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### III. OTHER PROVISIONS

## NUCLEAR SAFETY COUNCIL

**5018** *Instruction IS-43, of 20th March 2019, of the Nuclear Safety Council, establishing the criteria for the notification of events relating to the physical safety of nuclear power plants.*

Article 2.a) of Law 15/1980, of 22nd April, creating the Nuclear Safety Council, attributes to this public body the faculty of "drawing up and approving the Instructions, Circulars and Guides of a technical nature relating to nuclear and radioactive facilities and to activities relating to nuclear safety and radiation protection".

Article 36 *in fine* of Law 25/1964, of 29 April, on nuclear energy, imposes on competent authorities and licensees of nuclear installations the joint obligation to "adopt the prevention and protection measures necessary to maintain the adequate physical security conditions in these facilities".

Article 6(6)(b) of Royal Decree 1308/2011, of 26 September, on the physical protection of nuclear installations, materials and radioactive sources, confers on the Nuclear Safety Council the competence to

"prepare and approve instructions, circulars and guides of a technical nature and complementary technical instructions on the physical protection of nuclear materials and radioactive sources and of activities and facilities, developing the general measures established in this royal decree within the scope of its competence".

Instruction IS-09, of 14th June 2006, of the Nuclear Safety Council, establishes criteria to which the systems, services and procedures for the physical protection of nuclear facilities and materials have to be adjusted.

Instruction IS-10 Revision 1, of 30th July 2014, of the Nuclear Safety Council, establishing the criteria for the notification of events to the Council by nuclear power plants, excludes from its scope events relating to the physical protection of nuclear power plants. Since the publication of IS-09, the Nuclear Safety Council has been notified of this type of event by the licensees through different unofficial or unregulated means of communication. In addition, it is necessary to bear in mind that at least a large part of the information contained in such notifications is information referred to in article 5 of Royal Decree 1308/2011, of 26th September, on the physical protection of nuclear facilities and materials and radioactive sources, and therefore it must be protected information.

By virtue of the foregoing and in accordance with the legal authorisation foreseen in Article 2.a) of Law 15/1980, of 22nd April, Creating the Nuclear Safety Council, following consultation with the Ministry of the Interior and the Ministry of Energy, Tourism and the Digital Agenda and with the affected sectors, and following the appropriate technical reports,

This Council, at its meeting on 20 March 2019, agreed as follows:

#### *First. Subject and scope of application.*

The objective of this Instruction is to establish the criteria for requiring the licensees of nuclear power plants operating or shutting down while storing nuclear fuel to report events that might have a relation to the physical safety of a nuclear facility regulated in accordance with the specific standards of Royal Decree 1308/2011, of 26th September, on the physical protection of nuclear facilities and materials and radioactive sources and Nuclear Safety Council Instruction IS-09, of 14th June 2006, establishing the criteria to be met by the systems, services and procedures for the physical protection of nuclear facilities and materials.

The reporting of events relating to aspects other than physical protection, as well as those affecting transport, shall be subject to their specific regulations.

This Instruction is issued without prejudice to other requirements for notification to the Nuclear Safety Council or other State authorities of this or any other type of event recorded at operating or shutdown nuclear power plants while storing nuclear fuel.

Second. *Definitions.*

The definitions of terms and concepts in this Instruction correspond to those contained in the following provisions:

- Nuclear Energy Act, Law 25/1964, of 29 April.
- Law 15/1980 of April 22 on the creation of the Spanish Nuclear Safety Council.
- Royal Decree 1308/2011, of 26 September, on physical protection of nuclear facilities and materials and radioactive sources.
- Royal Decree 1836/1999, of 3 December, approving the Regulation on Nuclear and Radioactive Facilities.
- Royal Decree 783/2001, of 6 July, approving the Regulation on Health Protection against Ionizing Radiation.
- Instruction IS-09, of 14th June 2006, of the Nuclear Safety Council, establishes criteria to which the systems, services and procedures for the physical protection of nuclear facilities and materials have to be adjusted.
- Instruction IS-10 Revision 1, of 30th July 2014, of the Nuclear Safety Council, establishing the criteria for notification of events by nuclear power plants to the Council.

Third. *Responsibility of licensees.*

It is the responsibility of the licensees of the nuclear power plants to fulfil the requirements established in this Instruction, in the periods and in the manner contemplated herein.

Fourth. *Conditions of notification and registration.*

The licensee of a physical protection permit for a nuclear power plant must abide by the following conditions for the notification of events to the Nuclear Safety Council:

41 The events detailed in article five of this Instruction shall be reported, regardless of whether the Nuclear Safety Council has been previously notified as a result of the declaration of an emergency situation as defined in the plant's Site Emergency Plan (PEI, in its Spanish acronym).

42 Events shall be reported even if the event to be reported took place during the three years prior to its discovery.

43 Events that could, in the opinion of the operator, be of importance for the nuclear safety of the installation shall always be reported.

44 Events must be reported to the Nuclear Safety Council by means of a report, in accordance with the formats of Annex I and II, as soon as possible and within the maximum period indicated in brackets in each of them (1 hour and 24 hours). This includes the preliminary information available up to that moment, except for those events notifiable in accordance with section 4.2, in which the event to be notified has taken place more than seven days prior to its discovery, and in which there is no condition making it notifiable at the time of its discovery. The first notification may be made as established in section 4.7; unless the importance of the event, in the opinion of the licensee or of the Nuclear Safety Council, makes it advisable to make a first notification in the shorter term.

45 It shall not be necessary to notify in one hour for notifiable events that have additionally implied an emergency declaration, in which case the first notification shall be sent within 24 hours after the corresponding Site Emergency Plan has been deactivated.

46 A root cause analysis (RCA) shall be performed on all reportable events, except on those whose causes are exclusively attributable to factors beyond the control of the licensee. This analysis will be carried out using internationally recognised methodologies and with a scope commensurate with its importance for safety.

47 In all cases, including emergency situations and within a maximum period of 30 days, a report on the event must be submitted to the Nuclear Safety Council, in accordance with the format of Annex III, with the information obtained during the time elapsed since its occurrence, with special emphasis on concurrent failures and corrective actions, indicating an estimated date of implementation. This report shall include the conclusions derived from the analysis of the RTA carried out. If the analysis has not been completed within one month of the occurrence of the event, the thirty-day report must include the expected date of completion of the analysis.

48 Unless otherwise indicated in article five, time limits must be counted from the moment of discovery of the occurrence of the event giving rise to the notification; the obligation to notify continues, and persists in time even if the time limits established for each type of event have not been met.

49 Notifications of events reported to the Nuclear Safety Council, included within the scope of application of this Instruction, shall be classified as apt for 'Restricted Diffusion'. The information contained in the notifications to the Nuclear Safety Council of the events listed in article five of this Instruction will concern for the most part sensitive information that must be protected. For this reason, such information must be transmitted by a reliable method, previously approved by the Nuclear Safety Council and duly communicated to the licensees. The Resident Inspectorate of the plant should be informed of the events as soon as possible.

4.10 The reports submitted to the Nuclear Safety Council shall be reviewed to report on the following circumstances, immediately after their existence or occurrence is detected:

Report in 1 hour on:

Significant degradation during the first 24 hours of the evolution of the event that substantially alters the content of the report transmitted, using the form in Annex I of this Instruction.

Report within 24 hours on:

- Additional degradation occurring during the event that has not been previously reported.
- The unfavourable, unforeseen, or misunderstood evolution of plant conditions as a direct consequence of the event.
- New conditions in addition to those initially notified and identified during the subsequent investigation of the licensee, which extend the scope of the same notified fact.
- Using the form in Annex II of this Instruction. Report

within 30 days on:

- Conclusions of the RCAs. Final conclusions of the open review, which is the analysis and investigation process following the issuance of a report on an event considered reportable.
- At the discretion of the licensee, it is to include incomplete or inadequately covered items.
- Modification or elimination of corrective actions committed in previous reports including a justification.
- Using the form in Annex III of this Instruction.

The Nuclear Safety Council may, at any time and in a reasoned manner, request additional information on an event, if it considers it necessary for its understanding, or the review of the corresponding reports.

411 No more than one notification will be required if there is more than one criterion by which an event must be notified to the Nuclear Safety Council, although all applicable criteria will be indicated. The notification period shall be the shorter of the applicable criteria deadlines.

412 The reports issued by the licensee must be revised to include new circumstances additional to those included in section 4.10 that by themselves would require an additional notification due to the same criterion. The new information may be included in a review of the first notified event, using the format of the 24-hour report. Once the review and analysis process has been completed, its conclusions should be included in a final review of the 30-day report. Subsequent findings should be forwarded as a new reportable event.

413 Likewise, when the licensee, as a result of the performance of systematic review programmes previously notified to the Nuclear Safety Council, identifies different events requiring notification, such events shall be included in successive revisions of the initial event report with the conditions included in section 4.12.

414 In the event of discrepancies on the applicability of the criteria for notification of an event between the Nuclear Safety Council and the licensee, the criterion of the Nuclear Safety Council shall prevail and notification shall be made in accordance with the criterion reasonably indicated by the Nuclear Safety Council. The licensee may record its disagreement in the report itself.

415 Following the issuance of the 24-hour report, the licensee may notify the Nuclear Safety Council of the withdrawal of a reportable event when, as a result of obtaining additional information, it is demonstrated that the circumstances for notification were not met. The communication for the withdrawal of a notifiable event shall justify the reasons for which its withdrawal is requested, and shall be considered tacitly accepted if no contrary communication has been issued within three months of its receipt by the Nuclear Safety Council. The numbering of the withdrawn reportable event shall not be reused.

416 The documentary description of the compensation measures implemented to effectively alleviate events relating to the degradation or vulnerability of the physical protection system shall be kept as an auditable record by the Nuclear Safety Council for a retention period of five years, although it shall not be required to be notified to the Nuclear Safety Council within 1 or 24 hours.

#### *Fifth. Types of Reportable events.*

##### *A. Records.*

1. Destruction, theft, loss or alteration of records or classified information, in any medium, which may impair the physical security of the plant (1 hour).

2. Destruction, theft, loss or alteration of records or information which, even if not classified, could compromise the protection of information relating directly or indirectly to the physical security of the plant (24 hours).

3. Unauthorised disclosure or breach of confidentiality of classified information (24 hours).

##### *B. Threats to physical protection system to be notified in 1 hour.*

1. Any event in which there is reason to believe that it has been committed, produced, caused or an attempt has been made to commit, produce or cause it:

a. Theft, loss, misplacement or any other form of unauthorised removal, loss of control or diversion of nuclear material, radioactive sources or both included within the scope of Royal Decree 1308/2011, of 26 September.



b. Significant physical damage to the reactor, to vital equipment, to any installation containing nuclear material or to the physical security system itself, caused as a result of a wilful, malicious or unauthorised act.

c. The interruption of the normal operation of the plant as a result of the unauthorised use or voluntary or intentional disablement of its systems, structures and components, including the physical security system and its components.

2. Any deliberate access or any deliberate attempt by one or more unauthorised persons to gain access to the protected area, to the vital area or areas, or to a group of vital areas.

3. Any failure, degradation or vulnerability discovered in the physical security system that has allowed the unauthorised or undetected access of persons, vehicles or materials to the protected area, to one or more vital areas or sets of vital areas for which the corresponding compensation measures have not been implemented.

4. The unauthorised attempt or introduction of prohibited materials (weapons, explosives, tools, incendiary or pyrotechnic substances, etc.) into the protected area or vital areas.

5. Any malicious or unauthorised event related to plant cybersecurity involving malfunctions, attacks or threats that could compromise nuclear safety, radiation protection or physical plant protection.

6. Any information that the licensee may have that in its opinion could pose a threat to the physical protection system of the plant not contained in the previous paragraphs.

C. Other events related to the physical protection system to be notified within 24 hours.

1. Any failure, degradation or vulnerability discovered in a physical security system that could have allowed the unauthorised or undetected access of persons, vehicles or materials into the protected area, vital area(s) or set of vital areas for which corresponding compensation measures have not been implemented, in good time and manner.

2. Any act committed or attempted that has threatened to reduce the effectiveness of the physical security system below that established in the facility's physical protection plan or corresponding contingency plans.

#### *Sixth. Exemptions.*

The licensees of nuclear power plants may request temporary total or partial exemption from compliance with any of the requirements included in the standards applicable to the scope of this Instruction, adequately justifying the reasons for their request and indicating the alternative way in which these requirements will be met, in order to maintain an adequate level of quality and safety.

#### *Seventh. Infringements and Penalties.*

This Instruction of the Nuclear Safety Council is binding in accordance with the provisions of Article 2.a) of Law 15/1980, of the 22nd April, creating the Nuclear Safety Council, so that its breach will be penalised according to the provisions in Chapter XIV (articles 85 to 93) of Law 25/1964, of the 29th April, on Nuclear Energy.

Single transitory Provision. *Adaptation period.*

The licensees of nuclear power plants shall adapt their practices and procedures to that contemplated in this Instruction within a period of six months from the day following the publication of this Instruction in the "Official State Gazette".

Single derogatory Provision.

Any rule of equal or inferior status that opposes this Instruction is overridden.

Single final Provision.

This Instruction shall enter into force on the day following its publication in the «Official State Gazette».

Madrid, 20th March 2019, Chairman of the Nuclear Safety Council, Fernando Marti Scharfhausen.

## ANNEX I

| RESTRICTED<br>DIFFUSION                                |                                                                                                                                                                                                                                                                                                                                                |                                                                                              |       |                              |                          |                             |
|--------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-------|------------------------------|--------------------------|-----------------------------|
| C.N. LOGO                                              |                                                                                                                                                                                                                                                                                                                                                | REPORT TO NSC WITHIN 1 HOUR OF<br>REPORTABLE SAFETY EVENT<br>PHYSICAL MATTER OF<br>THE PLANT |       |                              | Sheet 1 of               |                             |
| ISN<br>No.                                             | Rev.                                                                                                                                                                                                                                                                                                                                           | DATE                                                                                         |       |                              | Time of event            |                             |
|                                                        |                                                                                                                                                                                                                                                                                                                                                | DAY                                                                                          | MONTH | YEAR                         | hours                    | minutes                     |
| Plant / Unit                                           |                                                                                                                                                                                                                                                                                                                                                | Person Notifying / Position                                                                  |       | Date/ Time of Notif.         | Telephone                |                             |
| Capacity before the event<br>(Thermal and Electric Mw) |                                                                                                                                                                                                                                                                                                                                                | Capacity at time of notification<br>(Thermal and Electric Mw)                                |       | Operational Head<br>Informed |                          |                             |
|                                                        |                                                                                                                                                                                                                                                                                                                                                |                                                                                              |       | Yes                          | <input type="checkbox"/> | No <input type="checkbox"/> |
| TYPE OF EVENT                                          |                                                                                                                                                                                                                                                                                                                                                |                                                                                              |       |                              |                          |                             |
| A.1.                                                   | Destruction, theft, loss or alteration of records or classified information, in any medium, relating to the physical security of the plant                                                                                                                                                                                                     |                                                                                              |       |                              |                          |                             |
| B.1.                                                   | Any event in which there is reason to believe that the following have been committed, caused or attempted:                                                                                                                                                                                                                                     |                                                                                              |       |                              |                          |                             |
| a.                                                     | Theft, loss, misplacement, unauthorised removal, loss of control or diversion of nuclear material, radioactive sources or any other radioactive material                                                                                                                                                                                       |                                                                                              |       |                              |                          |                             |
| b.                                                     | Significant physical damage to the reactor, to vital systems, structures and components, to any installation containing nuclear material or to the physical security system itself, caused as a result of a voluntarily malevolent or malicious act.                                                                                           |                                                                                              |       |                              |                          |                             |
| c.                                                     | The interruption of the normal operation of the plant as a result of the unauthorised use or voluntary or intentional disablement of its systems, structures and components, including the physical security system and its components.                                                                                                        |                                                                                              |       |                              |                          |                             |
| B.2                                                    | Any deliberate access or any deliberate attempt by an unauthorised person to gain access to the protected area, vital area(s) or to a set of vital areas.                                                                                                                                                                                      |                                                                                              |       |                              |                          |                             |
| B.3                                                    | Any failure, degradation or vulnerability discovered in the physical security system that has allowed unauthorised or undetected access of persons, vehicles or materials to the protected area, to one or more vital areas, or to a set of vital areas for which the following corresponding compensation measures have not been implemented. |                                                                                              |       |                              |                          |                             |
| B.4                                                    | The attempt or introduction of prohibited materials (weapons, explosives, tools, incendiary or pyrotechnic substances, etc.) inside the protected area or vital areas.                                                                                                                                                                         |                                                                                              |       |                              |                          |                             |
| B.5                                                    | Any event related to the computer security of the plant involving a malfunction of structures, systems or components, or attacks or threats that could compromise the nuclear safety of the plant, its radiation protection or its physical safety.                                                                                            |                                                                                              |       |                              |                          |                             |
| B.6                                                    | Any information that the licensee may have that in its opinion could pose a threat to the physical protection system of the plant not contained in the previous paragraphs.                                                                                                                                                                    |                                                                                              |       |                              |                          |                             |
| RESTRICTED DIFFUSION                                   |                                                                                                                                                                                                                                                                                                                                                |                                                                                              |       |                              |                          |                             |

