



GL-727411-24

04/12/2019

**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

<p>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.</p>
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

**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**

**SECTION 1 - GENERAL LICENSEE INFORMATION**

~~GL-727411-24~~

**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: EDGEWELL PERSONAL CARE

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Department: ENVIRONMENTAL HEALTH & SAFETY

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Address Line 1: 10 LEIGHTON ROAD

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Address Line 2:

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City: MILFORD

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State: CT

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Zip Code: 06460

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<p><b>For NRC Use Only (Do not write here)</b></p>	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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GL-727411-24  
04/12/2019

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: PHO

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First Name: PHUC

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Middle Initial: V

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Business Telephone Number: (203) 882-2547

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Extension:

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Title: ENVIRONMENTAL HEALTH & SAFETY

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**Enter the mailing address where correspondence regarding your device(s) should be sent.**

Department: ENVIRONMENTAL HEALTH & SAFETY

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Address Line 1: 10 LEIGHTON ROAD

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Address Line 2:

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

City: MILFORD

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State: CT

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Zip Code: 06460

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**SECTION 2 - DEVICES SUBJECT TO REGISTRATION**

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

**NRC Device Key**                      **837563 (Internal Control Number)**

Distributor/Distributed By:    INDEV GAUGING SYSTEMS

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Distributor License Number:   IL-02050-01

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Manufacturer name:            INDEV GAUGING SYSTEMS

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Device Model (Not Source Model): 015202

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

Device Serial Number:        AE-5887

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Transfer Date:            08/19/2015

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

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

MM            DD            YYYY

	Isotope (e.g. AM241)	Activity (e.g. 1005)	Unit (e.g. mCi)																				
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GL-727411-24

04/12/2019

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)

[Grid for NRC Device Key]

Transfer Date:

[Grid 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):

[Grid for License Number]

Company Name:

[Grid for Company Name]

Department:

[Grid for Department]

Address Line 1:

[Grid for Address Line 1]

Address Line 2:

[Grid for Address Line 2]

City:

[Grid for City]

State:

[Grid for State]

Zip Code:

[Grid for Zip Code]

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

Last name:

[Grid for Last name]

First name:

[Grid for First name]

Middle Initial:

[Grid for Middle Initial]

Business Telephone Number:

[Grid for Business Telephone Number]

Extension:

[Grid for Extension]

Title:

[Grid for Title]





GL-727411-24  
04/12/2019

**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>)

Phuoc Cho

April 22, 2019

**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.





GL-727411-24

04/12/2019

**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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