



April 9, 2012

Br. 3

U.S. Nuclear Regulatory Commission  
Region 1  
475 Allendale Road  
King of Prussia, PA 19406-1415

Attention: Sattar Lodhi, Ph.D.  
Senior Health Physicist

03033206

Reference: STV Incorporated - License No. 06-30049-01

Subject: Proposed Amendment to License

RECEIVED  
REGION 1  
2012 APR 13 AM 11:16

Dear Dr. Lodhi:

STV's materials license allows for storage and use of two portable gauges. I am writing to amend Condition No. 8 of our license to increase the amount of nuclear material we possess to allow for additional gauges (up to 5). We are in the process of purchasing a third CPN gauge.

Attached is an application for license amendment and backup material to complete items 5 & 6 of form 313.

We also want to update the section the locations for storage of the gauges. One project location is being eliminated and a new project location is being added.

Please contact me directly if you have any questions or require additional information concerning this request.

Very truly yours,

**STV Incorporated**

James E. Sherwonit, PE  
Vice President/Radiation Safety Officer

JES/az

577386  
**NMSS/RGN1 MATERIALS-002**

<b>NRC FORM 313</b> (1-2012) 10 CFR 30, 32, 33, 34, 35, 36, 39, and 40	<b>U.S. NUCLEAR REGULATORY COMMISSION</b>	<b>APPROVED BY OMB: NO. 3150-0120</b>  Estimated burden per response to comply with this mandatory collection request: 4.3 hours. Submittal of the application is necessary to determine that the applicant is qualified and that adequate procedures exist to protect the public health and safety. Send comments regarding burden estimate to the Information Services Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0120), 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.	<b>EXPIRES: (03/31/2012)</b>				
<h2 style="margin: 0;">APPLICATION FOR MATERIALS LICENSE</h2>							
<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>  OFFICE OF FEDERAL & STATE MATERIALS AND ENVIRONMENTAL MANAGEMENT PROGRAMS DIVISION OF MATERIALS SAFETY AND STATE AGREEMENTS U.S. NUCLEAR REGULATORY COMMISSION WASHINGTON, DC 20555-0001  <b>ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:</b>  <b>IF YOU ARE LOCATED IN:</b>  ALABAMA, CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, FLORIDA, GEORGIA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, NORTH CAROLINA, PENNSYLVANIA, PUERTO RICO, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, VERMONT, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA,  <b>SEND APPLICATIONS TO:</b>  LICENSING ASSISTANCE TEAM DIVISION OF NUCLEAR MATERIALS SAFETY U.S. NUCLEAR REGULATORY COMMISSION, REGION I 475 ALLENDALE ROAD KING OF PRUSSIA, PA 19406-1415		<b>IF YOU ARE LOCATED IN:</b>  ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, <b>SEND APPLICATIONS TO:</b>  MATERIALS LICENSING BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION III 2443 WARRENVILLE ROAD, SUITE 210 Lisle, IL 60532-4352  ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MISSISSIPPI, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING,  <b>SEND APPLICATIONS TO:</b>  NUCLEAR MATERIALS LICENSING BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION IV 1600 E. LAMAR BOULEVARD ARLINGTON, TX 76011-4511					
<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 type="checkbox"/> A. NEW LICENSE <input checked="" type="checkbox"/> B. AMENDMENT TO LICENSE NUMBER <u>06-30049-01</u> <input type="checkbox"/> C. RENEWAL OF LICENSE NUMBER _____		2. NAME AND MAILING ADDRESS OF APPLICANT (Include ZIP code)  STV Incorporated 80 Ferry Boulevard Stratford, CT 06615					
3. ADDRESS WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED  STV Incorporated 80 Ferry Boulevard Stratford, CT 06615 (and other temporary job sites of licensee)		4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION  James E. Sherwonit, PE  TELEPHONE NUMBER  <div style="text-align: right;">(203) 375-0521</div>					
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. LICENSE FEES (See 10 CFR 170 and Section 170.31) <table style="width: 100%; border: none;"> <tr> <td style="border: none;">FEE CATEGORY</td> <td style="border: none;">Amendment</td> <td style="border: none;">AMOUNT ENCLOSED</td> <td style="border: none;">\$</td> </tr> </table>		FEE CATEGORY	Amendment	AMOUNT ENCLOSED	\$
FEE CATEGORY	Amendment	AMOUNT ENCLOSED	\$				
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, 39, 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 – TYPED/PRINTED NAME AND TITLE James E. Sherwonit, PE		SIGNATURE DATE <u>4/9/2012</u>					
<b>FOR NRC USE ONLY</b>							
TYPE OF FEE	FEE LOG	FEE CATEGORY	AMOUNT RECEIVED	CHECK NUMBER	COMMENTS		
APPROVED BY _____				DATE _____			
\$ _____							

# STV Incorporated

**STV INCORPORATED  
80 FERRY BOULEVARD  
STRATFORD, CT 06615**

**NRC LICENSE NO. 06-30049-01**

## **INFORMATION PERTAINING TO APPLICATION FOR LICENSE AMENDMENT DATED 04-09-2012.**

This application for license amendment is for the addition of portable gauging devices to our current license.

We are hereby requesting authorization for up to 5 CPN Model Series MC devices.

The radioactive materials to be added under this second gauge are as described in the attached responses to Items 5 and 6.

The responses to questions 7 through 11 are per our current license and are not being modified under this application.

STV would also like to **remove** the field office location at  
Fairfield Station Project Field Office  
26 Frank Street  
Fairfield, CT

and **add** a field office location:

STV Incorporated  
New Britain –Hartford Busway Project Filed Office  
697 Cedar Street  
Newington, CT 06111

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

Yes	No	Radioisotope	Manufacturer or Distributor Model No.	Quantity	Use As Listed on SSD Certificate	Specify Other Uses Not Listed on SSD Certificate
X		Cesium-137	Sealed source manufacturer or distributor and model number:  Device manufacturer or distributor and model number: <u>CPN-MC Series</u>	Not to exceed either the maximum activity per source or maximum activity per device as specified in Sealed Source and Device Registration Certificate  <u>50 millicurie</u>	Yes <input checked="" type="checkbox"/> Specific description of the gauge use: <u>Measuring in-place density of soil &amp; paving materials per SSD sheets.</u>	<input checked="" type="checkbox"/> Not applicable  <input type="checkbox"/> Uses are: (Submit safety analysis supporting safe use)
X		Americium-241	Sealed source manufacturer or distributor and model number:  Device manufacturer or distributor and model number: <u>CPN-MC Series</u>	Not to exceed either the maximum activity per source or maximum activity per device as specified in Sealed Source and Device Registration Certificate  <u>250 millicurie</u>	Yes <input checked="" type="checkbox"/> Specific description of the gauge use: <u>Measuring in-place density of material per SSD sheets.</u>	<input checked="" 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
	X	Californium-252	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 type="checkbox"/> Specific description of the gauge use: _____ _____ _____ _____ _____	<input type="checkbox"/> Not applicable _____ <input type="checkbox"/> Uses are: _____ (Submit safety analysis supporting safe use)
	X	Other Isotope (Specify):	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 type="checkbox"/> Specific description of the gauge use: _____ _____	<input type="checkbox"/> Not applicable _____ <input type="checkbox"/> Uses are: _____ (Submit safety analysis supporting safe use)
Financial Assurance Required and Evidence of Financial Assurance Provided						

This is to acknowledge the receipt of your letter/application dated

4/9/12, and to inform you that the initial processing which includes an administrative review has been performed.



Amendment COG-30049-01  
There were no administrative omissions. Your application was 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

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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** 577386.  
When calling to inquire about this action, please refer to this control number.  
You may call us on (610) 337-5398, or 337-5260.