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MAY 29 2012

DNMS



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 Bellevue, Washington 98004
 (425) 827-3193
 Fax (425) 576-5113

P.O. Box 32159
 Juneau, Alaska 99801
 (907) 780-5145
 Fax (907) 780-5896

P.O. Box 7038
 Ketchikan, Alaska 99901
 (907) 225-6491
 Fax (907) 225-6492

May 23rd, 2012

Roberto Torres
 U.S. Nuclear Regulatory Commission, Region IV
 Texas Health Resources Tower
 612 E. Lamar Blvd., Suite 400
 Arlington, TX 76011-4125

Dear Roberto,

Per the terms of our current NRC Materials Permit No. 50-29231-01, Secon would like to amend condition no.10a of our Materials license.

Our current NRC Materials License states that "Licensed material may be used or stored at the licensee's facilities located at 5737 Glacier Highway, Juneau, AK" Due to growth in our Ketchikan, AK market, Secon is seeking to permanently relocate one of the Juneau based Troxler Model 3400 Series densometer gauges to Ketchikan, AK. Our Ketchikan office address is as follows:

Secon Inc.
 4418 North Tongass Highway
 Ketchikan, AK 99901

Thanks for your consideration,

Zack Worrell
 Radiation Safety Officer
 Cell: (907) 209-5875
 Phone: (907) 780-5145
 Fax: (907) 780-5896



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P.O. Box 32159
Juneau, AK 99803



Roberto Torres
U.S. NRC
Texas Health Resource Tower
612 E. Lamar Blvd. Suite 400
Arlington, TX 76011-4125



760114125



4577589



DATE
05/30/2012

NAME AND ADDRESS OF APPLICANT AND/OR LICENSEE Colaska dba Secon Southeast Alaska ATTN: Zachary Worrell Radiation Safety Officer P.O. Box 32159 Juneau, Alaska 99801	LICENSE NUMBER 50-29231-01
	MAIL CONTROL NUMBER 577589
	LICENSING AND/OR TECHNICAL REVIEWER ch

This is to acknowledge the receipt of your:

LETTER and/or APPLICATION DATED: 05/23/2012

The initial processing, which included an administrative review, has been performed.

AMENDMENT TERMINATION NEW LICENSE RENEWAL

- There were no administrative omissions identified during our initial review.
- This is to acknowledge receipt of your application for renewal of the material(s) license identified above. Your application is deemed timely filed, and accordingly, the license will not expire until final action has been taken by this office.
- Your application for a new NRC license did not include your taxpayer identification number. Please fill out NRC Form 531, located at the following link:

<http://www.nrc.gov/reading-rm/doc-collections/forms/nrc531.pdf>

Send the completed NRC Form 531, by facsimile, to the following number: (301) 415-5387

A copy of your action has been emailed to our License Fee and Accounts Receivable Branch, in our Headquarters office in Rockville, MD. You will be contacted separately if there is a fee issue involved.

Your application has been assigned the above listed **MAIL CONTROL NUMBER**. When calling to inquire about this action, please refer to this control number. Your application has been forwarded to a technical reviewer. Please note that the technical review, which is normally completed within 180 days for a renewal application (90 days for all other requests), may identify additional omissions or require additional information. If you have any questions concerning the processing of your application, our contact information is listed below:

Region IV
U. S. Nuclear Regulatory Commission
DNMS/NMSB - B
1600 E. Lamar Boulevard
Arlington, TX 76011-4511
(817) 200-1103 or (817) 200-1140

Handwritten: Emailed 5/30/12 [signature]

BETWEEN:
Accounts Receivable/Payable
and
Regional Licensing Branches

[FOR ARPB USE]
INFORMATION FROM LTS

Program Code: 03121
Status Code: Pending Amendment
Fee Category: 3P
Exp. Date: 06/30/2016
Fee Comments:
Decom Fin Assur Req: N

License Fee Worksheet - License Fee Transmittal

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: COLASKA DBA SECON SOUTHWEST ALASKA
Received Date: 05/29/2012
Docket Number: 3037206
Mail Control Number: 577589
License Number: 50-29231-01
Action Type: Amendment

2. FEE ATTACHED

Amount: _____

Check No.: _____

3. COMMENTS

Signed: _____

Carol L Heie

Date: _____

5/30/12

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: _____