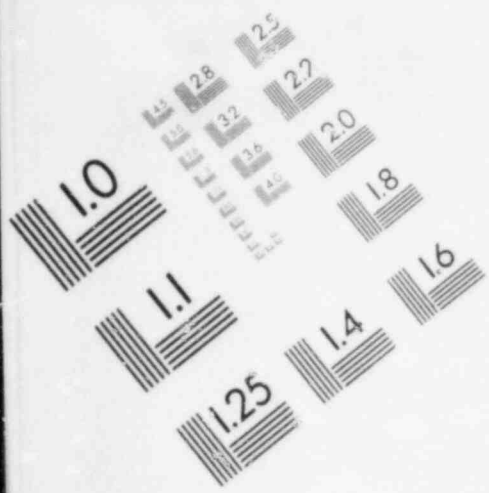
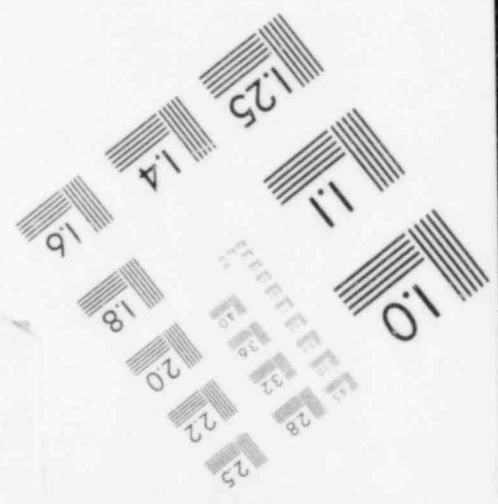
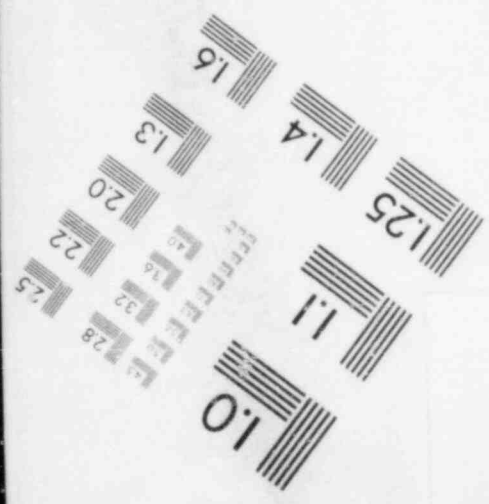
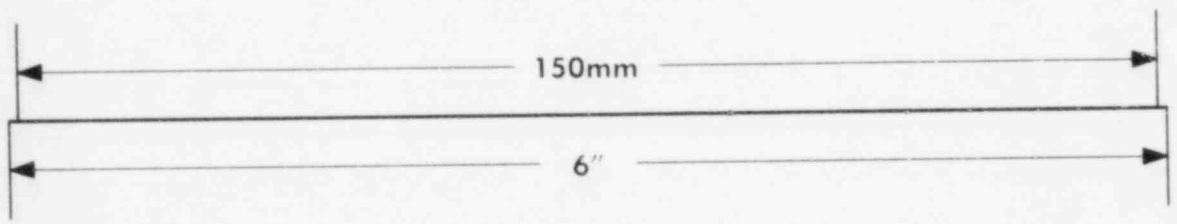
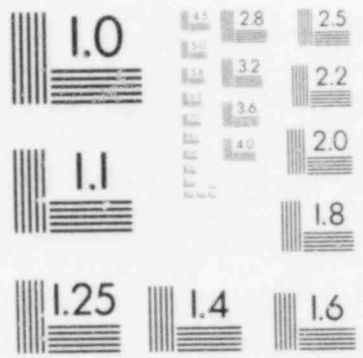
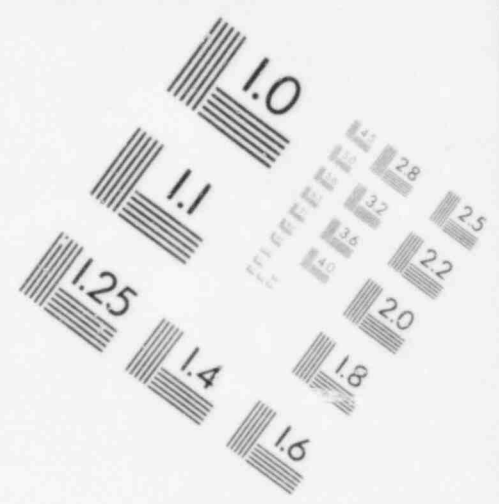


IMAGE EVALUATION
TEST TARGET (MT-3)



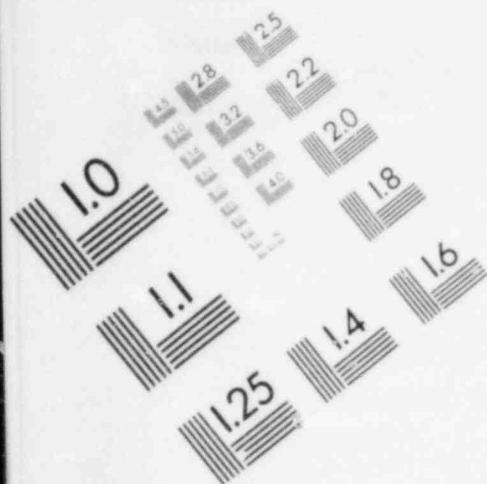
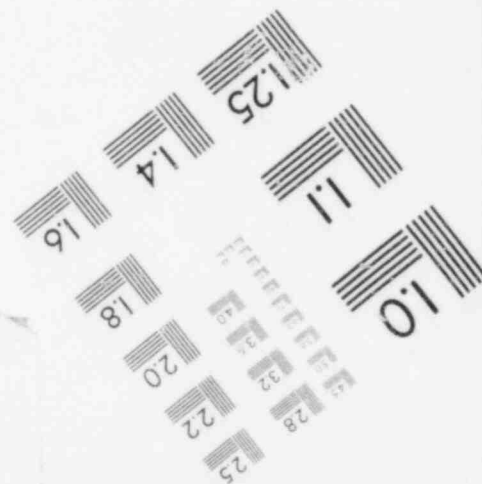
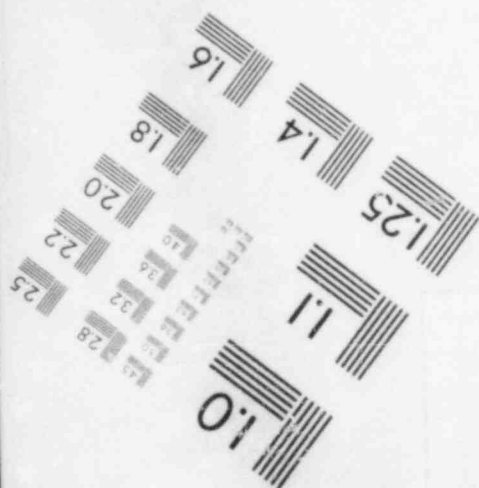
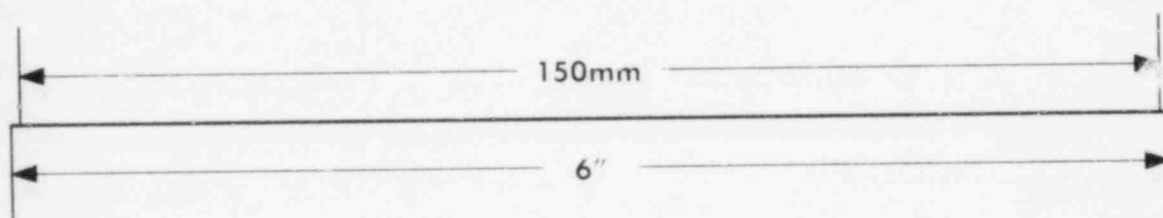
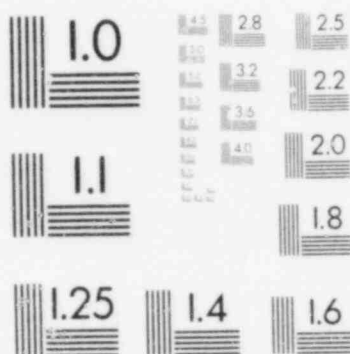
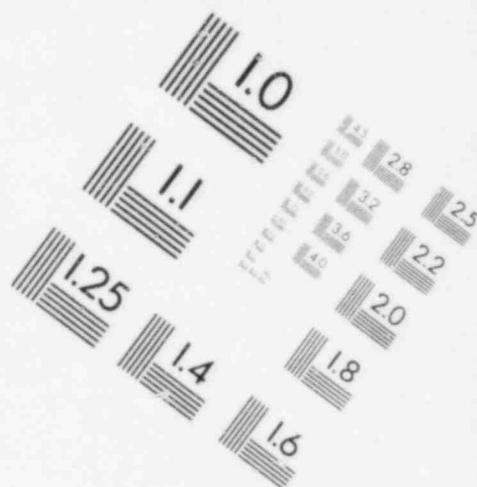


IMAGE EVALUATION
TEST TARGET (MT-3)



ACTION STATEMENTS - SECTION I (continued)InitialsPart C - Radiological Emergencies (cont.)

with the Shift Radiation Protection Technician, and the Radiation Protection personnel assigned to the Technical Support Center until the Emergency Operations Facility is activated.

2. If a radioactive spill caused the emergency, refer to EP I-6, Radioactive Spill.
3. Insure the actions required of Emergency Instruction I-4.16, Radiation Incident, are or have been taken as applicable.
4. If a fuel handling incident occurred, refer to Emergency Instruction I-4.25, Fuel Handling Incident.
5. If any personnel have been injured or exposed to radiation in excess of 10CFR20 limits, refer to EP I-5, Personnel Emergency.
6. If site evacuation becomes necessary, evacuate in accordance with EP I-12, Site Evacuation.
7. Complete an Operational Incident Report in accordance with Administrative Procedure No. 6.
8. When necessary to terminate or de-escalate the event go to Part G - Termination or De-Escalation.

ACTION STATEMENTS - SECTION I (continued)InitialsPart D - Operational Emergencies

The Senior Shift Supervisor/Emergency Duty Officer shall:

1. If the Reactor Protection System fails to bring the plant to Mode 3 when required refer to Emergency Instruction I-4.3, Reactor Trip.
2. On a loss of on or off-site power systems, as noted in the Action Levels, refer to Emergency Instruction I-4.9, Blackout.
3. Complete an Operational Incident Report in accordance with Administrative Procedure No. 6.
4. When necessary to terminate or de-escalate the event go to Part G - Termination or De-escalation.

Part E - Fire/Natural Event/Security Emergencies

The Senior Shift Supervisor/Emergency Duty Officer shall:

1. If the Delaware River level is at or exceeding 11.5 feet Mean Sea Level (100.5 feet PSE&G datum):
2. For sustained winds (elevation 33 feet) of 100 mph:
 - a) Implement Emergency Instruction I-4.1, Flooding/High Wind Conditions.
3. If a seismic event occurs with a force greater than 0.2g consider placing the plant in Hot Standby or Cold Shut-down.

ACTION STATEMENTS - SECTION I (cont.)Initials

4. Refer to EP I-7, Station Fire, to conduct fire fighting actions.

If outside assistance is required have the Salem Fire Dispatcher called. Give the location and type of fire and where vehicles will be met by the security personnel to Communicator. Notify security of incoming emergency vehicles.

5. If the Classification is due to a Security Event coordinate with the Security Lieutenant to implement the Contingency Plan and Procedures.
6. Complete an Operational Incident Report in accordance with Administrative Procedure No. 6.
7. When necessary to terminate or de-escalate the event go to Part G - Termination or De-escalation.

Part F - Miscellaneous Emergencies

The Senior Shift Supervisor/Emergency Duty Officer shall:

1. If toxic gas, e.g., chlorine, acid vapors, etc., present a safety hazard contact Technical Manager and/or Chemical Engineer for further direction. (Phone numbers may be found in Addendum 1).
2. If the Control Room must be evacuated for any reason refer to Emergency Instruction I-4.10, Control Room Evacuation.
3. Complete an Operational Incident Report in accordance with Administrative Procedure No. 6.

ACTION STATEMENTS - SECTION IInitials

4. When necessary to terminate or de-escalate the event go to Part G - Termination or De-escalation.

Part G - Termination or De-escalation

The Senior Shift Supervisor/Emergency Duty Officer, Emergency Response Manager shall:

1. Terminate when the following conditions are met.
 - a) None of the action levels defined in EP I-0 are applicable, or
 - b) The affected unit is in a recovery status and
 - c) Concurrence of the Emergency Coordinator is obtained.
2. De-escalate to a lower event classification when the initiating conditions referred to in EP I-0 for this event class have changed and warrant a reduction in classification.
3. Upon full completion of step 1 or 2 of this section, direct the designated Communicator to use the Termination Call List (Attachment 4 to this procedure) to make the required notifications.
4. Forward all completed forms to the Senior Operating Supervisor. Attach any other completed EP's or attachments used.

ACTION STATEMENTS - SECTION II - COMMUNICATOR
INITIALS

When directed by the Emergency Coordinator, the Designated Communicators shall:

1. Use the data provided on Attachment 1, Initial Contact Message Form, to notify persons listed on Attachment 2, Communications Log, within the time limits specified.

NOTE

If initial contact with a State cannot be accomplished within the 15 minutes allowed, notify the Emergency Coordinator and then contact the appropriate Counties directly using Attachment 2 to this procedure.

2. Upon receipt of a phone call from the New Jersey Bureau of Radiation Protection (BRP) or Delaware Division of Emergency Planning and Operations (DEPO) do the following:
 - a) Verify that caller, if from New Jersey, is listed on Designated State Officials List (Attachment 5 to this procedure).
 - b) Provide the Station Status Checklist (Attachment 3 to this procedure) at current level of completion to authorized callers.
 - c) Obtain from the official making the contact a telephone number to which followup Station Status Checklists should be directed.
 - d) Provide Station Status Checklist updates to the States every thirty (30) minutes or immediately if a significant change in Station Status occurs.

ACTION STATEMENTS - SECTION II (continued)Initials

3. When directed by the Senior Shift Supervisor/Emergency Duty Officer to activate the emergency response support callout.

a) Implement EP II-4, Emergency Response Support Callout.

b) Contact the security force Shift Lieutenant (ext. 4000) and use the following message:

This is the Communicator for the Senior Shift Supervisor/Emergency Duty Officer. We are activating the Emergency Operations Facility. Please implement procedure EP III-2 to open and secure the Emergency Operations Facility at the Nuclear Training Center in Salem.

4. When directed by the Senior Shift Supervisor/Emergency Duty Officer contact the Salem Fire Dispatcher at 935-4404 or 935-4505 and provide the following message:

a) This is the Communicator at Salem Generating Station. This is a notification of a fire.

b) We request fire company support.

c) The type of fire is _____.

d) The location of the fire is _____.

e) The fire truck(s) will be met at _____ and directed to the location of the fire by our security force.

Notify security (ext. 4000) of location of the fire, location where fire truck(s) should be met and type of fire.

ACTION STATEMENTS - SECTION II (continued)Initials

5. When directed by the Emergency Coordinator make the notifications on the Termination Call List - Attachment 4 to this procedure.

ACTION LEVEL

Whenever an action level described in EP I-0 as a Site Area Emergency is exceeded, notifications will be made to offsite authorities within the time limits specified on Attachment 2.

NOTE

Notifications shall be re-performed for each additional event defined in EP I-0.

LIMITS ON AUTHORITY

The person acting as the Emergency Coordinator (Senior Shift Supervisor, Emergency Duty Officer, or Emergency Response Manager) has the authority and responsibility to immediately and unilaterally initiate any emergency action including the decision to notify and provide protective action recommendations to authorities responsible for implementing off site emergency measures.

ATTACHMENTS

- Attachment 1 - Initial Contact Message Form
- Attachment 2 - Communications Log
- Attachment 3 - Station Status Checklist
- Attachment 4 - Termination Call List
- Attachment 5 - Designated State Officials List

Prepared By: C. A. BurgeReviewed By: LM Fry

Department Head

10/25/83

Date

Reviewed By: Cheryl Wakenas

Nuclear Emergency Planning Engineer

10/25/83

Date

Reviewed By: Q. Q. Dennis

Station Quality Assurance Review

(if required see EP VI-2)

10/25/83

Date

SORC Meeting No.: 83-14811/30/83

Date

Approved By: J. M. Zuphorz

General Manager - Salem Operations

11/30/83

Date

Approved By: P. A. M. M.

Manager - Nuclear Site Protection

12/2/83

Date

ATTACHMENT 1
INITIAL CONTACT MESSAGE FORM

Upon completion of the below prepared message the Emergency Coordinator or the Designated Communicator shall make the required notifications using Attachment 4 to this procedure.

NOTE: In the event of a test, drill or exercise, preface and complete each message with the phrase "THIS IS A DRILL, THIS IS A DRILL".

SECTION I (Provide to all)

THIS IS _____
(NAME) (TITLE)

SALEM NUCLEAR GENERATING STATION, UNIT NO. _____

THIS IS A NOTIFICATION OF: a SITE AREA EMERGENCY

THIS EVENT WAS DECLARED AT _____ ON _____
(TIME - 24 HOUR CLOCK) (DATE)

- ☐ THERE IS NO RELEASE IN PROGRESS.
☐ WE HAVE A NORMAL RELEASE IN PROGRESS.
☐ WE HAVE AN UNCONTROLLED RELEASE IN PROGRESS.

SECTION II (Provide to New Jersey and Delaware Only)

- ☐ NO PROTECTIVE ACTIONS ARE RECOMMENDED AT THIS TIME
☐ WE RECOMMEND SHELTERING FOR THE FOLLOWING SECTOR(S) _____/
(Distance-Miles)
☐ WE RECOMMEND EVACUATION FOR THE FOLLOWING SECTOR(S) _____/
(Distance-Miles)

SECTION III (Provide to all)

DESCRIPTION OF EVENT _____

THIS EVENT WAS TERMINATED AT _____ ON _____
(TIME - 24 HOUR CLOCK) (DATE)

Use back of sheet if necessary.

COMMUNICATION LOG

TIME LIMIT IN (MINUTES)	PERSON TO BE CONTACTED	PERSON CONTACTED	DATE/ TIME	CONTACTED BY
15	Primary: EDO (Contact One) 1.L. Fry Office: 4523; Car: 342-5103; Beeper: 800-612-4532 Home: 678-7634; 2.L. Catalfomo Office: 4522; Car: 342-5103 Beeper: 800-612-4534 Home: 678-3176			
15	Secondary: TSS (Contact One) 1.L. Miller Office: 4455; Car: 342-5077 Beeper: 800-612-4531 Home: 769-1727 2.R. Newman Office: 4410; Car: 342-5077 Beeper: 800-612-4539 Home: 358-3678			
15	NEW JERSEY Primary: (Direct Line) Secondary: 882-2000			
15	DELAWARE Primary: (Direct Line) Secondary: 302-736-5851			
30	LAC Township Primary: (Direct Line) Secondary: 935-7300			
30	General Manager - Salem Operations (Contact One) J. Zupko Office: 4500; Car: 342-5036 Beeper: 342-5803; Home: 468-5527 J. Driscoll Office: 4497; Car: 302-428-9084 (Asst. GM) Beeper: 800-612-4539; Home: 302-366-8472 R. A. Uderitz Office: 4800; Car: 342-5110 (VP - Nuclear) Beeper: 342-5800; Home: 769-4175			

SCS

1 of 4

Rev. 5

EP I-3
Attachment 2

TIME LIMIT IN	PERSON TO BE CONTACTED	PERSON CONTACTED	DATE/ TIME	CONTACTED BY
30	Public Affairs Manager - Nuclear (Contact One) R. Silverio Office: 4699; Car: NA; Beeper: 342-5804; Home: 829-1546 W. Denman Office: 4480; Car: NA; Beeper: 342-5849; Home: 935-6349 B. Gorman Office: 4480; Car: NA; Beeper: 342-5851; Home: 228-1089			
30	Security-Site (Shift Lieutenant) Primary: 4001 Secondary: 935-2392			
60	NRC Primary: (ENS) Secondary: 202-951-0550 or 301-427-4056			
60	Hope Creek Project Primary:4 935-6064 Secondary: 7-450-3271 (Union Security)			
60	Second Sun Visitor's Center Primary: 4480 Secondary: 935-2660			
60	NRC Resident (Contact One) J. Linville - Office: 4479; Home: 234-4998 R. Summers - Office: 4479; Home: 848-6741			

TIME LIMIT IN	PERSON TO BE CONTACTED	PERSON CONTACT	DATE/ TIME	CONTACTED BY
90	New Jersey DOE Primary: (201) 648-6290 Secondary: A. Rizzolo Office: (201) 648-2403; Home: (201) 762-3621 V. Bozzo Office: (201) 648-6290; Home: (201) 763-5913 B. Patel Office: (201) 648-4858; Home: (609) 448-8441 L. Coleman Office: (201) 648-2744; Home: (201) 746-9522			
90	New Jersey BPU R. Hartung Office: (201) 648-2066; Home: (201) 583-4091 N. Aswoni Office: (201) 648-2270; Home: (201) 857-2915 M. VanEss Office: (201) 648-2057; Home: (201) 835-7192 R. Shikh Office: (201) 648-6907; Home: (201) 748-3751			
90	American Nuclear Insurers Primary: (203) 677-7305			

COUNTY COMMUNICATION LOG

TIME LIMIT IN (MINUTES)*	PERSON TO BE CONTACTED (See Notes 1 & 2 below)	PERSON CONTACTED	DATE/ TIME	CONTACTED BY
15	Salem County Primary: (Direct Line) Secondary: 935-4404 or 935-4505			
15	Cumberland County Primary: (Direct Line) Secondary: 455-8500			
15	New Castle County Primary: (Direct Line) Secondary: 302-738-3131			
15	Kent County Primary: (Direct Line) Secondary: 302-734-6040			
15	U. S. Coast Guard Primary: 456-1370			

- * 1) When unable to contact the state of New Jersey within 15 minutes, contact Salem and Cumberland Counties and the U.S. Coast Guard directly and read the Initial Contact Message Form (Attachment 2) to this procedure.
- 2) When unable to contact the State of Delaware within 15 minutes, contact New Castle and Kent Counties directly and read the Initial Contact Message Form (Attachment 2) to this procedure.

STATION STATUS CHECK LIST

Salem Generating Station Unit No. _____

Transmitted By: Name _____ Position: _____

1. Date and Time Event Declared: Date _____ Time _____ (24 hr clock)
2. Accident Classification: ☐ Site Area Emergency
3. Cause of Incident:

Primary Initiating Condition used for declaration of incident

EPI-0 Part _____, Number _____ and/or

Significant Event No. _____

Description of the incident _____

4. Status of Reactor: ☐ Tripped Time _____ ☐ At Power
☐ Hot Shutdown ☐ Cold Shutdown
5. Pressurizer Pressure _____ psig Hottest Core Exit TC _____ °F
6. Is offsite power available? ☐ YES ☐ NO
7. Are two or more diesel generators operable? ☐ YES ☐ NO
8. Did the emergency safeguards system activate? ☐ YES ☐ NO
9. Has the containment been isolated? ☐ YES ☐ NO
10. Other pertinent information _____

Approval _____
SSS/TSS/SSM

Station Status Checklist - Radiological Information

11. Gaseous Release: ☐ YES ☐ NO
(START TIME)
- (A) Release Terminated: ☐ YES ☐ NO
- (B) Anticipated or Known Duration of Release _____ Hours
- (C) Type of Release: ☐ GROUND ☐ ELEVATED
- (D) Wind Speed: _____ MPH Wind Direction: (Toward) _____
Divide by 2 to get _____ M/Sec (From) _____
Delta Temp: _____ (Degrees)
- (E) Stability Class: ☐ Unstable ☐ Neutral ☐ Stable
- (F) Release Rate Iodine _____ Ci/Sec.
- (G) Release Rate Noble Gas: _____ Ci/Sec.
12. Liquid Release: ☐ YES ☐ NO
(Start Time)
- (A) Release Terminated: ☐ YES ☐ NO
- (B) Anticipated or Known Duration of Release _____ Hours
- (C) Estimated Concentration _____ pico Curies/Liter
- (D) Release Rate _____ Liters/Hour
13. Projected Off-site Dose Rates (As Soon As Data Is Available):
- | Distance (miles) | Adult | |
|------------------|----------------------|-------------------------|
| | Whole Body (mrem/hr) | Child Thyroid (mrem/hr) |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
14. Updates to States: _____ Time Initials
- ☐ State of New Jersey _____
Name _____
- ☐ State of Delaware _____
Name _____
- ☐ Others _____
Name _____
Agency _____
- Approved _____
SSS/RPS/RSM

ATTACHMENT 4
TERMINATION CALL LIST

Upon completion of the below prepared message the Emergency Coordinator or the Designated Communicator shall make the required notifications of this attachment. No additional information is required to be given at this time.

NOTE: In the event of a test, drill or exercise, preface and complete each message with the phrase "THIS IS A DRILL, THIS IS A DRILL".

MESSAGE

THIS IS _____,
(NAME) (TITLE)

SALEM NUCLEAR GENERATING STATION, UNIT NO. _____

THIS IS A NOTIFICATION OF THE TERMINATION OF:

☐ a SITE AREA EMERGENCY

OR

THIS IS A NOTIFICATION OF THE REDUCTION IN EMERGENCY STATUS FROM:

☐ a SITE AREA EMERGENCY

to

☐ an UNUSUAL EVENT

☐ an ALERT

THIS REDUCTION IN CLASSIFICATION OCCURRED AT _____ ON
(DATE) (TIME - 24 HOUR CLOCK)

ATTACHMENT 4
TERMINATION CALL LIST

DATE/TIME	TITLE OF PERSON TO BE CONTACTED	PERSON CONTACTED	CONTACTED BY
_____	Emergency Response Manager (if EOF has been activated)	_____	_____
_____	Emergency Duty Officer	_____	_____
_____	Senior Shift Supervisor	_____	_____
_____	New Jersey State Police	_____	_____
_____	Delaware State Police	_____	_____
_____	General Manager - Salem Operations	_____	_____
_____	General Manager - Hope Creek Operations	_____	_____
_____	Public Affairs Manager-Nuclear	_____	_____
_____	Security - Salem	_____	_____
_____	Hope Creek Project	_____	_____
_____	LAC	_____	_____
_____	NRC (ENS line)	_____	_____
_____	NRC Resident Inspector	_____	_____
_____	New Jersey DOE	_____	_____
_____	New Jersey BPU	_____	_____

See Addendum 1 for telephone numbers to be used.

Reviewed By: _____
Emergency Coordinator Date

DESIGNATED STATE OFFICIALS LIST

NEW JERSEY

DEPARTMENT OF ENVIRONMENTAL PROTECTION --
BUREAU OF RADIATION PROTECTION

Frank Cosolito	James Ross
David Scott	Steven Kuhrtz
Eugene Fisher	Judith Chasar
Eileen Hotte	Kent Tosch
John Feeney	Gerald Nicholls
Rebecca Green	Michael Hobar

DIVISION OF STATE POLICE --
OFFICE OF EMERGENCY MANAGEMENT

Major Harold Spedding
Captain Ross Beyer
The Civilian Duty Officer or Alternate*
The Enlisted Duty Officer or Alternate*

- * The Duty Officers comprise a duty roster of approximately 10 to 15 names. Provide information to any one identifying himself as the Duty Officer or alternate and record name on Station Status Checklist.

EMERGENCY PROCEDURE
EP I-4
GENERAL EMERGENCY

ACTION STATEMENTS - SECTION I - EMERGENCY COORDINATOR

Initials

Part A - Classification

The Senior Shift Supervisor/Emergency Duty Officer/Emergency Response Manager shall:

NOTE

These steps shall be performed by the Senior Shift Supervisor/Emergency Duty Officer until relieved of the Emergency Coordinator duties by the Emergency Response Manager. This relief shall be documented by signing below.

Senior Shift Supervisor/EDO

Date / Time

1. Determine classification of the event to be a General Emergency as classified by EP I-0.

EP I-0 Part _____ No. _____

2. Check appropriate boxes and provide description of event on the Initial Contact Message Form (Attachment 1 to this procedure). Protective Action Recommendations are to be based upon EP IV-108, Protective Action Recommendations, as information becomes available.
 - a) Determine if a Predetermined Protective Action Recommendation is required by reviewing Attachment 2 to this procedure.

ACTION STATEMENTS - SECTION I (continued)Initials

- b. If a Predetermined Protective Action Recommendation is required, direct the Designated Communicator to transmit it using the Initial Contact Message Form.
3. Direct the Designated Communicator to make the notifications on the Communications Log (Attachment 3 to this procedure) and maintain communications with the U.S. Nuclear Regulatory Commission Operations Center when directed to do so by the U.S. Nuclear Regulatory Commission duty officer.
4. Direct that technically qualified persons commence collecting the data required for the Operational and Radiological Sections of the Station Status Checklist (Attachment 4 to this procedure).
5. Station Status Checklists should be reviewed and provided to the designated Communicator every thirty minutes (or immediately if a significant change in station status occurs (eg. changes in event classification, or reactor status, or release information)).
6. Direct the communicator to respond to calls from State or local officials by providing the information on the Station Status Check List and have the name and affiliation of the person calling recorded on the Station Status Checklist.
7. Refer requests for information from the media to the Public Affairs Manager - Nuclear (phone numbers may be found in Attachment 3).

ACTION STATEMENTS - SECTION I (continued)InitialsPart B - Activation

The Senior Shift Supervisor/Emergency Duty Officer shall:

NOTE

These steps shall be performed by the Senior Shift Supervisor until relieved by the Emergency Duty Officer. This relief shall be documented by signing below.

Senior Shift Supervisor/EDO

Date / Time

1. Direct that the Radiation Alert Alarm be sounded and the following be announced over the Station Page:

"Attention, Attention, Unit #_____is in a General Emergency condition." (Repeat)

2. If emergency response support personnel have not been directed to report to their emergency duty stations, then:

- a) Direct that the following message be announced over the Station Page:

"All Emergency Response Personnel report to your emergency duty stations." (Repeat)

- b) Contact Security (ext. 4000) and request that the Technical Support Center be unlocked.

- c) Direct the Shift Radiation Protection Technician to initiate procedure EP IV-101 (TSC Initial Response).

ACTION STATEMENTS - SECTION I (cont.)Part B - Activation (cont.)

- d. Direct technically qualified persons to commence data collection in accordance with the Operational and Radiological Status Boards (Figure 3 and 4 of the Emergency Plan Procedures Manual). Transmit this data to the Technical Support Center and Emergency Operations Facility, using the "Technical Support Center/Emergency Operations Facility Data " phones.
3. If the Emergency Operations Facility has not been activated, direct the Designated Communicator to activate the emergency response support callout by implementing EP II-4, Emergency Response Support Callout, and notifying Security of Emergency Operations Facility activation
4. Evaluate the status of the unaffected unit using Operations Directive No. 47.
5. If necessary, account for personnel in accordance with EP I-8, Personnel Accountability.
6. When the Emergency Operations Facility is activated, initiate transfer of the Emergency Coordinator duties from the Emergency Duty Officer to the Emergency Response Manager using the Emergency Response Manager Checklist (EP II-1).
7. Continue by going to the appropriate section of this procedure based on the initiating event classification:
 - a) Radiological Emergencies - Part C of this Section
 - b) Operational Emergencies - Part D of this Section
 - c) Fire/Natural Event/Security Emergencies - Part E of this Section
 - d) Termination and De-escalation - Part F of this Section.

ACTION STATEMENTS - SECTION I (continued)InitialsPart C - Radiological Emergencies

The Senior Shift Supervisor/Emergency Duty Officer shall:

1. Coordinate emergency on and off-site radiation surveys in accordance with Radiation Protection Procedure EP IV-110A, Field Monitoring by the TSC, with the Shift Radiation Protection Technician, and the Radiation Protection personnel assigned to the Technical Support Center until the Emergency Operations Facility is activated.
2. If a radioactive spill caused the emergency, refer to EP I-6, Radioactive Spill.
3. Insure the actions required of Emergency Instruction I-4.16, Radiation Incident, are or have been taken as applicable.
4. If a fuel handling incident occurred, refer to Emergency Instruction I-4.25, Fuel Handling Incident.
5. If any personnel have been injured or exposed to radiation in excess of 10CFR20 limits, refer to EP I-5, Personnel Emergency.
6. If site evacuation becomes necessary, evacuate in accordance with EP I-12, Site Evacuation.
7. Complete an Operational Incident Report in accordance with Administrative Procedure No. 6.
8. When necessary to terminate or de-escalate the event go to Part G - Termination or De-Escalation.

ACTION STATEMENTS - SECTION I (continued)INITIALSPart D - Operational Emergencies

The Senior Shift Supervisor/Emergency Duty Officer shall:

1. If the Reactor Protection System fails to bring the plant to Mode 3 when required refer to Emergency Instruction I-4.3, Reactor Trip.
2. On a loss of on and off-site power systems, as noted in the Action Levels, refer to Emergency Instruction I-4.9, Blackout.
3. Complete an Operational Incident Report in accordance with Administrative Procedure No. 6.
4. When necessary to terminate or de-escalate go to Part F - Termination and De-escalation.

Part E - Fire/Natural Event/Security Emergencies

The Senior Shift Supervisor/Emergency Duty Officer shall:

1. If the Classification is due to a Security Event coordinate with the Security Lieutenant to implement the Contingency Plan and Procedures.
2. Complete an Operational Incident Report in accordance with Administrative Procedure No. 6.
3. When necessary to terminate or de-escalate the event go to Part F - Termination and De-escalation.

ACTION STATEMENTS - SECTION I (continued)INITIALSPart F - Termination and De-escalation

The Senior Shift Supervisor/Emergency Duty Officer shall:

1. Terminate when the following conditions are met.
 - a) None of the action levels as defined in EP I-0 are applicable, or
 - b) The affected unit is in a recovery status and
 - c) Concurrence of the Emergency Coordinator is obtained.
2. De-escalate to a lower event classification when the initiating conditions referred to in EP I-0 for this event class have changed and warrant a reduction in classification.
3. Upon full completion of step 1 or 2 of this section, direct the designated Communicator to use the Termination Call List - Attachment 5 to this procedure to make the required notifications.
4. Forward all completed forms to the Senior Operating Supervisor. Attach any other completed EP's or attachments used.

ACTION STATEMENTS - SECTION II - COMMUNICATORInitials

When directed by the Emergency Coordinator, the Designated Communicators shall:

1. Use the data provided on Attachment 1, Initial Contact Message Form to notify persons listed on Attachment 3, Communications Log, within the time limits specified.
2. Upon receipt of a phone call from the New Jersey Bureau of Radiation Protection (BRP) or Delaware Division of Emergency Planning and Operations (DEPO) do the following:
 - a) Verify that caller, if from New Jersey, is listed on the Designated State Officials List (Attachment 6 to this procedure).
 - b) Provide the Station Status Checklist (Attachment 4 to this procedure) at current level of completion.
 - c) Obtain from the official making the contact a telephone number to which followup Station Status Checklists should be directed.
 - d) Provide Station Status Checklist updates to the States every (30) minutes or immediately if a significant change in Station Status occurs.
3. When directed by the Senior Shift Supervisor/Emergency Duty Officer to activate the emergency response support callout.
 - a) Implement EP II-4, Emergency Response Support Callout.
 - b) Contact the security force Shift Lieutenant (ext. 4000) and use the following message:

ACTION STATEMENTS - SECTION II (continued)Initials

This is the Communicator for the Senior Shift Supervisor/Emergency Duty Officer. We are activating the Emergency Operations Facility. Please implement procedure EP III-2 to open and secure the Emergency Operations Facility at the Nuclear Training Center in Salem.

4. When directed by the Senior Shift Supervisor/Emergency Duty Officer contact the Salem Fire Dispatcher at 935-4404 or 935-5505 and provide the following message:

- a) This is the Communicator at Salem Generating Station. This is a notification of a fire.
- b) We request fire company support.
- c) The type of fire is _____.
- d) The location of the fire is _____.
The fire truck(s) will be met at _____
and directed to the location of the fire by our security force.

Notify security (ext. 4000) of location of the fire, location where fire truck(s) should be met and type of fire.

5. When directed by the Emergency Coordinator make the notifications on the Termination Call List - Attachment 5 to this procedure.

ACTION LEVEL

Whenever an action level described in EP I-0 as a General Emergency is exceeded, notifications will be made to offsite authorities within the time limits specified on Attachment 1.

NOTE

Notifications shall be re-performed for each additional event defined in EP I-0.

LIMITS ON AUTHORITY

The person acting as the Emergency Coordinator (Senior Shift Supervisor, Emergency Duty Officer, or Emergency Response Manager) has the authority and responsibility to immediately and unilaterally initiate any emergency action including the decision to notify and provide protective action recommendations to authorities responsible for implementing off site emergency measures.

