



GL-723617-24  
 04/11/2019  
**NRC FORM 664**  
 (04 - 2019)  
 10 CFR 31.5

**SECTION 1**  
**PAGE 1 of 2**  
**U.S. NUCLEAR REGULATORY COMMISSION**

**GENERAL LICENSEE REGISTRATION**

**APPROVED BY OMB: NO. 3150-0198**

**OMB EXPIRATION DATE: 04/30/2019**

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 FOIA, Privacy, and Information Collection Branch (T-6A10M), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-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  
 Registration Number  
 GL-723617-24**

**SECTION 1 - GENERAL LICENSEE INFORMATION**

**Enter the company name and the street address for the physical location of use for your device(s). For portable devices, specify the primary storage location. Do not use P.O. Boxes.**

Company Name: UNICEP PACKAGING LLC

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Department:

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Address Line 1: 1702 INDUSTRIAL DRIVE

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Address Line 2:

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City: SANDPOINT

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State: ID 

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Zip Code: 83864 

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<b>For NRC Use Only (Do not write here)</b>	Category:	<table border="1"><tr><td></td><td></td></tr></table>							
	Packet Receipt Date (MMDDYYYY):	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							
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GLTS







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### SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2  
PAGE 1 of 2

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

NRC Device Key: 793502 (Internal Control Number)

Distributor/Distributed By: Peco Controls Corporation

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Distributor License Number: 3823-43 GL

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Manufacturer name: PECO CONTROLS CORPORATION

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Device Model (Not Source Model): GAMMA 101-P

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Device Serial Number: G007429308

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Transfer Date: 01/26/2009

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

MM DD YYYY

	Isotope (e.g. AM241)	Activity (e.g. 1005)	Unit (e.g. mCi)																			
1	AM241	100	mCi																			
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**SECTION 2 - DEVICES SUBJECT TO REGISTRATION**

SECTION 2  
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Our records indicate that you have these devices. Please update the information as necessary.

**NRC Device Key 795026 (Internal Control Number)**

Distributor/Distributed By: Industrial Dynamics Company, Ltd.

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Distributor License Number: 1586-19GL

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Manufacturer name: INDUSTRIAL DYNAMICS CO., LTD.

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Device Model (Not Source Model): FT-50

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Device Serial Number: 112210

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Transfer Date: 02/06/2009

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

MM DD YYYY

	Isotope (e.g. AM241)	Activity (e.g. 1005)	Unit (e.g. mCi)																			
1	AM241 <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						100 <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>													mCi <table border="1"><tr><td></td><td></td></tr></table>		
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**SECTION 4 - NOT IN POSSESSION OF DEVICE**

SECTION 4  
PAGE 1 of 1

Provide information about devices listed in Section 2 or 6, but no longer in your possession.

**Part 1**

NRC Device Key:  
(from Section 2 or 6)

[12 empty boxes for NRC Device Key]

Transfer Date:

[MM][DD][YYYY boxes for Transfer Date]

MM      DD      YYYY

Location of the Device:

- Whereabouts Unknown (Complete Part 1 only)
- Never Possessed the Device (Complete Part 1 only)
- Returned to Manufacturer (Complete Part 1 only)
- Transferred to another general licensee (Complete Parts 2 and 3)
- Transferred to a Specific Licensee (Not the manufacturer) (Complete Part 2)

**Part 2 License Number of Recipient (if transferred to a specific licensee):**

[15 empty boxes for License Number of Recipient]

Company Name:

[35 empty boxes for Company Name]

Department:

[35 empty boxes for Department]

Address Line 1:

[35 empty boxes for Address Line 1]

Address Line 2:

[35 empty boxes for Address Line 2]

City:

[35 empty boxes for City]

State: [2 empty boxes]

Zip Code: [5 empty boxes]

**Part 3 Enter the name of the individual responsible for this device:**

Last name:

[35 empty boxes for Last name]

First name:

[15 empty boxes for First name]

Middle Initial:

[1 empty box for Middle Initial]

Business Telephone Number:

[15 empty boxes for Business Telephone Number]

Extension: [5 empty boxes]

Title:

[35 empty boxes for Title]





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**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.

(Copied of applicable regulations may be viewed at the NRC website at:

<http://www.nrc.gov/reading-rm/doc-collections/cfr>)

**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. 10 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 - DEVICE NOT SUBJECT TO REGISTRATION**

**SECTION 6**  
**PAGE 1 of 1**

**NRC Device Key:**

**Manufacturer License No:**

**Manufacturer Name:**

**Model Number:**

**Serial #:**

**Transfer Date:**

**Isotope:**

**Activity:**

**Unit:**

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