## NRC FORM 591M PART 3

(10-2003) 10 CFR 2.201

# **Docket File Information**

U.S. NUCLEAR REGULATORY COMMISSION

### SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

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LICENSEE     RAM Services Incorporated	2. NRC/REGIONAL C	DFFICE		
REPORT NUMBER(S) 2007-001	2443 Warrer	2443 Warrenville Road Lisle, IL 60532		
3. DOCKET NUMBER(S) 030-33812	4. LICENSE NUMBER(S) 48-26638-01	5. DATE(S) OF INSPECTION February 28, 2007		
6. INSPECTION PROCEDURES USED 87126	7. INSPECTION FOCUS AREAS  03.01-03.07 (except personal dosimetry records)			
s	UPPLEMENTAL INSPECTION INFORM	IATION		
1. PROGRAM 2. PRIORITY 3225 5	3. LICENSEE CONTACT  Jerry Wiza, RSO	4. TELEPHONE NUMBER 920-686-3889		
Main Office Inspection Field	Next Inspecti	on Date:		
X Temporary Job Site Midv	west Research Institute, 425 Volker Blv	vd., Kansas City, MO		

#### **PROGRAM SCOPE**

This was a routine inspection of the overall performance of decontamination activities by the licensee involving six research laboratories for ultimate release for unrestricted use at Midwest Research Institute, Kansas City, MO (client). The isotopes of concern for this project are carbon-14 and hydrogen-3. Approximately ten current laborartories will remain as research areas. Laboratories currently undergoing decontamination activities by the licensee are rooms: 215W1, 215W2, 386, 388N, 394, and 396.

# **Performance Observations**

Interviews conducted with Mr. Wiza and one authorized worker revealed an adequate understanding of remediation and material handling procedures and techniques. Appropriate survey techniques, decontamination and dress-out procedures were implemented and observed in Room 396. Available survey meters/probes and instrumentation used for wipe test sample analyses was observed calibrated and operable.

Confirmatory NRC surveys randomly conducted in laboratories decontaminated by the licensee did not indicate readings above background. Confirmatory wipe tests performed in Rooms 388N and 215W1 did not indicate levels of contamination in excess of established trigger levels.

Overall site security is well maintained by the client with key-card access to work areas and escort required.

Based on inspection observation of work in progress, interviews, and related record review, the licensee appears to be conducting decontamination activities in accordance with submitted procedures and techniques.

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(10-2003) 10 CFR 2.201					1
SAFET	Y INSPECTION	REPORT AND CO	OMPLIANCE INS	PECTION	1
1. LICENSEE/LOCATION IN			. NRC/REGIONAL OFFICE		
RAM Services Incorporated 510 County Highway V Two Rivers, WI 54241		U.S. Nuclear Regulatory Commission Region III 2443 Warrenville Road			
REPORT <b>2007-001</b>		Lisle, Illinois 60532-4351			
3. DOCKET NUMB		4. LICENSEE NUME	BER(S)	5. DATE(S) OF IN	SPECTION
030-33812		48-26638-01	,	February 28, 20	
LICENSEE:					
		the activities conductery Commission (NRC) ( xaminations of proced inspection findings at violations were identified.	d under your license a rules and regulations ures and representati re as follows:	as they relate to radiatio and the conditions of your live records, interviews w	n safety and to our license. with personnel,
2. Previous viola	ation(s) closed.				
non-repetitive, a	(s), specifically described nd corrective action was on, were satisfied.	d to you by the inspector as roor is being taken, and the re	non-cited violations, are not emaining criteria in the NRC	being cited because they wer Enforcement Policy, NUREG	e self-identified, -1600, to
	Non-Cited Violation(s) v	vas/were discussed involving	g the following requirement	(s) and Corrective Action(s):	
cited. This form	spection certain of your is a NOTICE OF VIOLA and Corrective Actions)	activities, as described belot TION, which may be subject	w and/or attached, were in v to posting in accordance w	violation of NRC requirements ith 10 CFR 19.11.	and are being
	Licensee	's Statement of Correct	ctive Actions for Item	4, above.	
corrective actions is mad	e in accordance with the	requirements of 10 CFR 2.2	201 (corrective steps alread	ne violations identified. This st ly taken, corrective steps whic required, unless specifically re	h will be taken,
Title LICENSEE'S REPRESENTATI		ted Name		gnature	Date
VE NRC			1/1/1/1		Xa
INSPECTOR	S. J. Mula	ay	XX M	uls	2/28/07
NRC FORM 591M PART 1 (	10-2003)		// //	// ¹	, ,