



GL-650225-19  
 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**

<b>APPROVED BY OMB: NO. 3150-0198</b> <small>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.</small>	<b>EXPIRES: 03/31/2010</b>
--	----------------------------

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-650225-19

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: STIRRAT COAL COMPANY

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Department: PREPARATION PLANT

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Address Line 1: ROUTE 44 SOUTH

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Address Line 2:

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City: OMAR

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State: WV 

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Zip Code: 25638 - 

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<b>For NRC Use Only</b> <i>(Do not write here)</i>	Category: <table border="1" style="display: inline-table;"><tr><td> </td><td> </td></tr></table>		
	Packet Receipt Date (MMDDYYYY): <table border="1" style="display: inline-table; width: 100px; height: 20px;"></table>		
Accession Number: <table border="1" style="display: inline-table; width: 100px; height: 20px;"></table>			





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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: MAHON

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First Name: TERRY

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Middle Initial: N

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Telephone: (304) 929-6323

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Extension:

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Title: SAFETY OFFICER

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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:

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Address Line 1: P.O. BOX 1078

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Address Line 2:

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City: HOLDEN

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State: WV

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Zip Code: 25625 -

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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.

PAGE 1 of 4

NRC Device Key 738973 (Internal Control Number)

Distributor/Distributed By: BERTHOLD TECHNOLOGIES USA, LLC

Empty grid for distributor information

Distributor License Number: R-01082-E12

Empty grid for distributor license number

Manufacturer Name: BERTHOLD TECHNOLOGIES USA, LLC

Empty grid for manufacturer name

Device Model (Not Source Model): LB 7440D

Empty grid for device model

Device Serial Number: 37624-10090

Empty grid for device serial number

Transfer Date (Receipt Date): 01/15/2006

Empty 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), Unit (e.g. mCi). Row 1: 1 CS137 100.00000000 mCi





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### SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2  
PAGE 2 of 4

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

NRC Device Key **591574** (Internal Control Number)

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

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Distributor License Number: **L01105**

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

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

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Device Serial Number: **B3176**

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Transfer Date (Receipt Date): **06/12/2009**

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

MM DD YYYY

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)																							
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### SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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

NRC Device Key 595461 (Internal Control Number)

Distributor/Distributed By: TN TECHNOLOGIES, INC.

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Distributor License Number: L01105

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Manufacturer Name: TN TECHNOLOGIES, INC.

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Device Model (Not Source Model): 5201

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Device Serial Number: B3316

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Transfer Date (Receipt Date): 01/14/2010

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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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**SECTION 2 - DEVICES SUBJECT TO REGISTRATION**

SECTION 2  
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Our records indicate that you have these devices. Please update the information as necessary.

**NRC Device Key**                      **595462**                      (**Internal Control Number**)

Distributor/Distributed By:    TN TECHNOLOGIES, INC.

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Distributor License Number:    L01105

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Manufacturer Name: TN TECHNOLOGIES, INC.

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Device Model (Not Source Model): 5201

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Device Serial Number: B3317

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Transfer Date (Receipt Date): 01/14/2010

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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" style="width:100%; height:29px;"> <tr> <td></td><td></td><td></td><td></td><td></td> </tr> </table>						100.00000000 <table border="1" style="width:100%; height:29px;"> <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> </tr> </table>																mCi <table border="1" style="width:100%; height:29px;"> <tr> <td></td><td></td><td></td> </tr> </table>			
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SECTION 3

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SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

Provide information about other devices you have that are subject to registration. Do not report specifically licensed devices.

Manufacturer Name

[Grid for Manufacturer Name]

Initial Transferor Name

[Grid for Initial Transferor Name]

Initial Transferor License Number (if known)

[Grid for Initial Transferor License Number]

Device Model Number (Not Source Model)

[Grid for Device Model Number]

Device Serial Number

[Grid for Device Serial Number]

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

Manufacturer/Initial Transferor listed above  
 Other General Licensee      Date Transferred: [MM][DD][YYYY]  
 Other Source      (Received)      MM      DD      YYYY

Isotope (e.g. AM241)

Activity (e.g. 100)

Unit (e.g. mCi)

1.	[Grid]	[Grid]	[Grid]
2.	[Grid]	[Grid]	[Grid]
3.	[Grid]	[Grid]	[Grid]
4.	[Grid]	[Grid]	[Grid]
5.	[Grid]	[Grid]	[Grid]
6.	[Grid]	[Grid]	[Grid]
7.	[Grid]	[Grid]	[Grid]
8.	[Grid]	[Grid]	[Grid]
9.	[Grid]	[Grid]	[Grid]
10.	[Grid]	[Grid]	[Grid]









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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.gov/reading-rm/doc-collections/cfr>)

*Terry Mahon*  
*Terry N. Mahon*  
 SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1)

5-1-15  
 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: