

DENTON

50-254

QAP 1100-T5  
Revision 6  
October 1981

STATION PROCEDURE REVISION COVER SHEET

ID/LX

Revision Description This revision  
updates the procedure to  
concur with the latest  
Americ ASEP Revision

<u>QEP</u>	<u>200-T1</u>
Chapter	Procedure
<u>KOVACH</u>	<u>7</u>
Originator	Revision

This procedure is required to be implemented prior to \_\_\_\_\_ Date  
because of \_\_\_\_\_

DRAFT REVIEW

Tech. Staff Supervisor	Date
Department Head	Date
Originator	Date

FINAL APPROVAL

<u>[Signature]</u>	<u>9/8/82</u>
Dept. Head <u>RAD CHEM</u>	Date
<u>G. Tait</u>	<u>9/8/82</u>
Tech. Staff Supervisor	Date
<u>L. J. Gerner</u>	<u>9/8/82</u>
Asst. Supt. <u>ADMIN</u>	Date

AUTHORIZATION

<u>[Signature]</u>	<u>9/10/82</u>
Station Superintendent	Effective Date

INSTRUCTIONS FOR REVISION INSERTION

REMOVE

QEP 200-0 REV 9  
QEP 200-T1 REV 6

INSERT

QEP 200-0 REV 10  
QEP 200-T1 REV 7

X005

REVISION RECEIPT FORM

Please sign and date below, and return this sheet to the Officer Supervisor -  
Quad Cities Station. Your Station Procedure copy number is \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

APPROVED

NOV 6 1981

8210280364 821012  
PDR ADOCK 05000254  
F PDR

DENTON

QAP 1100-T5  
Revision 6  
October 1981

STATION PROCEDURE REVISION COVER SHEET

ID/1X  
Revision Description This revision  
changes the table to agree  
with Figure QC 6-39.  
in the Quad Cities Site  
Specific Annex

QEP 360-T2  
Chapter Procedure  
Germer 5  
Originator Revision

This procedure is required to be implemented prior to \_\_\_\_\_  
because of \_\_\_\_\_ Date

DRAFT REVIEW

Tech. Staff Supervisor \_\_\_\_\_ Date \_\_\_\_\_  
Department Head \_\_\_\_\_ Date \_\_\_\_\_  
Originator \_\_\_\_\_ Date \_\_\_\_\_

FINAL APPROVAL

T.J. Roach 8-31-82  
Dept. Head RAD CHEM Date  
G. Tut 9/1/82  
Tech. Staff Supervisor Date  
L. Germer 9/2/82  
Asst. Supt. ADMIN Date

AUTHORIZATION

H. J. [Signature] 9/5/82  
Station Superintendent Effective Date

INSTRUCTIONS FOR REVISION INSERTION

REMOVE

QEP 360-0 REV 11  
QEP 360-T2 REV 4

INSERT

QEP 360-0 REV 12  
QEP 360-T2 REV 5

REVISION RECEIPT FORM

Please sign and date below, and return this sheet to the Officer Supervisor -  
Quad Cities Station. Your Station Procedure copy number is \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

APPROVED  
NOV -6 1981