

- 1) All fields required except those marked 'optional'
2) Entries in some fields auto-populate information in other fields
3) Mouse over form fields to view additional information
4) Use of Adobe Reader 8 or later is required

☐ Submission Update ☐ Delete Submission

Unique Reference ID (Licensee Supplied)

A3-18

Facility

Wolf Creek [50-482]

Reason for Testing - 26.717(b)(5)

For Cause

For Cause Testing Reason

Physical Condition/Smell of Alcohol

Please elaborate (optional)

Employment Type - 26.717(b)(3)

Licensee Employee

Outage Worker (optional)?

No

Labor Category - 26.717(b)(3)

HP/RP

Is this a 24-hour reportable event under 26.719(b)?

No

Was this collection refused? - 26.717(b)(7) & 26.75

No

Test Results - 26.717(b)(4)

Test Type(s) for Result(s) Reported - 26.717(b)(2)

Alcohol Only

Substance - 26.717(b)(2) & (b)(6)

Alcohol

Alcohol Specimen Tested

Breath

What 26.103 BAC level was exceeded?

0.04 or greater

Subversion Attempt - Did this collection involve a subversion attempt? - 26.717(b)(7) and 26.75(b)

No

Management Actions - 26.717(b)(8) & 26.75

Reason for the Action

First drug or alcohol positive

Sanction Applied

(NRC Minimum or Licensee Administrated)

NRC Minimum

Specific Sanction Applied

14- Day Denial

Person(s) Responsible for Information Provided

Person 1 (required):

Pamela

Black

Access Specialist

pablack@wcnoc.com

First Name

Last Name

Position Title

Company Email Address

Person 2 (optional):

Michael (Kenn)

Tate

Superintendent

mitate@wcnoc.com

First Name

Last Name

Position Title

Company Email Address

Final Step (Required) - NRC will consider this form authentic in accordance with 10 CFR 26.11 only when the "Validate & Lock" button is clicked and all errors (highlighted in red) have been corrected. The "Validate & Lock" button will change to "Locked" after the data validation process has been successfully completed indicating the form is ready for submission.

Locked

Form Locked On: Feb 19, 2019 at 4:04:05 PM

Save to Local PC

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