



CONVERSATION RECORD

08/15/2013

NAME OF PERSON(S) CONTACTED OR IN CONTACT WITH YOU Alicia Weaver		DATE OF CONTACT 08/15/2013	TYPE OF CONVERSATION <input type="checkbox"/> E-MAIL <input checked="" type="checkbox"/> TELEPHONE <input type="checkbox"/> INCOMING <input checked="" type="checkbox"/> OUTGOING
E-MAIL ADDRESS alicia.weaver@mdc.mo.gov		TELEPHONE NUMBER 573-522-41	

ORGANIZATION Missouri Department of Conservation	DOCKET NUMBER(S) 030-18214
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LICENSE NUMBER(S) 24-20298-01	CONTROL NUMBER(S) 581546
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SUBJECT
Addition information requested.

SUMMARY

In your request, you have indicated that the RSO on you license is no longer employed by you and will need to be changed. Please note that you will not be able to change and name your RSO internally; NRC must do that for you via the amendment process.

1. Please provide the name and qualifications of your proposed RSO. Each proposed RSO must be qualified in accordance with the guidance in NUREG 1556, Vol. 4 Section 8.7, Item 7: Individual(s) Responsible for Radiation Safety Program and Their Training and Experience.
2. Please provide a written signed (by both senior management and the proposed RSO) and a currently dated statement that stipulates your proposed RSO accepts the RSO position and understands the duties and responsibilities associated with the position. A sample Delegation of Authority memo is attached to this document in Attachment 1.

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ACTION REQUIRED (IF ANY)

Action Required:
Submit the requested information within 14 calendar days (by August 29, 2013) by referencing control number 581546 to facilitate proper handling in our office. Please contact me if you need to make alternative response arrangements.

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

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NAME OF PERSON DOCUMENTING CONVERSATION
Jennifer L. Bishop

SIGNATURE

Attachment 1

Model Delegation of Authority:

Memo To: Radiation Safety Officer
From: Chief Executive Officer
Subject: Delegation of Authority

You, _____, have been appointed Radiation Safety Officer and are responsible for ensuring the safe use of radiation. You are responsible for managing the Radiation Protection Program; identifying radiation protection problems; initiating, recommending, or providing corrective actions; verifying implementation of corrective actions; stopping unsafe activities; and ensuring compliance with regulations. You are hereby delegated the authority necessary to meet those responsibilities, including prohibiting the use of byproduct material by employees who do not meet the necessary requirements and shutting down operations where justified to maintain radiation safety: You are required to notify management if staff does not cooperate and does not address radiation safety issues. In addition, you are free to raise issues with the Nuclear Regulatory Commission at any time. It is estimated that you will spend ___ hours per week conducting radiation protection activities.

Signature of Management Representative Date

I accept the above responsibilities,

Signature of Radiation Safety Officer Date

cc: Affected department heads