



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION II
245 PEACHTREE CENTER AVENUE NE, SUITE 1200
ATLANTA, GEORGIA 30303-1257

December 20, 2010

Mr. Larry Smith
Plant Manager
Honeywell Specialty Chemicals
P.O. Box 430
Metropolis, IL 62960

SUBJECT: NRC INSPECTION REPORT NO. 40-3392/2010-007

Dear Mr. Smith:

This refers to the inspection conducted from September 3 through 9, and November 29 through December 2, 2010, at the Honeywell Specialty Chemicals facility. The purpose of the inspection was to determine whether activities authorized under the license were conducted safely and in accordance with NRC requirements. The enclosed report presents the results of this inspection. On December 2, 2010, the findings were discussed with you and members of your staff.

During this inspection, the NRC staff examined activities conducted under your license as they relate to public health and safety to confirm compliance with the Commission's rules and regulations and with the conditions of your license. Within these areas, the inspection consisted of a selective examination of procedures and representative records, observations of activities in progress and interviews with personnel.

The results of the inspection are documented in the enclosed inspection report. No violations were identified during the inspection of your licensed activities.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be made available electronically for public inspection in the NRC Public Document Room or from the NRC's document system (ADAMS), accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html>.

Should you have any questions regarding this letter, please contact me at (404) 997-4418.

Sincerely,

/RA/

Joselito O. Calle, Acting Chief
Fuel Facility Inspection Branch 2
Division of Fuel Facility Inspection

Docket No. 40-3392
License No. SUB-526

Enclosure: (See page 2)

L. Smith

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Enclosure: NRC Inspection Report
No. 40-3392/2010-007

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U.S. NUCLEAR REGULATORY COMMISSION
REGION II

INSPECTION REPORT

Docket No.: 40-3392
License No.: SUB-526
Report No.: 40-3392/2010-007
Licensee: Honeywell Specialty Chemicals
Facility: Metropolis Works (MTW)
Location: Metropolis, IL 62960
Dates: September 3 through 9, and November 29 through December 2, 2010
Inspectors: Leonard Pitts, Fuel Facility Inspector
Robert Prince, Fuel Facility Inspector
Approved by: Joselito Calle, Acting Chief
Fuel Facility Inspection Branch 2
Division of Fuel Facility Inspection

Enclosure

Executive Summary

Honeywell Specialty Chemicals
NRC Inspection Report 40-3392/2010-007

This inspection included activities conducted by region-based inspectors in the areas of transportation, radioactive waste management, management organization and controls, and permanent plant modifications.

Transportation

Plant procedures adequately specified the responsibilities of personnel and organizations responsible for the transportation of radioactive materials. Activities associated with the receipt and handling of uranium hexafluoride (UF_6) cylinders were performed in a safe manner in accordance with approved procedures. Radioactive material shipment manifests were complete and accurately reflected the contents of shipments.

Radioactive Waste Management

Personnel responsible for the handling, packaging, preparation, and shipment of radioactive waste materials were knowledgeable of their responsibilities and regulatory requirements associated with these activities. Radioactive material shipping manifests correctly reflected the classification, quantity, and labeling requirements for the respective shipments. Radioactive material inventory records accurately reflected the various types of radioactive material in storage and their storage locations.

Management Organization and Controls

The licensee had implemented and continued to maintain an adequate preventative maintenance program to track and trend the performance of equipment and components. Preventative maintenance work packages associated with equipment and components that serve safety-related functions were scheduled in accordance with approved procedures and work packages reviewed to identify any adverse trends in operability. The threshold for identifying issues was adequate. Issues and corrective actions were assigned, scheduled, and tracked in accordance with approved procedures. Internal audits were routinely performed and findings entered into the licensees' corrective action program in accordance with approved procedures.

Permanent Plant Modifications

The licensee had implemented an adequate change management program. The inspectors determined that modification preparation, staging, and implementation did not impair routine, abnormal, or emergency operating procedure actions. The inspectors verified that the modifications were installed and system conditions were consistent with the design bases, and that operational testing assured implementation of design and safety system functionality, as

applicable. The inspectors verified that design documents, licensing documents, and operating procedures were updated to reflect the modification. The inspectors determined that the change packages had been properly reviewed for impact on safety.

Attachment

Partial List of Persons Contacted

Inspection Procedures Used

Items Opened, Closed, Discussed

List of Documents Reviewed

REPORT DETAILS

1. Summary of Facility Activities

The Honeywell Metropolis Works (licensee) uranium conversion facility is located on a 1,100 acre site (60 acres within the fence line). The licensee is authorized to possess 150 million pounds of natural uranium ore and to convert this material to uranium hexafluoride (UF₆). The uranium conversion process occurs in the Feed Materials Building (FMB). During the inspection, operations were normal. This announced inspection included observations and evaluations of the licensee's transportation, radioactive waste management, management organization and controls, and permanent plant modifications programs.

2. Transportation (IP 86740)

a. Inspection Scope and Observations

The inspection consisted of field observations, discussions with responsible personnel, and a review of selected documents. Through a review of procedures and discussions with licensee personnel, the inspectors determined that the responsibilities and roles of personnel and organizations responsible for the transportation of radioactive and hazardous materials were adequately described. Training and qualification records for personnel responsible for the preparation and shipment of radioactive material were current.

The inspectors observed the offloading, handling, and movement of incoming empty UF₆ cylinders, and the preparation and placement of loaded UF₆ cylinders on transport vehicles for outgoing shipments. The handling and movement of cylinders was performed in a controlled manner. Cylinders were prepared and labeled in accordance with approved procedures. Communication and coordination between the cylinder hauler operator and spotters during movement of cylinders was performed in a controlled and deliberate manner. Cylinders were properly secured to transport vehicles with the cylinder tamper indicating devices present. Transport vehicles were properly placarded and inspected in accordance with the licensee's program.

Storage areas containing UF₆ cylinders were noted to be properly posted and access controlled in accordance with approved procedures. Cylinders were stored in the proper configuration and cylinder valve covers present as required by approved procedures.

The inspectors reviewed manifests for UF₆ cylinder shipments. Manifests accurately reflected the contents of the shipments and all required supporting documentation was included in the manifests.

b. Conclusions

Plant procedures adequately specified the responsibilities of personnel and organizations responsible for the transportation of radioactive materials. Activities associated with the receipt and handling of UF₆ cylinders were performed in a safe manner in accordance with

approved procedures. Radioactive material shipment manifests were complete and accurately reflected the contents of shipments. No findings of significance were identified.

3. Radioactive Waste Management (IP 88035)

a. Inspection Scope and Observations

The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspectors.

The inspectors interviewed responsible personnel concerning the inventory and management of onsite radioactive material. The inspectors noted that responsible personnel adequately maintained a current inventory of the various types of radioactive material in storage and that the inventory accurately reflected radioactive material storage locations. Responsible personnel maintained an updated inventory that tracked the amount of uranium present on site to ensure compliance with license possession limits.

The inspectors observed radioactive material storage and staging areas. The inspectors noted that uranium-bearing radioactive material in storage consisted primarily of feed material, hard ore, potassium hydroxide (KOH) drums, and filter fines. The inspectors noted that the licensee had made a significant reduction in the number of KOH drums in storage since the last inspection. Additionally, the vast majority of deteriorated storage containers stored in outside locations noted during previous inspections had been moved to inside storage locations.

Through discussions with licensee personnel and plant observations, the inspectors noted that the licensee had continued efforts to reduce the quantity of miscellaneous materials on outside storage pads. These items included such materials as used equipment and components, scrap metal, and discarded drums. The inspectors observed responsible personnel preparing a rail car for shipment. The rail car was loaded with miscellaneous radioactive scrap metal and debris. Personnel placed covers on the rail car using a mobile crane. Operations were conducted in a safe manner and movement of the heavy load was performed in a controlled manner. The rail car covers were properly secured.

Procedures adequately described the responsibilities and roles of personnel responsible for the preparation, packaging, and transport of radioactive waste shipments.

