ANNEX 1

(ALERT AND NOTIFICATION PROCEDURES)

TO THE SOUTH CAROLINA OPERATIONAL RADIOLOGICAL EMERGENCY RESPONSE PLAN

I. INTRODUCTION

- A. Nuclear Power Plant (NPP) licensees, in conjunction with state and local emergency management organizations, have established mutually agreeable measures for prompt notification of emergencies consistent with the Emergency Classification Level (ECL) scheme outlined in the South Carolina Operational Radiological Emergency Response Plan (SCORERP), Section III, and Attachment B (Emergency Classification Levels).
- B. These measures are designed to provide offsite decision makers with information on the class of emergency, whether a release is taking place, the potentially affected population, and areas, and whether protective actions may be necessary.

II. PURPOSE

- A. Prescribe the Alert and Notification procedures to be followed by NPPs in the event of a radiological incident.
- B. Outline the process for alerting, notifying, and mobilizing state and county assets.

III. CONCEPT OF OPERATIONS

- A. Upon recognition that events have occurred which make declaration of an emergency appropriate, NPP operators will immediately notify the State Warning Point (SWP) and the affected counties.
- B. Immediately upon notification of an ECL, the SWP will notify South Carolina Emergency Management Division's (SCEMD) Chief of Operations, Radiological Emergency Preparedness (REP) Manager, the Director, Emergency Support Function (ESF) 8, ESF-10, and SCEMD's duty officer (after hours). SCEMD, in coordination with ESF-8 and ESF-10, will determine the requirements for further state and local government notification and/or response.
- C. When necessary, verification of ECL notification will be accomplished by use of an authentication code list issued by South Carolina Emergency Management Division (SCEMD). Copies of the code have been furnished to each NPP and county emergency management agency.
- D. Organizations to be notified by SCEMD for each class of emergency are listed in Annex 1, Attachment A.
- E. The emergency notification form used by NPP licensees is Attachment B to this annex. The emergency notification form used by SRS is Attachment C.

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- F. Alert telephone numbers and designated representatives for state, federal, and contiguous state agencies are found in the SCEMD Telephone Directory.
- G. Each organization will maintain separate procedures for alerting and mobilizing their personnel once notification from SCEMD is received.
- H. SCEMD alerts and mobilizes personnel in accordance with the SWP and SEOC SOPs.
- I. SCEMD will update the alert and notification rosters at least quarterly.
- J. Alert and Notification of the resident and transient populous surrounding each NPP is contained in Site Specific Plans Parts 1-6.

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ANNEX 1, ATTACHMENT A - NPP INCIDENT NOTIFICATION CHECKLIST

EMERGENCY	
CLASSIFICATION	NOTIFICATION
	Risk Counties* (confirmation of notification only)
	Director, SCEMD
UNUSUAL EVENT	Governor's Office
	Office of Adjutant General
	ESF-8 Health and Medical Service
	ESF-10 Environmental and Hazardous Materials Operations
	Ingestion Pathway Zone (IPZ) Counties**
	Educational Television (ETV)
	FEMA Region 4
	Georgia Emergency Management Agency (GEMA)
	NC Department of Public Safety
ALERT; SITE AREA	ESF-1 Transportation
EMERGENCY; GENERAL EMERGENCY	ESF-2 Communications
	ESF-3 Public Works and Engineering
	ESF-4 Firefighting
(in addition to those listed in UNUSUAL	ESF-6 Mass Care
EVENT above);	ESF-7 Finance and Administrations
notification will be of	ESF-11 Food
ESF leads of each	ESF-12 Energy
agency – refer to Table	ESF-13 Law Enforcement
3 of SC Emergency	ESF-14 Recovery and Mitigation
Operations Plan	ESF-15 Public Information
operations I tail	ESF-16 Emergency Traffic Management
	ESF-17 Agriculture and Animals
	ESF-18 Donated Goods and Volunteer Services
	ESF-19 Military Support
	ESF-24 Business & Industry

*Risk Counties

- 1. Catawba Nuclear Station York
- 2. Oconee Nuclear Plant Oconee, Pickens
- 3. Robinson Nuclear Plant Darlington, Lee, Chesterfield
- 4. Savannah River Site Allendale, Barnwell, Aiken
- 5. V.C. Summer Nuclear Station Richland, Fairfield, Newberry, Lexington
- 6. Vogtle Electric Generating Plant Allendale, Barnwell, Aiken

**Ingestion Pathway Zone Counties

1. Catawba Nuclear Station – Cherokee, Chester, Chesterfield, Fairfield, Kershaw, Lancaster, Laurens, Newberry, Spartanburg, Union

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- 2. Oconee Nuclear Plant Abbeville, Anderson, Greenville, Greenwood, Laurens, Oconee, Pickens, Spartanburg
- 3. Robinson Nuclear Plant Kershaw, Marlboro, Dillon, Marion, Florence, Williamsburg, Clarendon, Sumter, Richland, Fairfield, Lancaster, Chester
- 4. V.C. Summer Nuclear Station Cherokee, York, Lancaster, Union, Chester, Laurens, Greenwood, Saluda, Aiken, Edgefield, Calhoun, Kershaw, Sumter, Spartanburg, Lee, McCormick, and Orangeburg
- 5. Vogtle Electric Generating Plant Bamberg, Edgefield, Hampton, Orangeburg, Colleton, Lexington, Saluda, Jasper

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ANNEX 1, ATTACHMENT B – EMERGENCY NOTIFICATION FORM (NUCLEAR FACILITY TO STATE/LOCAL GOVERNMENT)

NUCLEAR POWER PLANT EMERGENCY NOTIFICATION FORM

Lines 1 – 6 are required for INITIAL Notifications 1. EVENT: □ DRILL □ ACTUAL DECLARATION □ TERMINATION (ONLY Lines 1, 2, & 4 required) 2. AFFECTED SITE: □ CATAWBA □ OCONEE □ ROBINSON □ VC SUMMER □ VOGTLE □ NPTU 3. EMERGENCY CLASSIFICATION: □ UNUSUAL EVENT □ ALERT □ SITE AREA EMERGENCY □ GENERAL EMERGENCY 4. EAL # Declaration Date:/ Time: (mark "N/A" for EAL # & Description) EAL DESCRIPTION: □ TERMINATION (Caused by the emergency): □ NONE □ IS OCCURRING □ HAS OCCURRED 6. PROTECTIVE ACTION RECOMMENDATIONS: □ NONE □ EVACUATE: □ SHELTER: □ CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH ORO PLANS AND POLICIES □ OTHER: Lines 7-11 are NOT required for INITIAL notifications. Lines 7-11 may be provided separately for follow-up notifications. 7. PROGNOSIS: Upgrade in classification or PAR change is likely before the next follow-up notification □ Yes □ No 8. SITE UNIT(s) STATUS: AFFECTED UNIT □ YES Unit 1 % Power Shutdown: Date/ Time □ YES Unit 2 % Power Shutdown: Date/ Time □ YES Unit 4 % Power Shutdown: Date/ Time □ YES Unit 4 % Power Shutdown: Date/ Time □ YES Unit 4 % Power Shutdown: Date/ Time □ YES Unit 4 % Power Shutdown: Date/ Time □ YES Unit 4 % Power Shutdown: Date/ Time □ YES Unit 4 % Power Shutdown: Date/ Time □ YES Unit 4 % Power Shutdown: Date/ Time □ YES Unit 4 % Power Shutdown: Date/ Time □ YES Unit 4 % Power Shutdown: Date/ Time □ YES Unit 4 % Power Shutdown: Date/ Time □ YES Unit 4 % Power Shutdown: Date/ Time □ YES Unit 4 % Power Shutdown: Date/ Time □ YES Unit 4 % Power Shutdown: Date/ Time □ YES Unit 6 % Power Shutdown: Date/ Time □ YES Unit 6 % Power Shutdown: Date/ Time □ YES Unit 6 % Power Shutdown: Date/ Time □ YES Unit 6 % Power Shutdown: Date/ Time						
2. AFFECTED SITE: CATAWBA OCONEE ROBINSON VC SUMMER VOGTLE NPTU 3. EMERGENCY CLASSIFICATION: UNUSUAL EVENT ALERT SITE AREA EMERGENCY GENERAL EMERGENCY 4. EAL # Declaration Date: _/ _/ Time: (mark "N/A" for EAL # & Description) EAL DESCRIPTION: 5. RELEASE TO THE ENVIRONMENT (caused by the emergency): NONE IS OCCURRING HAS OCCURRED 6. PROTECTIVE ACTION RECOMMENDATIONS:						
□ CATAWBA □ OCONEE □ ROBINSON □ VC SUMMER □ VOGTLE □ NPTU 3. EMERGENCY CLASSIFICATION: □ UNUSUAL EVENT □ ALERT □ SITE AREA EMERGENCY □ GENERAL EMERGENCY 4. EAL # Declaration Date:/ Time: (mark "N/A" for EAL # & Description) EAL DESCRIPTION: Time: (mark "N/A" for EAL # & Description) 5. RELEASE TO THE ENVIRONMENT (caused by the emergency): □ NONE □ IS OCCURRING □ HAS OCCURRED 6. PROTECTIVE ACTION RECOMMENDATIONS: □ NONE □ EVACUATE: SHELTER: CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH ORO PLANS AND POLICIES □ OTHER: Lines 7-11 are NOT required for INITIAL notifications. Lines 7-11 may be provided separately for follow-up notifications. 7. PROGNOSIS: Upgrade in classification or PAR change is likely before the next follow-up notification □ Yes □ No 8. SITE UNIT(s) STATUS: AFFECTED UNIT YES						
3. EMERGENCY CLASSIFICATION: UNUSUAL EVENT						
UNUSUAL EVENT						
UNUSUAL EVENT						
4. EAL # Declaration Date:// Time: (mark "N/A" for EAL # & Description) EAL DESCRIPTION: NONE IS OCCURRING HAS OCCURRED 5. RELEASE TO THE ENVIRONMENT (caused by the emergency): NONE IS OCCURRING HAS OCCURRED 6. PROTECTIVE ACTION RECOMMENDATIONS: NONE EVACUATE: CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH ORO PLANS AND POLICIES OTHER: CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH ORO PLANS AND POLICIES OTHER: Lines 7-11 are NOT required for INITIAL notifications. Lines 7-11 may be provided separately for follow-up notifications. 7. PROGNOSIS: Upgrade in classification or PAR change is likely before the next follow-up notification Yes No						
Termination Date:/ Time: (mark "N/A" for EAL # & Description) EAL DESCRIPTION: 5. RELEASE TO THE ENVIRONMENT (caused by the emergency): □ NONE □ IS OCCURRING □ HAS OCCURRED 6. PROTECTIVE ACTION RECOMMENDATIONS: □ NONE □ EVACUATE: □ SHELTER: □ CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH ORO PLANS AND POLICIES □ OTHER: Lines 7-11 are NOT required for INITIAL notifications. Lines 7-11 may be provided separately for follow-up notifications. 7. PROGNOSIS: Upgrade in classification or PAR change is likely before the next follow-up notification □ Yes □ No 8. SITE UNIT(s) STATUS: AFFECTED UNIT □ YES Unit 1 % Power Shutdown: Date/ /_ Time □ YES Unit 3 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time □ YES Unit 4 % Power Shutdown: Date/ /_ Time						
EAL DESCRIPTION: 5. RELEASE TO THE ENVIRONMENT (caused by the emergency): NONE SOCCURRING HAS OCCURRED 6. PROTECTIVE ACTION RECOMMENDATIONS: NONE SHELTER: CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH ORO PLANS AND POLICIES OTHER: Lines 7-11 are NOT required for INITIAL notifications. Lines 7-11 may be provided separately for follow-up notifications. 7. PROGNOSIS: Upgrade in classification or PAR change is likely before the next follow-up notification Yes No 8. SITE UNIT(S) STATUS: AFFECTED UNIT YES Unit 1 - % Power Shutdown: Date						
5. RELEASE TO THE ENVIRONMENT (caused by the emergency): NONE IS OCCURRING HAS OCCURRED						
6. PROTECTIVE ACTION RECOMMENDATIONS: NONE SYNCLUTE: SHELTER: CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH ORO PLANS AND POLICIES OTHER: Lines 7-11 are NOT required for INITIAL notifications. Lines 7-11 may be provided separately for follow-up notifications. 7. PROGNOSIS: Upgrade in classification or PAR change is likely before the next follow-up notification Sequence No 8. SITE UNIT(S) STATUS: AFFECTED UNIT YES Unit 1 % Power Shutdown: Date/ /Time YES Unit 2 % Power Shutdown: Date/ _ /Time YES Unit 3 % Power Shutdown: Date/ _ /Time YES Unit 4 % Power Shutdown: Date/ _ /Time YES Unit 4 % Power Shutdown: Date/ _ /Time YES Unit 4 % Power Shutdown: Date/ _ /Time YES Unit 4 % Power Shutdown: Date/ _ /Time YES Unit 4 % Power Shutdown: Date/ _ /Time YES Unit 4 % Power Shutdown: Date/ _ /Time Time YES Unit 4 % Power Shutdown: Date/ _ /Time YES Unit 4 % Power Shutdown: Date/ _ /Time HETEOROLOGICAL DATA:						
6. PROTECTIVE ACTION RECOMMENDATIONS: NONE SYNCLUTE: SHELTER: CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH ORO PLANS AND POLICIES OTHER: Lines 7-11 are NOT required for INITIAL notifications. Lines 7-11 may be provided separately for follow-up notifications. 7. PROGNOSIS: Upgrade in classification or PAR change is likely before the next follow-up notification Sequence No 8. SITE UNIT(S) STATUS: AFFECTED UNIT YES Unit 1 % Power Shutdown: Date/ /Time YES Unit 2 % Power Shutdown: Date/ _ /Time YES Unit 3 % Power Shutdown: Date/ _ /Time YES Unit 4 % Power Shutdown: Date/ _ /Time YES Unit 4 % Power Shutdown: Date/ _ /Time YES Unit 4 % Power Shutdown: Date/ _ /Time YES Unit 4 % Power Shutdown: Date/ _ /Time YES Unit 4 % Power Shutdown: Date/ _ /Time YES Unit 4 % Power Shutdown: Date/ _ /Time Time YES Unit 4 % Power Shutdown: Date/ _ /Time YES Unit 4 % Power Shutdown: Date/ _ /Time HETEOROLOGICAL DATA:						
