

DMB

NRC Form 591
(12-81)
10 CFR 2.201

U.S. NUCLEAR REGULATORY COMMISSION

SAFETY INSPECTION

1. LICENSEE Shaklee Corporation P.O. Box 1550 Norman, OK 73070		2. REGIONAL OFFICE U. S. Nuclear Regulatory Commission Region IV 711 Ryan Plaza Drive, Suite 1000 Arlington, Texas 76012		
3. DOCKET NUMBER(S) 30-17208	4. LICENSE NUMBER(S) 35-19255-01	5. DATE OF INSPECTION April 15, 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.

8305030453 830415 NMS LIC30 35-19255-01 PDR	DATE	OK Cain	4/15/83
SIGNATURE - LICENSEE	DATE	SIGNATURE - NRC INSPECTOR	DATE

IE07

Cain, Charles L.

INSPECTOR'S REPORT
Office of Inspection and Enforcement

REVIEWER

INSPECTORS

LICENSEE/VENDOR	TRANSACTION TYPE	DOCKET NO. (8 digits) OR LICENSE NO. (BY PRODUCT) (13 digits)	REPORT		NEXT INSP. DATE		
			NO	SEC	MO	YR	
Shaklee Corp.	<input checked="" type="checkbox"/> I - INSERT <input type="checkbox"/> M - MODIFY <input type="checkbox"/> D - DELETE <input type="checkbox"/> R - REPLACE	35-19255-01	8301	A	*	*	*

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			1 - REGIONAL OFFICE STAFF		OTHER		REGION	DIVISION	BRANCH
MO	DAY	YR.	MO	DAY	YR.	<input checked="" type="checkbox"/>				4	B	A
04	15	83	04	15	87	2 - RESIDENT INSPECTOR						
						3 - PERFORMANCE APPRAISAL TEAM						

REGIONAL ACTION (Check one box only)	TYPE OF ACTIVITY CONDUCTED (Check one box only)			
<input checked="" type="checkbox"/> 1 - NRC FORM 591 <input type="checkbox"/> 2 - REGIONAL OFFICE LETTER	<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 2790 INFORMATION	LETTER OR REPORT TRANSMITTAL DATE	
<input checked="" type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	A B C D	A B C D	A B C D	MO DAY YR. MO DAY YR.	
1 - CLEAR 2 - VIOLATION 3 - DEVIATION 4 - VIOLATION & DEVIATION		1 - YES	1 - YES	04 15 83	

MODULE INFORMATION											MODULE INFORMATION																													
REC. ORG.	MODULE NUMBER INSP.					PRIORITY	DIRECT INSPEC. EFFORT IN STAFF HOURS EXPENDED THIS INSPECTION	PERCENTAGE COMPLETED TO DATE	STATUS	MODULE REG FOLLOWUP					REC. ORG.	MODULE NUMBER INSP.					PRIORITY	DIRECT INSPEC. EFFORT IN STAFF HOURS EXPENDED THIS INSPECTION	PERCENTAGE COMPLETED TO DATE	STATUS	MODULE REG 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	000	-	-	-	-													B	592706	B	A	000	-	-	-												