

FAX TRANSMISSION

WASHINGTON STATE UNIVERSITY

RADIATION SAFETY OFFICE

NUCLEAR RADIATION CENTER

PULLMAN, WA 99164-1302

509-335-8574

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To: Nuclear Materials Safety Branch I
USNRC Region IV
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Arlington, TX 76011-8064

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Number of Pages: 2 (including this cover sheet)

From: Steve Eckberg, Assistant Director
Subject: Clarification of NRC Form 241
Date: September 28, 2004

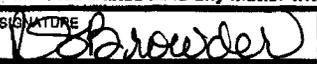


Washington State University is providing clarification of our existing reciprocity notification to use up to 1.5 mCi of C-14 in primary productivity studies. This research effort takes place on lakes (Petit, Alturas, Redfish and Stanley) in the Sawtooth Mountains of Idaho. This next trip will commence on October 11 through 15, 2004. A clarification of NRC Form 241 is attached for your convenience.

If you have any questions, please do not hesitate to contact me at 509-335-8574. Thank you for your consideration in this matter.

CC: Idaho Reciprocity File
Main User/Barber

Rachel S. Browder
Health Physicist
R. Browder
9-29-04

NRC FORM 241 (8-2002)		U.S. NUCLEAR REGULATORY COMMISSION		APPROVED BY OMB: NO. 3150-0013 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-8 E6), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to infocoll@nrc.gov , and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0013), Office of Management and Budget, Washington, DC 20503. If a means 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.		EXPIRES: 08/31/2009	
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) Washington State University				<input type="checkbox"/> INITIAL <input type="checkbox"/> REVISION <input checked="" type="checkbox"/> CLARIFICATION			
3. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be located) Radiation Safety Office Nuclear Radiation Center Pullman, WA 99164-1302				4. LICENSEE CONTACT AND TITLE Steve Eckberg, Assistant Director		5. TELEPHONE NUMBER (Include Area Code) (509) 335-8574	
				6. FACSIMILE NUMBER (Include Area Code) (509) 335-1615			
7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20 <input type="checkbox"/> WELL LOGGING <input type="checkbox"/> LEAK TESTING AND/OR CALIBRATIONS <input type="checkbox"/> TELETHERAPY/IRRADIATOR SERVICE <input type="checkbox"/> PORTABLE GAUGES <input checked="" type="checkbox"/> OTHER (Specify) ⇒ Use of 1.5 mCi of C-14 labeled NaHCO ₃ in primary productivity studies in lakes in the Sawtooth Mountains <input type="checkbox"/> RADIOGRAPHY ⇒ REGISTERED AS USER OF PACKAGING (CERTIFICATES OF COMPLIANCE NUMBERS)							
8. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE Bioline Environmental Counseling ATTN: Bob Griswold P.O. Box 205 Stanley, ID 83278-0205				9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION (Street and Number or other location. Give as complete an address or directions as possible.) Field locations on four lakes near Stanley, ID (in Sawtooth Mountains) Redfish Lake, Petit Lake, Stanley Lake and Alluras Lake.			
				10. CLIENT TELEPHONE NUMBER (Include Area Code) (208) 774-3345		11. WORK LOCATION TELEPHONE NUMBER (Include Area Code) (208) 330-9544	
12. DATES SCHEDULED FROM: 10/11/2004 TO: 10/15/2004		13. NUMBER OF WORK DAYS 5	14. ADD	15. DELETE	16. LOCATION REFERENCE NUMBER Number To Be Assigned By NRC		
LIST ADDITIONAL WORK SITES ON SEPARATE SHEET(S) TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 9-16 ABOVE.							
17. LIST RADIOACTIVE MATERIAL, WHICH WILL BE POSSESSED, USED, INSTALLED, SERVICED, OR TESTED (include description of type and quantity of radioactive material, sealed sources, or devices to be used.) Ni-63 in a Hewlett Packard electron capture detector to measure atmospheric levels of chemicals.							
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.)				LICENSE NUMBER WN-C003-1	STATE WA	EXPIRATION DATE 6/30/2012	
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 150.20 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 150.20 are limited to a total of 180 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 locations 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 on dates or locations different from those described above or without NRC authorization, may subject me to enforcement action, including civil or criminal penalties.							
CERTIFYING OFFICER - RSO or Management Representative (Name and Title) Steven R. Eckberg, Assistant Director				SIGNATURE 		DATE 09/28/2004	
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 as to any matter within its jurisdiction.							
FOR NRC USE ONLY	REVIEWING OFFICIAL (Typed/Printed Name and Title) Rachel S. Browder Health Physicist			SIGNATURE 		DATE 9/29/04	TOTAL USAGE -- DAYS TO DATE