NRC FORM 241 (8-2002)	0.5. NUCLEAR REG	ULATORY COMMISSION	Estimated bu request: 15	BY OMB: NO. Irden per respoi minutes. This	3150-00 nse to c notifica	EXPIRES: 08/31/200 omply with this mandatory collection ation is required so that NRC ma to ensure that they are conducted in
REPORT OF PROPOSED ACTIVITIES IN				ection of the a with requireme or stremments re	ctivities nts for parding	to ensure that they are conducted in protection of the public health and burden estimate to the Record. Nuclear Regulatory Commission. It or by internet e-mail to sk Officer, Office of Information and \$150-0013), Office of Managemen. If a means used to impose at play a currently valid OMB control of the species and a person is not or species.
NON-AGREEMENT STATES, AREAS OF EXCLUSIVE			Management Washingto	Branch (T-6 E n, DC 205	6) U.S 55-000	Nuclear Regulatory Commission 1, or by internet e-mail (
FEDERAL JURISDICTION, OR OFFSHORE WATERS				nrc.gov, and to ffairs, NEOB-1 Washington, D	The De: 0202, (3	sk Officer, Office of Information and 3150-0013), Office of Managemen 3 If a means used to impose a
(Please read the instructions before completing this form)				ollection does NRC may not spond to, the in		
NAME OF LICENSEE (Person or firm proposing to conduct the activities described below)			2. TYPE OF REPORT			
CODE SERVICES, INC.			דואו 🔁	MITIAL REVISION CLARIFICATION		ON CLARIFICATION
3. ADDRESS OF LICENSEE (Mailin	re may be located)	4. LICENSEE C	CONTACT AND TO	ILE		
2205		JAMES CHANDLER, RSO				
DECA		5. TELEPHONE	NUMBER Code)	T	B. FACSIMILE NUMBER (Include Area Code)	
		256-340			256-340-1134	
7.	ACTIVITIES TO BE CONDUC	TED UNDER THE GENER	AL LICENSE (GIVEN IN 10	CFR 15	50,20
WELL LOGGING	LEAK TESTING	AND/OR CALIBRATIONS	, 🔲 T e	ELETHERAP	Y/IRRA	DIATOR SERVICE
PORTABLE GAUGE	S OTHER (Specify	γ ⇒				
X RADIOGRAPHY	REGISTERED AS USER OF	PACKAGING (CERTIFICATES O	F COMPLIANCE N	UMBERS)		
B. CLIENT NAME, ADDRESS, CITY/O		To complete the control				
	,	9, ACTUAL PHYSIC (Street and Num	AL ADORESS OF ber or other location	n. Give as compi	N Isle an ac	ddress or directions as possible.)
M & D MEC	HANICS MAN ST. SE					WASP RD
DECATUR,		KEDSTO	NE ARSE	NAL / E	IRMY	
	_	10. CLIENT TELEP	WOME NUMBER	\$ 44 M/C	BV LOC	ATION TELEPHONIC NI IMPED
contact; JOEL ELLIS		(Include Area C	noke Nomber	e) (include Area Code)		Code)
contact; JOE	D BUDIS	256-214-				
	SCHEDULED				6-8	
12. DATES	SCHEDULED TO	256-214- 13, NUMBER OF WORK DAYS	3032 14.	25 15.	6-8	80-8120
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