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May 11, 2011

VIA E-MAIL & CERTIFIED MAIL---
RETURN RECEIPT REQUESTED

Ms. Farrah C. Gaskins
Health Physicist
Division of Nuclear Materials Safety
475 Allendale Road
King of Prussia, PA 19406

29-30984-01
03036785 / 2011001

2011 MAY 12 AM 10:47

RECEIVED
MAY 11 2011

**Re: Conopco Inc. d/b/a Unilever
40 Merritt Blvd., Trumbull, CT
U.S. NRC Inspection**

Dear Ms. Gaskins:

Unilever provides this letter in response to the U.S. NRC inspection that occurred on May 9, 2011 at the above referenced site. We recognize that the inspection results are preliminary, however, we thought it prudent to take immediate actions to address your concerns.

During the closing meeting, you advised that the issues raised during the audit identified two areas of concern. Each issue and the completed follow-up actions are discussed briefly.

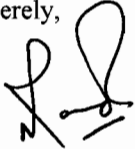
1. You referenced two posted documents were not the most current available.
 - a. "NRC Form 3, Notice to Employees" was not the most current. A 2010 version exists and we should post the most current in English as well as in Spanish. This form was printed and posted in English (Form 3) and in Spanish (Forms 3A) on May 10, 2011. Previous versions were removed.
 - b. NRC Form 374, Materials License, License number 29-30984-01, Expiration date March 31, 2015 was not the most current. The updated License (Amendment 1) was printed and posted on May 10, 2011. Previous version was removed.
2. Documentation of regular safety updates in accordance with Section 20.1101, "Radiation protection programs" could not be produced. At the time of the audit, our RSO, Dennis Quinn produced a document entitled, "Report of Radiological Survey Unilever Research & Development - Trumbull, CT Performed by DAQ, Inc. Survey date: 2-24-2011" and explained that we do review/discuss the program annually at the time of radioisotope user refresher training. Based on your comments, we decided to conduct and

NMSS/RONI MATERIALS-004

document an audit that follows the guidance of NUREG-1556, Volume 7. The audit was conducted by Mr. Quinn on May 10, 2011, and a copy is attached for your information.

We will continue to work with your office to address all concerns. Should you require additional information in regard to this correspondence, please do not hesitate to contact me directly. Unilever remains committed to a safe workplace and a clean environment through sound operating practices.

Sincerely,

A handwritten signature in black ink, appearing to be 'N. P. Randle', written over a horizontal line.

Dr. Neil P. Randle

Enclosure: Audit conducted by Mr. Quinn on May 10, 2011

Cc: D. Quinn - Unilever Trumbull, RSO
P. Gallagher - Unilever Trumbull, VP Skin
L. Taylor - Unilever Trumbull, Safety, Health & Environmental Manager
J. Bajor - Unilever Trumbull, Senior Research Manager
K. Donnelly - Unilever Legal

A copy of this letter also sent to farrah.gaskins@nrc.gov

Results of 2011 Radiation Protection Annual Audit - Unilever Trumbull

Date of Audit: May 10, 2011
Auditor: Dennis Quinn, CHP, DAQ, Inc.
Facility: Unilever Research and Development, Trumbull, CT
Purpose: To audit the facility for compliance with US Nuclear Regulatory Commission materials license 29-30984-01, Amendment 1.

1. Inspection History and General License Administration

- a) Review audits and inspections.
- b) Review any correspondence with the State of Connecticut.
- c) Review and correspondence with the NRC relative to license amendments.

Results of 2011 Audit:

- a. No NRC inspections have taken place in the previous year. Reviews of the operations in the radioisotope labs were performed and documented since January 2011. However, these reviews did not encompass the full extent of the radiation protection program.
- b. The Connecticut Department of Environmental Protection issued a Certificate of Registration to Conopco, Inc., D/B/A Unilever for Radioactive Material and Industrial X-Ray Device Registration. It was issued on 12/23/2010, and expires on 12/31/2011. This was an annual renewal.
- c. Unilever is planning to submit an amendment (No. 2) to the NRC radioactive materials license to expand the approved working space of the radioisotope use area, and to add a different location to store radioactive waste. This amendment request has been prepared but as of the date of this audit, it had not yet been submitted to the NRC.

Recommendation 2011-1: Formally document an annual audit of the radiation protection program.

2. Organization, Scope of Program, and Management Support

- a) Review changes in personnel.
- b) Describe if there are changes in the scope of operations.
- c) Review level of management support for the program

Results of 2011 Audit:

- a. There have been some changes to the individuals using radioisotopes over the past year, but there has been no change in the persons responsible for the radioisotope work. John Bajor and Martha Brown are the supervising individuals for radioisotope work. When new individuals need to use radioactive materials, radiation worker training is performed prior to their use of radioisotopes.
- b. The scope of licensed activities is generally the same as a year ago, and the two primary radioisotopes are tritium (H-3) and Carbon-14 (C-14). There has been no use of Iodine-125 (I-125) since 2009, and there is no planned use of I-125 in the near future.
- c. The level of management support is good. Management is concerned for employee health and insists on compliance with safety protocol.

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3. Training, Retraining and Instructions to Workers

- a) Review training - determine if all users of radioactive material have been trained within the last year.

Results of 2011 Audit:

- a. Personnel working with radioactive materials had received the proper training, and the records of training were available in the file. The individuals currently using radioactive material were verified to have received radiation safety initial training or refresher training, as appropriate.

4. Audits

- a) Determine if annual audits have been performed.
- b) Have recommendations and actions from previous audits been implemented?

Results of 2011 Audit:

- a. Annual audits were not documented. Annual reviews of the program were conducted prior to each training session (generally August of each year), and these reviews were used to emphasize certain aspects of training and documentation. In addition, monthly program reviews were conducted, and they have been documented since January 2011. Recommendation 2011-01 has been listed under Section 1, and recommends documentation of the annual audits.
- b. Corrective actions were taken on an ad hoc basis for the monthly reviews.

5. Facilities and Storage

- a) Review facilities and radioactive material storage locations.
- b) Determine if radioactive materials are controlled from unauthorized persons

Results of 2011 Audit:

- a. Facilities are as per the license.
- b. Accesses to the laboratory areas that use radioisotopes and to the waste room (143) are locked with key card access to authorized individuals.

6. Materials and Inventory

- a) Determine if the radioactive material inventory is documented every 6 months.
- b) Determine that the quantity of radioactive material is within license limits.

Results of 2011 Audit:

- a. The radioactive material inventory was last documented on 3/15/2011.
- b. In the most recent inventory, the quantity of C-14 was 11.5 millicuries (mCi), which is 2.3% of the allowable license limit, and the quantity of tritium was 17.5 mCi which was 1.8% of the allowable license limit.

7. Radiation Surveys and Survey Instrumentation

- a) Verify that there are a sufficient number of appropriate calibrated instruments for the radionuclides in use.
- b) Calibration records must be maintained for 3 years.
- c) Survey records must be maintained for 3 years.

Results of 2011 Audit:

- a. Three Geiger-Mueller pancake detectors (Ludlum Model 44-9) with survey meters

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(Ludlum Model 3) were available and calibrated. Calibration for one of the meters was due in July, and the other two meters were due in January 2012.

- b. The calibration records were available.
- c. Survey records were available onsite for at least May 2008 through current (May 2011). While the survey records were available, they were kept in the laboratory and not in the radiation protection file cabinet.

Recommendation 2011-2: Relocate surveys for all but the current year to the radiation protection file cabinet.

8. Leak Tests

- a) Determine if there are any sources that require leak testing, and if so, verify that all sealed sources have been tested for leakage as per their prescribed frequency. Records of results should be maintained.

Results of 2011 Audit:

- a. There are no sealed sources that require leak testing.

9. Receipt and Transfer of Radioactive Materials

- a) Review documentation of incoming shipments of radioactive material.

Results of 2011 Audit:

- a. Five surveys of incoming radioactive material shipments were reviewed that covered the time period from 3/11 to 4/27/2011. The surveys were well documented and indicated no contamination problems.

10. Transportation

- a) Review documentation of outgoing radioactive material shipments

Results of 2011 Audit:

- a. Two radioactive waste shipments were sent out in the last 12 months, one in October 2010 and one in January 2011. Information from both shipments was filed onsite in the office of the Site Safety Health and Environmental Manager. The shipment paperwork was reviewed and found to be acceptable.

Recommendation 2011-3: Provide a copy of the waste shipment documents over the previous 3 years to be placed in the radiation protection file cabinet.

11. Personal Radiation Protection

- a) Review the determination that unmonitored personnel are not likely to receive more than 10% of the applicable limits. This applies to external dose and internal dose.
- b) Review personnel monitoring records.
- c) If any worker declared her pregnancy in writing, evaluate compliance with 10CFR 20.1208.

Results of 2011 Audit:

- a. All surveys indicate very low levels of contamination and external radiation. This review supports the premise that personnel are not likely to receive more than 10% of the applicable dose limits, considering both internal and external sources.

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- b. No personnel have radiation dosimeters for the purpose of the NRC licensed program. Some individuals have personnel dosimetry for working with x-rays. The dosimetry results were reviewed, and no unusual results were found. In addition, the control badges were properly used.
- c. No individuals made a declaration of pregnancy for purposes of the radiation safety program in the last 12 months.

12. Posting and Labeling

- a) Perform field walkdown of posting and labeling.
- b) Evaluate NRC Form 3, license posting, and other required postings.
- c) Evaluate that posting of entries to laboratories using radioactive material are properly posted.

Results of 2011 Audit:

- a. A walkdown was performed.
- b. The NRC Form 3 was not the latest version, and the license posted was not the most current amendment. These two items were identified by the NRC during an inspection. By the time this audit was concluded, the NRC Form 3 and the current license amendment were posted.
- c. All labs had the appropriate signage on the doors, "Caution, Radioactive Material". In addition, radioactive sources in the laboratories were properly labeled.

Recommendation 2011-4: Add a posting review to the monthly walkthrough review to ensure that these documents remain current.

13. Record Keeping for Decommissioning

- a) Ensure there is a 10 CFR 30.35(g) file containing decommissioning information
- b) RSO should have access to financial assurance documents for decommissioning

Results of 2011 Audit:

- a. There is information available through the RSO and the Site Safety Health and Environmental Manager that contains information relating to release of an area previously included on the radioactive material license (hazardous waste shed).
- b. The RSO has a copy of the financial assurance documents; however, they are not maintained in the radiation protection file cabinet. These documents should be maintained onsite in the radiation protection file and a copy maintained by the office of the Site Operations Director.

Recommendation 2011-5: Create a file for Decommissioning and maintain it with appropriate information as required by 10 CFR 30.35 (g) in the radiation protection file cabinet.

Recommendation 2011-6: Ensure that copies of the financial assurance documents are maintained in both the radiation protection file cabinet and in the office of the Site Operations Director.

14. Radioactive Waste

- a) Determine if waste is being minimized
- b) Evaluate if waste is properly stored and controlled

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Results of 2011 Audit:

- a. A review of radioactive waste in the radioisotope labs was performed. In general, waste was being properly segregated, but there were examples of poor segregation of waste, possibly leading to much more expensive disposal costs than necessary. For example, there was dry active waste mixed with plates containing liquid. This mixture results in surcharges for separation of waste streams.
- b. With the exception of some improper segregation of wastes as described above, the waste is being properly stored and controlled. Drums are being moved out of the radioisotope area and into the waste room (143) when full.

Recommendation 2011-7: Reinstruct the radioisotope users in proper waste segregation, and evaluate this during each monthly review.

Summary of Recommendations:

Recommendation 2011-1: Formally document an annual audit of the radiation protection program.

Recommendation 2011-2: Relocate surveys for all but the current year to the radiation protection file cabinet.

Recommendation 2011-3: Provide a copy of the waste shipment documents over the previous 3 years to be placed in the radiation protection file cabinet.

Recommendation 2011-4: Add a posting review to the monthly walkthrough review to ensure that these documents remain current.

Recommendation 2011-5: Create a file for Decommissioning and maintain it with appropriate information as required by 10 CFR 30.35 (g) in the radiation protection file cabinet.

Recommendation 2011-6: Ensure that copies of the financial assurance documents are maintained in both the radiation protection file cabinet and in the office of the Site Operation Director.

Recommendation 2011-7: Reinstruct the radioisotope users in proper waste segregation, and evaluate this during each monthly review.