

GLTS



GL-56749-23
04/09/2018
NRC FORM 664
(01 - 2018)
10 CFR 31.5

SECTION 1
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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 Infocollect.Resource@nrc.gov. and to the Desk Officer, Office of Information and Regulatory Affairs, NEOS-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-56749-23

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: LEE STEEL HOLDINGS

LEE STEEL HOLDINGS

Department:

Address Line 1: 19800 GIBRALTER ROAD

19800 GIBRALTER ROAD

Address Line 2:

City: ROCKWOOD

ROCKWOOD

State: MI MI

Zip Code: 48173 - 48173

For NRC Use Only (Do not write here) Category: Packet Receipt Date (MMDDYYYY): Accession Number:



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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: MORRIS

M O R R I S

First Name: PERRY

P E R R Y

Middle Initial: D

J

Business Telephone Number: (734) 362-1144

2 4 8 2 0 6 4 4 3 4

Extension:

Title: PLANT MANAGER

P L A N T M A N A G E R

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: 19800 GIBRALTER ROAD

1 9 8 0 0 G I B R A L T E R R O A D

Address Line 2:

City: ROCKWOOD

R O C K W O O D

State: MI

M I

Zip Code: 48173

4 8 1 7 3 -





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SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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

NRC Device Key 431984 (Internal Control Number)

Distributor/Distributed By: Gamma Instruments, Inc.

GAMMA INSTRUMENTS, INC

Distributor License Number: 3963-30 GL

3963-30 GL

Manufacturer Name: GAMMA INSTRUMENTS, INC.

GAMMA INSTRUMENTS, INC

Device Model (Not Source Model): GR-100

GR-100

Device Serial Number: 060904

060904

Transfer Date: 02/15/1991

02 15 1991

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

MM DD YYYY

	Isotops (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	AM241 AM241	1000.000000000 1000.00000000	mCi mCi
2			
3			
4			
5			
6			





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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

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

Initial Transferor Name

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

Initial Transferor License Number (if known)

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

Device Model Number (Not Source Model)

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

Device Serial Number

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

How acquired and date (e.g., from a distributor/manufacturer, other licensee, other source)?

- Manufacturer/Initial Transferor listed above
- Other General Licensee
- Other Source

Date Transferred:

 /

 /

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>
3.	<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>
4.	<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>
5.	<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>
6.	<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>
7.	<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>
8.	<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>
9.	<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>
10.	<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

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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>)



4-27-18

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 Name:
Model Number:

Manufacturer License No:

Serial #:

Transfer Date: