

ENGINEERING CHANGE NOTICE

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1. ECN ~~131558~~

Proj. ECN W-016-78

2. ECN Category (mark one)

- Supplemental
- Direct Revision
- Change ECN
- Temporary
- Supersedure
- Discovery
- Cancel/Void

3. Originator's Name, Organization, MSIN, and Telephone No.

K. Anderson, E2-30, 3-3399

4. Date

11/13/91

5. Project Title/No./Work Order No.

CR9605, RMW Storage, W-016

6. Bldg./Sys./Fac. No.

Fire Water

7. Impact Level

3 / SC3

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

Dwg. H-2-80896, SH1, Rev.1

9. Related ECN No(s).

N/A

10. Related PO No.

N/A

11a. Modification Work

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

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

1. Zone D-5

Revise FW line Size call out from 8" to 10" and change detail callout from Detail 2 to Detail 5 as shown on ECN sketch Pg. 3.

2. Zone B-3

Add Detail 5 as shown on ECN Sketch Pg. 4.

APPROVED FOR PUBLIC RELEASE

5/11/92 N. Solis

SC3



13a. Justification (mark one)

- Criteria Change
- Design Improvement
- Environmental
- As-Found
- Facilitate Const.
- Const. Error/Omission
- Design Error/Omission

13b. Justification Details

Existing FW Line was found to be 10" instead of 8".



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

KEH DISTRIBUTION  
Const Doc Cntl E2-50

WHC DISTRIBUTION

Project Files	R1-28
N. F. Barilo	R3-54
J. K. Epperley	R1-29
J. R. McGee	G6-47
P. J. McKenna	R3-54
H. E. Wellsfry(PE)	G6-47
T. L. Yount	G6-47
DOE/M. S. Collins	A5-18

WHC DISTR  
STA 10 A3-87  
STA 6 T2-03

RELEASE STAMP

OFFICIAL RELEASE  
BY WHC  
DATE NOV 22 1991

13

STA 4



# ENGINEERING CHANGE NOTICE

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1. ECN (use no. from pg. 1)  
W-016-78

**15. Design Verification Required**

Yes  
 No

**16. Cost Impact**

**ENGINEERING**

Additional  \$ 142  
Savings  \$ \_\_\_\_\_

**CONSTRUCTION**

Additional  \$ 100  
Savings  \$ \_\_\_\_\_

**17. Schedule Impact (days)**

Improvement  N/A  
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"/> Functional Design Criteria <input type="checkbox"/> Operating Specification <input type="checkbox"/> Criticality Specification <input type="checkbox"/> Conceptual Design Report <input type="checkbox"/> Equipment Spec. <input type="checkbox"/> Const. Spec. <input type="checkbox"/> Procurement Spec. <input type="checkbox"/> Vendor Information <input type="checkbox"/> OM Manual <input type="checkbox"/> FSAR/SAR <input type="checkbox"/> Safety Equipment List <input type="checkbox"/> Radiation Work Permit <input type="checkbox"/> Environmental Impact Statement <input type="checkbox"/> Environmental Report <input type="checkbox"/> Environmental Permit <input type="checkbox"/>	Seismic/Stress Analysis <input type="checkbox"/> Stress/Design Report <input type="checkbox"/> Interface Control Drawing <input type="checkbox"/> Calibration Procedure <input type="checkbox"/> Installation Procedure <input type="checkbox"/> Maintenance Procedure <input type="checkbox"/> Engineering Procedure <input type="checkbox"/> Operating Instruction <input type="checkbox"/> Operating Procedure <input type="checkbox"/> Operational Safety Requirement <input type="checkbox"/> IEFD Drawing <input type="checkbox"/> Cell Arrangement Drawing <input type="checkbox"/> Essential Material Specification <input type="checkbox"/> Fac. Proc. Samp. Schedule <input type="checkbox"/> Inspection Plan <input type="checkbox"/> Inventory Adjustment Request <input type="checkbox"/>	Tank Calibration Manual <input type="checkbox"/> Health Physics Procedure <input type="checkbox"/> Spares Multiple Unit Listing <input type="checkbox"/> Test Procedures/Specification <input type="checkbox"/> Component Index <input type="checkbox"/> ASME Coded Item <input type="checkbox"/> Human Factor Consideration <input type="checkbox"/> Computer Software <input type="checkbox"/> Electric Circuit Schedule <input type="checkbox"/> ICRS Procedure <input type="checkbox"/> Process Control Manual/Plan <input type="checkbox"/> Process Flow Chart <input type="checkbox"/> Purchase Requisition <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/>
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**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
<b>OPERATIONS AND ENGINEERING</b>		
Cog./Project Engineer	<u>[Signature]</u>	<u>11/20/91</u>
Cog./Project Engr. Mgr	<u>[Signature]</u>	<u>11/20/91</u>
QA	<u>[Signature]</u>	<u>11/20/91</u>
Safety	_____	_____
Security	_____	_____
Proj. Prog./Dept. Mgr.	_____	_____
Def. React. Div.	_____	_____
Chem. Proc. Div.	_____	_____
Def Wst. Mgmt. Div.	_____	_____
Adv. React. Dev. Div.	_____	_____
Proj. Dept.	_____	_____
Environ. Div.	_____	_____
IRM Dept.	_____	_____
Facility Rep. (Ops)	_____	_____
Other	_____	_____

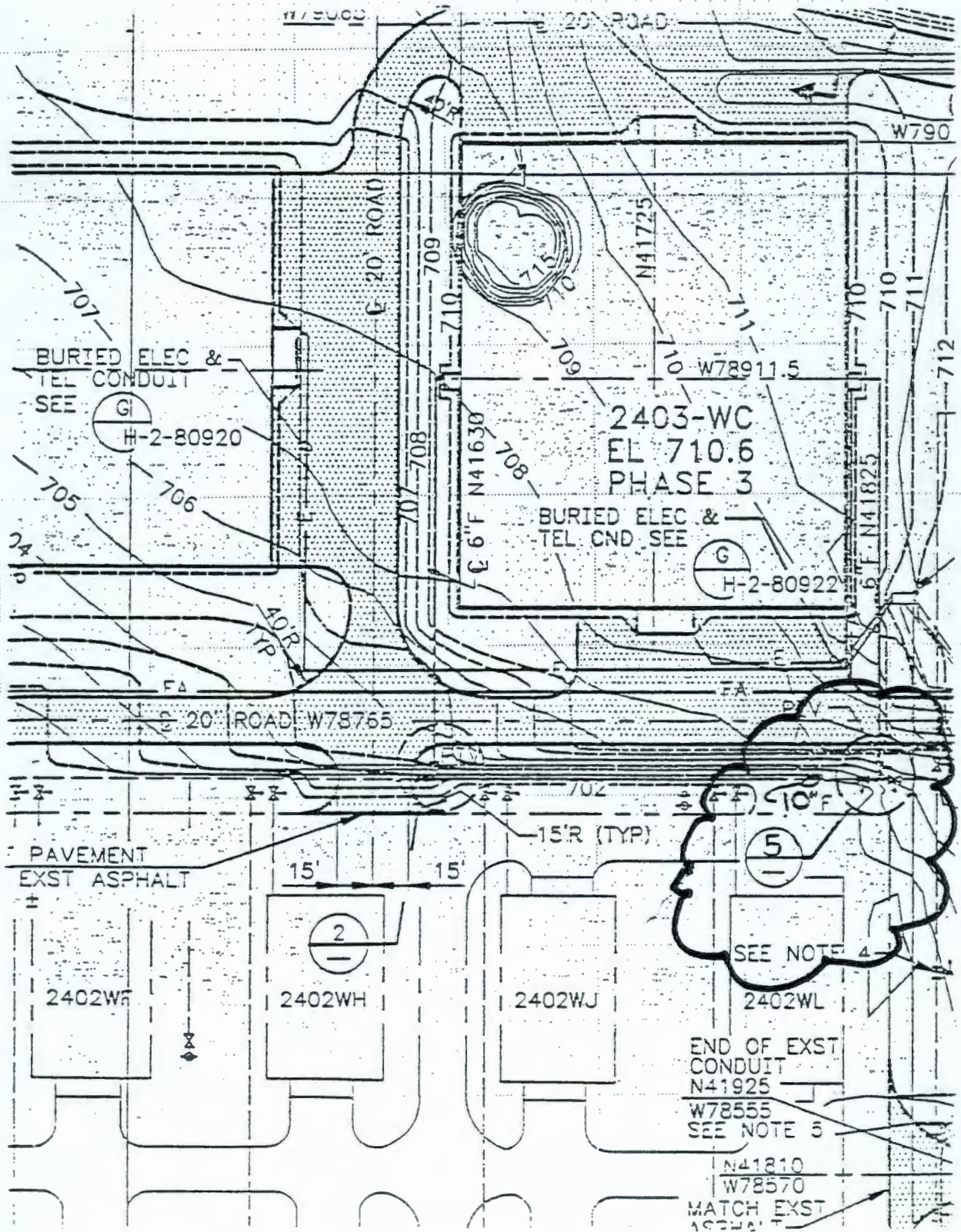
	Signature	Date
<b>ARCHITECT-ENGINEER</b>		
PE	<u>[Signature]</u>	<u>11/19/91</u>
QA	<u>[Signature]</u>	<u>11/19/91</u>
Safety	<u>[Signature]</u>	<u>11-19-91</u>
Design	<u>[Signature]</u>	<u>11-18-91</u>
Other	<u>[Signature]</u>	<u>11-19-91</u>

**DEPARTMENT OF ENERGY**

**ADDITIONAL**



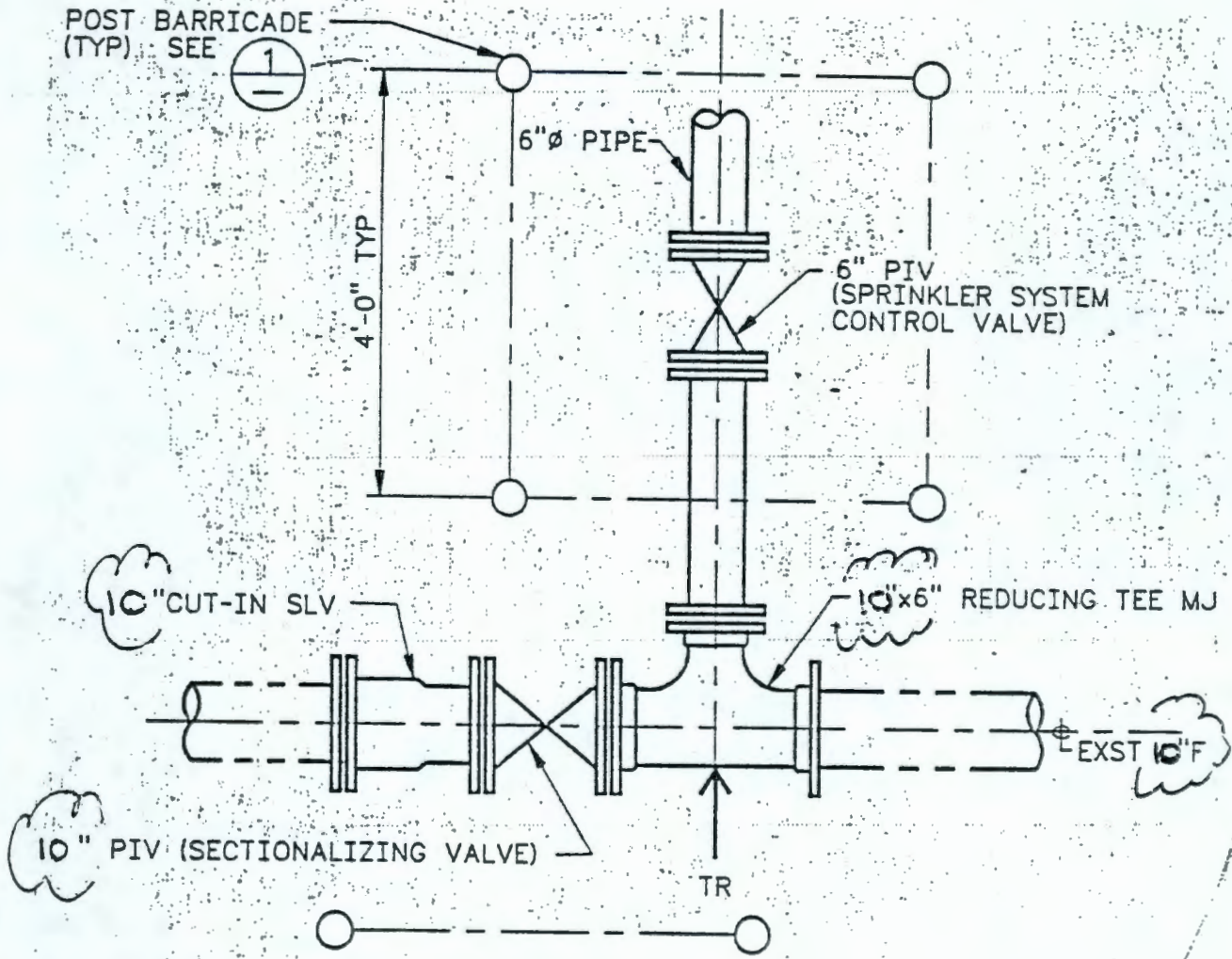
Ref. Dwg. <b>H-2-80896</b>	Sh. <b>1</b>	Rev. <b>1</b>	Prepared By <b>K ANDERSON</b>	Checked By <i>[Signature]</i>	ECN No. <b>W016-78</b>	Page <b>3/4</b>
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J16360030



Ref. Dwg. H-2-80296	Sh. 1	Rev. 1	Prepared By K ANDERSON	Checked By <i>R. D. ...</i>	ECN No. W016-78	Page 4/4
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6" F TIE-IN (1 PL) (5)

SCALE:  $\frac{3}{4} = 1'-0"$