EXHIBIT S

TEMPORARY CHANGE DFS-0112

CSGPO-453/0006
Pg. 1

EG&G

TEMPORARY CHANGE FORM

OPERATIONS

SYSTEM:	CHANGE NO:	REQUESTER:
DFS	0112	D. LEE 7735 (NAME AND PHONE) — [signature] 8 MAY 00 (SIGNATURE AND DATE)

CURRENT CONFIGURATION (Use additional sheets if necessary):

SYSTEM PURGE COMPLETE W/O FSLL 430 IN ALARM TO RELITE BURNERS

PROBLEM:

FSLL 430 WILL NOT STAY CLEARED TO ALLOW PURGE COMPLETE

PROPOSED CHANGE:

INSTALL JUMPER TO COMPLETE PURGE

PLANNED DATES: INSTALL 8 MAY TEST 8 MAY REMOVAL 9 MAY

Affected Key Procedures and Drawings:

APPROVAL TO PROCEED WITH A TEMPORARY CHANGE:

[signature] 8 May 00 — EG&G Plant Shift Manager (Signature & Date) ☐

[signature] 8 May 00 — EG&G Safety (Signature & Date) ☐

[signature] 8 May 00 — EG&G Environmental (Signature & Date) ☐

PER TELE COM FOR TUYNE EDYE — EG&G System Engineer (Signature & Date) ☐

[signature] 5-8-00 — EG&G QA (Signature & Date) ☐

*USE OF CHEMICAL DEMIL MATERIAL OR HAZARDOUS WASTE IS PLANNED IF THIS BOX IS INITIALED.
USE OF THESE MATERIALS IS AUTHORIZED ONLY IF EACH BOX ABOVE IS INSTALLED. ☐

INSTALLATION FUNCTION TEST PLAN ☒ Function Test required ☐ Function Test Not Required

WILL THIS T.C. REQUIRE >30 DAY LIMIT ☐ YES ☒ NO IF YES, is Extension attached? ☐ YES ☐ NO

CHANGE INSTALLATION: Installation of change is complete. Documentation must be attached to this form

Installer's Name (please print) Signature and Date

VALIDATION: The installed change is valid

CRS Name (please print) Signature and Date

UNSUCCESSFUL VALIDATION COMMENTS:

* NEVER INSTALLED DUE TO UPSET IN DFS & AGENT ALARMS

Function Test Plan

ECP #: _____

Sheet 1 of 1

TITLE: DFS 112

	Description	Notes	EG&G	QA	Govt	Time	Date
Purpose	JUMPER FSLL FOR SYSTEM PURGE						
Acceptance Criteria	VERIFY PURGE COMPLETE						
1	INSTALL JUMPER ON FSLL A30						
2	VERIFY FSLL BLEDDED						
3							
4							
5							
6							
7							
8							
9							
10							

Note: QA/QC verification is only required for SAIL items.

P EN-012-06.0
IS DOCUMENT IS A RECORD

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EG&G

TEMPORARY CHANGE FORM

OPERATIONS

SYSTEM:	CHANGE NO:	REQUESTER:
DFS	112	Drew 7135 NAME AND PHONE — [signature] 8 MAY 00 SIGNATURE AND DATE

REMOVAL AUTHORIZATION: Removal of change is authorized

Plant Shift Manager (please print) Signature and Date

FUNCTION TEST WAIVER: Function Test is not required for removal

Plant Shift Manager (please print) Signature and Date

FUNCTION TEST REQUIRED:

Prepared by (please print) Signature and Date

CHANGE REMOVAL: Removal of change is complete

Documentation Complete ☐ YES ☐ NO

Remover's Name (please print) Signature and Date

CRS VALIDATION: Normal function is restored

☐ Actual Removal ☐ Admin Removal ECP #_____

CRS Name (please print) Signature and Date

COMMENTS: Initial and date each comment or note

PRP-OP-009-05.R6