By: K; www.www.antoine.com		4106652074;		-02 11:57;	Page 9/9
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	T STATES, AREAS		Weshington, L	10101 (1-6 28), U.S.	Nuclear Reguistory Commiss y internot e-mail to bis1@nrc.g
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• •	Instructions before compl		respond to, the	information objection	o ensure that they are conducted insteadion of the public health is burden extimate to the Reco Nuclear Regulatory Commission y Internet e-mail to bist@inrc.gi formation and Regulatory Alta to of Management and Budy na used to impose an informat ity valid OMB control number, and a person is not required
	in proposing to conduct the entirities d			- 2. TYPE OF	REPORT
	rt Health Physic				
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Baltimore, Mar	ryland 21234	•	6. TELEPHONE	UNASER	(ACEIMILE NUMBER (Aceimed Area Code)
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CLIENT NAME ADDRESS, CITY/C	OUNTY, STATE, ZIP CODE	B. ACTUAL PH	YSICAL ADDRESS OF V	VORK LOCATION	drage or directions as possible.)
Classic Imag	ina				
1140 Varnum		· · · ·	•		
Suite 020		(same	e as #8)		
Washington,	DC 20017				TION TELEPHONE NUMBER
		for course A		(Include Area	(Code)
•		(202) 18. NUMBER OF	<u>529-4624</u> 14.	1 (202)	529-4624
12. DATES	CHEDULED	WORK DAYS	ADD	DELETE	REPERENCE NUMBER
	TO	1 .	1	1	NUMBER TO BE ASSIGNED BY NRC
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CERTIFYING OFFICER - RSO or W	vierragement Representative (Ne	me and Tible) Si	GNATURE	A Krught	L'CAR MIN	YA Y/7	
CERTIFYING OFFICER - RSO or N SUZANDE F. K WARNING: False statem	Normgement Representative (Na Krueger-Schmi Jents in this certificate n	dt Pres	All And/or	criminal penalities	NRC regulatio	ns require that suf to make a willfully	missions to talse
CERTIFYING OFFICER - RSO or N SUIZADDE F. K WARNING: False statem the NRC ba complete and statement or representat	Noragement Representative (Wa <u>Krueger – Schmi</u> tents in this certificate n d accurate in all materia ion to any department of	nay be subject a l respects. 18 to respecty of the	All And/or	criminal penalites	NRC regulation riminal offense i within its jurisd	Iction. TOTAL USAGE -	
CERTIFYING OFFICER - RSO or N SUZADDE F. K WARNING: Falso statem the NRC be complete and statement or representat	Normgement Representative (Na Krueger-Schmi Jents in this certificate n	nay be subject a l respects. 18 to respecty of the	Children Chi	criminal penalites	NRC regulation riminal offense i within its jurisd	Iction. TOTAL USAGE -	

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NRC FORM 241 (7-1809)	U.S. NUCLEAR REG	ULATORY COMMISS	Estimated burd	OMB: NO. 3150- en per response to inutes. This natif	comply with this mandatory collection leation is required so that NRC ma
		11/17/20 111	soneque inspe accordance w	th requirements for	as to ensure that they are conducted is or protection of the public health am ng burden estimate to the Record I.S. Nuclear Regulatory Commission r by internet e-mail to bis1@nrc.gov f information and Regulatory Affairs ffloe of Management and Budget reans used to impose an information rently valid CMB control number, the or, and a person is not required to im
	F PROPOSED ACT		Management E	iranch (T-6 E5), U	S. Nuclear Regulatory Commission
	T STATES, AREAS		VE and to the Der	k Officer, Office of	f Information and Regulatory Alfairs
FEDERAL JURIS	DICTION, OR OFFS	HORE WATE	Collection does	C 20503. Is n not display a cur	reans used to impose an information rantly valid OMB control number, the
(Please read the	Instructions before comp	leting this form)	NRC may not respond to, the	conduct or apone information collect	or, and a person is not required to on.
NAME OF LICENSEE (Paraon or)	Im proposing to conduct the activities o	lescribed below)			OF REPORT
Krueger-Gilbe	rt Health Physi	cs, Inc	INITU		
	address or other location where Boons		4. LICENSEE CO	NTACT AND TITLE	
	•		Wendy	Charlton.	/Health Physicist
3601 E. Joppa Baltimäre, Ma					
Baltimore, Ma.	Lyranu zizja		5. TELEPHONE (Include Aree	Code)	6. FACSIMILE NUMBER (Inclusie Ares Code)
			410-665		410-665-2074
7.	ACTIVITIES TO BE CONDUC	TED UNDER THE GE	NERAL LICENSE G	IVEN IN 10 CFR	150.20
		SAND/OR CALIBRAT		LETHERAPY/IR	RADIATOR SERVICE
	S OTHER (Spect	fy) ⇒>>		<i></i>	
RADIOGRAPHY		DF PACKAGING (CERTIFICA)	TES OF COMPLIANCE NU	MBERS	
CLIENT NAME, ADDRESS, CITYA	OUNTY, STATE, ZIP CODE	B. ACTUAL P	HYBICAL ADDREBS OF	VORKLOCATION	n eddrean or directions as possible.)
The Cardiova	scular Group, P	c l			
	ngton Blvd	sam	e as #8		•
	B, Suite 120				
Fairfax,	VA 22031				
	•	10. CUENT (Include	TELEPHONE NUMBER	11. WORK L (Include.	OCATION TELEPHONE NUMBER
		703-5	73-3494	703-	573-3494
12. DATES	SCHEDULED	13. NUMBER OF WORK DAYS	14. ADD	16. DELETE	16. LOCATION REPERENCE NUMBER
ROM	то	,	2/2-1	-11-	NUMBER TO BE ASSIGNED BY NRC
7/23/02	7/23/02		//~3/0Z	- 1/1/02	1 OD0187
	ORK SITES ON SEPARATE	SHEETISI TO INCLU	E ALL INFORMAT	ON CONTAINEL	IN ITEMS 9-18 ABOVE.
LIST RADIOACTIVE MATERIAL	WHICH WILL BE POSSESSED, USED.	INSTALLED. SERVICED, O	RTESTED		
	quently of redioective meterial, sealed				
CS-137 ICN ML	D-01#309389, 25 D 3550 #A7380,	182 5 101 (11/23)	/0/) 11/1/97)		
US-13/ NAS ME	0 3330 #A1300,	102.5 401 (
AGREEMENT STATE SPECIFIC	ICENSE WHICH AUTHORIZES THE U	NDERSIGNED TO CONDUCT	LICENSE NUMBE	1	
ABOVE (Four copies of the s	sechic intense must accompany an	e ninger (encorronni zeri.)	MD=0.0=1	01-01 MD	6/30/2003
· · · · · · · · · · · · · · · · · · ·		TION MUST BE CON	IPLETED BY APPL	ICANT)	•
THE UNDERSIGNED, HEREB	PORTIFY THAT:				
	tand the provision of the gener	ul license 10 CFR 150.20	reprinted on the inst	uctions of this fo	m; and I understand that I am
the virmon of bariupar	h these provisions as to all bypr the general license for which thi	roduct, source, or speci	d nuclear material wh	ich i possess and	use in non-Agreement States or
					20 are limited to a total of 180 days
in calendar year. With	the exception of work conducted	d in off-shore waters, wi	ich is authorized for	en unimited perio	d of unsent the calendar year.
non-Agreement States	r be inspected by NRC at the abo or offshore waters.				iddress for activities performed in
e. I understand that cond		ad above including one	duct of activities on a	iates or locations	different from those described
	uct of any activities not describ	a seferrement action in			
	authorization, may subject me to	o enforcement action, in	/ / N		L DATE / ha lan
SKIFYING OFFICER - RSO or Man	authorization, may subject me to agement Representative (Name and The up or er - Schmidt, P	o enforcement action, in signification in the signification of the second seco	A. Brueger	schned	F 6/7/02
SUZARRE F. Kr SUZARRE F. Kr VARNING: False statement	authorization, may subject me to sement Representative (Name and Till <u>neger-Schmidt, P</u> s in this certificate may be so	o enforcement action, in significate Tess AMAMA ubject to civil and/or te 18 U.S. C.Section	Thrulah criminal penanties.	NRC regulation	s require that submissions to make a willfully faise
EXTERNA OFFICER - RSO of Man SUZADDE F. Kr (ARNING: False statement a NRC be complete and a latement or representation OR NRC REVIEWING OF	authorization, may subject me to sement Representative (Name and Till <u>neger-Schmidt, P</u>	o enforcement action, in sign/fure ubject to civil and/or ts. 18 U.S.C.Section y of the United States SignATURE	Thrulah criminal penanties.	NRC regulations ninal offense to ithin its jurisdic	s require that submissions to make a willfully faise tion.
SUZADDE F. Kr YARNING: False statement ha NRC be complete and at tatement or representation OR NRC JSE ONLY	authorization, may subject me to sement Representative (Name and 700 <u>ueger-Schmidt, P</u> is in this certificate may be su socurate in all material respect to any department or agenc	o enforcement action, in SIGN/TURE TES. AMAMM ubject to civil and/or ts. 18 U.S.C.Section y of the United States	Thrulah criminal penanties.	NRC regulation	F 6/7/02- s require that submissions to make a willfully faise tion. TOTAL USAGE - DAYS TO DATE
SUZATION OFFICER - RSO or Man SUZATIONE F. Kr VARNING: False statement he NRC be complete and at tatement or representation OR NRC REVIEWING OF	authorization, may subject me to sement Representative (Name and 700 <u>ueger-Schmidt, P</u> is in this certificate may be su socurate in all material respect to any department or agenc	o enforcement action, in sign/fure ubject to civil and/or ts. 18 U.S.C.Section y of the United States SignATURE	Thrulah criminal penanties.	NRC regulations ninal offense to ithin its jurisdic	s require that submissions to make a willfully faise tion.

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NRC FORM 241 U.S. NUCLEAR RE((7-1999)	GULATORY COMMISSI	ON APPROVED BY Estimated burde request: 15 min	ONE: NO. 3150-0 m por response to a nutes. This notific	013 EXPIRES: 07/31/20 comply with his mandatory collect ation is required to that NRC in the neuro that hey are conducted protection of the public health a
REPORT OF PROPOSED ACT		eccordence with	h requirements for	protection of the public health a
NON-AGREEMENT STATES, AREAS		Management Br	anch (T-6 E6), U.	protection of the public health a g burden estimate to the Recor S. Nuclear Regulatory Commiscic by internet e-mail to bist @nra.gr information and Regulatory Affai los of Management and Budg ans used to impose an informati- netty valid CMB control number, it and to person and resulted
FEDERAL JURISDICTION, OR OFFS		NEOB-10202.	Content, Office of (3150-0013), Off	Information and Regulatory Affair
		 Washington, DC collection does 	20503. If a mi not display a curre	ans used to impose an information ty velid OMB control number, to
(Please read the instructions before comp		NRC may not c respond to, the in	monnation collection	r, and a person is not regulted n.
NAME OF LICENSEE (Person or firm proposing to conduct the activities	described below)		2. TYPE C	FREPORT
Krueger-Gilbert Health Physi	<u> </u>			
ADDREGS OF LICENSEE (Meiling address or other location what licens	The They be lucated	4. LICENSEE CON	TACT AND TITLE	·····
3601 E. Joppa Road		Wendy C	harlton/	Health Physicis
Baltimore, MD 21234				5, FACSIMLE NUMBER
		5. TELEPHONE NU		(Include Anna Codia)
7. ACTIVITIES TO BE CONDUC	TED UNDER THE GEN		5-5447	410-665-2074
	G AND/OR CALIBRATIO			
	SANDION CALIBRATIO		e nerar nirk	ADIATOR SERVICE
PORTABLE GAUGES OTHER (Speci	(fy)- 🔿			
	OF PACKAGING (CERTIFICATE	S OF COMPLIANCE NUM	BERS)	
				· · · · · · · · · · · · · · · · · · ·
CLIENT NAME ADDRESS, CITY/COUNTY STATE, ZIP CODE	8. ACTUAL PH (Sheet and I	VSICAL ADDRESS OF WO Number of other location.	ORK LOCATION Give as complete an a	ddrees or directions as possible.)
Nount Vernon Cardiology				:
355 Walker Lane, #406 Llexandria, VA 22310	Same	as 8		
achunalla, an 22510				
	10. CLIENT TE	LEPHONE NUMBER	11. WORK LOC	ATION TELEPHONE NUMBER
	(Include An 703-3	13~0943	(Include An	n com) 13-0943
12. DATES SCHEDULED	13. NUMBER OF	14.	15.	16. LOCATION
	WORK DAYS		DELETE	NUMBER TO BE
7/23/02 1/23/02		7/23/02	7/1/12	ASSIGNED BY NRC
LIST ADDITIONAL WORK SITES ON SEPARATE	SHEET(S) TO INCLUDE	ALL INFORMATIO	N CONTAINED I	VITEMS 9-16 ABOVE.
LIST RADIOACTIVE MATERIAL, WHICH WILL BE POSSESSED, USED, finalide description of type and quently of redicective material, seeled	INSTALLED, SERVICED, OR T	ESTED		
		•		
CS-137 ICN MLD-01#309389, 250 CS-137 NAS MED 3550 #A7380, 1	uci (11/23/8)	7)		
AGREEMENT STATE SPECIFIC LICENSE WHICH AUTHORIZES THE UN ACTIVITIES WHICH ARE THE SAME, EXCEPT FOR LOCATION OF USE ABOVE. (Four copies of the specific license must accompany the	AS SPECIFIED IN MEM 0.	MD-05-10	1-01 MD	EXPIRATION DATE 6/30/2003
	ION (MUST BE COMP			1 07 007 2005
HE UNDERSIGNED, HEREBY CERTIFY THAT			,	
All information in this report is true and complete.			:	
b. I have read and understand the provision of the general required to comply with these provisions as to all bypro offshore waters under the general license for which this	oduct, source, or special n	uclear material which	loossess and us	and I understand that I am e in non-Agreement States or
c. I understand that activities, including storage, conducts in calendar year. With the exception of work conducted	ed in non-Agreement State	a under general licen	at 10 CFR 150.20	are limited to a total of 180 days If time in the calendar year,
d, I understand that I may be inspected by NRC at the abo non-Agreement States or offshore waters.				-
e. I understand that conduct of any activities not describe above or without NRC authorization, may subject me to	d abova, including condu inforcement action, inclu	ct of activities on date ding civil or criminal	es or locations difi penalties.	ferent from those described
TIFYING OFFICER - RSO or Management Representative (Name and Title,	SIGNATURE	11	. 5. [DATE CLAS
uzanne F. Krueger-Schmidt, P?r			u- rankle	67/02
RNING: False statements in this certificate may be su NRC be complete and accurate in all material respects tement or representation to any department or agency	 18 U.S.C. Section 100)1 makes it a crimin	al offense to ma	ka a willfully falco
RNRC REVEWING OFFICIAL Transformed Nagra and Tilly)	I SIBIPATURE	1	DATE	TOTAL USAGE - DAYS TO DATE
BE ONLY .	- John Me	faith _	6/13/02	
FORM 241 (7-1980)	Y!			PRINTED ON RECYCLED PAPER
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