



**UNITED STATES
NUCLEAR REGULATORY COMMISSION**
REGION II
245 PEACHTREE CENTER AVENUE NE, SUITE 1200
ATLANTA, GEORGIA 30303-1257

January 29, 2020

Dr. Ronald J. Land
Site Manager
Framatome Inc.
2101 Horn Rapids Road Richland,
WA 99354-0130

SUBJECT: FRAMATOME INC. – NUCLEAR REGULATORY COMMISSION
 INTEGRATED INSPECTION REPORT 70-1257/2019-005

Dear Dr. Land:

This letter refers to the inspections conducted October 1 through December 31, 2019, at the Framatome Inc., facility in Richland, Washington. The purpose of these inspections was to perform a routine review in the performance areas of safety operations, radiological controls, and facility support. The enclosed report presents the results of the inspection. At the conclusion of the inspection, the results were discussed with members of your staff at an exit meeting held on October 31, 2019.

The inspections examined activities conducted under your license as they relate to public health and safety, the common defense and security, and compliance with the Commission's rules and regulations as well as the conditions of your license. Within the areas mentioned above, the inspections consisted of selected examinations of procedures and representative records, observations of activities, and interviews with personnel. Based on the results of these inspections, the Nuclear Regulatory Commission (NRC) has determined that no violations of more than minor significance were identified.

In accordance with Title 10 of the Code of Federal Regulations (10 CFR) 2.390 of the NRC's "Rules of Practice and Procedure," a copy of this letter and its enclosure, will be made available electronically for public inspection in the NRC Public Document Room or from the NRC's Agencywide Documents Access and Management System (ADAMS), which is accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html>.

If you have any questions, please contact Richard Gibson at 404-997-4718, or via email Richard.Gibson@nrc.gov.

Sincerely,

/RA/

Eric C. Michel, Chief
Projects Branch 2
Division of Fuel Facility Inspection

Docket No. 70-1257
License No. SNM-1227

Enclosure:
NRC Inspection Report 70-1257/2019-005
w/Attachment: Supplemental Information

cc:
ListServ

SUBJECT: FRAMATOME INC. – NUCLEAR REGULATORY COMMISSION
INTEGRATED INSPECTION REPORT 70-1257/2019-005 dated
January 29, 2020

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ADAMS: ☐ Yes ACCESSION NUMBER **ML20030A261** ☐ SUNSI REVIEW COMPLETE ☐ FORM 665 ATTACHED

OFFICE	RII:DFFI\PB2	RII:DFFI\PB2	RII:DFFI\PB1	RII:DFFI\PB2	RII:DFFI\PB2	RII:DFFI\PB2
NAME	G. Goff	R. Gibson	M. Ruffin	P. Startz	P. Glenn	E. Michel
DATE	11\1\2019	11\1\2019	11\1\2019	11\1\2019	11\1\2019	1\29\2020
E-MAIL COPY?	YES NO	YES NO	YES NO	YES NO		

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U. S. NUCLEAR REGULATORY COMMISSION

REGION II

Docket No.: 70-1257

License No.: SNM-1227

Report No.: 70-1257/2019-005

EPID No.: I-2019-005-0048

Licensee: Framatome Inc.

Facility: Richland Facility

Location: Richland, Washington

Dates: October 1 through December 31, 2019

Inspectors: P. Glenn, Project Inspector (A.2)
T. Grice, Project Inspector (B.1, B.2, and C.1)
M. Ruffin, Project Inspector (A.3)
P. Startz, Project Inspector (A.1)

Approved by: E. Michel, Chief
Projects Branch 2
Division of Fuel Facility Inspection

Enclosure

EXECUTIVE SUMMARY

FRAMATOME INC.
NRC Integrated Inspection Report 70-1257/2019-005
October 1 through December 31, 2019

An inspection was conducted by regional inspectors during normal shifts in the performance areas of safety operations, radiological controls, and facility support. The inspectors performed a selective examination of licensee activities that were accomplished by direct observation of safety- significant activities and equipment, tours of the facility, interviews and discussions with licensee personnel, and a review of facility records.

Safety Operations

- No violations of more than minor significance were identified related to Plant Operations. (Paragraph A.1)
- No violations of more than minor significance were identified related to Nuclear Criticality Safety. (Paragraph A.2)
- No violations of more than minor significance were identified related to Annual Fire Protection. (Paragraph A.3)

Radiological Controls

- No violations of more than minor significance were identified related to Environmental Protection. (Paragraph B.1)
- No violations of more than minor significance were identified related to Radioactive Waste Processing, Handling, Storage, and Transportation. (Paragraph B.2)

Facility Support

- No violations of more than minor significance were identified related to Emergency Preparedness. (Paragraph C.1)

Attachment:

Key Points of Contact
List of Items Opened, Closed, and Discussed
Inspection Procedures Used
Documents Reviewed

REPORT DETAILS

Summary of Plant Status

The Framatome facility converts uranium hexafluoride (UF₆) into uranium dioxide (UO₂) for the fabrication of low-enriched fuel assemblies used in commercial light water reactors. During the inspection period, normal production activities were ongoing.

A. Safety Operations

1. Plant Operations (Inspection Procedure 88020)

a. Inspection Scope

The inspectors performed a plant operations inspection to verify the licensee operated the plant safely and in accordance with Title 10 Code of the Federal Regulations (CFR) Part 70, the license, and Chapter 3 (Integrated Safety Analysis (ISA) and ISA Summary) and Chapter 11 (Management Measures) of the license application (LA).

The inspectors interviewed engineers, operators, managers, and reviewed records associated with uranium recovery and recycling areas identified as System 130 - Conversion of UO₂ Pellets to U₃O₈ Powder; System 140 – Engineering Laboratory Operations (ELO) - Pellet Dissolution; System 150 - Miscellaneous Uranium Recovery System (MURS); and System 190 - UO₂ Pellet Dissolution. The inspectors performed an evaluation of the existing scrap uranium recovery operation in the ELO and concurrently completed a preoperational evaluation of the new replacement Scrap Uranium Recovery Facility (SURF). The inspectors reviewed a sample of items relied on for safety (IROFS) associated with these uranium recovery facilities to determine if the safety functionality of the IROFS were being implemented in accordance with the ISA.

The inspectors performed field walk-downs of the ELO and SURF to verify that field configurations of processing equipment and safety controls were maintained in accordance with the configuration control procedures and ongoing work orders. The inspectors conducted interviews, document reviews, and field observations to verify that the licensee had conducted preventative maintenance and surveillance activities on Systems 130, 140, and 150, as required by operating procedures and work orders.

The inspectors reviewed a sample of personnel training records regarding initial and continuing training programs to verify compliance with training requirements. Specifically, the inspectors reviewed training records for uranium recovery personnel to verify compliance with training and qualification requirements specified in SOP-41068, Training and Qualifications.

The inspectors reviewed procedures and records (see attached list of documents) to verify that required actions identified in the ISA Summary had been accurately transcribed into operational procedures.

The inspectors reviewed a sample of the licensee's corrective action program entries for the past 12 months affecting safety controls to verify that deviations from procedures and unforeseen process changes affecting safety were documented, investigated, and resolved.

b. Conclusion

No violations of more than minor significance were identified.

1. Nuclear Criticality Safety (Inspection Procedure 88015)

a. Inspection Scope

The inspectors evaluated selected aspects of the licensee's Nuclear Criticality Safety (NCS) program to verify compliance with selected portions of 10 CFR 70, Chapter 5 (Nuclear Criticality Safety) of the facility's license application, and applicable licensee procedures.

The inspectors reviewed selected nuclear criticality safety evaluations (NCSEs) that focused on the SURF and ELO areas including those listed in section 4 of the attachment. The NCSEs and associated assumptions and calculations were reviewed to verify that they were consistent with the commitments in the license application. These commitments included the Double Contingency Principle, assurance of subcriticality under normal and credible abnormal conditions with the use of subcritical margin and having properly reviewed and approved NCSEs in place prior to conducting new or changed operations. The inspectors also reviewed the selected NCSEs to determine whether calculations were performed within their validated area(s) of applicability and consistent with the validation report. The NCSEs were selected based on factors that included risk-significance and whether they were new and/or revised.

The inspectors performed walk-downs of the ELO and SURF building to determine whether existing plant configuration and operations were covered by, and consistent with, the process description and safety basis in the selected NCSEs listed above. The inspectors reviewed process and system descriptions, specifications, drawings, and other related documents to verify that engineered and passive controls established in the NCSEs were implemented as specified. The inspectors reviewed operating procedures and postings to verify that selected administrative controls established in the NCSEs were also implemented. Non-passive controls reviewed were focused in the ELO area since it was operational. The inspectors interviewed operators and engineers to verify that administrative actions established in the NCSEs were understood and would be implemented as specified.

The inspectors also reviewed the integrated safety analysis (ISA) summary and supporting ISA documentation to determine whether the controls identified in the ISA were supported by technical bases in the NCSEs. Additionally, the inspectors interviewed operations staff to determine whether they were cognizant of NCS hazards and control methods related to their specific job function.

The inspectors reviewed records of NCS audits and accompanied a licensee NCS engineer on a walk-down of the ELO area to determine whether NCS staff routinely assessed field compliance with established NCS controls. Additionally, the inspectors interviewed NCS management and reviewed procedures and schedules to verify that the NCS function performed these audits such that the whole facility is reviewed and audited by NCS.

The inspectors reviewed select new and/or revised NCS program procedures, as listed in section 4 of the attachment, to determine whether the licensee implemented license requirements and whether the NCS program was governed in accordance with these procedures.

The inspectors reviewed selected NCS-related CAP entries to verify that anomalous conditions were promptly identified and entered into the CAP, that they received the required level of investigation, and that they were closed out consistent with license commitments and procedures. The inspectors reviewed the associated corrective actions to verify they were sufficiently broad, prioritized on a schedule commensurate with their significance, completed as scheduled, and adequate to prevent recurrence. In addition, the inspectors reviewed the selected CAP entries to assess whether the licensee followed regulatory requirements and procedures with regards to reporting plant conditions to the NRC. The CAP entries reviewed included those listed in the attachment.

b. Conclusion

No violations of more than minor significance were identified.

3. Fire Protection Annual (Inspection Procedure 88055)

a. Inspection Scope

The purpose of this inspection was to determine whether the licensee's fire protection program met NRC license requirements and to verify the program was in compliance with applicable National Fire Protection Association (NFPA) codes, licensee procedures, and Chapter 7 (Fire Safety) and Chapter 11 of the license application. Specific aspects of the program that were reviewed were: control of combustibles and ignition sources; operability of fire detection and suppression equipment and systems; material condition of passive fire protection features; effectiveness of compensatory measures for out-of-service, degraded, or inoperable fire protection equipment, systems, or features; and performance of the fire brigade, as applicable.

The inspectors performed walkdowns, reviewed surveillance records, and compared combustible control drawings to verify the control of transient combustible materials, including pre-staged work materials, were consistent with MCP-30031, "Flammable and Combustible Liquids/Solids Storage & Handling," and that combustible control IROFS 4502 and 4503 were being implemented. The inspectors walked down the Uranium Oxide (UO₂) Building, Dry Conversion (DC) Building, the Scrap Uranium Recovery Facility (SURF), the Uranyl Nitrate Building (UNB), and the general plant areas to verify flammable materials were stored in marked cabinets and controlled in accordance with MCP-30031.

The inspectors conducted walkdowns of the previously stated facilities, reviewed procedures, and reviewed test and surveillance records to verify the physical condition of the fire safety controls and IROFS. The inspectors verified the detection devices did not have physical damage, blockage, or other potential interferences with the functionality and operational status. The inspectors also reviewed fire alarm system test records to verify visual and audible indications occurred when a fire detection system had been activated and that fire detection panels received power from two different sources.

The inspectors walked down the UNB, reviewed records, and interviewed licensee personnel to verify the fire sprinkler system was available, operable, had been tested and was in a material condition to perform the function as stated in E24-01-105, "Fire Hazards Analysis – Uranyl Nitrate Building." The inspectors also walked down the water supply valves and reviewed testing records to verify the valves were open as per E24-01-105. The inspectors also walked down the fire water supply and pumping capability to verify operability and that the system was capable of supplying the water demand of the system. The inspectors verified that the system provided water area coverage for the hazard being mitigated and that modifications had not degraded the hydraulic performance of the system.

The inspectors walked down fire hydrants and fire extinguishers and reviewed EMF-616411, "Pre-Fire Plan Arrangement Site Plan," to verify firefighting equipment was provided at the designated locations with unobstructed access and in proper material condition.

During walk downs of the UO₂ Building, DC Building, SURF, and UNB, the inspectors reviewed surveillance records to determine whether fire dampers, doors, and penetration seals were being maintained in a condition that would ensure availability and reliability to perform the intended safety functions. The inspectors also verified that IROFS 1113 and IROFS 3113 were being implemented in accordance with E04-NCSS-G06, "Fire Prevention and Firefighting." The inspectors performed walk downs to verify fire ratings of the doors and walls were compatible with the anticipated fire duration and intensity listed in the fire hazard analysis and associate fire barriers.

The inspectors reviewed licensee training materials to verify employees were receiving fire protection training in accordance with MCP-30040, "Fire Protection Program." The inspectors also reviewed training records and emergency drill participation records of individuals on the plant emergency response team (PERT) to verify team members received training and participated in drills as required by MCP-30040.

The inspectors reviewed the licensee's corrective action program entries for the past 12 months to verify the licensee was identifying fire protection operability problems, appropriately screening events, and entering them into the corrective action program at an appropriate threshold. Also, the inspectors reviewed the most recent fire protection assessment to verify the licensee was conducting audits as required and that audit findings were being documented and tracked in the corrective action program.

b. Conclusion

No violations of more than minor significance were identified.

B. Radiological Controls

1. Environmental Protection (Inspection Procedure 88045)

a. Inspection Scope

Through interviews with various licensee staff and review of available documentation, the inspectors verified that the future operation of the new SURF does not introduce any new postulated effluent streams or significantly increase the effluent releases and

will be monitored for on-site or off-site releases. The licensee has already obtained approval from the State of Washington, Department of Health, Office of Radiation Protection - emission unit (EU) specific license (AIR-19-1002, RAEL-038, NOC 1550).

b. Conclusion

No violations of more than minor significance were identified.

2. Radioactive Waste Processing, Handling, Storage, and Transportation for SURF (Inspection Procedure 88035)

a. Inspection Scope

Through interviews with various licensee staff and review of available documentation, the inspectors verified that the future operation of the new SURF will receive identical oversight as other on-site operations. The SURF will have the same characteristics of existing radioactive waste streams in terms of not increasing the volume of waste processed nor significantly impacting the future handling, storage, and transportation of waste at the site.

b. Conclusion

No violations of more than minor significance were identified.

C. Facility Support

1. Emergency Preparedness (Inspection Procedure 88050)

a. Inspection Scope

The inspectors evaluated selected aspects of the licensee's Emergency Preparedness (EP) program to verify compliance with 10 CRF 70, license application Chapter 8 (Emergency Management), the Emergency Plan, and implementing procedures.

The inspectors reviewed the licensee's emergency preparedness program to determine that the program is maintained in a state of operational readiness; properly coordinated with offsite support agencies; and audited to provide assurance that the EP program was being properly maintained and implemented in accordance with requirements and commitments in the license. The inspectors also reviewed the program to verify that the licensee implements a problem identification and resolution program that identifies and evaluates issues related to emergency preparedness and corrects items identified. The inspectors further reviewed the program to determine that the licensee implements an event review program that evaluates applicability to their emergency preparedness program.

The inspectors interviewed staff and reviewed records to verify that any changes made to the Emergency Plan or its purview had been reviewed by the EP organization and remained in compliance with 10 CFR 70.22.

The inspectors reviewed a sample of Emergency Plan Implementing Procedures (EPIPs) with revisions since the last EP inspection (see attached list of documents) to verify the changes were in compliance with the Emergency Plan and did not diminish safety. The inspectors reviewed multiple on-site locations required to have copies of the EPIPs to verify the most current editions were readily available to members of the emergency management and on-site response organizations.

The inspectors reviewed several pre-emergency plans to verify nuclear criticality safety (NCS) precautions for firefighting were included in the emergency responses. During the walkdown of the UO₂ building, the inspectors also verified that areas identified in the pre-fire plan, which designated the existence of firefighting restrictions because NCS concerns, were clearly posted.

