

SYSTEM WALKDOWN

1.0 Objective

The objective of this surveillance is to verify the configuration and status of a selected system important to worker, public, or facility safety. This surveillance provides a basis for evaluating the effectiveness of the contractor's configuration control program and for establishing compliance with DOE requirements.

2.0 References

- 2.1 DOE 5480.19, *Conduct of Operations Requirements for DOE Facilities*
- 2.2 NRC Inspection Procedure 71707, *Plant Operations*

3.0 Surveillance Activities

In this surveillance, the Facility Representative selects a system important to worker, public, or facility safety and performs a complete walkdown of the accessible portions of the system. The Facility Representative verifies that the system as-built configuration matches the system drawings and that the system component alignment matches the alignment documented in the system lineup records.

During the course of this surveillance, the Facility Representative reviews the general condition of the system and of the surrounding area.

CAUTION

In the conduct of this surveillance, the Facility Representative should not attempt to position any component. The Facility Representative should utilize authorized operations personnel to perform any manipulation of components to verify position.

**Surveillance Guideline
SYSTEM WALKDOWN**

Surveillance No.: _____

Facility: _____

Safety System: _____

Date Completed: _____

	<u>YES</u>	<u>NO</u>	<u>N/A</u>
1. Is each component and portion of the system shown on system drawings?	_____	_____	_____
2. Does the location of each component and portion of the system match the system drawing?	_____	_____	_____
3. Does the orientation of each component and portion of the system match the system drawings?	_____	_____	_____
4. Is each component and portion of the system labelled?	_____	_____	_____
5. Does the nomenclature for system and component labels match the nomenclature and identification on the system drawings?	_____	_____	_____
6. Does the nomenclature on the system and the component labels match the nomenclature and identification on system lineup documentation?	_____	_____	_____
7. Does the actual system lineup and component configuration match the lineup and configuration on system lineup documentation, facility status boards, and in operator logs and records?	_____	_____	_____
8. Are locks and tags that are installed on system components reflected in lock/tag index documentation?	_____	_____	_____
9. Does the nomenclature and the component identification on locks and tags match the nomenclature and identification on lock/tag index documentation?	_____	_____	_____

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	<u>YES</u>	<u>NO</u>	<u>N/A</u>
10. Does the information on component deficiency tags match the deficiency tag index?	_____	_____	_____
11. Is system instrumentation properly installed, functioning, and are calibrations current?	_____	_____	_____
12. Are system valves in proper working condition? (No missing handwheels, valve stems are not bent, no indication of excessive packing leaks?)	_____	_____	_____
13. Are system dampers in proper working condition?	_____	_____	_____
14. For power-operated valves or dampers, is power available?	_____	_____	_____
15. Are local and remote position indications functional and do they indicate the same positions?	_____	_____	_____
16. Are system hangars and supports properly installed, aligned correctly, and do snubbers have sufficient hydraulic fluid levels?	_____	_____	_____
17. Are major system components properly lubricated and cooled (cooling water/ventilation) with no indication of leakage?	_____	_____	_____
18. Do major components such as motors, pumps, compressors, generators and fans appear to be operating normally without excessive vibration and noise?	_____	_____	_____
19. Is freeze protection such as insulation, heaters, and air circulation systems installed and operational?	_____	_____	_____
20. Is the system free from ancillary equipment that may negatively affect system performance such as ladders, scaffolding, tape, etc.?	_____	_____	_____
21. Is housekeeping adequate and are appropriate levels of cleanliness being maintained?	_____	_____	_____

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NOTES/COMMENTS:

PERSONNEL CONTACTED: _____

**IF MORE SPACE IS NEEDED FOR FINDINGS, OBSERVATIONS, AND FOLLOWUP
ITEMS - USE ADDITIONAL SHEETS**

FINDINGS:

Finding No.: _____

Description: _____

**Surveillance Guideline
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Finding No.: _____

Description: _____

Finding No.: _____

Description: _____

OBSERVATIONS:

Observation No.: _____

Description: _____

**Surveillance Guideline
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Observation No.: _____

Description: _____

Observation No.: _____

Description: _____

FOLLOWUP ITEMS:

Followup Item No.: _____

Description: _____

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SYSTEM WALKDOWN**

Followup Item No.: _____

Description: _____

Followup Item No.: _____

Description: _____

CONTRACTOR MANAGEMENT DEBRIEFED AND RESULTS: _____

Signature: _____ Date: _____

Facility Representative