



GL-726472-20 04/07/2016 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-726472-20

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.

Con	Company Name: TESORO LOGISTICS GP, LLC																						
].
Dep	artm	ent:				•			•	•		•	•			- t- -,	•		•	•	•		
																							}
Add	ress	Line	1:	411	EAS [*]	T HI	GHW	IAY 8	31	L				· · · · · · · · · · · · · · · · · · ·	•	.							J
Add	ress	Line	2:		•								·	±		1	•		•			<u> </u>	•
City	:			BUF	RLEY	,				L		1						. 		.L		<u> </u>	
Stat	e: II)					Zip (Code	: 83	3318	-	•			·] -					
							NRC not			e)	Paci	cet R	ecei	pt D		MME		(YY)					







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 Name: WALKER																										
First Name: T	st Name: TIMOTHY M															Middle Initial: A										
	onbono: (500) 543 5403																									
Telephone: (ephone: (509) 543-6103 E:															Extension:										
Title: 0	e: CURRENT SAFETY OFFICER																									
																T										
Department:	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: TIMOTHY WALKER																									
Address Line	1: 2900	SACAJ	AWE	A PA	RK F	ROA	D																			
474	Wit	S	+		9	0	0		N	0	2	T	4													
Address Line 2	2:	,			•																					
City:	PASC	O																								
SAL	T	LA	K	£		C	Į	+	Y	_					•											
State: WA	VT	Zip Co	ode:	993	01 -				8	4	1	8	3	_												





SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2 PAGE 1 of 1

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

NRC Device Key							B268	17	(Internal Control Number)																	
Dis	tributo	or/Dis	tribut	ed I	Ву:		RON	IAN E	ENGI	NEE	RIN	G C	OMP	YNA												
			,																							
Dis	tributo	or Lic	ense	Nur	nber	:	IND-	267-9	95G					-			_									
	,																									
∟ Маі	nufact	turer	Name	 ∋: R	ONA	NE	NGIN	NEEF	RING	CO	·—— MPA	NY	J													
							···-									<u> </u>	γ									
Dev	/ice M	lodel	(Not	 So:	ırca İ		ار. د ا	201.0	-10		<u> </u>	L	L		<u> </u>		<u> </u>	<u>j</u>		1			ł			
De	/ICE IV	lodei	(1401				31).	- 1 7			1	<u> </u>	T	<u>. </u>			T	<u> </u>	1	1	[7			
											<u> </u>	<u> </u>									<u> </u>]			
Dev	/ice S	erial	Numi	ber:	M52	42							<u> </u>	ı		1	1	ſ		1	1		Г	\neg		
														L												
_N	1M		DD	840		YY	^		A -4::			100\				_					_		1 lmit /		Ci)	
	Isoto	ope (e.g. A	M24	41)				Activ	vity (e.g.	100)											Unit (e.g.	mCi)	
1	CS1	37 T	I			1			200	.000 T	0000	000 T		<u> </u>	T	1	1	_	1		7		mCi	$\overline{}$		
•																		1	<u>l</u> .							
2		1				7					Т-	 	Т		Π			T		1	7			$\overline{}$		
3			Ll		<u></u>	_			<u> </u>					<u>L</u> ,	<u> </u>			<u>L</u> ,		1						
•		Τ									Τ								1						}	
4	L				<u> </u>									<u></u>				<u> </u>	1							
							,				T		-		"			T	T		}					
5			1 1		' ,	_				1		•	•						<u> </u>	<u> </u>	_					
					}																					
6		1				1				1		1		1	1			7			7					
		<u> </u>			<u> </u>							<u> </u>														





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.

Manu	ufac	turer	Nan	ne	T	,			,		,			1	,	,		,	1		 , , -				
															<u> </u>	<u> </u>									
Initia	l Tra	ansfe	ror N	lame	€																				
										,															
Initia	Tra	nsfe	ror L	icen	se N	umbe	er (if	knov	wn)												•		_		
Devi	ce N	lode	Nun	nber	(Not	Sou	rce N	/lode	1)																
Devi	ce S	erial	Num	ber																					
											_														
						•	01	Manı	ıfact	urer/	Initia	l Tra	ınsfei	ror lis	ted a	above	Э								
How from	a di	stribu	utor/r	manı	ufacti	urer,	0	Othe	r Ge	neral	Lice	nse	е	Dat	e Tra	nsfe	rred:		\top	7					
other	lice	ensee	e, oth	er so	ource	e)?	Other Source (Received) MM DD												ΥY	ΥΥ	<u> </u>				
		Isoto	pe (e	e.g. <i>A</i>	∆M 24	41)				Activ	ity (e	.g. 1	100)										Unit	(e.g	. mCi)
1.																		,	•]				
2.																									
3.			_																			•		,	
4.			-																						
5.					l																				
6.												•				-						,			
7.																				1					
8.			·																						
9.																									
10.																									





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.

Par	t 1				Transfer Date:																						
	C De		,									7															
(fror	n Se	ction	2 or	6)		<u> </u>		1	<u> </u>			J	L	MN			DD DD	J L_		<u>'YY</u>	l_ V						
Loc	ation	of th	e De	evice	:									10110			טט				•						
C							comp									d to a											ıd 3)
C							ice i									d to a		ecific	Lice	nsee	(No	t the	mar	nufac	:ture	r)	
С							(co	•								Part :	2)										
Par	t 2 Li	cens	e Nu	ımbe	er of	Reci	pient	(if tr	ansfe	erred	to a	spe	cific I	icen	see):												
Con	npany	/ Nai	ne:		•								-														
,																<u> </u>						1	1	T		Τ	7
							<u> </u>			L		L .			<u> </u>			L	<u> </u>			1	.]				
Dep	artme	ent:	ı	1				Ī	_	-	I	ı	ſ	I	ī		I		T		ı	1		т—	1	т—	7
Add	iress	Line	1:																								
							Τ	T			T										<u> </u>					T	7
Ad	dress	Line	⊥ • 2:	<u> </u>	L		ı	1	Į.	1	1	1		1		1		L .	1			1 .	1				_
		,		1	Γ	Τ	T	Ι		1		1			}		1	1	ļ	Γ	}			T	T	T_	٦
		1			ļ		<u> </u>																			<u> </u>	╛
City	<i>/</i> :		T							T				r		1	ı	ı	T			r					_
Sta	te:			1	Zip	Cod	e:						1 -]									
_			J				_	L	<u> </u>	L	<u> </u>						!]									
Par Las	t 3 st Nar	ne:	Е	nter	the	nam	e of	the i	ndiv	idua	l res	pons	sible	for	this	devi	ce:									,	
			}							i		T		<u> </u>	Ţ			· · · · ·					l		T	Τ	7
	t Nav		1							<u> </u>	<u></u>				<u> </u>	<u> </u>		l				<u> </u>	L	<u></u>	J	<u> </u>	
FIIS	t Nar	ne:				l			1		[ī						•		iiddle	e Init	ial:				
										<u> </u>]														
Tele	phone	e Nu	mbe	r:		,] E	Exter	nsion	: [
Title	€:			,	L	<u> </u>	1	_	1	L	•	_					1										
	T				T	Ţ 	T			Γ.								Γ							T	T	7
	1	<u> </u>	<u> </u>	١					Ш		1	1	<u> </u>				[1		<u> </u>		ــــــــــــــــــــــــــــــــــــــ	Щ.	ــــــــــــــــــــــــــــــــــــــ	┸		┙





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)

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.





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: