





GL-724716-23  
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: EVANS

F a l l i n i

First Name: CHARMAINE

Middle Initial:

D o m i n i c k

Business Telephone Number: (832) 325-5116

Extension:

8 3 2 4 1 8 2 3 2 6

Title: RSO

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: HSSE

Address Line 1: ONE GREENWAY PLAZA

9 9 9 9 H a m i l t o n B l v d

Address Line 2: SUITE 600

City: HOUSTON

B e i n i g s v i l l e

State: TX

P A

Zip Code: 77046 -

1 8 0 3 1 -





GL-724716-23

04/11/2018

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 1

NRC Device Key 806744 (Internal Control Number)

Distributor/Distributed By: THERMO FISCHER SCIENTIFIC

[Empty grid box]

Distributor License Number: L03524

[Empty grid box]

Manufacturer Name: THERMO MEASURETECH

[Empty grid box]

Device Model (Not Source Model): 5190

[Empty grid box]

Device Serial Number: B333

[Empty grid box]

Transfer Date: 01/01/2010

[Empty grid box]

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	CS137 [Empty grid]	200.000000000 [Empty grid]	mCi [Empty grid]
2	[Empty grid]	[Empty grid]	[Empty grid]
3	[Empty grid]	[Empty grid]	[Empty grid]
4	[Empty grid]	[Empty grid]	[Empty grid]
5	[Empty grid]	[Empty grid]	[Empty grid]
6	[Empty grid]	[Empty grid]	[Empty grid]









GL-724716-23  
04/11/2018

**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>)

5/14/18

\_\_\_\_\_  
**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.





GL-724716-23  
04/11/2018

**SECTION 6 - DEVICES NOT SUBJECT TO REGISTRATION**

**SECTION 6**

PAGE 1 of 1

**NRC Device Key:**

Manufacturer License No:

Manufacturer Name:

Model Number:

Serial #:

Transfer Date: