

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 OMB: NO. 2160-2013 EXPIRES: 07-12-2005
 Estimated burden per response to comply with this mandatory collection request: 15 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 comment regarding burden estimate to the Records Management Branch (1-8 EB), U.S. Nuclear Regulatory Commission, Washington, DC 20586-0001, or by Internet e-mail to bja@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NIOS-10202, (3169-0013), Office of Management and Budget, Washington, DC 20503. If a mark used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor it, and persons are not required to respond to the information collection.

1. NAME OF LICENSEE (Foster or firm proposing to conduct the activities described below)
John Turner Consulting, Inc.

2. ADDRESS OF LICENSEE (Including optional or other locations where licenses may be required)
**818 Central Ave.
 Dover NH 03820**

2. TYPE OF REPORT
 INITIAL REVISION CLARIFICATION

3. LICENSEE CONTACT AND TITLE
Don Pollard

5. TELEPHONE NUMBER (Include Area Code)
603 747 1841

6. FACSIMILE NUMBER (Include Area Code)
603 743 3370

7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN BY 10 CFR 155.25

WELL LOGGING LEAK TESTING AND/OR CALIBRATIONS THERAPY/RADIATION SERVICE

PORTABLE GAUGES OTHER (Specify) **⇒** _____

RADIOGRAPHY **⇒** REGISTERED AS USER OF PACKAGING (CERTIFICATE OF COMPLIANCE NUMBERS)

8. CLIENT NAME, ADDRESS, CITY, COUNTY, STATE, ZIP CODE
**Tetratex - EW
 2300 Lincoln Highway East
 One Oxford Valley, Suite 200
 Langhorne, PA 19047**

9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION (Street and Number or other location. Give in complete or address or direction, as possible)
**Jamaica Island Canfill
 Portsmouth Naval Shipyard
 Kittery ME**

10. CLIENT TELEPHONE NUMBER (Include Area Code)
215 702 4089

11. WORK LOCATION TELEPHONE NUMBER (Include Area Code)
207 451 9751

12. DATES SCHEDULED	13. NUMBER OF WORK DAYS	14. ADD.	15. DELETE	16. LOCATION REFERENCE NUMBER
FROM: 9/8/2003 TO: 9/11/2003	4			000579

17. LIST ADDITIONAL WORK SITES ON SEPARATE SHEET(S) TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 8-16 ABOVE.

18. LIST RADIOACTIVE MATERIAL, WHICH WILL BE POSSESSED, USED, INSTALLED, SERVICED, OR TESTED (Include description of type and quantity of radioactive material, sealed source, or device to be used)
Tracer Nuclear Density Gauge Am 241; Be Cs 137

19. AGREEMENT STATE SPECIFIC LICENSE WHICH AUTHORIZES THE UNDERSIGNED TO CONDUCT ACTIVITIES WHICH ARE THE SAME, EXCEPT FOR LOCATION OF USE, AS SPECIFIED IN ITEM 8 ABOVE. (Four copies of the specific license must accompany this initial NRC Form 261.)

LICENSE NUMBER: **423 R** STATE: **NH** EXPIRATION DATE: **June 30 2004**

19. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)

THE UNDERSIGNED, HEREBY CERTIFY THAT:

- All information in this report is true and complete.
- I have read and understand the provision of the general license 10 CFR 155.25 reprinted on the instructions of this form; 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.
- I understand that activities, including storage, conducted in non-agreement States under general license 10 CFR 155.25 are limited to a total of 180 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 I may be inspected by NRC at the above listed work site locations and at the licensee's 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 of activities on water or locations different from those described above or without NRC authorization, may subject me to enforcement action, including civil or criminal penalties.

CERTIFYING OFFICER - CEO or Management Representative (Name and Title) **Don Pollard** SIGNATURE **[Signature]** DATE **9-5-03**

WARNING: False statements in this certificate may be subject to civil and/or criminal penalties. NRC regulations require that submissions to the NRC be complete and accurate in all material respects. 18 U.S.C. Section 1004 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 REVIEWING OFFICIAL (Typed/Printed Name and Title) **[Signature]** SIGNATURE **[Signature]** DATE **9/5/03** TOTAL USAGE DAYS TO DATE **45**

NRC FORM 261 (7-1999) PRINTED ON RECYCLED PAPER

U.S. NUCLEAR REGULATORY COMMISSION

APPROVED BY QMS: NO. 2160-2003
Estimated burden per response to comply with this mandatory collection request: 15 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 estimate to the Records Management Branch (T-4 EB), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by Internet e-mail to b1c1@nrc.gov, and to the Chief Officer, Office of Information and Regulatory Affairs, NEOS-10202, (2150-0013), Office of Management and Budget, Washington, DC 20503. If a monitor 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.

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 (Person or firm proposing to conduct the activities described below)
John Turner Consulting, Inc
2. ADDRESS OF LICENSEE (including address of other locations where licensed work will be performed)
**818 Central Avenue
Dover, NH 03820**

3. TYPE OF REPORT
 INITIAL REVISION CLARIFICATION
4. LICENSEE CONTACT AND TITLE
Melissa Randall office manager
5. TELEPHONE NUMBER (include Area Code)
6. FACSIMILE NUMBER (include Area Code)

7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.24
 WELL LOGGING LEAK TESTING AND/OR CALIBRATIONS THERAPY/RADIATION SERVICE
 PORTABLE GAUGES OTHER (Specify) _____
 RADIOGRAPHY REGISTERED AS USER OF PACKAGING (CERTIFICATE OF COMPLIANCE NUMBERS)

8. CLIENT NAME, ADDRESS, CITY/STATE, ZIP CODE
**The Nutmeg Companies
31 New London Turnpike
Norwich, CT 06360**

9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION (Street and Number or other location. Give as complete as address is available or precise)
**Building 180 to 300 in CIA Area
Portsmouth Naval Shipyard
Kittery, ME**
10. CLIENT TELEPHONE NUMBER (include Area Code) **860-823-1780**
11. WORK LOCATION TELEPHONE NUMBER (include Area Code) **860-625-2918**

12. DATES SCHEDULED	13. NUMBER OF WORK DAYS	14. ADD	15. DELETE	16. LOCATION REFERENCE NUMBER
FROM 9/9/03 TO 9/9/03	1			000982

LIST ADDITIONAL WORK BITES ON SEPARATE SHEET(S) TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 8-16 ABOVE.

17. LIST RADIOACTIVE MATERIAL, WHICH WILL BE POSSESSED, USED, INSTALLED, SERVICED, OR TESTED (include description of type and quantity of radioactive material, actual quantity, or devices to be used)

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 8 ABOVE. (Four copies of this specific license must accompany this initial NRC Form 241.)
LICENSE NUMBER **423R** STATE **NH** EXPIRATION DATE **June 30, 2004**

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 150.24 reprinted on the instructions of this form; 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 150.24 are limited to a total of 100 days in calendar year. With the exception of work conducted in off-shore waters, which is authorized for an unlimited period of time in the calendar year.
d. 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.
e. I understand that conduct of any activities not described above, including conduct of activities at other or locations different from those described above or without NRC authorization, may subject me to enforcement action, including civil or criminal penalties.

CERTIFYING OFFICER - PGO of Management Representative (Name and Title) SIGNATURE DATE
Melissa Randall office manager **Melissa Randall** **Sept 5, 2003**

WARNING: False statements in this certificate may be subject to civil and/or criminal penalties. NRC regulations 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 or to any officer within its jurisdiction.

FOR NRC REVIEWING OFFICIAL (Typed Printed Name and Title) SIGNATURE DATE TOTAL USAGE - DAYS TO DATE
Judith A. Faust **Judith A. Faust** **9/2/03** **45**

30 9/15/03