

Status 2 - Disposition Needed **Trend** 07-Out Of Tolerance
Department NCSX **Division** WBS 121
Source/Org FABRICATION, OPERATIONS & MAINTENANCE
Item Dwg/Part# SE121-004, R1, Part #6 **Procurement #** D-NCSX-FPA-001 **Cost Center** _____
RAP# 3268 **Job Doc #** D-NCSX-FPA-001 **Vendor** _____
RAP Title Field Period Assembly Station One

HoldTag Applied

Nonconforming Condition (include requirement(s) violated):

VVSA Nos. 1, 2, and 3: The following welds exceed allowable magnetic permeability of 1.02 mu per C-Spec 185-01-00 3.2.1.4.6. The weld joint is where the two halves of the Cryostat Interface Mounting Flange weld together which is 316 stainless. There are two welds per mounting flange 1/4" thick, 1/8" wide by 2-1/2" long.

VVSA #1 - Port 12 bottom >1.8 mu to isolated spots 2.0 mu narrow and wide ends
 Port 12 top >1.3 mu <1.4 mu.

VVSA #2 - Port 12 bottom - narrow end >1.2 mu <1.3 mu wide end >1.3 mu <1.4 mu.
 Port 12 top narrow end >1.8 mu <2.0 mu wide end >1.5 mu <1.6 mu.

VVSA #3 - Port 12 bottom - narrow end >1.3 mu <1.4 mu wide end 1.4 mu to 1.5 mu.
 Port 12 top - narrow end >1.5 mu <1.6 mu wide end >1.8 mu <2.0 mu.

Lot Size Recd 0 **Sample Size Insp** 0 Lot Rejected **# Rejected** 0
Reported By Boscoe J **Validated By** Phelps C **Validated Date** 12/12/06

~~Disposition: Rework* ___ Repair* ___ Use As Is* ___ Return To Vendor* ___ Scrap* ___~~

~~For rework or repair of vendor supplied equipments, fill in information below:~~

~~**#Hours** _____ **\$Est Labor** _____ **\$G&A** _____
\$Material _____ **\$Burden** _____ **\$Total** _____
Disposition By _____ **Date** _____
Supervisor's Concur _____ **Date** _____
Eng. Dept. Head Concur _____ **Date** _____
WCO/Other _____ **Date** _____
PQA/QC Mgr Dispos Concur _____ **Date** _____
QC Field Verification By _____ **Date** _____~~

Distribution
Cog M. Viola
Insp Boscoe J
 Proj. Doc Control (when closed)
 QC Files
 Malsbury J
 Boscoe J
 J. Edwards
 L. Dudek
 Reiersen W
 Williams M
 Tyrrell M
 Phelps C

Disposition: Rework___ Repair ___ Use As Is___ Return to Vendor___ Scrap___

For rework or repair of vendor supplied equipment, fill in information below:

Hours _____ \$ Est Labor _____ \$ G&A _____
\$ Material _____ \$ Burden _____ \$ Total _____

Disposition by _____

Supervisor's Concurrence _____

Eng. Dept. Head Concurrence _____

Other (i.e., WCO/FPE) Concurrence _____

PQA/QC Mgr Disposition Concurrence _____

QA Field Verification by _____