NRC FORM 591M PART 1 (07-2012)*					U.S. NUCLEAR REGULATORY COMMISSION			
10 CFR 2.201 SAI	FETY INS	PECTION REPORT	AND COM	IPLIANCE IN	SPECTION			
1. LICENSEE/LOCATION INSPECT	2. NRC/REGIONAL OFFICE							
AECOM Technical Services, Inc. 625 West Ridge Pike, Suite E-100			U.S. Nuclear Regulatory Commission					
Conshohocken, PA 19428			Region I, 2100 Renaissance Blvd, Suite 100					
REPORT NUMBER(S) 2017-001			King of Prussia, Pennsylvania 19406-2713					
3. DOCKET NUMBER(S)		4. LICENSE NUMBER(S)			5. DATE(S) OF INSPECTION			
030-19048		37-19654-01			Mus	1, 201)		
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.								
<ol> <li>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.</li> </ol>								
Non-cited violation(s) were discussed involving the following requirement(s) and corrective action(s):								
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4. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being								
cited in accordance with the NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11. (Violations and Corrective Actions)								
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Statement of Corrective Actions								
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				Bat	2 11111	) -/0/	/. ¬	
	Betsy U	Ilrich, Sr Health Ph	ysicist	700	7 my	3/9/	//	
BRANCH CHIEF	Blake W	elling		Bloke	hdl	5/18/	17	
*NRC FORM 591M PART 1 (07-2012) (RI Rev. 09/12/2013) G:\WordDocs\Current\Insp Record\R37-19654-01.2017-001.591M-Part1.doc								
SUNSI Review Completed By: /RA / Betsy Ullrich x Public x Non-Sensitive								