

Transmittal Date: 2/03/92

TO: 145
USNRC/WASHINGTON/

PROCEDURE NUMBER: GEN-3
TITLE: ON-SHIFT SYSTEM POWER CONTROLLER

TRANSMITTAL NUMBER: 460352

TRANSMITTAL: LISTED BELOW ARE NEW/REVISED PROCEDURES WHICH MUST BE IMMEDIATELY INSERTED INTO OR DISCARDED FROM YOUR PROCEDURE MANUAL.

Action Required

Remove and Destroy	GEN-3, R/7
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Replace with	GEN-3, R/8
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SIGN, DATE AND RETURN THE ACKNOWLEDGEMENT FORM WITHIN 10 DAYS TO THE PALISADES PLANT DOCUMENT CONTROL.

SIGNATURE OR INITIALS

DATE

060040

AD45.1

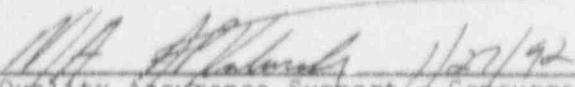
GENERAL OFFICE EMERGENCY PLANNING

PROC NO GEN-3

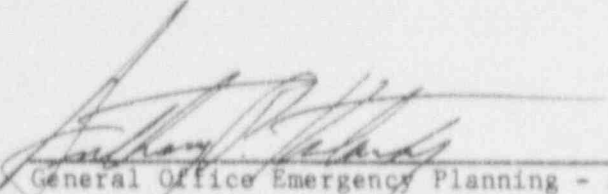
Revision 8

APPROVAL SUMMARY

TITLE: ON-SHIFT SYSTEM POWER CONTROLLER

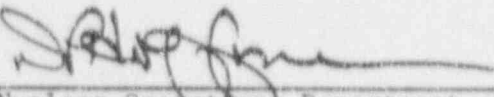

Quality Assurance Support - Concurrence

Date


General Office Emergency Planning - Approval



Date


Nuclear Operations Department - Approval



Date

ON-SHIFT SYSTEM POWER CONTROLLER

1.0 PURPOSE

The purpose of this procedure is to describe and define the responsibility of the Corporate On-Shift System Power Controller during an emergency situation at a Consumers Power Company (CPCo) nuclear facility, or when a request for mutual assistance has been received from another nuclear utility.

2.0 ATTACHMENTS

Attachment 1, "Power Control Checklist"

Attachment 2, "Mutual Assistance Request Checklist"

3.0 INITIAL CONDITIONS AND/OR REQUIREMENTS

Palisades or Big Rock Point must be at an Unusual Event, Alert, Site Area Emergency, or General Emergency or a request for mutual assistance must be received from another utility before initiation of this procedure.

4.0 RESPONSIBILITIES

Upon notification of an emergency situation at Palisades, Big Rock Point or another nuclear utility the On-Shift System Power Controller shall notify personnel as designated in Section 5.0 of this procedure using Appendix G, Augmentation List.

ON-SHIFT SYSTEM POWER CONTROLLER

5.0 REQUIREMENTS

5.1 ACTIONS (UNUSUAL EVENT AT PALISADES OR BIG ROCK POINT)

- a. Obtain all of the information required on Attachment 1 from the affected plant.
- b. Notify the General Office On-Call Director using the General Office On-Call Director Schedule and supply the information contained on Attachment 1.
- c. If the call is related to Palisades, notify the Palisades On-Call Director using the Palisades On-Call Director Schedule and supply the information contained on Attachment 1.

5.2 ACTIONS (ALERT, SITE AREA EMERGENCY, GENERAL EMERGENCY AT PALISADES OR BIG ROCK POINT)

- a. Obtain all information required on Attachment 1 from the affected plant.
- b. Initiate the following call out. Notify one individual from each group (telephone numbers are located on the General Office On-Call Director Schedule, the Palisades On-Call Director Schedule, and in Appendix G, Augmentation List), and provide the information from Attachment 1.

ON-SHIFT SYSTEM POWER CONTROLLER

Power Controller

Notifies

1st Call
**General Office On-Call Director

5th Call
Radiological
Advisor

2nd Call
Palisades On-Call Director

6th Call
Communication
Services
Representative

3rd Call
Senior
Management

7th Call
Building Services
Representative

4th Call
Emergency Planning
Representative

8th Call
Control Room
Other Nuclear Plant
(BRP-Hotline or
616-547-6537
Pal-Hotline or
616-764-8913)

- NOTE: 1. If the Alert is terminated prior to his being notified, the General Office On-Call Director may elect to stop notifications at this point.
2. Notify the Site Emergency Director at the plant if either On-Call Director cannot be notified.

5.3 ACTIONS (MUTUAL ASSISTANCE AGREEMENT)

- a. Obtain all information required on Attachment 2 from the affected utility.

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- b. Notify the General Office On-Call Director using the General Office On-Call Director Schedule and supply information from Attachment 2.

6.0 RECORDS

Forward completed copies of Attachments 1 and 2 to General Office Emergency Planning for filing in Document Control under Uniform File Index A200/22*06/L.

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ATTACHMENT 1

POWER CONTROL CHECKLIST

Date: _____

Plant: BRP PAL

Time: _____

Drill: Yes _____ No _____

Unusual Event _____

Alert _____

Site Area Emergency _____

General Emergency _____

Other _____

Brief description of the event: _____

Notifications:

<u>Name</u>	<u>Time</u>	<u>Available (Yes/No)</u>	<u>Location and Telephone No</u>
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Forward completed form to GOEP, P-26-402 for filing in DCC A200/22*06/L.

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ATTACHMENT 1 (Continued)

Notifications (Continued):

<u>Name</u>	<u>Time</u>	<u>(Yes/No)</u>	<u>Location and Telephone No</u>
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Forward completed form to GOEP, P-26-402 for filing in DCC A200/22*06/L.

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ATTACHMENT 2
MUTUAL ASSISTANCE REQUEST CHECKLIST

Date: _____

Time: _____

Drill: Yes _____ No _____

Utility: _____ Detroit Edison (Eurico Fermi 2)
_____ The Indiana Michigan Power Company (D C Cook 1&2)
_____ The Toledo Edison Company (Davis Besse)
_____ The Cleveland Electric Illuminating Company
(Perry)

Caller Name/Title: _____ / _____

*Call-back Number _____

Unusual Event _____

Alert _____

Site Area Emergency _____

General Emergency _____

Description of Event: _____

Material/Personnel Requested: _____

General Office On-Call Director Notified: _____ Time: _____

*Caller will be contacted by Consumers Power Company Director/Officer.

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