

# DIRECTIVES CONTROL FORM - DOE FINAL ORDER

**PART A** (To be completed by the **DIRECTIVES MANAGEMENT GROUP, AD-440**):

TO: **DIRECTOR, DIVISION OF PRIMARY INTEREST:** P. S. Garcia, Director, Office of Safeguards and Security, OS-20

**NUMBER, TITLE, AND DATE OF DIRECTIVE:** DOE N 473.6, SECURITY CONDITIONS, of 09/18/2000

The attached directive, which is within your area of functional responsibility, is forwarded for review and necessary action. Complete Part B and forward this form to AD-440 by 10/17/2000.

**PART B** (To be completed by the **DIVISION OF PRIMARY INTEREST (DPI)**):

**1. THIS DOCUMENT MAY AFFECT THE WORK PERFORMED BY THE FOLLOWING CONTRACTORS:**

(Check Appropriate Boxes)

No (all contractors)

Yes If yes, whom?  LMES  ORAU  SURA  Bechtel Jacobs Company

UT-BATTELLE

Other contractors (list by type) WSI-OR

*Many ORO Contractors have approved S/RIDs or WSS sets that may affect applicability of contractor requirements from this directive. Applicability of contractor requirements must take into account the approved standards set for each particular contract.*

**2. IMPLEMENTATION:** Does the Order contain special implementation requirements and/or dates?

No  Yes If yes, describe:

**3. SIGNIFICANT PROVISIONS :** Are there any significant changes or impact?  No  Yes If yes, describe.

**4. OAK RIDGE OPERATIONS OFFICE ORDER:** Is new ORO O or revision required? Yes  No

If yes, target date for submission of draft ORO O to AD-440 is \_\_\_\_\_.

**5. IDENTIFY CONTACT POINT:** Wayne Yoder & Dona St Pierre 575-2253 241-8138  
Name Telephone

**6. APPROVED BY DIRECTOR:** Original signed by Dona St Pierre for  
P. S. Garcia, Dir., OS-20 10/20/2000 576-1858  
Signature Date Telephone

**7. DOE Orders are available on the Internet at <http://www.explorer.doe.gov/>. Orders will no longer be mailed in printed copy unless you do not have Internet capabilities.**

**PART C** (To be completed by the **DIRECTIVES MANAGEMENT GROUP (DMG)**):

APPROVED FOR DISTRIBUTION IN ACCORDANCE WITH OFFICIAL DIRECTIVE DISTRIBUTION LIST:

*Original signed by*

Jennifer Hamilton Cusick

Name

10/23/2000

Date

**INSTRUCTIONS TO ADDRESSEES: THIS FORM IS TO BE FILED WITH THE DIRECTIVE AND RETAINED.**

Revised 03/31/2000)