APPROVED OMB NO. 0710-0003
Form

U.S. NUCLEAR REGULATORY COMMISSION

REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES, AREAS OF EXCLUSIVE FEDERAL JURISDICTION, OR OFFSHORE WATERS

(Please read the Instructions before completing this form)

AUTHORITY: 42 USC 2201(b), 2201(o), 2231 PRINCIPAL PURPOSE(S): To provide information concerning proposed activities in non-Agreement States, areas of exclusive Federal jurisdiction, or offshore waters. ROUTINE USES: Information may be disclosed to other Federal, State, local or foreign agencies, as maybe appropriate, for licensing and regulatory purposes, if disclosure is compatible with the purpose for which the information is collected. Disclosure to the Department of Justice for its review of proposed actions may be made when the information is relevant to a request for legal advice or opinion or when it is relevant to a proceeding in which the Department of Justice is a party or has an interest in the proceeding. Disclosure may also be made to a member of Congress at the request of the individual to whom the record applies. DISCLOSURE: Voluntary; however, failure to provide information may result in denial of your request.

1. NAME OF APPLICANT (Name of legal entity or person to receive Nuclear Regulatory Commission authorization)
STREK, INC.

2. ADDRESS (Street address or P.O. Box and City, State and Zip Code)
4412 BRINSER LANE
LOUISVILLE, KY 40218

3. TYPE OF ACTION: ☐ INITIAL ☑ REVISION ☐ CLARIFICATION

4. LICENSE NUMBER (If applicable)
Now Pending 18.50

5. PROPOSED DATE OF ACTIVITY: Date: 4-10-2000

6. EXPIRATION DATE (If applicable): 7-31-2000

7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE PRIVILEGE (Check one)

☐ AREA GAUGING ☐ IDENTIFYING WELDER CALIBRATIONS ☐ TELETHERAPY/BRACHYTHERAPY SERVICE
☐ PORTABLE GAUGES ☐ OTHER (Specify) →
☑ RADIOGRAPHY → WRITTEN REVIEW (Provide a description of the activities)

8. NAME AND ADDRESS OF PROPOSED SITE OF ACTIVITY
LOUIS EDWARD MIRAN DIRECTOR OF
17150 FRANKLIN ST
HELLWANGER, KY
46122

9. NAME AND ADDRESS OF PERSON TO BE CONTACTED (Provide a telephone or other address for public information purposes)
DAVID L. DIGAN
4412 BRINSER LANE
LOUISVILLE, KY 40218 Dept. 18.50

10. NAME AND TELEPHONE NUMBER OF PERSON TO BE CONTACTED (Technical matters)
(502) 423-7259

11. NAME AND TELEPHONE NUMBER OF PERSON TO BE CONTACTED (Administrative matters)
SAME

12. DATE SUBMITTED: 3-23-00

13. TYPE OF ACTIVITY: ☑ NEW ☐ RENEWAL ☐ AMENDMENT ☐ TERMINATION

14. LIST ADDITIONAL NUCLIDES, ISOTOPES, OR PRODUCTS TO BE USED (Attach additional sheets if needed)

Nuclide or Product	Maximum Activity per Source	Maximum Number of Sources	Total Activity
Co-60/Ir-192 - Iridium-192 & Cobalt-60 Sealed Sources	1.0 Curie (Ci) each	2 Sources	2.0 Curies (Ci) Combined

15. CERTIFICATE OF ACCURACY (Check one) ☑ Applicant ☐ Agent

Signature: Kevin Fogle
Date: 3-23-00

16. ADDITIONAL REQUIREMENTS (Check one)

☐ 10CFR150.20(a) (Agreement States only)

1. Applicant certifies that the information contained herein is complete.
2. Applicant acknowledges that the provision of the general license in 10CFR150.20 includes the authorization of this form, and I understand that I am responsible for compliance with these provisions as to all licensees, or persons under license control, which possess and use in non-Agreement States or areas of exclusive Federal jurisdiction, the byproduct material listed in the attached Nuclear Regulatory Commission form.
3. Understand that activities, including storage, conducted in non-Agreement States, areas of exclusive Federal jurisdiction or in waters of the U.S. are subject to the licensing requirements of the Nuclear Regulatory Commission or applicable State or Federal regulatory agencies.
4. Understand that I may be required to report to the Director of the above listed NRC Office Director and the Licensing Project Office address the activities conducted in non-Agreement States or offshore waters.
5. Understand that conduct of any activities not described above, including conduct of activities in areas of exclusive Federal jurisdiction or in non-Agreement States, requires a separate application, filing with the appropriate Licensing Project Office or other appropriate jurisdiction.

☐ 10CFR150.20(b) (Non-Agreement States or areas of exclusive Federal jurisdiction)

1. Applicant certifies that the information contained herein is complete.
2. Applicant acknowledges that the provisions of the general license in 10CFR150.20(b) include the authorization of this form, and I understand that I am responsible for compliance with these provisions as to all licensees, or persons under license control, which possess and use in non-Agreement States or areas of exclusive Federal jurisdiction, the byproduct material listed in the attached Nuclear Regulatory Commission form.
3. Understand that activities, including storage, conducted in non-Agreement States, areas of exclusive Federal jurisdiction or in waters of the U.S. are subject to the licensing requirements of the Nuclear Regulatory Commission or applicable State or Federal regulatory agencies.
4. Understand that I may be required to report to the Director of the above listed NRC Office Director and the Licensing Project Office address the activities conducted in non-Agreement States or offshore waters.
5. Understand that conduct of any activities not described above, including conduct of activities in areas of exclusive Federal jurisdiction or in non-Agreement States, requires a separate application, filing with the appropriate Licensing Project Office or other appropriate jurisdiction.

17. CERTIFICATE OF ACCURACY (Check one) ☑ Applicant ☐ Agent

Signature: Kevin Fogle
Date: 3-23-00

18. ACCEPTANCE (Check one) ☐ Approved ☐ Disapproved

Signature: D. M. Hass
Date: 4-10-2000

Signature: [illegible]
Date: 4-10-2000

REGION II
Calendar Year 2000

TRANSMITTAL FOR NRC FORM 241 & REVISION SUBMITTALS

[X] INITIAL 241 PACKAGE LRN ___
[X] REVISION LRN 000713
[ ] CLARIFICATION LRN ___

LICENSEE NAME : Metallurgical Services Inc.
LICENSE STATE : KY NUMBER : 201-595-05
CHECK NO: 5782
CHECK AMOUNT: $200.00
FORWARDED BY: Dawn Heim 5/4/00

		Initial	Revision	Clarification
Includes:	Form 241	✓	☐	☐
	Fee	✓	☐	
	License Copy	✓		

LICENSE FEE & ACCOUNT RECEIVABLE BRANCH

1. Fee Category and Amount: _____
2. Correct Fee Paid. Submittal may processed for:

General License _____

Revision _____

Signed _____ Date _____

4/1998 G:\DNA\BMLB2\RECPTS\RC-FORM.FEE