



GL-655013-18
04/09/2014

SECTION 1
PAGE 2 of 2

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: ~~WHEELER~~

NEWSOME

First Name: ~~BARRETT~~

Middle Initial:

WILLIAM

G

Telephone: (304) 872-6580

Extension: 331

Title: CURRENT SAFETY OFFICER

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:

Address Line 1: PO BOX 707

Address Line 2:

City: SUMMERSVILLE

State: WV

Zip Code: 26651 -





GL-655013-18

04/09/2014

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2

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

PAGE 2 of 6

NRC Device Key **781087** **(Internal Control Number)**

Distributor/Distributed By: BERTHOLD TECHNOLOGIES USA, LLC

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Distributor License Number: R-01082-E12

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Manufacturer Name: BERTHOLD TECHNOLOGIES USA, LLC

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Device Model (Not Source Model): LB 7440-D-CR

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Device Serial Number: 37624-11333

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Transfer Date (Receipt Date): 06/06/2008

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MM DD YYYY

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

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)																													
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GL-655013-18

04/09/2014

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2

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

PAGE 3 of 6

NRC Device Key **781088** **(Internal Control Number)**

Distributor/Distributed By: **BERTHOLD TECHNOLOGIES USA, LLC**

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Distributor License Number: **R-01082-E12**

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Manufacturer Name: **BERTHOLD TECHNOLOGIES USA, LLC**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Device Model (Not Source Model): **LB 7440-D-CR**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Device Serial Number: **37624-11336**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Transfer Date (Receipt Date): **06/06/2008**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

MM **DD** **YYYY**

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

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)																																																												
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GL-655013-18

04/09/2014

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2

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

PAGE 5 of 6

NRC Device Key **781090** **(Internal Control Number)**

Distributor/Distributed By: **BERTHOLD TECHNOLOGIES USA, LLC**

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Distributor License Number: **R-01082-E12**

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Manufacturer Name: **BERTHOLD TECHNOLOGIES USA, LLC**

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Device Model (Not Source Model): **LB 7440-D-CR**

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Device Serial Number: **37624-11138**

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Transfer Date (Receipt Date): **05/13/2008**

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MM DD YYYY

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

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)																													
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GL - 6 5 5 0 1 3 - 1 8

Date 04/09/2014

SECTION 4 - NOT IN POSSESSION OF DEVICE

Provide information about devices listed in Section 2 or 6, but no longer in your possession.

Part 1

NRC Device Key 781085 (from Section 2 or 6)

Transfer Date

0 5 2 1 2 0 1 4 MM DD YYYY

Location of the Device:

- Whereabouts Unknown, Never Possessed the Device, Returned to Manufacturer, Transferred to another general licensee, Transferred to a Specific Licensee (not the manufacturer)

Part 2

License Number of Recipient (if transferred to a specific licensee)

4 7 - 2 5 5 6 6

Company Name:

P O W E R M O U N T A I N C O A L C O .

Department:

P O W E R M O U N T A I N P R E P P L A N T

Address Line 1:

2 J E R R Y F O R K R O A D R O U T E 3 9

Address Line 2:

P O B O X 7 0 7

City:

S U M M E R S V I L L E

State: WV

Zip Code: 2 6 6 5 1 - 0 7 0 7

Part 3 Enter the name of the individual responsible for this device.

Last Name:

N E W S O M E

First Name:

W I L L I A M

Middle Initial:

G

Telephone Number:

3 0 4 - 8 7 2 - 6 5 8 0

Extension

Title

R A D I A T I O N S A F E T Y O F F I C E R



GL - 6 5 5 0 1 3 - 1 8

Date 04/09/2014

SECTION 4 - NOT IN POSSESSION OF DEVICE

Provide information about devices listed in Section 2 or 6, but no longer in your possession.

Part 1

NRC Device Key 781087 (from Section 2 or 6)

Transfer Date

0 5 2 1 2 0 1 4 MM DD YYYY

Location of the Device:

- Whereabouts Unknown, Never Possessed the Device, Returned to Manufacturer, Transferred to another licensee, Transferred to a Specific Licensee

Part 2

License Number of Recipient (if transferred to a specific licensee)

4 7 - 2 5 5 6 6

Company Name:

P O W E R M O U N T A I N C O A L C O .

Department:

P O W E R M O U N T A I N P R E P P L A N T

Address Line 1:

2 J E R R Y F O R K R O A D R O U T E 3 9

Address Line 2:

P O B O X 7 0 7

City:

S U M M E R S V I L L E

State: WV

Zip Code: 2 6 6 5 1 - 0 7 0 7

Part 3 Enter the name of the individual responsible for this device.

Last Name:

N E W S O M E

First Name:

Middle Initial:

W I L L I A M G

Telephone Number:

Extension

3 0 4 - 8 7 2 - 6 5 8 0

Title

R A D I A T I O N S A F E T Y O F F I C E R

GL - 6 5 5 0 1 3 - 1 8

Date 04/09/2014

SECTION 4 - NOT IN POSSESSION OF DEVICE

Provide information about devices listed in Section 2 or 6, but no longer in your possession.

Part 1

NRC Device Key 781088 (from Section 2 or 6)

Transfer Date

0 5 2 1 2 0 1 4 MM DD YYYY

Location of the Device:

- Whereabouts Unknown, Never Possessed the Device, Returned to Manufacturer, Transferred to another general licensee, Transferred to a Specific Licensee

Part 2

License Number of Recipient (if transferred to a specific licensee)

4 7 - 2 5 5 6 6

Company Name:

P O W E R M O U N T A I N C O A L C O .

