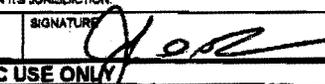


APPENDIX A

<b>NRC FORM 313 U. S. NUCLEAR REGULATORY COMMISSION</b> <small>(5-1989) 10 CFR 30, 32, 33 34, 35, 36, 38 and 40</small>		APPROVED BY OMB: NO. 3150-0120 EXPIRES: 08/1/2002
<b>APPLICATION FOR MATERIAL LICENSE</b>		
<b>INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW.</b>		
<b>APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH:</b> DIVISION OF INDUSTRIAL AND MEDICAL NUCLEAR SAFETY OFFICE OF NUCLEAR MATERIALS SAFETY AND SAFEGUARDS U.S. NUCLEAR REGULATORY COMMISSION WASHINGTON, DC 20555-0001		<b>IF YOU ARE LOCATED IN:</b> ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN. SEND APPLICATIONS TO: MATERIALS LICENSING SECTION U.S. NUCLEAR REGULATORY COMMISSION, REGION III 801 WARRENVILLE RD. LISLE, IL 60532-4351
<b>ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:</b> <b>IF YOU ARE LOCATED IN:</b> CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, PENNSYLVANIA, RHODE ISLAND, OR VERMONT, SEND APPLICATIONS TO: LICENSING ASSISTANT SECTION NUCLEAR MATERIALS SAFETY BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION I 475 ALLENDALE ROAD KING OF PRUSSIA, PA 19406-1415		ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND APPLICATIONS TO: NUCLEAR MATERIALS LICENSING SECTION U.S. NUCLEAR REGULATORY COMMISSION, REGION IV 611 RYAN PLAZA DRIVE, SUITE 400 ARLINGTON, TX 76011-8064
<b>PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S. NUCLEAR REGULATORY COMMISSION JURISDICTIONS.</b>		
1. THIS IS AN APPLICATION FOR (Check appropriate item) <input checked="" type="checkbox"/> A. NEW LICENSE <input type="checkbox"/> B. AMENDMENT TO LICENSE NUMBER _____ <input type="checkbox"/> C. RENEWAL OF LICENSE NUMBER _____		2. NAME AND MAILING ADDRESS OF APPLICANT (include Zip code) John Turner Consulting, Inc 19 Dover St, Dover NH, 03820
3. ADDRESS(ES) WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED 6 Clinton Ave, Westfield MA, 01085 19 Dover St, Dover NH, 03820		4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION John Turner TELEPHONE NUMBER 603-234-0850
SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER. THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.		
5. RADIOACTIVE MATERIAL. a. Element and mass number; b. chemical and/or physical form; and c. maximum amount which will be possessed at any one time.	6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED	
7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE	8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS.	
9. FACILITIES AND EQUIPMENT.	10. RADIATION SAFETY PROGRAM.	
11. WASTE MANAGEMENT.	12. LICENSEE FEES (See 10 CFR 170 and Section 170.31) FEE CATEGORY 3P AMOUNT ENCLOSED \$ 1400	
13. CERTIFICATION. (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT. THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, 36, 38 AND 40, AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF. WARNING: 18 U.S.C. SECTION 1001 ACT OF JUNE 25, 1948 62 STAT. 749 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.		
CERTIFYING OFFICER - TYPE/PRINTED NAME AND TITLE John Turner, President	SIGNATURE 	DATE 1/13/10
<b>FOR NRC USE ONLY</b>		
TYPE OF FEE APPROVED BY	FEE LOG FEE CATEGORY AMOUNT RECEIVED \$	CHECK NUMBER COMMENTS DATE

144373



APPENDIX B

**ITEMS 5 AND 6: MATERIALS TO BE POSSESSED AND PROPOSED USES**

Yes	No	Radiisotope	Manufacturer or Distributor Model No.	Quantity	Use As Listed on SSD Certificate	Specify Other Uses Not Listed on SSD Certificate
✓		Cesium-137	Sealed source manufacturer or distributor and model number:  Device manufacturer or distributor and model number: <i>Troxler, 3430, #12</i>	Not to exceed either the maximum activity per source or maximum activity per device as specified in Sealed Source and Device Registration Certificate	Yes <input checked="" type="checkbox"/>  Specific description of the gauge use: _____ _____ _____ _____ _____	<input type="checkbox"/> Not applicable  <input type="checkbox"/> Uses are: _____ _____ (Submit safety analysis supporting safe use)
✓		Americium-241	Sealed source manufacturer or distributor and model number:  Device manufacturer or distributor and model number: _____ _____	Not to exceed either the maximum activity per source or maximum activity per device as specified in Sealed Source and Device Registration Certificate	Yes <input checked="" type="checkbox"/>  Specific description of the gauge use: _____ _____ _____ _____ _____	<input type="checkbox"/> Not applicable  <input type="checkbox"/> Uses are: _____ _____ (Submit safety analysis supporting safe use)



APPENDIX B

Yes	No	Radioisotope	Manufacturer or Distributor Model No.	Quantity	Use As Listed on SSD Certificate	Specify Other Uses Not Listed on SSD Certificate
	✓	Californium-252	Sealed source manufacturer or distributor and model number: <hr/> Device manufacturer or distributor and model number: <hr/>	Not to exceed either the maximum activity per source or maximum activity per device as specified in Sealed Source and Device Registration Certificate	Yes <input type="checkbox"/> Specific description of the gauge use: <hr/> <hr/> <hr/> <hr/> 	<input checked="" type="checkbox"/> Not applicable <hr/> <input type="checkbox"/> Uses are: <hr/> (Submit safety analysis supporting safe use)
	✓	Other Isotope (Specify)	Sealed source manufacturer or distributor and model number: <hr/> Device manufacturer or distributor and model number: <hr/>	Not to exceed either the maximum activity per source or maximum activity per device as specified in Sealed Source and Device Registration Certificate	Yes <input type="checkbox"/> Specific description of the gauge use: <hr/>	<input checked="" type="checkbox"/> Not applicable <hr/> <input type="checkbox"/> Uses are: <hr/> (Submit safety analysis supporting safe use)
<i>Financial Assurance Required and Evidence of Financial Assurance Provided</i>						



APPENDIX B

**ITEMS 7 THROUGH 11: TRAINING AND EXPERIENCE, FACILITIES AND EQUIPMENT, RADIATION SAFETY PROGRAM, AND WASTE DISPOSAL**

Item No. And Title	Suggested Response	Yes	Alternative Procedures Attached
<p>7. <b>INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING AND EXPERIENCE – RADIATION SAFETY OFFICER</b></p> <p><i>Name: John Turner</i></p>	<p>Before obtaining licensed materials, the proposed IRSO will have successfully completed one of the training courses described in Criteria in the section entitled "Individual(s) Responsible for Radiation Safety Program and Their Training and Experience – Radiation Safety Officer" in NUREG-1556, Vol. 1, Rev. 1, dated November 2001.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>8. <b>TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS</b></p>	<p>Before using licensed materials, authorized users will have successfully completed one of the training course described in Criteria in the section entitled "Training for Individuals Working In or Frequenting Restricted Areas" in NUREG-1556, Vol. 1, Rev 1, dated November 2001.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>9. <b>FACILITIES AND EQUIPMENT</b></p>	<p>No information needs to be submitted in response to this item; key issues are addressed under "Radiation Safety Program – Public Dose" and "Radiation Safety Program – Operating and Emergency Procedures".</p>		<p>Separate Item 9 Response Need Not Be Submitted With Application</p>
<p>10. <b>RADIATION SAFETY PROGRAM – AUDIT PROGRAM</b></p>	<p>The applicant is <i>not</i> required to, and should not, submit its audit program to NRC for review during the licensing phase.</p>		<p>Need Not Be Submitted With Application</p>
<p>10. <b>RADIATION SAFETY PROGRAM – TERMINATION OF ACTIVITIES</b></p>	<p>The applicant is <i>not</i> required to submit a response to the termination of activities section during the initial application. However, when the license expires when the licensee ceases operation, NRC Form 314 must be submitted.</p>		<p>Need Not Be Submitted With Application</p>
<p>10. <b>RADIATION SAFETY PROGRAM – SURVEY INSTRUMENTS</b></p>	<p>We will either possess and use, or have access to and use, a radiation survey meter that meets the Criteria in the section entitled "Radiation Safety Program – Instruments" in NUREG-1556, Vol. 1, Rev. 1, dated November 2001.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>







APPENDIX B

Item No. And Title	Suggested Response	Yes	Alternative Procedures Attached
<p><b>10. RADIATION SAFETY PROGRAM – MAINTENANCE</b></p>	<p><i>Routine Cleaning and Lubrication</i>                      We will implement and maintain procedures for routine maintenance of our gauges according to each manufacturer's recommendations and instructions.</p> <p><i>Non-Routine Maintenance</i>                      We will send the gauge to the manufacturer or other person authorized by NRC or an Agreement State to perform non-routine maintenance or repair operations that require the removal of the source or source rod from the gauge.</p>	<p><input checked="" type="checkbox"/></p> <p><input checked="" type="checkbox"/></p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p>The information listed in Appendix C supporting a request to perform non-routine maintenance in-house is attached.</p>
<p><b>10. RADIATION SAFETY PROGRAM – TRANSPORTATION</b></p>	<p>The applicant is <i>not</i> required to submit its response to transportation during the licensing process. However, this issue will be reviewed during inspection.</p>		<p><b>Need Not Be Submitted With Application</b></p>
<p><b>11. WASTE MANAGEMENT – GUAGE DISPOSAL AND TRANSFER</b></p>	<p>The applicant is <i>not</i> required to submit a response to waste management during the licensing process. However, the licensee should develop, implement, and maintain gauge transfer and disposal procedures in its radiation protection program.</p>		<p><b>Need Not Be Submitted With Application</b></p>

