RC FORM 591 PART 1			U.S. NUCLEAR REGU	LATORY COMMISSIO
0 CFR 2.201	SAFETY	INSPECTION		
				Page 1 of
A. Charles Hospital Dregons OH 43616	1	U S M 801 V	ON III NUCLEAR REGULATORY COMMI VARRENVILLE ROAD I IL 60532-4351	SSION
DOCKET NUMBER(S)	4. LICENSE NUMBER	S)	5. DATE OF INSPECTION	
30-08529	34-15072	-01	9/2-/96	
<ol> <li>Within the scope of this inspection</li> <li>The inspector also verified the step questions on those actions at this to</li> <li>During this inspection certain of you NOTICE OF VIOLATION, which is not indicate the presence of a</li></ol>	os you have taken to correc time. our activities, as described equired to be posted in ac	ct the violations identified	in violation of NRC requirements 9.11. was not properly . 10 CFR 20.203(	s. This form is a posted to b),(c).(d),(e) or 34.42.
performed at the proper free	quencies. 10 CFR	or Licens	e Condition Number	were not
C. Records of			were not prope	rly maintained.
10 CFR				
D. Documents were not proper	ly posted or otherwise mad	de available. 10 CFR 19.	11.	
E. Reports or notification of			were not made in	n accordance with
10 CFR	or License Condition N	Number		accordance with
F				
ove. This statement of corrective actions i	is described by me to the is made in accordance wit	Inspector will be taken to h the requirements of 10	o correct the violations identified CFR 2.201. No further response	in the items checked a will be submitted
ereby state that, within 30 days, the action xove. This statement of corrective actions i less required by the NRC. GNATURE - LICENSEE 9610080330 960927	is described by me to the is made in accordance wit DATE	Inspector will be taken to h the requirements of 10 SIGNATURE NRC IN	CFR 2.201. No further response	in the items checked will be submitted DATE