NRC FORM 591M PART 1			U.S. NUCLEAR REGULATORY COMMISSION			
(10-2003) 10 CFR 2.201						
SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION						
1. LICENSEE/LOCATIO			2. NRC/REGIONAL	OFFICE		
Professional NDE & Welding Services PO Box 1481			U.S. Nuclear Regulatory Commission			
Trujillo Alto. PR 00977			Region I, 475 Allendale Road			
			King of Prussia, Pennsylvania 19406-1415			
REPORT Nos         2005-001           3. DOCKET NUMBER(S)         4. LICENSE NUMBER(S)			<u>.</u>	5. DATE(S) OF INSPECT		
030-35477			52-25538-01		2005	
		32 23330 01		November 16, 2	10, 2000	
The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Nuclear Regulatory Commission (NRC) rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The inspection findings are as follows:						
<ol> <li>Based on the inspection findings, no violations were identified.</li> <li>Previous violation(s) closed.</li> </ol>						
3. The violation(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self- identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy, NUREG-1600, to exercise discretion, were satisfied.						
Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(s):						
	s form is a NOTICE OF V	/IOLATION, which may be	subject to posting in	ere in violation of NRC requirements accordance with 10 CFR 19.11.	and are	
Licensee's Statement of Corrective Actions for Item 4, above. I hereby state that, within 30 days, the actions described by me to the inspector will be taken to correct the violations identified. This statement of						
corrective actions is made in accordance with the requirements of 10 CFR 2.201 (corrective steps already taken, corrective steps which will be taken, date when full compliance will be achieved). I understand that no further written response to NRC will be required, unless specifically requested.						
Title	Prin	ted Name		Signature	Date	
LICENSEE'S REPRESENTATIVE						
NRC INSPECTOR	David J. Collins, I	Health Physicist		/RA/	11/ 16 /05	