

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:
Twin Ports Testing, Inc
1301 N 3rd
Superior, WI 54880

2. NRC/REGIONAL OFFICE
REGION III
US NUCLEAR REGULATORY COMMISSION
2443 WARRENVILLE ROAD
LISLE IL 60532

REPORT NUMBER(S) *2008-001*

3. DOCKET NUMBER(S)
030-22241

4. LICENSE NUMBER(S)
48-23476-01

5. DATE(S) OF INSPECTION
Sep 16, 2008

LICENSEE:

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:

- 1. Based on the inspection findings, no violations were identified.
- 2. Previous violation(s) closed.
- 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) were discussed involving the following requirement(s):

- 4. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11.

(Violations and Corrective Actions)

Statement of Corrective Actions

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	PRINTED NAME	SIGNATURE	DATE
LICENSEE			
NRC INSPECTOR	<i>G. Parker</i>		<i>9/16/08</i>

Docket File Information
SAFETY INSPECTION REPORT
AND COMPLIANCE INSPECTION

1. LICENSEE Twin Ports Testing REPORT NUMBER(S) 2008-001		2. NRC/REGIONAL OFFICE Region III	
3. DOCKET NUMBER(S) 03022241	4. LICENSE NUMBER(S) 48-23476-01	5. DATE(S) OF INSPECTION September 16, 2008	
6. INSPECTION PROCEDURES USED 87121	7. INSPECTION FOCUS AREAS 03.01 - 03.07		

SUPPLEMENTAL INSPECTION INFORMATION

1. PROGRAM CODE(S) 03320	2. PRIORITY 1	3. LICENSEE CONTACT David Rands	4. TELEPHONE NUMBER 715/392-7114
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Main Office Inspection Next Inspection Date: 9/2009

Field Office _____

Temporary Job Site _____

PROGRAM SCOPE

The licensee is a radiographer located in Superior, Wisconsin, an Agreement State, with authorization to use material at temporary job sites where the NRC maintains jurisdiction. The licensee was inspected at the office in Superior, Wisconsin and by phone at a temporary job site in North Dakota. This licensee has three card certified radiographers and possesses three 660B cameras loaded with iridium-192 sources.

Performance Observations

At the time of the inspection, licensee was performing radiography at a temporary job site in the Dakotas. Personnel conducting operations at the temporary job site were interviewed by phone. The inspector reviewed the paperwork associated with the use of the radiographic devices and interviewed personnel at the main office that performed radiography. All personnel appeared to possess an adequate level of knowledge of radiation protection. Survey instruments were determined to be within calibration as were pocket dosimeters and alarming rate meters.

During calendar year 2007, dosimetry records indicated that no one exceeded 3 Rem in exposure for the year.

No violations of requirements were noted.