



GL-642464-19

04/06/2015

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 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-642464-19

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: KINGSTON MINING, INC

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Department:

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Address Line 1: 600 RESOURCE DRIVE

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Address Line 2:

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City: SCARBRO

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State: WV

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Zip Code: 25917 -

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For NRC Use Only <i>(Do not write here)</i>	Category: <table border="1"><tr><td></td><td></td></tr></table>							
	Packet Receipt Date (MMDDYY) <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							
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GL-642464-19

04/06/2015

SECTION 2 - DEVICES SUBJECT TO REGISTRATION



SECTION 2

PAGE 1 of 4

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

NRC Device Key **820363** **(Internal Control Number)**

Distributor/Distributed By: **KANAWHA SCALES & SYSTEMS**

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Distributor License Number: **03214250005**

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Manufacturer Name: **REAL TIME INSTRUMENTS PTY LTD.**

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Device Model (Not Source Model): **ASHSCAN**

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Device Serial Number: **US007**

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Transfer Date (Receipt Date): **01/06/2009**

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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)																							
1	AM241 <table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>							300.000000000 <table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>															mCi <table border="1"> <tr><td></td><td></td><td></td></tr> </table>			
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GL-642464-19

04/06/2015

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 4

NRC Device Key **591562** (Internal Control Number)

Distributor/Distributed By: **TN TECHNOLOGIES, INC.**

[Empty grid for distributor information]

Distributor License Number: **L01105**

[Empty grid for distributor license number]

Manufacturer Name: **TN TECHNOLOGIES, INC.**

[Empty grid for manufacturer name]

Device Model (Not Source Model): **5201**

[Empty grid for device model]

Device Serial Number: **B3142**

[Empty grid for device serial number]

Transfer Date (Receipt Date): **01/20/1998**

[Empty grid for transfer date]

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 [Empty grid]	100.000000000 [Empty grid]	mCi [Empty grid]
2	[Empty grid]	[Empty grid]	[Empty grid]
3	[Empty grid]	[Empty grid]	[Empty grid]
4	[Empty grid]	[Empty grid]	[Empty grid]
5	[Empty grid]	[Empty grid]	[Empty grid]
6	[Empty grid]	[Empty grid]	[Empty grid]





GL-642464-19

04/06/2015

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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

SECTION 2

PAGE 3 of 4

NRC Device Key **812628** **(Internal Control Number)**

Distributor/Distributed By: THERMO FISCHER SCIENTIFIC

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Distributor License Number: L03524

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Manufacturer Name: THERMO MEASURETECH

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Device Model (Not Source Model): 5201

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Device Serial Number: B3883

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Transfer Date (Receipt Date): 10/25/2011

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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)																									
1	CS137 <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							100.00000000 <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																	mCi <table border="1"><tr><td></td><td></td><td></td></tr></table>			
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GL-642464-19

04/06/2015

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2

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

PAGE 4 of 4

NRC Device Key 825472 (Internal Control Number)

Distributor/Distributed By: BERTHOLD TECHNOLOGIES USA, LLC

[Grid for distributor information]

Distributor License Number: R-01082-E12

[Grid for distributor license number]

Manufacturer Name: BERTHOLD TECHNOLOGIES USA, LLC

[Grid for manufacturer name]

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

[Grid for device model]

Device Serial Number: 37624-12786

[Grid for device serial number]

Transfer Date (Receipt Date): 07/11/2013

[Grid for transfer date]

MM DD YYYY

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

Table with 3 columns: Isotope (e.g. AM241), Activity (e.g. 100), and Unit (e.g. mCi). Row 1 contains CS137, 15.000000000, and mCi.





GL-642464-19

04/06/2015

SECTION 3

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

Grid for Manufacturer Name: 25 empty cells.

Initial Transferor Name

Grid for Initial Transferor Name: 25 empty cells.

Initial Transferor License Number (if known)

Grid for Initial Transferor License Number: 10 empty cells.

Device Model Number (Not Source Model)

Grid for Device Model Number: 25 empty cells.

Device Serial Number

Grid for Device Serial Number: 25 empty cells.

How acquired and date (e.g., from a distributor/manufacturer, other licensee, other source)?

Manufacturer/Initial Transferor listed above

Other General Licensee Date Transferred:

Other Source (Received) MM DD YYYY

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.	<input type="text"/>	<input type="text"/>	<input type="text"/>
6.	<input type="text"/>	<input type="text"/>	<input type="text"/>
7.	<input type="text"/>	<input type="text"/>	<input type="text"/>
8.	<input type="text"/>	<input type="text"/>	<input type="text"/>
9.	<input type="text"/>	<input type="text"/>	<input type="text"/>
10.	<input type="text"/>	<input type="text"/>	<input type="text"/>





GL-642464-19
04/06/2015

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.

Part 1

NRC Device Key:

Transfer Date:

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:





GL-642464-19
04/06/2015

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>)

Robert Lovejoy Jr

4-30-15

Robert Lovejoy Jr
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-642464-19
04/06/2015

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: