

RES CONCURRENCE SHEET FOR CONTRACTS/GRANTS

DATE: March 10, 1998

JCN: G6590

CONTRACT NO.: NRC-04-95-086 (RES-C98-382)

CONTRACTOR/GRANTEE: NCRP

TITLE: Critical Evaluation of the Linear-No Threshold Assumption

/ / NEW

/X / OTHER MODIFICATION
(change PO to V. Holahan)

TOTAL TERM: thru 9/30/98

FMPAS: M. Riggs *MR*

DATE: 3/3/98

PM: V. Holahan *VH*

DATE: 3/4/98

MA: B. Stehlin *BS*

DATE: 3/4/98

DIR: J. Murphy *JMurphy*

DATE: 3/6/98

I certify that funds are available for the above-referenced contract/grant in the amount of \$ -0- for FY98.

Norma M. Price 3/10/98
Norma M. Price, Certifying Official
FMT/FMPAS/RES

DISTR:
Subj: GRANT NCRP 95-086
Proj Mgr: V. Holahan, DRA
Div MA: B. Stehlin, DRA
WYLBUR
FFS
Riggs desk copy

{ } OL #1 attached
{X} OL #1 not required

PLEASE NOTE: SEE MARIANNE RIGGS IF ANY CHANGES ARE NEEDED FOR THIS PACKAGE.

A/24

March 10, 1998

NRC FORM 400

U.S. NUCLEAR REGULATORY COMMISSION

1. A. RFFA NUMBER
RES-95-086

(9-96)
NRCMD 111

REQUEST FOR PROCUREMENT ACTION (RFFA)

1. B. FFS COMMITMENT NUMBER
RES-C98-382

Send completed form to:
Division of Contracts, T-7 12

2. PERFORMANCE PERIOD (Express in months)

3. PROCUREMENT HISTORY

A. BASE PERIOD	B. OPTION PERIOD(S)	C. REQUESTED START DATE
----------------	---------------------	-------------------------

A. PREVIOUS CONTRACT NUMBER	B. EXPIRATION DATE 9/30/98
-----------------------------	--------------------------------------

4. A. TITLE
Critical Evaluation of the Linear-No Threshold Assumption

B. WAS ACTION IDENTIFIED ON ADVANCE PROCUREMENT PLAN?
 YES NO

5A. PROJECT OFFICER
Vincent Holahan

B. OFFICE/DIVISION/BRANCH
RES/DRA/RPHEB

C. TELEPHONE (Include area code)
415-6272

D. MAIL STOP
T-9 C24

6. TYPE OF ACTION REQUESTED (Check one)

<input type="checkbox"/> A. AWARD A COMPETITIVE CONTRACT	<input type="checkbox"/> F. ISSUE A BROAD AGENCY ANNOUNCEMENT
<input type="checkbox"/> B. AWARD A NONCOMPETITIVE CONTRACT TO:	<input checked="" type="checkbox"/> G. ISSUE A MODIFICATION TO A NRC-04-95-086, NCRP <input checked="" type="checkbox"/> GRANT <input type="checkbox"/> COOPERATIVE AGREEMENT
<input type="checkbox"/> C. AWARD A CONTRACT UNDER A SOCIO-ECONOMIC SET-ASIDE (Specify):	<input type="checkbox"/> H. AWARD A CONTRACT BASED ON ACCEPTANCE OF AN UNSOLICITED PROPOSAL TO:
<input type="checkbox"/> D. ISSUE A <input type="checkbox"/> GRANT <input type="checkbox"/> COOPERATIVE AGREEMENT TO:	<input type="checkbox"/> I. EXECUTE A MODIFICATION TO BASIC CONTRACT NUMBER:
<input type="checkbox"/> E. ISSUE AN INTERAGENCY AGREEMENT TO:	<input type="checkbox"/> J. EXECUTE A TASK ORDER UNDER CONTRACT NUMBER:
	<input type="checkbox"/> K. EXECUTE A MODIFICATION TO TASK ORDER NUMBER:

L. SPECIAL INSTRUCTIONS OR REMARKS
Change project officer as shown in 5A above.

7. FEE RECOVERABLE WORK	9. ESTIMATED COST	FIRST FY	SECOND FY	THIRD FY	FOURTH FY	FIFTH FY	TOTAL
8. NON-FEE RECOVERABLE WORK							