|                                                                          |                                                                                              |                          |                                |
|--------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|--------------------------|--------------------------------|
| RESTRICTED DIFFUSION                                                     |                                                                                              |                          |                                |
| C.N. LOGO                                                                | REPORT TO NSC WITHIN 1 HOUR OF<br>REPORTABLE SAFETY EVENT<br>PHYSICAL MATTER OF<br>THE PLANT |                          | Sheet X of <sup>1</sup>        |
| DESCRIPTION OF EVENT                                                     |                                                                                              |                          |                                |
|                                                                          |                                                                                              |                          |                                |
| SITUATION AT THE TIME OF NOTIFICATION                                    |                                                                                              |                          |                                |
|                                                                          |                                                                                              |                          |                                |
| MEASURES TAKEN AND PLANNED                                               |                                                                                              |                          |                                |
|                                                                          |                                                                                              |                          |                                |
| RELEASES OF RADIOACTIVE ACTIVE MATERIAL THAT HAVE OCCURRED<br>(Quantity) |                                                                                              |                          |                                |
| ARE RELEASES OF RADIOACTIVE MATERIAL EXPECTED?                           |                                                                                              | YE<br>S                  | NO<br><input type="checkbox"/> |
|                                                                          |                                                                                              | <input type="checkbox"/> | <input type="checkbox"/>       |
| RESTRICTED DIFFUSION                                                     |                                                                                              |                          |                                |

<sup>1</sup>As many pages as necessary

## ANNEX II

| RESTRICTED DIFFUSION                                                                      |                                         |                                                                                             |                                                               |      |                      |                              |                          |                          |                          |
|-------------------------------------------------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------------------------|---------------------------------------------------------------|------|----------------------|------------------------------|--------------------------|--------------------------|--------------------------|
| C.N. LOGO                                                                                 |                                         | REPORT TO NSC WITHIN 24 HOURS OF<br>REPORTABLE SAFETY EVENT<br>PHYSICAL MATTER OF THE PLANT |                                                               |      |                      |                              | Sheet 1 of               |                          |                          |
| ISN No.                                                                                   | Rev.                                    | DATE                                                                                        |                                                               |      |                      |                              | Time of event            |                          |                          |
|                                                                                           |                                         | DAY                                                                                         | MONTH                                                         | YEAR |                      | hours                        | minutes                  |                          |                          |
|                                                                                           |                                         |                                                                                             |                                                               |      |                      |                              |                          |                          |                          |
| Plant / Unit                                                                              |                                         | Person Notifying / Position                                                                 |                                                               |      | Date/ Time of Notif. |                              | Telephone                |                          |                          |
|                                                                                           |                                         |                                                                                             |                                                               |      |                      |                              |                          |                          |                          |
| Capacity before the event<br>(Thermal and Electric Mw)                                    |                                         |                                                                                             | Capacity at time of notification<br>(Thermal and Electric Mw) |      |                      | Operational Head<br>Informed |                          |                          |                          |
|                                                                                           |                                         |                                                                                             |                                                               |      |                      | Yes                          | <input type="checkbox"/> | No                       | <input type="checkbox"/> |
| TYPE OF EVENT                                                                             |                                         |                                                                                             |                                                               |      |                      |                              |                          |                          |                          |
| A.                                                                                        | Records.                                |                                                                                             |                                                               |      | A2                   | <input type="checkbox"/>     | A3                       | <input type="checkbox"/> |                          |
| C.                                                                                        | Other events notifiable within 24 hours |                                                                                             |                                                               |      | C1                   | <input type="checkbox"/>     | C2                       | <input type="checkbox"/> |                          |
| DESCRIPTION OF EVENT                                                                      |                                         |                                                                                             |                                                               |      |                      |                              |                          |                          |                          |
|                                                                                           |                                         |                                                                                             |                                                               |      |                      |                              |                          |                          |                          |
| SITUATION AT THE TIME OF NOTIFICATION, IMMEDIATE ASSESSMENT AND<br>POTENTIAL CONSEQUENCES |                                         |                                                                                             |                                                               |      |                      |                              |                          |                          |                          |
|                                                                                           |                                         |                                                                                             |                                                               |      |                      |                              |                          |                          |                          |
| MEASURES TAKEN AND PLANNED                                                                |                                         |                                                                                             |                                                               |      |                      |                              |                          |                          |                          |
|                                                                                           |                                         |                                                                                             |                                                               |      |                      |                              |                          |                          |                          |
| RELEASES OF RADIOACTIVE ACTIVE MATERIAL THAT HAVE OCCURRED (Quantity)                     |                                         |                                                                                             |                                                               |      |                      |                              |                          |                          |                          |
| ARE RELEASES OF RADIOACTIVE MATERIAL EXPECTED?                                            |                                         |                                                                                             |                                                               |      |                      | YES                          | <input type="checkbox"/> | NO                       | <input type="checkbox"/> |
| RESTRICTED DIFFUSION                                                                      |                                         |                                                                                             |                                                               |      |                      |                              |                          |                          |                          |

