NRC FORM 591M PART 1 U.S. NUCLEAR REGULATORY COMMISSION (07-2012) 10 CFR 2.201 SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION								
1. LICENSEE/LOCATION INSPECTED			2. NRC/REGIONAL OFFICE					
Department of the Army ATTN: AMSEL-SFR, Building 3200 6630 Raritan Avenue Aberdeen Proving Ground, MD 21005 REPORT NUMBER(s) 2020001			Region 1 2100 Renaissance Blvd Suite 100 King of Prussia, PA 19406-2713					
3. DOCKET NUMBER(S)		4. LICENSE NUMBER(S)	5. DATE(S) OF INSPECTION					
030-38471		19-31447-01		01/19/2021 - 05/14/202				
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 (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 inspection findings are as follows: 1. Based on the inspection findings, no violations were identified. 2. Previous violation(s) closed. 3. The violations(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy, to exercise discretion, were satisfied. Non-cited violation(s) were discussed involving the following requirement(s): 4. During this inspection, certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited in accordance with the NRC Enforcement Policy. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance with 10 CFR 19.11. (Violations and Corrective Actions)								
		Statement of Corre	ective Actions					
corrective actions is made in a	accordance with the	escribed by me to the Inspector wi e requirements of 10 CFR 2.201 (desired that no further written res	corrective steps already	taken, corrective steps which v	will be taken,			
TITLE	P	RINTED NAME	SIGN	IATURE	DATE			
LICENSEE'S REPRESENTATIVE	Craig Goldbe	rg						
NRC INSPECTOR	Betsy Ullrich,	Senior Health Physicist						

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BRANCH CHIEF		Commercial, Industrial, ademic Branch						