



UNITED STATES  
NUCLEAR REGULATORY COMMISSION

REGION IV

611 RYAN PLAZA DRIVE, SUITE 400  
ARLINGTON, TEXAS 76011-8064

OCT 5 1994

Docket: 70-734  
License: SNM-696

General Atomics  
ATTN: J. Edwards, Vice President  
General Council and Secretary  
P.O. Box 85608  
San Diego, California 92186-9784

SUBJECT: NRC INSPECTION REPORT 70-734/94-03

This refers to the routine, unannounced inspection conducted by Mr. C. A. Hooker of this office on September 6-9, 1994. The inspection included a review of activities authorized for your General Atomics facility. At the conclusion of the inspection, the findings were discussed with those members of your staff identified in the enclosed report. Additional information relative to this inspection was also discussed with Dr. K. E. Asmussen of your staff on September 14, 1994, and additional employee exposure evaluations were provided on September 22, 1994.

Areas examined during the inspection are identified in the report. Within these areas, the inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observation of activities in progress. The results of this inspection are documented on page 1, in the enclosed report.

Within the scope of this inspection, no violations or deviations from NRC requirements were identified. However, the inspection identified a concern with the currentness of your Radiological Contingency Plan as it relates to criticality accident assumptions used for estimating potential offsite radiological consequences. This matter is discussed in Section 1.6 of the enclosed report. Based on the telephone discussion on September 14, 1994, between Mr. F. A. Wenslawski of my staff and Dr. K. E. Asmussen, Director Licensing, Safety and Nuclear Compliance, it is our understanding that you will submit to the RIV office by October 14, 1994, a plan and schedule that delineates your proposed actions to resolve this matter.

Also, Section 4 of the enclosed report describes circumstances wherein the actions on the part of your health physics staff to evaluate radiation doses to employees in controlled areas were less than diligent. We call this to your attention for corrective action as you deem appropriate.

In accordance with 10 CFR 2.790 of the NRC's "Rules of Practice," a copy of this letter and its enclosures will be placed in the NRC Public Document Room.

ML20283A834

OCT 5 1994

Should you have any questions concerning this inspection, we will be pleased to discuss them with you.

Sincerely,

  
Samuel J. Collins, Director  
Division of Radiation Safety  
and Safeguards

Enclosure:  
Appendix - NRC Inspection Report  
70-734/94-03

cc w/enclosure:  
ATTN: Dr. K. E. Asmussen, Director,  
Licensing, Safety and Nuclear Compliance  
P.O. Box 85608  
San Diego, California 92186-9784

State of California

APPENDIX

U.S. NUCLEAR REGULATORY COMMISSION  
REGION IV

Inspection Report: 70-734/94-03

License: SNM-696

Licensee: General Atomics (GA)  
P.O. Box 85608  
San Diego, California

Facility Name: General Atomics

Inspection At: Torrey Pines Mesa and Sorrento Valley Sites

Inspection Conducted: September 6-9 and 14, 1994

Inspector: C. A. Hooker, Senior Fuel Facility Inspector

Approved: Frank A. Wenslawski 10/4/94  
Frank A. Wenslawski, Chief Date  
Materials Branch

Inspection Summary

Areas Inspected: Routine, unannounced inspection of emergency preparedness, maintenance and surveillance testing, radiation protection, criticality safety, operations review, and followup on open items.

Although proprietary information was reviewed during this inspection, such information is not described in this report.

Results:

- In the areas inspected, the licensee's overall performance appeared adequate to meet their safety objectives. However, the inspection identified an issue relative to the inadequacy of the licensee's Radiological Contingency Plan (RCP) to demonstrate the potential offsite radiological consequences due to an accidental criticality event based on current site operations (Section 1.6). Additionally, maps in the RCP are outdated and do not adequately reflect the industrial growth near the licensee's facilities (Section 1.6). The licensee's inattention to detail in this area was viewed as a program weakness.

- The inspection also identified that the licensee had not diligently evaluated the potential radiation dose of individuals working in a controlled area (Section 4).

Summary of Inspection Findings:

- Within the scope of this inspection, no violations or deviations were identified.
- Inspection Followup Item (IFI) 70-734/9402-01 was closed. This item involved the licensee's evaluation of the potential dose to members of the public and personnel working in controlled areas. No violations were identified (Section 4).

Attachment:

- Persons Contacted and Exit Meeting

## DETAILS

### **1 EMERGENCY PREPAREDNESS (88050)**

The licensee's program was examined to determine whether the commitments delineated in the RCP were being effectively implemented, and whether the program was capable of protecting the general public and facility staff.

Federal Register (FR) Notice 54 FR 14051, dated April 7, 1989, announced the publication of the final rule on emergency preparedness for fuel cycle and material licensees. Previously, emergency plans were submitted under orders issued in 1981. The FR Notice stated that at the time of license renewal, licensee's must resubmit their plan revised to conform with the new rule as part of their renewal application. The rule, 10 CFR 70.22(i)(1) effective April 7, 1990, delineates criteria for and the contents of emergency plans.

Section 8.5, "Radiological Contingency Plan," Part II of the license requires the licensee to maintain its RCP submitted to the Commission on May 25, 1984, and as supplemented and revised through September 10, 1992. By letter dated November 22, 1989, the licensee submitted an application for renewal of GA's special nuclear materials (SNM) license, SNM 696. This submittal was prior to the new rule, 10 CFR 70.22(i)(1), becoming effective and the submittal did not provide a revised RCP. As of the date of this inspection, the license renewal application has not been approved. As previously approved, the licensee's RCP dated August 1992 and as revised through September 10, 1992, is primarily of format and content of the NUREG-0762, "Standard Format and Content for Radiological Contingency Plans for Fuel Cycle and Materials Facilities," dated July 1981, as opposed to NRC Regulatory Guide (RG) 3.67, "Standard Format and Content for Emergency Plans for Fuel Cycle and Materials Facilities," dated January 1992, which superseded NUREG-0762.

By letter dated July 1, 1994, GA submitted to NRC a copy of its latest revision of the RCP dated June 1994. The licensee's transmittal letter stated that only minor changes were made to the contents of the RCP, however, the plan has been revised in its entirety due to complete reformatting of the document. The changes primarily involved updates reflecting changes in 10 CFR Part 20 terminology, names and phone numbers of emergency response personnel, and minor clarification of reporting procedures. The format and content of the June 1994 RCP did not change from that specified in NUREG-0762.

#### 1.1 Offsite Support Agencies

The inspector verified that the licensee has continued to interface with the appropriate offsite emergency support agencies. The inspector noted that the licensee's interfacing also included site familiarization visits by the appropriate support agencies and invitations to participate in facility drills. The latest visit by offsite agencies was in May 1994 by personnel from the San Diego Fire Department, Federal Fire Department, and County Hazardous Materials Agency. The San Diego Fire Department normally visits the site two times per year.

The inspector verified that a current copy of the RCP, emergency response notification procedures, and current telephone numbers of GA emergency response personnel and offsite support agencies were maintained in the licensee's Emergency Support Center (Security Station No. 1 located in Building 1). The inspector also determined that the security personnel were cognizant of the reporting and notification sequence delineated in the RCP.

The inspector concluded that the licensee was adequately implementing their commitments for maintaining offsite emergency response personnel familiar with licensee activities, and were capable of making the appropriate notifications during an emergency.

#### 1.2 Facility Implementing Procedures

The inspector noted that updated emergency implementing procedures were maintained at each active SNM facility covered by the RCP. These procedures were located at the main entrance to each facility along with an updated call list of key emergency response personnel. Personnel had been trained and were familiar with their respective procedures. No concerns were identified.

#### 1.3 Facilities and Equipment

The inspector verified that the emergency response equipment described in the RCP was being inventoried, inspected, and maintained as specified in the plan and licensee procedures. The equipment appeared to be well maintained and calibrated or tested at the appropriate frequencies. The licensee also continues to maintain two well equipped fire trucks and an emergency command vehicle. During facility tours the inspector observed that emergency exits and evacuation pathways were clearly marked. No concerns were identified.

#### 1.4 Organization and Training

The inspector verified that the emergency response organization was as delineated in the RCP. A review of training records indicated that each member of the emergency response organization received specialized annual training particular to their assigned duties. Training included first aid, the use of fire extinguishers, evacuation procedures, radiological safety, hazardous materials, and the use of self contained breathing apparatuses. In addition to the training provided to the emergency response team members, the licensee also continues to maintain a fire brigade staff consisting of an emergency services supervisor and five qualified emergency services technicians (ESTs). The ESTs are trained as professional fire fighters, certified emergency medical technicians, and certified hazardous chemical technicians. The ESTs provide site coverage 24 hours per day and, seven days per week. Although the site ESTs are first line responders, they are only expected to mitigate incipient events. The licensee relies on the San Diego Fire Department to be the responding party for significant events involving fires, hazardous materials spills, and natural disasters.

## 1.5 Drills

The inspector noted that in October of each year, during fire prevention week, the licensee conducts a fire evacuation drill at each facility. As appropriate, criticality evacuation drills were also conducted semiannually. The licensee's last annual drill to exercise selected aspects of the RCP and invite offsite support agency participation was conducted on December 16, 1993. The inspector reviewed the accident scenario, comments from drill observers, and the followup critique. The scenario concerned a simulated accident where a 55-gallon drum of radioactively contaminated flammable liquid (alcohol) spilled and caught fire while being transported with a fork truck in the lower waste yard of Building 41. Although the San Diego Fire Department was invited to participate, other commitments prevented their participation. The inspector discussed the weaknesses identified by the licensee's critique with the Emergency Coordinator (Supervisor, Emergency Services). Based on this discussion it appeared that the licensee identified weaknesses were being adequately addressed. The inspector determined that licensee drills were consistent with those described in the RCP and provided adequate training for responding to onsite emergencies.

## 1.6 Procedures for Offsite Radiation Dose Assessment

The inspector noted that Section 3.3, "Range of Postulated Accidents," of the August 1992 RCP and the recently submitted June 1994 revision states, in part, that: (1) the range of postulated accidents is analyzed in Section 7 of the Demonstration Volume of the SNM-696 license, (2) the one [postulated accident] with the greatest potential off-site radiological consequences but lowest probability is a criticality in the Fuel Fabrication Facility [high-temperature gas reactor (HTGR) fuel fabrication facility] at the process liquid dumping site in Building 37 at Sorrento Valley, and (3) the dumping site is no longer being used and this facility has been decommissioned. Section 3.3 further states: "The greatest radiological consequences from this accident based on 50% meteorology would be 0.27 Rem whole body, 0.26 Rem thyroid, 0.015 Rem bone, and 0.023 Rem lung dose. These doses to individuals working near the site boundary for 8 hours are well within the Protective Action Guides of the Environmental Protection Agency (1 Rem whole body, 5 Rem thyroid, and 3 Rem other critical organ)."

Section 7.1, "Introduction," Part 1 (Demonstration Volume) of the license application states that an accidental criticality is not considered to be a credible accident, although the possible consequences of such an event are considered in Section 7.3. Sections 7.3.1 and .2 provide the basic assumptions, accident scenario, and modeling of the postulated criticality accident referenced above. As referenced in the Demonstration Volume, the licensee's modeling and radiation dose estimates were performed in accordance with the guidance provided in RG 3.34, "Assumptions Used for Evaluating the Potential Radiological Consequences of an Accidental Nuclear Criticality in a Uranium Fuel Fabrication Plant," Rev. 1, July 1979. The modeling involved an event with a solution system of less than 100 gallons with an initial pulse of  $1.0E18$  fissions followed successively at 10 minute intervals by a series of

pulses of  $1.9E17$  fissions and a final pulse of  $1.0E17$  at 110 minutes after the start of the accident for a total of  $3.0E18$  fissions. The postulated accident involved the transfer of uranium (enriched to 93.2 wt.% U-235) liquid waste into an unfavorable geometry 55-gallon drum located in the liquid dump room.

Section 7.3.2 of the Demonstration Volume states that the dump room was designed to mitigate the results of a criticality accident and was shielded by 24 inch concrete walls, a 16 inch concrete ceiling and had a close fitting door to contain any possible contamination. In modeling the accident, the licensee also took credit for the exterior 5.75 inch concrete building walls, for a total of 29.75 inches of concrete shielding. To mitigate radioactive effluent releases from a criticality accident, the HEPA exhaust system for this facility was designed to automatically shutdown when the criticality alarm was activated to mitigate effluent releases.

The doses described in Section 3.3 of the RCP were based the HTGR facility being 46 meters from the site boundary. Figures 7.3, 7.4, and 7.5 of the Demonstration Volume respectively provide one, three and eight hour estimated doses to members of the public from the above postulated criticality accident. The doses delineated in Figures 3-8 through 3-10 of the RCP are the same as those provided in Figures 7.3 through 7.5 of the Demonstration volume.

Items 1 and 2 of Section 3.4.2 of the RCP, "Emergency Procedure for Nuclear Criticality at SNM Storage and Evaluation Facility (Bldg. 41) or Fuel Process and Development Facility (Bldg. 39)," state that (1) where a criticality has been verified, the Emergency Coordinator will declare an Alert with appropriate notification and evaluation of the potential dose to the public, and (2) within one hour, a decision will be made on the necessity for evacuation based on Figures 3.2 through 3.8. Figures 3-2 through 3-7 provide dilution factors based on atmospheric stability conditions for estimating gaseous effluent releases. The remaining steps in this procedure section of the RCP also utilize Figures 3-8 through 3-10 for estimating offsite doses.

The inspector determined that the estimated doses delineated in Figures 3.8 through 3-10 were not valid since the HTGR fuel fabrication facility was completely demolished for its decommissioning. Additionally, the inspector considered these dose estimates to have been non-conservative when the facility was operating. Specifically, the doses would have been greater from a postulated accident in the operating area of the HTGR fuel fabrication facility where there was no special shielding. Additionally, other onsite facilities using SNM were not specifically designed to mitigate the consequences of an accidental criticality and no evident evaluations were made to demonstrate the potential offsite consequences from these facilities.

Currently there are three facilities that are actively or sporadically involved in operations where more than a critical mass of U-235 can be present. These facilities are: (1) the TRIGA fuel fabrication facility located in Building 22 on the Main Site (Torrey Pines Mesa), (2) the Modular Helium Reactor (MHR) pilot fuel process located in Building 39 at the Sorrento Valley site, and (3) the SNM storage vault located in Building 41 at the



Sorrento Valley site. These facilities, respectively, are approximately 30 meters, 90 meters, and 110 meters from the site boundary fence line.

The inspector also noted that Figure 1-1, "Location of nearby industrial parks and community facility," dated 1975, and Figure 1-2, "Plan View of Site," not dated in the August 1992 RCP and the recently submitted June 1994 RCP, do not reflect the current industrial growth adjacent to the licensee's facilities. During the past several years, the licensee has sold large portions of property adjacent to the main site for industrial use. A large portion of the sold property on the west side of the main site is now occupied by office buildings and other industrial facilities, and the land sold on the north and northeast side of the main site and in close proximity of the TRIGA fuel fabrication facility has been prepared for the occupancy of industrial facilities. The industrial facilities adjacent to the licensee's Sorrento Valley facilities has also increased over the years. Many of these facilities are approximately 150 to 200 meters from the licensee's site boundary fence line.

The above observations were discussed with cognizant licensee personnel during the inspection and at the exit interview on September 9, 1994. The licensee representatives acknowledged that the estimated offsite doses delineated in Figures 3-8 through 3-10 could be non-conservative in contemplating potential consequences of a postulated criticality accident from existing facilities. The inspector acknowledged licensee comments that activities involving the use of SNM and the production of TRIGA and MHR fuel have been limited and that it was unlikely for an accidental criticality to occur relative to these operations. The inspector referred the licensee to 10 CFR 70.22(i)(1) regarding requirements for evaluations.

During the inspection and at the exit interview on September 9, 1994, The licensee acknowledged the need to perform the subject evaluations and update the figures in the RCP to illustrate nearby industrial facilities. During a telephone conversation between the Director, Licensing, Safety and Nuclear Compliance and the Chief, Materials Branch and the inspector on September 14, 1994, the licensee representative stated that a plan of the licensee's approach and schedule for performing the subject evaluations would be submitted to the NRC Region IV staff by October 14, 1994.

The above observations indicate a lack of attention to detail during the licensee's review and updating of the RCP and are viewed as a weakness in the licensee's program. The inspector noted that the licensee's procedures appeared adequate for estimating potential offsite consequences from fires, explosion or other conditions that have the potential for an accidental release of radioactive materials.

## **2 MAINTENANCE AND SURVEILLANCE TESTING (88025)**

This area was reviewed to determine that the general maintenance of equipment was evident, and surveillance tests were being performed in accordance with

the license and that safety related equipment was being adequately maintained.

Due to limited onsite activities, safety related equipment primarily involves that for fire protection, control of radioactive material, personnel safety, and emergency preparedness.

The inspector noted that tags indicating recent quarterly air flow tests of operating hoods and/or equipment enclosure openings indicated that air flows were within the limits specified in the license. Exhaust ventilation systems were observed to be operating in all of the areas toured as indicated by differential pressure and other similar gauges.

