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December 29, 2016

VIA FEDERAL EXPRESS

U.S. Nuclear Regulatory Commission
Division of Nuclear Material Safety
2443 Warrenville Road
Lisle, Illinois 60532

Re: General License Registration - DAP Foam, Inc.

Ladies/Gentlemen:

On behalf of DAP Foam, Inc. (DAP Foam), I am enclosing a General License Registration (Registration). The Registration is being submitted in connection with DAP Foam's planned acquisition of substantially all of the assets of Clayton Corporation's Foam division; the assets to be acquired include four (4) devices used for fill level detection for which Clayton Corporation has previously submitted license registrations to the Nuclear Regulatory Commission. The transaction is planned to close on December 30, 2016.

I am also enclosing an extra copy of the Registration. Please date-stamp the extra copy and return it to me in the enclosed self-addressed, stamped envelope.

As you will see, the enclosed Registration is a PDF copy of the signed form. As soon as I receive the Registration with an original signature, I will overnight it to you. In the meantime, if you have any questions regarding this submittal, please feel free to contact me at 216-622-8479 or sstrom@calfee.com. Thank you for your assistance in this matter.

Very truly yours,

Susan R. Strom

Enclosures

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SECTION 1
PAGE 1 of 2

Date _____

U.S. NUCLEAR REGULATORY COMMISSION

NRC FORM 664
(07-2015)
10 CFR 31.5

GENERAL LICENSEE REGISTRATION

APPROVED BY OMB: NO. 3150-0198

OMB EXPIRATION DATE: 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 P&S), U. S. Nuclear Regulatory Commission, Washington, DC 20555-3801, or by Internet e-mail to infocollct.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3190-0198), 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 Licensee SECTION 1 - GENERAL LICENSEE INFORMATION

Registration Number

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Enter the company name and street address for the physical location of use for the device(s). For portable devices, specify the primary storage location. Do not use P. O. Boxes.

Company Name:

D A P F O A M , I N C .

Department:

Address Line 1:

3 0 7 I N T E G R A M D R I V E

Address Line 2:

City:

P A C I F I C

State:

M O

Zip Code:

6 3 0 6 9 -

For NRC Use Only
(Do not write here)

Date:

REGISTRATION DATE (MMDDYY)

Registration Number



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Date 12/29/2016

SECTION 2

PAGE 1 OF 4

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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

NRC Device Key 418324 (Internal Control Number)

Distributor/Distributed By:

I N D U S T R I A L D Y N A M I C S C O . , L T D .

Distributor License Number:

I 5 B 6 - 7 0 G L

Manufacturer Name:

I N D U S T R I A L D Y N A M I C S C O . , L T D .

Device Model (Not Source Model):

F T - 5 0 - B

Device Serial Number:

1 4 1 8

Not in possession of device (Also complete Section 4)

Transfer Date: MM/DD/YYYY

I 2 3 1 2 0 1 6
MM DD YYYY

	Isotope (e.g., AM241)	Activity (e.g., 100)	Unit (e.g., mCi)
1.	A M 2 4 1	1 0 0 . 0 0	m C i
2.	[] [] [] [] []	[] [] [] [] [] []	[] [] [] [] [] []
3.	[] [] [] [] []	[] [] [] [] [] []	[] [] [] [] [] []
4.	[] [] [] [] []	[] [] [] [] [] []	[] [] [] [] [] []
5.	[] [] [] [] []	[] [] [] [] [] []	[] [] [] [] [] []
6.	[] [] [] [] []	[] [] [] [] [] []	[] [] [] [] [] []

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Date 12/29/2016

SECTION 2

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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

NRC Device Key 418338 (Internal Control Number)

Distributor/Distributed By:

I N D U S T R I A L D Y N A M I C S C O . , L T D .

Distributor License Number:

1 5 8 6 - 7 0 G L

Manufacturer Name:

I N D U S T R I A L D Y N A M I C S C O . , L T D .

Device Model (Not Source Model):

F T - 5 0 - C

Device Serial Number:

5 4 1 6

Not in possession of device (Also complete Section 4)

Transfer Date: MM/DD/YYYY

1 2 3 1 2 0 1 6
MM DD YYYY

	Isotope (e.g., AM241)	Activity (e.g., 100)	Unit (e.g., mCi)
1.	A M 2 4 1	1 0 0 . 0 0	m C i
2.	[] [] [] [] []	[] [] [] [] []	[] [] [] [] []
3.	[] [] [] [] []	[] [] [] [] []	[] [] [] [] []
4.	[] [] [] [] []	[] [] [] [] []	[] [] [] [] []
5.	[] [] [] [] []	[] [] [] [] []	[] [] [] [] []
6.	[] [] [] [] []	[] [] [] [] []	[] [] [] [] []



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Date 12/29/2016

SECTION 2

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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

NRC Device Key 524394 (Internal Control Number)

Distributor/Distributed By:

I N D U S T R I A L D Y N A M I C S C O . , L T D .

Distributor License Number:

1 5 8 6 - 7 0 G L

Manufacturer Name:

I N D U S T R I A L D Y N A M I C S C O . , L T D .

Device Model (Not Source Model):

F T - 5 0 - C

Device Serial Number:

1 3 6

Not in possession of device (Also complete Section 4)

Transfer Date: MM/DD/YYYY

1 2 3 1 2 0 1 6
MM DD YYYY

	Isotops (e.g., AM241)	Activity (e.g., 100)	Unit (e.g., mCi)
1.	A M 2 4 1	1 0 0 . 0 0	m C i
2.			
3.			
4.			
5.			
6.			



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Date 12/29/2016

SECTION 2

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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

NRC Device Key 524395 (Internal Control Number)

Distributor/Distributed By:

I N D U S T R I A L D Y N A M I C S C O . . L T D .

Distributor License Number:

I 5 8 6 - 7 0 G L

Manufacturer Name:

I N D U S T R I A L D Y N A M I C S C O . . L T D .

Device Model (Not Source Model):

F T - 5 0 - C

Device Serial Number:

I 3 7

Not in possession of device (Also complete Section 4)

Transfer Date: MM/DD/YYYY

I 2 3 1 2 0 1 6
MM DD YYYY

	Isotope (e.g., AM241)	Activity (e.g., 100)	Unit (e.g., mCi)
1.	A M 2 4 1	1 0 0 . 0 0	m C i
2.			
3.			
4.			
5.			
6.			



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Date 12/29/2016

SECTION 6 - DEVICES NOT SUBJECT TO REGISTRATION

NRC Device Key: Manufacturer License No.:
Manufacturer Name:
Model Number: Serial No.: Transfer Date:
Isotope: Activity: Unit:
Isotope: Activity: Unit:
Isotope: Activity: Unit:
Isotope: Activity: Unit:
Isotope: Activity: Unit:

NRC Device Key: Manufacturer License No.:
Manufacturer Name:
Model Number: Serial No.: Transfer Date:
Isotope: Activity: Unit:
Isotope: Activity: Unit:
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Isotope: Activity: Unit:

NRC Device Key: Manufacturer License No.:
Manufacturer Name:
Model Number: Serial No.: Transfer Date:
Isotope: Activity: Unit:
Isotope: Activity: Unit:
Isotope: Activity: Unit:
Isotope: Activity: Unit:
Isotope: Activity: Unit:



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Date 12/29/2016

SECTION 6 - DEVICES NOT SUBJECT TO REGISTRATION

NRC Device Key: Manufacturer License No.:
Manufacturer Name:
Model Number: Serial No.: Transfer Date:
Isotope: Activity: Unit:
Isotope: Activity: Unit:
Isotope: Activity: Unit:
Isotope: Activity: Unit:
Isotope: Activity: Unit:

NRC Device Key: Manufacturer License No.:
Manufacturer Name:
Model Number: Serial No.: Transfer Date:
Isotope: Activity: Unit:
Isotope: Activity: Unit:
Isotope: Activity: Unit:
Isotope: Activity: Unit:
Isotope: Activity: Unit:

NRC Device Key: Manufacturer License No.:
Manufacturer Name:
Model Number: Serial No.: Transfer Date:
Isotope: Activity: Unit:
Isotope: Activity: Unit:
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Isotope: Activity: Unit:
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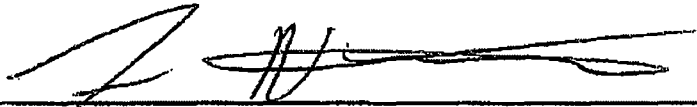
Date 12/29/2016

SECTION 5
PAGE 1 of 1

SECTION 5 - CERTIFICATION

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 web site at www.nrc.gov/reading-rm/doc-collections/cfr/)


SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1)

12/29/16
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.