The inspectors reviewed training records to verify the completion of training requirements for various members of the licensee's staff that serve as Plant Emergency Director (PED) and Plant Emergency Response Team (PERT) members. Inspectors verified that licensee staff with newly assigned EP responsibilities were assigned the necessary training curriculum and that their completion status was monitored to ensure timely completion of required training. The inspectors reviewed training on usage of emergency equipment to verify that the individuals responsible for utilizing such equipment were qualified as required by the Emergency Plan. The inspectors also observed part of an annually required advanced first aid training class provided by members of Kadlec Regional Medical Center.

The inspectors reviewed records to verify that the licensee provided training for on-site personnel for expected emergency situations consistent with the Emergency Plan. The inspectors also reviewed records to verify that training of off-site emergency responders was offered and that this training included special firefighting instructions, orientation tours, and refresher training as per the Emergency Plan.

The inspectors reviewed the written agreements (Memorandums of Understanding (MOUs)) with the off-site agencies to determine which of these organizations were required to have copies of up-to-date agreements, a copy of the most current Emergency Plan, and copies of the most recent implementing procedures. The inspectors interviewed off-site organization representatives from the City of Richland Police Department, Franklin County Emergency Management, Kadlec Regional Medical Center, Department of Energy (DOE) Emergency Management, City of Richland Parks & Public Facilities, Benton County Emergency Services, and City of Richland Fire & Emergency Services to verify that they maintained an understanding of the written agreements and that the licensee invited each organization for tours, training, and/or drill participation. During the review of the Emergency Plan, the inspectors verified the licensee maintained its certification of compliance with the Emergency Planning and Community Right-To-Know Act of 1986.

The inspectors observed the storage of emergency equipment in the Central Guard Station and the Emergency Operations Center (EOC) Equipment Shed to verify that the listed equipment was present and maintained in a ready-state. The inspectors verified on-site and off-site rendezvous facilities or areas and the EOC to verify that accountability meeting points were accessible and that these facilities contained operable communications and other equipment, as applicable.

The inspectors reviewed documentation to verify quarterly communications checks with offsite response organizations included both the communications check and update of all necessary telephone numbers.

The inspectors reviewed licensee audits and assessments conducted on the EP program to verify that such audits and assessments were conducted as required. The inspectors also reviewed drill/exercise critiques and interviewed staff to verify that concerns/issues identified during critiques and audits were being captured in the corrective actions program (CAP). The inspectors also interviewed staff on the status of the actual or expected effectiveness of these corrective actions.

Through interviews with various licensee staff, the inspectors verified that the operation of the SURF will be in accordance with the licensee's existing EP program.

b. Conclusion

No violations of more than minor significance were identified.

D. **Exit Meeting**

The inspection scope and results were presented to members of the licensee's staff at various meetings throughout the inspection period and were summarized on October 31, 2019, to R. Land and staff. Proprietary information was discussed but not included in the report.

SUPPLEMENTAL INFORMATION

1. KEY POINTS OF CONTACT

<u>Name</u>	<u>Title</u>
J. Bourgeois	Supervisor, Instrument Technicians and Electricians
J. Campbell	Training Specialist
J. Deist	Emergency Preparedness Coordinator
W. Doane	Manager Nuclear Safety
M. Hilty	Air Balance Technician
S. Hyle	Security Officer
J. Kreitzberg	Criticality Safety Engineer
C. Manning	Manager Licensing & Compliance
B. Mooney	Fire Protection Engineer
S. Powers	Plant Engineering, Technical Support & Maintenance Manager
B. Shiplet	Kadlec Regional Medical Center Advanced First Aid Instructor
T. Tate	Environmental, Health, Safety, and Licensing Manager
M. White	Kadlec Regional Medical Center Advanced First Aid Instructor
S. Wright	Industrial Safety/Fire Protection Manager

2. LIST OF ITEMS OPENED, CLOSED, AND DISCUSSED

None

3. INSPECTION PROCEDURES USED

88015 Nuclear Criticality Safety
88020 Operational Safety
88050 Emergency Preparedness
88055 Fire Protection (Annual)

4. DOCUMENTS REVIEWED

Records:

E04-07-201906, NCS Audit/Inspection Report – June 2019
E04-07-201906, NCS Audit/Inspection Report – July 2019
E04-07-201906, NCS Audit/Inspection Report – August 2019
E04-NCSA-140, ELO Pellet Dissolution
E04-NCSA-210, ELO Drain
E04-NCSA-260, Surf Dissolution, Version 1.0
E04-NCSA-270, Surf Solvent Extraction and Raffinate Treatment, Version 1.0
E04-NCSA-761, Between Building Transfers, Version 23
E08-01-1.0, Emergency Plan, Version 14.0
E08-01-1.0, Emergency Plan, Version 15.0, (DRAFT DOCUMENT)
E08-04-1.0, Letters of Agreement, Version 5.1
E08-04-2.2, Kadlec Regional Medical Center, Version 6.0
E08-04-2.4, US Department of Energy, Richland Operations Office, Version 5.1
E08-04-2.5, City of Richland, Version 7.0
E08-04-2.7, Richland Police Department, Version 7.0
E08-04-2.9, Benton County Emergency Services, Version 7.0
E08-04-2.10, Energy Northwest, Version 6.0
E08-04-2.11, Franklin County Emergency Management, Version 6.0
E08-04-2.12, Richland Fire Department, Version 4.0
E08-04-3.1, Perma-Fix Northwest, Incorporated, Version 4.0

E08-05-2.20, Pre-Emergency Plan, Scrap Uranium Recovery Facility (DRAFT DOCUMENT)
 EMF-608623 Pre-Emergency Building Plans Uranyl Nitrate Storage Bldg, Rev. 1
 EMF-616411 Pre-Fire Plan Arrangement Site Plan, Revision 6
 Engineering Change Notice 8805, SURF Site Preparation
 Engineering Change Notice 8891, SURF Major Equipment Installation Part 2/System 280 electrical (compressed air receiver-tank/main supply)
 Engineering Change Notice 8899, SURF Exterior Piping Connections, utilities connections of HNO₃, NaOH, DIW, Breathing Air, Compressed Air to the SURF Facility
 FRA_D3SEP_IG_19 -003_IR, Inspection Report: Fire Safety
 Inspection Report – Emergency Preparedness – Richland – June 04th to 07th 2019
 Order 13401638 PM000031 Emergency Lights 1 YR AB
 Order 13402032 PM 005104 FA EST3/Heat/Pull FUNC 5Y EL
 Order 13402201 PM 005423 FA BLDG 7 Heat Pull 5 YR EL
 Order 13402207, PM005407 FA WHS 1, 2, 3 5 YR EL
 Order 13402208 PM 005409 FA WHS 1, 2, 3 5 YR EL
 Order 13402690 PM 005405 FA WHS 1, 2, 3 5 YR EL
 Order 13402691 PM 005406 FA WHS 1, 2, 3 5 YR EL
 Order 13402692 PM 005408 FA WHS 1, 2, 3 5 YR EL
 Order 13408638 CG06P011 Fire Alarm Bldg Evac 12MO SA
 Order 13409022 PM 005114 FA UO2/DRYCON EST3 FUNC 5Y EL
 Order 13412756 PM 005095 FACP BATTERY/PNL VISUAL 6MO EL
 Order 13412763, CG06P012 Fire Hydrant Flow Test 12 MO RE
 Order 13423540 CG06P016 Fire Damper 1 YR MW
 Order 13423677 CG06P017 Door Fire (#63) SF 174 12MO RE
 Order 13427272 PM003884 Emergency Lights 1 MO EL
 Order 13427397 CG06P019 Fire Sprinklers 3MO PS
 Order 13430272 PM004337 Emer Lights Plantwide 1 MO EL
 Order 13430330 CG06P001 Safety Inspection 1MO OPCH
 Order 13430334 CG06P005 Safety Inspection 1MO OPUR
 Order 13430448 CG06P010 Safety Inspection 1MO MG
 Order 13430536 PM004338 Emer Lights Plantwide 1 MO EL
 Order 13430607 CG06P015 Fire Extinguishers 1MO AB
 PM 005404, FA Warehouse 1,2,3 EST3/Heat/Pull Visual Insp 1 YR EL
 PM 005405, FA Warehouse 1,2,3, EST3/Heat/Pull Functional Insp
 PM 005406, FA Warehouse 1,2,3, EST3/Heat/Pull Functional Insp
 PM 005407, FA Warehouse 1,2,3, EST3/Heat/Pull Functional Insp
 PM 005408, FA Warehouse 1,2,3, EST3/Heat/Pull Functional Insp
 PM 005409, FA Warehouse 1,2,3, EST3/Heat/Pull Functional Insp
 US Fuel Internal Audit Report, October 7-16, 2019

Procedures:

1703-76, Issue Investigation and Causal Analysis Procedure, Revision 24
 1703-77, US Fuel Corrective Action Program (WEBCAP), Revision 42
 1723-01, US Fuel Training Process, Revision 11
 AID 30379 D, Operator Aid/Test Procedure and Document Review, Version 2.2
 E04-05-01, Nuclear Criticality Safety Standards, Version 17.0
 E04-06-002, Routine Nuclear Safety Audits, Version 5.2
 E04-06-007, Routine Nuclear Criticality Safety Walkthroughs, Version 3.3
 E08-02-1.0, Quick Reference Guide, Version 17.0
 E08-03-1.1, Classifying and Emergency, Version 6.1

E08-03-2.1, Protective Action Decisions, Version 3.5
E08-03-3.1, Plant Emergency Director, Version 8.0
E08-03-4.1, Incident Notification Form, Version 7.0
E08-03-4.2, Emergency Notification Worksheet, Version 16.0
E08-03-8.5, Emergency Equipment List, Version 12.0
E08-03-8.7, Emergency Action Guides, Version 3.1
E24-01-001, Fire Hazards Analysis – Horn Rapids Road Site, Version 6.0
E24-01-105, Fire Hazards Analysis – Uranyl Nitrate Storage Building, Version 3.0
E24-01-102, Fire Hazards Analysis – Dry Conversion Facility, Version 2.1
MCP-30325, Instrument Repetitive Maintenance, Version 16.0
MCP-30383, Preventive Maintenance, Version 5.2
SOP-40789, Work Order Instructions, Version 18.0
SOP-40791, Maintenance Work Permit (MWP) and Pre-job Briefing (PJB),
Version 17.0
SOP-40841, Preventive Maintenance, Version 10.0
SOP-40920, Items Relied on for Safety (IROFS) and Equipment Essential to safety,
Version 8.0
SOP-41068, Training and Qualifications
SWI-50056A, Vault Inspection and Movement Process, Version 16.0

Condition Reports Written as a Result of the Inspection:

CR2019-3831, CR2019-3879, CR2019-3880, CR2019-3885

Condition Reports Reviewed:

CR2018-6877, CR 2018-9360, CR2018-9715, CR2019-600, CR 2019-917,
CR2019-1046, CR2019-1139, CR2019-1141, CR2019-1148, CR2019-1153, CR2019-
1269, CR2019-1298, CR2019-1305, CR2019-1334, CR2019-1350

Other Documents:

1-Intro-Site-Access_Initial-R11, Site Access Initial Training Introduction
2019 NCS Infraction Log
All Events Report
Annual EP Orientation for Offsite Agencies and Nearby Neighbors
C7020P001, UNB IROFS Functional Test 1 year (RE)
C7020P005, UNH Transfer Line 12 month (PF)
Certificate of Occupancy 2101 Horn Rapids Rd Richland, WA 99354 Siemens
Power
E10-08-011, Materials License, Version 2.1
E15-01-1, Integrated Safety Analysis, Version 24.0
EMF-608623 Pre-Emergency Scrap Uranium Recover Facility 1st Floor
EMF-608623 Pre-Emergency Scrap Uranium Recover Facility 2nd Floor
FRM-30379Q, Functional Test: SURF Building Construction (Electrical Functional
Testing), Version 1.2, dated July 18, 2019
HRR-IND-500001-002, Richland Site Access Refresher Training Emergency
Response
Organizational Chart of Environmental, Health, Safety, & Licensing
Purchase Requisition – Richland, dated March 25, 2019
State of Washington, Department of Health, Office of Radiation Protection emission
unit (EU) specific licenses approval. AIR-19-1002, RAEL-038, NOC 1550