Selected records of tests and inspections of fire protection systems for the past year were reviewed and discussed with the Supervisor, Emergency Services. Fire sprinkler system flow tests were performed monthly and full flow tests on the fire main were performed semiannually. Fire extinguishers were also being checked monthly. Calibration records demonstrated that the scram system for the uranium-zirconium fines burn furnace in the TRIGA fuel fabrication facility was being calibrated at six month intervals in accordance with licensee procedures.

The inspector concluded that safety related equipment was being adequately maintained and no safety concerns were identified.

### **3 CRITICALITY SAFETY, RADIATION SAFETY, AND OPERATIONS REVIEW (88015, 83822, AND 88020)**

There had been no changes since the previous inspection (Inspection Report 70-734/94-01) of these program areas. The inspection of these areas during this inspection (70-734/94-03) was based on observations made during facility tours and discussions with licensee personnel.

The inspector noted that there were no current activities involving the use of SNM at the MHR fuel pilot plant facility. The licensee informed the inspector that there may be a small project in October 1994 to coat ready made fuel particles for a foreign company. No other projects involving the use of SNM were expected for the remainder of the year. Regarding the TFFF, the licensee was in the process of fabricating 30 TRIGA reactor fuel elements which commenced in mid July 1994. There had been no other fuel fabrication projects since January 1994. The licensee expected to complete this project by mid October 1994. The inspector noted that posting of criticality safety limits at each work station and the use of SNM were in accordance with the licensee's criticality safety analyses and license conditions. Sealed SNM storage containers were adequately labeled with the uranium content and enrichment.

During facility tours, the inspector noted that radioactive materials and radiation areas were posted in accordance with the requirements delineated in 10 CFR Part 20. The inspector observed that workers were dressed in protective clothing as specified in the respective facility work

9401  
116

authorization. Radiation survey instruments utilized in the field were within their current calibration period.

No safety concerns were identified by the inspector.

#### 4 FOLLOWUP (92701)

(Closed) Inspection Followup Item 70-734/9402-01: Review of licensee's evaluation of radiation exposure to members of the public and personnel in controlled areas.

Based on the review of the licensee's evaluation of accessibility and potential radiation dose to members of the public from certain site locations (site boundary fence line behind Building 27-1 and the Sorrento Valley High Level Waste Storage facility) and the review of the licensee's 1994 second quarter environmental thermoluminescent dosimeter (TLD) readings, the inspector concluded that the licensee's evaluation appeared adequate. The licensee's evaluation demonstrated that no individual could have received a radiation dose in excess of the limits 10 CFR 20.1301 and 49 CFR 190.

Regarding the evaluation of the radiation dose to non-radiation GA workers who worked in Room 106 adjacent a SNM storage room in Building 41, the inspector concluded that the licensee had not diligently evaluated this matter. Specifically, the licensee had received and reviewed the vendor's second quarter TLD results on August 9, 1994, and had been performing routine monthly radiation surveys (micro-R meter) in Room 106. However, as of the morning of September 7, 1994, the licensee had not calculated the dose to individuals of concern. Following the inspector's questioning the doses of these individuals, the health physics manager (HPM) subsequently provided the inspector with an evaluation later in the day. The evaluation stated that the highest dose received (individual A) was 10 mrem based on 40% occupancy for the 1994 second quarter and a total of 23 mrem from January 1 through June 30, 1994. The inspector made the following observations relative to the licensee's evaluation:

- During the inspector's interview with individuals working in and adjacent to Room 106, individual A stated that he had worked in Room 106 approximately 90% of each work week during the second quarter of 1994. The discrepancy of occupancy time was discussed with the HPM and the Health Physics technician (HPT) assigned to the area. The HPT stated that he had not interviewed individual A and assumed that a previously evaluated occupancy time of 40% had not changed.
- The vendor's second quarter dosimetry report indicated no measurable dose for TLD 9461 (located in the center of Room 106 and previously used for the dose assessment) while the TLDs attached on the wall adjacent to the SNM vault indicated slightly higher doses than the 1994 first quarter readings. The vendor's second quarter report for TLD 9461 also showed a start date of July 1, 1994. During an examination of the TLD

9461 station, the inspector noted that the second quarter TLD had not been exchanged. The involved HPT stated that apparently he had mistakenly placed the third quarter TLD with those exchanged for the second quarter. During the HPM's review of the vendor's TLD report on August 9, 1994, the anomaly of TLD 9461 indicating no dose and a new start date of July 1, 1994, was not questioned.

