

GL-1043-24
 04/09/2019
NRC FORM 664
 (04 - 2019)
 10 CFR 31.5

2019



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 **SECTION 1 - GENERAL LICENSEE INFORMATION**

~~GL-1043-24~~

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 WATERLOO INDUSTRIES

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Department

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Address Line 1 1500 WATERLOO DRIVE

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Address Line 2

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City SEDALIA

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State MO

Zip Code 65301

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

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First Name BRETT

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Middle Initial A

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Business Telephone Number (660) 826-0960

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Extension 8774

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Title EHS MANAGER

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

Department

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Address Line 1 1500 WATERLOO DRIVE

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Address Line 2

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City SEDALIA

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State MO

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Zip Code 65301

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SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

Provide information about other devices you have that are subject to registration Do not report specifically licensed devices

Manufacturer Name

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Initial Transferor Name

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Initial Transferor License Number (if known)

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Device Model Number (Not Source Model)

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Device Serial Number

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- How acquired and date (e.g., from a distributor/manufacturer, other licensee, other source)?
- Manufacturer/Initial Transferor listed above
 Other General Licensee Date Transferred
MM DD YYYY
- Other Sources

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)																				
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GL-1043-24

04/09/2019

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)

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Transfer Date

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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)

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Company Name

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Department

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Address Line 1

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Address Line 2

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City

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State

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Zip Code

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

Last name

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First name

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Middle Initial

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Business Telephone Number

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Extension

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Title

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GL-1043-24
04/09/2019

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](http://www.nrc.gov/reading-rm/doc-collections/cfr))

Frank Long

6/11/19

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