Selected radioactive waste shipment manifests were reviewed for completeness and accuracy. The inspectors noted that individuals responsible for certifying and preparing radioactive waste shipping records and manifests had not changed since the last inspection. Manifests correctly reflected the classification, quantity, and labeling requirements for the respective shipment. Discussions with personnel responsible for certifying that waste shipments were prepared in accordance with Department of Transportation (DOT) regulatory requirements indicated that personnel were knowledgeable of their responsibilities and regulatory requirements.

b. Conclusions

Personnel responsible for the handling, packaging, preparation, and shipment of radioactive waste materials were knowledgeable of their responsibilities and regulatory requirements associated with these activities. Radioactive material shipping manifests correctly reflected the classification, quantity, and labeling requirements for the respective shipments. Radioactive material inventory records accurately reflected the various types of radioactive material in storage and their storage locations. No findings of significance were identified.

4. Management Organization and Controls (IP 88005)

a. Inspection Scope and Observations

The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspectors.

The inspectors reviewed the licensee's program for the scheduling and performance of preventive maintenance. The inspectors noted that the licensee had established programs to track and monitor the scheduling and performance of preventive maintenance work activities. Routine scheduling reports were distributed to maintenance and production personnel. Through discussions with licensee personnel and observations, the inspectors determined that the computerized maintenance planning and scheduling data base is accessible to personnel responsible for the planning and scheduling of preventive maintenance work orders. Adequate mechanisms were in place to inform responsible work groups of preventive work orders nearing due dates.

The inspectors interviewed maintenance engineers concerning their responsibilities relating to the review of completed work packages. The individuals reviewed work packages to identify any issues or problems that may have been encountered during the performance of maintenance activities. The inspectors were informed that one of the objectives of these reviews was to ensure that the frequency of preventive maintenance activities was appropriate to ensure equipment and component reliability. Additionally, the inspectors noted that these reviews also served to identify potential long-term operability improvements. The inspectors reviewed selective completed preventative maintenance work packages for accuracy and completeness.

The inspectors discussed the specific mechanisms associated with the performance of preventive maintenance for equipment and components designated as management of plant features and procedures (PFAP). These components served a safety-related function. The inspectors noted that responsible personnel had established administrative controls and tracking methods to ensure the completion of preventive maintenance work orders for PFAP components. Completed work packages were reviewed to identify any adverse trends in the performance of these components.

The inspectors reviewed aspects of the licensee's problem identification and resolution and incident investigation program. The licensee's corrective action program was referred to as the Item Tracking and Corrective Action (ITCA) program. The inspectors reviewed a six-month summary report of the corrective action data base. The inspectors found that the threshold for identifying issues was adequate.

The inspectors selected tracking reports to review the adequacy and status of identified corrective actions. The inspectors found that identified corrective actions were appropriate based upon the safety significance of a given issue. Mechanisms to track the assignment, status, and completion of corrective actions were adequate and implemented in accordance with approved procedures. Field walk downs were performed to verify the status of selected corrective actions. Based on field observations, the inspectors found that completion status accurately reflected conditions in the field.

The inspectors reviewed the licensee's program associated with the procedure change process. The inspectors interviewed personnel responsible for the control and distribution of procedures. Adequate controls were in place to ensure that procedures were reviewed by the required disciplines and the required approvals obtained prior to distribution of procedure changes. Controls were established to support the distribution of controlled copies of approved procedures to designated locations.

The inspectors reviewed the licensee's internal audit program. The inspectors discussed the process utilized to identify, plan, and schedule audits. The licensee's program to schedule and perform audits was adequate to ensure that major programs and processes were audited as scheduled. The inspectors interviewed responsible personnel regarding the identification and tracking of audit findings. Audit findings were assigned to responsible individuals and entered into the licensee's corrective action program.

b. Conclusions

The licensee had implemented and continued to maintain an adequate preventive maintenance program to track and trend the performance of equipment and components. Preventative maintenance work packages associated with equipment and components that served safety-related functions were scheduled in accordance with approved procedures and work packages reviewed to identify any adverse trends in operability. The threshold for identifying issues was adequate. Issues and corrective actions were assigned, scheduled, and tracked in accordance with approved procedures. Internal audits were routinely performed and findings entered into the licensee's corrective action program in accordance with approved procedures. No findings of significance were identified.

5. Permanent Plant Modifications (IP 88070)

a. Inspection Scope and Observations

The inspection consisted of a review of the licensee's management of change program, procedures, field observations, and discussions with responsible personnel. The inspectors reviewed the following requests for change (RFC) to determine if the design information and safety analyses were in compliance with the required design criteria:

- i. RFC#081631075 - Relocation of the check valves in the sensing lines for the hydrofluorinator differential pressure transmitters to minimize check valve failures which caused false pressure indications and trapped hydrofluoric acid (HF) between the check valve and the transmitter.
- ii. RFC#091631369 - Triple offset butterfly valves were installed on all hydrofluorination filter inlets and outlets. Piping specification (MP236) was modified to allow use of butterfly valves in greensalt service. Spool pieces were fabricated and installed with the new valves to fill the length left by the ball valves that were replaced. The valves had their own actuators that would be drop-in replacements for the ones currently installed. Thermowells were installed in each spool piece to allow for a thermocouple to be installed at any of these positions at a later date.
- iii. RFC#091651228 - The pressure control of the fluorinators was modified. The pressure sensing method was changed from the wind box pressure to a pressure transmitter that was downstream of the fluorinator fluidized bed. Additionally, the functionality of the pressure control valve (C-Ball) and the bypass valve (globe) were changed so that the globe valve was the pressure control valve and the C-Ball valve was the bypass valve.
- iv. RFC#091661653 - The panel mounted controls for the Ore Prep Area were transferred to the Experion Digital Control System (DCS). The panel board controllers and indicators were removed. This modification moved the functionality from local controllers, indicators, and relays to the DCS.

During review of RFC#091631369, the inspectors found that the modification was implemented as described in the Electronic Management of Change (eMOC). After installation, the licensee found that some of the replacement valves experienced excessive seat leakage under normal system conditions. This eMOC added the replacement valves to the list of valve types that were permitted for this use. Additionally, this eMOC required the use of spool pieces with the replacement valves to compensate for the decreased length of the replacement valves. The previously installed valve type remained on the list of valve types that were approved for use in this system. In the cases where the replacement valves experienced excessive seat leakage, the licensee returned to using the previously installed valves. The inspectors found that the associated system drawings were updated to allow use of both valve types and the Piping and Instrumentation Drawings (P&IDs) included a note to allow the actual valve type to be locally identified.

c. Conclusions

The licensee had implemented an adequate change management program for permanent plant modifications. The inspectors determined that modification preparation, staging, and implementation did not impair routine, abnormal, or emergency operating procedure actions. The inspectors verified that the modifications were installed and system conditions were consistent with the design bases, and that operational testing assured implementation of design and safety system functionality, as applicable. The inspectors verified that design documents, licensing documents, and operating procedures were updated to reflect the modification. The inspectors verified that the normal, abnormal, emergency operating,

testing, and surveillance procedures were updated prior to being used. The inspectors determined that the change packages had been properly reviewed for impact on safety. No findings of significance were identified.

6. Follow-up on Previously Identified Issues

- a. (Closed) URI 40-3392/2009-05-06, Failure to provide inspection, testing, and maintenance for the FM-200 fire suppression system in the FMB DCS room.

On November 23, 2010, the licensee signed a contract with a fire protection services vendor to perform semi-annual inspections and testing of the FM-200 fire suppression system in the FMB DCS room. The vendor performed the inspection and testing of the FM-200 system on December 2, 2010. The vendor identified discrepancies associated with the initial installation and lack of an inspection and maintenance program. The vendor informed the licensee of the discrepancies, and the licensee contracted the vendor to perform the necessary maintenance to bring the system to a fully functional condition. The vendor completed the system maintenance and performed a pressure test of the DCS room on December 8, 2010. After receiving notification from the vendor that all required maintenance was complete and the satisfactory results of the pressure test, the licensee determined that the DCS room FM-200 system was fully functional. The licensee had established a program to perform the inspection, testing, and maintenance of the DCS room FM-200 system and brought this FM-200 system to a fully functional condition. This item is closed.

- b. (Closed) URI 40-3392/2010-02-05, Failure to properly restore UF₆ heat trace power.

On September 6, 2010, the licensee identified a pressure transmitter malfunction on the high boiler column of the UF₆ distillation system. The malfunction was attributable to a de-energized heat trace circuit. Operators then did not follow procedure requirements for re-establishing the heat trace to the UF₆ piping, resulting in a valve packing leak. Incident Report IR-10-2491 was issued by the licensee to address the event. The event was identified by the licensee and corrective actions implemented to prevent recurrence in accordance with the licensee's corrective action program. The inspectors reviewed the licensee's evaluation and implementation of corrective actions associated with the event.

Immediate corrective actions were taken at the time of the event and included back-seating the valve, use of a local vacuum station to prevent worker exposure to UF₆, and de-energizing the heat trace circuit. The inspectors noted that the release was limited to the area in the immediate vicinity of the valve packing transmitter. There was no impact on the health and safety of the public as a result of this event.

Based upon review of the licensee's incident report and interviews with licensee personnel, the inspectors found that failure to follow an existing procedure was the primary cause of the event. The licensee discovered that Procedure MTW-SOP-FMB-0202, Heating a UF₆ Line, was not included in the Fluorination and Distillation procedure training recently provided to operators. Immediate corrective actions included retraining of Fluorination and Distillation operators and supervisors. Additionally, Abnormal Operating Procedure MTW-AOP-F2N-0500, "Fluorination Abnormal Operations," was revised on September 22, 2010 to include

procedural steps associated with line blockage of a cold UF₆ line. The inspectors reviewed the procedure revision and noted that the required steps were included as part of the procedure revision. The inspectors noted that the licensee performed an extent of condition review to ensure other safety-significant procedures had been included in the Fluorination and Distillation operator procedures manual. No additional procedures were identified missing.

Other near-term corrective actions included the placement of warning signs on those electric panels that contained breakers for heat tracing circuits. Based on field observations the inspectors confirmed that the warning signs were present on the required circuit panels. Based on discussions with licensee personnel, the inspectors learned that labels for individual breakers were provided inside the circuit panels. The inspectors performed field observations with licensee personnel and verified that individual breaker labels, including labels for those breakers associated with the event, were present inside circuit panels.

Additional corrective actions involved installation of local disconnects in order to isolate individual heat trace circuits. The inspectors noted that one of the primary contributing causes of the event was that the heat trace circuit involved in the event was tied into a breaker that controlled multiple circuits. The breaker was initially de-energized to support non-related work activities. The installation of local disconnects would prevent inadvertent de-energizing of multiple heat trace circuits. Based on field observations and interviews with licensee personnel, the inspectors determined that local disconnects had been installed for the circuits involved in the event. Licensee personnel stated that work activities to install additional local disconnects on the remaining circuit breakers controlling more than one heat trace circuit were planned for a plant outage scheduled for the Spring of 2011.

Since this event was identified by the licensee and effective corrective actions were taken and, based on the safety significance of the event, this failure constitutes a violation of minor significance and is not subject to formal enforcement action. This item is closed.

8. Exit Meeting Summary

The inspection scope and results were summarized on December 2, 2010. No proprietary information was discussed.

ATTACHMENT

1. PARTIAL LIST OF PERSONS CONTACTED

Licensee

*J. Assad, Sr ISC Project Management Specialist
M. Bagwell, Environmental and Radioactive Waste Shipping
T. Barnes, Maintenance Manager
*D. Bilski, Security Project Manager
A. Cherry, Electrical Maintenance
*J. Cybulski, Site Services Manager
G. Disinger, Reliability Engineering Manager
D. Driscoll, Contractor (P&ID Maintenance)
D. Duty, Fire Protection Specialist
J. Ellerbush, Maintenance Supervisor
*M. Greeno, Regulatory Affairs
J. Johnson, Safety Leader
*L. Litinski, Regulatory Affairs
M. Mena, Quality Assurance
B. McBee, Administration
J. McConnel, Mechanical Maintenance
*B. Muiter, Training
*S. Patterson, Health Physics Supervisor
J. Price, Lead Chemical Process Engineer
*L. Smith, Plant Manager
*B. Stephenson, Emergency Plan Coordinator
N. Vance, Lead – Technical Writer
*M. Wolf, Nuclear Compliance Director

***Denotes those present at the exit meeting.**

2. INSPECTION PROCEDURES USED

88005 Management Organization and Controls
88035 Radioactive Waste Management
88070 Permanent Plant Modifications
86740 Transportation

3. ITEMS OPENED, CLOSED, AND DISCUSSED

<u>Item</u>	<u>Status</u>	<u>Description</u>
URI 40-3392/2009-05-06	Closed	Failure to provide inspection, testing, and maintenance for the fire suppression system in the FMB DCS room.
URI 40-3392/2010-02-05	Closed	Failure to properly restore UF ₆ heat trace power.

4. LIST OF DOCUMENTS REVIEWED

LIC-SUB-526 - Integrated Safety Analysis Summary, Rev. 2, Dated June 17, 2010
 Honeywell MTW Safety Demonstration Report, Rev. 7, Dated April 23, 2010
 NRC Technical Evaluation report on the Acceptability of the Honeywell Integrated Safety Analysis Summary
 RFC#081631075, Initiated 12/30/2008, Closed 02/26/2006, Relocation of Hydrofluorinator sensing line check valves
 RFC#09163169, Initiated 06/01/2009, Closed 09/08/2009, Installation of Butterfly valves and spool pieces to replace the Hydrofluorinator filter inlet and outlet isolation valves
 RFC#091651228, Initiated 03/31/2009, Closed 04/15/2009, Change the pressure control for the fluorinators to be downstream of the fluorinator fluidized bed
 RFC#091661653, Initiated 10/22/2009, Closed 11/09/2009, Replacement of the Orifice Plate flow meter (FIC42104) with a mass flow meter
 MTW P&ID B4494, Rev. 13, Green Salt R-403 "A" Bottom Hydrofluorinator P&ID Diagram
 MTW P&ID B4495, Rev. 3, Green Salt F-406 & F-407 "A" Top Hydrofluorinator Filters P&ID Diagram (Pre-modification mark-up for RFC#09163169)
 MTW P&ID B4495, Rev. 6, Green Salt F-406 & F-407 "A" Top Hydrofluorinator Filters P&ID Diagram
 MTW P&ID B4496, Rev. 5, Green Salt F-419 & F-443 "A" Top Hydrofluorinator Filters P&ID Diagram (Pre-modification mark-up for RFC#09163169)
 MTW P&ID B4496, Rev. 8, Green Salt F-419 & F-443 "A" Top Hydrofluorinator Filters P&ID Diagram
 MTW P&ID B4500, Rev. 12, Green Salt R-404 "A" Bottom Hydrofluorinator P&ID Diagram
 MTW P&ID B4501, Rev. 4, Green Salt F-424 & F-425 "A" Bottom Hydrofluorinator Filters P&ID Diagram (Pre-modification mark-up for RFC#09163169)
 MTW P&ID B4501, Rev. 8, Green Salt F-424 & F-425 "A" Bottom Hydrofluorinator Filters P&ID Diagram
 MTW P&ID B4508, Rev. 13, Green Salt R-601 "B" Bottom Hydrofluorinator P&ID Diagram
 MTW P&ID B4509, Rev. 4, Green Salt F-608/F-609 "B" Top Hydrofluorinator Filters P&ID Diagram (Pre-modification mark-up for RFC#09163169)
 MTW P&ID B4509, Rev. 9, Green Salt F-608/F-609 "B" Top Hydrofluorinator Filters P&ID Diagram
 MTW P&ID B4510, Rev. 4, Green Salt F-628/F-629 "B" Top Hydrofluorinator Filters P&ID Diagram (Pre-modification mark-up for RFC#09163169)
 MTW P&ID B4510, Rev. 10, Green Salt F-628/F-629 "B" Top Hydrofluorinator Filters P&ID Diagram
 MTW P&ID B4514, Rev. 10, Green Salt R-602 "B" Bottom Hydrofluorinator P&ID Diagram
 MTW P&ID B4515, Rev. 4, Green Salt F-610/F-630 "B" Bottom Hydrofluorinator Filters P&ID Diagram (Pre-modification mark-up for RFC#09163169)
 MTW P&ID B4515, Rev. 7, Green Salt F-610/F-630 "B" Bottom Hydrofluorinator Filters P&ID Diagram
 MTW P&ID B4598, WIP, Distillation E-421 Product Cylinder P&ID Diagram (WIP – Work in Progress drawing for RFC#091661653)

MTW P&ID B4532, Rev. 9, Fluorination R-418 "B" Fluorinator P&ID Diagram
MTW-FRM-TRN-0075, Rev. 1, Training Attendance Record for RFC#091651228,
Completed 02/02/09
MTW-FRM-TRN-0075, Rev. 1, Training Attendance Record for RFC#091661653,
Completed 10/28/09
Incident Report #IR-10-2465, 09/04/2010, 4th floor Green Salt spill
Incident Report #IR-10-2032, 07/14/2010, Point 1-7 on the 1st floor over the limit
Incident Report #IR-10-2530, 09/09/2010, Three heat traces attached to the same circuit
Incident Report #IR-10-2491, 09/06/2010, High Boiler Column pressure transmitter
isolation valve packing leak
Self-Assessment #SA-2009-0023, Performed 08/27/2009, Review of Electronic
Management of Change (EMOC) performance
Audit #AUD-2010-0002, July 26 – Oct 5, 2010, Respiratory Protection
Audit #AUD-2010-0003, Aug 26 – Sep 5, 2010, Restricted Access Area Control
Audit #AUD-2010-0004, Sep 13 – Sep 28, 2010, Change Room Protective Clothing
Audit #AUD-2010-0005, Sep 13 – Sep 30, 2010, Personnel Monitoring / Personnel
Decontamination
Audit #AUD-2010-0006, Oct 1 – Oct 8, 2010, Radioactive Material Instrumentation
MTW-ADM-ISO-0140, Rev. 0, Preparation of Form 741, Bill of Lading (BOL), and
Certificate of Quality Control (CQQ)
MTW-QAM-UF6-0216, Rev. 5, QAM-UF6 Section 16 – UF6 Cylinder Related Yard
MTW-ADM-ISO-0160, Rev. 0, Preparation of Uranium Hexafluoride Shipments
MTW-SOP-UF6C-0217, Rev. 0, UF6 Cylinder Shipping and Receiving Inspection
MTW-CHK-UF6-0001, Rev. 0, Globe Valve Rebuild Checklist
MTW-SOP-FMB-0202, Rev. 0, Heating a UF6 Line
MTW-AOP-F2N-0500, Rev. 9, Fluorination Abnormal Operation
Inspection Agreement for the DCS Room FM-200 Fire Suppression System
MTW-ADM-OPS-0121, Rev. 5, Management of Plant Features and Procedures
MTW-FRM-F2N-0200F (11/02/2010), Fluorination Assistant Operator Checklist Sheet
MTW-SOP-DIS-0100, Rev 10, Distillation Startup (Pre-modification mark-up for
RFC#091661653)
MTW-SOP-DIS-0100, Rev 13, Distillation Startup
MTW P&ID B4596, WIP, Distillation T-402 Still High Boiler System Column P&ID
Diagram
MTW-ADM-PRO-0103, Rev. 13, Development and Implementation of Plant Technical
Procedures
MTW-ADM-PRO-0106, Rev. 2, Periodic Reviews
MTW-ADM-PRO-0120, Rev. 8, Management of Change
MTW-ADM-PRO-0101, Rev. 9, Procedure Use
MTW-ADM-QA-0160, Rev. 2, Performance of Internal Audits, Self-Assessments, and
Inspections
MTW-AOP-DIS-0500, Rev. 4, Distillation Abnormal Operation
MTW-SOP-ENV-0001, Rev. 0, Packaging, Labeling, Marking, and Surveying of
Radioactive Waste Shipments