



GL-721865-19  
 01/08/2015  
 NRC FORM 664  
 02 - 2004  
 10 CFR 31.5

SECTION 1  
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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 e-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-721865-19

**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.**

Company Name: GREENBRIER SMOKLESS COAL

Greenbrier Smokeless Coal

Department: PREP PLANT

PREP PLANT

Address Line 1: ~~PO BOX 0~~

PO BOX 0

Address Line 2:

4425 Anjean Road.

City: RUPERT

Rupert

State: WV  WV

Zip Code: 25984 - 0574  25984  -  0574

<p><b>For NRC Use Only</b>          (Do not write here)</p>	<p>Category: <input type="checkbox"/> <input type="checkbox"/></p>
<p>Packet Receipt Date (MMDDYYYY):</p>	
<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	
<p>Accession Number:</p>	
<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>	





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: KISER

K i s e r

First Name: JIMMIE

J i m m i e

Middle Initial: E

E

Telephone: ~~(304) 392-1000~~

3 0 4 3 9 2 1 1 6 6

Extension: ~~241~~

Title: SAFETY SUPERVISOR

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

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: PREP PLANT

P R E P P L A N T

Address Line 1: ~~PO BOX 0~~

P O B O X 0

Address Line 2:

4 4 2 5 A n j e a n R o a d

City: RUPERT

R u p e r t

State: WV

Zip Code: 25984 - 0574

2 5 9 8 4 - 0 5 7 4





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SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2

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

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NRC Device Key 764837 (Internal Control Number)

Distributor/Distributed By: THERMO FISCHER SCIENTIFIC

Thermo Fischer Scientific

Distributor License Number: L03524

L03524

Manufacturer Name: THERMO MEASURETECH

Thermo Measuretech

Device Model (Not Source Model): 5201

5201

Device Serial Number: B4739

B4739

Transfer Date (Receipt Date): 05/31/2007

05 31 2007

MM DD YYYY

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

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	CS137 Cs137	50.000000000 50.000000000000	mCi mCi
2			
3			
4			
5			
6			





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SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2

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

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NRC Device Key 764838 (Internal Control Number)

Distributor/Distributed By: THERMO FISCHER SCIENTIFIC

Thermo Fischer Scientific

Distributor License Number: L03524

L03524

Manufacturer Name: THERMO MEASURETECH

Thermo Measuretech

Device Model (Not Source Model): 5201

5201

Device Serial Number: B4740

B4740

Transfer Date (Receipt Date): 05/31/2007

05 31 2007

MM DD YYYY

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

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	CS137 CS137	100.000000000 100.000000000	mCi mCi
2			
3			
4			
5			
6			







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### SECTION 4 - NOT IN POSSESSION OF DEVICE

SECTION 4  
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Provide information about devices listed in Section 2 or 6, but no longer in your possession.

#### Part 1

Transfer Date:

NRC Device Key:

MM

DD

YYYY

Location of the Device:

- Whereabouts Unknown (complete Part 1 only)
- Never Possessed the Device (complete Part 1 only)
- Returned to Manufacturer (complete Part 1 only)
- Transferred to another general licensee (complete Parts 2 and 3)
- Transferred to a Specific Licensee (Not the manufacturer) (complete Part 2)

Part 2 License Number of Recipient (if transferred to a specific licensee):

Company Name:

Department:

Address Line 1:

Address Line 2:

City:

State:

Zip Code:

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

Last Name:

First Name:

Middle Initial:

Telephone Number:

Extension:

Title:





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**SECTION 5 - CERTIFICATION**

**SECTION 5**  
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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>)

  
 \_\_\_\_\_  
**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: