

NRC FORM 381
(7/78)

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: Owner of the property as shown on the available recorded plat

Engineering & Inspections Unlimited, Inc.

2. ADDRESS OF LICENSEE: primary address or other facility where licensee may be located

5455 North Federal Highway

Suite 1

Boca Raton, FL 33487

7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.28

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

PORTABLE CALIBES OTHER (Specify) \rightarrow RADIOGRAPHY \rightarrow REGISTERED AS USER OF PACKAGING CERTIFICATE OF COMPLIANCE NUMBER(s)

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

PLEASE SEE ATTACHMENT FOR ANSWERS TO
ITEMS 8, 9, 10, 11, 12, and 13.

9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION
(Client name and address on other licenses must be identical to information on this license or identical to another)

10. CLIENT TELEPHONE NUMBER
(Include Area Code)

11. WORK LOCATION TELEPHONE NUMBER
(Include Area Code)

12. DATES SCHEDULED FROM TO

13. NUMBER OF WORK DAYS AND

14. CLIENT TELEPHONE NUMBER
(Include Area Code)

15. TELEPHONE NUMBER
(Include Area Code)

16. WORK LOCATION TELEPHONE NUMBER
(Include Area Code)

17. LOCATION REFERENCE NUMBER AND DATE

18. ADDITIONAL WORK SITES OR SEPARATE SITES TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 9-18 ABOVE

19. LIST ANY SPECIAL MATERIAL, WHICH WILL BE PROVIDED, OTHER, MATERIAL, SERVICES, OR TESTS
(Provide description of type and quantity of radioactive material, material, or substance to be used.)

Iridium 192 (100 curies or less)
Sealed Source AEA Technology QSA Model AA24-9 for use in exposure device AEA
Technology QSA Model 660 Radiographic Exposure Device

20. AGREEMENT STATE WORK LICENSE NUMBER (WHICH APPLIES TO CONDUCT ACTIVITIES WHERE THE SAME, EXCEPT FOR LOCATION OF WORK SPECIFIED IN ITEM 8)

LICENSE NUMBER: 1112-1 STATE: FL EXPIRATION DATE: 3/31/05

21. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)

22. THE UNDERSIGNED, WHOSE CERTIFYING OFFICER:
- All information in this report is true and complete.
 - I have read and understand the provisions of the general license 10 CFR 150.28 reported on the instructions of this form, and I understand that I am required to comply with those provisions as to all equipment, sources, or specific material included 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.
 - I understand that activities, including storage, conducted in non-agreement States under general license 10 CFR 150.28 are subject to a limit of 100 days in calendar year. With the exception of work conducted in offshore waters, which is authorized for an unlimited period of time in the calendar year, I understand that it may be suspended by NRC at any time that work with radioactive material at the licensee's home office address for activities performed by non-agreement States or offshore waters.
 - I understand that copies of my non-agreement documents shall, including copies of activities performed, be made available to the licensee or to the NRC. I understand that I am required to comply with those provisions as to all equipment, sources, or specific material included 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.

23. SIGNATURE OF APPLICANT: Lynn D. Shepard DATE: 10/14/02

24. SIGNATURE OF CERTIFYING OFFICER: Janice H. Kirby DATE: 10/15/02

25. TOTAL USAGE - DAYS TO DATE: 112

FOR NRC USE ONLY

ATTACHMENT 1

ITEM 8 **Client name, address, city/country, state, zip code**
Hamakua Energy Partners
45-300 Lehua Street
Honokaa, HI 96727

ITEM 9 **Actual physical address of work location**
Hamakua Energy Partners
45-300 Lehua Street
Honokaa, HI 96727

001039

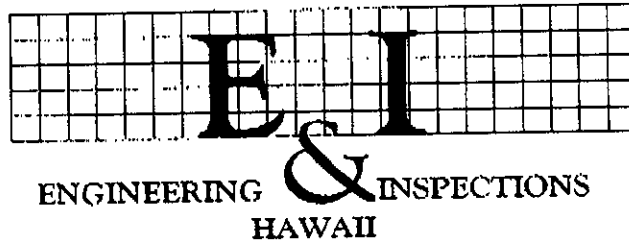
ITEM 10 **Client telephone number**
(808) 775-1711

ITEM 11 **Work location telephone number**
(808) 775-1711

ITEM 12 **Dates Scheduled**
10/21/02 - 10/31/02

ITEM 13 **Number or work days**
5 Days

NRC Location Number: 001039



FAX TRANSMITTAL

Date: October 14, 2002 Doc. No.: 2002-10-14

To: **Janice H. Kirby** From: **Scott Kinsella**
Company: **U.S.N.R.C.** Company: **E & I Hawaii**
Tel.: **800-577-8510** Tel.: **(808) 682-1667**
Fax.: **404-562-4955** Fax.: **(808) 682-1834**
No. of Pages: **3**

Subject: NRC FORM 241

Dear Ms. Kirby;

We would like to request the following addition/re-opening of NRC Location number: 001039, in regards to our Radiographic activities.

See attachments

Thank You

Sincerely,

Scott Kinsella
Assistant RSO
Engineering & Inspections Hawaii

CC/Lynn Shepard RSO