"OFFICIAL RECORD COPY"

NAC FORM 3131 (12.81)

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on P.3. 10341

			STORAGE OF	SEALED SOURC	ES		
2-Zu0	CONTAINER AND/OR DEVICE IN WHICH		EACH SEALED	NAME OF MANUFACTURER		MODEL NUMBER	
=	Source !	HOLDED		OHMART		SHD	
(2)							
(3)	SOURCE !	HOLDER		OHMART		SR-A	
							
(4)				1			
-	TYPE	10. R	MODEL	NUMBER	RADIATION	SENSITIVITY	
J-240	OF INSTRUMENT	NAME	NUMBER	AVAILABLE	DETECTED (alpha, bota, pamma, neutron) E	RANGE (millirpentgens/hour or counts/minute)	
(1)	OHMART	WILL START	UP AND CO	MMISSION.	THE INSTRU	MENTS	
(3)				+			
-		 					
(4)							
	CALIBRATED BY SE		ATION OF INST	RUMENTS LISTE	D IN ITEM 10		
	NAME, ADDRESS, A		RSONNEL MON	TORING DEVICE	ing instruments.	od, frequency and standards	
	Check and/or complet	***************************************		SUPPLIER (Service Company)		EXCHANGE FREQUENCY	
	Å			8		С	
011	FILM BADGE		ON OHMART EQUIPMENT WES NOT MONTHLY				
D (2	THERMOLUMINESO	ENCE	EXCEED 5 MR/HR AT ONE (1) FOOT DOLARTERLY				
D (3	OTHER (Specify):		FIELD IS	O OTHER (Specify):			
-							
00	STORAGE FACILIT	AND EQUIPMENT (C CILITIES, PLANT FACIL IES, CONTAINERS, SPE G TOOLS OR EQUIPMENT PECTIVE EQUIPMENT	CIAL SHIELDING	DDS finelude filtretio	on, if eny), ETC. ery), ETC.	nd description(s).	
				DISPOSAL			
a. NA	ME OF COMMERCIA	L WASTE DISPOSAL BE	RVICE EMPLOYE				
BE	USED FOR DISPOSIN	NG OF RADIOACTIVE	AND DEVICES AN	MATES OF THE TYPE	PE AND AMOUNT OF	F METHODS WHICH WILL ACTIVITY INVOLVED, IF ANUFACTURER, SO STATE.	
			14) 000	- III IIICHI			

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 rediation protection program as appropriate for the material to be used including the duties and responsibilities of the Radiation Protection Officer, control measures, bioassay procedures (Il 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 onthe-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 epplicent)

109H 11

Personne	7
Log ang 19	
Remitter	
Check No. 555	
Amount \$ 230	
Fee Category 3 P	
Type of Fee A P	
Date Check Rec'd. 8/30/	88
Date Completed 6/30/6	58
By: Stinkin	5

The applicant and any official executing this certificate on behalf of the applicant named in name a. certify that this application is prepared in conformity with Title 10, Code of Faderal Regulations, Part 30, and that all information contained herein, including any supplements attached here o, 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 egency of the United States as to any matter within its jurisdiction.

See Section 170.31, 10 CFR 170)	c. NAME (TYPE OF PINI) COWARD L. CURRAN		
(1) LICENSE FEE CATEGORY	O TITLE PLANT MANAGER		
121 LICENSE FEE ENCLOSED & 230.00	· DATE AUGUST 9, 1988		

'Whenever the source/source holder is no longer needed it will be removed and returned to the manufacturer for disposal. The services of the manufacturer's representative will be obtained to supervise the removal, reinstallation, and/or packaging for return to the manufacturer.

The source/source holders will be received and stored panding arrival of Manufacturer's Field Engineer. The source/source holders will be installed in the closed position under the supervision of the representative. A written procedure for prevention of entry into the vessel when the source is in the open, (source exposed) position will be prepared. This program will be developed in consultation with the manufacturer/s representative.

The initial radiation survey will be made by the representative at the time the device is placed in service. An occupancy evaluation will be made by the representative and if film badges appear to be required, they will be obtained. Form NRC-3 will be posted and if the radiation survey with the vessel(s) empty reveals radiation fields in excess of 5mr/hr at 12 inches from the surface of the vessels, appropriate warning signs will be posted. Procedures will be adjusted to reduce the total dose to personnal to the minimum reasonably achievable. A copy of the radiation survey and written procedures will be kept on file for future reference.

In case of malfunction of the source holder or damage thereto, the sevices of the manufacturer's representative will be obtained for repair or to supervise removal and proper packaging for return to the manufacturer for repair or replacement as required.

In case of emergency such as fire or explosion involving apparent damage to the source holder, the appropriate Regional Office of Inspection and Enforcement (10 CFR 20 Appendix D), USNRC, will be contacted for assistance. The area around the source holder will be barricaded. The services of a manufacturer's representative will be obtained to assist in inspection for damage and local health authorities will also be notified.

WIPE TEST PROCEDURE- A test will be performed on the surface of the source holder at the appropriate interval by the licensee in accordance with the instructions of the manufacturer's representative and contained in the gage instruction manual. The wipe test kit to be used is the Ohmart Model LT and the wipe will be evaluated for leakage by The Ohmart Corporation. Should the presence of 0.005 microcuries of removable contamination be detected, the source holder will be withdrawn from service, the Regional Office of the USRNC notified and the device repaired or replaced by the manufacturer.

Ohmart will provide on the job training at start up.

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On the job training at start up.

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TELEPAX

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USIA

10.				SEBLOIS AMELS
PAX . PHONE	NO!	207 - 6	638237	
DATE	5.888		TIME	
TOTAL PAG	ies /+ 9		INCL. THE	S PAGE
ATT:	HE.	2.00	DA	
C.C./REP				
	PLEASE	FIND ,	PTTIC HED	OUR ANSWER
	TO YOUR	FAX	CONCORN	INC LEVEL
	DETECTOR	1 87 0	HMART.	04-1)
	CONTRACTOR OF THE PERSON NAMED IN COLUMN 1975	THE POST OF THE PERSON NAMED IN	THE PARTY OF THE P	DH1 car 150
	MOITEY	10 G GT	HOGHER	REFE. LINK
	panine	W18# 1	100	
=	KUMPU ENGINEE	. ID	VVI JAR	KELTIKON

PAX TYPE: CANON 320 E, SPEED 3

IF TRANSMISSION NOT COMPLETE PLEASE INFORM US

FAX PHONE No. (INTERNATIONAL) 358-0-4212674

Mail address

Yelephone

Yelsi

REGARDS

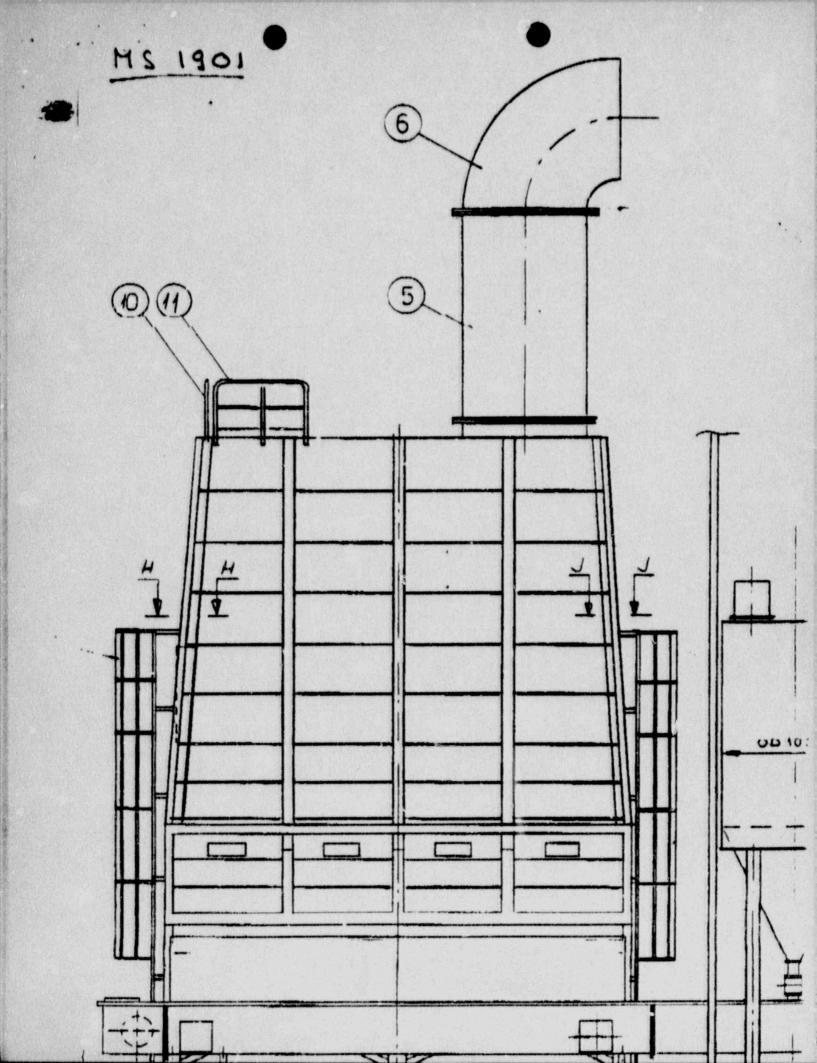
ZROXON

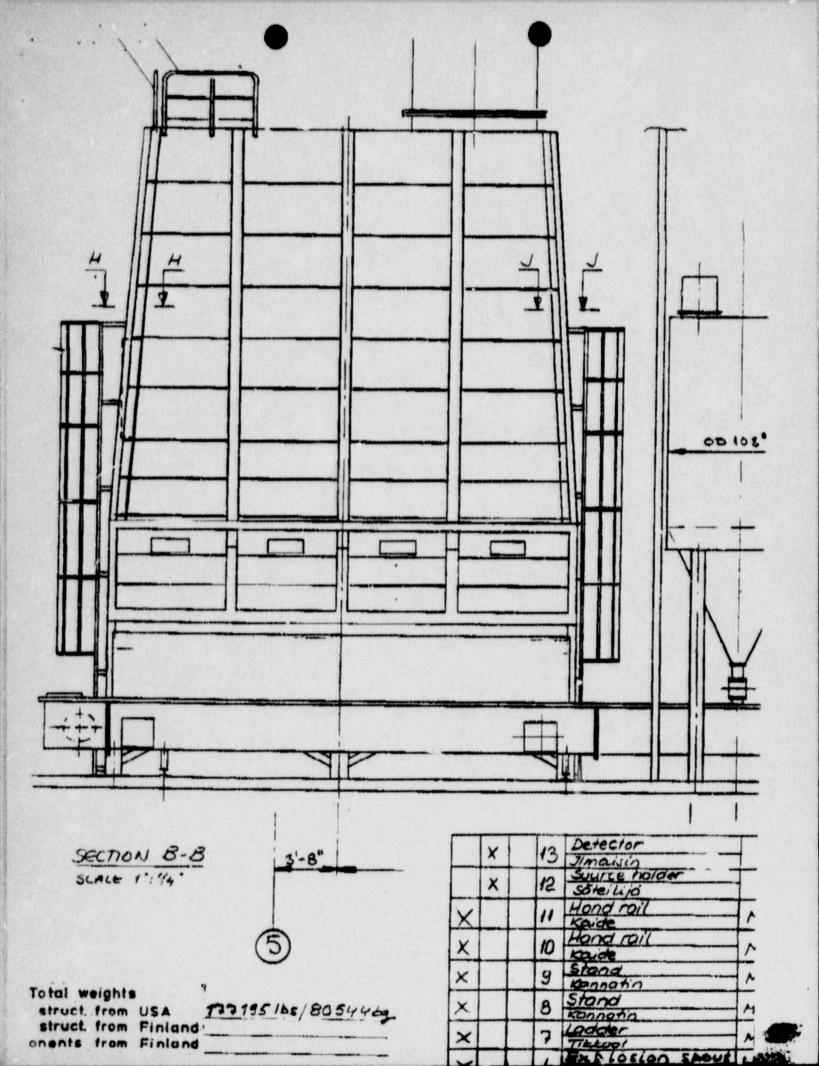
"LEVELART" - T.EVEL GAUGES

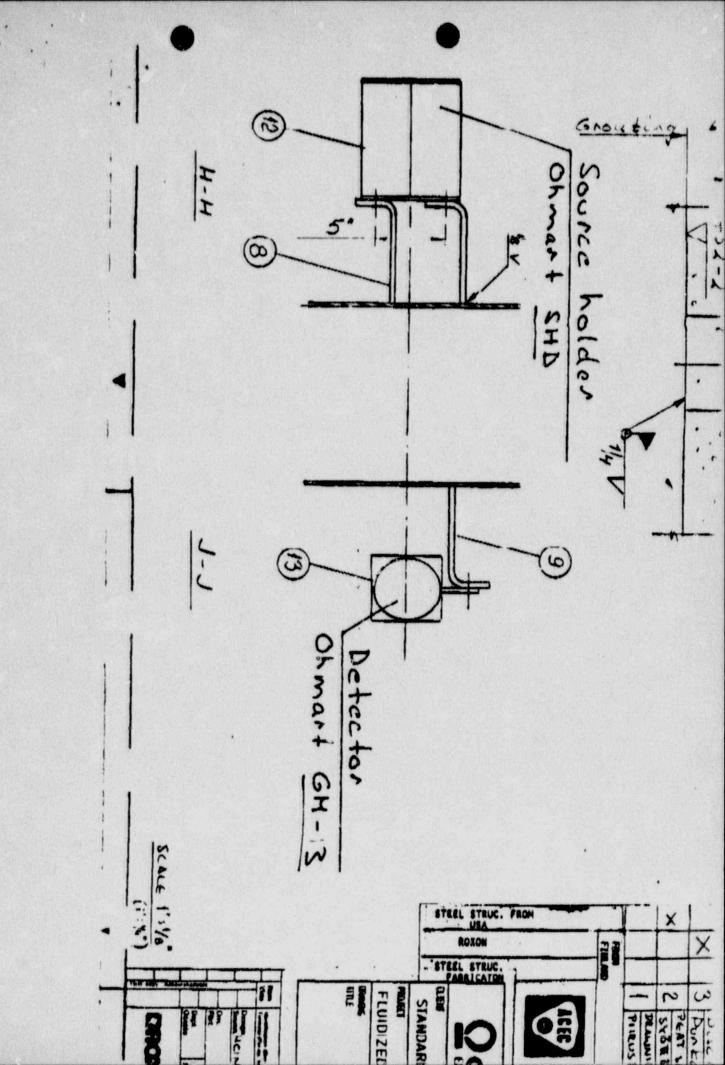
- The detectors are attached to the peat storage silos (3), chain conveyor hoppers (3) and unloading chute of belt conveyor. The silos and hoppers are in the boiler house building and the chute is outside. The connections are shown in the attached sketches.
- The temperature inside the building may vary from 0 to 30 centigrade. The atmosphere is slightly corrosive.
- The ambient temperature in the spaces, where the detectors are located, does not exceed the temperature limits (-40 to +70 degrees centigrade) set for the detectors.
- 4 N/A

