	010	296 0812	p.1	
Apr 28 03 02:24p Barnhill Contracting Co	310	200		
1ph 20 00 04.11		•		
NRC FORM 241 U.S. NUCLEAR REGULATORY COMMISSION	APPROVED 8	Y OMB; NO. 3160-00	13 EXPIRES: 07/31/2002	
(7-1999)	request: 15 m	ien per response to c inutes. This notific: edian of the activities	tris expires: 07/31/2002 omply with this mandatory collection alion is required so that NRC may to ensure that they are conducted in protection of the public health and i burden estimate to the Revords: Nuclear Regulatory Commission, by Internet e-mail to bist @nrc.gov, information and Regulatory Affairs, or of Management and Budget, ans used to impose an information live wait OMB control number. The	
REPORT OF PROPOSED ACTIVITIES IN	accordance w	ith requirements for comments regarding	protection of the public health and burden estimate to the Revords	
NON-AGREEMENT STATES, AREAS OF EXCLUSIVE	Management i Washington, C	3ranch (T-6 E6), U.S C 20555-0001, or t	. Nuclear Regulatory Commission, by Internet e-mail to bist @nrc.gov.	
FEDERAL JURISDICTION, OR OFFSHORE WATERS	NEOB-10202	sk Officer, Office of 1 , (3150-0013), Offi DC 20503 - If a me	information and Regulatory Attairs, oe of Management and Budget, and used to impress an information.	
(Please read the instructions before completing this form)	collection does	s not display a curre conduct or sponsor	nily valid OMB control number, the , and a person is not required to t.	
NAME OF LICENSEE (Person or firm proposing to conduct the activities described below)	respond to, the	respond to, the information collection.  2. TYPE OF REPORT		
	MINITIAL TREVISION X CLARIFICATION			
Danhice Contracting Co  3. ADDRESS OF LICENSEE (Mailing address or other localish where licensee may be located)		INTACT AND TITLE	Δ <u>.</u> σσ	
P.O Box 1529		<i>A</i>	0-	
Tarkon N.C. 27886	Handy	Buckett	K.S.O.	
Janon M. C.	5. TELEPHONE (	NUMBER Code)	6. FACSIMILE NUMBER (Include Area Code)	
	252-260		910-296-0812	
7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERA	h			
WELL LOGGING LEAK TESTING AND/OR CALIBRATIONS	TE	LETHERAPY/IRR	ADIATOR SERVICE	
X PORTABLE GAUGES OTHER (Specify)		•		
REGISTERED AS USER OF PACKAGING (CERTIFICATES OF	F COMPLIANCE NU	MBERS)	<del></del>	
RADIOGRAPHY =>>				
8. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE  9. ACTUAL PHYSIC (Street and Num.	CAL ADDRESS OF I	NORK LOCATION I. Give as complete an e	ddress or directions as possible.)	
Caddell Constantion 151 Brigade Barriek's Complex				
P.O. Box 210097 21109 Fort Bragg + Anderses St.				
Caddece Construction Co In Street AL. 36109  Road Somey  AL. 36109  DACH  10. CLIENT TELEP	7-21-9	9-C= 604	17	
10. CLIENT TELEP (Macingle Area C	PHONE NUMBER	(Include An		
9/0-43	16-0213	910-4	188-1319	
12, DATES SCHEDULED 13. NUMBER OF WORK DAYS	14. ADD	15. Delete	16. Location Reference number	
May (-3003 Tomas 180 an			NUMBER TO BE ASSIGNED BY NRC	
May 2-2003 Loss			000147	
LIST ADDITIONAL WORK SIXES ON SEPARATE SHEET(S) TO INCLUDE A		ION CONTAINED I	N ITEMS 9-16 ABOVE.	
17. LIST RADIOACTIVE MATERIAL, WHICH WILL BE POSSESSED, USED, INSTALLED, SERVICED, OR TES (Include description of type and quantity of radioactive material, sealed sources, or devices to be used.)				
Type A. O. 3 Gba (8 mci) CS-137	7 4500	O introx	le 4640B	
Type A, 0.3 Gbg (8 mci) CS-137	λ	uclear (	Le 4640B	
18. AGREEMENT STATE SPECIFIC LICENSE WHICH AUTHORIZES THE UNDERSIGNED TO CONDUCT	LICENSE NUMBE	R STATE	EXPIRATION DATE	
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.)	033-09	عبيتها تقبلن مستبسبات كالا	5-31-2003	
19. CERTIFICATION (MUST BE COMPLE) 1, THE UNDERSIGNED, HEREBY CERTIFY THAT:	TED BY APPL	ICANT)		
a. All information in this report is true and complete.				
<ul> <li>t have read and understand the provision of the general license 10 CFR 150.20 reprint required to comply with these provisions as to all byproduct, source, or special nucleons.</li> </ul>				
offshore waters under the general license for which this report is filed with the U.S.		•		
<ul> <li>t understand that activities, including storage, conducted in non-Agreement States in calendar year. With the exception of work conducted in off-shore waters, which is</li> </ul>				
d. I understand that I may be inspected by NRC at the above listed work site locations	and at the Licer	see home office ad	dress for activities performed in	
non-Agreement States or offshore waters.				
<ul> <li>i understand that conduct of any activities not described above, including conduct above or without NRC authorization, may subject me to enforcement action, including</li> </ul>			fferent from those described	
SERVING OFFICER RSO of Management Representative (Name and Title) SIGNATURE			DATE	
grand Nurotalti K.S.O. Bands De	uc helt		4-28-03	
ADMINIO, Sulpa statements in this soutificate many he sublant to stall a little	inal manaki	MDC venuleit	manifem diame	
ARNING: Rabe statements in this certificate may be subject to civil and/or crimitie NRC be complete and accurate in all material respects. 18 U.S.C. Section 1001	i makes it a cri	minal offense to m	nake a willfully false	
te NRC be complete and accurate in all material respects. 18 U.S.C. Section 1001 attement or representation to any department or agency of the United States as to	i makes it a cri	minal offense to m	nake a willfully false on.	
te NRC be complete and accurate in all material respects. 18 U.S.C. Section 1001	i makes it a cri	minal offense to m	nake a willfully false	