□ NONE □ EVACUATE: □ SHELTER: □ CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH ORO PLANS AND POLICIES □ OTHER: Lines 7-11 are NOT required for INITIAL notifications. Lines 7-11 may be provided separately for follow-up notifications. 7. PROGNOSIS: Upgrade in classification or PAR change is likely before the next follow-up notification □ Yes □ No 8. SITE UNIT(S) STATUS: AFFECTED UNIT □ YES Unit 1% Power Shutdown: Date//Time □ YES Unit 2% Power Shutdown: Date//Time □ YES Unit 3% Power Shutdown: Date//Time □ YES Unit 4% Power Shutdown: Date//Time □ YES Unit 4% Power Shutdown: Date//Time □ YES Unit 4% Power Shutdown: Date//Time 9. METEOROLOGICAL DATA:						
□ EVACUATE: □ SHELTER: □ CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH ORO PLANS AND POLICIES □ OTHER: Lines 7-11 are NOT required for INITIAL notifications. Lines 7-11 may be provided separately for follow-up notifications. 7. PROGNOSIS: Upgrade in classification or PAR change is likely before the next follow-up notification □ Yes □ No 8. SITE UNIT(S) STATUS: AFFECTED UNIT □ YES □ Unit 1% Power Shutdown: Date//_ Time □ YES □ Unit 2% Power Shutdown: Date//_ Time □ YES □ Unit 3% Power Shutdown: Date//_ Time □ YES □ Unit 4% Power Shutdown: Date//_ Time 9. METEOROLOGICAL DATA:						
□ SHELTER: □ CONSIDER THE USE OF KI (POTASSIUM IODIDE) IN ACCORDANCE WITH ORO PLANS AND POLICIES □ OTHER: Lines 7-11 are NOT required for INITIAL notifications. Lines 7-11 may be provided separately for follow-up notifications. 7. PROGNOSIS: Upgrade in classification or PAR change is likely before the next follow-up notification □ Yes □ No 8. SITE UNIT(S) STATUS: AFFECTED UNIT □ YES □ Unit 1 % Power Shutdown: Date/ / Time □ YES □ Unit 2 % Power Shutdown: Date/ / Time □ YES □ Unit 3 % Power Shutdown: Date/ / Time □ YES □ Unit 4 % Power Shutdown: Date/ / Time □ YES □ Unit 4 % Power Shutdown: Date/ / Time □ YES □ Unit 4 % Power Shutdown: Date/ / Time □ YES □ Unit 4 % Power Shutdown: Date/ / Time □ YES □ Unit 4 % Power Shutdown: Date/ / Time □ YES □ Unit 4 % Power Shutdown: Date/ / Time □ YES □ Unit 4 % Power Shutdown: Date/ / Time □ YES □ Unit 4 % Power Shutdown: Date/ / Time □ YES □ Unit 4 % Power Shutdown: Date/ / Time □ YES □ Unit 4 % Power Shutdown: Date/ / Time						
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□ OTHER: Lines 7-11 are NOT required for INITIAL notifications. Lines 7-11 may be provided separately for follow-up notifications. 7. PROGNOSIS: Upgrade in classification or PAR change is likely before the next follow-up notification □ Yes □ No 8. SITE UNIT(S) STATUS: AFFECTED UNIT □ YES □ Unit 1 % Power Shutdown: Date/ / Time □ YES □ Unit 2 % Power Shutdown: Date/ / Time □ YES □ Unit 3 % Power Shutdown: Date/ / Time □ YES □ Unit 4 % Power Shutdown: Date/ / Time 9. METEOROLOGICAL DATA:						
Lines 7-11 are NOT required for INITIAL notifications. Lines 7-11 may be provided separately for follow-up notifications. 7. PROGNOSIS: Upgrade in classification or PAR change is likely before the next follow-up notification □ Yes □ No 8. SITE UNIT(S) STATUS: AFFECTED UNIT □ YES □ Unit 1						
7. PROGNOSIS: Upgrade in classification or PAR change is likely before the next follow-up notification						
8. SITE UNIT(S) STATUS: AFFECTED UNIT YES Unit 1 -						
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☐ YES Unit 4% Power Shutdown: Date//Time 9. METEOROLOGICAL DATA:						
9. METEOROLOGICAL DATA:						
Stability Class:						
Lines 10 - 11 are completed for follow-up notifications, IF Line 5 IS OCCURRING or HAS OCCURRED is selected						
10. AIRBORNE RELEASE CHARACTERIZATION: ☐ GROUND ☐ MIXED ☐ ELEVATED						
MAGNITUDE UNITS: □ Ci □ Ci/sec □ μCi/sec						
Mix ID:(Vogtle only) Noble Gases: lodines: Particulates:						
11. DOSE PROJECTION: Projection period: Hours						
Performed:						
Time:						
Zivilles						
5 Miles						
10 Miles						
12. REMARKS (As Applicable):						
13. APPROVED BY:TITLE:Date//Time						
13. APPROVED BY:						

EM-78 / Nuclear Power Facility Emergency Notification Form / October 2019 revision

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ANNEX 1, ATTACHMENT C – EMERGENCY NOTIFICATION FORM USED BY SRS

Fo	Form Rev. 02-26-2009 SRS Notification Form Savannah River Site, Alken, South Carolina	Page 1 of
2.	Notification Type	Message # ty O [E] Other
5.	Reported By: (Name) (Phone #) Classification (Phone #) Classification (Phone #)	Emerg.
7.	Emergency [A] NA [B] Declared At [C] Terminated At (Time/Date) [NA EPIP# EAL# Appendix/Attachment Description/Remarks	(mm/dd/yyyy)
9.	Meteorological Data °	
10.	Offsite [A] No Recommended Actions	
	Protective [B] Evacuate Actions [C] Shelter-In-Place	
	☐ [D] Other ☐ (a) Ingestion Pathway precautionary advisories for downwind Emergency Planning 2 be issued while consequence projection models are completed	ones should
	OR (b) Projections indicate that DILs may be exceeded (insert categories, e.g., forage, for	uits, etc.) ollowing areas,
11	(insert EPZs or more specific locations) precautionary warnings advising against ingestion or processing of foodstuffs and on protective measures should be issued for these areas until field verification is 1. Emergency Response Guide Protective Action: N/A Isolation Zone Down Win	performed.
-	FOLLOW-UP INFORMATION (Lines 12-15) NOT REQUIRED FOR INITIAL NOTIFICATION	until nur
12.	2. Release Information O [B] Medium: Air Soil Water-Pathway: [A] NA O [C] State: Solid Liquid Gaseous O [D] Type: Elevated (Stack) Ground	THE RESERVE
	O [E] Started: O [F] Stopped: (Eastern) Note: "Stopped" refers to time material fit container/building. Situation stability (e.g. is still offgassing from puddle, etc.) is exp	., whether material
13.	3. Radiological Release (A) NA (B) To Be Determ. (C) Default Source Term (D) Curies per Mi	nute (E) Curies
	☐ [F] Transuranics ☐ [G] Tritium ☐ [H] Fission Products ☐ [I] Other	
14.	4. Chemical Release O NA O To Be Determined O Default Source Term O Refined Source Term Pounds or Gallons Substance CAS Num	CERCLA EPCRA HS* EHS*
15.	5. Projected Site Boundary Dose NA To Be Determined New Unchanged CED Thyroid CED Other Projection Time Est. Duration	Hrs
16.	S. Approved By Transmittal	
1	Name Title Time/Date Time	mm/dd/yy

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	Page	of_
Additional information not include	ded on Page 1, including other EALs that may have been triggered.	
once SRS has completed the agencies information during the	e message they will take a roll call. You will need to record the fol he roll call.	lowin
CCEMP		
SCEMD Name:	Title:	
Time::_	Title: Date://_	<u>.</u>
Aiken County		
Name:	Title: Date://	
Time::	Date:/	
Allendale County		
Name:	Title:	
Time::	Date://	
Barnwell County		
Name:	Title:	
Time::	Date://_	

ANNEX 1, ATTACHMENT D – WARNING MESSAGE: SCEMD TO STATE GOVERNMENT

This is Name from SCEMD.		
This message reports an emergency atName of NPP	in	
Name County.		
This class of emergency is:		
a. UNUSUAL EVENT		
b. ALERT		
c. SITE AREA EMERGENCY		
d. GENERAL EMERGENCY		
The emergency was declared at (am/pm) on (date).		
My telephone number/extension is		
IMPLEMENT THE SOUTH CAROLINA OPERATIONAL RADIOLOGICA EMERGENCY RESPONSE PLAN. (Add appropriate instructions, if required.)		
Message received by Time		

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