10. CERTIFICATION OF FUNDS

A. AMOUNT CERTIFIED \$-0-	B. B & R NUMBER 76015224015	C. JOB CODE G6590	D. BOC 4110	E. APPROPRIATION NUMBER 31X0200.760
-------------------------------------	---------------------------------------	-----------------------------	-----------------------	---

F. CERTIFICATION: This certifies that funds in the amount shown in Block 10 A. are available in the current allowance for the proposed procurement

TOTAL AMOUNT CERTIFIED \$-0-	FUNDS CERTIFYING OFFICIAL - Typed Name and Title Norma M. Price, FMT/FMPAS/RES	SIGNATURE <i>Norma M. Price</i>	DATE 3/10/98
--	--	------------------------------------	------------------------

11. LIST OF ATTACHMENTS (Check as appropriate)

<input type="checkbox"/> A. STATEMENT OF WORK (SOW)	<input type="checkbox"/> H. DESIGNATION OF MEMBERS TO SOURCE EVALUATION PANEL (SEP)
<input type="checkbox"/> B. INDEPENDENT GOVERNMENT COST ESTIMATE	<input type="checkbox"/> I. LIST OF FIRMS TO BE SOLICITED
<input type="checkbox"/> C. EVALUATION CRITERIA WITH NUMERICAL WEIGHTS ASSIGNED (if appropriate)	<input type="checkbox"/> J. NRC FORM 187, "SECURITY/CLASSIFICATION REQUIREMENTS"
<input type="checkbox"/> D. JUSTIFICATION FOR OTHER THAN FULL AND OPEN COMPETITION	<input type="checkbox"/> K. LIST OF PROCUREMENT OFFICIALS
<input type="checkbox"/> E. DOCUMENTATION FOR OVERSIGHT OF SERVICE CONTRACTING	<input type="checkbox"/> L. LIST OF GOVERNMENT-FURNISHED PROPERTY/MATERIALS/FACILITIES (May be part of SOW--Provide separate page)
<input type="checkbox"/> F. JUSTIFICATION FOR ACCEPTANCE OF UNSOLICITED PROPOSAL	<input type="checkbox"/> M. OTHER/REMARKS (Specify)
<input type="checkbox"/> G. JUSTIFICATION FOR URGENT PROCESSING	

12. PERSONAL SERVICES AND INHERENTLY GOVERNMENTAL FUNCTIONS (Check box if the response is "YES" for the corresponding statement)

<input type="checkbox"/> A. THE CONTRACTOR WILL PERFORM ON-SITE AT AN NRC FACILITY
<input type="checkbox"/> B. THE CONTRACTOR WILL UTILIZE GOVERNMENT-FURNISHED TOOLS/EQUIPMENT
<input type="checkbox"/> C. CONTRACTOR EMPLOYEES WILL BE INTEGRATED INTO THE GOVERNMENT'S ORGANIZATIONAL STRUCTURE.
<input type="checkbox"/> D. CONTRACTOR EMPLOYEES WILL BE USED INTERCHANGEABLY WITH GOVERNMENT EMPLOYEES.
<input type="checkbox"/> E. GOVERNMENT SUPERVISION (AS OPPOSED TO TECHNICAL DIRECTION) IS REQUIRED TO PROTECT THE GOVERNMENT'S INTEREST
<input type="checkbox"/> F. GOVERNMENT STAFF WILL ASSIGN DAILY TASKS TO OR PREPARE WORK SCHEDULES FOR INDIVIDUAL CONTRACTOR EMPLOYEES
<input type="checkbox"/> G. GOVERNMENT WILL REVIEW PERFORMANCE BY EACH INDIVIDUAL CONTRACTOR EMPLOYEE.

13. APPROVAL OF DESIGNATING OFFICIAL (Office Director or Designee) (See instructions)

TYPED NAME AND TITLE Joseph A. Murphy, Director, DRA	OFFICE RES
SIGNATURE <i>Joseph A. Murphy</i>	DATE 3/6/98

14. FOR USE ONLY (See instructions)

INPUT BY	DATE
----------	------