

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

Team Industrial Services, Inc.
200 Hermann Drive
Alvin, Texas 77511
Location: 402 NW Business Park Lane, Riverside, Missouri

REPORT NUMBER(S) 12-003

2. NRC/REGIONAL OFFICE

Region IV
U. S. Nuclear Regulatory Commission
612 E. Lamar Boulevard, Suite 400
Arlington, TX 76011-4125

3. DOCKET NUMBER(S)

030-35252

4. LICENSE NUMBER(S)

42-32219-01

5. DATE(S) OF INSPECTION

June 25, 2012

LICENSEE:

The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Nuclear Regulatory Commission (NRC) rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The inspection findings are as follows:

- ☒ 1. Based on the inspection findings, no violations were identified.
- ☐ 2. Previous violation(s) closed.
- ☐ 3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy, to exercise discretion, were satisfied.

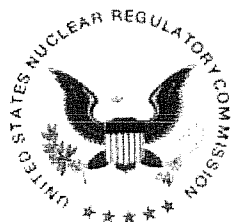
Non-cited violation(s) were discussed involving the following requirement(s):

- ☐ 4. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited in accordance with NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.
(Violations and Corrective Actions)

Statement of Corrective Actions

I hereby state that, within 30 days, the actions described by me to the Inspector will be taken to correct the violations identified. This statement of corrective actions is made in accordance with the requirements of 10 CFR 2.201 (corrective steps already taken, corrective steps which will be taken, date when full compliance will be achieved). I understand that no further written response to NRC will be required, unless specifically requested.

TITLE	PRINTED NAME	SIGNATURE	DATE
LICENSEE'S REPRESENTATIVE			
NRC INSPECTOR	Robert P. Hays	Anthony D. Dames for	7/10/12
BRANCH CHIEF	G M VASQUEZ	G M Vazquez	7/11/2012



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION IV
611 RYAN PLAZA DRIVE, SUITE 400
ARLINGTON, TEXAS 76011-4005

F A C S I M I L E

Name: David Tebo
Licensee: Team Industrial Services, Inc.

License No.: 42-32219-01
Docket No.: 030-35252

Fax No.: 219-838-8558
Phone No.: 219-838-0505
From: Anthony Gaines
Date: July 10, 2012
Subject: Clear 591
Pages: 1 + transmittal

Mr. Tebo,

I am faxing you a clear NRC Form 591M which documents the inspection performed by Robert Hays, NRC Region III, conducted at your Riverside, Missouri field office. If you have any questions about the inspection or the 591 please call me at 817-860-8252.

A handwritten signature in cursive script that reads "Anthony D. Gaines".

Anthony D. Gaines
Nuclear Materials Safety Branch A