



GLTS SECTION 1
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U.S. NUCLEAR REGULATORY COMMISSION

[illegible]



GL-706396-21

11/10/2016

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: MAXWELL

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First Name: ERIC

Middle Initial:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

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Telephone: (907) 670-4037

Extension:

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--	--	--	--	--	--

Title: CRITICAL SPARES SPEC

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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: ERIC MAXWELL

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Address Line 1: PO BOX 146860

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Address Line 2: ALP 15 NORTH SLOPE

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City: ANCHORAGE

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State: AK

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Zip Code: 99519 - 6860

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SECTION 4

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Part 1

Transfer Date:

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MM

DD

Y Y Y Y

Location of the Device:

- ☐ Whereabouts Unknown (complete Part 1 only) ☐ Transferred to another general licensee (complete Parts 2 and 3)
☐ Never Possessed the Device (complete Part 1 only) ☐ Transferred to a Specific Licensee (Not the manufacturer)
☐ Returned to Manufacturer (complete Part 1 only) (complete Part 2)

Part 2 License Number of Recipient (if transferred to a specific licensee):

[illegible]

Company Name:

[illegible]

Department:

[illegible]

Address Line 1:

[illegible]

Address Line 2:

[illegible]

City:

[illegible]

State:

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Zip Code:

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Part 3

Enter the name of the individual responsible for this device:

Last Name:

[illegible]

First Name:

[illegible]

Middle Initial:

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Telephone Number:

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Extension:

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Title:

[illegible]



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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>)

Eric Maxwell

1-18-17

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.



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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: