

Appendix C  
Required Forms

DD Form 1952

DA Form 3337

ENG Form 3309-R

ENG Form 4790-R

NRC Form 3 (For Reference only, not to full scale as required  
(17" by 11"))

USAIRDC Computer Generated version of NRC Form 5

NRC Form 241

NRC Form 313

NRC Form 314

30 May 97

DOSIMETER APPLICATION AND RECORD OF OCCUPATIONAL RADIATION EXPOSURE						
<i>Print legibly or type all information requested. See Privacy Act Statement on reverse.</i>						
1. FULL NAME (Last, First, Middle)		2. DATE OF BIRTH (YYMMDD)		3. SOCIAL SECURITY NO.		
4. DUTY SECTION (Dept., Ward, Unit, etc.)		5. JOB TITLE		6. DUTY PHONE		
7. PAY GRADE CIVILIAN <input type="checkbox"/> MILITARY <input type="checkbox"/>		8. HAVE YOU WORN A DOSIMETER ISSUED BY THIS COMMAND IN THE PAST <input type="checkbox"/> YES <input type="checkbox"/> NO		9. DATE OF RADIATION PHYSICAL (YYMMDD)		
10. DUTY STATUS <input type="checkbox"/> PERMANENT <input type="checkbox"/> TRANSIENT 6 WEEKS OR LESS		10. IF TRANSIENT SHOW MAILING ADDRESS (street address, city, state, zip code) OF LOCATION OF HEALTH RECORDS				
EXPOSURE INFORMATION (ITEMS 11 THROUGH 20 FOR HEALTH PHYSICS USE ONLY)						
11. CLASSIFICATION OF EXPOSURE <input type="checkbox"/> EXTERNAL <input type="checkbox"/> NEUTRON <input type="checkbox"/> INTERNAL						
12. BADGES REQUIRED <input type="checkbox"/> WRIST <input type="checkbox"/> WHOLE-BODY <input type="checkbox"/> NEUTRON			13. TLD REQUIRED <input type="checkbox"/> WRIST <input type="checkbox"/> WHOLE-BODY <input type="checkbox"/> FINGER			
14. BIOASSAYS REQUIRED						
WHOLE-BODY COUNT <input type="checkbox"/> YES <input type="checkbox"/> NO		THYROID UPTAKE <input type="checkbox"/> YES <input type="checkbox"/> NO		URINALYSIS <input type="checkbox"/> $\alpha$ <input type="checkbox"/> $\beta$ <input type="checkbox"/> $\beta$ - $\gamma$		
GIVE DATES FOR ITEMS 15 THROUGH 20 (YYMMDD)						
15. DOSIMETER(S) ISSUED		16. DD FORM(S) 1141 INITIATED		17. DOSIMETER(S) DISCONTINUED		
18. LAST DOSIMETER(S) RETURNED		19. LOCATOR CARD TO HEALTH RECORD		20. DD FORM(S) 1141 TO MEDICAL RECORDS		
OCCUPATIONAL EXPOSURE HISTORY						
NOTE: This section only applies to the individual who has worked with radiation-producing devices or radioisotopes in a permanent status. List only those employers for whom you worked with radiation.						
NAME OF EMPLOYER	ADDRESS <small>(street address, city, state, zip code)</small>	FROM		TO		Do not write in this space
		YR	MO	YR	MO	
TOTAL EXPOSURE DATA						
REMARKS						

DD FORM 81 NOV 1952

EDITION OF 1 SEP 74 IS OBSOLETE AND REPLACES DD FORM 1952, (see reverse) PRIVACY ACT STATEMENT, SEP 75, WHICH IS OBSOLETE.

30 May 97

## DETACH INSTRUCTIONS SHEET BEFORE SUBMITTING APPLICATION

## INSTRUCTIONS FOR PREPARING DA FORM 3337

## GENERAL INSTRUCTIONS

An applicant for a DA Radiation Authorization or Permit should complete DA Form 3337 in detail. The completed form will be submitted through channels to Chief, Safety Office, DARCOM, ATTN: DRCSF-P, 5001 Eisenhower Avenue, Alexandria, VA 22333. Four signed and dated copies of the application are required.

Complete items 1 through 20c of DA Form 3337 if this is an initial application or a renewal application. Information for items 8 through 15 contained in previous applications filed with the Chief, Safety Office, DARCOM

may be included by reference provided references are clear and specific. Use supplemental sheets when necessary to provide complete information. Items 19 through 20c must be completed on all applications.

Ensure that applications are completed and detailed. Submitting an incomplete application will result in a delay in issuing the DA authorization or permit.

After the application is approved, the applicant will receive a DA authorization or permit according to the general requirements of AR 385-11.

## SPECIFIC INSTRUCTIONS

Check appropriate box to indicate whether application is for a DA "Authorization" or "Permit."

ITEMS 1 AND 2 – The "Applicant" is the organization or person legally responsible for possession and use of the radiation source(s) listed in the application.

ITEM 3 - Indicate the address where the radiation source(s) will be used or stored if different from that listed in item 2. A Post Office box is *not* acceptable.

ITEM 4 – The "Department" is the department or similar subdivision that has field responsibility for the radiation source(s).

ITEM 5- Show whether numbers denote an NRC license or DA authorization or permit.

ITEM 6- The "Individual User" is the person who will be responsible for the use and safe handling of radiation source(s).

ITEM 7 – Include name of Army or Contractor RPO.

ITEM 8 – List by name each radioactive material needed, such as Ra- 226, etc. List electronic radiation devices by type and parameters, such as industrial x-ray, 150 KVP, 20 MA.

ITEM 9 - List chemical and/or physical form for each radioactive byproduct material. List the quantity in millicuries of each material the applicant needs to have authorized for use. If more than one chemical or physical form of a particular radioisotope is needed, a separate possession limit will be stated for each form. For example, an applicant needing two chemical forms of Radium-226 must list both forms and the possession limit for both.

## EXAMPLE :

Ra-226	Ra Sulphate (Sealed Source)	10 millicuries
Ra-226	Radium Chloride in Solution	1 millicurie

If the radioactive material is to be obtained as a sealed source(s), specify the amount of activity in each sealed source, the manufacturer's name, and the model number.

## EXAMPLE :

Ra-226	2 sealed sources, 25 mc each 50 millicuries (US Radium Corp., Model 3-124)
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ITEM 10- State the use of each radioactive material and chemical form specified in items 8 and 9.

ITEMS 11 AND 12 – These items must be completed for each individual named in items 6 and 7. If more than one individual is listed in items 6 and 7, clearly key the name of each individual to his or her experience. Work experience or on-the-job training should be commensurate with proposed use.

ITEMS 13 THROUGH 16- Self-explanatory.

ITEM 17- Include procedures for property decontamination and restoration.

ITEM 18- Self-explanatory.

ITEMS 19 THROUGH 20c – Application must be signed by responsible Official, e.g., Commander or Corporate President.

ER 385-1-80

30 May 97

APPLICATION FOR DEPARTMENT OF THE ARMY RADIATION AUTHORIZATION OR PERMIT					<input type="checkbox"/> AUTHORIZATION	
For use of this form, see AR 385-11; the proponent agency is DARCOM.					<input type="checkbox"/> PERMIT	
READ ATTACHED INSTRUCTIONS BEFORE COMPLETING THIS FORM						
1. NAME OF APPLICANT			2. ADDRESS (Include ZIP Code)			
3. ARMY INSTALLATION AND EXACT LOCATION(S) WHERE RADIOACTIVE MATERIAL WILL BE STORED OR USED						
4. DEPARTMENT TO USE RADIOACTIVE MATERIAL			5. DA AUTHORIZATION/PERMIT NUMBERS, NRC AND/OR AGREEMENT STATE LICENSE NUMBERS CURRENTLY HELD			
6. INDIVIDUAL USER(S) (Name and title of individual(s) who will use or directly supervise use of byproduct material. Give training and experience in items 11 and 12.)				7. RADIATION PROTECTION OFFICER (RPO) (Name of person designated as RPO if other than individual user. Attach resume of training and experience as in items 11 and 12.)		
8. RADIATION DEVICES (List voltage and amperage.)			9. CHEMICAL AND/OR PHYSICAL FORM AND MAXIMUM AMOUNT OF RADIOACTIVE MATERIAL (List chemical and/or physical form and maximum amount (in millicuries) of each radioactive material that you will possess at any one time.) (If sealed source(s), also state name of manufacturer, model number, number of sources, and maximum activity per source.)			
10. STATE PURPOSE FOR WHICH RADIOACTIVE MATERIAL OR SOURCES WILL BE USED (Include the make and model number of the storage container and/or device in which the source(s) will be stored and/or used.)						
11. TRAINING (Indicate training of each individual named in item 6.) (Use supplemental sheets if necessary.)						
TYPE OF TRAINING	WHEN AND WHERE TRAINED <i>(Give name of person or school providing training.)</i>	DURATION OF TRAINING	ON THE JOB		FORMAL COURSE	
			YES	NO	YES	NO
a. Principles and practices of radiation protection.						
b. Radioactivity measurement standardization and monitoring techniques and instruments.						
c. Mathematics and calculations basic to the use and measurement of radioactivity.						
d. Biological effects of radiation.						
12. EXPERIENCE WITH RADIATION (Indicate actual use of radioisotopes or equivalent experience.)						
ISOTOPE	MAXIMUM AMOUNT	WHEN AND WHERE EXPERIENCE WAS GAINED	DURATION OF EXPERIENCE	TYPE OF USE		

13. RADIATION DETECTION INSTRUMENTS (FOR USE BY RADIATION PROTECTION PERSONNEL) <i>(Use supplemental sheets if necessary.)</i>					
TYPE OF INSTRUMENTS <i>(Make and model number of each)</i>	NUMBER AVAILABLE	RADIATION DETECTED	SENSITIVITY RANGE (mr/hr)	WINDOW THICKNESS (mg/cm <sup>2</sup> )	USE <i>(Monitor - Survey - Measure)</i>
14. METHOD, FREQUENCY, AND STANDARDS USED IN CALIBRATING INSTRUMENTS LISTED ABOVE					
15. FILM BADGES, DOSIMETERS, AND BIO-ASSAY PROCEDURES USED <i>(For film badges, specify method of calibrating and processing, or name of supplier.)</i>					
16. DESCRIBE PROJECT, EXPERIMENT, ETC. <i>(Include major facilities and equipment to be used.)</i>					
17. RADIATION PROTECTION PROGRAM <i>(Applicable to use at the installation(s) named in item 3)</i>					
18. WASTE DISPOSAL <i>(NOTE: No radioactive material may be ultimately disposed of at Army installations except as provided in para 5-15, AR 385-11.)</i>					
19. STATEMENT					
THE APPLICANT OR ANY OFFICIAL FILING THIS APPLICATION ON BEHALF OF THE APPLICANT NAMED IN ITEM 1 STATES THAT ALL INFORMATION CONTAINED HERE, AND IN ATTACHED SUPPLEMENTS, IS CORRECT.					
20a. DATE	20b. TYPED NAME AND TITLE		20c. SIGNATURE		

ER 385-1-80

30 May 97

RECORD OF RADIOACTIVE MATERIAL					
THRU:		TO:		FROM:	
DEVICE CONTAINING SOURCE			SOURCE		
NAME (Source set, Density gauge, etc.)			ELEMENT/ISOTOPE		
			TYPE (Form)		
MANUFACTURER			INITIAL ACTIVITY/DATED		
			MANUFACTURER		
MODEL NO.					
SERIAL NO.			MODEL NO.		
NRC LICENSE NO.			SERIAL NO(S).		
RADIATION PROTECTION OFFICER					
CHRONOLOGICAL RECORD					
DATE	ACTION OR EVENT RECORDED <i>(Received from, leak tested, used by, transferred to, disposed of, etc. . .)</i>	REMARKS <i>(Report leak test results in microcuries)</i>	INITIAL		

REQUEST FOR AUTHORIZATION TO TRANSFER RADIOACTIVE MATERIAL <i>(ER 385-1-80)</i>					DATE
THRU:	TO:	FROM:			
<b>1. REQUESTOR (USACE Command)</b>					
NRC LICENSE, DA OR USACE AUTHORIZATION NUMBER:			NAME AND ADDRESS:		
<b>2. ITEMS TO BE TRANSFERRED</b>					
<b>EQUIPMENT (Source Containing or Using)</b>				<b>SOURCE (Radioactive Material)</b>	
TYPE	MANUFACTURER	MODEL	SERIAL NUMBER	ELEMENT AND MASS. NO.	ACTIVITY
<b>3. RECEIVER (USACE Command, Firm)</b>					
NRC LICENSE, DA OR USACE AUTHORIZATION NUMBER:			NAME AND ADDRESS:		
TITLE (Requesting RPO):			SIGNATURE:		DATE
<b>4. HQUSACE APPROVAL:</b>  <input type="checkbox"/> APPROVED  <input type="checkbox"/> DISAPPROVED			<b>COMMENTS:</b>  _____  _____		



# NOTICE TO EMPLOYEES

STANDARDS FOR PROTECTION AGAINST RADIATION (PART 20); NOTICES, INSTRUCTIONS AND REPORTS TO WORKERS; INSPECTIONS (PART 19); EMPLOYEE PROTECTION

### WHAT IS THE NUCLEAR REGULATORY COMMISSION?

The Nuclear Regulatory Commission is an independent Federal regulatory agency responsible for licensing and inspecting nuclear power plants and other commercial uses of radioactive materials.

### WHAT DOES THE NRC DO?

The NRC's primary responsibility is to ensure that workers and the public are protected from unnecessary or excessive exposure to radiation and that nuclear facilities, including power plants, are constructed to high quality standards and operated in a safe manner. The NRC does this by establishing requirements in Title 10 of the Code of Federal Regulations (10 CFR) and in licenses issued to nuclear users.

### WHAT RESPONSIBILITY DOES MY EMPLOYER HAVE?

Any company that conducts activities licensed by the NRC must comply with the NRC's requirements. If a company violates NRC requirements, it can be fined or have its license modified, suspended or revoked.

Your employer must tell you which NRC radiation requirements apply to your work and must post NRC Notices of Violation involving radiological working conditions.

### WHAT IS MY RESPONSIBILITY?

For your own protection and the protection of your co-workers, you should know how NRC requirements relate to your work and should obey them. If you observe violations of the requirements or have a safety concern, you should report them.

### WHAT IF I CAUSE A VIOLATION?

If you engaged in deliberate misconduct that may cause a violation of the NRC requirements, or would have caused a violation if it had not been detected, or deliberately provided inaccurate or incomplete information to either the NRC or to your employer, you may be subject to enforcement action. If you report such a violation, the NRC will consider the circumstances surrounding your reporting in determining the appropriate enforcement action, if any.

### HOW DO I REPORT VIOLATIONS AND SAFETY CONCERNS?

If you believe that violations of NRC rules or the terms of the license have occurred, or if you have a safety concern, you should report them immediately to your supervisor. You may report violations or safety concerns directly to the NRC. However, the NRC encourages you to raise

your concerns with the licensee since it is the licensee who has the primary responsibility for, and is most able to ensure, safe operation of nuclear facilities. If you choose to report your concern directly to the NRC, you may report this to an NRC inspector or call or write to the NRC Regional Office serving your area. If you send your concern in writing, it will assist the NRC in protecting your identity if you clearly state in the beginning of your letter that you have a safety concern or that you are submitting an allegation. The NRC's toll free SAFETY HOTLINE for reporting safety concerns is listed below. Its addresses for the NRC Regional Offices and the toll free telephone numbers are also listed below.

### WHAT IF I WORK WITH RADIOACTIVE MATERIAL OR IN THE VICINITY OF A RADIOACTIVE SOURCE?

If you work with radioactive materials or near a radiation source, the amount of radiation exposure that you are permitted to receive may be limited by NRC regulations. The limits on your exposure are contained in sections 20.1201, 20.1207, and 20.1206 of Title 10 of the Code of Federal Regulations (10 CFR 20) depending on the part of the regulations to which your employer is subject. While these are the maximum allowable limits, your employer should also keep your radiation exposure as far below these limits as "reasonably achievable."

### MAY I GET A RECORD OF MY RADIATION EXPOSURE?

Yes. Your employer is required to advise you of your dose annually if you are exposed to radiation for which monitoring was required by NRC. In addition, you may request a written report of your exposure when you leave your job.

### HOW ARE VIOLATIONS OF NRC REQUIREMENTS IDENTIFIED?

NRC conducts regular inspections at licensed facilities to assure compliance with NRC requirements. In addition, your employer and site contractors conduct their own inspections to assure compliance. As inspectors are protected by Federal law, interference with them may result in criminal prosecution for a Federal offense.

### MAY I TALK WITH AN NRC INSPECTOR?

Yes. NRC inspectors want to talk to you if you are worried about radiation safety or have other safety concerns about licensed activities, such as the quality of construction or operations at your facility. Your employer may not prevent you from talking with an inspector. The NRC will make all reasonable efforts to protect you openly where appropriate and possible.

### MAY I REQUEST AN INSPECTION?

Yes. If you believe that your employer has not corrected violations involving radiological working conditions, you may request an inspection.

Your request should be addressed to the nearest NRC Regional Office and must describe the alleged violation in detail. It must be signed by you or your representative.

### HOW DO I CONTACT THE NRC?

Talk to an NRC inspector on-site or call or write to the nearest NRC Regional Office in your geographical area (see map below). If you call the NRC's toll free SAFETY HOTLINE during normal business hours, your call will automatically be directed to the NRC Regional Office for your geographical area. If you call after normal business hours, your call will be directed to the NRC's Headquarters Operations Center, which is manned 24 hours a day.

### CAN I BE FIRED FOR RAISING A SAFETY CONCERN?

Federal law prohibits an employer from firing or otherwise discriminating against you for bringing safety concerns to the attention of your employer or the NRC. You may not be fired or discriminated against because you:

- ask the NRC to enforce its rules against your employer;
- refuse to engage in activities which violate NRC requirements;
- provide information or are about to provide information to the NRC or your employer about violations of requirements or safety concerns;
- are about to ask for, or testify, help, or take part in an NRC, Congressional, or any Federal or State proceeding.

### WHAT FORMS OF DISCRIMINATION ARE PROHIBITED?

It is unlawful for an employer to fire you or discriminate against you with respect to pay, benefits, or working conditions because you help the NRC or raise a safety issue or otherwise discourage you from engaging in protected activities. Violations of Section 211 of the Energy Reorganization Act (ERA) of 1974 (42 U.S.C. 5851) include the harassment and intimidation by employers of (i) employees who bring safety concerns directly to their employers or to the NRC, (ii) employees who have refused to engage in an unlawful practice, provided that the employee has identified the illegality to the employer, (iii) employees who have testified or are about to testify before Congress or in any Federal or State proceeding regarding any provision for proposed provisions of the ERA or the Atomic Energy Act (AEA) of 1954, (iv) employees who have commenced or caused to be commenced a proceeding for the administration or enforcement of any requirement imposed under the ERA or AEA or who have, or are about to, testify, assist, or participate in such a proceeding.

### HOW DO I FILE A DISCRIMINATION COMPLAINT?

If you believe that you have been discriminated against for bringing violations or safety concerns to the NRC or your employer, you may file a

complaint with the U.S. Department of Labor (DOL) pursuant to Section 211 of the ERA. Your complaint must describe the firing or discrimination and must be filed within 180 days of the occurrence. Filing an allegation, complaint, or request for action with the NRC does not extend the requirement to file a complaint with the DOL within 180 days. You must file the complaint with the DOL. The NRC cannot file the complaint for you.

### Send complaints to:

Office of the Administrator  
Wage and Hour Division, Room S3502  
Employment Standards Administration  
U.S. Department of Labor  
Constitution Avenue, NW  
Washington, DC 20210

or any local office of the DOL, Wage and Hour Division. Check your telephone directory under U.S. Government listings.

### WHAT CAN THE DEPARTMENT OF LABOR DO?

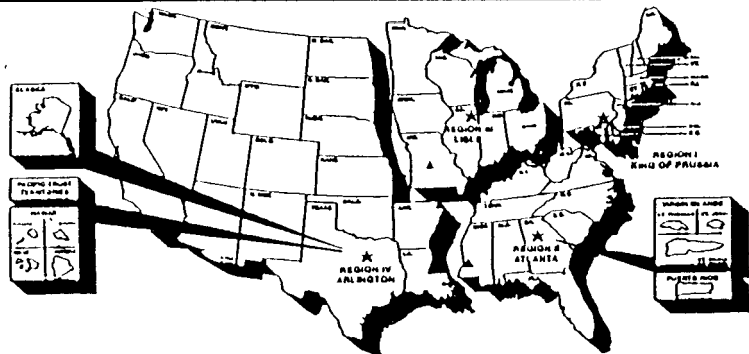
If your complaint involves a violation of Section 211 of the ERA by your employer, it is the DOL, NOT THE NRC, that provides the process for obtaining a personal remedy. The DOL will notify your employer that a complaint has been filed and will investigate your complaint.

If the DOL finds that your employer has unlawfully discriminated against you, it may order that you be reinstated, receive back pay, or be compensated for any injury suffered as a result of the discrimination.

### WHAT WILL THE NRC DO?

The NRC will evaluate each allegation of harassment, intimidation, or discrimination. Following this evaluation, an investigator from the NRC's Office of Investigations may interview you and review available documentation. Based on the evaluation and, if applicable, the interview, the NRC will assign a priority and a decision will be made whether to pursue the matter further through an investigation. The assigned priority is based on the specifics of the case and its significance relative to other ongoing investigations. The NRC may not pursue an investigation to the point that a conclusion can be made whether the harassment, intimidation, or discrimination actually occurred. Even if NRC decides not to pursue an investigation, if you have filed a complaint with DOL, the NRC will monitor the results of the DOL investigation.

If the NRC or DOL finds that unlawful discrimination has occurred, the NRC may issue a Notice of Violation to your employer, impose a fine, or suspend, modify, or revoke your employer's NRC license.



## UNITED STATES NUCLEAR REGULATORY COMMISSION REGIONAL OFFICE LOCATIONS

A representative of the Nuclear Regulatory Commission can be contacted by employees who wish to register complaints or concerns about radiological working conditions or other matters regarding compliance with Commission rules and regulations at the following addresses and telephone numbers.

REGIONAL OFFICES		
REGION	ADDRESS	TELEPHONE
I	U.S. Nuclear Regulatory Commission, Region I 475 Atlantic Road King of Prussia, PA 19406 1415	(800) 432-1156
II	U.S. Nuclear Regulatory Commission, Region II 101 Marietta Street, N.W., Suite 2900 Atlanta, GA 30323 0152	(800) 577-8510
III	U.S. Nuclear Regulatory Commission, Region III 801 Warrenville Road Lisle, IL 60532 4351	(800) 522-3025
IV	U.S. Nuclear Regulatory Commission, Region IV 811 Ryan Plaza Drive, Suite 400 Arlington, TX 76011 8064	(800) 952-9677
WALNUT CREEK FIELD OFFICE	U.S. Nuclear Regulatory Commission 1450 Main Lane Walnut Creek, CA 94596 5368	(800) 882-4672

To report safety concerns or violations of NRC requirements by your employer.

telephone:  
**NRC SAFETY HOTLINE**  
1-800-695-7403

To report incidents involving fraud, waste, or abuse by an NRC employee or NRC contractor.

telephone:  
**OFFICE OF THE INSPECTOR GENERAL**  
HOTLINE  
1-800-233-3497

Callaway Plant Site in Missouri and Grand Gulf Plant Site in Mississippi are under the purview of Region IV.



NRC FORM 5  
(6-92)  
10 CFR 20

U.S. NUCLEAR REGULATORY COMMISSION

APPROVED BY OMB NO. 3 50-0008  
EXPIRES:

OCCUPATIONAL EXPOSURE RECORD  
FOR A MONITORING PERIOD

ESTIMATED BURDEN PER RESPONSE TO COMPLY WITH THIS INFORMATION COLLECTION REQUEST: MINUTES. FORWARD COMMENTS REGARDING BURDEN ESTIMATE TO THE INFORMATION AND RECORDS MANAGEMENT BRANCH (MNB 7714) U.S. NUCLEAR REGULATORY COMMISSION, WASHINGTON, DC 20555, AND TO PAPERWORK REDUCTION PROJECT (5150-0006), OFFICE OF MANAGEMENT AND BUDGET, WASHINGTON, DC 20503.

DOS ACCOUNT CODE - PJ

1. NAME (LAST, FIRST, MIDDLE INITIAL) | 2. IDENTIFICATION NUMBER  
| 100104228

6. MONITORING PERIOD | 7. L | 8. LICENSE NUMBER(S)  
01/22/95-02/28/96 | AM |

NON-LICENSED SOURCE OF RADIATION  
DOS ACCOUNT CODE - PJ

10A. RADIOISOTOPE | 10B. CLASS | 10C. MODE | 10D. INTAKE IN MICROCURIES

(IN AKES)

DOSES (IN REM)

DEEP DOSE EQUIVALENT (DDE) | 11. 000.000

EYE DOSE EQUIVALENT (LOE) | 12. 000.000

LENS OF THE EYE (SDE, WB) | 13. 000.000

SHALLOW DOSE EQUIVALENT, WHOLE BODY (SDE, ME) | 14. 000.000

SHALLOW DOSE EQUIVALENT, MAX EXTREMITY (CEDE) | 15. 000.000

COMMITTED EFFECTIVE DOSE EQUIVALENT (CDE) | 16. 000.000

MAXIMALLY EXPOSED ORGAN (TEDE) | 17. 000.000

TOTAL EFFECTIVE DOSE EQUIVALENT (BLOCKS 11+15) (TODE) | 18. 000.000

TOTAL ORGAN DOSE EQUIVALENT, MAX ORGAN (BLOCKS 11+16) (TODE) | 19. 000.000

9 COMMENTS

20. SIGNATURE -- L. CENSEE

21. DATE PREPARED

30 May 97

NRC FORM 241 (8-98) 10 CFR 150		U. S. NUCLEAR REGULATORY COMMISSION		APPROVED BY OMB: NC 3150-0013 Estimated burden per response to comply with this mandatory information collection request 16 minutes. This notification is required so that NRC may schedule inspection of the activities to ensure that they are conducted in accordance with requirements for protection of the public health and safety. Forward comments regarding burden estimate to the Information and Records Management Branch (T-8 F33), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, and to the Paperwork Reduction Project (3150-0013), Office of Management and Budget, Washington, DC 20503. NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.	
<b>REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES</b> (Please read the instructions on the cover sheet before completing this form.)				EXPIRES: 6/30/99	
1. NAME OF LICENSEE (Person or firm proposing to conduct the activities described below)		2. TYPE OF REPORT		3. CONTROL NUMBER (Leave Blank - Number to be assigned by NRC)	
4. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be located)		INITIAL			
		REVISION			
		CLARIFICATION			
		5. LICENSEE CONTACT:			
		6. TELEPHONE NUMBER (Include Area Code)		7. FACSIMILE NUMBER (Include Area Code)	
8. ACTIVITIES TO BE CONDUCTED IN NON-AGREEMENT STATES UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20					
WELL LOGGING		LEAK TESTING AND/OR CALIBRATIONS		TELE THERAPY/RADIATOR SERVICE	
PORTABLE GAUGES		OTHER (Specify)			
RADIOGRAPHY →		TRANSPORTATION QA PROGRAM APPROVAL NO. & REV NO		REGISTERED AS USER OF PACKAGINGS (CERTIFICATES OF COMPLIANCE NOS.)	
9. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE			10. WORK LOCATION ADDRESS (Street and Number or other location. Give as complete an address or directions as possible.)		
11. CLIENT TELEPHONE NUMBER (Include Area Code)		12. WORK LOCATION TECHNICIAN AUTHORIZED TO PERFORM WORK		13. WORK LOCATION TELEPHONE NUMBER (Include Area Code)	
14. DATES SCHEDULED		15. NUMBER OF WORK DAYS	16. LOCATION REFERENCE NUMBER		
FROM		TO	LEAVE BLANK FOR INITIAL NRC FORM 241 REQUESTS NUMBER TO BE ASSIGNED BY NRC		
LIST ADDITIONAL WORK SITES ON SEPARATE SHEET TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 9-16 ABOVE.					
17. LIST RADIOACTIVE MATERIAL WHICH WILL BE POSSESSED, USED, INSTALLED, SERVICED, OR TESTED IN NON-AGREEMENT STATES. (Include description of type and quantity of radioactive material, sealed sources, or devices to be used.)					
18. AGREEMENT STATE SPECIFIC LICENSE WHICH AUTHORIZES THE UNDERSIGNED TO CONDUCT ACTIVITIES WHICH ARE THE SAME, EXCEPT FOR LOCATION OF USE, AS SPECIFIED IN ITEM 8. ABOVE. (Four copies of the specific license must accompany the initial NRC Form 241.)					
LICENSE NUMBER		STATE		EXPIRATION DATE	TOTAL USAGE DAYS TO DATE
19. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)					
I, THE UNDERSIGNED, HEREBY CERTIFY THAT:					
a. All information in this report is true and complete. b. I have read and understand the provision of the general license 10 CFR 150.20 reprinted on the cover sheet of this form set; and I understand that I am required to comply with these provisions as to all byproduct, source, or special nuclear material which I possess and use in non-Agreement States or offshore waters under the general license for which this report is filed with the U.S. Nuclear Regulatory Commission. c. I understand that activities, including storage, conducted in non-Agreement States under general license 10 CFR 150.20 are limited to a total of 180 days in calendar year. d. I understand that I may be inspected by NRC at the above listed work site locations and at the Licensee home office address for activities performed in non-Agreement States or offshore waters. I am also aware that I will be responsible for any fees associated with such inspections. e. I understand that conduct of any activities not described above, including conduct of activities on dates or locations different from those described above or without NRC authorization, may subject me to enforcement action, including civil or criminal penalties.					
CERTIFYING OFFICER - RSO or Management Representative (Typed/Printed Name and Title)			SIGNATURE		DATE
WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECTS. 18 U.S.C. SECTION 1001 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.					
FOR NRC USE ONLY		AUTHORIZING OFFICIAL (Typed/Printed Name and Title)		SIGNATURE	
				DATE	

<p><b>NRC FORM 313</b> 7-96 10 CFR 30, 32, 33 34, 35, 36, 39 and 40</p>	<p><b>U. S. NUCLEAR REGULATORY COMMISSION</b></p>	<p>APPROVED BY OMB: NO. 3150-0120</p>	<p>EXPIRES: 7/31/95</p>
<p><b>APPLICATION FOR MATERIAL LICENSE</b></p>		<p>Estimated burden per response to comply with this information collection request: 7 hours. Submittal of the application is necessary to determine that the applicant is qualified and that adequate procedures exist to protect the public health and safety. Forward comments regarding burden estimate to the Information and Records Management Branch (T-8 F33), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, and to the Paperwork Reduction Project (3150-0120), Office of Management and Budget, Washington, DC 20503. NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.</p>	

**INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW.**

<p><b>APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH:</b></p> <p>DIVISION OF INDUSTRIAL AND MEDICAL NUCLEAR SAFETY OFFICE OF NUCLEAR MATERIALS SAFETY AND SAFEGUARDS U.S. NUCLEAR REGULATORY COMMISSION WASHINGTON, DC 20555-0001</p> <p><b>ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:</b></p> <p><b>IF YOU ARE LOCATED IN:</b></p> <p>CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, PENNSYLVANIA, RHODE ISLAND, OR VERMONT, SEND APPLICATIONS TO:</p> <p>LICENSING ASSISTANT SECTION NUCLEAR MATERIALS SAFETY BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION I 475 ALLENDALE ROAD KING OF PRUSSIA, PA 19406-1415</p> <p>ALABAMA, FLORIDA, GEORGIA, KENTUCKY, MISSISSIPPI, NORTH CAROLINA, PUERTO RICO, SOUTH CAROLINA, TENNESSEE, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND APPLICATIONS TO:</p> <p>NUCLEAR MATERIALS LICENSING SECTION U.S. NUCLEAR REGULATORY COMMISSION, REGION II 101 MARIETTA STREET, NW, SUITE 2900 ATLANTA, GA 30323-0199</p>	<p><b>IF YOU ARE LOCATED IN:</b></p> <p>ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO:</p> <p>MATERIALS LICENSING SECTION U.S. NUCLEAR REGULATORY COMMISSION, REGION III 801 WARRENVILLE RD. Lisle, IL 60532-4351</p> <p>ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND APPLICATIONS TO:</p> <p>NUCLEAR MATERIALS LICENSING SECTION U.S. NUCLEAR REGULATORY COMMISSION, REGION IV 811 RYAN PLAZA DRIVE, SUITE 400 ARLINGTON, TX 76011-8064</p>
<p>PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S. NUCLEAR REGULATORY COMMISSION JURISDICTIONS.</p>	

<p>1. THIS IS AN APPLICATION FOR (Check appropriate item)</p> <p><input type="checkbox"/> A. NEW LICENSE</p> <p><input type="checkbox"/> B. AMENDMENT TO LICENSE NUMBER _____</p> <p><input type="checkbox"/> C. RENEWAL OF LICENSE NUMBER _____</p>	<p>2. NAME AND MAILING ADDRESS OF APPLICANT (Include Zip code)</p>
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<p>3. ADDRESS(ES) WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED</p>	<p>4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION</p> <p>TELEPHONE NUMBER</p>
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SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER. THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.

<p>5. RADIOACTIVE MATERIAL</p> <p>a. Element and mass number; b. chemical and/or physical form; and c. maximum amount which will be possessed at any one time.</p>	<p>6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED.</p>		
<p>7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE.</p>	<p>8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS.</p>		
<p>9. FACILITIES AND EQUIPMENT.</p>	<p>10. RADIATION SAFETY PROGRAM.</p>		
<p>11. WASTE MANAGEMENT.</p>	<p>12. LICENSEE FEES (See 10 CFR 170 and Section 170.31)</p> <table style="width:100%; border: none;"> <tr> <td style="border: none;">FEE CATEGORY</td> <td style="border: none;">AMOUNT ENCLOSED \$</td> </tr> </table>	FEE CATEGORY	AMOUNT ENCLOSED \$
FEE CATEGORY	AMOUNT ENCLOSED \$		

13. CERTIFICATION. (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT.

THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, 36, 39 AND 40, AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.

WARNING: 18 U.S.C. SECTION 1001 ACT OF JUNE 25, 1948 (2 STAT. 749) MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.

CERTIFYING OFFICER - TYPED/PRINTED NAME AND TITLE	SIGNATURE	DATE
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FOR NRC USE ONLY					
TYPE OF FEE	FEE LOG	FEE CATEGORY	AMOUNT RECEIVED	CHECK NUMBER	COMMENTS
			\$		
APPROVED BY				DATE	

IRC FORM 314 6-95) 0 CFR 30.36(c)(1)(iv) 0 CFR 40.42(c)(1)(iv) 0 CFR 70.38(c)(1)(iv)	U.S. NUCLEAR REGULATORY COMMISSION	APPROVED BY OMB: NO. 3150-0028	EXPIRES: 06/30/98
<b>CERTIFICATE OF DISPOSITION OF MATERIALS</b>		ESTIMATED BURDEN PER RESPONSE TO COMPLY WITH THIS MANDATORY INFORMATION COLLECTION REQUEST: 30 MINUTES. THIS SUBMITTAL IS USED BY NRC AS PART OF THE BASIS FOR ITS DETERMINATION THAT THE FACILITY HAS BEEN CLEARED OF RADIOACTIVE MATERIAL BEFORE THE FACILITY IS RELEASED FOR UNRESTRICTED USE. FORWARD COMMENTS REGARDING BURDEN ESTIMATE TO THE INFORMATION AND RECORDS MANAGEMENT BRANCH (T-6 F33), U.S. NUCLEAR REGULATORY COMMISSION, WASHINGTON, DC 20555-0001, AND TO THE PAPERWORK REDUCTION PROJECT (3150-0028), OFFICE OF MANAGEMENT AND BUDGET, WASHINGTON, DC 20503. AN AGENCY MAY NOT CONDUCT OR SPONSOR, AND A PERSON IS NOT REQUIRED TO RESPOND TO, A COLLECTION OF INFORMATION UNLESS IT DISPLAYS A CURRENTLY VALID OMB CONTROL NUMBER.	
INSTRUCTIONS: ALL ITEMS MUST BE COMPLETED - PRINT OR TYPE SEND THE COMPLETED CERTIFICATE TO THE NRC OFFICE SPECIFIED ON THE REVERSE			
LICENSEE NAME AND ADDRESS		LICENSE NUMBER	
		LICENSE EXPIRATION DATE	
<b>A. MATERIALS DATA</b> <i>(Check one and complete as necessary)</i>			
THE LICENSEE OR ANY INDIVIDUAL EXECUTING THIS CERTIFICATE ON BEHALF OF THE LICENSEE CERTIFIES THAT: <i>(Check and/or complete the appropriate item(s) below.)</i>			
<input type="checkbox"/> 1. NO MATERIALS HAVE EVER BEEN PROCURED OR POSSESSED BY THE LICENSEE UNDER THIS LICENSE. OR <input type="checkbox"/> 2. ALL ACTIVITIES AUTHORIZED BY THE LICENSE HAVE CEASED AND ALL MATERIALS PROCURED AND/OR POSSESSED BY THE LICENSE NUMBER CITED ABOVE HAVE BEEN DISPOSED OF IN THE FOLLOWING MANNER. <i>(If additional space is needed, use the reverse side or provide attachments.)</i>			
Describe specific material transfer actions and, if there were radioactive wastes generated in terminating this license, the disposal actions including the disposition of low-level radioactive waste, mixed waste, Greater-than-Class-C waste, and sealed sources, if applicable.			
For transfers, specify the date of the transfer, the name of the license recipient, and the recipient's NRC license number or Agreement State name and license number.			
If materials were disposed of directly by the licensee rather than transferred to another licensee, licensed disposal site or waste contractor, describe the specific disposal procedures <i>(e.g., decay in storage)</i>			
<b>B. OTHER DATA</b>			
<input type="checkbox"/> 1. OUR LICENSE HAS NOT YET EXPIRED; PLEASE TERMINATE IT.			
2. A RADIATION SURVEY WAS CONDUCTED BY THE LICENSEE TO CONFIRM THE ABSENCE OF LICENSED RADIOACTIVE MATERIALS AND TO DETERMINE WHETHER ANY CONTAMINATION REMAINS ON THE PREMISES COVERED BY THE LICENSE. <i>(Check one)</i>			
<input type="checkbox"/> NO <i>(Attach explanation)</i> <input type="checkbox"/> YES, THE RESULTS <i>(Check one)</i> <input type="checkbox"/> ARE ATTACHED, or <input type="checkbox"/> WERE FORWARDED TO NRC ON <i>(Date)</i>			
3. THE PERSON TO BE CONTACTED REGARDING THE INFORMATION PROVIDED ON THIS FORM		NAME	TELEPHONE NUMBER <i>(Include Area Code)</i>
4. MAIL ALL FUTURE CORRESPONDENCE REGARDING THIS LICENSE TO			
<b>CERTIFYING OFFICIAL</b>			
I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT			
PRINTED NAME AND TITLE		SIGNATURE	DATE
WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECTS. 18 U.S.C. SECTION 1001 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTIONS.			

30 May 97

<p><b>FILE CERTIFICATES AS FOLLOWS:</b></p> <p><b>IF YOU ARE A DISTRIBUTOR OF EXEMPT PRODUCTS, SEND TO:</b></p> <p>DIVISION OF INDUSTRIAL AND MEDICAL NUCLEAR SAFETY OFFICE OF NUCLEAR MATERIAL SAFETY AND SAFEGUARDS U.S. NUCLEAR REGULATORY COMMISSION WASHINGTON, DC 20555-0001</p> <p><b>ALL OTHERS, IF YOU ARE LOCATED IN:</b></p> <p>CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, PENNSYLVANIA, RHODE ISLAND, OR VERMONT, SEND APPLICATIONS TO:</p> <p>LICENSING ASSISTANCE SECTION NUCLEAR MATERIALS SAFETY BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION I 475 ALLENDALE ROAD KING OF PRUSSIA, PA 19406-1415</p> <p>ALABAMA, FLORIDA, GEORGIA, KENTUCKY, MISSISSIPPI, NORTH CAROLINA, PUERTO RICO, SOUTH CAROLINA, TENNESSEE, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND APPLICATIONS TO:</p> <p>NUCLEAR MATERIALS SAFETY SECTION U.S. NUCLEAR REGULATORY COMMISSION, REGION II 101 MARIETTA STREET NW, SUITE 2900 ATLANTA, GA 30323-0199</p>	<p><b>IF YOU ARE LOCATED IN:</b></p> <p>ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO:</p> <p>MATERIALS LICENSING SECTION U.S. NUCLEAR REGULATORY COMMISSION, REGION III 801 WARRENVILLE ROAD LISLE, IL 60532-4351</p> <p>ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND APPLICATIONS TO:</p> <p>MATERIAL RADIATION PROTECTION SECTION U.S. NUCLEAR REGULATORY COMMISSION, REGION IV 611 RYAN PLAZA DRIVE, SUITE 400 ARLINGTON, TX 76011-8064</p>
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