ATTACHMENTS

- Attachment 1 - Initial Contact Message Form
- Attachment 2 - Predetermined Protective Action Recommendation
- Attachment 3 - Communications Log
- Attachment 4 - Station Status Checklist
- Attachment 5 - Termination Call List
- Attachment 6 - Designated State Officials List

Prepared By: C. A. Burge

Reviewed By: *John Lyab* 10/25/83
Department Head Date

Reviewed By: *Cheryl Lakenas for* 10/25/83
Nuclear Emergency Planning Engineer Date

Reviewed By: *D. C. Perkins* 10/25/83
Station Quality Assurance Review Date
(if required see EP VI-2)

SORC Meeting No.: 83-148 *J* 11/30/83
Date

Approved By: *JM Zychoz* 11/30/83
General Manager - Salem Operations Date

Approved By: *John A. Muth* 12/2/83
Manager - Nuclear Site Protection Date

ATTACHMENT 1
INITIAL CONTACT MESSAGE FORM

Upon completion of the below prepared message the Emergency Coordinator or the Designated Communicator shall make the required notifications using Attachment 3 to this procedure.

NOTE: In the event of a test, drill or exercise, preface and complete each message with the phrase "THIS IS A DRILL, THIS IS A DRILL".

SECTION I (Provide to all)

THIS IS _____,
(NAME) (TITLE)

SALEM NUCLEAR GENERATING STATION, UNIT NO. _____

THIS IS A NOTIFICATION OF:

☐ a GENERAL EMERGENCY

THIS EVENT WAS DECLARED AT _____ ON _____
(TIME - 24 HOUR CLOCK) (DATE)

- ☐ THERE IS NO RELEASE IN PROGRESS.
☐ WE HAVE A NORMAL RELEASE IN PROGRESS.
☐ WE HAVE AN UNCONTROLLED RELEASE IN PROGRESS.

SECTION II (Provide to New Jersey and Delaware Only)

- ☐ NO PROTECTIVE ACTIONS ARE RECOMMENDED AT THIS TIME
☐ WE RECOMMEND SHELTERING FOR THE FOLLOWING SECTOR(S) _____/
(Distance-Miles)
☐ WE RECOMMEND EVACUATION FOR THE FOLLOWING SECTOR(S) _____/
(Distance-Miles)

SECTION III (Provide to PSE&G personnel only)

DESCRIPTION OF EVENT _____

se back of sheet if necessary.

PREDETERMINED PROTECTIVE ACTION RECOMMENDATION

<u>CASE</u>	<u>PREDETERMINED PAR</u>	<u>REMARKS</u>
<u>Case A</u>		
Core Degradation (1) with potential for LOCA (2) <u>and</u> failure of Containment Boundary(3)	0 - 2.0 mile evacuation in all four quadrants	These Predetermined PAR's shall be used until the Technical Support Center (TSC) and Emergency Operations Facility (EOF) are operational. Following activation of the TSC and EOF these predetermined PAR's may be used as guidance for making actual Protective Action Recommendations.
<u>Case B</u>		
Core Degradation (1) <u>and</u> LOCA (2) with no immediate potential for Containment Boundary Failure(3)	0 - 5.0 mile evacuation in down-wind quadrant 0 - 5.0 mile sheltering in unaffected quadrants	
<u>Case C</u>		
Core Degradation (1) <u>and</u> LOCA (2) with likely Failure of Containment Boundary (3) as judged by Senior Shift Supervisor/EDO	0 - 5.0 mile evacuation in all four quadrants 5.0 - 10.0 mile evacuation in down-wind quadrant	
<u>Case D</u>		
Core Degradation (1) <u>and</u> LOCA (2) with imminent Failure of Containment Boundary (3) ad judged by Senior Shift Supervisor/EDO.	0 - 5.0 mile sheltering an all four quadrants 5.0 - 10.0 mile sheltering in down-wind quadrant	

COMMUNICATION LOG

TIME LIMIT IN (MINUTES)	PERSON TO BE CONTACTED	PERSON CONTACTED	DATE/ TIME	CONTACTED BY
15	Primary: EDO (Contact One) 1.L. Fry Office: 4523; Car: 342-5103; Beeper: 800-612-4532 Home: 678-7634; 2.L. Catalfomo Office: 4522; Car: 342-5103 Beeper: 800-612-4534 Home: 678-3176			
15	Secondary: TSS (Contact One) 1.L. Miller Office: 4455; Car: 342-5077 Beeper: 800-612-4531 Home: 769-1727 2.R. Newman Office: 4410; Car: 342-5077 Beeper: 800-612-4539 Home: 358-3678			
15	NEW JERSEY Primary: (Direct Line) Secondary: 882-2000			
15	DELAWARE Primary: (Direct Line) Secondary: 302-736-5851			
15	New Castle County Primary: (Direct Line) Secondary: 302-738-3131			
15	Salem County Primary: (Direct Line) Secondary: 935-4504			
15	LAC Township Primary: (Direct Line) Secondary: 935-7300			
15	Cumberland County Primary: (Direct Line) Secondary: 455-8500			

TIME LIMIT IN (MINUTES)	PERSON TO BE CONTACTED	PERSON CONTACTED	DATE/ TIME	CONTACTED BY
15	Kent County Primary: (Direct Line) Secondary: 302-734-6040			
15	U. S. Coast Guard Primary: 456-1370			
30	General Manager - Salem Operations (Contact One) J. Zupko Office: 4500; Car: 342-5036; Beeper: 342-5803; Home: 468-5527 J. Driscoll Office: 4497; Car: 302-428-9084 (Asst. GM) Beeper: 342-0555; Home: 302-366-8472 R. A. Uderitz Office: 4800; Car: 342-5110 (VP - Nuclear) Beeper: 342-5800 Home: 769-4175			
30	Public Affairs Manager-Nuclear (Contact One) R. Silverio Office: 4699; Car: NA; Beeper: 342-5804; Home: 829-1546 W. Denman Office: 4980; Car: NA; Beeper: 342-5849; Home: 935-6349 B. Gorman Office: 4480; Car: NA; Beeper: 342-5851; Home: 228-1089			
30	Security-Site (Shift Lieutenant) Primary: 4001 Secondary: 935-2392			

