



**Department of Energy**  
**Yucca Mountain Site Characterization**  
 Project Office  
 P. O. Box 98608  
 Las Vegas, NV 89193-8608

WBS 1.2.11  
 QA: N/A

**JUN 02 1993**

Carl P. Gertz, Project Manager, YMP, NV

EVALUATION OF RESPONSE TO CORRECTIVE ACTION REQUEST (CAR) YM-93-042  
 RESULTING FROM YUCCA MOUNTAIN QUALITY ASSURANCE DIVISION (YMQAD) AUDIT  
 YMP-93-09 (SCP: N/A)

The YMQAD staff has evaluated the response to CAR YM-93-042. The response has been determined to be satisfactory. Verification of completion of the corrective action will be performed after the effective date provided. Any extension to this date must be requested in writing, with appropriate justification, prior to the date. Please send a copy of extension requests to Nita J. Brogan, Science Applications International Corporation, Las Vegas, Nevada.

If you have any questions, please contact either Robert B. Constable at 794-7945 or John S. Martin at 794-7881.

Richard E. Spence, Director  
 Yucca Mountain Quality Assurance Division

YMQAD:RBC-4430

Enclosure:  
 CAR YM-93-042

cc w/encl:

- K. R. Hooks, NRC, Washington, DC
- S. W. Zimmerman, NWPO, Carson City, NV
- J. W. Estella, SAIC, Las Vegas, NV
- P. A. Jones, M&O/TRW, Las Vegas, NV
- S. D. Johnson, PSDO/REECo, Las Vegas, NV
- J. S. Martin, SAIC, Las Vegas, NV
- C. J. Henkel, EEI, Las Vegas, NV
- A. V. Gil, YMP, NV
- B. J. Verna, YMP, NV

cc w/o encl:

- J. W. Gilray, NRC, Las Vegas, NV
- N. J. Brogan, SAIC, Las Vegas, NV

*Add: Ken Hooks  
 NH03  
 WM-11  
 102.7*

**ORIGINAL**  
THIS IS A RED STAMP

**OFFICE OF CIVILIAN  
RADIOACTIVE WASTE MANAGEMENT  
U.S. DEPARTMENT OF ENERGY  
WASHINGTON, D.C.**

8 CAR NO.: YM-93-042  
DATE: 04/13/93  
SHEET: 1 OF 1  
QA

**CORRECTIVE ACTION REQUEST**

1 Controlling Document AP-1.17Q, Revision 1, ICN 1		2 Related Report No. AUDIT YMF-93-09	
3 Responsible Organization YMPO		4 Discussed With M. Blanchard/R. Barton	
5 Requirement: AP-1.17Q, Paragraph 1.1, requires that forms be controlled relative to their use, development and change in accordance with AP-1.17Q.			
6 Adverse Condition: Contrary to the above requirement, forms being utilized by the Sample Management Facility are not controlled in accordance with AP-1.17Q. Examples include forms generated by implementation of BTP-SMF-002 and BTP-SMF-005.			
9 Does a significant condition adverse to quality exist? Yes ___ No <u>X</u> If Yes, Circle One: A B C		10 Does a stop work condition exist? Yes ___ No <u>X</u> ; if Yes - Attach copy of SWO If Yes, Circle One: A B C D	
		11 Response Due Date: 20 Working days from Issuance	
12 Required Actions: <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Extent of Deficiency <input checked="" type="checkbox"/> Preclude Recurrence <input type="checkbox"/> Root Cause Determination			
13 Recommended Actions: 1. Revise AP-1.17Q to allow the control of forms via PCs and stipulate controls to be placed for the control of this methodology.			
7 Initiator John S. Martin <i>[Signature]</i> Date <u>4-13-93</u>		14 Issuance Approved by: QADD <i>[Signature]</i> <sup>for</sup> Date <u>04-15-93</u>	
15 Response Accepted QAR <i>[Signature]</i> Date <u>5-24-93</u>		16 Response Accepted QADD <i>[Signature]</i> Date <u>5/1/93</u>	
17 Amended Response Accepted QAR Date		18 Amended Response Accepted QADD Date	
19 Corrective Actions Verified QAR Date		20 Closure Approved by: QADD Date	

**ENCLOSURE**

REV 08/90

OFFICE OF CIVILIAN  
RADIOACTIVE WASTE MANAGEMENT  
U.S. DEPARTMENT OF ENERGY  
WASHINGTON, D.C.

