

FEDERAL NOTIFICATION LETTER

Saturday, May 12, 2018

Director of FSME
Attn: GLTS
U.S. Nuclear Regulatory Commission
Washington, DC 20555-0001

This letter is a notification per 10 CFR 31.5(c)(8) or corresponding State regulation indicating that a device containing radioactive material was transferred from a general licensee to a specific licensee. The following information is provided:

From General Licensee:

GlaxoSmithKline Biologicals NA
553 Old Corvallis Rd.
Hamilton, MT 59840

To Specific Licensee:

SRB Technologies, Inc.
2580 Landmark Drive
Winston-Salem, NC 27103
(336)-659-2610
Radioactive Materials License #034-0534-2


Date of Transfer: (Enter Date Disposal Box was shipped to Specific Licensee)	30 May 18
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Description of Device(s) Transferred:

Exit signs containing tritium as per attached Inventory Form(s).

If there are questions or concerns, please contact me.

Sincerely,

Printed Name:	Daniel Gossutt
Signature:	
Phone Number:	406-303-0089

FEDERAL LETTER- MAIL TO USNRC WITHIN 30 DAYS OF SHIPMENT

VEOLIA USE ONLY

Sales Order: 2001967
Case: 36457

RGA#: 997132
RGA# Expiration Date: 8/11/18
UCN: 1U51387V-5W54362X
Fedex Tracking#: 691191700045685
Box #: 1 of 1

TRITIUM EXIT SIGN INVENTORY FORM

Record an inventory of the exit signs using the manufacturer label information on the back of the sign. Make sure that all information is legible. **DO NOT REMOVE THE LABEL FROM THE SIGN. ALL FIELDS BELOW MUST BE FILLED OUT FOR EACH SIGN. DO NOT PUT ARROWS OR DITTO MARKS FOR REPETITIVE INFORMATION.** Note: Double faced signs made by connecting two signs back-to-back should be counted as two signs even if there is one serial number on the housing. If you have one or more back-to-back signs, please list each one twice.

DESCRIPTION/MFR.	MODEL NUMBER	SERIAL NUMBER	DATE OF MANUFACTURE	CURIES PER UNIT or LIFE RATING
1. S&B Technologies	BX	C070524	APR 07	21.6
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Describe any damaged units:
Please email pictures of damaged signs to pak.ts@veolia.com

No

I hereby certify that all information submitted on this form contains true and accurate descriptions of the exit signs.

GENERATOR CERTIFICATION

Generator Signature: [Signature] Title: EHS
Print Name: Don Gosses Date: 26 APR 14

VEOLIA INFORMATION - DO NOT WRITE IN THIS BOX

Date Received: 5-12-18 Checked in by: Angie Kung

