

CONTROL BLOCK: 

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 ① (PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

P	A	B	V	S	1	2	0	0	-	0	0	0	-	0	0	3	4	1	1	1	1	4		5						
LICENSEE CODE						LICENSE NUMBER						LICENSE TYPE						CAT												
CON'T																														
0	1			REPORT SOURCE		L	6	0	5	0	0	0	3	3	4	7	0	0	2	0	7	9	3	1	2	1	9	7	9	9
EVENT DESCRIPTION AND PROBABLE CONSEQUENCES																														
At 0502 hours, the No. 4 Vital Bus Inverter failed. When the Inverter failed, the reactor tripped and a high steam flow safety injection actuation occurred. All SI Systems functioned normally. The operators verified the safety injection was inadvertent and restored the plant to normal shutdown conditions. The health and safety of the general public was not jeopardized. Safety injections to date: 12 operational, 2 preoperational.																														
SYSTEM CODE CAUSE CODE CAUSE SUBCODE COMPONENT CODE COMP SUBCODE VALVE SUBCODE																														
E D 11 E 12 A 13 G E N E R A T O R F 15 Z 16																														
LER NO REPORT NUMBER EVENT YEAR SEQUENTIAL REPORTING OCCURRENCE CODE REPORT TYPE REVISION NO																														
7 9 - 0 3 9 / 9 X 0																														
ACTION TAKEN FUTURE ACTION EFFECT ON PLANT SHUTDOWN METHOD HOURS ATTACHMENT SUBMITTED NRC-4 FORM 50B PRIMECOMP SUPPLIER COMPONENT MANUFACTURER																														
A 18 E 19 A 20 C 21 0 0 8 9 N 22 Y 24 A 25 S 3 7 9 26																														
CAUSE DESCRIPTION AND CORRECTIVE ACTIONS																														
The incident resulted from a failure of the No. 4 Vital Bus Inverter and the subsequent transfer (seconds later) of the vital bus to its auxiliary power supply. This action resulted in a high steam flow due to opening of the condenser steam dump valves. The inverter was repaired and the trip open signal to the steam dumps defeated to prevent recurrence.																														
FACILITY STATUS % POWER OTHER STATUS METHOD OF DISCOVERY DISCOVERY DESCRIPTION																														
E 28 0 9 9 29 N/A A 31 Operational event																														
ACTIVITY CONTENT RELEASED OR RELEASE AMOUNT OF ACTIVITY LOCATION OF RELEASE																														
C 32 2 34 N/A N/A																														
PERSONNEL EXPOSURES NUMBER TYPE DESCRIPTION																														
0 0 0 37 2 38 N/A																														
PERSONNEL INJURIES NUMBER DESCRIPTION																														
0 0 0 40 N/A																														
LOSS OF OR DAMAGE TO FACILITY TYPE DESCRIPTION																														
Z 43 N/A																														
PRIORITY ISSUED DESCRIPTION																														
X 44 N/A																														
NAME OF PREPARER J. A. Werling PHONE 7012270506 90002548 NRC USE ONLY																														