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# OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT QUALITY ASSURANCE ADMINISTRATIVE PROCEDURE

Title:

#### PREPARATION AND REVISION OF IMPLEMENTING LINE PROCEDURES

Procedure No.: 2	Revision: 2	Date: 12/28/90	Page	1 of 2	22
Concurrence R.W. Clark	Date: גבובי (גור איז איז) גבובי (גור איז איז)	Approval	Date:	12/3/90	

# 1.0 <u>PURPOSE</u>

The purpose of this procedure is to establish responsibilities, identify requirements, and prescribe instructions for the preparation, review, approval, revision, and issuance of Implementing Line Procedures (ILPs) for the Office of Civilian Radioactive Waste Management (OCRWM).

# 2.0 <u>SCOPE</u>

This procedure applies to the development and revision of OCRWM ILPs developed in accordance with the implementation of QAAP 2.3, Establishing Quality Assurance Controls.

# 3.0 <u>REFERENCES AND DEFINITIONS</u>

# 3.1 REFERENCES

- 3.1.1 Quality Assurance Requirements Document (QARD), DOE/RW-0214.
- 3.1.2 Quality Assurance Program Description Document (QAPD), DOE/RW-0215.
- 3.1.3 Program Change Control Procedure (PCCP), DOE/RW-0223.

# 3.2 DEFINITIONS

- 3.2.1 The definitions of standard terms may be found in the Glossary contained in the QARD.
- 3.2.2 <u>Implementing Line Procedure (ILP)</u> A procedure that provides instructions for OCRWM personnel performing activities subject to quality assurance program controls. ILPs include technical, management, and operating instructions necessary for performing work including implementation of the quality assurance program controls.

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Ø	OCRWM QA ADMINISTRATI PROCEDURE	VE	Frocedure No.: QAAP 5.2	Revision: 2	Page: <b>2 22</b> of
	3.2.3	constit OCRWM ( require provide previou	<u>evision</u> - A modific utes a change from a) policy, (b) qual ment, or (c) extern as a substantive chan usly established in tive change in the	a previously e ity assurance al commitment; nge in the lev the ILP; or (e	established program or (d) rel of control
	3.2.4	an appr change; documen typogra correct	evision - ILP chang oved document such a a change to the alg at; minor wording ch phical, grammar, pu ions, where the bas at change.	as an organiza pha-numeric id anges for clar nctuation, or	tional title entifier of the ity; editorial, spelling
	3.2.5	identif from, a assuran	<u>ory Comment</u> - A comm ies and describes a in existing OCRWM (a ice program requirem ment or (d) provides	conflict with ) policy, (b) ent, or (c) ex	, or deviation quality sternal
	3.2.6	and or initiat the pur	<u>oible Associate Dire</u> Office Director who ing, revising, and pose of simplicity, out this procedure.	is responsibl maintenance of	e for the an ILP. For
4.0 <u>RESPO</u>	NSIBILITIES				
4.1	RESPONSIBLE	ASSOCIA	TE DIRECTORS, OCRAM	l	
	The Respons	ible Ass	ociate Directors an	e responsible	for:
	4.1.1	new ILP	ying and evaluating s and preparing TLP mal areas of respon	revisions wit	
	4.1.2	respons	ing a proposed ILP : ibility to determin or minor revision.	revision in th e if the revis	eir area of ion constitutes
	4.1.3	respons	shing within their : bility specific re- ction 5.1) for ILP (	view and accep	tance criteria

4.1.4 Providing approval of ILPs through the review and signatory process.



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- 4.1.5 Issuing and distributing the PCCP ILP.
- 4.1.6 Assuring that their staff and direct-support contractor personnel who perform activities covered by an ILP are appropriately indoctrinated and trained.
- 4.1.7 Assuring implementation of requirements delineated in ILPs in their functional areas of responsibility.
- 4.1.8 Reviewing assigned ILPs and subsequent revisions and providing comments.

#### 4.2 OCRVM PERSONNEL

OCRWM QA

PROCEDURE

ADMINISTRATIVE

OCRWM personnel are responsible for:

- 4.2.1 Identifying to the *Responsible Associate Director* the need to initiate or revise an ILP.
- 4.2.2 Developing, reviewing, or resolving comments on ILPs as assigned in accordance with requirements of this QAAP.
- 4.2.3 Completing assigned indoctrination and training upon the issuance of a new or revised ILP.

#### 4.3 DIRECTOR, OFFICE OF QUALITY ASSURANCE (OQA)

The Director, OQA or designee is responsible for:

- 4.3.1 Preparing and maintaining this QAAP.
- 4.3.2 Interpreting quality assurance program requirements for inclusion into the appropriate ILPs.
- 4.3.3 Reviewing ILPs to assure the existence of adequate qualitative and quantitative instructions for compliance.
- 4.3.4 Informing the OCRWM QA Training Officer of newly developed or revised ILPs so that appropriate training may be identified and implemented.
- 4.3.5 Providing signatory concurrence on new ILPs and ILP major revisions.
- 4.3.6 Issuing and distributing approved ILPs and ILP revisions.
- 4.3.7 Developing and issuing ILPs for OQA use in accordance with Section 4.1.



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#### OCRVM QA Training Officer 4.4

The OCRWM QA Training Officer is responsible for identifying and implementing appropriate training for newly developed or major revised ILPs.

#### 5.0 GENERAL

OCRWM personnel may suggest the subject for a new ILP or a revision to an existing ILP by transmitting the request to the Responsible Associate The Responsible Associate Director shall evaluate the Director. proposed draft for suitability and initiate the appropriate activities as necessary.

#### 5.1 ILP PREPARATION AND REVIEW

- 5.1.1 With the exceptions of the PCCP, new ILPs and ILP revisions shall be prepared in accordance with this OAAP and shall be maintained and controlled in accordance with QAAP 6.1, Document Control. The PCCP ILP shall be prepared and revised in accordance with the direction provided within those ILPs.
- Preliminary drafts of new or revised ILPs may be 5.1.2 developed and informally reviewed as necessary to adequately define the proposed process prior to drafting the ILP for formal review and comment resolution.
- Each formal draft of a new ILP or major ILP revision 5.1.3 shall be reviewed by the Director, OQA and each Responsible Associate Director affected by or with defined responsibility within the document.
- The formal ILP review process shall be documented on 5.1.4 Attachment III, "Document Review Record" (DRR) and Attachment IV, "Document Review Record (DRR) Continuation Sheet."
- Review criteria specified on the DRR shall be explicit. 5.1.5 Reviewers shall be provided with sufficient information to evaluate the ILP being reviewed. The review and acceptance criteria shall include the requirement for the Director, OQA, and Responsible Associate Directors to evaluate the document or changes relative to their respective external commitments.

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 5.1.6 Revi	ewers shall evaluate	each of their	comente	

- Reviewers shall evaluate each of their comments provided on the DRR to determine if the comment meets one of the mandatory comment criteria provided in Paragraph 3.2.5. For comments that meet the mandatory comment criteria, the reviewers shall mark the comments in the SECTION/PARAGRAPH block with an asterisk (\*) and a letter (a through e) corresponding to the applicable criterion.
- 5.1.7 Mandatory comments shall be resolved by the reviewer and the ILP preparer. The agreed resolution shall be documented in the RESPONSE block of the DRR. The reviewer shall initial, date, and approve the agreed resolution in the appropriate DRR block next to the mandatory comment resolution response. The resolution of mandatory comments may be accomplished via a mandatory comment resolution meeting or individual consultations that produce an acceptable end result.
- 5.1.8 Mandatory comments that cannot be resolved shall be brought to the attention of the appropriate management and, if not resolved, shall be elevated progressively to the Director, OQA and the *Responsible Associate Director* and, if necessary, to the Director, OCRMM.
- 5.1.9 Non-mandatory comments shall not require a formal review and comment resolution process although the ILP preparer shall review and consider non-mandatory comments for possible inclusion into the ILP.

## 5.2 ILP FORMAT AND CONTENT

- 5.2.1 To maintain uniformity, ILPs shall be developed in the format described in Attachment V, "ILP Standard Arrangement Format" and Attachment VI, "Standard Block Paragraph Format."
- 5.2.2 The PCCP ILPs shall comply with the format and content requirements described within those ILPs.
- 5.2.3 ILPs shall be prepared using Attachment I, "Procedure Title Page" and Attachment II, "Procedure Continuation Page." The required information follows:
  - a) Title Block The title or subject of the ILP

Ø	OCRWM QA ADMINISTRA PROCEDURE		Procedure No.: QAAP 5.2	Revision: 2	Page: 6 22 of
	b)	identific	e No The approp cation for the ILP ble Associate Dire	as assigned by	
	C)	Revision - The appropriate revision number with zero being the first issue			
	d)	Date - The effective date of the ILP			
	e)	Page - The specific page and total pages ("Page 1 of")			
	f)	Approval Block - The authorizing approval signature and the date signed (by the Responsible Associate Director			
	g)	Concurrence Block - The authorizing concurrence signature and the date signed by the Director, OQA.			
	5.2.4	process of that the process to The flow that are	shall contain a f described in Secti flow chart depict that is described chart should depi used in the proce alt of implemention	on 6.0. It is each individua in Section 6.0 ct the material ss and the prod	not necessary al step in the of the ILP. s or documents
	5.2.5	Attachmen confines Example.	nts shall be conta of Attachment II	ined within the and shall be id	e border lentified as
	5.2.6	The ILP p within th	preparer shall use ne ILP:	the following	conventions
	a)	Shall exp towards a	presses a mandator an action/activity	y requirement of in the ILP.	lirected
	b)	Should de	enotes expectation	relative to de	esired results.
	C)	May denot	ces permission.		
5.3	ILP NUMBERI	NG SYSTEM			
	5.3.1		mber designation ble Associate Dire		ned by the

			-			
	OCRWM QA ADMINISTRA PROCEDURE		Procedure No.: QAAP 5.2	Revision: 2	Pa <b>ge</b> : 7 of	22
	5.3.2	be alph	que number designati anumeric with digits lowing format:			
			0.3.1			
		ILP II	mplementing Line Pro	cedure		
			nese two digits refl ffice; RW-10 in this		nating OCR	WM
			ection of QAPD references; Section 3, Design			
			e first ILP prepared ection 3 of QAPD	d by RW-10 rel	lative to	
5.4	ILP REVISIO	ONS				
	5.4.1	initial Revision	sions shall be uniquissuance of a ILP sland subsequent really numbered.	hall be identi	ified as	
	5.4.2	When an be reiss	existing ILP is rev wed.	ised, the enti	ire ILP shi	all
	5.4.3	in accor	s to ILPs shall be o dance with the defin h 3.2.3 and 3.2.4.			Minor
	5.4.4	Major revisions shall require a formal review and comment resolution process for mandatory comments (see Paragraph 5.1.7). Minor revisions do not require a formal review and comment resolution process and shall require only the concurrence of the Director, OQA and the approval of the <i>Responsible Associate Director</i> prior to issuance.			a nall and	
	5.4.5	(vertica	ges shall be identif l line in the margir that were revised).	n adjacent to		or
	5.4.2 5.4.3 5.4.4	initial Revision sequenti When an be reiss Revision in accor Paragrap Major re comment Paragrap formal r require the appr prior to ILP chan (vertica	issuance of a ILP shall be a ally numbered. existing ILP is revi- ued. as to ILPs shall be a dance with the defin- th 3.2.3 and 3.2.4. wisions shall requir resolution process is th 5.1.7). Minor review and comment re- only the concurrence oval of the <i>Responsio</i> issuance. ges shall be identifind 1 line in the margin	hall be identi evisions shall ised, the enti classified as nitions provid re a formal re for mandatory visions do not esolution proc e of the Direc <i>ible Associate</i> fied by a chan n adjacent to	ified as be me ILP sha Major or A ded in eview and comments require a ess and sha tor, OQA a birector	Mino. (see hall and



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# 5.5 ISSUANCE

5.5.1	For new and major ILP revisions, the OCRWM QA Training
	Officer shall identify the recommended training on the
	Revision Record in accordance with QAAP 2.1,
	Indoctrination and Training.

- 5.5.2 Approved new ILPs and revisions, except the PCCP ILPs, shall be included in the OCRWM ILP Manual.
- 5.5.3 The PCCP ILPs shall be identified by reference in the OCRWM ILP Manual table of contents. The PCCP ILPs are issued and controlled as separate documents in accordance with the direction provided in those ILPs.

#### 6.0 PROCEDURE

#### 6.1 NEW ILP PREPARATION

- 6.1.1 When a valid need for a new ILP has been identified, the *Responsible Associate Director* shall initiate the development of the ILP.
- 6.1.2 The Responsible Associate Director shall prepare a formal draft ILP or assign the development of the formal draft to a preparer.
- 6.1.3 The preparer shall develop the formal draft ILP in accordance with Sections 5.1, 5.2, and 5.3.

#### 6.2 <u>NEW ILP REVIEW</u>

- 6.2.1 Upon completion of the formal draft ILP, the preparer shall submit the formal draft to the *Responsible* Associate Director.
- 6.2.2 The Responsible Associate Director shall initiate the formal review process for the new draft ILP by completing the top portion of Attachment III, DRR including the identification of the review and acceptance criteria in accordance with Paragraph 5.1.5; identification of the reviewing Responsible Associate Directors in accordance with Paragraph 5.1.3; and the establishment of a realistic comment due date and then shall forward the new draft ILP to the identified reviewing Responsible Associate Directors.

OCRWM QA ADMINISTRAT PROCEDURE	ÎVE	Procedure No.: QAAP 5.2	Revision: <b>2</b>	Page: <b>9</b> of	22
6.2.3	assigne	ector, OQA and <i>Respo</i> d review responsibil LP or delegate the r	ity shall rev	iew the ne	
6.2.4	The reviewers shall perform their review using the specified review and acceptance criteria references the DRR and shall identify their mandatory comments accordance with Paragraph 5.1.6.			don	
6.2.5	The Director, OQA and the Responsible Associate Directors reviewing the ILP shall provide to the Responsible Associate Director a consolidated set of comments on a single set of DRRs for subsequent resolution.			of	
6.2.6	The Responsible Associate Director shall review th to determine the extent of the comments. If no comments exist, the Responsible Associate Director shall complete the steps identified in Section 6.8				

#### 6.3 NEW ILP COMMENT RESOLUTION

6.3.1 The Responsible Associate Director shall forward the DRRs to the ILP preparer for comment resolution.

comments exist, the Responsible Associate Director shall initiate the steps identified in Section 6.3.

- 6.3.2 Prior to resolving comments, the ILP preparer shall evaluate each identified mandatory comment specified by the reviewer on the DRR to assure that the comment qualifies as a mandatory comment in accordance with the specified criterion of Paragraph 3.2.5. For incorrectly identified mandatory comments the preparer, with concurrence of the *Responsible Associate Director*, shall change the designation and document the justification for the change in the RESPONSE block of the DRR. This change shall be concurred with by the reviewer. If there is disagreement between the preparer and reviewer, it shall be elevated to appropriate management.
- 6.3.3 Once an acceptable response to a mandatory comment is reached in accordance with the requirements of Paragraph 5.1.6 through 5.1.8, the reviewer and the ILP preparer shall indicate acceptable resolution by signing and dating the space provided on the DRR.

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- 6.3.4 Following completion of the resolution of mandatory comments, the ILP preparer shall revise the document to address comment resolutions and shall forward the revised draft ILP along with the completed DRR package to the *Responsible Associate Director*.
- 6.3.5 The Responsible Associate Director shall process the ILP in accordance with Subsection 6.8.

#### 6.4 ILP REVISION PREPARATION

- 6.4.1 The Responsible Associate Director shall evaluate the need for an ILP revision.
- 6.4.2 If an ILP requires revision, the *Responsible Associate* Director shall assign the revision of the ILP to a preparer.
- 6.4.3 The HIP preparer shall complete the draft HIP revision in accordance with paragraphs 5.4 and 5.5. For draft revisions issued for comment, changes shall be identified by annotations, such as redline strikeout. For final draft issued for signature of approval, changes shall be identified by vertical side bar marking. A Revision Record (Attachment VII) shall be initiated describing proposed major HIP changes and identifying the reason for the changes. For revisions that contain only minor changes, that fact shall be stated on the Revision Record.
- 6.4.4 The ILP preparer shall evaluate if the proposed revision is major or minor in accordance with the definitions provided in Paragraphs 3.2.3 and 3.2.4, document the decision and justification on the Revision Record, and sign the Revision Record.
- 6.4.5 The ILP preparer shall forward the formal draft ILP and the Revision Record to the Responsible Associate Director.
- 6.4.6 The Responsible Associate Director shall review the Revision Record and concur with the major or minor revision evaluation by signing the Revision Record or shall initiate changes to the Revision Record prior to signing the Revision Record.



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## 6.5 MINOR REVISION REVIEW AND APPROVAL

- 6.5.1 The Responsible Associate Director shall review the draft ILP and informally resolve any minor revisions with the ILP preparer before approving the ILP minor revision. The Responsible Associate Director shall approve the minor revision by signing the APPROVAL block on the title page and forwarding the draft ILP to the Director, OQA for concurrence.
- 6.5.2 The Director, OQA shall review and concur with the HP by signing the CONCURRENCE block on the title page.
- 6.5.3 The Responsible Associate Director shall complete the RECOMMENDED TRAINING block of the Revision Record in accordance with Paragraph 5.5.1.
- 6.5.4 The minor revision is then processed and distributed in accordance with Paragraph 6.8.4.

#### 6.6 MAJOR REVISION REVIEW

6.6.1 If the Revision Record indicates that the draft ILP change constitutes a major revision, the *Responsible* Associate Director shall initiate the formal review process in accordance with Paragraphs 6.2.2 through 6.3.4.

#### 6.7 UNRESOLVED COMMENTS

6.7.1 Mandatory comments for initial-issue or major ILP revisions that cannot be resolved by the preparer and the reviewer shall be resolved by the *Responsible* Associate Director in accordance with Paragraph 5.1.8.

#### 6.8 APPROVAL AND DISTRIBUTION

- 6.8.1 The Responsible Associate Director shall sign the APPROVAL block on the ILP title page and forward the ILP to the Director, OQA soliciting the Director, OQA's concurrence signature on the ILP title page.
- 6.8.2 If the Director, OQA has comments, the *Responsible* Associate Director shall resolve the comments as necessary and shall resubmit the TLP to the Director, OQA for a signature in the CONCURRENCE block.

A MARKED A		OCRWM QA ADMINISTRATIV PROCEDURE	/E	Procedure No.: QAAP 5.2	Revision: <b>2</b>	Page: 12 of	22		
		6.8.3	Associa TRAININ with Pa	otaining HLP concur ate Director shall WG block of the Rev aragraph 5.5.1 and or, OQA.	complete the R ision Record i	ECOMMENDED n accordance	xe the		
		6.8.4	The Director, OQA shall process HLP revisions in accordance with QAAP 6.1, <i>Document Control</i> except for the POCP HLPs that are controlled and distributed in accordance with the directions provided within those HLPs.						
7.0	RECO	<u>705</u>							
	7.1	Attachments	a minimum, each approved ILP revision and the corresponding tachments III, IV and VII shall be processed as QA records in cordance with the requirements of QAAP 17.1, <i>QA RECORDS</i> NAGEMENT.						
8.0	ATTA	CHMENTS							
	8.1	Attachment	I – Pr	cocedure Title Page	•				
	8.2	Attachment	II – PI	rocedure Continuati	on Page				
	8.3	Attachment	III – Do	cument Review Reco	ord (DRR)				
	8.4	Attachment	IV – Do	cument Review Reco	ord (DRR) Conti	nuation She	æt		
	8.5	Attachment	v – п	P Standard Arrange	ment Format				
	0.0	Attachment '	vi – st	andard Block Parag	raph Format	Attachment VI - Standard Block Paragraph Format			
	8.6		ment VII - Revision Record						
	8.0 8.7	Attachment	VII - Re	evision Record					



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# ATTACHMENT I (Example)

vision: Date:	Date: Director, OQA	Page: of Date:
Date:	Director. OQA	Date:



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# ATTACHMENT II (Example)

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ATTACHMENT	TTT	(Example)

