

APPLICATION FOR BYPRODUCT MATERIAL LICENSE
INDUSTRIAL

- a. NEW LICENSE
- b. AMENDMENT TO LICENSE NUMBER
- c. RENEWAL OF LICENSE NUMBER

See attached instructions for details.

Completed applications are filed in duplicate with the Division of Fuel Cycle and Material Safety, Office of Nuclear Material Safety, and Safeguards, U.S. Nuclear Regulatory Commission, Washington, DC 20555 or applications may be filed in person at the Commission's office at 1717 H Street, NW, Washington, D. C. or 7915 Eastern Avenue, Silver Spring, Maryland.

2. APPLICANT'S NAME (Institution, firm, person, etc.)

W.H. Brady Company
~~Technicote Division~~
TELEPHONE NUMBER: AREA CODE - NUMBER EXTENSION
414-332-8100

3. NAME OF PERSON TO BE CONTACTED REGARDING THIS APPLICATION

Ary S. Mirochnik
TELEPHONE NUMBER: AREA CODE - NUMBER EXTENSION
414-332-8100 Ext 388

4. APPLICANT'S MAILING ADDRESS (Include Zip Code)

P.O. Box 2131
2230 West Florist Avenue
Milwaukee, Wisconsin 53201

5. STREET ADDRESS WHERE LICENSED MATERIAL WILL BE USED (Include Zip Code)

2230 West Florist Avenue
Milwaukee, Wisconsin 53201

(IF MORE SPACE IS NEEDED FOR ANY ITEM, USE ADDITIONAL PROPERLY KEYED PAGES.)

6. INDIVIDUAL(S) WHO WILL USE OR DIRECTLY SUPERVISE THE USE OF LICENSED MATERIAL

(See Items 16 and 17 for required training and experience of each individual named below)

	FULL NAME	TITLE
a.	Steven J. Behmke	Maintenance Mechanic
b.	Gloria J. Dohearty	Quality Control Manager
c.	Gregory S. Heebink	Coating Dept. Supervisor

7. RADIATION PROTECTION OFFICER

Ary S. Mirochnik

Attach a resume of person's training and experience as outlined in Items 16 and 17 and describe his responsibilities under Item 15.

8. LICENSED MATERIAL

LINE NO.	ELEMENT AND MASS NUMBER	CHEMICAL AND/OR PHYSICAL FORM	NAME OF MANUFACTURER AND MODEL NUMBER (If Sealed Source)	MAXIMUM NUMBER OF MILLICURIES AND/OR SEALED SOURCES AND MAXIMUM ACTIVITY PER SOURCE WHICH WILL BE POSSESSED AT ANY ONE TIME
(1)	Strontium - 90	Sealed Source	LFE Model	Two Sources
(2)		Special Form	NER - 592	Each 100
(3)				Millicuries
(4)				

DESCRIBE USE OF LICENSED MATERIAL
E

- (1) The licensed material will be installed in two LFE Corporation
- (2) Model SCL-ICP Radiation Gauging Devices for the purpose of measuring
- (3) Pressure Sensitive Tape. One Gauge will measure the Substrate while
- (4) the other Gauge will measure the Substrate Plus Adhesive.

9. STORAGE OF SEALED SOURCES

LINE NO.	CONTAINER AND/OR DEVICE IN WHICH EACH SEALED SOURCE WILL BE STORED OR USED. A.	NAME OF MANUFACTURER B.	MODEL NUMBER C.
(1)	Radiation Gauge	LFE Corporation	SCL - ICP
(2)			
(3)			
(4)			

10. RADIATION DETECTION INSTRUMENTS

LINE NO.	TYPE OF INSTRUMENT A	MANUFACTURER'S NAME B	MODEL NUMBER C	NUMBER AVAILABLE D	RADIATION DETECTED (alpha, beta, gamma, neutron) E	SENSITIVITY RANGE (milliroentgens/hour or counts/minute) F
(1)	RADIATION SURVEYS WILL BE PERFORMED BY LFE CORPORATION					
(2)						
(3)						
(4)						

11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10

<input type="checkbox"/> a. CALIBRATED BY SERVICE COMPANY NAME, ADDRESS, AND FREQUENCY N/A	<input type="checkbox"/> b. CALIBRATED BY APPLICANT Attach a separate sheet describing method, frequency and standards used for calibrating instruments. N/A
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12. PERSONNEL MONITORING DEVICES

TYPE (Check and/or complete as appropriate.) A	SUPPLIER (Service Company) B	EXCHANGE FREQUENCY C
<input type="checkbox"/> (1) FILM BADGE <input type="checkbox"/> (2) THERMOLUMINESCENCE DOSIMETER (TLD) <input type="checkbox"/> (3) OTHER (Specify): _____ _____ _____		<input type="checkbox"/> MONTHLY <input type="checkbox"/> QUARTERLY <input type="checkbox"/> OTHER (Specify): _____ _____ _____

13. FACILITIES AND EQUIPMENT (Check where appropriate and attach annotated sketch(es) and description(s).)

- a. LABORATORY FACILITIES, PLANT FACILITIES, FUME HOODS (Include filtration, if any), ETC.
- b. STORAGE FACILITIES, CONTAINERS, SPECIAL SHIELDING (fixed and/or temporary), ETC.
- c. REMOTE HANDLING TOOLS OR EQUIPMENT, ETC.
- d. RESPIRATORY PROTECTIVE EQUIPMENT, ETC.

14. WASTE DISPOSAL

a. NAME OF COMMERCIAL WASTE DISPOSAL SERVICE EMPLOYED: N/A

b. IF COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED, SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH WILL BE USED FOR DISPOSING OF RADIOACTIVE WASTES AND ESTIMATES OF THE TYPE AND AMOUNT OF ACTIVITY INVOLVED. IF THE APPLICATION IS FOR SEALED SOURCES AND DEVICES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO STATE.

The sealed sources and devices will be returned to LFE Corporation when they are no longer required.

INFORMATION REQUIRED FOR ITEMS 15, 16 AND 17

Describe in detail the information required for Items 15, 16 and 17. Begin each item on a separate page and key to the application as follows:

15. **RADIATION PROTECTION PROGRAM.** Describe the radiation protection program as appropriate for the material to be used including the duties and responsibilities of the Radiation Protection Officer, control measures, bioassay procedures *(if needed)*, day-to-day general safety instruction to be followed, etc. If the application is for sealed source's also submit leak testing procedures, or if leak testing will be performed using a leak test kit, specify manufacturer and model number of the leak test kit.

16. **FORMAL TRAINING IN RADIATION SAFETY.** Attach a resume for each individual named in Items 6 and 7. Describe individual's formal training in the following areas where applicable. Include the name of person or institution providing the training, duration of training, when training was received, etc.
 - a. Principles and practices of radiation protection.
 - b. Radioactivity measurement standardization and monitoring techniques and instruments.
 - c. Mathematics and calculations basic to the use and measurement of radioactivity.
 - d. Biological effects of radiation.

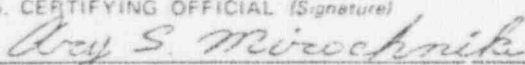
17. **EXPERIENCE.** Attach a resume for each individual named in Items 6 and 7. Describe individual's work experience with radiation, including where experience was obtained. Work experience or on-the-job training should be commensurate with the proposed use. Include list of radioisotopes and maximum activity of each used.

18. CERTIFICATE

(This item must be completed by applicant)

The applicant and any official executing this certificate on behalf of the applicant named in Item 2, certify that this application is prepared in conformity with Title 10, Code of Federal Regulations, Part 30, and that all information contained herein, including any supplements attached hereto, is true and correct to the best of our knowledge and belief.

WARNING.—18 U.S.C., Section 1001; Act of June 25, 1948; 62 Stat. 749; makes it a criminal offense to make a willfully false statement or representation to any department or agency of the United States as to any matter within its jurisdiction.

a. LICENSE FEE REQUIRED <i>(See Section 170.31, 10 CFR 170)</i>	b. CERTIFYING OFFICIAL <i>(Signature)</i> 
	c. NAME <i>(Type or print)</i> Arv S. Mirochnik
(1) LICENSE FEE CATEGORY: 3L	d. TITLE SR. DES. Engineer
(2) LICENSE FEE ENCLOSED: \$ 110.00	e. DATE 1-17-81

