

ENGINEERING CHANGE NOTICE

CECN

1. ECN 154109

Page 1 of 2

Proj. ECN

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

3. Originator's Name, Organization, MSIN, and Telephone No.  
 W55321/814907  
 P. W. Griffin, Decommissioning Engineering, R2-77, 3-3916

4. Date  
 6-30-92

5. Project Title/No./Work Order No.  
 Transfer Area Roof Replacement

6. Bldg./Sys./Fac. No.  
 105-F

7. Impact Level  
 4

8. Document Number Affected (include rev. and sheet no.)  
 HW-71816 Rev. 31 SH.1

9. Related ECN No(s).  
 154103

10. Related PO No.  
 NA

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

11b. Work Package Doc. No.  
 LOI#  
 9157960

11c. Complete Installation Work  
 Cog. Engineer Signature & Date

11d. Complete Restoration (Temp. ECN only)  
 Cog. Engineer Signature & Date

12. Description of Change

ECN 154103, Item 4, page 3 of 8 (Enclosed Area Updated)

IS 4) Flashing will be fabricated from 18 gauge galvanized sheet metal and will be attached to the wood by 1/2" sheet rock screws on 6" centers and to the decking by 3/4" to 1" #8 sheet metal screws every third flute. See page 4 (ECN 154103) for more details.

WAS See ECN 154103



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

13b. Justification Details

Replacing the deteriorated roof to protect the environment.

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

P.W. Griffin R2-77 (2)  
 D.R. Kachele S4-67 (1)  
 M.R. Morton R2-77 (1)

RELEASE STAMP

OFFICIAL RELEASE **17**  
 BY WHC  
 DATE JUL 02 1992  
 STA. 4

# ENGINEERING CHANGE NOTICE

154109

**15. Design Verification Required**

- Yes  
 No

**16. Cost Impact** NA  
ENGINEERING

- Additional  \$ \_\_\_\_\_  
Savings  \$ \_\_\_\_\_

CONSTRUCTION

- Additional  \$ \_\_\_\_\_  
Savings  \$ \_\_\_\_\_

**17. Schedule Impact (days)**  
NA

- 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.

|   |   |  |
|---|---|--|
| <input type="checkbox"/> 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"/> Environmental Report           | <input type="checkbox"/> Inspection Plan                  | _____  |
| <input type="checkbox"/> Environmental Permit           | <input type="checkbox"/> Inventory Adjustment Request     | _____  |

**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 <u>[Signature]</u>   | <u>6-30-92</u> | PE _____                    | _____ |
| Cog./Project Engr. Mgr. <u>[Signature]</u> | <u>6-30-92</u> | QA _____                    | _____ |
| QA _____                                   | _____          | Safety _____                | _____ |
| Safety <u>[Signature]</u>                  | <u>7-1-92</u>  | Design _____                | _____ |
| Security _____                             | _____          | Other _____                 | _____ |
| 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 _____                                | _____          | _____                       | _____ |