





GL-726906-23  
04/11/2018

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: SWANEY

G O N Z A I E S

First Name: TROY

Middle Initial: C

M A R K

R

Business Telephone Number: (219) 256-7390

Extension:

Title: OPERATIONS MANAGER

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:

Address Line 1: 4407 RAILROAD AVENUE

Address Line 2:

City: EAST CHICAGO

State: IN

Zip Code: 46312 -





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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.

PAGE 1 of 1

**NRC Device Key**                    **832137**            **(Internal Control Number)**

**Distributor/Distributed By:**    **ADVANCED GAUGING TECHNOLOGIES, LLC**

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**Distributor License Number:**    **34-32021-01**

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**Manufacturer Name:** **ADVANCED GAUGING TECHNOLOGIES, LLC**

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**Device Model (Not Source Model):** **AGT400**

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**Device Serial Number:** **024/96**

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**Transfer Date:**                    **04/28/2014**

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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)																																								
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### SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

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

Manufacturer Name

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Initial Transferor Name

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Initial Transferor License Number (if known)

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Device Model Number (Not Source Model)

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Device Serial Number

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- How acquired and date (e.g., from a distributor/manufacturer, other licensee, other source)?
- Manufacturer/Initial Transferor listed above
  - Other General Licensee      Date Transferred:
  - Other Source
- MM                  DD                  YYYY

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1.	<table border="1" style="width: 100%; height: 30px;"> </table>	<table border="1" style="width: 100%; height: 30px;"> </table>	<table border="1" style="width: 100%; height: 30px;"> </table>
2.	<table border="1" style="width: 100%; height: 30px;"> </table>	<table border="1" style="width: 100%; height: 30px;"> </table>	<table border="1" style="width: 100%; height: 30px;"> </table>
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**SECTION 5 - CERTIFICATION**

**SECTION 5**  
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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>)

*Mark Goryule*

4/25/18

**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: