

TIPCK03

To : DOCUMENT CONTROL DESK
Facility : MP Department : 806
Address : NUC REGULATORY COMMISSION (0140)
DOCUMENT CONTROL DESK
WASHINGTON, DC 20555

From : NDS CONT DOCUMENTS
Date/Time : 03/07/02 07:53

Trans No. : 000027724 Transmittal Group Id: 02066KA-3
Total Items: 00001

PASSPORT DOCUMENT

TRANSMITTAL

Page: 1



Item	Facility	Type	Sub	Document Number / Title	Sheet	Revision	Doc Date	Copy #	Media	Copies
* 0001	MP	PROC	EP	EPDI 11 PREPARATION AND CONTROL OF EMERGENCY PREPAREDNESS PROGRAM CHANGES		003 01			P	01

Marked (*) documents require your acknowledgement.

Acknowledgement Date : _____ Signature: _____

Please check the appropriate response and return form to sender.

☐
☐
☐

All documents received.

Documents noted above not received (identify those not received).

I no longer require distribution of these documents.

Date: _____ Signature: _____

A045-

2/13/02
Approval Date

2/14/02
Effective Date

Document Action Request

SPG#

020301-071756

Initiated By: Patti Luckey Date: 2/28/02 Department: EPD Ext.: 5474

Document No.: EPDI 11 Rev. No.: 003 Minor 01

Title: Preparation and Control of Emergency Preparedness Program Changes

For New Documents only → ☐ QA RI Title Manager, EPD

Reason for Request/Action (attach commitments, CRs, ARs, OEs etc)

Cancelled. Replaced by MP-26-EPA-FAP06

Continued ☐

Select one if performing a change (See MP-05-DC-SAP01 sect 2.3 to determine type of change)

☒ Intent Change (Tech IR, SQR Independent, RCD, Env Screen Required)
Other reviews may be required. See MP-05-DC-FAP 01.1 att 3

☐ Edit Corr.:

☐ Non-Intent Change

(Only Tech IR, SQR IR and Env. signature Required)

Editorial Correction Approval

TPC Interim Approval

Plant Mgmt Staff Member - Approval

(1) Plant Mgmt Staff Member Print/Sign/Date

(2) SM/SRO/CFH Print/Sign/Date

Procedure Request/Feedback Disposition

Priority: ☒ Perform Now ☐ Perform Later

Activity: ☐ Revision ☐ Minor Revision ☐ Cleanup Rev ☐ Biennial Review ☒ Cancellation ☒ Supercedure

See DC-GDL01 for guidance

☐ TPC ☐ OTC ☐ Place in VOID

Reviews continued <input checked="" type="checkbox"/>	Print	Sign	Date	SQR Qualified			If Com- ments
				Yes	No	Dept.	
<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>		
Environmental <input checked="" type="checkbox"/>	<i>KR Burgess</i>	<i>KR Burgess</i>	<i>2/28/02</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>EPD</i>	
RCD <input checked="" type="checkbox"/>	<i>KR Burgess</i>	<i>KR Burgess</i>	<i>2/28/02</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>EPD</i>	
Licensing Basis <input type="checkbox"/>							
Tech Independent <input type="checkbox"/>							

An NRRL Update Required ☒ YES

1. ☒ SQR Program Final Review and Approval

Approval ☒ Disapproval ☐

KR Burgess *2/28/02*
SQR Qualified Independent Reviewer / Date

Patti A. Luckey
Dept Head / Responsible Individual

3/5/02
Approval Date

2 Final Review and Approval

☐ SORC

☐ RI/DH (Ref Mans, GDLs, Handbooks)

DH / RI Sign

Meeting No

SORC Signature

DH / RI Signature

Approval Date

Effective Date: *3/8/02*