COMMUNICAL NS LOG

TIME LIMIT IN (MINUTES)	PERSON TO BE CONTACTED	PERSON CONTACTED	DATE/ TIME	CONTACTED BY
60	NRC Primary: (ENS) Secondary: 202-951-0550 or 301-427-4056			
60	Hope Creek Project Primary: 935-6064 Secondary: 7-450-3271 (Union Security)			
60	Second Sun Visitor's Center Primary: 4480 Secondary: 935-2660			
60	NRC Resident (Contact One) Jim Linville- Office: 4479; Home: 234-4998 R. Summers - Office: 4479; Home: 848-6741			
90	New Jersey DOE Primary: (201) 648-6290 Secondary: A. Rizzolo Office: (201) 648-2403; Home: (201) 762-3621 V. Bozzo Office: (201) 648-6290; Home: (201) 763-5913 B. Patel Office: (201) 648-4858; Home: (609) 448-8441 L. Coleman Office: (201) 648-2744; Home: (201) 746-9522			
90	New Jersey BPU R. Hartung Office: (201) 648-2066; Home: (201) 583-4091 N. Aswoni Office: (201) 648-2270; Home: (201) 857-2915 M. VanEss Office: (201) 648-2057; Home: (201) 835-7192 R. Shikh Office: (201) 648-6907; Home: (201) 748-3751			

STATION STATUS CHECK LIST

Salem Generating Station Unit No. _____

Transmitted By: Name _____ Position: _____

1. Date and Time Event Declared: Date _____ Time _____ (24 hr clock)

2. Accident Classification: ☐ Alert

3. Cause of Incident: _____

Primary Initiating Condition used for declaration of incident

EPI-0 Part _____, Number _____ and/or

Significant Event No. _____

Description of the incident _____

4. Status of Reactor: ☐ Tripped/Time _____ ☐ At Power

☐ Hot Shutdown ☐ Cold Shutdown

5. Pressurizer Pressure _____ psig Core Exit TC _____ / _____ °F
Hottest / Average

6. Is offsite power available? ☐ YES ☐ NO

7. Are two or more diesel generators operable? ☐ YES ☐ NO

8. Did the emergency safeguards system activate? ☐ YES ☐ NO

9. Has the containment been isolated? ☐ YES ☐ NO

10. Other pertinent information _____

Approved _____

SSS/TSS/SSM

Station Status Checklist - Radiological Information

11. Gaseous Release: ☐ YES ☐ NO
(START TIME)
- (A) Release Terminated: ☐ YES ☐ NO
- (B) Anticipated or Known Duration of Release _____ Hours
- (C) Type of Release: ☐ GROUND ☐ ELEVATED
- (D) Wind Speed: _____ MPH Wind Direction: (Toward) _____
Divide by 2 to get _____ M/Sec (From) _____
Delta Temp: _____ (Degrees)
- (E) Stability Class: ☐ Unstable ☐ Neutral ☐ Stable
- (F) Release Rate Iodine _____ Ci/Sec.
- (G) Release Rate Noble Gas: _____ Ci/Sec.
12. Liquid Release: ☐ YES ☐ NO
(Start Time)
- (A) Release Terminated: ☐ YES ☐ NO
- (B) Anticipated or Known Duration of Release _____ Hours
- (C) Estimated Concentration _____ pico Curies/Liter
- (D) Release Rate _____ Liters/Hour
13. Projected Off-site Dose Rates (As Soon As Data Is Available):
- | Distance (miles) | Adult | |
|------------------|----------------------|-------------------------|
| | Whole Body (mrem/hr) | Child Thyroid (mrem/hr) |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
14. Updates to States: _____ Time Initials
- ☐ State of New Jersey _____
Name _____
- ☐ State of Delaware _____
Name _____
- ☐ Others _____
Name _____
Agency _____

Approved _____
SSS/RPS/RSM

ATTACHMENT 5
TERMINATION CALL LIST

Upon completion of the below prepared message the Emergency Coordinator or the Designated Communicator shall make the required notifications of this attachment. No additional information is required to be given at this time.

NOTE: In the event of a test, drill or exercise, preface and complete each message with the phrase "THIS IS A DRILL, THIS IS A DRILL".

MESSAGE

THIS IS _____, _____
(NAME) (TITLE)

SALEM NUCLEAR GENERATING STATION, UNIT NO. _____

THIS IS A NOTIFICATION OF THE TERMINATION OF:

☐ a GENERAL EMERGENCY

OR

THIS IS A NOTIFICATION OF THE REDUCTION IN EMERGENCY STATUS FROM:

☐ a GENERAL EMERGENCY

to

☐ an UNUSUAL EVENT

☐ SITE AREA EMERGENCY

☐ an ALERT

THIS REDUCTION IN CLASSIFICATION OCCURRED AT _____ ON _____
(DATE) (TIME - 24 HOUR CLOCK)

ATTACHMENT 5
TERMINATION CALL LIST

DATE/TIME	TITLE OF PERSON TO BE CONTACTED	PERSON CONTACTED	CONTACTED BY
_____	Emergency Response Manager (if EOF has been activated)	_____	_____
_____	Emergency Duty Officer	_____	_____
_____	Senior Shift Supervisor .	_____	_____
_____	New Jersey State Police	_____	_____
_____	Delaware State Police	_____	_____
_____	General Manager - Salem Operations	_____	_____
_____	General Manager - Hope Creek Operations	_____	_____
_____	Public Affairs Manager-Nuclear	_____	_____
_____	Security - Salem	_____	_____
_____	Hope Creek Project	_____	_____
_____	LAC	_____	_____
_____	NRC (ENS line)	_____	_____
_____	NRC Resident Inspector	_____	_____
_____	New Jersey DOE	_____	_____
_____	New Jersey BPU	_____	_____

See Addendum 1 for telephone numbers to be used.

Reviewed By: _____
Emergency Coordinator Date

DESIGNATED STATE OFFICIALS LIST

NEW JERSEY

DEPARTMENT OF ENVIRONMENTAL PROTECTION -
BUREAU OF RADIATION PROTECTION

Frank Cosolito	James Ross
David Scott	Steven Kuhrtz
Eugene Fisher	Judith Chasar
Eileen Hotte	Kent Tosch
John Feeney	Gerald Nicholls
Rebecca Green	Michael Hobar

DIVISION OF STATE POLICE -
OFFICE OF EMERGENCY MANAGEMENT

Major Harold Spedding
Captain Ross Beyer
The Civilian Duty Officer or Alternate*
The Enlisted Duty Officer or Alternate*

- * The Duty Officers comprise a duty roster of approximately 10 to 15 names. Provide information to any one identifying himself as the Duty Officer or alternate and record name on Station Status Checklist.