

GLTS



GL-704450-23

01/25/2018

NRC FORM 664

(01 - 2018)

10 CFR 31.5

SECTION 1

PAGE 1 of 2

U.S. NUCLEAR REGULATORY COMMISSION

GENERAL LICENSEE REGISTRATION

APPROVED BY OMB: NO. 3150-0198

OMB EXPIRATION DATE: 02/28/2019

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 Information Services Branch (T-2 F43), U. S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by 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-704450-23

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: HAGER WOOD PRESERVING

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Department:

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Address Line 1: 1211 JUDD AVENUE SW

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Address Line 2:

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City: WYOMING

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State: MI

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Zip Code: 49509 - 1018

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For NRC Use Only <i>(Do not write here)</i>	Category:	<table border="1"><tr><td></td><td></td></tr></table>										
	Packet Receipt Date (MMDDYYYY):	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										
Accession Number:	<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></tr></table>											





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: HAGER

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First Name: BRIAN

Middle Initial: J

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Business Telephone Number: (616) 248-0905

Extension:

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Title: OWNER

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Enter the mailing address where correspondence regarding your device(s) should be sent. This address should be specific to the physical location where the devices are used and/or stored.

Department: BRIAN HAGER

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Address Line 1: 1211 JUDD AVENUE

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Address Line 2:

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City: WYOMING

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State: MI

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Zip Code: 49509 - 1018

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01/25/2018

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2

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

PAGE 1 of 4

NRC Device Key 293203 (Internal Control Number)

Distributor/Distributed By: Asoma Instruments, Inc.

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Distributor License Number: 6-2788G

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Manufacturer Name: ASOMA INSTRUMENTS, INC.

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Device Model (Not Source Model): LCA

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Device Serial Number: 452

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Transfer Date: 11/15/1986

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Not in possession of device (Also complete Section 4.)

MM DD YYYY

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)																					
1	CM244 <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						30.00000000 <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></tr></table>														mCi <table border="1"><tr><td></td><td></td><td></td></tr></table>			
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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 293204 (Internal Control Number)

Distributor/Distributed By: Asoma Instruments, Inc.

[Grid of 25 empty boxes]

Distributor License Number: 6-2788G

[Grid of 12 empty boxes]

Manufacturer Name: ASOMA INSTRUMENTS, INC.

[Grid of 25 empty boxes]

Device Model (Not Source Model): LCA

[Grid of 25 empty boxes]

Device Serial Number: 454

[Grid of 25 empty boxes]

Transfer Date: 11/15/1986

[Grid for date: MM, DD, YYYY]

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	CM244 [Grid of 5 boxes]	30.00000000 [Grid of 12 boxes]	mCi [Grid of 3 boxes]
2	[Grid of 5 boxes]	[Grid of 12 boxes]	[Grid of 3 boxes]
3	[Grid of 5 boxes]	[Grid of 12 boxes]	[Grid of 3 boxes]
4	[Grid of 5 boxes]	[Grid of 12 boxes]	[Grid of 3 boxes]
5	[Grid of 5 boxes]	[Grid of 12 boxes]	[Grid of 3 boxes]
6	[Grid of 5 boxes]	[Grid of 12 boxes]	[Grid of 3 boxes]





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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 **681078** **(Internal Control Number)**

Distributor/Distributed By: Asoma Instruments, Inc.

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Distributor License Number: 6-2788G

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Manufacturer Name: ASOMA INSTRUMENTS, INC.

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Device Model (Not Source Model): 100

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Device Serial Number: 1608

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Transfer Date: 11/15/1994

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Not in possession of device (Also complete Section 4.)

MM DD YYYY

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)																									
1	CM244 <table border="1" style="width:100%; height:25px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							13.00000000 <table border="1" style="width:100%; height:25px;"><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></tr></table>																	mCi <table border="1" style="width:100%; height:25px;"><tr><td></td><td></td><td></td></tr></table>			
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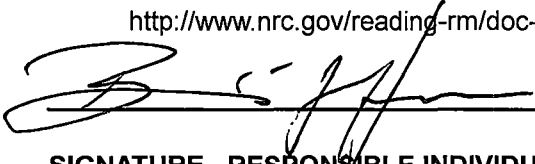
SECTION 5 - CERTIFICATION

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>)



02-15-2018

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.

