

SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION

1. LICENSEE/LOCATION INSPECTED:

U.S. Department of the Interior
Bureau of Indian Affairs Eastern Oklahoma Region

3100 West Peak Boulevard
Muskogee, Oklahoma 74401

REPORT NUMBER 2009-001

2. NRC/REGIONAL OFFICE

USNRC Region IV
612 East Lamar Blvd., Suite 400
Arlington, Texas 76011-4125

3. DOCKET NUMBER

030-30406

4. LICENSEE NUMBER

35-15239-02

5. DATES OF INSPECTION

3/18-23/2009

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 to exercise discretion, were satisfied.


_____ Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(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 10 CFR 19.11.

(Violations and Corrective Actions)

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	Printed Name	Signature	Date
LICENSEE'S REPRESENTATIVE			
NRC INSPECTOR	Jason M. Razo		3/23/2009



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION IV
612 EAST LAMAR BLVD, SUITE 400
ARLINGTON, TEXAS 76011-4125

F A C S I M I L E

Name: Paul Wallace, RSO
Licensee: US Department of the Interior
Bureau of Indian Affairs
Eastern Oklahoma Region

License No.: 35-15239-02
Docket No.: 030-30406

Fax No.: 918-781-4620
Phone No.: 918-781-4636
From: Jason Razo
Date: 03/23/09
Subject: Clear NRC 591M Inspection Report
Pages: 1 + transmittal sheet

Mr. Wallace,

I am faxing you a NRC Form 591M inspection report which documents the inspection performed by myself, conducted at your facility at 3100 West Peak Boulevard, Muskogee, Oklahoma 74401. If you have any questions about the inspection or the 591 report please call me at 817-276-6589.

Jason M. Razo
Materials Inspector
Nuclear Materials Safety Branch A

TRANSMISSION VERIFICATION REPORT

TIME : 03/23/2009 09:54
NAME : NRC RIV
FAX : 8178608188
TEL : 8178608100
SER.# : BROJ4J117485

DATE, TIME	03/23 09:54
FAX NO./NAME	719187814620
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MODE	OK
	STANDARD
	ECM



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