- The inspector noted that the TLD dose used in the licensee's evaluation was from TLD 9468 which had been attached to the Room 106 wall that separates the SNM storage facility. Subsequent discussions with the HPM revealed that TLD 9468 was mistakenly assumed to be the one (TLD 9461) normally used for the middle of the room without comparing the TLD number with the mapped location. The HPM informed the inspector during the inspection and at the exit interview that the individual A's dose would be re-evaluated and the evaluation sent to the RIV Field Office for the inspector's review.

Although the individuals who performed tasks in Room 106 had not previously been considered radiation workers, on September 8, 1994, the licensee classified the dose received by these individuals to be an occupational dose because their assigned duties involve exposure to radiation, and the resultant dose may exceed 100 mrem (Reference, Answer to Question 26(b), NUREG/CR-6204).

The licensee was making arrangements to relocate radioactive materials in the SNM storage vault to keep the dose to individuals in Room 106 ALARA. Additionally, the licensee was considering adding shielding and the possibility of relocating the activities in Room 106 to another onsite facility.

By facsimile on September 22, 1994, the licensee provided the inspector with a revised comprehensive evaluation of the dose to the workers in Room 106. The licensee's evaluation concluded that individual A was receiving approximately 20 mrem per quarter and another person averaged approximately 14 mrem per quarter. The inspector had no further questions regarding this matter and no violations were identified.

## ATTACHMENT

### 1 PERSONS CONTACTED

#### 1.1 Licensee Personnel

#\*K. E. Asmussen, Director, Licensing, Safety and Nuclear Compliance  
\*J. M. Brock, Supervisor, Emergency Services  
\*R. K. Kruger, Manager, TRIGA Fuel Fabrication  
\*B. Laney, Licensing Engineer  
\*H. J. Lomax, Construction Planner, Facilities Engineering.  
\*V. Malakhof, Manager, Nuclear Safety  
\*R. C. Noren, Director, Nuclear Fuel Fabrication  
\*L. R. Quintana, Manager, Health Physics  
R. Tadesse, Health Physicist  
\*C. L. Wisham, Manager, Nuclear Materials Accountability  
\*J. Yi, Deputy Manager, Nuclear Safety

In addition to the individuals noted above, the inspector contacted other personnel during this inspection.

\*Denotes those attending the exit interview on September 9, 1994.

#Denotes telephone conversation on September 14, 1994.

### 2 EXIT INTERVIEW

On September 9, 1994, the inspector met with the licensee representatives to discuss the scope and findings of the inspection. The licensee was informed of the observations described in the report.

The Director, Licensing, Safety and Nuclear Compliance agreed that the RCP needed to be updated and committed to re-evaluating the potential offsite radiological consequences due to an accidental criticality event consistent with current operations, and submitting a revised RCP to include the results of their evaluations and updated Figure 1-1 to reflect the growth of current industry near GA's facilities. Additionally the Manager, Health Physics committed to sending the inspector a re-evaluation of the radiation dose to individuals who had worked in Room 106 of Building 41. This action was completed on September 27, 1994.

# IFS Data Entry Form

Reviewed By Wenslawski  
Date 9/29/94

<input type="checkbox"/> Reactor/Vendor Inspection (IFS Option 1)	<input type="checkbox"/> Docket Related/P21 Items (IFS Option 4)
Items Opened (Y/N): <u>  </u>	Enter Log Number <u>  </u>
<input checked="" type="checkbox"/> Material Inspection (IFS Option 2)	<input type="checkbox"/> LER Items (IFS Option 5)
SDI (Y/N): <u>N</u>	Enter LER Number <u>  </u>
Letter (Y/N): <u>Y</u>	<input type="checkbox"/> Non-Docket Related Items (IFS Option 6)
Clear (Y/N): <u>Y</u>	

Site/Name: General Atomics  
Report Transmittal Date 10/5/94

Lead Inspector: CMA

Responsible Org Code 4320

Report End Date   /  /  

Region: IV

Report NBR	Docket NBR
A <u>094003</u>	<u>07000734</u>
B <u>  </u>	<u>  </u>
C <u>  </u>	<u>  </u>

Materials Only	
License NBR	<u>SNM-696</u>

Update? (Y/N): Y Opened IR/LER/P21 LOG/IFS Number: 94002

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\* Optional Fields.  
 \*\* Severity, Supplement, and NOV/NCC only applicable for Violations; EA Number only applicable for Escalated Enforcement Items.  
 \*\*\* Sequence NBR is not applicable for docket related/P21, LER, or non-docket related items.

ITEMS CONTINUED? (Y/N):