

05/23/2016

CONVERSATION RECORD

TIME

3 : 30

☐ AM
☒ PM

NAME OF PERSON(S) CONTACTED OR IN CONTACT WITH YOU

Michael Conner

TELEPHONE NO.

(918) 931-2386

TYPE OF CONVERSATION

☐ IN-PERSON☐ E-MAIL☒ TELEPHONE☐ INCOMING☒ OUTGOING

E-MAIL ADDRESS

Mike-Conner@cherokee.org

ORGANIZATION

Cherokee Nation Road Program

SUBJECT

license renewal

SUMMARY

I called and left a message for the RSO on May 11, 2016, asking if he had any questions regarding the second RFI I sent (on May 3, 2016) with two questions Jackie had after reviewing my renewal review.

He called me and left a message May 16, 2016, but I was out of the office.

I spoke with the RSO today (May 23, 2016) and he committed to sending me a signed document stating that they will develop implement and maintain operating and emergency procedures that meet the criteria in the section entitled "Radiation Safety Program - Operating and Emergency Procedures" in Appendix H of NUREG 1556, Vol. 1, Rev. 1, dated November 2001.

After our conversation, he sent me a signed copy of that portion of the checklist.

He also confirmed that records required by the Commission will be stored at 22361 S. Bald Hill Road, Tahlequah, Oklahoma.

PUBLIC

- ☐ Immediate Release
☒ Normal Release

NON-PUBLIC

- ☐ A.3 Sensitive-Security Related
☐ A.7 Sensitive Internal
☐ Other: _____

Continue on Page 2

Reviewer: CA Date: 5/25/16

ACTION REQUIRED

NAME OF PERSON DOCUMENTING CONVERSATION

Casey Alldredge

SIGNATURE



DATE

5/23/16

ACTION TAKEN

TITLE OF PERSON TAKING ACTION

SIGNATURE OF PERSON TAKING ACTION

DATE

From: [Mike Conner](#)
To: [Alldredge, Casey](#)
Subject: [External_Sender] RE: Cherokee Nation License Renewal
Date: Monday, May 23, 2016 3:45:12 PM
Attachments: [Form B4.pdf](#)

Here you go☺

Thanks

Michael Conner
Cherokee Nation Roads
Material Testing Lab
Supervisor/RSO
O: 918-207-3818
C: 918-931-2386
F: 918-458-6145

From: Alldredge, Casey [<mailto:Casey.Alldredge@nrc.gov>]
Sent: Wednesday, May 04, 2016 2:42 PM
To: Mike Conner
Subject: Cherokee Nation License Renewal

Mr. Conner,

Upon further review of your renewal application by one of our senior reviewers, I have two additional questions for you regarding your request for renewal of License No. 35-27525-01. Could you please send me a signed letter answering the attached?

Thanks very much,

Casey Alldredge
Health Physicist
USNRC Region IV
(817)200-1547

APPENDIX B

Item No. And Title	Suggested Response	Yes	Alternative Procedures Attached
10. RADIATION SAFETY PROGRAM - MATERIAL RECEIPT AND ACCOUNTABILITY	Physical inventories will be conducted at intervals not to exceed 6 months, to account for all sealed sources and devices received and possessed under the license.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
10. RADIATION SAFETY PROGRAM - OCCUPATIONAL DOSIMETRY	Either we will maintain, for inspection by NRC, documentation demonstrating that unmonitored individuals are not likely to receive a radiation dose in excess of 10 percent of the allowable limits in 10 CFR Part 20, or we will provide dosimetry processed and evaluated by an NVLAP-approved processor that is exchanged at a frequency recommended by the processor.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. RADIATION SAFETY PROGRAM - PUBLIC DOSE	The applicant is <i>not</i> required to submit a response to the public dose section during the licensing phase. This matter will be examined during an inspection.	Need Not Be Submitted With Application.	
10. RADIATION SAFETY PROGRAM - OPERATING AND EMERGENCY PROCEDURES	We will implement and maintain the operating and emergency procedures in Appendix H of NUREG-1556, Vol. 1, Rev. 1, dated November 2001, and provide copies of these procedures to all gauge users and at each job site. OR Operating and emergency procedures will be developed, implemented, and maintained and will meet the criteria in the section entitled "Radiation Safety Program - Operating and Emergency Procedures" in NUREG-1556, Vol. 1, Rev. 1, dated November 2001.	<input type="checkbox"/> <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
10. RADIATION SAFETY PROGRAM - LEAK TEST	Leak tests will be performed at intervals approved by NRC or an Agreement State and specified in the Sealed Source and Device Registration Sheet. Leak tests will be performed by an organization authorized by NRC or an Agreement State to provide leak testing services for other licensees or using a leak test kit supplied by an organization authorized by NRC or an Agreement State to provide leak test kits to other licensees and according to the kit supplier's instructions.	<input checked="" type="checkbox"/>	<input type="checkbox"/> The information in Appendix J supporting a request to perform leak testing and sample analysis is attached.

McDuff 5/23/16

Alldredge, Casey

From: Alldredge, Casey
Sent: Wednesday, May 04, 2016 2:42 PM
To: mconner@cherokee.org
Subject: Cherokee Nation License Renewal
Attachments: RFI #2.pdf

Mr. Conner,

Upon further review of your renewal application by one of our senior reviewers, I have two additional questions for you regarding your request for renewal of License No. 35-27525-01. Could you please send me a signed letter answering the attached?

Thanks very much,

Casey Alldredge
Health Physicist
USNRC Region IV
(817)200-1547



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION IV
1600 E. LAMAR BLVD.
ARLINGTON, TX 76011-4511



EMAIL

Name: Michael Conner
License: 35-27525-01
Docket: 030-33920
Control: 589570

Organization: Cherokee Nation Road Program
Phone: 918-207-3818
E-mail Address: mconner@cherokee.org
From: Casey C. Alldredge
Date: May 4, 2016
Subject: Renewal Application dated December 16, 2015
Pages: 2

Mr. Conner:

Per your application dated December 16, 2015 for your license renewal, the items on the next page are deficiencies which require your response. **Please respond to this e-mail by Wednesday, May 18, 2016.** Our fax number is (817) 200-1083. You may respond by e-mail in pdf format if you'd like. My email address is casey.alldredge@nrc.gov. When responding to this e-mail, please include the license, docket and control numbers located at the top of this page.

Thanking you in advance for your cooperation, assistance, and prompt response in this matter.

A handwritten signature in blue ink, appearing to read "Casey C. Alldredge".

Casey C. Alldredge
Health Physicist

1. In your February 29, 2016, response to my previous request for information, you attached a copy of the checklist in NUREG 1556. In Item No. 10 Radiation Safety Program – Operating and Emergency Procedures, there is an “Or” statement and you checked both boxes. Please confirm which of these statements you will meet.
 - “We will implement and maintain the operating and emergency procedures in Appendix H of NUREG-1556, Vol. 1. Rev. 1, dated November 2001, and provide copies of these procedures to all gauge users and at each job site.

OR

 - Operating and emergency procedures will be developed, implemented, and maintained and will meet the criteria in the section entitled “Radiation Safety Program – Operating and Emergency Procedures” in NUREG-1556, Vol. 1, Rev. 1, dated November 2001.
2. Please confirm that records required by the Commission will be stored at 22361 S. Bald Hill Road, Tahlequah, Oklahoma.