

START

ENGINEERING CHANGE NOTICE

1. ECN (use no. from pg. 1)
B-714-68

15. Design Verification Required <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	16. Cost Impact		17. Schedule Impact (days)	
	ENGINEERING	CONSTRUCTION	Improvement	Delay
	Additional <input checked="" type="checkbox"/> \$ 680	Additional <input type="checkbox"/> \$ 0.00	<input type="checkbox"/> N/A	<input type="checkbox"/> _____
	Savings <input type="checkbox"/> \$ _____	Savings <input type="checkbox"/> \$ _____		

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
<u>OPERATIONS AND ENGINEERING</u>			<u>ARCHITECT-ENGINEER</u>		
Cog./Project Engineer	Mgr. J E VANBEEK PER TELECON GPR	11/20/90	PE	GPR	11/20/90
Cog./Project Engr.	SR Brigg PER TELECON GPR	11/20/90	QA	L.A. Gaddy PER TELECON GPR	11/20/90
QA	JK COLEMAN PER TELECON GPR	11/20/90	Safety	J. Schuler	11-20-90
Safety	_____	_____	Design	M. Lee	11/20/90
Security	_____	_____	Other	R. Hollenbeck	11/20/90
Proj. Prog./Dept. Mgr.	_____	_____	_____	_____	_____
Def. React. Div.	_____	_____	_____	_____	_____
Chem. Proc. Div.	_____	_____	_____	_____	_____
Def. Wst. Mgmt. Div.	_____	_____	<u>DEPARTMENT OF ENERGY</u>		
Adv. React. Dev. Div.	_____	_____	_____	_____	_____
Proj. Dept.	_____	_____	_____	_____	_____
Environ. Div.	_____	_____	<u>ADDITIONAL</u>		
IRM Dept.	_____	_____	_____	_____	_____
Facility Rep. (Ops)	_____	_____	_____	_____	_____
Other	_____	_____	_____	_____	_____



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ENGINEERING CHANGE NOTICE

Page 1 of 3

1. ECN ~~XXXXXXXXXX~~

Proj. ECN B-714-68

2. ECN Category (mark one)
- Supplemental
 - Direct Revision
 - Change ECN
 - Temporary
 - Supersedeure
 - Discovery
 - Cancel/Void

3. Originator's Name, Organization, MSIN, and Telephone No.
G. L. Koci, KEH, E6-31, 6-6049

4. Date
11-20-90⁰⁰

5. Project Title/No./Work Order No.
SEE BLOCK 12

6. Bldg./Sys./Fac. No.
218-E-16

7. Impact Level
~~2~~ 3

8. Document Number Affected (include rev. and sheet no.)
SEE BLOCK 12

9. Related ECN No(s).
NA

10. Related PO No.
NA

- 11a. Modification Work
- Yes (fill out Blk. 11b)
 - No (NA Blks. 11b, 11c, 11d)
 - UNK

11b. Work Package Doc. No.
UNKNOWN

11c. Complete Installation Work

Cog. Engineer Signature & Date

11d. Complete Restoration (Temp. ECN only)

Cog. Engineer Signature & Date

12. Description of Change

BLOCK 5 : B-714, GROUT VAULT PAIR (218-E-16-102&103)(218-E-16-104&105)/ER8007

BLOCK 8: SPECIFICATION B-714-C2, REV 0(V-B714C2-003,REV 0)

SECTION 03301, Paragraph 3.2.3.2

Note NCR B-714-61 in margin for the exception of testing frequency for Vault 102 only

- 13a. Justification (mark one)
- Criteria Change
 - Design Improvement
 - Environmental
 - As-Found
 - Facilitate Const.
 - Const. Error/Omission
 - Design Error/Omission

13b. Justification Details

THIS IS A NON- GENERIC ECN FOR AS-BUILDING PURPOSES ONLY

See attached sheet (page 3) for justification

14. Distribution (include name, MSIN, and no. of copies)

<u>KEH DISTRIBUTION</u>		WHC DIST. (cont'd)	
Const Doc Cntl	E2-50	J. K. Epperley	S0-05
Engrg Doc Cntl	E6-52	O. A. Halverson	R3-09
		J. S. Hill	2 H4-57
		D. B. Powell	4 R4-03
		J. E. Vanbeek	R3-27
<u>WHC DISTRIBUTION</u>		<u>DOE</u>	
Project Files	R1-28	A. G. Lassila	A5-18
S. R. Briggs(PE	R3-27		
T. K. Cordray	S1-54		
STATION 10	A3-87		

RELEASE STAMP

OFFICIAL RELEASE BY WHC

DATE NOV 26 1990

STATION # 4

91120560321

13b. (Cont)

1. Sister splice testing provided by the contractor is less than specified but meets or exceeds the manufacturers recommended testing:
2@ 50, 2@ next 100, 2@ next 200 thereafter
2. There were no failures in any of the tests documented with an average of over 170 percent of the required strengths achieved in all tests.
3. Each of the splicers was prequalified for each position and bar size with test results consistent with sister splice data.
4. KEH provided ongoing overview and surveillance during both shifts worked.
5. Bar sizes 10 & 11 were considered the same in reviewing each splicers daily work and test results based on the identical installation process.
6. Additional testing will be performed for splicers MX and MZ on in-place bars.
7. Relaxation of sister splice testing requirements will not compromise the structural integrity of the vault.

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