



NRC FORM 664

02 - 2004 10 CFR 31.5 SECTION 1
PAGE 1 of 2
U.S. NUCLEAR REGULATORY COMMISSION

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 te-mail to infocollects@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-711550-19

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.

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SECTION 1 PAGE 2 of 2

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 Na	me:	SCH	OES	SLE	R																				
First Name: DOUGLAS													М	Middle Initial: R											
Telepho	elephone: (406) 651-2600													Extension:											
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Our records indicate that you have these devices. Please update the information as necessary.

SECTION 2 PAGE 1 of 1

NR	C Device Key	704743	4743 (Internal Control Number)													
Dis	tributor/Distributed By:	THERMO	SCIENTIFIC PORTABLE ANALYTICAL INSTR													
Dis	tributor License Number:	53-0388														
Ма	nufacturer Name: NITON 0	CORPORATI	ON													
De	vice Model (Not Source Mo	odel): XLI818														
De	vice Serial Number: 5975	····														
<u></u>																
	nsfer Date (Receipt Date):	12/17/2003														
Па	Tisier Date (Neceipt Date).	12/1//2003	Not in possession of device (Also													
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	Isotope (e.g. AM241)		Activity (e.g. 100) Unit (e	.g. mCi)												
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SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

SECTION 3 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** Manufacturer/Initial Transferor listed above How acquired and date (e.g., from a distributor/manufacturer, O Other General Licensee Date Transferred: other licensee, other source)? O Other Source MM DD YYYY (Received) Isotope (e.g. AM241) Activity (e.g. 100) Unit (e.g. mCi) 1. 2. 3. 4. 5. 6. 7. 8. 9. 10.





SECTION 4 - NOT IN POSSESSION OF DEVICE

SECTION 4 PAGE 1 of 1

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

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C) Ne	ver F	osse	esse	d the	Dev	/ice	(com	plete	Par	t 1 o	nly) (-	ecifi	c Lice	ense	e (N	ot the	e ma	ınufa	actur	er)	
C	Re	turne	d to	Man	ufac	turer	(co	mple	te Pa	art 1	only)		(com	olete	Part	2)										
Par	t 2 Li	icens	e Nu	ımbe	er of	Reci	pient	(if tr	ansfe	erred	to a	spe	cific	licen	see)	:											
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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.dov/reading-rm/doc-collections/cfr)

SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1)

DATE

1/27/15

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.





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: