

FEDERAL NOTIFICATION LETTER

Wednesday, May 30, 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:

Veolia
215 S. Park St.
Port Washington, WI 53074

To Specific Licensee:

SRB Technologies, Inc.
2580 Landmark Drive
Winston-Salem, NC 27103
(336)-659-2610

Radioactive Materials License #034-0534-2

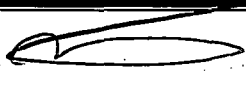
Date of Transfer: (Enter Date Disposal Box was shipped to Specific Licensee)	06/12/18
--	----------

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:	Michael Gritter
Signature:	
Phone Number:	414-313-8086

FEDERAL LETTER- MAIL TO USNRC WITHIN 30 DAYS OF SHIPMENT

VEOLIA USE ONLY

Sales Order: 2004087
Case#: 36563

RG A#: 997170
RG A# Expiration Date: 8/29/18
UCN: 9051383P-7Q54414R
Fedex Tracking#: 691191700045814
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	CURI ES PER UNIT or LIFE RATING
1.	shie lb	101	J0146	1/1995	7.5
2.	shie lb	LTE	J0291	1/1995	7.5
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

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

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

GENERATOR CERTIFICATION

Generator Signature: _____

Title: _____

operations supervisor

Print Name: _____

Michael Griffler

Date: _____

5/23/18

VEOLIA INFORMATION - DO NOT WRITE IN THIS BOX

Date Received: _____

5-23-18

Checked in by: _____

Angie King