

From: [Dusty Nagle](#)
To: [Lodhi, Sattar](#)
Subject: [External_Sender] Foxfire 2015 Renewal
Date: Thursday, September 17, 2015 1:51:45 PM
Attachments: [Renewal2015.pdf](#)

Mr. Lodhi,

As per our conversation on 9/15, please find attached the requested documentation. If I can be of further assistance, feel free to contact me.

Sincerely,

Dusty Nagle, President
Foxfire Consultants, Inc.



APPLICATION FOR MATERIALS LICENSE

Estimated burden per response to comply with this mandatory collection request: 4.3 hours. Submittal of the application is necessary to determine that the applicant is qualified and that adequate procedures exist to protect the public health and safety. Send comments regarding burden estimate to the FOIA, Privacy, and Information Collections Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NE08-10202, (3150-0120), 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.

INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW. *AMENDMENTS/RENEWALS THAT INCREASE THE SCOPE OF THE EXISTING LICENSE TO A NEW OR HIGHER FEE CATEGORY WILL REQUIRE A FEE.

APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH:

MATERIALS SAFETY LICENSING BRANCH
DIVISION OF MATERIAL SAFETY, STATE, TRIBAL AND RULEMAKING PROGRAMS
OFFICE OF NUCLEAR MATERIALS SAFETY AND SAFEGUARDS
U.S. NUCLEAR REGULATORY COMMISSION
WASHINGTON, DC 20555-0001

ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:

IF YOU ARE LOCATED IN:

ALABAMA, CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, FLORIDA, GEORGIA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, NORTH CAROLINA, PENNSYLVANIA, PUERTO RICO, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, VERMONT, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA,

SEND APPLICATIONS TO:

LICENSING ASSISTANCE TEAM
DIVISION OF NUCLEAR MATERIALS SAFETY
U.S. NUCLEAR REGULATORY COMMISSION, REGION I
2100 RENAISSANCE BOULEVARD, SUITE 100
KING OF PRUSSIA, PA 19406-2713

IF YOU ARE LOCATED IN:

ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN,
SEND APPLICATIONS TO:

MATERIALS LICENSING BRANCH
U.S. NUCLEAR REGULATORY COMMISSION, REGION III
2443 WARRENVILLE ROAD, SUITE 210
LISLE, IL 60532-4352

ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MISSISSIPPI, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING,

SEND APPLICATIONS TO:

NUCLEAR MATERIALS LICENSING BRANCH
U.S. NUCLEAR REGULATORY COMMISSION, REGION IV
1600 E. LAMAR BOULEVARD
ARLINGTON, TX 76011-4511

PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S. NUCLEAR REGULATORY COMMISSION JURISDICTIONS.

1. THIS IS AN APPLICATION FOR (Check appropriate item)

A. NEW LICENSE

B. AMENDMENT TO LICENSE NUMBER

C. RENEWAL OF LICENSE NUMBER 47-23771-01

2. NAME AND MAILING ADDRESS OF APPLICANT (Include ZIP code)

FoxFire CONSULTANTS, INC.
P.O. Box 1778
GILBERT, WV 25621

3. ADDRESS WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED

9804 ROUTE 52
GILBERT, WV 25621

4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION

DUSTY NAGLE

BUSINESS TELEPHONE NUMBER

304-664-9261

BUSINESS CELLULAR TELEPHONE NUMBER

304-784-1157

BUSINESS EMAIL ADDRESS

DUSTYRV7@GMAIL.COM

AND TEMPORARY SITES THROUGHOUT U.S.

SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER. THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.

5. RADIOACTIVE MATERIAL

a. Element and mass number; b. chemical and/or physical form; and c. maximum amount which will be possessed at any one time.

6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED.

7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE.

8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS.

9. FACILITIES AND EQUIPMENT.

10. RADIATION SAFETY PROGRAM.

11. WASTE MANAGEMENT.

12. LICENSE FEES (Fees required only for new applications, with few exceptions*) (See 10 CFR 170 and Section 170.31)

FEE CATEGORY

AMOUNT ENCLOSED \$

13. CERTIFICATION. (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT.

THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, 36, 37, 39, AND 40, AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.

WARNING: 18 U.S.C. SECTION 1001 ACT OF JUNE 25, 1948 62 STAT. 749 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.

CERTIFYING OFFICER - TYPED/PRINTED NAME AND TITLE

DUSTY NAGLE, PRES.

SIGNATURE

Dusty Nagle

DATE

9/17/2015

FOR NRC USE ONLY

TYPE OF FEE	FEE LOG	FEE CATEGORY	AMOUNT RECEIVED	CHECK NUMBER	COMMENTS
			\$		
APPROVED BY				DATE	

Items 5 and 6: Materials To Be Possessed and Proposed Uses

Yes	No	Radionuclide	Manufacturer or Distributor Model No.	Quantity	Use as Listed on SSD Registration Certificate	Specify Other Uses Not Listed on SSD Registration Certificate
✓		Cesium-137	Gauge manufacturer or distributor and model number of the gauge: <u>INSTROTEK</u> <u>MODEL 3500</u>	Specify activity per source and number of gauges requested. <u>10 mCi</u> <u>2 gauges</u>	Yes <input checked="" type="checkbox"/> Specific description of the gauge use: <u>MEASUREMENT</u> <u>OF PHYSICAL</u> <u>PROPERTIES</u> <u>OF MATERIALS</u>	<input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Uses are: _____ (Submit safety analysis supporting safe use)
✓		Americium-241	Gauge manufacturer or distributor and model number of the gauge: <u>INSTROTEK</u> <u>MODEL 3500</u>	Specify activity per source and number of gauges requested. <u>40 mCi</u> <u>2 gauges</u>	Yes <input checked="" type="checkbox"/> Specific description of the gauge use: <u>MEASUREMENT</u> <u>OF PHYSICAL</u> <u>PROPERTIES</u> <u>OF MATERIALS</u>	<input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Uses are: _____ (Submit safety analysis supporting safe use.)

Yes	No	Radionuclide	Manufacturer or Distributor Model No.	Quantity	Use as Listed on SSD Registration Certificate	Specify Other Uses Not Listed on SSD Registration Certificate
	✓	Californium-252	Gauge manufacturer or distributor and model number of the gauge: _____	Specify activity per source and number of gauges requested. _____ _____ _____	Yes <input type="checkbox"/> Specific description of the gauge use: _____ _____ _____ _____ _____	<input type="checkbox"/> Not applicable _____ <input type="checkbox"/> Uses are: _____ (Submit safety analysis supporting safe use.)
	✓	Radium-226	Gauge manufacturer or distributor and model number of the gauge and number of gauges of each model that is being requested: _____	Specify activity per source and number of gauges requested. _____ _____	Yes <input type="checkbox"/> Specific description of the gauge use: _____ _____	<input type="checkbox"/> Not applicable _____ <input type="checkbox"/> Uses are: _____ (Submit safety analysis supporting safe use.)
	✓	Other Isotope (Specify):	Gauge manufacturer or distributor and model number of the gauge: _____	Specify activity per source and number of gauges requested. _____ _____	Yes <input type="checkbox"/> Specific description of the gauge use: _____ _____	<input type="checkbox"/> Not applicable _____ <input type="checkbox"/> Uses are: _____ (Submit safety analysis supporting safe use.)
Is financial assurance required? If yes, submit evidence of financial assurance						

**Items 7 through 11: Training and Experience,
Facilities and Equipment, Radiation Safety Program,
and Waste Disposal**

Item No. and Title	Suggested Response	Yes	Alternative Procedures Attached
<p>7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING AND EXPERIENCE—RADIATION SAFETY OFFICER</p> <p>Name: <u>DUSTY NAGLE</u></p>	<p>Provide documentation of the training of the proposed RSO.</p>	<p>Submit applicable documentation.</p>	
<p>8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS</p>	<p>Before using licensed materials, authorized users will have successfully completed one of the training courses described in the "Criteria" part of the section titled "Training for Individuals Working in or Frequenting Restricted Areas" in NUREG-1556, Vol. 1, Rev. 2.</p>	<p align="center"><input checked="" type="checkbox"/></p>	<p align="center"><input type="checkbox"/></p>
<p>9. FACILITIES AND EQUIPMENT</p>	<p>No information needs to be submitted in response to this item; key issues are addressed under "Radiation Safety Program—Public Dose" and "Radiation Safety Program—Operating, Emergency, and Security Procedures" below.</p>	<p>Need Not Be Submitted with Application</p>	
<p>10.1 RADIATION SAFETY PROGRAM—AUDIT PROGRAM</p>	<p>The applicant is <i>not</i> required to, and should not, submit its audit program to the NRC for review during the licensing phase. The audit program will be reviewed during NRC inspections.</p>	<p>Need Not Be Submitted with Application</p>	
<p>10.2 RADIATION SAFETY PROGRAM—SURVEY INSTRUMENTS</p>	<p>We will either possess and use, or have access to and use, a radiation survey meter that meets the criteria in the section titled "Radiation Safety Program—Instruments" in NUREG-1556, Vol. 1, Rev. 2, "Consolidated Guidance about Materials Licenses: Program-Specific Guidance about Portable Gauge Licenses," in the event of an incident.</p>	<p align="center"><input checked="" type="checkbox"/></p>	<p align="center"><input type="checkbox"/></p>

TROXLER ELECTRONIC LABORATORIES, INC.

HEREBY CERTIFIES THAT

DUSTY NAGLE

of

SAMMONS SURVEYING

HAS SUCCESSFULLY COMPLETED THE TROXLER ELECTRONIC LABORATORIES, INC.
TRAINING COURSE FOR THE USE OF NUCLEAR TESTING EQUIPMENT.

SUBJECTS INCLUDED IN THIS COURSE WERE AS FOLLOWS:

Radiological Safety

- | | |
|--|---|
| 1. Principles and practices of radiation protection. | 5. Radioactivity measurement standardization and monitoring techniques and instruments. |
| 2. Leak testing procedures. | 6. Accident and incident procedures. |
| 3. Mathematics and calculations basic to the use and measurement of radioactivity. | 7. Procedures for nuclear gauge storage and transportation. |
| 4. Biological effects of radiation. | 8. General safety precautions. |

Gauge Operation

- | | |
|-------------------------|----------------------|
| 1. Instrument theory | 4. Field application |
| 2. Operating procedures | 5. Gauge calibration |
| 3. Maintenance | |


INSTRUCTOR

February 1, 1990
DATE

No 30969

William F. Troxler
PRESIDENT

Item No. and Title	Suggested Response	Yes	Alternative Procedures Attached
10.3 RADIATION SAFETY PROGRAM—MATERIAL RECEIPT AND ACCOUNTABILITY	Physical inventories will be conducted at intervals not to exceed 6 months to account for all sealed sources and devices received and possessed under the license.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10.4 RADIATION SAFETY PROGRAM—OCCUPATIONAL DOSIMETRY	<p>We will maintain, for inspection by the NRC, documentation demonstrating that unmonitored individuals are not likely to receive, in one year, a radiation dose in excess of 10 percent of the allowable limits in 10 CFR Part 20.</p> <p style="text-align: center;">OR</p> <p>We will provide dosimetry processed and evaluated by an NVLAP-approved processor that is exchanged at a frequency recommended by the processor.</p>	<p><input type="checkbox"/></p> <p><input checked="" type="checkbox"/></p>	<input type="checkbox"/>
10.5 RADIATION SAFETY PROGRAM—PUBLIC DOSE	The applicant is <i>not</i> required to submit a response to the public dose section in a license application. This matter will be examined during an inspection.		Need Not Be Submitted with Application
10.6 RADIATION SAFETY PROGRAM—OPERATING, EMERGENCY, AND SECURITY PROCEDURES	<p>We will implement and maintain the operating and emergency procedures in Appendix G to NUREG-1556, Vol. 1, Rev. 2, "Consolidated Guidance about Materials Licenses: Program-Specific Guidance about Portable Gauge Licenses," and will develop, implement and maintain security procedures using information in Appendix G. Copies of these procedures will be provided to all gauge users and at each job site.</p> <p style="text-align: center;">OR</p> <p>Operating, emergency, and security procedures will be developed, implemented, and maintained and consistent with the criteria in the section titled "Radiation Safety Program—Operating, Emergency, and Security Procedures" in NUREG-1556, Vol. 1, Rev. 2, "Consolidated Guidance about Materials Licenses: Program-Specific Guidance about Portable Gauge Licenses."</p>	<p><input checked="" type="checkbox"/></p> <p><input type="checkbox"/></p>	<input type="checkbox"/>

