NRC FORM 241 (11-84) 10 CFR 150 — U. S. NUCLEAR REGULATORY COMMISSION

REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES

(Please read the instructions on the cover sheet before completing this form.)

APPROVED BY OMB: NO. 3150-0013 EXPIRES 3/31/88

ESTIMATED BURDEN PER RESPONSE TO COMPLY WITH THIS INFORMATION COLLECTION REQUEST: 15 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 (P-530), 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.

1. NAME OF LICENSEE (Person or firm proposing to conduct the activities described below)
OCEAN STATE TECHNICAL SERVICES

2. TYPE OF REPORT
- [X] INITIAL INCORRECT
- [ ] REVISION
- [X] CLARIFICATION

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)
2440 MENDON ROAD
CUMBERLAND, RI 02864

5. LICENSEE CONTACT: Tom Harkins / Jim Giarrusso

6. TELEPHONE NUMBER (Include Area Code): (401) 658-3310

7. FACSIMILE NUMBER (Include Area Code): (401) 658-3139

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
- [ ] TELETHERAPY/IRRADIATOR SERVICE
- [ ] PORTABLE GAUGES
- [ ] OTHER (Specify)
- [X] RADIOGRAPHY ⇒ TRANSPORTATION QA PROGRAM APPROVAL NO. & REV. NO.: 0825, REV. 0 — REGISTERED AS USER OF PACKAGINGS (CERTIFICATES OF COMPLIANCE (COC)): 9033

9. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE
WHEELABRATOR GLOUCHESTER
MR. CHEROLA

10. WORK LOCATION ADDRESS (Street and Number or other location. Give as complete an address or directions as possible.)
600 US RT. 130
WESTVILLE, N.J. 08093
(CLIENT URGENTLY HAS FLOW RESTRICTIONS IN PIPING ON TOP OF BOILER NEEDS FAST RESPONSE)

11. CLIENT TELEPHONE NUMBER (Include Area Code)

12. WORK LOCATION CONTACT: E. JOSEPHSON, R. HASLAM, D. ZEMSKE

13. WORK LOCATION TELEPHONE NUMBER (Include Area Code)

14. DATES SCHEDULED — FROM: MON. 3-6-00 — TO: 3.7.00

15. NUMBER OF WORK DAYS: 2 DAYS

16. LOCATION REFERENCE NUMBER — 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 8-16 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 devices, or devices to be used.)
Iridium 192 sealed source device, Amersham Model 424-9, curies: 40

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 DATE TO DATE
3D-117-01	Rhode Island	SEPTEMBER, 2000	5 CKB

19. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)

19. 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 reverse sheet of this form 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-Agreements 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.

SIGNATURE - AUTHORIZING OFFICER (Must be an authorized officer of the applicant)	TYPED/PRINTED NAME	TITLE	DATE
	Tom Harkins Jr.	NDT Mgr.	1/6/00

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	TITLE	DATE
	Judith A. Johnston	Sr. L.P.	3/6/2000

CKB 3/6/00 (2) 3/6/00