

(7-1899)

U.S. NUCLEAR REGULATORY COMMISSION

APPROVED BY OMB: NO. 3150-0013

EXPIRES: 07/31/2001

Estimated burden per response to comply with this mandatory 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. Send comments regarding burden estimate to the Record Management Branch (T-6 EB), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by Internet e-mail to bja1@nrc.gov and to the Desk Officer, Office of Information and Regulatory Affairs, NE08-10202, (3150-0013), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

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)

Testwell Laboratories, Inc.

2. TYPE OF REPORT

INITIAL REVISION CLARIFICATION

3. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be located)

47 Hudson Street
Ossining, NY 10562

4. LICENSEE CONTACT AND TITLE

Stephen M. Latus
Radiation Safety Officer

5. TELEPHONE NUMBER (Include Area Code)

(914) 762-9000

6. FACSIMILE NUMBER (Include Area Code)

(914) 762-9638

7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20

WELL LOGGING LEAK TESTING AND/OR CALIBRATIONS TELETHERAPY/IRRADIATOR SERVICE

PORTABLE GAUGES OTHER (Specify) =>

RADIOGRAPHY => REGISTERED AS USER OF PACKAGING (CERTIFICATES OF COMPLIANCE NUMBERS)

8. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE

Jones-GMO
C/O Continental Airlines
614 Frelinghuysen Ave.
Newark, NJ 07114

9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION (Street and Number or other location. Give as complete an address or directions as possible.)

Continental Airline Global Gateway Project
Newark International Airport -
Terminal C, Newark NJ 07114

10. CLIENT TELEPHONE NUMBER (Include Area Code)

(973) 681-2287

11. WORK LOCATION TELEPHONE NUMBER (Include Area Code)

(973) 681-2287

12. DATES SCHEDULED

FROM

1/5/01

TO

7/25/01 6/28/01

Ek - per licensee request

13. NUMBER OF WORK DAYS

180

14. ADD

15. DELETE

16. LOCATION REFERENCE NUMBER

NUMBER TO BE ASSIGNED BY NRC

000929

LIST ADDITIONAL WORK SITES ON SEPARATE SHEET(S) TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 8-16 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.)

Troxler/Humboldt Moisture Density gauges to measure Asphalt and Soil Densities each gauge contains the following: 11 Millicuries Cesium 137 & 40 Millicuries Americium 241

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
2406-3328

STATE
NY

EXPIRATION DATE
10/31/01

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 160.20 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)

Stephen M. Latus, RSO

SIGNATURE

DATE

5/30/01

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

REVIEWING OFFICIAL (Typed Printed Name and Title)

Pamela J. Henderson

SIGNATURE

DATE

5/31/01

TOTAL USAGE - DAYS TO DATE

175

NRC FORM 241 (7-1899)

PRINTED ON RECYCLED PAPER

(50) 5/31/01

(7-1999)

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1. NAME OF LICENSEE (Person or firm proposing to conduct the activities described below) Testwell Laboratories, Inc.		2. TYPE OF REPORT <input checked="" 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) 47 Hudson Street Ossining, NY 10562		4. LICENSEE CONTACT AND TITLE Stephen M. Latus Radiation Safety Officer	
		5. TELEPHONE NUMBER (Include Area Code) (914) 762-9000	6. FACSIMILE NUMBER (Include Area Code) (914) 762-9638

7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20

WELL LOGGING LEAK TESTING AND/OR CALIBRATIONS TELETHERAPY/RADIATOR SERVICE

PORTABLE GAUGES OTHER (Specify) => _____

RADIOGRAPHY => REGISTERED AS USER OF PACKAGING (CERTIFICATES OF COMPLIANCE NUMBERS)

8. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE Perini/Slattery Corporation 430 Communipaw Avenue Jersey City, NJ 07304	9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION (Street and Number or other location. Give as complete an address or directions as possible.) Hudson-Bergen Light Rail Transit System From Jersey City to Weehaukin New Jersey
10. CLIENT TELEPHONE NUMBER (Include Area Code) (201)-915-0006	11. WORK LOCATION TELEPHONE NUMBER (Include Area Code) (201)832-7988

12. DATES SCHEDULED		13. NUMBER OF WORK DAYS	14. ADD	15. DELETE	16. LOCATION REFERENCE NUMBER
FROM 1/5/01	TO 7/25/01 <i>6/28/01</i> <i>Per license request</i>	180			NUMBER TO BE ASSIGNED BY NRC 060930

17. 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.)

Troxler/Humboldt Moisture Density gauges to measure Asphalt and Soil Densities
each gauge contains the following: 11 Millicuries Cesium 137 & 40 Millicuries Americium 241

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 2406-3328	STATE NY	EXPIRATION DATE 10/31/01
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19. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)

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- 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.
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- 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) Stephen M. Latus, RSO	SIGNATURE 	DATE 5/30/01
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FOR NRC USE ONLY	REVIEWING OFFICIAL (Typed/Printed Name and Title) Camela J. Henderson	SIGNATURE 	DATE 5/31/01	TOTAL USAGE -- DAYS TO DATE 175
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5/31/01