

NRC FORM 748 <small>(MM-YYYY)</small> MANDATORY DATA COLLECTION <small>AUTHORIZED BY 10 CFR 20, 150</small>			U.S. NUCLEAR REGULATORY COMMISSION APPROVED BY OMB: NO. 3150-0000 <small>Estimated burden per response to comply with this information collection request: 15 minutes. This information is required for the National Source Tracking System to track sources. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to infocollects@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0000), 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.</small>					
NATIONAL SOURCE TRACKING TRANSACTION REPORT								
1. LICENSEE			2. TYPE OF TRANSACTION		3. DATE OF TRANSACTION			
A. LICENSEE NAME AND ADDRESS	B. LICENSE NO.	C. DOCKET NO.	<input type="checkbox"/> NEW SOURCE MANUFACTURED <input type="checkbox"/> DISPOSAL <input type="checkbox"/> RECEIPT <input type="checkbox"/> REPORT SOURCE <input type="checkbox"/> TRANSFER					
4. PREPARER								
A. NAME OF PREPARER			B. DATE PREPARED		C. TELEPHONE NO. OF PREPARER			
5. SOURCE DATA								
A. MANUFACTURER	B. MODEL NO.	C. SERIAL NO.	D. RADIOACTIVE MATERIAL	E. ACTIVITY AND UNIT	F. ACTIVITY DATE	G. WASTE MANIFEST NO.	H. CONTAINER ID	I. COMMENT
6. TRANSFER DATA								
6A. NAME AND ADDRESS OF RECIPIENT		B. LICENSE NO.	C. DOCKET NO.	D. ESTIMATED ARRIVAL DATE	E. COMMENT			
7. RECEIPT DATA								
7A. NAME AND ADDRESS OF SHIPPING LICENSEE		B. LICENSE NO.	C. DOCKET NO.	D. COMMENT				
8. DISPOSAL DATA								
A. WASTE MANIFEST NO.	B. CONTAINER ID	C. METHOD OF DISPOSAL		D. COMMENT				
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.								

INSTRUCTIONS TO NRC AND AGREEMENT STATE LICENSEES FOR REPORTING HIGH-RISK SEALED SOURCE TRANSACTIONS

The numbered instructions which follow correspond to the numbered blocks. The completed form is considered to be Official Use Only Information; it is not considered to be Safeguards Information.

1. Licensee

- A. Enter the name and address of the company making the report – the address where the source is physically used/stored.
- B. Enter the license number of the company making the report. Include NRC or the Agreement State that issued the license (e.g., NRC-L0005 or CA-L0005)
- C. NRC licensees only -- Enter the docket number of the company making the report. Agreement State licensees -- Do not complete this block.

2. Type of Transaction

Check the box for the type of transaction being reported on the form. Report Source may be used to report initial inventory or a source that was missed in the initial inventory.

3. Date of Transaction

Enter the date that the transaction occurred, which would be the date the source was manufactured or the date of the transfer, receipt, or disposal.

4. Preparer

- Enter the name of the person who prepared the report.
- Enter the date the report was prepared.
- Enter the telephone number of the person who prepared the report.

5. Source Data

Complete this section for all manufacture, transfer, and receipt transactions. Do not complete for disposal transactions. Also complete this section for any sources discovered in the licensee's inventory that were not reported as part of the initial inventory.

- A. Enter the manufacturer of the source (i.e. the name of the company that made the source).
- B. Enter the model number of the source.
- C. Enter the serial number of the source.
- D. Enter the radioactive material in the source (i.e. Am-241, Am/Be -241, etc.).
- E. Enter the activity or source strength of the source in either curies or Becquerels.
- F. Enter the date for which the source strength is reported. For example, if the reported source strength was calculated, enter the date of the calculation.
- G. Enter the waste manifest number for any source that is part of a waste shipment to a waste broker or disposal facility; otherwise leave blank.
- H. Enter the ID of the container that holds the source that is part of a waste shipment to a waste broker or disposal facility; otherwise leave blank.
- I. Optional. If the source does not have a serial number, provide other identifying information in this block. Enter any information that may be pertinent to the source.

6. Transfer Data

Complete this section for all transfers. Also complete Section 5 with the information on the sources being transferred by the licensee.

- A. Enter the name and address for the facility to which the source is being transferred (i.e. the recipient).
- B. Enter the license number for the facility to which the source is being transferred (i.e., the recipient). If the source is being exported, enter the export license number.
- C. Optional. NRC licensees only -- Enter the docket number of the facility to which the source is being transferred. Agreement State licensees -- Do not complete this block.
- D. Enter the estimated arrival date of the shipment.
- E. Optional. Enter any additional information that may be pertinent to the transfer.

7. Receipt Data

Complete this section for all receipts. Also complete Section 5 with the information on the sources being received by the licensee.

- A. Enter the name and address of the facility from which you received the source.
- B. Enter the License number of the facility from which you received the source. If the source was imported, enter the import license number.
- C. Optional. NRC licensees only -- Enter the docket number of the facility from which you received the source. Agreement State licensees -- Do not complete this block.
- D. Optional. Enter any additional information that may be pertinent to the receipt.

8. Disposal Data

Complete this section for all disposals of high-risk sealed sources.

- Enter the waste manifest number.
- Enter the ID of the container that holds the source.
- Indicate the method of disposal (i.e. burial, incineration, etc).
- Optional. Enter any additional information that may be pertinent to the disposal.

9. DISTRIBUTION:

Mail one copy to:

Name of Contractor
Address of Contractor

or Fax a copy to:
000-000-0000