NRC FORM 241 (7-1999) U.S. NUCLEAR REGULATORY COMMISSION

REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES

(Please read the instructions before completing this form)

APPROVED BY OMB: NO 3150-0013 EXPIRES: 07/31/2002
Estimated burden per response to comply with this mandatory collection request 16 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 estimates to the Records Management Branch (T-6 E6), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to bjsl@nrc.gov and to the desk officer, 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.

1. NAMES OF LICENSEE (Person or firm proposing to conduct the activities described below)
QUALITY ASSURANCE LABORATORIES

2. TYPE OF REPORT
☐ INITIAL ☒ REVISION ☐ CLARIFICATION

3. ADDRESS OF LICENSEE (Mailing address or other location where license may be located)
80 PLEASANT AVENUE
SOUTH PORTLAND, MAINE 04106

4. LICENSEE CONTACT AND TITLE: Gary E. Parechanian - VP

5 TELEPHONE NUMBER (including Area Code) 207-799-8911

6 FACSIMILE NUMBER (including Area Code) 207-799-7251

7. ACTIVITIES TO BE CONDUCTED IN NON-AGREEMENT STATES UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20

☐ WELL LOGGING ☐ LEAK TESTING AND/OR CALIBRATION ☐ TELETHERAPY/IRRADIATOR SERVICE
☐ PORTABLE GAUGES ☐ OTHER (Specify)
☑ RADIOGRAPHY REGISTED AS USER OF PACKAGINGS (CERTIFICATES OF COMPLIANCE NUMBERS) UN2974

8. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE
Citizens Communication Company
P.O. Box 604
Newport, Vermont 05855-0604

9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION (Street and Number or other location. Give as complete an address or directions as possible)
964 Clyde Street
Newport, Vermont 05855-0604

10. CLIENT TELEPHONE NUMBER (Include Area Code) 802-334-0378

11. WORK LOCATION TELEPHONE NUMBER (Include area code) 802-334-0378

12. DATES SCHEDULED FROM	TO	13. NUMBER OF WORK DAYS	14. ADD	15. DELETE	16. LOCATION REFERENCE NUMBER
12/ 06 /2002	12/09 /2002	4			NUMBER TO BE ASSIGNED BY NRC 001164

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 quanity of radioactive material, sealed sources, or devices to be used.)
IR 192 source, 660 projector/camera (S5033), curies (31 Cu)

18. AGREEMENT STATES SPECIFIC LICENSE WHICH AUTHORIZES THE UNDERSIGNED TO CONDUCT ACTIVITIES WHICH ARE THE SAME, EXCEPT FOR LOCATION OF USE, AS SPECIFIED IN ITEM 6, ABOVE. (Four copies of the specific license must accompany the initial NRC Form 241.)	LICENSE NUMBER	STATE	EXPIRATION DATE
	ME-05139	MAINE	FEBRUARY 28, 2007

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 cover sheet of this form set; 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 a 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.

TOTAL DAYS OF USUAGE 8

CERTIFYING OFFICER–RSO or Management Representative (Type/Print Name and Title)	SIGNATURE	DATE
Gary E. Parechanian-VP	Gary E Parechanian	12/03/2002

WARNING: FALSE STATEMENTS INTHE CERTIFICATE MAY BE SUBJECT TO CIVIL AND/ORCRIMINAL PENALTIES. NRC REGULATORY 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 (Type/Print Name and Title)	SIGNATURE	DATE
	John D. Kinneman		12/3/2002

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