

GUIDE FOR COMPLETING FORM NR-1, REPORT OF REPAIR/REPLACEMENT ACTIVITIES FOR NUCLEAR FACILITIES, NB-81

Reference to Circled Numbers in the Form	Description
	Title Block: Check type of activity, repair/replacement and/or rerating, as applicable.
	Check category of activity, 1, 2, or 3, as described in Part 3, Paragraph 1.6.2.
(1)	Name and address of the organization, as shown on the National Board "NR" Certificate of Authorization, which performed the activity.
(2)	Indicate NR Form Registration Number.
(3)	Indicate the repair/replacement plan, job number, etc., as applicable, assigned by the organization that performed the work for traceability to documentation.
(4)	Name and address of the owner of the nuclear facility.
(5)	Name and address of the nuclear power plant and, if applicable, identification of the unit.
(6)	Identify the system or component (e.g., residual heat removal, reactor coolant) with which the repair/replacement and/or re-rating activity is associated.
(7)	Identify the original design specification number and revision for the system or component listed in line 4.
(8)	Identify the original construction code, section, edition/addenda and applicable code cases used for the system or component identified in line 4.
(9)	NBIC Edition used for performing activities specified on this form.
(10)	Organization having responsibility for design when there is a change from the original design specification.
(11)	Identify code, section, edition/addenda and applicable code cases used for design, when applicable.
(12)	Check the type of test conducted (e.g., hydrostatic, pneumatic, system leakage, exempt, or other) and indicate the pressure applied when applicable.
(13)	Indicate the number of components where work was performed. Each component shall be indicated on page 2 of the form NR-1.
(14)	Provide a detailed summary describing the scope of work completed. Information to be considered should include type of work (welding, brazing, fusing), location, steps taken for removal or acceptance of defects, examinations, testing, heat treat, and other special processes or methods utilized. If Necessary, attach additional data, sketch, drawing, Form R-4, etc. In the remarks section state if additional data is attached.
(15)	Indicate any additional information pertaining to the work, including manufacturer's data reports.

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Reference to Circled Numbers in the Form	Description
(16)	Number in sequence beginning with No. 1 to identify each component work was performed. This number may be used to correspond with the detailed description of work performed.
(17)	Identify the type of item. i.e. piping, pump, valve, etc.
(18)	Identify the manufacturer's name of component.
(19)	Identify the manufacturer's serial no. or other assigned number for traceability.
(20)	Identify the National Board registration number, if previously assigned.
(21)	Identify the code class criteria, as assigned for each component.
(22)	Identify the code section used to perform work.
(23)	Identify Code section year and/or addenda used to perform work.
(24)	Identify any code cases used for work performed.
(25)	Identify any revisions to be made to the design specifications or if any design reconciliations were performed.
(26)	Type or print name of authorized representative from the certificate holder.
(27)	Name of the organization that performed the identified work, using the full name as shown on the Certificate of Authorization, or an abbreviation acceptable to the National Board.
(28)	Indicate code section as applicable to the repair/replacement activity and/or re-rating activity performed.
(29)	Indicate National Board Certificate of Authorization number.
(30)	Indicate month, day, and year the certificate expires.
(31)	Signature of authorized representative from the NR certificate holder.
(32)	Indicate month, day and year of signature by the Authorized Representative.
(33)	Title of authorized representative as defined in the Quality Program.
(34)	Type or print name of Authorized Nuclear Inspector.
(35)	Indicate the Jurisdiction where the activity is performed, when required.
(36)	Indicate Authorized Nuclear Inspector's employer.
(37)	Indicate month, day, and year of inspection by the Authorized Nuclear Inspector.

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Reference to Circled Numbers in the Form	Description
(38)	Signature of Authorized Nuclear Inspector.
(39)	Indicate month, day, and year of signature by the Authorized Nuclear Inspector.
(40)	National Board Commission number and required endorsements.

FORM NR-1, REPORT OF REPAIR/REPLACEMENT ACTIVITIES FOR NUCLEAR FACILITIES

CATEGORY OF ACTIVITY: 1 2 3

REPAIR/REPLACEMENT RE-RATING

②

(NB Form Registration No.)

③

(R/R Plan No., Job No., etc.)

1. WORK PERFORMED BY: ① _____
(name of "NR" certificate holder)

(address)

2. OWNER: ④ _____
(name)

(address)

3. NAME, ADDRESS, AND IDENTIFICATION OF NUCLEAR FACILITY: _____ ⑤
(name)

(address)

(unit identification)

4. SYSTEM/COMPONENT: _____ ⑥ ORIGINAL DESIGN SPECIFICATION NO./REV.: _____ ⑦

5. CONSTRUCTION CODE, SECTION & EDITION/ADDENDA AND APPLICABLE CODE CASES USED FOR THE SYSTEM OR COMPONENT: _____ ⑧

6. NBIC EDITION USED FOR PERFORMING REPAIRS/REPLACEMENT OR RE-RATING ACTIVITY: _____ ⑨

7. DESIGN RESPONSIBILITY: _____ ⑩ CODE and ED/AD: _____ ⑪

8. TESTS CONDUCTED: Hydrostatic Pneumatic System Leakage Pressure _____ psi (MPa)
⑫ Exempt Other _____

9. NUMBER OF COMPONENTS REPAIRED/REPLACED AND/OR RE-RATED (refer to page 2): _____ ⑬

10. DESCRIPTION OF WORK (use of properly identified additional sheet[s] or sketch[es] is acceptable): _____ ⑭

11. REMARKS: _____ ⑮

②

(NR Form Registration No.)

③

(R/R Plan No., Job No., etc.)

WORK PERFORMED BY:

①

(Name of "NR" certificate holder)

(Address of "NR" certificate holder)

COMPONENT IDENTIFICATION

No.	Type of Item	Mfg. Name	Serial No.	Nat'l Bd No.	Code Class	Code Section	Year/ Addenda	Code Case	Revised Design Specification No./Rev. or Design Reconciliation No./Rev.
①⑥	①⑦	①⑧	①⑨	②⑩	②①	②②	②③	②④	②⑤

