

DATE: 12/27/99
TIME: 10:08:28

AMEREN/UE
DOCUMENT CONTROL SYSTEM
DOCUMENT TRANSMITTAL

PAGE: 43
ARDC8801

TRANSMITTAL NUMBER: 431708
TO CONTROL NUMBER: 338U
TITLE: OTHER
DEPT: NUCLEAR REGULATORY COMM.
LOCATION: USNRC - WASH DC
TRANSMITTAL DATE: 19991227

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TRAN	DOC			RET		ALT	ALT				
CODE	TYPE	DOCUMENT	NUMBER	REV	REV	MED	COPY	MED	COPY	AFFECTED	DOCUMENT
A	PROC	99-0679		008		C	1			EIP-ZZ-00200	
A	PROC	99-0678		017		C	1			EIP-ZZ-00211	

ACKNOWLEDGED BY:

DATE:

AD45

PDR AD000 05000483

TEMPORARY CHANGE NOTICE REQUEST FORM
(Instructions for Completion on Back)

TCN NO. 99-679

1. PROCEDURE NUMBER EIP-ZZ-00200 REVISION NO. 008

PROCEDURE TITLE Augmentation of the Emergency Organization

1.1 One Time TCN? YES NO Effective from _____ to _____

1.2 Does this TCN supersede a previous TCN? YES NO If "yes," number of TCN to be superseded _____

1.3 Mark one: REFERENCE USE PROCEDURE *****

1.4 Is this the seventh (7th) TCN against this revision? YES NO * CONTINUOUS USE PROCEDURE *
 (If "Yes", generate an SOS Suggestion to notify the responsible department that a * This procedure must be performed exactly as *
 procedure revision is necessary.) SOS No. * written with each step being read by the *
 NOTE: If this is the eighth [8th] TCN, the procedure requires formal revision. * user prior to the performance of that step *

1.5 YES NO Notification of procedure owner required?

2. CHANGE SUMMARY

2.1 PAGE NUMBERS AFFECTED BY CHANGE Attachment 4 pages 1 and 2

2.2 CHANGE SUMMARY Change augmentation numbers for Rad Chem Support and I&C Technicians to match table 5-2 in the RERP. This is attachment to be used for manual callout if the pagers do not function. See SOS 99-3682.

3. THIS TEMPORARY CHANGE REPRESENTS:

- 3.1 YES NO A proposed change to the facility as described in the FSAR?
- 3.2 YES NO A change to procedures as described in the FSAR?
- 3.3 YES NO A test or experiment not described in the FSAR or Technical Specifications?

If 3.1-3.3 are all answered "No", check one and only one of the below bases to substantiate the "No" determination

- Basis 1: This revision is associated with a procedure which is not listed (Tables 13.5-1-13.5-6 FSAR SA) nor described in the FSAR.
- Basis 2: This revision is associated with a procedure which is listed in the FSAR, but not described.
- Basis 3: This revision is associated with a procedure which is described in the FSAR; however, this change consists of procedural modification(s) for which the FSAR does not contain the requisite level of detail.
- Basis 4: This revision is associated with a procedure which is described in the FSAR; however, this change consists of procedural modification(s) that do not differ from the FSAR description.
- Basis 5: This revision is associated with a procedure change for which an approved FSE exists, but the associated FSAR CN has not been approved. The FSE and FSAR CN have been reviewed and the answer to questions 3.1-3.3 above are "No".
Note the associated FSAR CN number _____
- Basis 6 Other (annotate basis in Revision Summary, section 2.0 above)

- 3.4 YES NO A change to the Technical Specifications?
- 3.5 YES NO A change affecting the Offsite Dose Calculation Manual (ODCM) or Process Control Program (PCP)?
(A "yes" answer to 3.1, 3.2, 3.3, 3.4 or 3.5 constitutes a Change of Intent.)
- 3.6 YES NO A change affecting the environment or the NPDES Permit?
- 3.7 YES NO A change which affects the RERP?
- 3.8 YES NO A change which affects the Security Plan?
(A "yes" answer to 3.6, 3.7 or 3.8 requires written evaluation from Radwaste/Environmental, Emergency Preparedness or Security Department, as appropriate, to document no Change of Intent.)
- 3.9 YES NO A change requiring a new/revision to a Surveillance Task Sheet or EQ PM Task Sheet?
- 3.10 YES NO A change requiring revision to the Acceptance Criteria Instrumentation (ACI) Program?
- 3.11 YES NO A new or change to a computerized Checkoff List? YES NO Checkoff list preapproved?
- 3.12 YES NO A change to the Improved Technical Specifications or Bases? (A "Yes" answer is a change of intent.)

Two (2) of the members of plant staff who Prepare/Review or provide Preliminary Approval of a TCN should be knowledgeable in the area affected by the TCN.

4. WRITTEN BY	<u>[Signature]</u>	<u>Rad Chem Supervisor EP</u>	<u>12/22/99</u>
	SIGNATURE	TITLE	DATE
5. PREPARED BY	<u>[Signature]</u>	<u>Rad Chem Supervisor EP</u>	<u>12/22/99</u>
	SIGNATURE	TITLE	DATE
6. QUALIFIED REVIEWER	<u>[Signature]</u>	<u>R/C SUPV - RW/ENV</u>	<u>12/22/99</u>
	SIGNATURE	TITLE	DATE

For EOP TCNs, the Qualified Reviewer SHOULD be the EOP Coordinator UNLESS that person is the Preparer or Preliminary Approver
 The TCN Qualified Reviewer SHALL be different from the Preparer and the Preliminary Approver. (CTSN 1913,2780)

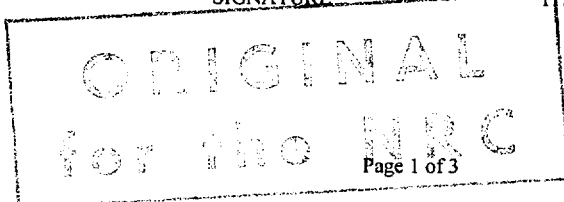
7. PRELIMINARY APPROVAL (Prior to issue SOS 98-102)
[Signature] SS 12/22/99
 SIGNATURE TITLE DATE

TCNs that affect work in progress associated with plant equipment MUST be approved by the on-shift SS/OS before receiving final approval.
 The Preliminary Approver SHALL hold an SRO license. (CTSN 2780)

FINAL APPROVAL (No greater than 14 Days past issue date SOS 98-102)

8.1 APPROVAL AUTHORITY

 SIGNATURE TITLE DATE



MANUAL CALLOUT LIST

	POSITION	Number Required	ACCEPTING INDIVIDUAL (name)
1	Rad Chem Support	14 12	
2	Electricians	2	
3	Protective Measures Coordinator (PMC)	1	
4	Chemistry Coordinator	1	
5	Operations Support Coordinator (OSC)	1	
6	Emerg. Team Coordinator Electrical	1	
7	Emerg. Team Coordinator Mechanical	1	
8	Control Room (CR)/TSC Liaison	1	
9	TSC Lead Engineer	1	
10	Dose Assessment Coordinator	1	
11	Dose Assessment Staff	2	
12	EOF Communicators	2	
13	Mechanics	2	
14	I&C Engineer	1	

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MANUAL CALLOUT LIST

	POSITION	Number Required	ACCEPTING INDIVIDUAL (name)
15	Reactor/Nuclear Engineer	1	
16	Mechanical Engineer	1	
17	Electrical Engineer	1	
18	Plant Assessment Coordinator (PAC)	1	
19	Engineering Status Board/Logkeepers	3	
20	Plant Assessment Staff	1	
21	Stores Personnel	1	
22	Security Coordinator	1	
23	Administrative Coordinator	1	
24	Logistical Support Coordinator	1	
25	Logistical Support Staff	2	
26	Company Spokesperson	1	
27	JPIC Technical Representative	2	
28	JPIC Coordinator	1	
29	JPIC Administrator	1	
30	JPIC Editor	1	
31	JPIC Media Host	1	
32	<i>IFC Technician</i>	<i>1</i>	

TCN
99-679

TEMPORARY CHANGE NOTICE REQUEST FORM

(Instructions for Completion on Back)

TCN NO. 99-0678

1. PROCEDURE NUMBER EIP-ZZ-00211 REVISION NO. 017

PROCEDURE TITLE Field Monitoring

1.1 One Time TCN? YES NO Effective from to

1.2 Does this TCN supersede a previous TCN? YES NO If "yes," number of TCN to be superseded

1.3 Mark one: REFERENCE USE PROCEDURE

1.4 Is this the seventh (7th) TCN against this revision? YES NO (If "Yes", generate an SOS Suggestion to notify the responsible department that a procedure revision is necessary.) SOS No.

NOTE: If this is the eighth [8th] TCN, the procedure requires formal revision.

- * CONTINUOUS USE PROCEDURE *
* This procedure must be performed exactly as *
* written with each step being read by the *
* user prior to the performance of that step *

1.5 YES NO Notification of procedure owner required?

2. CHANGE SUMMARY

2.1 PAGE NUMBERS AFFECTED BY CHANGE Page 2

2.2 CHANGE SUMMARY Change FMT personnel designator to "Support Area Personnel" in accordance with Rev 22 of the RERP.

3. THIS TEMPORARY CHANGE REPRESENTS:

- 3.1 YES NO A proposed change to the facility as described in the FSAR?
3.2 YES NO A change to procedures as described in the FSAR?
3.3 YES NO A test or experiment not described in the FSAR or Technical Specifications?

