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April 21, 2017

U.S. Nuclear Regulatory Commission  
Attn: Document Control Desk  
Chief, Construction Mechanical Vendor Branch  
Division of Construction Inspection and Operational Programs  
Office of New Reactors  
Washington, DC 20555-0001

**SUBJECT:** REPLY TO U.S. NUCLEAR REGULATORY COMMISSION INSPECTION REPORT OF CHICAGO BRIDGE & IRON NO. 99901432/2017-201, AND NOTICE OF VIOLATION AND NOTICE OF NONCONFORMANCE

**REFERENCE:** LETTER FROM JOHN BURKE (NRC) TO JAMES M. ROSSIGNOL (CB&I LAURENS), U.S. NUCLEAR REGULATORY COMMISSION INSPECTION REPORT NO. 99901432/2017-201 AND NOTICE OF NONCONFORMANCE, DATED MARCH 30, 2017.

Dear Mr. Burke,

In response to the referenced NRC Notice of Violation (NOV) and Notice of Nonformance (NON), CB&I Laurens herewith provides the enclosed reply (enclosure). The reply addresses: NOV and NONs of the Notice as they relate to 10CFR Part 21, Criterion 1 (Organization), Criterion 5 (Instructions, Procedures and Drawings), , Criterion 9 (Control of Special Processes), Criterion 10 (Inspection), Criterion 13 (Handling, Storage and Shipping) and Section 16 (Corrective Action Report).

Pursuant to the NRCs corresponding instructions specified in the Notice, the enclosure addresses for the NOV and each of the NONs: 1) the reason for the noncompliance; 2) the corrective steps that have been taken and the results achieved; 3) the corrective steps that will be taken to avoid future noncompliance; and 4) the date when the corrective actions will be completed.

CB&I Laurens understands the feedback received from the NRC during the inspection and in the published inspection report. The feedback received is taken seriously and it is recognized that attention to this is necessary. Corrective actions have either been completed or initiated to remedy the specific findings provided to avoid further noncompliance.

Notice of Violation (NOV) 99901432-2017-201-01 and Notice of Nonconformance (NON) 99901432-2017-201-02 responses will not be included in this reply as extension has been

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requested through extension request to the NRC on April 12, 2017. This extension has been requested an additional 90 days to perform needed inspections of delivered items and Root Cause Analysis of the Nonconformance related to Criterion 1 (Organization).

Should you have any questions regarding this submittal, please contact Matt Rossignol, Quality Manager, at (864) 683-3986.

Sincerely,

A handwritten signature in cursive script that reads 'Matt Rossignol'.

Matt Rossignol  
Quality Manager  
CB&I Laurens

Enclosure:



## Attachment 1

### Reply to Notice of Violation 99901432-2017-201-01

During a U.S. Nuclear Regulatory Commission (NRC) inspection conducted at the Chicago Bridge & Iron (hereafter referred to as CB&I Laurens) facility in Laurens, SC, from January 23, 2017, through January 27, 2017, a violation of NRC requirements was identified. In accordance with the NRC Enforcement Policy, the violation is listed below:

Title 10 of the *Code of Federal Regulations* (10 CFR) Part 21.21, "Notification of failure to comply or existence of a defect and its evaluation," Section (a)(1) requires "Each individual, corporation, partnership, dedicating entity, or other entity subject to the regulations in this part shall adopt appropriate procedures to evaluate deviations and failures to comply to identify defects and failures to comply associated with substantial safety hazards as soon as practicable, and, except as provided in paragraph (a)(2) of this section, in all cases within 60 days of discovery, in order to identify a reportable defect or failure to comply that could create a substantial safety hazard, were it to remain uncorrected."

Section 3.2 of CB&I Laurens' procedure BFS-QC-10CFR21, "Procedure for Compliance with 10CFR21/10CFR50.55 (e)," Revision 5, dated April 2, 2015, states, in part, that "If the QA Manager is unable to confirm that the deviation or failure to comply had been previously reported, he shall initiate a 10 CFR Part 21/10 CFR 50.55 (e) Evaluation Form (Exhibit C). The QA Manager shall forward a copy of the 10 CFR Part 21/10 CFR 50.55 (e) Evaluation Form to the General Manager and Project Manager and advise them that an evaluation will be conducted by CB&I Laurens or if it is determined that CB&I Laurens is not able to perform the evaluation, initiate action to notify the Purchaser to perform an evaluation of the deviation or failure to comply. The QA Manager shall complete the evaluation or obtain the evaluation results from the Purchaser."

Contrary to the above, as of January 27, 2017, CB&I Laurens failed to adequately evaluate a deviation potentially associated with a substantial safety hazard in accordance with 10 CFR 21.21(a)(1). Specifically, corrective/preventive action report No. 584 states, in part, that "The Quality Control Manager made a determination that certain UT [ultrasonic testing] documents were completed outside of the expectations of the procedure. A senior CBIL [Chicago Bridge and Iron Laurens] QC [Quality Control] Specialist was suspended pending ERB [Employee Review Board] action for falsification of UT Test records." CB&I Laurens proceeded to perform an investigation and determined that a Senior Quality Control (QC) Specialist had falsified ultrasonic testing (UT) test records. Rather than performing a new Part 21 evaluation, CB&I Laurens took credit for a Part 21 evaluation that was previously performed as part of a root cause analysis to determine if there was widespread falsification of records at CB&I Laurens. However, the root cause analysis did not specifically evaluate whether the falsification of UT test records could create a substantial safety hazard on any piping spools that had been delivered.



### **Reason for Violation**

A Corrective Action Report (CAR) 584 was initiated when this issue was originally brought to light back in March 2015. It is believed that an investigation was conducted at that time including a Part 21 analysis and extent of condition. Upon review of CAR 584 by the NRC it was discovered that the Part 21 analysis and other related analysis for this CAR were not included in the records. The records could not be located during the NRC inspection. It is not known at this time what occurred to cause these records to be unavailable.

### **Corrective actions taken**

Corrective Action Report CAR-2017-048 has been initiated to document the actions that should have been included in CAR 584. Along with this, an Interim Report was submitted to the NRC on April 10, 2017, to address the evaluation not being completed within the 60 day period.

The extent of condition that was determined for potentially affected delivered spools is 100 total, and the list of potentially affected spools has been provided to the purchaser to begin coordination of needed inspections to support evaluation for reportability.

### **Corrective actions that will be taken**

Ultrasonic Testing (UT) Thickness inspection of delivered spools is planned to be performed, along with any other actions determined through the evaluation of the violation. Extension has been requested as of April 12, 2017 for an additional 90 days to complete the inspections, analyses and evaluation.

### **Date when full compliance will be achieved**

Full compliance will be achieved when the evaluation of the identified conditions is completed. This is currently expected to occur by July 28, 2017



## Attachment 2

### Reply to Notice of Nonconformance 99901432/2017-201-02

Based on the results of a U.S. Nuclear Regulatory Commission (NRC) inspection conducted at the Chicago Bridge & Iron (hereafter referred to as CB&I Laurens) facility in Laurens, SC, from January 23, 2017, through January 27, 2017, it appears that CB&I Laurens did not conduct certain activities in accordance with NRC requirements that were contractually imposed upon CB&I Laurens by its customers or NRC licensees:

Criterion I, "Organization," of Appendix B, "Quality Assurance Program Criteria for Nuclear Power Plants and Fuel Reprocessing Plants," to Title 10 of the *Code of Federal Regulations* (10 CFR) Part 50, "Domestic Licensing of Production and Utilization Facilities," states, in part, that "The quality assurance functions are those of (1) assuring that an appropriate quality assurance program is established and effectively executed; and (2) verifying, such as by checking, auditing, and inspecting, that activities affecting the safety-related functions have been correctly performed."

Section 4.2.1 of CBIL-QAM-001 states, in part, that "The Plant Manager of CBIL is responsible for the establishment of the facilities for and overall operation of CBIL including but not limited to buildings, workspace, utilities, process equipment, and transport services." In addition, Section 4.2.9 states, in part, that the "Quality Assurance Manager is responsible for the administration and implementation of the Quality functions as described in this Manual, and reporting regularly to the Plant Manager on the effectiveness of the QA Program."

Contrary to the above, as of January 27, 2017, CB&I Laurens failed to ensure that portions of the quality assurance program were effectively executed, and failed to verify that activities affecting safety-related functions have been correctly performed. Specifically, CB&I Laurens failed to take timely and effective corrective actions to address several conditions adverse to quality and failed to adequately perform fabrication activities identified during the inspection. This included the implementation of quality activities in accordance with approved procedures and the oversight of suppliers. CB&I Laurens implemented a stop work order in March 2015 pending an evaluation of programmatic deficiencies and 10 CFR Part 21, "Reporting Defects and Noncompliance," issues, however, the findings described below demonstrate that CB&I Laurens is still not implementing an adequate quality assurance program in accordance with the requirements of Appendix B to 10 CFR Part 50.



### **Reason for Noncompliance**

The reason for this noncompliance will be determined through Root Cause Analysis (RCA) and documented in CB&I Laurens corrective action report CAR-2017-061. An extension of the due date for this response has been requested in accordance with the instructions in the NRC letter. The requested due date is July 28, 2017.

### **Corrective actions taken**

CB&I Laurens issued CAR-2017-061 to address this issue.

### **Corrective actions that will be taken**

It is planned that a Root Cause Analysis (RCA) will be performed by personnel external to CB&I Laurens, and any subsequent actions will be determined through review of the results of the RCA. This RCA is also intended to be sufficiently comprehensive to facilitate determining the reasons for the procedural adherence issues identified by the NRC and also identification of planned actions for those issues.

### **Date when full compliance will be achieved**

It is expected that the RCA will be completed by July 28, 2017. Additional actions will be identified at that time.



### **Attachment 3**

#### **Reply to Notice of Nonconformance 99901432/2017-201-03**

Criterion IX, "Control of Special Processes," of Appendix B to 10 CFR Part 50 states that "Measures shall be established to assure that special processes, including welding, heat treating, and nondestructive testing, are controlled and accomplished by qualified personnel using qualified procedures in accordance with applicable codes, standards, specifications, criteria, and other special requirements."

Section 2.3.5 of CB&I Laurens' Procedure BFS-NWC-1 AD, "Nuclear Welding Material Control AP1000 Addendum," Revision 2, dated April 14, 2016, states that "Welding materials with different heat numbers shall be kept separated." In addition, Section 2.3.3 states that "This [nuclear filler metal storage] area shall be controlled by the Tool Room Attendant." Furthermore, Section 2.3.12 states that "The Bay Foreman is responsible for the recording of the heat/lot number of the welding materials used for a specific weld joint in the applicable spaces on the shop traveler."

Contrary to the above, as of January 27, 2017, CB&I Laurens failed to assure that special processes were controlled and accomplished using qualified procedures in accordance with specifications and acceptance criteria. Specifically, while witnessing a welder preparing for a welding job, the NRC inspection team noted that the Tool Room Attendant allowed the welder to take out his own filler metal and did not verify the heat numbers and amount of filler metal removed from the storage area. In addition, both the filler metal storage area and the welder's filler metal holder had different heats of filler metal that were not separated as required by BFS-NWC-1 AD. When asked for the requirements for the issuance of the filler metal, the Tool Room Attendant was not aware of the specific requirements and did not have immediate access to BFS-NWC-1 AD. Filler metal control is required to assure that each heat of material is documented in the associated traveler and that the correct filler material is used.



### **Reason for Noncompliance**

The reason for this noncompliance was a human performance issue, failure to follow procedure.

### **Corrective actions taken**

CB&I Laurens issued a corrective action report (CAR-2017-026) to address this issue at the time the issue was identified by the NRC Inspectors on January 25, 2017.

A stand-down was conducted the day after the issue was identified to be sure all welders and rod storage attendants were aware of the problem and trained on what was done incorrectly and how the distribution of nuclear weld material should have been conducted in accordance with procedural requirements.

Access to the storage area has been restricted during the process of rod distribution and postings identifying qualified individuals to distribute weld filler have been applied at filler material issuance entrances. Subsequent measures included reconfiguring the trays used for storing returned weld filler stubs to ensure they cannot be inadvertently mixed along with issuance of multiple rod holders to welders to ensure that heat number segregation is maintained when more than one size of filler material is issued.

It should be noted that although procedural requirements were not met, material traceability was not brought into question due to all filler material in the storage area being acceptable safety related material. All filler material in the storage area consisted of one heat per size, all of which being acceptable for use in welding.

Weld rod storage, issuance and control has been added to the CB&I Laurens surveillance schedule to be surveilled at a monthly interval.

### **Corrective actions that will be taken**

Additionally, the issue of procedural adherence will be addressed within the RCA for CAR-2017-061.

### **Date when full compliance will be achieved**

Full compliance was achieved on April 15, 2017, after completion of actions to correct the conditions and causes associated with CAR-2017-026.





## Attachment 4

### Reply to Notice of Nonconformance 99901432/2017-201-04

Criterion X, "Inspection," of Appendix B to 10 CFR Part 50, states, in part, that "A program for inspection of activities affecting quality shall be established and executed by or for the organization performing the activity to verify conformance with the documented instructions, procedures, and drawings for accomplishing the activity. Examinations, measurements, or tests of material or products processed shall be performed for each work operation where necessary to assure quality. If inspection of processed material or products is impossible or disadvantageous, indirect control by monitoring processing methods, equipment, and personnel shall be provided."

Section 6.0 of CB&I Lauren's procedure SP-VT-1, "Examination (Inspection)," Revision 3, dated January 19, 2011, states that "Tools utilized for visual examination shall be, but not limited to tape measure, square, fillet gauges, high low gauges, depth gages, machinist rule, etc." In addition, Section 7.0, "Examination of Fit-up," states the following should be verified:

- 7.2 Proper root gap prior to welding. (Ref. Shaw WPS GEN)
- 7.3 Tolerable mismatch of adjoining parts to be welded. (Ref. Shaw WPS GEN)
- 7.4 Proper angular alignment of mating parts. (Ref. Shaw WPS GEN)."

CB&I Laurens Job Instruction BFS-J1-1, "General Fabrication Procedure," Revision 11, dated July 8, 2016, specifies a root gap of 5/32 inches for manual welding and 3/32 inches for mechanized welding. Westinghouse Electric Company's (WEC) design specification APP-GW-007, "AP1000 Specification for Shop Fabricated Piping," Revision 7, references drawing No. APP-GW-VFY-001, Revision 5, which states, in part, that "the maximum offset shall be 3/32 inches at one point on the weld joint."

Contrary to the above, as of January 27, 2016, CB&I Laurens failed to inspect the fit-up of weld No. 10 on piping spool SV4-RCS-PLW-03D for Vogtle Electric Generating Plant (VEGP) Unit 4 in accordance with the documented instructions to assure quality. Specifically, the QC inspector did not verify that the dimension of the root gap and inside diameter offset/misalignment were within the drawing specifications using the appropriate measuring device or gauge. Instead, the QC inspector relied on visual estimation based on experience only to determine if the required dimensions were met, and signed the fit-up inspections on the traveler as meeting the requirements of BFS-J1-1. By not properly inspecting the fit-up of the weld utilizing the required measuring devices or gauges, the weld is of indeterminate quality and may result in a welder and/or a weld procedure not being properly qualified for those specific fit-up dimensions.



### **Reason for Noncompliance**

The reason for this noncompliance was a human performance issue, failure to follow procedure.

### **Corrective actions taken**

CB&I Laurens issued a corrective action report (CAR-2017-027) to address at the time the issue was identified by the NRC Inspectors. The fit up in question was also re-inspected by the inspector and was verified to be acceptable with proper tools. A nonconformance report (NCR 17-372) was generated with a radiograph of the weld in question. The weld was found to be acceptable. Along with these actions, a stand down was performed with all VT inspectors to re-iterate procedural requirements, specific re-training on expectations and usage of inspection gauges and to discuss the event that occurred during the NRC inspection. All inspectors were also verified to have proper gauges and that they have been documented as issued and in their control.

### **Corrective actions that will be taken**

Additionally, the lack of procedural adherence will be addressed within the overarching RCA for CAR-2017-061.

### **Date when full compliance will be achieved**

Full compliance was achieved on April 12, 2017, after completion of actions to correct the conditions and causes associated with CAR-2017-027.



## **Attachment 5**

### **Reply to Notice of Nonconformance 99901432/2017-201-05**

Criterion XIII, "Handling, Storage and Shipping," of Appendix B to 10 CFR Part 50, states that "Measures shall be established to control the handling, storage, shipping, cleaning and preservation of material and equipment in accordance with work and inspection instructions to prevent damage or deterioration. When necessary for particular products, special protective environments, such as inert gas atmosphere, specific moisture content levels, and temperature levels, shall be specified and provided."

Section 2.1.4, "Protecting Final Surfaces," of WEC Technical Specification No. APP-GW-Z0-602, "Cleaning and Cleanliness Requirements for Equipment for Use in Nuclear Supply and Associated Systems," Revision 3, dated February 18, 2013, states, in part, that "Final surfaces shall be protected with foreign material exclusion (FME) barriers during all processing." In addition, Section 3.9.1, "Protection of Final Cleaned Surfaces/Installed Components," states that "Temporary plugs shall be installed in component openings."

Contrary to the above, as of January 27, 2016, CB&I Laurens failed to control the storage, cleaning and preservation of material and equipment in accordance with work and inspection instructions to prevent damage or deterioration. Specifically, CB&I Laurens did not maintain cleanliness of numerous piping spools, including valves that have inaccessible areas, by not installing end cap plugs after final cleaning. The final cleaned piping spools were in an area that had no personnel, the building doors were open with wind blowing dirt into the building, and was observed to be in this condition for at least two days. Loss of cleanliness can affect the components ability to resist degradation and affect the maintenance of the plant chemistry in the safety related systems.



### **Reason for Noncompliance**

The reason for noncompliance is due to inadequate procedural guidance to address capping. The procedure and Job Instructions (JI) only addressed capping prior to shipping after final cleaning inspection was performed.

### **Corrective actions taken**

CB&I Laurens issued a corrective action report (CAR-2017-062) to address this issue in further detail. The procedure in question has been revised to ensure capping is performed immediately after cleaning and the material is maintained with caps installed. Immediate training of cleaning/coating personnel and QC also performed to new requirements and to ensure that they are aware that capping is to be established and maintained immediately after final cleaning.

Completed spool capping has been added to the CB&I Laurens surveillance schedule to be surveilled at a monthly interval.

### **Corrective actions that will be taken**

The remaining cleaning procedures are to be revised to ensure capping is being performed immediately after cleaning.

### **Date when full compliance will be achieved**

It is expected that full compliance will be achieved by May 31, 2017, when the remaining procedure revisions are completed.



## Attachment 6

### Reply to Notice of Nonconformance 99901432/2017-201-06

Criterion V, "Instructions, Procedures, and Drawings," of Appendix B to 10 CFR Part 50, states that "Activities affecting quality shall be prescribed by documented instructions, procedures, or drawings, of a type appropriate to the circumstances and shall be accomplished in accordance with these instructions, procedures, or drawings. Instructions, procedures, or drawings shall include appropriate quantitative or qualitative acceptance criteria for determining that important activities have been satisfactorily accomplished.

Section 2.3.12 of CB&I Lauren's Procedure BFS-NWC-1 AD, states that "The Bay Foreman is responsible for the recording of the heat/lot number of the welding materials used for a specific weld joint in the applicable spaces on the shop traveler."

In addition, Section 8.4.9.4 of CB&I Laurens Quality Assurance Manual CBIL-QAM-001, Revision 25, dated April 19, 2016, states that "The welder shall record their identification symbol, WPS [weld procedure specification] number and revision number, filler metal heat number, and date in the applicable spaces on the shop traveler."

Contrary to the above, as of January 27, 2016, CB&I Laurens failed to assure procedures had appropriate acceptance criteria to accomplish activities and had been implemented by trade personnel. Specifically, a welder did not document the required information in the shop traveler while welding on piping spool No. SV4-RCS-PLW-03B for VEGP Unit 4 on both current and previous work. The information the welder failed to record as required by procedure BFS-NWC-1 included the welder identification, filler metal heat number and weld procedure specification used. The welder and shop foreman noted that he was required to record this information on the traveler for current and past dates. Not recording the required information may lead to lack of traceability of the material used (i.e., different filler metal or heat numbers).



### **Reason for Noncompliance**

The reason for this noncompliance was due to inadequate procedural guidance. The Quality Assurance Manual (QAM) provides direction to perform logging when weld was complete although the QAM did not address situations in which more than one day or shift would be needed to complete a weld joint.

### **Corrective actions taken**

CB&I Laurens issued a corrective action report (CAR-2017-025) to address the issue at the time the issue was identified by the NRC Inspectors. Immediate actions also included the creation of procedure guidance to define shop traveler implementation, immediate training with shop personnel to address logging of daily activities through the use of continuation sheets to the shop traveler weld logging data. Additionally, surveillance of logging activities was performed in the shop following the implementation of the immediate actions to gauge the effectiveness of these actions.

This issue does not bring any welding performed into question, but does identify the need to improve and maintain status of work performed on the shop traveler.

### **Corrective actions that will be taken**

Issuance of a newly created procedure and the training of applicable personnel.

Update surveillance schedule to perform surveillance of weld logging activities to ensure issue is corrected.

### **Date when full compliance will be achieved**

It is expected that full compliance will be achieved when the issuance of the procedure and the training are complete. This is planned to be completed by April 28, 2017.



## Attachment 7

### Reply to Notice of Nonconformance 99901432/2017-201-08

Criterion XVI, "Corrective Action," of Appendix B to 10 CFR Part 50, states, in part, that "Measures shall be established to assure that conditions adverse to quality, such as failures, malfunctions, deficiencies, deviations, defective material and equipment, and nonconformance's are promptly identified and corrected."

Section 16.2.8.1 of CBIL-QAM-001 states that "The implementation of corrective action for significant conditions adverse to quality shall be verified and shall be assessed to determine its effectiveness." In addition, Section 16.2.8.3 states that "After verification of completion of corrective action, follow-up reviews, surveillance, or auditing shall be performed to determine whether actions taken have been and continue to be effective. When corrective actions have not been effective, further analysis shall be performed to identify and correct the cause. In addition, the problem shall receive escalated management attention."

Contrary to the above, as of January 27, 2017, CB&I Laurens failed to correct conditions adverse to quality. Specifically, CB&I Laurens closed its corrective/preventive action requests (C/PARs) Nos. 533 and 534 without adequately implementing the corrective actions to address Notice of Nonconformance (NON) 99901432/2015-201-03 from the 2015 NRC Inspection Report No. 99901432/2015-201. In response to NON 99901432/2015-201-03, CB&I Laurens initiated C/PARs Nos. 533 and 534 to address their failure to establish adequate measures for source evaluation and selection of contractors and subcontractors as demonstrated through the following examples:

1. The corrective actions implemented by CB&I Laurens for the evaluation and selection of the commercial services provided by Wyman Gordon Pipe and Fittings(WGPF) for the procurement of piping included CB&I Laurens qualifying WGPF to work under CB&I Laurens' quality assurance program. The NRC inspection team noted that WGPF procured the calibration services of their measuring and test equipment (M&TE) from a commercial sub-supplier. However, CB&I Laurens did not perform any additional oversight activities that would provide reasonable assurance that the M&TE was adequately controlled, calibrated, and adjusted at specified periods to maintain accuracy within necessary limits.
2. The corrective actions implemented by CB&I Laurens for the evaluation and selection of the commercial services provided Pinson Valley Heat Treating (PVHT) for the procurement of heat treating services included performing a commercial-grade survey as part of CB&I Laurens' commercial-grade dedication of PVHT, however, CB&I Laurens did not verify that certain critical characteristics identified in the technical evaluation for calibration services were adequately controlled. CB&I Laurens' commercial-grade survey of PVHT did not verify that they had imposed and verified the necessary controls on their commercial sub-suppliers for the calibration of PVHT's M&TE. CB&I Laurens did not perform any additional verification or acceptance activities to ensure that the identified critical characteristics were adequately controlled and the components would perform their intended safety function.



### **Reason for Noncompliance**

The cause of this issue was an improper implementation of the commercial grade dedication process in that the correlation between the criticality of the operation was adequately considered in preparation of the critical characteristics.

### **Corrective actions taken**

CB&I Laurens issued a corrective action report (CAR-2017-031) to address the issue at the time that the issue was identified by the NRC. An immediate review was conducted to identify all service suppliers that may be using sub-supplied services with no other suppliers identified.

### **Corrective actions that will be taken**

Calibration services being used by the two noted suppliers will be procured by CB&I Laurens through the use of qualified suppliers to ensure that the proper flow down of safety related requirements is achieved.

Training and guidance will be provided to those individuals who select and qualify commercially dedicated services to ensure future compliance. It should be noted that there are only two personnel now involved in dedication activities, supported by review and approval by client for dedication plans. Also, no further commercial suppliers or services are anticipated for the remaining scope of the project.

### **Date when full compliance will be achieved**

It is expected that full compliance will be achieved by June 15, 2017.





**Attachment 8**

**Reply to Unresolved Issue 99901432/2017-201-07**

CB&I Laurens opened CAR-2017-029 to document any issues in regards to previously closed corrective action (C/PAR) 570.