		CTIVE WAS DEPARTM		2-FEET 25 WBS NO
	DOC	UMENT RE	VIEW RECORD	
DOCUMENT NAME REVISION DATE				
REVIEW INSTRUCTION	S/ACCEPTANCE CRITERIA			
REVIEW INSTRUCTION	S/CRITERIA PREPARED BY		REVIEW INSTRUCTIONS/CRITERIA APPRO	VED BY
FORWARD RESULTS TO		Date	Signature	
FORWARD RESULTS TO	)			
FORWARD RESULTS TO	E ANNOTATED WITH AN (*)		TORY AND REQUIRE RESPONSE AND RESI	DLUTION.
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# ATTACHMENT IV (Example)

	DOCUMENT REVIEW RECORD (continuation sheet)							
DOCUMENT NAME REVISION DATE								
	ARE ANNOTATED WITH AN (*) A	RE MANDATORY AND REQUIRE RESPONSE AND R	ESOLUTION.					
SECT / PARA	COMMENT	PESPONSE	ACCEPT/ REJECT					
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REVIEWED BY		RESPONSE 3 -						
S.gna	ture Date	S gnature	Caie					

U.S. DEPARTMENT OF ENERGY WASHINGTON, D.C.



## ATTACHMENT V (Example)

# ILP STANDARD ARRANGEMENT FORMAT

# 1.0 PURPOSE

This section should be a description of the objective of the procedure.

# 2.0 <u>SCOPE</u>

Identify the specific application of the procedure and to which OCRWM activities it will apply. Include any restrictions on the procedure application.

# 3.0 <u>REFERENCES AND DEFINITIONS</u>

# 3.1 <u>REFERENCES</u>

List those documents used in the preparation that will interface with the procedure being written.

# 3.2 <u>DEFINITIONS</u>

Reference the Glossary for general terms. Define here the terms that are unique to the procedure being written.

# 4.0 <u>RESPONSIBILITIES</u>

Identify the individuals or organizations who have the major responsibility for the implementation of the procedure. Restrict this to OCRWM personnel who have direct involvement in the subject activity.

# 5.0 GENERAL

Delineate requirements and provide leading information which brings the reader up to the step-by-step details of the procedure section.

# 6.0 PROCEDURE

Provide the detailed methodology to implement the requirements of the QA Program and include reference in the text to any attachments.



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#### 7.0 RECORDS

7.1 State the following: "Documentation generated as a result of this procedure is collected and maintained in accordance with the requirements specified in QAAP 17.1, QA Records Management. At a minimum, the documents generated using attachments (list the attachments by number, i.e., I, II) are considered QA Records.

#### 8.0 ATTACHMENTS

List all exhibits, illustrations, forms, appendices, etc., described in the procedure text.



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# ATTACHMENT VI (Example) STANDARD BLOCK PARAGRAPH FORMAT

# 1.0 FIRST LEVEL INDENTURE

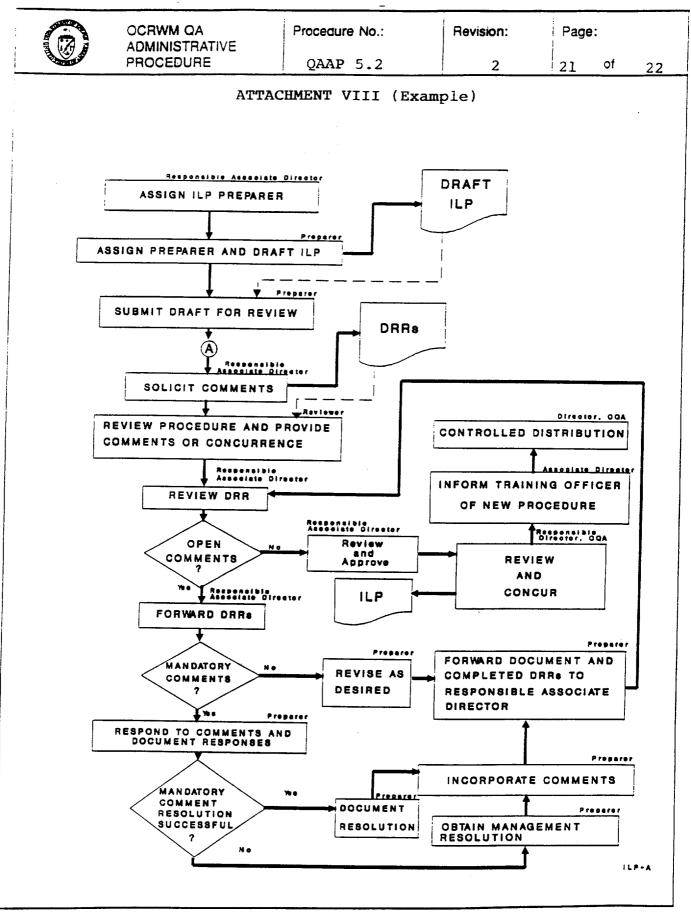
(The first level indenture shall be titled in upper case letters and underscored.)

# 1.1 SECTION LEVEL INDENTURES

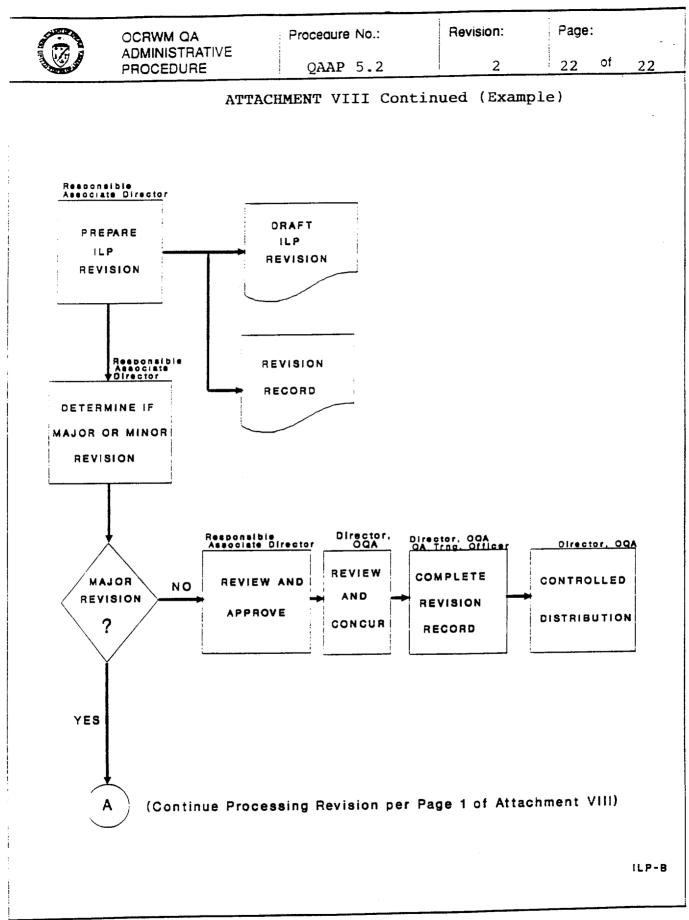
(The second level indentures shall be titled, as appropriate, in upper case letters and underscored.)

- 1.1.1 (Third level indentures shall be written in sentence or paragraph format in lower case letters and shall not bear titles.)
  - a) Itemization or delineation beneath any indentured paragraphs shall be typed in lower case letters and identified by a letter a), b), etc.
  - b) Paragraph titles, when used, shall always be on a separate line.
  - c) There shall always be a double space between indentures: except for fourth level indentures, e.g., a), b), shall be single spaced between indentures when the text does not exceed one line.

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	ATT	EACHMENT VII (Examp	ple)		
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		WASHINGTON, D.C.			
TITLE	2 2	REVISION RECORD	RE NO.	REV. NO. (cur	rent)
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	ARER OF PROPOSED REVISION OF REVISION (Check One):				
TYPE		Responsible Associate or Offic	ce Director		
TYPE SIGNA	OF REVISION (Check One):	Responsible Associate or Offic			
TYPE SIGNA TYPE	OF REVISION (Check One): ATURE TO AUTHORIZE REVISION _	Responsible Associate or Offic	e Director		
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