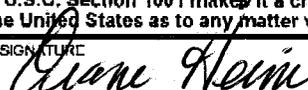


NRC FORM 241 (7-1999)		U.S. NUCLEAR REGULATORY COMMISSION					
REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES, AREAS OF EXCLUSIVE FEDERAL JURISDICTION, OR OFFSHORE WATERS (Please read the instructions before completing this form)							
1. NAME OF LICENSEE (Person or firm proposing to conduct the activities described below) STORK/MSC		2. TYPE OF REPORT <input type="checkbox"/> INITIAL <input type="checkbox"/> REVISION <input checked="" type="checkbox"/> CLARIFICATION					
3. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be located) 4102 BISHOP LANE LOUISVILLE, KY 40218		4. LICENSEE CONTACT AND TITLE KEW ROGERS / R.S.O.					
		5. TELEPHONE NUMBER (include Area Code) 502 968-5000	6. FACSIMILE NUMBER (include Area Code) 502 964-5000				
7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20							
<input type="checkbox"/> WELL LOGGING <input type="checkbox"/> LEAK TESTING AND/OR CALIBRATIONS <input type="checkbox"/> TELE THERAPY/IRRADIATOR SERVICE							
<input type="checkbox"/> PORTABLE GAUGES <input type="checkbox"/> OTHER (Specify) ⇒ _____							
<input checked="" type="checkbox"/> RADIOGRAPHY ⇒ REGISTERED AS USER OF PACKAGING (CERTIFICATE OF COMPLIANCE NUMBERS)							
8. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE GLOBE MECHANICAL 20 W 7TH STREET NEW ALBANY, IN 47150		9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION (Street and Number or other location. Give as complete an address or directions as possible.) SAME					
		10. CLIENT TELEPHONE NUMBER (include Area Code) 812-949-2001	11. WORK LOCATION TELEPHONE NUMBER (include Area Code) ROGER 812-949-2001 THompson				
12. DATES SCHEDULED		13. NUMBER OF WORK DAYS	14. ADD				
FROM	TO						
4-1-00	4-30-00	15					
		15. DELETE					
		16. LOCATION REFERENCE NUMBER NUMBER TO BE ASSIGNED BY NRC 000125					
LIST ADDITIONAL WORK SITES ON SEPARATE SHEET(S) TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 9-16 ABOVE.							
17. LIST RADIOACTIVE MATERIAL, WHICH WILL BE POSSESSED, USED, INSTALLED, SERVICED, OR TESTED (include description of type and quantity of radioactive material, sealed sources, or devices to be used.) <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">660A/660B CAMERA</td> <td style="width:25%;">IRIDIUM 192 SOURCE</td> <td style="width:25%;">2 120 CC CURIES</td> <td style="width:25%;">A-424-9 (AEA) 702 (CIS-US) SOURCE MODEL NUMBERS</td> </tr> </table>				660A/660B CAMERA	IRIDIUM 192 SOURCE	2 120 CC CURIES	A-424-9 (AEA) 702 (CIS-US) SOURCE MODEL NUMBERS
660A/660B CAMERA	IRIDIUM 192 SOURCE	2 120 CC CURIES	A-424-9 (AEA) 702 (CIS-US) SOURCE MODEL NUMBERS				
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 9 ABOVE. (Four copies of the specific license must accompany the Initial NRC Form 241.)		LICENSE NUMBER 201-573-05	STATE KY				
		EXPIRATION DATE 11-30-00					
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 instructions 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-Agreement States under general license 10 CFR 150.20 are limited to a total of 180 days in calendar year. With the exception of work conducted in off-shore waters, which is authorized for an unlimited period of time in the 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.							
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 (Name and Title) JIM SCHAFFER ASST RSO		SIGNATURE 	DATE 4-4-00				
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. 18 U.S.C. Section 1001 makes it a criminal offense to make a willfully false statement or represent of the United States as to any matter within its jurisdiction.							
FOR NRC USE ONLY	REVIEW D. M. Heim LADNMS	SIGNATURE 	DATE 4/10/00				
		TOTAL USAGE -- DAYS TO DATE 60					