CAR NO. YM-93-042  
DATE: 05/13/93  
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**CORRECTIVE ACTION REQUEST (Continuation Page)**

1. Corrective Action Response for CAR YM-93-042

A. Remedial Action:

As discussed with Auditor John Martin on 04/28/93, the Remedial Action is the same as the Corrective Action to Preclude Recurrence as stated below.

B. Extent of Deficiency: Not required

C. Root Cause Determination: Not required

D. Corrective Action to Preclude Recurrence:

A Document Action Request (DAR) (copy attached) has been generated by the Plans and Procedures Department (PPD) to initiate a change to AP-1.17Q, Forms Control, Revision 1. As AP-1.17Q is part of the Quality Assurance Requirements and Document (QARD) transition process, QARD requirements and the changes resulting from this corrective action to preclude recurrence will be incorporated into one revision to AP-1.17Q.

2. Responsible Parties:

A. See "D" below.

B. N/A

C. N/A

D. Judith E. Zimmerman Initiate DAR to Revise AP-1.17Q by 05/14/93  
(Completed 05/13/93)

3. Response Approved:

*Wayne N. Kozin*  
*ja* Vincent F. Iorii  
Project Control Branch Chief

Date: 5/13/93

*Its dtd 5/13/93 - PCB: UFI-4221*

Signatures on this document represent signers' acknowledgement that the applicable procedure has been read, understood, and complied with.

SECTION I - ACTION REQUEST

1. DOCUMENT TITLE: Forms Control	2. DOCUMENT NO.: AP-1.17Q	3. REV/ICN: (current) 1	4. <input checked="" type="checkbox"/> Q <input type="checkbox"/> NON-Q
5. TYPE OF ACTION REQUESTED: <input type="checkbox"/> Develop New Document <input checked="" type="checkbox"/> Change Existing Document <input type="checkbox"/> Cancel Document <input type="checkbox"/> Review Only (attach document)			
6. DESCRIPTION OF ACTION REQUESTED: OCRWM QAP 6.2 Review		7. DOCUMENTS AFFECTED:	
8. REASON FOR ACTION REQUEST: Revise AP-1.17Q regarding control of forms via PCs and the associated control methodology. Incorporate QARD requirements (QARD transition).		10. RELATED REPORT NUMBER: CAR YM-93-042	
<input type="checkbox"/> Additional Material Attached		11. REQUESTED BY: Judith E. Zimmerman CRWMS M&O PPD <small>Print Name</small> 4-7797 Organization <small>Phone No.</small> Judith E. Zimmerman 05/13/93 Signature <small>Date</small>	
9. DELIVERABLE DUE DATE:			

SECTION II - ACTION INITIATION

12. REQUEST: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected	13. MAJOR CHANGES: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	14. PRIORITY: <input checked="" type="checkbox"/> Immediate <input type="checkbox"/> Hold
15. MODIFICATION METHOD: <input type="checkbox"/> ICN <input checked="" type="checkbox"/> Revision <input type="checkbox"/> Cancel <input type="checkbox"/> N/A	16. CCB ACTION: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
17. TRAINING RECOMMENDATION: <input checked="" type="checkbox"/> Self-Study <input type="checkbox"/> Classroom Trng. <input type="checkbox"/> N/A <input type="checkbox"/> Other _____		

18. COMMENTS

19. PREPARER ASSIGNED: Judith E. Zimmerman	20. RESPONSIBLE DIRECTOR: William N. Kozin for Jozli <small>Signature</small> 5/13/93 <small>Date</small>
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SECTION III - ACTION CONCURRENCE

21. PROJECT CONTROL BRANCH CHIEF CONCURRENCE: Request <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected	William N. Kozin for Jozli <small>Signature</small> 5/13/93 <small>Date</small>
COMMENTS:	

SECTION IV - ACTION REVIEW

22. TRAINING REQUIREMENTS: <input type="checkbox"/> N/A* <input type="checkbox"/> Yes - Number of Days Required for Trng.: _____ COMMENTS:	* Requires Justification in Comment Section
23. Training Officer/Training Manager:  _____ Signature <small>Date</small>	24. CRWMS M&O PLANS AND PROCEDURES (DAR Completion)  _____ Signature <small>Date</small>