## ANNEX III

| RESTRICTED<br>DIFFUSION                                                                                                                                                                                |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------------------------------------------------|----|------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----|----|--|
| C.N. LOGO                                                                                                                                                                                              |      | REPORT WITHIN 30 DAYS TO THE NSC ON A<br>REPORTABLE EVENT RELATING TO THE PHYSICAL<br>SECURITY OF THE PLANT                                                |       |                                                                                                                                                                                                        |                                            |                                                                          |    |                                                                                                                                                            | Sheet 1 of |    |    |  |
| ISN<br>No.                                                                                                                                                                                             | Rev. | DATE                                                                                                                                                       |       |                                                                                                                                                                                                        | Time of occurrence of the event<br>(hh:mm) |                                                                          |    |                                                                                                                                                            |            |    |    |  |
|                                                                                                                                                                                                        |      | DAY                                                                                                                                                        | MONTH | YEAR                                                                                                                                                                                                   |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |
|                                                                                                                                                                                                        |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |
| PLANT /UNIT:                                                                                                                                                                                           |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |
| TITLE:                                                                                                                                                                                                 |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |
| <b>TYPE OF EVENT</b>                                                                                                                                                                                   |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |
| A. Records                                                                                                                                                                                             |      |                                                                                                                                                            |       | A1                                                                                                                                                                                                     | A2                                         | A3                                                                       |    |                                                                                                                                                            |            |    |    |  |
| B. Threats to Protection Systems<br>Physical                                                                                                                                                           |      |                                                                                                                                                            |       | B1a                                                                                                                                                                                                    | B1b                                        | B1c                                                                      | B2 | B3                                                                                                                                                         | B4         | B5 | B6 |  |
| C. Other reportable events                                                                                                                                                                             |      |                                                                                                                                                            |       | C1                                                                                                                                                                                                     | C2                                         |                                                                          |    |                                                                                                                                                            |            |    |    |  |
| <b>STATE OF THE PLANT</b>                                                                                                                                                                              |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |
| INITIAL                                                                                                                                                                                                |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            | FINAL                                                                    |    |                                                                                                                                                            |            |    |    |  |
| Initial capacity of the plant<br>(% of thermal and electrical<br>capacity)                                                                                                                             |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            | Final capacity of the plant<br>(% of thermal and electrical<br>capacity) |    |                                                                                                                                                            |            |    |    |  |
| <input type="checkbox"/> Stable capacity operation<br><input type="checkbox"/> Increasing capacity<br><input type="checkbox"/> Reducing capacity<br><input type="checkbox"/> Start-up (until coupling) |      | <input type="checkbox"/> Hot standby<br><input type="checkbox"/> Hot shutdown<br><input type="checkbox"/> Cold shutdown<br><input type="checkbox"/> Reload |       | <input type="checkbox"/> Stable capacity operation<br><input type="checkbox"/> Increasing capacity<br><input type="checkbox"/> Reducing capacity<br><input type="checkbox"/> Start-up (until coupling) |                                            |                                                                          |    | <input type="checkbox"/> Hot standby<br><input type="checkbox"/> Hot shutdown<br><input type="checkbox"/> Cold shutdown<br><input type="checkbox"/> Reload |            |    |    |  |
| <b>RADIOLOGICAL EFFECTS</b>                                                                                                                                                                            |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |
| <input type="checkbox"/> No effects<br><input type="checkbox"/> Within authorised limits<br><input type="checkbox"/> Outside authorised limits                                                         |      |                                                                                                                                                            |       | <input type="checkbox"/> No effects<br><input type="checkbox"/> Within authorised limits<br><input type="checkbox"/> Outside authorised limits                                                         |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |
| <b>PHYSICAL SECURITY EFFECTS</b>                                                                                                                                                                       |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |
| <input type="checkbox"/> No effects<br><input type="checkbox"/> Surveillance performance<br><input type="checkbox"/> FCSE performance<br><input type="checkbox"/> External support                     |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |
| <b>CHARACTERISTICS OF EVENT</b>                                                                                                                                                                        |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |
| DURATION OF THE EVENT OR CONDITION:                                                                                                                                                                    |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |
| SAFETY SYSTEMS ACTIVATED:                                                                                                                                                                              |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |
| NUMBER OF ANOMALIES:                                                                                                                                                                                   |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |
| RESTRICTED DIFFUSION                                                                                                                                                                                   |      |                                                                                                                                                            |       |                                                                                                                                                                                                        |                                            |                                                                          |    |                                                                                                                                                            |            |    |    |  |

| RESTRICTED<br>DIFFUSION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |      |                                                                                                             |           |          |                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-------------------------------------------------------------------------------------------------------------|-----------|----------|--------------------------------------------|
| C.N. LOGO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |      | REPORT WITHIN 30 DAYS TO THE NSC ON A<br>REPORTABLE EVENT RELATING TO THE<br>PHYSICAL SECURITY OF THE PLANT |           |          | Sheet X of <sup>2</sup>                    |
| ISN No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Rev. | DATE                                                                                                        |           |          | Time of occurrence of the<br>event (hh:mm) |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |      | DAY                                                                                                         | MONT<br>H | YEA<br>R |                                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |      |                                                                                                             |           |          |                                            |
| PLANT /UNIT:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |      |                                                                                                             |           |          |                                            |
| TITLE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |      |                                                                                                             |           |          |                                            |
| <p><b>1.- DESCRIPTION OF THE EVENT AND ANOMALIES</b></p> <p>1.1.- Summary of the event</p> <p>1.2.- Background and operational experience, both own and outside, linked to the event</p> <p>1.3.- Initial conditions</p> <p>1.4.- Chronological description of the event</p> <p>1.5.- Detailed description of the event and anomalies that have taken place</p> <p><b>2.- CAUSES OF THE EVENT</b></p> <p>2.1.- Direct causes of the event</p> <p>2.2.- Description and conclusions of the root cause analysis (or, where appropriate, expected date of completion of the analysis)</p> <p><b>3.- CORRECTIVE ACTIONS</b></p> <p>3.1.- Immediate corrective actions</p> <p>3.2.- Deferred corrective actions</p> <p><b>4.- CONCLUSIONS</b></p> |      |                                                                                                             |           |          |                                            |
| RESTRICTED<br>DIFFUSION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |      |                                                                                                             |           |          |                                            |

<sup>2</sup> As many pages as necessary.

| <b>RESTRICTED DIFFUSION</b>                                                                                                                                                                                                                                                                                                                                                                                                             |  |             |  |             |                                                                                                                      |                       |  |  |                   |      |  |                                                                                                                                                                                                                                                                                                                                                                  |  |                                         |  |  |  |      |  |              |  |  |  |  |  |  |                  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------|--|-------------|----------------------------------------------------------------------------------------------------------------------|-----------------------|--|--|-------------------|------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------|--|--|--|------|--|--------------|--|--|--|--|--|--|------------------|--|--|--|--|
| <b>C.N. LOGO</b>                                                                                                                                                                                                                                                                                                                                                                                                                        |  |             |  |             | <b>REPORT WITHIN 30 DAYS TO THE NSC ON A<br/>REPORTABLE EVENT RELATING TO THE<br/>PHYSICAL SECURITY OF THE PLANT</b> |                       |  |  |                   |      |  |                                                                                                                                                                                                                                                                                                                                                                  |  |                                         |  |  |  |      |  | Sheet X of 3 |  |  |  |  |  |  |                  |  |  |  |  |
| <b>ISN No.</b>                                                                                                                                                                                                                                                                                                                                                                                                                          |  | <b>Rev.</b> |  | <b>DATE</b> |                                                                                                                      |                       |  |  |                   |      |  |                                                                                                                                                                                                                                                                                                                                                                  |  | Time of occurrence of the event (hh:mm) |  |  |  |      |  |              |  |  |  |  |  |  |                  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |             |  | <b>DAY</b>  |                                                                                                                      |                       |  |  | <b>MONT<br/>H</b> |      |  |                                                                                                                                                                                                                                                                                                                                                                  |  |                                         |  |  |  |      |  |              |  |  |  |  |  |  | <b>YEA<br/>R</b> |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |             |  |             |                                                                                                                      |                       |  |  |                   |      |  |                                                                                                                                                                                                                                                                                                                                                                  |  |                                         |  |  |  |      |  |              |  |  |  |  |  |  |                  |  |  |  |  |
| PLANT /UNIT:                                                                                                                                                                                                                                                                                                                                                                                                                            |  |             |  |             |                                                                                                                      |                       |  |  |                   |      |  |                                                                                                                                                                                                                                                                                                                                                                  |  |                                         |  |  |  |      |  |              |  |  |  |  |  |  |                  |  |  |  |  |
| TITLE:                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |             |  |             |                                                                                                                      |                       |  |  |                   |      |  |                                                                                                                                                                                                                                                                                                                                                                  |  |                                         |  |  |  |      |  |              |  |  |  |  |  |  |                  |  |  |  |  |
| <b>5. CODED DESCRIPTION OF ANOMALIES:</b>                                                                                                                                                                                                                                                                                                                                                                                               |  |             |  |             |                                                                                                                      |                       |  |  |                   |      |  |                                                                                                                                                                                                                                                                                                                                                                  |  |                                         |  |  |  |      |  |              |  |  |  |  |  |  |                  |  |  |  |  |
| Title of the anomaly                                                                                                                                                                                                                                                                                                                                                                                                                    |  |             |  |             |                                                                                                                      |                       |  |  |                   |      |  |                                                                                                                                                                                                                                                                                                                                                                  |  |                                         |  |  |  |      |  |              |  |  |  |  |  |  |                  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |             |  |             |                                                                                                                      |                       |  |  |                   |      |  |                                                                                                                                                                                                                                                                                                                                                                  |  |                                         |  |  |  |      |  |              |  |  |  |  |  |  |                  |  |  |  |  |
| Date and time of the anomaly                                                                                                                                                                                                                                                                                                                                                                                                            |  |             |  |             |                                                                                                                      |                       |  |  |                   |      |  |                                                                                                                                                                                                                                                                                                                                                                  |  |                                         |  |  |  |      |  |              |  |  |  |  |  |  |                  |  |  |  |  |
| DATE:                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |             |  |             |                                                                                                                      |                       |  |  |                   |      |  |                                                                                                                                                                                                                                                                                                                                                                  |  | TIME:                                   |  |  |  |      |  | REV.         |  |  |  |  |  |  |                  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | Day         |  | Month       |                                                                                                                      | Year                  |  |  |                   | Hrs. |  | Min.                                                                                                                                                                                                                                                                                                                                                             |  |                                         |  |  |  | REV. |  |              |  |  |  |  |  |  |                  |  |  |  |  |
| System                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |             |  |             |                                                                                                                      | Type of the component |  |  |                   |      |  | Identification of component                                                                                                                                                                                                                                                                                                                                      |  |                                         |  |  |  |      |  |              |  |  |  |  |  |  |                  |  |  |  |  |
| <b>EFFECT ON THE PF SYSTEM</b><br><br><input type="checkbox"/> Vulnerability in the system<br><input type="checkbox"/> Loss of subsystem<br><input type="checkbox"/> Loss of function<br><input type="checkbox"/> Spurious action                                                                                                                                                                                                       |  |             |  |             |                                                                                                                      |                       |  |  |                   |      |  | <b>ROOT CAUSE</b><br><br><input type="checkbox"/> Human actions (plant or other personnel)<br><input type="checkbox"/> Design / Fabrication error Assembly / Procedures<br><input type="checkbox"/> Mechanical / hydraulic / pneumatic fault<br><input type="checkbox"/> Electrical / instrumentation / control failure<br><input type="checkbox"/> Other causes |  |                                         |  |  |  |      |  |              |  |  |  |  |  |  |                  |  |  |  |  |
| <b>CORRECTIVE ACTIONS</b><br><br><input type="checkbox"/> Countervailing measures<br><input type="checkbox"/> Adjustment, calibration, cleaning<br><input type="checkbox"/> Replacement of parts<br><input type="checkbox"/> Replacing Components<br><input type="checkbox"/> Modification / redesign.<br><input type="checkbox"/> Special surveillance<br><input type="checkbox"/> No action<br><input type="checkbox"/> Other actions |  |             |  |             |                                                                                                                      |                       |  |  |                   |      |  |                                                                                                                                                                                                                                                                                                                                                                  |  |                                         |  |  |  |      |  |              |  |  |  |  |  |  |                  |  |  |  |  |
| LITERAL DESCRIPTION: _____<br>_____<br>_____                                                                                                                                                                                                                                                                                                                                                                                            |  |             |  |             |                                                                                                                      |                       |  |  |                   |      |  |                                                                                                                                                                                                                                                                                                                                                                  |  |                                         |  |  |  |      |  |              |  |  |  |  |  |  |                  |  |  |  |  |
| <b>RESTRICTED DIFFUSION</b>                                                                                                                                                                                                                                                                                                                                                                                                             |  |             |  |             |                                                                                                                      |                       |  |  |                   |      |  |                                                                                                                                                                                                                                                                                                                                                                  |  |                                         |  |  |  |      |  |              |  |  |  |  |  |  |                  |  |  |  |  |

<sup>3</sup> As many pages as necessary.