If 3.1-3.3 are all answered "No", check one and only one of the below bases to substantiate the "No" determination

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Basis 4: This revision is associated with a procedure which is described in the FSAR; however, this change consists of procedural modification(s) that do not differ from the FSAR description.
Basis 5: This revision is associated with a procedure change for which an approved FSE exists, but the associated FSAR CN has not been approved. The FSE and FSAR CN have been reviewed and the answer to questions 3.1-3.3 above are "No". Note the associated FSAR CN number
Basis 6 Other (annotate basis in Revision Summary, section 2.0 above)

- 3.4 YES NO A change to the Technical Specifications?
3.5 YES NO A change affecting the Offsite Dose Calculation Manual (ODCM) or Process Control Program (PCP)?
3.6 YES NO A change affecting the environment or the NPDES Permit?
3.7 YES NO A change which affects the RERP?
3.8 YES NO A change which affects the Security Plan?
3.9 YES NO A change requiring a new/revision to a Surveillance Task Sheet or EQ PM Task Sheet?
3.10 YES NO A change requiring revision to the Acceptance Criteria Instrumentation (ACI) Program?
3.11 YES NO A new or change to a computerized Checkoff List? YES NO Checkoff list preapproved?
3.12 YES NO A change to the Improved Technical Specifications or Bases? (A "Yes" answer is a change of intent.)

Two (2) of the members of plant staff who Prepare, Review or provide Preliminary Approval of a TCN should be knowledgeable in the area affected by the TCN.

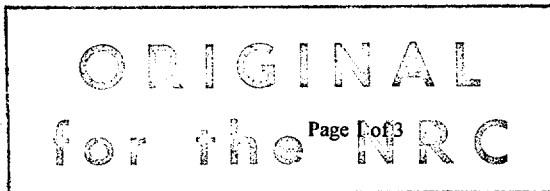
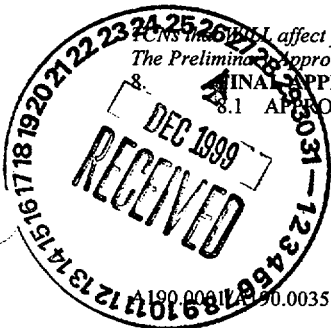
4. WRITTEN BY [Signature] Rad Chem Supervisor EP 12/22/99
5. PREPARED BY [Signature] Rad Chem Supervisor EP 12/22/99
6. QUALIFIED REVIEWER [Signature] R/C SUPERVISOR HP 991222

For EOP TCNs, the Qualified Reviewer SHOULD be the EOP Coordinator UNLESS that person is the Preparer or Preliminary Approver The TCN Qualified Reviewer SHALL be different from the Preparer and the Preliminary Approver. (CTSN 913,2780)

7. PRELIMINARY APPROVAL (Prior to issue SDS 98-102) SS 12/22/99

TCNs that affect work in progress associated with plant equipment MUST be approved by the on-shift SS/OS before receiving final approval. The Preliminary Approver SHALL hold an SRO license. (CTSN 2780)

8. FINAL APPROVAL (No greater than 14 Days past issue date SOS 98-102)
8.1 APPROVAL AUTHORITY [Signature] SS 12/22/99



- 2.4 FMTs track and quantify plume dose rates. In cooperation with the State Department of Health, FMTs also assist in the collection of environmental sample media. CTSN 3396

3. PRECAUTIONS

3.1 FIELD MONITORING TEAM

- 3.1.1 Primary method of communication between FMTs and the EOF is the radio on Callaway Repeater Channel 2.
 - 3.1.1.1 If radio communications are lost or intermittent, use the cellular phone and operator aid provided.
- 3.1.2 Primary method of communication between FMTs and the Backup EOF should be the cellular phone.
 - 3.1.2.1 If phone communications are lost or intermittent, use the radio on Callaway Repeater Channel 2.
- 3.1.3 If communications cannot be established via alternate radio channels or cellular phone, return to the appropriate facility (EOF, Backup EOF, or Callaway Plant) and contact the DAC.
- 3.1.4 Minimize the time in the plume. Perform all sample counting and calculations outside the plume location.
- 3.1.5 Ventilation from outside sources should be minimized upon entry into the plume. Place vehicle ventilation in recirculation (depress MAX button, REC will light on your display) or off (for vehicles without A/C). Ensure windows are closed.
- 3.1.6 Silver Zeolite cartridges used for Iodine sampling are a hazardous waste. Return all cartridges to Radwaste for processing in accordance with APA-ZZ-00830.
- 3.1.7 Designation of radioactive materials is not necessary while the items are under the control of a Field Monitoring Team member.

4. PROCEDURE

4.1 TEAM FORMATION

- 4.1.1 The HPC designates a FMT Leader from the available ~~Rad/Chem Technicians~~. *Support Area Personnel.*
- 4.1.2 The HPC requests a FMT Driver from the Ops Support Coordinator.

TCN 99-0678