

# ACCEPTANCE REVIEW MEMO

**Licensee:** High Mountain Inspection Services Inc.

**License No.:** 49-26808-02      **Docket No.:** 030-33887

**Mail Control No.:** 470728

**Type of Action:** Amend    **Date of Requested Action:** 10-06-05

**Reviewer Assigned:**                      **Date Assigned to Reviewer:** 10-14-05

**Reviewer(s) Who Performed Review:**      Gaines

Response Received	Deficiencies Noted During Acceptance Review
1.	<del> </del>
2.	<del> </del>
3.	<del> </del>
4.	<del> </del>

**Reviewer's Initials:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Branch Chief's and/or SR. HP's Initials:** \_\_\_\_\_

**Date:** \_\_\_\_\_

<input type="checkbox"/> Yes	<input type="checkbox"/> No	Action - decommissioning notification should be issued within 30 days.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Termination request < 90 days from date of expiration
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Action to be expedited
<input type="checkbox"/> Medical emergency <input type="checkbox"/> Licensee in noncompliance (i.e. no RSO, location of use/storage not on license, radioactive material in possession not on license) <input type="checkbox"/> National Security <input type="checkbox"/> Other ( _____ )		
<b>Branch Chief's and/or Sr. HP's Initials:</b> _____		<b>Date:</b> _____

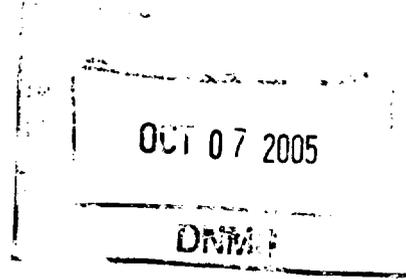
SISP Review		
<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<b>Non-Publicly Available, Sensitive</b> if <u>any</u> item below is checked
<input type="checkbox"/> Radionuclides, forms, and quantities <input type="checkbox"/> Location of RAM <input type="checkbox"/> Building drawings with locations of RAM <input type="checkbox"/> Security of RAM (locks, alarms, etc.) <input type="checkbox"/> SS&D Catalog information <input type="checkbox"/> Specifics of Emergency Plan (routes to and from RAM, response to security events, etc.) <input type="checkbox"/> Safeguards Information		
<b>Branch Chief's and/or Sr. HP's Initials:</b> <u>ADG</u>		<b>Date:</b> <u>10/14/05</u>

ADG

# High Mountain Inspection Service, Inc.

**October, 06,2005**

United States Nuclear Regulatory Commission  
Region IV  
Nuclear Materials Licensing Branch  
611 Ryan Plaza Drive Suite 400  
Arlington, TX 78011-4005



Jackie Cook:

We would like to request an amendment to our license, license # 49-26808-02, to remove Bill R. Fraser as RSO and add Kevin MacManus as the new RSO due to Bill's death on 10/6/2005.

I have worked as a radiographer from September of 1990 to August of 1992 for High Mountain Inspection, and with North American Inspection from August 1992 to March 1993, Then returned to High Mountain Inspection in March of 1993 to Present. The last 3 Years I have been acting as High Mountains Assistant RSO with all the duties of keeping and maintaining the Radiation Program. Attached to this letter are copies of my training and certifications

Sincerely,

Kevin MacManus

ARSO

High Mountain Inspection Service

P.O. Box 1508  
MILLS, WY 82644  
Phone (307) 266-0105  
Fax (307) 266-0027

P.O. Box 1255  
EVANSTON, WY 82931  
Phone (307) 789-0334  
Fax (307) 789-3516

470728



**NORTH DAKOTA DEPARTMENT OF HEALTH**  
**Environmental Health Section**

**Location:**  
1200 Missouri Avenue  
Bismarck, ND 58504-5264

**Fax #:**  
701-328-5200

**Mailing Address:**  
P.O. Box 5520  
Bismarck, ND 58506-5520

February 26, 2004

KEVIN A. MACMANUS  
HIGH MOUNTAIN INSPECTION SERVICE, INC.  
PO BOX 1508  
MILLS, WY 82644

Dear Mr. MACMANUS:

We are pleased to inform you that you successfully passed the industrial radiography examination required by Paragraph 5 of Subdivision 33-10-05-05.3.b of the North Dakota Radiological Health Rules. The minimum passing score is 70; your score was **92**. Since you have completed all of the training, testing and documentation requirements of Chapter 33-10-05, you may perform industrial radiography in North Dakota as a qualified radiographer using **radioactive materials only**.

Enclosed is your North Dakota Industrial Radiography I.D. card. Please check to see that all information is correct. If it is not, return the I.D. card to the Department with an indication of what changes need to be made. This I.D. card will expire five years from the date you completed the examination.

If you have any questions, or if your I.D. card is lost or damaged, contact the Radiation Control Program at 701.328.5188.

Sincerely,

Justin M. Griffin, P.E.  
Environmental Engineer  
Radiation Control Program  
Div. of Air Quality

JMG:saj  
Enc:

Environmental Health  
Section Chief's Office  
701-328-5150

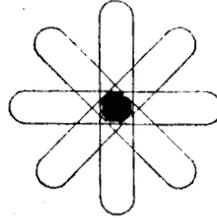
Air  
Quality  
701-328-5188

Municipal  
Facilities  
701-328-5211

Waste  
Management  
701-328-5166

Water  
Quality  
701-328-5210

# CERTIFICATE OF TRAINING



THIS CERTIFIES THAT KEVIN MACMANUS

HIGH MOUNTAIN  
INSPECTION SERVICE, INC.

HAS SATISFACTORILY COMPLETED RADIOGRAPHER TRAINING PROGRAM

CONDUCTED ON DECEMBER 13-16, 1991 IN CASPER, WYOMING



ROY A. PARKER, Ph.D.  
RADIATION PHYSICIST

**RIVEST** TESTING U.S.A.

NRC LICENSE NO: 35-27438-01

*Presents this Certificate to*

**KEVIN MacMANUS 520-90-5259**

*This Individual Has Satisfactorily Completed*

**International Union of Operating Engineers  
Local 2B**

Forty Hour Radiation Safety Training and Demonstrated  
Competency in the Subjects Identified in Appendix A to  
10 CFR Part 34 by Successfully Passing a Written Exam

*Given this 6th day of June 1998*

\_\_\_\_\_  
Union Representative

*Jim F. Kelly*  
\_\_\_\_\_  
Instructor - Jim F. Kelly



# ***AITEC USA, INC.***

OK LICENSE OK 27438 02

*Presents this Certificate to*

**KEVIN MacMANUS**

*This Individual Has Satisfactorily Completed*

**8 Hours Annual Refresher Training. Topics included 49 CFR  
Subpart H for HAZMAT; NRC Violations; Storage and  
HOMELAND SECURITY**

*Given this 5<sup>th</sup> day of March 2004*

**TRAINING SPONSORED BY INTERNATIONAL UNION  
OF OPERATING ENGINEERS, LOCAL 2**

\_\_\_\_\_  
Union Representative

*Jim F Kelly*  
Jim F Kelly



Kevin MacManus

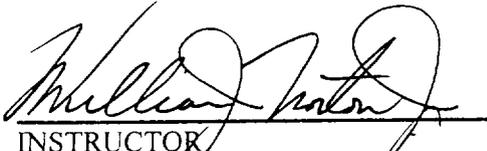
IN RECOGNITION OF HAVING ATTENDED AN  
EDUCATIONAL COURSE ON THE SUBJECT OF

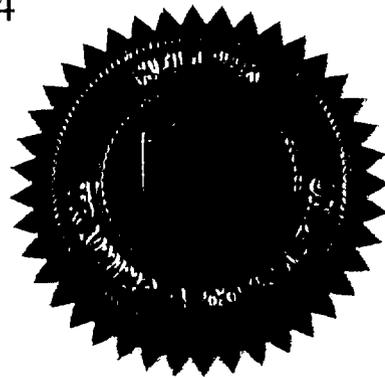
Hellier/SPEC  
Radiation Safety Officer  
(24 Hours)

IN WITNESS THEREOF THESE SIGNATURES HAVE BEEN  
HERETO AFFIXED

January 22, 2004

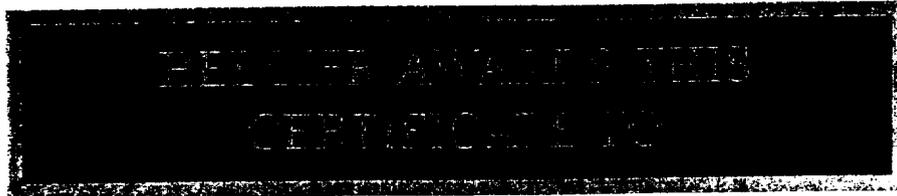
  
\_\_\_\_\_  
DIRECTOR

  
\_\_\_\_\_  
INSTRUCTOR



 **HELLIER**

TECHNICAL TRAINING & CONSULTING



Kevin MacManus

IN RECOGNITION OF HAVING ATTENDED AN  
EDUCATIONAL COURSE ON THE SUBJECT OF

Hellier/SPEC  
Source Retrieval  
(8 Hours)

IN WITNESS THEREOF THESE SIGNATURES HAVE BEEN  
HERETO AFFIXED

January 23, 2004

*Thomas W. Payne*  
\_\_\_\_\_  
DIRECTOR

*Richard*  
\_\_\_\_\_  
INSTRUCTOR



 HELLIER

TECHNICAL TRAINING & CONSULTING 470 728

DATE

This is to acknowledge the receipt of your letter/application dated 10/06/05, and to inform you that the initial processing, which includes an administrative review, has been performed.

There were no administrative omissions. Your application will be assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.

Please provide to this office within 30 days of your receipt of this card:

The action you requested is normally processed within 90 days.

A copy of your action has been forwarded to our License Fee & Accounts Receivable Branch, who will contact you separately if there is a fee issue involved.

Your action has been assigned Mail Control Number 470728.  
When calling to inquire about this action, please refer to this mail control number.  
You may call me at 817-860-8103.

Sincerely,

*Cecilia Murahan*  
Licensing Assistant

BETWEEN:

License Fee Management Branch, ARM  
and  
Regional Licensing Sections

(FOR LEMS USE)  
-----  
INFORMATION FROM LTS  
-----

Program Code: 03320  
Status Code: 0  
Fee Category: 30 2B  
Exp. Date: 20110331  
Fee Comments:  
Decom Fin Assur Regd: N

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: HIGH MOUNTAIN INSPECTION SERV. INC.  
Received Date: 20051007  
Docket No.: 3033887  
Control No.: 470728  
License No.: 49-26808-02  
Action Type: Amendment

2. FEE ATTACHED

Amount: \_\_\_\_\_  
Check No.: \_\_\_\_\_

3. COMMENTS

Signed *William J. Pirman*  
Date *10/14/05*

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered / \_\_/)

1. Fee Category and Amount: \_\_\_\_\_

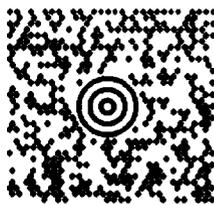
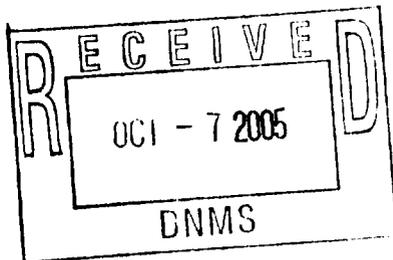
2. Correct Fee Paid. Application may be processed for:  
Amendment \_\_\_\_\_  
Renewal \_\_\_\_\_  
License \_\_\_\_\_

3. OTHER

\_\_\_\_\_  
Signed \_\_\_\_\_  
Date \_\_\_\_\_

**FROM:**  
JUDY BELL  
(307) 266-0105  
HIGH MOUNTAIN INSPECTION  
2000 REVENUE BLVD.  
CASPER WY 82601

LTR 1 OF 1



**TX 760 0-10**



**SHIP TO:**

JACKIE COOK/NRC LICENSING BRANCH  
(817) 860-8132  
U S NUCLEAR REGULATORY COMMISSION  
SUITE 400  
611 RYAN PLAZA DRIVE  
**ARLINGTON TX 76011-4018**

**UPS EARLY A.M.**

TRACKING #: 1Z V58 469 15 5750 4222

**1+**



BILLING: P/P