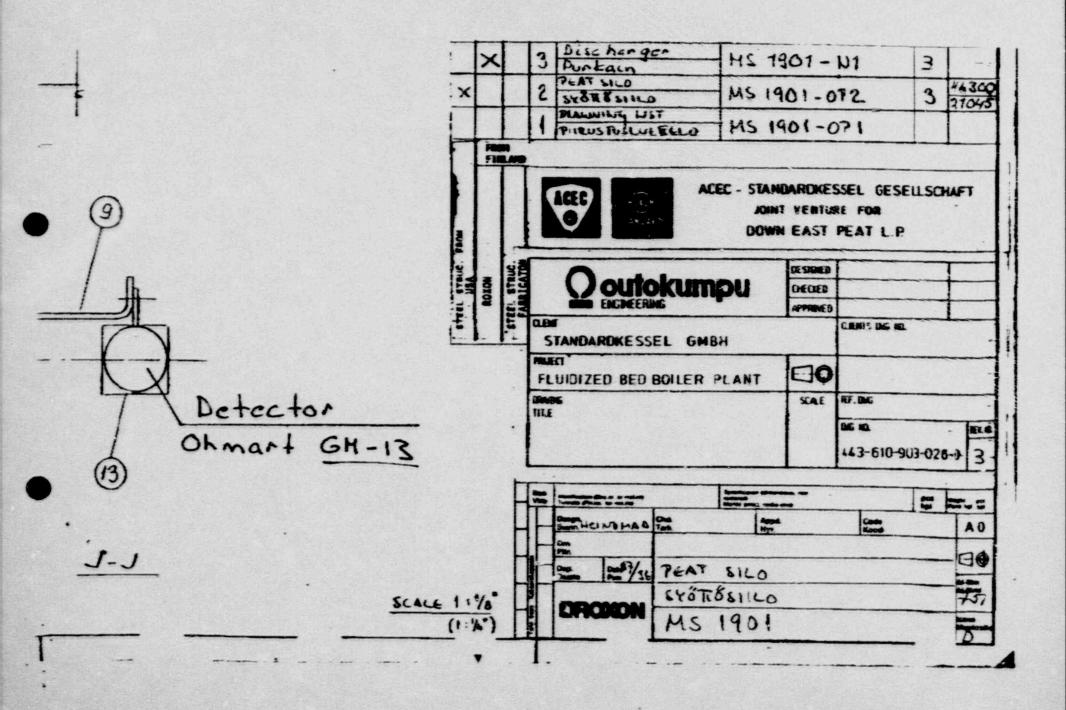
ENCLS:

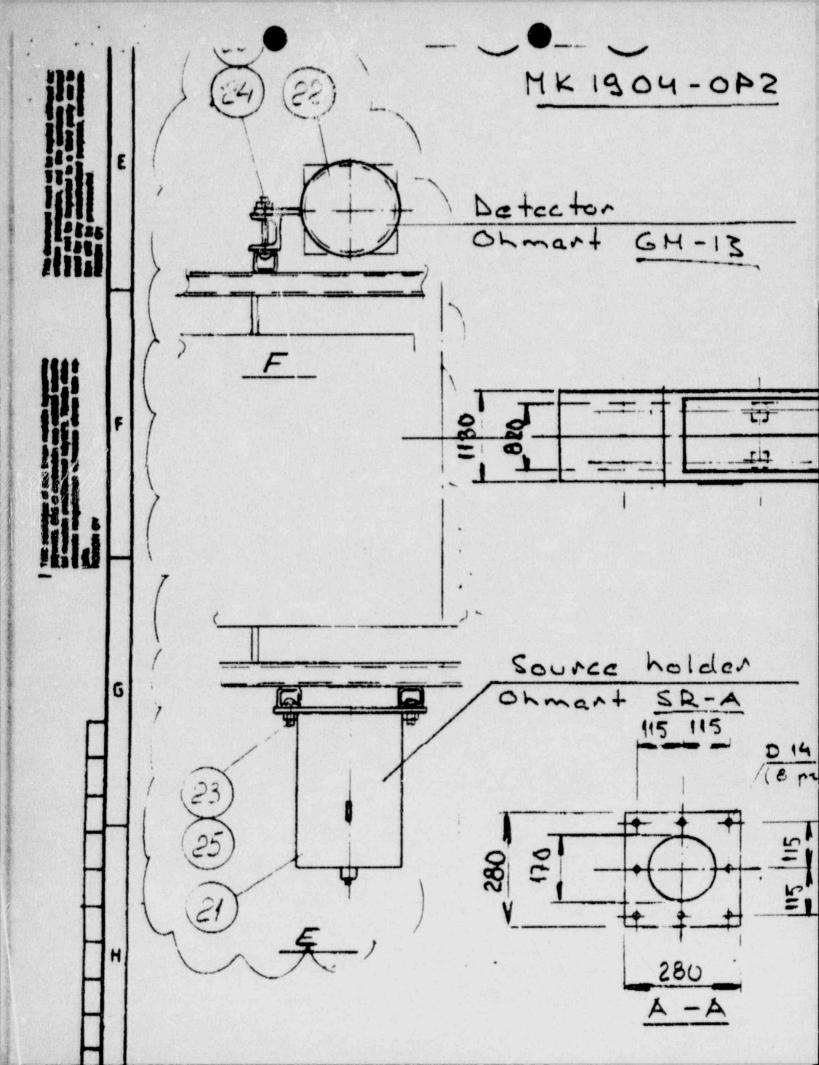
Sketch MH 1789 - VI - OP4 MK 1904 - OP2 MS 1901

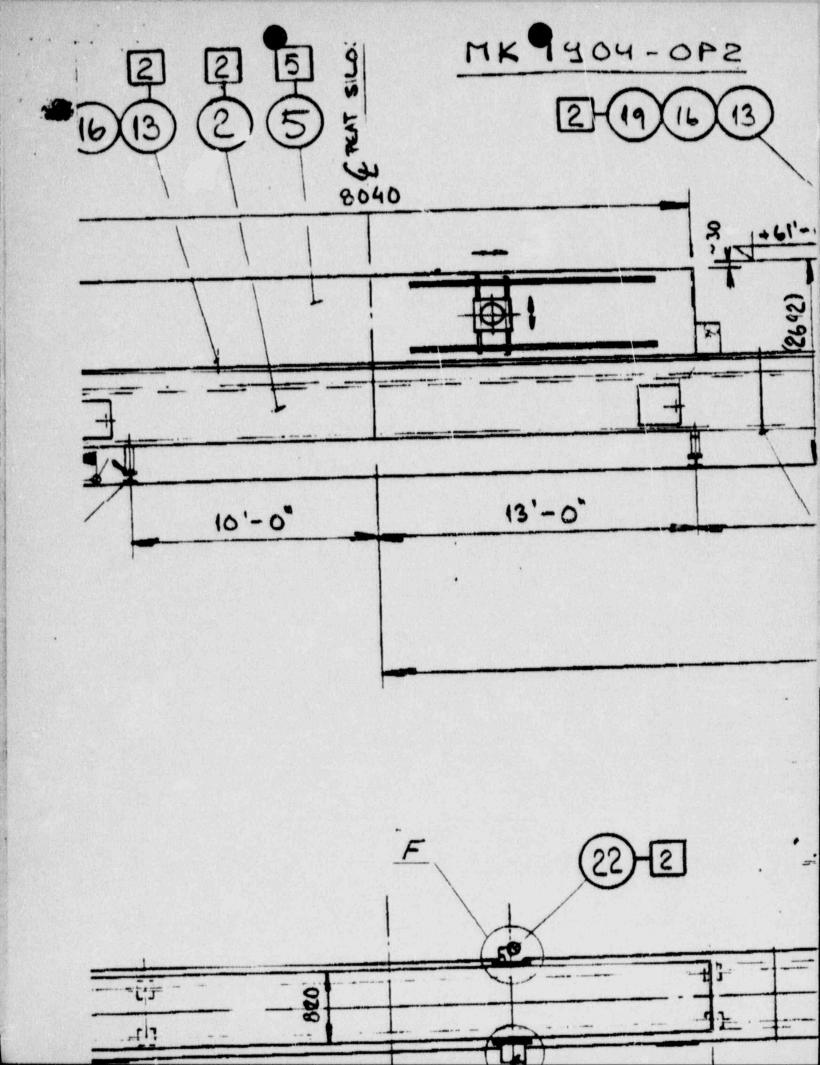


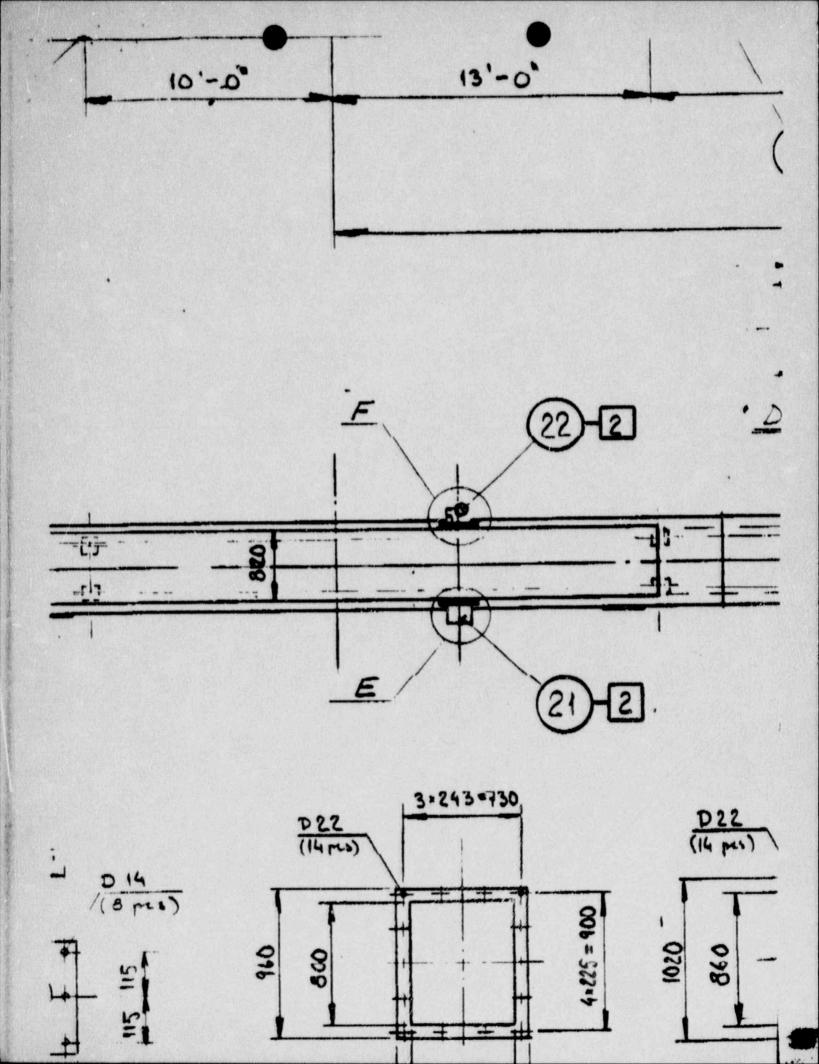












9H 1489-VI-081 80 (301) Source holder Ohmant SR-A A CONTRACTOR Detector GH-13 0 122300

(FOR LFMS USE) INFORMATION FROM LTS STATELY PROGRAM CODE: LICENSE FEE MENAGEMENT BRANCH, ARM : STATUS CODE: 3 AND : THE CATEGORY: REDIONAL LICENSING SECTIONS EXP. DATE: 0 : FEE COMMENTS: LICENSE FEE TRANSMITTAL REGION -APPLICATION ATTACHED APPLICANT/LICENSEE: DOWNEAST PEAT L. P. POWER PLANT 880812 RECEIVED DATE: DOCK NO: 3030753 CONTROL NO.: 109411 LICENSE NO.: ACTION TYPE: NEW LICENSEE FEE ATTACHES ANDUNT: CHECK NO.: 3. COMMENTS SIGNED B. LICENSE FEE MANAGEMENT BRANCH (CHECK WHEN MILESTONE OL IS ENTERED / 1) 1. FES CATEGORY AND AMOUNT: CORRECT FEE PAID. APPLICATION MAY BE PROCESSED FOR AMENDRENT RENEWAL LICENSE DIHER SIGNED DATE