

GENERAL LICENSEE REGISTRATION

APPROVED BY OMB: NO. 3150-0198

EXPIRES: 03/31/2010

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 ensure a higher level of device accountability. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F52), U. S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to [infocollect@nrc.gov](mailto:infocollect@nrc.gov) to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0000), 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.

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-651002-17

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: KEN MAC METALS

K E N M A C M E T A L S

Department: SLITTING

S L I T T I N G

Address Line 1: TWO THYSSEN PARK

T W O T H Y S S E N P A R K

Address Line 2:

City: DETROIT

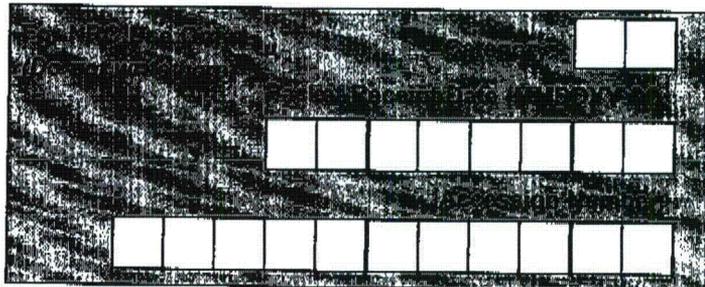
D E T R O I T

State: MI

M I

Zip Code: 48210 -

4 8 2 1 0



SECTION 1 - GENERAL LICENSEE INFORMATION (Continued)

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

Last Name: BACHUWA

B A C H U W A

First Name: THOMAS

T H O M A S

Middle Initial: A

A

Telephone: (313) 361-6870

3 1 3 3 6 1 6 8 7 0

Extension: 6985

6 9 8 5

Title: MANAGER PLANT OPERATION

M A N A G E R P L A N T O P E R A T I O N

Enter the mailing address where correspondence regarding your device(s) should be sent.  
This address should be specific to the use or storage location of your device(s).

Department: PRODUCTION

P R O D U C T I O N

Address Line 1: TWO THYSSEN PLACE

T W O T H Y S S E N P L A C E

Address Line 2:

City: DETROIT

D E T R O I T

State: MI

M I

Zip Code: 48210 -

4 8 2 1 0



SECTION 2 - DEVICES SUBJECT TO REGISTRATION

Our records indicate that you have these devices. Please update the information as necessary.

NRC Device Key 591360 (Internal Control Number)

Distributor/Distributed By: E.S.C. Resources, Inc.

E.S.C. RESOURCES INC.

Distributor License Number: IL-01283-01

IL-01283-01

Manufacturer Name: E.S.C. RESOURCES, INC.

E.S.C. RESOURCES, INC.

Device Model (Not Source Model): SH-6000

SH-6000

Device Serial Number: 970817

970817

Transfer Date (Receipt Date): 08/15/1997

08/15/1997

Not in possession of device  
(Also complete Section 4.)

MM DD YYYY

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	AM241 AM241	1000.000000000 1000,00000000	mCi mCi
2			
3			
4			
5			
6			



SECTION 2 - DEVICES SUBJECT TO REGISTRATION

Our records indicate that you have these devices. Please update the information as necessary.

NRC Device Key 591363 (Internal Control Number)

Distributor/Distributed By: E.S.C. Resources, Inc.

E.S.C. RESOURCES, INC

Distributor License Number: IL-01283-01

IL-01283-01

Manufacturer Name: E.S.C. RESOURCES, INC.

E.S.C. RESOURCES

Device Model (Not Source Model): SH-6090

SH-6090

Device Serial Number: 970815

970815

Transfer Date (Receipt Date): 08/15/1997

08 15 1997

Not in possession of device (Also complete Section 4.)

MM DD YYYY

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	SR90 SH90	100.000000000 100.000000000	mCi 401
2			
3			
4			
5			
6			







**SECTION 5 - CERTIFICATION**

I hereby certify that:

- A. 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/doc-collections/cfr>)

*William A. Bellville*

*7-22-2013*

**SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1)**

**DATE**

**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.**



GL-651002-17  
04/18/2013

**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:**