

memorandum

Idaho Operations Office

Date: October 4, 2011

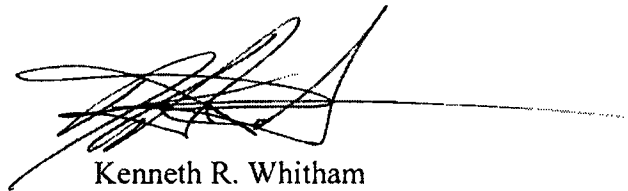
Subject: License Manager Change for the Nuclear Regulatory Commission Regulated Fort St Vrain, Three Mile Island and Idaho Spent Fuel Facility Independent Spent Fuel Storage Installations. (EM-FMDP-11-089)

To: Richard B. Provencher, Manager
Idaho Operations Office
1955 Fremont Avenue
Idaho Falls, ID 83415

Dear Mr. Provencher;

Ms. Barbara Beller has been selected to relieve Mr. Ken Whitham as the Department of Energy, Idaho Operations Office (DOE-ID) License Manager for the Fort St. Vrain (FSV), Three Mile Island Unit-2 (TMI) and Idaho Spent Fuel Facility (ISFF) Independent Spent Fuel Storage Installations (ISFSI) licensed by the U.S. Nuclear Regulatory Commission (NRC). As the NRC Licensing Manager, I have reviewed and requested the DOE-ID NRC Programs Quality Assurance Manager conduct a review of Ms. Beller's qualifications for this position. We have concluded that Barbara fully meets the requirements for this position. Having completed the required training (attachment) for the ISFSI's, Barbara will assume the duties and responsibilities of the DOE-ID License Manager from me and I will fill the position as the Alternate License Manager for the ISFSI's.

Please contact me at (208) 526-4141 or Barbara Beller at (208) 526-0235 should you have questions regarding this memorandum.



Kenneth R. Whitham
NRC Licensing Manager

Attachment

cc: NRC Document Control
William C. Allen, NRC Project Manager
Christopher M. Staab, NRC Project Manager
Dr. Blair Spitzberg, NRC Region IV

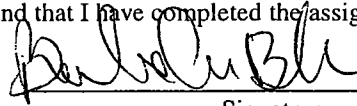
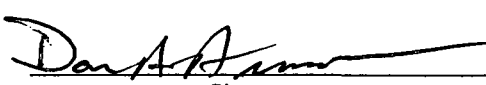
FSME20
NMSS26

EMPLOYEE QUALIFICATION FORM

NOTE: Page down for instructions.

Date Prepared: 10/28/2010

1. Employee Data: Name: Barbara A. Beller Mail Stop: 1222 E-mail ID: BELLERBA@ID.DOE.GOV Phone No.: 526-0235	2. ISFSI Organization: <input type="checkbox"/> ISFSI QA Support Staff <input checked="" type="checkbox"/> DOE-ID Staff <input type="checkbox"/> Other:								
3. Employee Qualifications: <input type="checkbox"/> Check this box if there was a change in job scope but no change in qualifications previously documented on Form ISFSI/IQP-2.04-1. If box is checked, leave the remainder of this block blank, if not, fill in. <input checked="" type="checkbox"/> Not Required for Licensing Manager, Document Control Coordinator or Training Coordinator Positions Education: Not Required Experience: Not Required									
4. ISFSI Functional Responsibilities: <table style="width: 100%;"><tr><td><input type="checkbox"/> DOE-ID Quality Assurance Manager</td><td><input type="checkbox"/> Document Control Coordinator</td></tr><tr><td><input type="checkbox"/> DOE-ID ISFSI Facility Director</td><td><input type="checkbox"/> Training Coordinator</td></tr><tr><td><input checked="" type="checkbox"/> DOE-ID ISFSI Licensing Manager</td><td><input type="checkbox"/> Other</td></tr><tr><td><input type="checkbox"/> ISFSI Quality Assurance Staff (QAS)/Lead Auditor/Auditor</td><td></td></tr></table>		<input type="checkbox"/> DOE-ID Quality Assurance Manager	<input type="checkbox"/> Document Control Coordinator	<input type="checkbox"/> DOE-ID ISFSI Facility Director	<input type="checkbox"/> Training Coordinator	<input checked="" type="checkbox"/> DOE-ID ISFSI Licensing Manager	<input type="checkbox"/> Other	<input type="checkbox"/> ISFSI Quality Assurance Staff (QAS)/Lead Auditor/Auditor	
<input type="checkbox"/> DOE-ID Quality Assurance Manager	<input type="checkbox"/> Document Control Coordinator								
<input type="checkbox"/> DOE-ID ISFSI Facility Director	<input type="checkbox"/> Training Coordinator								
<input checked="" type="checkbox"/> DOE-ID ISFSI Licensing Manager	<input type="checkbox"/> Other								
<input type="checkbox"/> ISFSI Quality Assurance Staff (QAS)/Lead Auditor/Auditor									
5. Job Description and Experience Required: <input type="checkbox"/> Administrative Staff (High School diploma or equivalent) <input type="checkbox"/> Management (Master's and 2 years or Bachelor's and 5 years experience, or 10 years relative experience) <input type="checkbox"/> Technical Staff (Master's or Bachelor's and 1 year, or Associate's and 3 years, or 5 years relative experience) Other Specialized Requirements: No minimum education requirements identified in the ISFSI SARs									
6. Verification of Education and Experience: <input checked="" type="checkbox"/> Not Required for Licensing Manager, Document Control Coordinator or Training Coordinator Positions Applicable degree(s): <input type="checkbox"/> Official university transcript of highest degree obtained, as a minimum <input type="checkbox"/> Telephone records of contact with university registrars are attached Years of applicable experience: <input type="checkbox"/> Documentation from present employer is in personnel files <input type="checkbox"/> Telephone records of contacts with former employers are attached <input type="checkbox"/> Contact could not be made with the following employers during the timeframe verified: The backup verification records are located at: Person performing the verification: Signature: <u>J. L. Morgan</u> Title: <u>QA Staff</u> Date: <u>10/28/2010</u>									
7. Justification if Experience/Education Requirements Not Met: N/A									
8. Training Required: Refer to Training Requirements Matrix in Attachment A of IQP-2.04 for training required on a functional job basis. Enter additional training requirements (if none, enter N/A): <u>N/A</u>									

1. Employee Data: Name: Barbara A. Beller Mail Stop: 1222 E-mail ID: BELLERBA@ID.DOE.GOV Phone No.: 526-0235	2. ISFSI Organization: <input type="checkbox"/> ISFSI QA Support Staff <input checked="" type="checkbox"/> DOE-ID Staff <input type="checkbox"/> Other:
9. Employee Certification and DOE-ID QAM Acceptance: <input checked="" type="checkbox"/> ISFSI indoctrination completed (classroom training if required per Attachment A of IQP-2.04) <input checked="" type="checkbox"/> Initial specific IQP-training completed (see Attachment A of IQP-2.04 for requirements) I certify that the information in Block 3 is factual and that I have completed the assigned training: Employee: <u>Barbara A. Beller</u> <u></u> <u>3/7/2011</u> Printed Name Signature Date I have determined that this employee meets the minimum education, experience, and training requirements for the ISFSI functional position listed above. Relevant documents supporting specific requirements that are not addressed on this page are attached. DOE-ID QAM: <u>Donald A. Armour</u> <u></u> <u>3/8/2011</u> Printed Name Signature Date	



ISFSI QUALITY ASSURANCE PROCEDURE

Rev 6

PERSONNEL INDOCTRINATION, TRAINING, AND QUALIFICATION

Effective Date:

10/01/09

Independent Spent Fuel Storage Installation

IQP-2.04

Page: A1 of A2

ATTACHMENT A

TRAINING REQUIREMENTS MATRIX

ISFSI QA Staff Position	Initial Indoctrination Briefing	Education/Experience Verification Required	ISFSI Quality Assurance Documents	Additional Requirements for DOE-ID Managed ISFSI(s)
DOE-ID ISFSI Quality Assurance Manager	Yes	Yes	All documents in the ISFSI Implementation Manual including Matrix and QMP	ISFSI Quality Program Plan (PLN-466) ^{(1) d} FSV/TMI-2/ISFF Safety Analysis Report, License Bases ^{(1) e & f} FSV/TMI-2/ISFF Technical Specifications & Bases ^{(1) g & h}
QAS	Yes	Yes	All documents in the ISFSI Implementation Manual including Matrix and QMP	NRC requirements ^{(1) a} 10 CFR 21, ^{(1) b} 10 CFR 72 Subpart G, ^{(1) c} ISFSI Quality Program Plan (PLN-466) ^{(1) d} FSV/TMI-2/ISFF Safety Analysis Report, License Bases ^{(1) e & f} FSV/TMI-2/ISFF Technical Specifications & Bases ^{(1) g & h} 10 CFR 72.44/48 Process, ^{(1) i} DOE-ID Licensing Management Procedures (LMPs) ^{(1) j} Standard Project Procedures (SPP) Records Center SPP-402 and Document Control Procedures SPP-401 ^{(1) k}
Training Coordinator	No	NO	IQP 2.04 and 18.04	No
Document Control	No	No	IQP-2.04, 5.01, 6.01, and 17.01 EIS-SPP-401 and 402	No
DOE-ID ISFSI Facility Directors	No	Yes	QMP-001	ISFSI Quality Program Plan (PLN-466) ^{(1) d}
Licensing Managers	No	No	QMP-001	ISFSI Quality Program Plan (PLN-466) ^{(1) d}

(1) The locations of these documents are as follows:

- NRC Requirements – Training provided by the Training Coordinator
- 10 CFR 21 – NRC home page and “MCP-2928” (EDMS)
- 10 CFR 72 Subpart G – (QA Requirements) NRC home page and “DOE/ISFSI/MTX-001”

TRAINING ATTENDANCE ROSTER MANUAL ENTRY

Records Use Only	
Date	S No.
28	
325335	88465
325335	3/15/11

Page 1 of

Course Number NRCLF002	Revision 1	Course Title License Basis Change Control	Starting Date / Time 03/07/2011
Remarks			Ending Date / Time 03/07/2011

[illegible]