



GL-727354-20
 11/04/2015
 NRC FORM 664
 07 - 2015
 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: 04/30/2016

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 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, NEOB-10202, (3150-0198), 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-727354-20

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: TRINITY TECHNOLOGY GROUP, INC

T T G I N C

Department:

Address Line 1: 7561 SOUTH HIGHWAY 13

Address Line 2:

City: HIGGINSVILLE

State: MO

Zip Code: 64037 -

For NRC Use Only
(Do not write here)

Category:

Packet Receipt Date (MMDDYYYY):

Accession Number:





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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: TRIMBLE

[Grid for last name entry]

First Name: TIM

[Grid for first name entry]

Middle Initial:

[Grid for middle initial entry]

Telephone: (660) 584-2448

[Grid for telephone number entry]

Extension:

[Grid for telephone extension entry]

Title: SAFETY OFFICER

OWNER [Grid for title entry]

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:

[Grid for department entry]

Address Line 1: 7561 SOUTH HIGHWAY 13

[Grid for address line 1 entry]

Address Line 2:

[Grid for address line 2 entry]

City: HIGGINSVILLE

[Grid for city entry]

State: MO

[Grid for state entry]

Zip Code: 64037 -

[Grid for zip code entry]

[Grid for zip code entry]





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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 837076 (Internal Control Number)

Distributor/Distributed By: NDC INFRARED ENGINEERING INC

Grid for distributor information

Distributor License Number: 1933-19GL

Grid for distributor license number

Manufacturer Name: NDC INFRARED ENGINEERING INC

Grid for manufacturer name

Device Model (Not Source Model): 103

Grid for device model

Device Serial Number: 6742831

Grid for device serial number

Transfer Date (Receipt Date): 06/12/2015

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 contains AM241, 150.00000000, and mCi.





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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 **837077** **(Internal Control Number)**

Distributor/Distributed By: NDC INFRARED ENGINEERING INC

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Distributor License Number: 1933-19GL

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Manufacturer Name: NDC INFRARED ENGINEERING INC

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Device Model (Not Source Model): 103

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Device Serial Number: 6742861

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Transfer Date (Receipt Date): 06/12/2015

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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></tr></table>						150.00000000 <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><td> </td></tr></table>																		mCi <table border="1"><tr><td> </td><td> </td><td> </td></tr></table>			
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SECTION 3

SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

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

Manufacturer Name

None

Initial Transferor Name

Initial Transferor License Number (if known)

Device Model Number (Not Source Model)

Device Serial Number

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

- Manufacturer/Initial Transferor listed above
- Other General Licensee
- Other Source

Date Transferred:

MM DD YYYY

(Received)

MM

DD

YYYY

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			





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SECTION 5 - CERTIFICATION

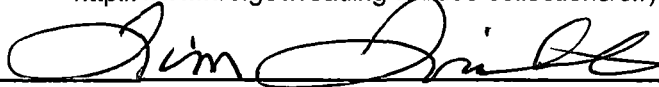
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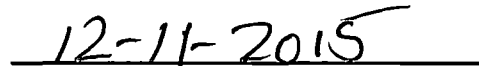
I hereby certify that:

- 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.

