

DMB

SAFETY INSPECTION

1. LICENSEE

Day and Zimmerman, Inc.  
Kansas Division  
Kansas Army Ammunition Plant  
Parsons, Kansas 67357

2. REGIONAL OFFICE

U.S. Nuclear Regulatory Commission  
Region IV  
611 Ryan Plaza Drive  
Arlington, Texas 76011

3. DOCKET NUMBER(S)

040-08483

4. LICENSE NUMBER(S)

SUB-1283

5. DATE OF INSPECTION

11 January 1983

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's (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 findings as a result of this inspection are as follows:

- 1. Within the scope of this inspection, no violations were observed.
- 2. The inspector also verified the steps you have taken to correct the violations identified during the last inspection. We have no further questions on those actions at this time.
- 3. During this inspection certain of your activities, as checked below, were in violation of NRC requirements.  
**THIS IS A NOTICE OF VIOLATION** which is required to be posted in accordance with 10 CFR 19.11.
  - A. \_\_\_\_\_ was not properly posted to indicate the presence of a \_\_\_\_\_ 10 CFR 20.203(b), (c), (d), (e) or 34.42.
  - B. Containers located in \_\_\_\_\_ were not properly labeled to indicate the presence of radioactive material. 10 CFR 20.203(f)(1), or (f)(2).
  - C. \_\_\_\_\_ of sealed sources were not performed at the proper frequencies. 10 CFR \_\_\_\_\_ License Condition Number \_\_\_\_\_
  - D. Records of \_\_\_\_\_ were not properly maintained. 10 CFR \_\_\_\_\_ or License Condition Number \_\_\_\_\_
  - E. Documents were not properly posted or otherwise made available. 10 CFR 19.11.
  - F. Reports or notifications of \_\_\_\_\_ were not made in accordance with 10 CFR \_\_\_\_\_ or License Condition Number \_\_\_\_\_
  - H. \_\_\_\_\_
  - I. \_\_\_\_\_
  - J. \_\_\_\_\_
  - K. \_\_\_\_\_

I hereby state that within 30 days the actions described by me to the inspector will be taken to correct the violations identified in the items checked above. This statement of corrective actions is made in accordance with the requirements of 10 CFR 2.201. No further response will be submitted unless required by the NRC.

8302150579 830120  
PDR ADOCK 04008483  
C PDR

	<i>D.B. Spitzberg</i> D.B. Spitzberg Radiation Specialist SIGNATURE - NRC INSPECTOR	1/20/83 DATE
DATE		DATE

ORIGINAL TO LICENSEE

FEB 08 1983

License: SUB-1283

Day and Zimmerman, Inc.  
Kansas Division  
ATTN: Carl Wilson, Plant Manager  
Kansas Army Ammunition Plant  
Parsons, Kansas 67357

Gentlemen:

Enclosed for your records is Form NRC-591, "Safety Inspection." Please note that no violations were observed during the January 11, 1983, inspection of your NRC Source Material License SUB-1283.

Please call if you have any questions concerning this matter.

Sincerely,

D. Blair Spitzberg  
Radiation Specialist

Enclosure:  
Form NRC-591

bcc: c/o DMB (IE07) ✓  
AEOD/NR  
IE/DFMS/FFMB01  
IE/RSB  
NMSS  
NRC PDR

bcc: RIV  
J. Collins  
R. Bangart  
Inspector  
RIV File

MRPS  
BSpitzberg:jd  
2/ /83

~~MRPS~~  
~~JEverett~~  
~~2// /83~~

~~TPB~~  
~~GBrown~~  
~~2/ /83~~

SPITZBERG, D. BLAIR

INSPECTOR'S REPORT  
Office of Inspection and Enforcement

REVIEWER

INSPECTORS  
SPITZBERG

LICENSEE/VENDOR <u>Day &amp; Zimmerman</u>	TRANSACTION TYPE <input checked="" type="checkbox"/> I - INSERT <input type="checkbox"/> M - MODIFY <input type="checkbox"/> D - DELETE <input type="checkbox"/> R - REPLACE	DOCKET NO. (8 digit) OR LICENSE NO. (BY PRODUCT) (13 digit) 04008483	REPORT		NEXT INSP DATE	
			NO 8301	SEQ A	MO	YR

PERIOD OF INVESTIGATION/INSPECTION	INSPECTION PERFORMED BY	ORGANIZATION CODE OF REGION/HQ CONDUCTING ACTIVITY (See IEMC 0530 "Manpower Reporting—Weekly Manpower Reporting" for code.)
FROM TO	<input checked="" type="checkbox"/> 1 - REGIONAL OFFICE STAFF <input type="checkbox"/> 2 - RESIDENT INSPECTOR <input type="checkbox"/> 3 - PERFORMANCE APPRAISAL TEAM	REGION DIVISION BRANCH 4 B A
MO. DAY YR 01 11 83 01 11 83	OTHER	

REGIONAL ACTION (Check one box only) <input checked="" type="checkbox"/> 1 - NRC FORM 591 <input type="checkbox"/> 2 - REGIONAL OFFICE LETTER	TYPE OF ACTIVITY CONDUCTED (Check one box only)		
<input checked="" type="checkbox"/> 02 - SAFETY <input type="checkbox"/> 03 - INCIDENT <input type="checkbox"/> 04 - ENFORCEMENT <input type="checkbox"/> 05 - MGMT. AUDIT	<input type="checkbox"/> 06 - MGMT. VISIT <input type="checkbox"/> 07 - SPECIAL <input type="checkbox"/> 08 - VENDOR <input type="checkbox"/> 09 - MAT. ACCT.	<input type="checkbox"/> 10 - PLANT SEC. <input type="checkbox"/> 11 - INVENT. VER. <input type="checkbox"/> 12 - SHIPMENT/EXPORT <input type="checkbox"/> 13 - IMPORT	<input type="checkbox"/> 14 - INQUIRY <input type="checkbox"/> 15 - INVESTIGATION

INSPECTION/INVESTIGATION FINDINGS (Check one box only)	TOTAL NUMBER OF VIOLATIONS AND DEVIATIONS	ENFORCEMENT CONFERENCE HELD	REPORT CONTAIN 2,790 INFORMATION	LETTER OR REPORT TRANSMITTAL DATE	
<input checked="" type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D 1 - CLEAR 2 - VIOLATION 3 - DEVIATION 4 - VIOLATION & DEVIATION	A B C D 00	A B C D 1 - YES	A B C D 1 - YES	NRC FORM 591 OR REG LETTER ISSUED	REPORT SENT TO HQ FOR ACTION
				MO. DAY YR FEB 08 1985	MO. DAY YR

MODULE INFORMATION										MODULE INFORMATION																							
REC ORD	MODULE NUMBER INSP				PRIORITY	DIRECT INSPECTION EFFORT IN STAFF HOURS EXPENDED THIS INSPECTION	PERCENTAGE COMPLETED TO DATE	STATUS	MODULE REQ. FOLLOWUP				REC ORD	MODULE NUMBER INSP				PRIORITY	DIRECT INSPECTION EFFORT IN STAFF HOURS EXPENDED THIS INSPECTION	PERCENTAGE COMPLETED TO DATE	STATUS	MODULE REQ. FOLLOWUP											
TYPE	NUMBER	PHASE	MANUAL CHAPTER	PROCEDURE NUMBER					LEVEL	PHASE	MANUAL CHAPTER	PROCEDURE NUMBER	LEVEL	TYPE	NUMBER	PHASE	MANUAL CHAPTER					PROCEDURE NUMBER	LEVEL	PHASE	MANUAL CHAPTER	PROCEDURE NUMBER	LEVEL						
B	530703	B	A	0.0.0							B	592706	B	A	0.0.0																		
B	530900	B	A	0.0.0																													
B	577710	B	A	0.0.2 10.0 C																													
B	586740	B	A	0.0.1 10.0 C																													

\* CIRCLE SEQUENCE IF VIOLATION OR DEVIATION