

**START**

**ENGINEERING CHANGE NOTICE**

1. ECN **600930**  
 Proj. ECN

2. ECN Category (mark one) Supplemental <input checked="" type="checkbox"/> Direct Revision <input type="checkbox"/> Change ECN <input type="checkbox"/> Temporary <input type="checkbox"/> Standby <input type="checkbox"/> Supersedure <input type="checkbox"/> Cancel/Void <input type="checkbox"/>	3. Originator's Name, Organization, MSIN, and Telephone No. K. N. Pool, PAL, H4-23, 372-2557		4. Date 02/01/94
	5. Project Title/No./Work Order No. T-102-PNL SINGLE SHELL TANK WASTE CHARACTERIZATION	6. Bldg./Sys./Fac. No. NA	7. Impact Level 3Q
	8. Document Numbers Changed by this ECN (includes sheet no. and rev.) WHC-SD-WM-DP-052, REV. 0	9. Related ECN No(s). NA	10. Related PO No. NA

11a. Modification Work <input type="checkbox"/> Yes (fill out Blk. 11b) <input checked="" type="checkbox"/> No (NA Blks. 11b, 11c, 11d)	11b. Work Package No. NA	11c. Modification Work Complete NA _____ Cog. Engineer Signature & Date	11d. Restored to Original Condition (Temp. or Standby ECN only) NA _____ Cog. Engineer Signature & Date
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12. Description of Change  
 THIS SUPPORTING DOCUMENT WAS RELEASED WITH THE INCORRECT COGNIZANT ENGINEER AND COGNIZANT MANAGER IDENTIFIED. THIS ECN IS GENERATED TO CORRECT THAT ERROR AND TO IDENTIFY THE RESPONSIBLE CONTACT FOR THIS PROJECT.

13a. Justification (mark one) As-Found <input type="checkbox"/>	Criteria Change <input type="checkbox"/>	Design Improvement <input type="checkbox"/>	Environmental <input type="checkbox"/>
Facilitate Const. <input type="checkbox"/>	Const. Error/Omission <input type="checkbox"/>	Design Error/Omission <input checked="" type="checkbox"/>	

13b. Justification Details  
 NA

14. Distribution (include name, MSIN, and no. of copies)  
 SEE ATTACHED DISTRIBUTION LIST

RELEASE STAMP

OFFICIAL RELEASE BY WHC **63**

DATE **MAR 14 1994**

*Sta #6*



# ENGINEERING CHANGE NOTICE

15. Design Verification Required  
 Yes  
 No

16. Cost Impact

ENGINEERING	CONSTRUCTION
Additional <input type="checkbox"/> \$	Additional <input type="checkbox"/> \$
Savings <input type="checkbox"/> \$	Savings <input type="checkbox"/> \$

17. Schedule Impact (days)

Improvement   
 Delay

18. Change Impact Review: Indicate the related documents (other than the engineering documents identified on Side 1) that will be affected by the change described in Block 12. Enter the affected document number in Block 19.

SDD/DD <input type="checkbox"/>	Seismic/Stress Analysis <input type="checkbox"/>	Tank Calibration Manual <input type="checkbox"/>
Functional Design Criteria <input type="checkbox"/>	Stress/Design Report <input type="checkbox"/>	Health Physics Procedure <input type="checkbox"/>
Operating Specification <input type="checkbox"/>	Interface Control Drawing <input type="checkbox"/>	Spares Multiple Unit Listing <input type="checkbox"/>
Criticality Specification <input type="checkbox"/>	Calibration Procedure <input type="checkbox"/>	Test Procedures/Specification <input type="checkbox"/>
Conceptual Design Report <input type="checkbox"/>	Installation Procedure <input type="checkbox"/>	Component Index <input type="checkbox"/>
Equipment Spec. <input type="checkbox"/>	Maintenance Procedure <input type="checkbox"/>	ASME Coded Item <input type="checkbox"/>
Const. Spec. <input type="checkbox"/>	Engineering Procedure <input type="checkbox"/>	Human Factor Consideration <input type="checkbox"/>
Procurement Spec. <input type="checkbox"/>	Operating Instruction <input type="checkbox"/>	Computer Software <input type="checkbox"/>
Vendor Information <input type="checkbox"/>	Operating Procedure <input type="checkbox"/>	Electric Circuit Schedule <input type="checkbox"/>
OM Manual <input type="checkbox"/>	Operational Safety Requirement <input type="checkbox"/>	ICRS Procedure <input type="checkbox"/>
FSAR/SAR <input type="checkbox"/>	IEFD Drawing <input type="checkbox"/>	Process Control Manual/Plan <input type="checkbox"/>
Safety Equipment List <input type="checkbox"/>	Cell Arrangement Drawing <input type="checkbox"/>	Process Flow Chart <input type="checkbox"/>
Radiation Work Permit <input type="checkbox"/>	Essential Material Specification <input type="checkbox"/>	Purchase Requisition <input type="checkbox"/>
Environmental Impact Statement <input type="checkbox"/>	Fac. Proc. Samp. Schedule <input type="checkbox"/>	<input type="checkbox"/>
Environmental Report <input type="checkbox"/>	Inspection Plan <input type="checkbox"/>	<input type="checkbox"/>
Environmental Permit <input type="checkbox"/>	Inventory Adjustment Request <input type="checkbox"/>	<input type="checkbox"/>

19. Other Affected Documents: (NOTE: Documents listed below will not be revised by this ECN.) Signatures below indicate that the signing organization has been notified of other affected documents listed below.

Document Number/Revision	Document Number/Revision	Document Number Revision
--------------------------	--------------------------	--------------------------

20. Approvals

Signature	Date	Signature	Date
OPERATIONS AND ENGINEERING		ARCHITECT-ENGINEER	
Cog Engineer K. N. Pool <i>K. N. Pool</i>	<u>2/3/94</u>	PE	_____
Cog. Mgr. J. Kristofzski <i>J. Kristofzski</i>	<u>2/14/94</u>	QA	_____
QA J. C. Langford <i>J. C. Langford</i>	<u>2-3-94</u>	Safety	_____
Safety	_____	Design	_____
Security	_____	Environ.	_____
Environ.	_____	Other	_____
Projects/Programs	_____		_____
Tank Waste Remediation System	_____		_____
Facilities Operations	_____	DEPARTMENT OF ENERGY	
Restoration & Remediation	_____	Signature or Letter No.	
Operations & Support Services	_____		
IRM	_____	ADDITIONAL	_____
Other	_____		_____



Date Received: <b>MAR 14 8 1994</b>	<b>INFORMATION RELEASE REQUEST</b>	Reference: WHC-CM-3-4
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Complete for all Types of Release

<table border="0" style="width:100%;"> <tr> <td style="width:50%; vertical-align: top;"> <input type="checkbox"/> Speech or Presentation  <input type="checkbox"/> Full Paper (Check only one suffix)  <input type="checkbox"/> Summary  <input type="checkbox"/> Abstract  <input type="checkbox"/> Visual Aid  <input type="checkbox"/> Speakers Bureau  <input type="checkbox"/> Poster Session  <input type="checkbox"/> Videotape         </td> <td style="width:50%; vertical-align: top;"> <input type="checkbox"/> Reference  <input checked="" type="checkbox"/> Technical Report  <input type="checkbox"/> Thesis or Dissertation  <input type="checkbox"/> Manual  <input type="checkbox"/> Brochure/Flier  <input type="checkbox"/> Software/Database  <input type="checkbox"/> Controlled Document  <input type="checkbox"/> Other         </td> </tr> </table>	<input type="checkbox"/> Speech or Presentation <input type="checkbox"/> Full Paper (Check only one suffix) <input type="checkbox"/> Summary <input type="checkbox"/> Abstract <input type="checkbox"/> Visual Aid <input type="checkbox"/> Speakers Bureau <input type="checkbox"/> Poster Session <input type="checkbox"/> Videotape	<input type="checkbox"/> Reference <input checked="" type="checkbox"/> Technical Report <input type="checkbox"/> Thesis or Dissertation <input type="checkbox"/> Manual <input type="checkbox"/> Brochure/Flier <input type="checkbox"/> Software/Database <input type="checkbox"/> Controlled Document <input type="checkbox"/> Other	ID Number (include revision, volume, etc.) <b>WHC-SD-WM-DP-052, REV. 0</b> <hr/> List attachments. <b>ECN-600930</b> <hr/> Date Release Required <p style="text-align: right;"><b>02/01/94</b></p>
<input type="checkbox"/> Speech or Presentation <input type="checkbox"/> Full Paper (Check only one suffix) <input type="checkbox"/> Summary <input type="checkbox"/> Abstract <input type="checkbox"/> Visual Aid <input type="checkbox"/> Speakers Bureau <input type="checkbox"/> Poster Session <input type="checkbox"/> Videotape	<input type="checkbox"/> Reference <input checked="" type="checkbox"/> Technical Report <input type="checkbox"/> Thesis or Dissertation <input type="checkbox"/> Manual <input type="checkbox"/> Brochure/Flier <input type="checkbox"/> Software/Database <input type="checkbox"/> Controlled Document <input type="checkbox"/> Other		

Title <b>PNL 325 SINGLE SHELL TANK WASTE CHARACTERIZATION FOR TANK T-102</b>	Unclassified Category <b>UC-</b>	Impact Level <b>3Q</b>
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New or novel (patentable) subject matter? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If "Yes", has disclosure been submitted by WHC or other company? <input type="checkbox"/> No <input type="checkbox"/> Yes Disclosure No(s).	Information received from others in confidence, such as proprietary data, trade secrets, and/or inventions? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Identify)
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Copyrights? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If "Yes", has written permission been granted? <input type="checkbox"/> No <input type="checkbox"/> Yes (Attach Permission)	Trademarks? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Identify)
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Complete for Speech or Presentation




Title of Conference or Meeting <b>NA</b>	Group or Society Sponsoring <b>NA</b>	
Date(s) of Conference or Meeting <b>NA</b>	City/State <b>NA</b>	Will proceedings be published? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Will material be handed out? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Title of Journal <b>NA</b>
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**CHECKLIST FOR SIGNATORIES**

Review Required per WHC-CM-3-4	Yes	No	Reviewer - Signature Indicates Approval
			Name (printed)                      Signature                      Date
Classification/Unclassified Controlled Nuclear Information	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Patent - General Counsel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>per OGC memo not required 2/12/94</i>
Legal - General Counsel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>per OGC memo 2/4/93 not required 2/2/94</i>
Applied Technology/Export Controlled Information or International Program	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
WHC Program/Project	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Communications	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
RL Program/Project	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>per Paula Clark not required 2/11/94</i>
Publication Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>J. R. Dunphy J.R.D. unphy (review only) 2-2-94</i>
Other Program/Project	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Information conforms to all applicable requirements. The above information is certified to be correct.

<table border="0" style="width:100%;"> <tr> <td style="width:50%;">References Available to Intended Audience</td> <td style="width:10%; text-align: center;">Yes</td> <td style="width:10%; text-align: center;">No</td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Transmit to DOE-HQ/Office of Scientific and Technical Information</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td></td> </tr> <tr> <td>Author/Requestor (Printed/Signature)</td> <td></td> <td></td> <td style="text-align: center;">Date</td> </tr> <tr> <td><b>K. N. Pool</b> <i>Karl N. Pool</i></td> <td></td> <td></td> <td style="text-align: center;"><b>2/3/94</b></td> </tr> <tr> <td>Intended Audience</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Internal    <input type="checkbox"/> Sponsor    <input checked="" type="checkbox"/> External</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Responsible Manager (Printed/Signature)</td> <td></td> <td></td> <td style="text-align: center;">Date</td> </tr> <tr> <td><b>J. Kristofzski</b> <i>J. Kristofzski</i></td> <td></td> <td></td> <td style="text-align: center;"><b>3/9/94</b></td> </tr> </table>	References Available to Intended Audience	Yes	No			<input checked="" type="checkbox"/>	<input type="checkbox"/>		Transmit to DOE-HQ/Office of Scientific and Technical Information	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Author/Requestor (Printed/Signature)			Date	<b>K. N. Pool</b> <i>Karl N. Pool</i>			<b>2/3/94</b>	Intended Audience				<input type="checkbox"/> Internal <input type="checkbox"/> Sponsor <input checked="" type="checkbox"/> External				Responsible Manager (Printed/Signature)			Date	<b>J. Kristofzski</b> <i>J. Kristofzski</i>			<b>3/9/94</b>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">INFORMATION RELEASE ADMINISTRATION APPROVAL STAMP</th> </tr> <tr> <td style="text-align: center;">Stamp is required before release. Release is contingent upon resolution of mandatory comments.</td> </tr> <tr> <td style="text-align: center;">  </td> </tr> <tr> <td style="text-align: center;">Date Cancelled</td> </tr> <tr> <td style="text-align: center;">Date Disapproved</td> </tr> </table>	INFORMATION RELEASE ADMINISTRATION APPROVAL STAMP	Stamp is required before release. Release is contingent upon resolution of mandatory comments.		Date Cancelled	Date Disapproved
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## DISTRIBUTION SHEET

To DISTRIBUTION	From PROCESSING AND ANALYTICAL LABORATORIES	Page 1 of 1
		Date: 02/01/94
Project Title/Work Order T-102 PNL SINGLE SHELL TANK WASTE CHARACTERIZATION		EDT NO.: 140716
		ECN NO.: 600930

Name	MSIN	Text With all Attach	Addendum 1A Only	EDT/ECN Only
<u>ONSITE</u>				
<u>Pacific Northwest Laboratory</u>				
S. J. Harris	K7-22		X	
P. G. Heasler	K7-34		X	
S. G. McKinley	P7-22		X	
J. L. Scott	P7-35		X	
<u>U.S. Department of Energy, RL</u>				
J. M. Clark	R3-72		X	
J. Noble-Dial	R3-72		X	
<u>Westinghouse Hanford Company</u>				
J. N. Appel	L6-29		X	
H. Babad	R2-78		X	
R. J. Cash	R2-78		X	
K. K. Giamberardini	T6-06		X	
C. E. Golberg	H5-49		X	
J. M. Henderson	S4-55		X	
D. C. Hetzer	S6-30		X	
L. Jensen	T6-07		X	
K. N. Pool	H4-23			X
A. F. Noonan	B1-40	X		
B. C. Simpson	R2-12		X	
M. J. Sutey	R1-49		X	
H. S. Rich	H4-23	X		
D. A. Turner	R2-78			X
J. A. Voogd	R4-01		X	
O. S. Wang	R2-78		X	
E. T. Weber	G6-08		X	
W. I. Winters	T6-50		X	
Central Files	L8-04	2		
EDMC	H6-08	X		
TFIC (Tank Farm Information Center)	R1-20		X	
<u>OFFSITE</u>				
<u>Washington State Department of Ecology</u>				
Single-Shell Tank Unit Manager		X		
S. E. McKinney				
P.O. Box 47600				
Olympia, Washington 98504-7600				
<u>Environmental Protection Agency</u>				
Single-Shell Tank Unit Manager			X	
D. R. Sherwood				
712 Swift Boulevard, Suite 5				
Richland, Washington 99352				