

JUL-10-2003 16:09

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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)

APPROVED BY: NO. 3100-0118 **DATE:** 07/17/03
Customer burden per response to comply with this mandatory regulation is estimated to be 15 minutes. This regulation is required as the 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 this regulation to the Federal Management Service (7-6 EN), U.S. Nuclear Regulatory Commission, Washington, DC 20545-0201, or by Internet e-mail to: fms@nrc.gov and to the Desk Officer, Office of Information and Regulatory Affairs, NRC-17222, (3100-0118), Office of Management and Budget, Washington, DC 20503. If a means used to provide 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. NAME OF LICENSEE (Print or type name of licensee and company name)
 JOHN TURNER CONSULTING, INC.

2. TYPE OF REPORT
 INITIAL REVISION CLARIFICATION

3. ADDRESS OF LICENSEE (Printing address of office location may be required)
 818 CENTRAL AVE.
 DORVER NH 03820

C. LICENSEE CONTACT AND TITLE
 DON POLLARD

G. TELEPHONE NUMBER (Include Area Code) **H. FACSIMILE NUMBER (Include Area Code)**
 603 749 1841 603 743 3370

7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.26

WELL LOGGING LEAK TESTING AND/OR CALIBRATIONS THERAPY RADIATION SERVICE

PORTABLE GAUGES OTHER (Specify) _____

RADIOGRAPHY REGISTERED AS USER OF PACKAGING (CERTIFICATE OF COMPLIANCE NUMBER) _____

8. LICENSEE NAME, ADDRESS, CITY, STATE, ZIP CODE
 TetraTech - FW
 2300 Lincoln Highway East
 One Oxford Valley, Suite 200
 Langhorne, PA 19047

9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION (Print or type address of work location or address of operations as applicable)
 Jamaica Island Confill
 Portsmouth Naval Shipyard
 Kittery ME

10. NIGHT TELEPHONE NUMBER (Include Area Code) **11. WORK LOCATION TELEPHONE NUMBER (Include Area Code)**
 215 702 4089 207 451 9751

12. DATES SCHEDULED	13. NUMBER OF WORK DAYS	14. ADD	15. DELETE	16. LOCATION REFERENCE NUMBER
FROM: Aug 5, 2003 TO: Aug 8, 2003	4			NUMBER TO BE ASSIGNED BY NRC: 000579

17. LIST ADDITIONAL INSTRUMENT TYPES ON SEPARATE SHEETS TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 5-16 ABOVE.
Provide description of type and quantity of instruments used, each equipped, or to be used.

Ther Nuclear Density Gauge Am 241; Cs
 Cs 137

18. AGREEMENT STATE GENERAL LICENSE WHICH AUTHORIZES THE LICENSEE TO CONDUCT ACTIVITIES UNDER THIS REPORT (Print or type license number and state name. Attach copies of the specific license must accompany this report NRC Form 201.)
 LICENSE NUMBER: 423 R STATE: NH EXPIRATION DATE: June 30 200

19. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)

I, THE UNDERSIGNED, HEREBY CERTIFY THAT:

- All information in this report is true and complete.
- I have read and understand the provisions of the general license 10 CFR 150.26 referred to in the instructions of this form; and I understand that I am required to comply with these provisions as to all equipment, sources, 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.
- I understand that activities, including surveys, conducted in non-agreement states under general license 10 CFR 150.26 are limited to a total of 180 days in calendar year. With the exception of work conducted in offshore waters, which is unlimited for an unlimited period of time in the calendar year.
- I understand that I may be inspected by NRC at the above listed work site location and at the licensee home office address for activities performed in non-agreement states or offshore waters.
- I understand that conduct of any activities not described above, including conduct or acquisition on shore or offshore different from those described above or activities not described above, may subject me to enforcement action, including civil or criminal penalties.

20. SIGNATURE OF LICENSEE **DATE**
 DON POLLARD 8-4-03

21. SIGNATURE OF NRC OFFICIAL (Typed name and title) **DATE** **TOTAL USAGE - DATE TO DATE**
 John McRath 8/4/03 27

FOR NRC USE ONLY **REVISION OFFICIAL (Typed name and title)** **DATE** **TOTAL USAGE - DATE TO DATE**
 NRC FORM 201 (7-1999) PRINTED ON RECYCLED PAPER

② 8/4/03.

•
 • 21 West Auburn Street
 • Manchester, NH
 •
 • 15 Holly Street
 • Scarborough, ME

Main Office Information:
 JOHN TURNER CONSULTING, INC.
 818 CENTRAL AVENUE
 DOVER, NH 03820
 Phone#: 603-749-1841
 Fax#: 603-743-3370

Facsimile Transmittal

To: _____ From: Melissa
 Company: NRC Date: 8-4-03
 Fax #: 610-337-5269 Phone #: _____
 # of Pages Including Cover: 2

Re: Sorry, short notice / If possible I'd like
an answer before five today. If you can't, I'll

Urgent For Review Please Comment Please Reply

understand
 Thanks!

TEAMWORK