Department:

P O W E R M O U N T A I N P R E P P L A N T

Address Line 1:

2 J E R R Y F O R K R O A D R O U T E 3 9

Address Line 2:

P O B O X 7 0 7

City:

S U M M E R S V I L L E

State: WV

Zip Code: 2 6 6 5 1 - 0 7 0 7

Part 3 Enter the name of the individual responsible for this device.

Last Name:

N E W S O M E

First Name:

W I L L I A M

Middle Initial:

G

Telephone Number:

3 0 4 - 8 7 2 - 6 5 8 0

Extension

Title

R A D I A T I O N S A F E T Y O F F I C E R

GL - 6 5 5 0 1 3 - 1 8

Date 04/09/2014

SECTION 4 - NOT IN POSSESSION OF DEVICE

Provide information about devices listed in Section 2 or 6, but no longer in your possession.

Part 1

NRC Device Key 781089 (from Section 2 or 6)

Transfer Date

0 5 2 1 2 0 1 4 MM DD YYYY

Location of the Device:

- Whereabouts Unknown, Never Possessed the Device, Returned to Manufacturer, Transferred to another general licensee, Transferred to a Specific Licensee

Part 2

License Number of Recipient (if transferred to a specific licensee)

4 7 - 2 5 5 6 6

Company Name:

P O W E R M O U N T A I N C O A L C O .

Department:

P O W E R M O U N T A I N P R E P P L A N T

Address Line 1:

2 J E R R Y F O R K R O A D R O U T E 3 9

Address Line 2:

P O B O X 7 0 7

City:

S U M M E R S V I L L E

State: WV

Zip Code: 2 6 6 5 1 - 0 7 0 7

Part 3 Enter the name of the individual responsible for this device.

Last Name:

N E W S O M E

First Name:

Middle Initial:

W I L L I A M G

Telephone Number:

Extension

3 0 4 - 8 7 2 - 6 5 8 0

Title

R A D I A T I O N S A F E T Y O F F I C E R



GL - 6 5 5 0 1 3 - 1 8

Date 04/09/2014

SECTION 4 - NOT IN POSSESSION OF DEVICE

Provide information about devices listed in Section 2 or 6, but no longer in your possession.

Part 1

NRC Device Key 781090 (from Section 2 or 6)

Transfer Date

0 5 2 1 2 0 1 4 MM DD YYYY

Location of the Device:

- Whereabouts Unknown, Never Possessed the Device, Returned to Manufacturer, Transferred to another general licensee, Transferred to a Specific Licensee (not the manufacturer)

Part 2

License Number of Recipient (if transferred to a specific licensee)

4 7 - 2 5 5 6 6

Company Name:

P O W E R M O U N T A I N C O A L C O .

Department:

P O W E R M O U N T A I N P R E P P L A N T

Address Line 1:

2 J E R R Y F O R K R O A D R O U T E 3 9

Address Line 2:

P O B O X 7 0 7

City:

S U M M E R S V I L L E

State: WV

Zip Code: 2 6 6 5 1 - 0 7 0 7

Part 3 Enter the name of the individual responsible for this device.

Last Name:

N E W S O M E

First Name:

W I L L I A M

Middle Initial:

G

Telephone Number:

3 0 4 - 8 7 2 - 6 5 8 0

Extension

Title

R A D I A T I O N S A F E T Y O F F I C E R

GL - 6 5 5 0 1 3 - 1 8

Date 04/09/2014

SECTION 4 - NOT IN POSSESSION OF DEVICE

Provide information about devices listed in Section 2 or 6, but no longer in your possession.

Part 1

NRC Device Key 781091 (from Section 2 or 6)

Transfer Date

0 5 2 1 2 0 1 4 MM DD YYYY

Location of the Device:

- Whereabouts Unknown, Never Possessed the Device, Returned to Manufacturer, Transferred to another general licensee, Transferred to a Specific Licensee (not the manufacturer)

Part 2

License Number of Recipient (if transferred to a specific licensee)

4 7 - 2 5 5 6 6

Company Name:

P O W E R M O U N T A I N C O A L C O .

Department:

P O W E R M O U N T A I N P R E P P L A N T

Address Line 1:

2 J E R R Y F O R K R O A D R O U T E 3 9

Address Line 2:

P O B O X 7 0 7

City:

S U M M E R S V I L L E

State: WV

Zip Code: 2 6 6 5 1 - 0 7 0 7

Part 3 Enter the name of the individual responsible for this device.

Last Name:

N E W S O M E

First Name:

W I L L I A M

Middle Initial:

G

Telephone Number:

3 0 4 - 8 7 2 - 6 5 8 0

Extension

Title

R A D I A T I O N S A F E T Y O F F I C E R





GL-655013-18
04/09/2014

SECTION 5 - CERTIFICATION

SECTION 5
PAGE 1 of 1

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>)

W.G. Newsome

William G. Newsome

5/21/2014

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.





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SECTION 6 - DEVICES NOT SUBJECT TO REGISTRATION

SECTION 6

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NRC Device Key:

Manufacturer License No:

Manufacturer Name:

Model Number:

Serial #:

Transfer Date: