US NRC REGION 2 404_56	<u>2_4</u> 955	10/17 '(	03 09:22 NO	.467 02/02	
DOT-17-2003 07:50am From-APACNTIC JACKSO	NVILLE BRANCH	+810-577 <del>-</del> E	T-80	6 P.002/002 F-935	
NRC FORM 241 U.S. NUCLEAR REGI	DLATORY COMMIS	SION APPROVED BY	DMR: NO. 3150-00	SUPPLESS VERNICAVE	
(8-2007)		request: 15 mi	inutes. This notifica	lion is required so that NRC may	
REPORT OF PROPOSED ACTIVITIES IN			th requirements for p	protection of the public health and	
NON-AGREEMENT STATES, AREAS OF EXCLUSIVE			Management Branch (T-6 EB), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to		
FEDERAL JURISDICTION, OR OFFSHORE WATERS		infocollects@m	e gov. and to the Des line, NEOB-10202; (3	ik Dillour, Office of Information and 150-0013), Office of Managament	
		and Budget, W information co	eshington, DC 2050; loction does not dis	i. If a means used to impose at lay a currently valid OMB contro	
(Please read the instructions before completing this form)		required to resp	APPROVED BY CMB: NO. 3150-6013  Extinated burden per response to comply with this mondatory collection request: 15 minutes. This notification is required so that NRC may schedule inspection of the activities to ensure that the conducted in accordance with requirements for protection of the public health and stafety. Send comments regarding burden estimate to the Records Management Branch (T-8 EB), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to infocolects@me.gov, and to the Deat Dillour, Office of Information and Regulatory Affairs, NEOB-10202; (3150-0013), Office of Management and Budgirt, Washington, DC 20503. If a means used to impose an information collection does not display a cumently valid Office control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.		
1 NAME OF UCENSEE if the and or firm proposing to conduct the extriles described below)			2. TYPE OF REPORT		
APAC-ATLANTIC TNC			☐ INITIAL ☐ REVISION  ☐ CLARIFICATION		
3. ADDRESS OF LICENSEE (Molling address or other location where libensee may be located)		4. UCENSEE CO	4. UCENSEE CONTACT AND TITLE		
PO. BOX 399					
Kinsta NC 28502		S. TELEPHONE!	S. TELEPHONE NUMBER (Include Area Code)  6. FACSIMILE NUMBER (Include Area Code)		
		1 '	7-5659	910 - 577 - 6469.	
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7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 180.20  WELL LOGGING LEAK TESTING AND/OR CALIBRATIONS TELETHERAPY/IRRADIATOR SERVICE					
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RECISTERED AS USER OF PACKAGING (CERTIFICATES OF COMPLIANCE NUMBERS)					
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3 10/17/03

REVIEWING OFFICIAL (Typed/Printed Name and Title)

FOR NRC

USE DNLY

NRO FORM 241 (8-2002)

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TOTAL USAGE - DAYS TO DATE

29
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10/12/03

10/17/03