05/23/2013 16:24 Cott STL K-2-2 (FAX)314 569 0930 P.001/008



Cott Beverages USA A Division of BCB USA Corp. 2525 Schuetz Road Maryland Helghts, MO 63043 Phone #314-567-1300 Fax #314-569-0930

The Leader in Premium Retailer Brand Beverage Innovation

# **Facsimile Cover Sheet**

To: GLENDA HANNAH

Company: Phone:

Fax: 240.403.0514

From: Krista Behrman

(314-787-5309)

Fax #: 314-569-0930

Date: May 23, 2013

Pages including this

cover page: 8

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U.S. NUCLEAR REGULATORY COMMISSION

02 - 2004 10 CFR 31.5

## **GENERAL LICENSEE REGISTRATION**

Deline 15 166 166 6 166 166 166 166 166 166 16	APPROVED BY OMB: NO. 3150-0198  Estimated burden per response to comply with this mandatory collection request: 20 minutes. NRC will use this information to track general licensees and their devices to level of device accountability. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F52), U. S. Nursiaar Regulatory Commis DC 20555-0001, or by Internet e-mail to Infocollects@nrc.gov to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0000). Office of Mans Budget, Weshington, 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 parken is not required to rescond to the information collection.	ssion, Washington, agament and
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Complete all six sections of this registration form. If any of the preprinted information is incorrect, provide the changes in the applicable boxes. USE CAPITAL LETTERS.

General License

**SECTION 1 - GENERAL LICENSEE INFORMATION** 

**Registration Number** 

GL-722631-17

Enter the company name and the street address/physical location of use for your device(s). For portable devices, specify the primary storage location. Do not use a P.O. Box address.

Company Name: COTT BEVERAGES																						
																			,,			
Department:																						
Address Line 1: 7275 HAZELWOOD AVENUE																						
Addı	ress	Line	2:									-										
			-																			
City: BERKELEY																						
State: MO							Zip C	ode:	63	3134	-							-				
								Use Write		a)	Category: Packet Receipt Date (MMDDYYY);											
											Accession Number:											
												<u> </u>	Ĺ.,									

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## **SECTION 1 - GENERAL LICENSEE INFORMATION (Continued)**

Enter the name, telelphone number and title of the person who is the responsible individual for the device(s).

Last N	am	e:	ARN	DT																			
First Name: DAVE Middle Initial: J																							
Teleph	on	<b>e</b> :	(314	) 787	7-540	0								E	xtens	sion:							
Title:			SAF	ETY	OFF	ICEI	₹												•				
																					T		
Depart				707			100		/EN"														
Addre	88	Line	1:	727	5 HA	ZEL\	NOO	D A\	/ENI	JE 													
			<u>l</u>	<u> </u>		<u> </u>					<u> </u>												
Addres	<b>\$</b> \$	Line	2;																				
City:				BEF	RKEL	ΕΥ																	
State:	٨	10			z	ip Co	ode:	631	134 -	•								] -					



GL-722631-17 **SECTION 2 - DEVICES SUBJECT TO REGISTRATION** 01/15/2013 SECTION 2 Our records indicate that you have these devices. Please update the information as necessary. PAGE 1 of 1 NRC Device Key 777599 (Internal Control Number) INDUSTRIAL DYNAMICS CO., LTD. Distributor/Distributed By: Distributor License Number: 1586-19GL Manufacturer Name: INDUSTRIAL DYNAMICS CO., LTD. Device Model (Not Source Model): FT-50-B Device Serial Number: 117298 Transfer Date (Receipt Date): 03/15/2008 Not in possession of device (Also complete Section 4.) DD YYYY MM Activity (e.g. 100) Unit (e.g. mCi) Isotope (e.g. AM241) 100.000000000 1 AM241 mCi 2 3 4 5 6





GL-722631-17 **SECTION 3** 01/15/2013 **SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION** SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION
PAGE 1 of 1
Provide information about other devices you have that are subject to registration. Do not report specifically licensed devices. Manufacturer Name Initial Transferor Name initial Transferor License Number (if known) Device Model Number (Not Source Model) Device Serial Number O Manufacturer/Initial Transferor listed above How acquired and date (e.g., O Other General Licensee Date Transferred: from a distributor/manufacturer, other licensee, other source)? (Received) O Other Source YYYY MM DĐ Isotope (e.g. AM241) Activity (e.g. 100) Unit (e.g. mCI) 1. 2. 3. 4. 5. 6. 7. 8.



9.

10.



GL-722631-17 **SECTION 4 - NOT IN POSSESSION OF DEVICE SECTION 4** 01/15/2013 PAGE 1 of 1 Provide information about devices listed in Section 2 or 6, but no longer in your possession. Transfer Date: Part 1 NRC Device Key: (from Section 2 or 6) MM DD YYYY Location of the Device: O Whereabouts Unknown (complete Part 1 only) O Transferred to another general licensee (complete Parts 2 and 3) O Transferred to a Specific Licensee (Not the manufacturer) O Never Possessed the Device (complete Part 1 only) (complete Part 2) O Returned to Manufacturer (complete Part 1 only) Part 2 License Number of Recipient (if transferred to a specific licensee): Company Name: Department: Address Line 1: Address Line 2: City: Zip Code: State: Enter the name of the Individual responsible for this device: Part 3 Last Name: First Name: Middle Initial: Extension: Telephone Number: Title:



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### **SECTION 5 - CERTIFICATION**

SECTION 5 PAGE 1 of 1

#### I hereby certify that:

- All information contained in this registration is true and complete to the best of my knowledge and belief.
- B. A physical inventory of the devices subject to registration has been completed, and the device information on this form has been checked against the device labeling.
- C. I am aware of the requirements of the general license, provided in 10 CFR 31.5.

(Copies of applicable regulations may be viewed at the NRC website at:

http://www.nrc.gov/reading-rm/docycollections/cfr)

SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1)

DATE

5/23/13

WARNING: FALSE STATEMENTS MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL ASPECTS. 18 U.S.C. SECTION 1001 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY WRONG STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER IN ITS JURISDICTION.

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SECTION 6 - DEVICES NOT SUBJECT TO REGISTRATION

SECTION 6

PAGE 1 of 1

NRC Device Key:

Manufacturer License No:

Manufacturer Name:

Model Number: Serial #:

Transfer Date: