

Company Name: GOLDEN VALLEY ELECTRIC ASSOCIATION



GL-42163-19 04/06/2015

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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 delecas 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 indoctiects@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 location to the property of t

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-42163-19

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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Department:																	
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Address Line 1: 2.5 MILE	HEALY SPUR	ROAD															
Address Line 2:	<u></u>										<u> </u>		<u></u>				
City: FAIRBA	NKS									<u> </u>		4	!	<u> </u>			
State: AK	Zip Code:	99701	-							-							
	For NRC Use (Do not write			Category:													
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		Accession Number:															





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 Nan	ne: I	BRO	WN															
First Nar	First Name: DAVE Middle Initial:																	
Telephor	Telephone: (907) 451-5668 Extension:																	
Title:		ENG	INE	ER														
Departm	ent:																	
Address	Line	1:	758	ILLI	NOIS	STE	REE	T										
										<u> </u>								
Address	Line	2:								v								
City: FAIRBANKS																		
City:			FAIF	KBAI	NNO													
City:			FAIR	KBAR	NV2													





SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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

SECTION 2 PAGE 1 of 1

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04/06/2015

SECTION 3

SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION 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.

Mar	nufac	turer	Nan	ne															•	•						
Initia	nitial Transferor Name																									
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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	Transfer Date:
NRC Device Key: 8 3 2 6 3 4	10062014
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)	(complete Part 2)
Part 2 License Number of Recipient (if transferred to a spec	inc licensee).
GL 646320-19	
Company Name:	
Golden Valley	Electric
Department:	
Association	
Address Line 1:	
2.5 M: 1e US: 6	e//isburRoad
Address Line 2:	
City:	
Healy	
State: Zin Code: Q Q	-0297
	
Part 3 Enter the name of the individual responsituat Name:	ble for this device:
BROWN	
First Name:	Middle Initial:
DAVIO	H.
	2 3 3 D Extension:
Title:	
Ma Maintenance	M6R - R50





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-ryn/doc-collections/cfr)

SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1)

DATE

5/28/15

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: