

APPLICATION FOR MATERIAL LICENSE

INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW.

APPLICATIONS FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH

U.S. NUCLEAR REGULATORY COMMISSION
DIVISION OF FUEL CYCLE AND MATERIAL SAFETY, NMSS
WASHINGTON, DC 20555

ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS, IF YOU ARE LOCATED IN

CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, PENNSYLVANIA, RHODE ISLAND, OR VERMONT, SEND APPLICATIONS TO

U.S. NUCLEAR REGULATORY COMMISSION, REGION I
NUCLEAR MATERIALS SAFETY SECTION B
601 PARK AVENUE
KING OF PRUSSIA, PA 19406

ALABAMA, FLORIDA, GEORGIA, KENTUCKY, MISSISSIPPI, NORTH CAROLINA, PUERTO RICO, SOUTH CAROLINA, TENNESSEE, VIRGINIA, VIRGIN ISLANDS OR WEST VIRGINIA, SEND APPLICATIONS TO

U.S. NUCLEAR REGULATORY COMMISSION, REGION II
NUCLEAR MATERIALS SAFETY SECTION
101 MARIETTA STREET, SUITE 2800
ATLANTA, GA 30323

IF YOU ARE LOCATED IN

ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO

U.S. NUCLEAR REGULATORY COMMISSION, REGION III
MATERIALS LICENSING SECTION
795 ROOSEVELT ROAD
GLEN ELLYN, IL 60137

ARKANSAS, COLORADO, IDAHO, KANSAS, LOUISIANA, MONTANA, NEBRASKA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, SOUTH DAKOTA, TEXAS, UTAH, OR WYOMING, SEND APPLICATIONS TO

U.S. NUCLEAR REGULATORY COMMISSION, REGION IV
MATERIAL RADIATION PROTECTION SECTION
611 RYAN PLAZA DRIVE, SUITE 1000
ARLINGTON, TX 76011

ALASKA, ARIZONA, CALIFORNIA, HAWAII, NEVADA, OREGON, WASHINGTON, AND U.S. TERRITORIES AND POSSESSIONS IN THE PACIFIC, SEND APPLICATIONS TO

U.S. NUCLEAR REGULATORY COMMISSION, REGION V
NUCLEAR MATERIALS SAFETY SECTION
1460 MARIA LANE, SUITE 210
WALNUT CREEK, CA 94596

PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S. NUCLEAR REGULATORY COMMISSION JURISDICTION

1. THIS IS AN APPLICATION FOR (Check appropriate item)

- A. NEW LICENSE
- B. AMENDMENT TO LICENSE NUMBER _____
- C. RENEWAL OF LICENSE NUMBER _____

2. NAME AND MAILING ADDRESS OF APPLICANT (Include Zip Code)

Maine Electronics
P.O. Box 48
River Street
Lisbon, Maine 04250

3. ADDRESSES WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED

Maine Electronics
P.O. Box 48
River Street
Lisbon, Maine 04250 (and temporary job sites as required)

4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION

Merlyn E. Witzke

TELEPHONE NUMBER

(207) 353-8611

SUBMIT ITEMS 5 THROUGH 11 ON 8 1/2 x 11" PAPER. THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.

5. RADIOACTIVE MATERIAL

a. Element and mass number, b. chemical and/or physical form, and c. maximum amount which will be possessed at any one time

6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED.

7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING AND EXPERIENCE

8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS

9. FACILITIES AND EQUIPMENT

10. RADIATION SAFETY PROGRAM

11. WASTE MANAGEMENT

12. LICENSEE FEES (See 10 CFR 170 and Section 170.31)

FEE CATEGORY: 3P AMOUNT ENCLOSED: \$230.00

13. CERTIFICATION (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT

THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, AND 40 AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR 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

SIGNATURE - CERTIFYING OFFICER

TYPED/PRINTED NAME

TITLE

DATE

Keith Smith

Keith Smith

Plant Manager

11-09-88

14. VOLUNTARY ECONOMIC DATA

a. ANNUAL RECEIPTS	
<\$250K	\$1M-3.5M
\$250K-500K	\$3.5M-7M
\$500K-750K	\$7M-10M
\$750K-1M	>\$10M

b. NUMBER OF EMPLOYEES (Total for entire facility excluding outside contractors)

c. NUMBER OF BEDS

d. WOULD YOU BE WILLING TO FURNISH COST INFORMATION (daily and/or staff hours) ON THE ECONOMIC IMPACT OF CURRENT NRC REGULATIONS OR ANY FUTURE PROPOSED NRC REGULATIONS THAT MAY AFFECT YOU? (NRC regulations permit it to protect confidential commercial or financial—proprietary—information furnished to the agency in confidence)

YES

NO

FOR NRC USE ONLY

TYPE OF FEE	FEE LOG	FEE CATEGORY	COMMENTS	APPROVED BY
			9002070370 881221 REG1 LIC30 18-28287-01 PDR	
AMOUNT RECEIVED	CHECK NUMBER			DATE

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D30-30832

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<p>1. THIS IS AN APPLICATION FOR (Check appropriate item)</p> <p><input checked="" type="checkbox"/> A. NEW LICENSE</p> <p><input type="checkbox"/> B. AMENDMENT TO LICENSE NUMBER _____</p> <p><input type="checkbox"/> C. RENEWAL OF LICENSE NUMBER _____</p>	<p>2. NAME AND MAILING ADDRESS OF APPLICANT (Include Zip Code)</p> <p>Maine Electronics P.O. Box 48 River Street Lisbon, Maine 04250</p>
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3. ADDRESS(ES) WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED

Maine Electronics
P.O. Box 48
River Street
Lisbon, Maine 04250 (and temporary job sites as required)

<p>4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION</p> <p>Merlyn E. Witzke</p>	<p>TELEPHONE NUMBER</p> <p>(207) 353-8611</p>
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<p>5. RADIOACTIVE MATERIAL</p> <p>a. Element and mass number, b. chemical and/or physical form, and c. maximum amount which will be possessed at any one time</p>	<p>6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED.</p>
<p>7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING AND EXPERIENCE</p>	<p>8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS</p>
<p>9. FACILITIES AND EQUIPMENT</p>	<p>10. RADIATION SAFETY PROGRAM</p>
<p>11. WASTE MANAGEMENT</p>	<p>12. LICENSEE FEES (See 10 CFR 170 and Section 170.31)</p> <p>F.E. CATEGORY 3P AMOUNT ENCLOSED \$230.00</p>

13. CERTIFICATION (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT. THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, AND 40 AND THAT ALL INFORMATION CONTAINED HEREIN, IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.

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SIGNATURE - CERTIFYING OFFICER	TYPED/PRINTED NAME	TITLE	DATE
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<p>14. ANNUAL RECEIPTS</p> <table border="1"> <tr><td>< \$250K</td><td>\$1M - 3.5M</td></tr> <tr><td>\$250K - 500K</td><td>\$3.5M - 7M</td></tr> <tr><td>\$500K - 750K</td><td>\$7M - 10M</td></tr> <tr><td>\$750K - 1M</td><td>> \$10M</td></tr> </table>		< \$250K	\$1M - 3.5M	\$250K - 500K	\$3.5M - 7M	\$500K - 750K	\$7M - 10M	\$750K - 1M	> \$10M	<p>b. NUMBER OF EMPLOYEES (Total for entire facility excluding outside contractors)</p> <p>c. NUMBER OF BEDS</p>	<p>d. WOULD YOU BE WILLING TO FURNISH COST INFORMATION (Dollar and/or staff hours) ON THE ECONOMIC IMPACT OF CURRENT NRC REGULATIONS OR ANY FUTURE PROPOSED NRC REGULATIONS THAT MAY AFFECT YOU? (NRC regulations permit it to protect confidential commercial or financial - proprietary - information furnished to the agency in confidence)</p> <p>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></p>
< \$250K	\$1M - 3.5M										
\$250K - 500K	\$3.5M - 7M										
\$500K - 750K	\$7M - 10M										
\$750K - 1M	> \$10M										

FOR NRC USE ONLY			
TYPE OF FEE	FEE LOG	FEE CATEGORY	COMMENTS
APP	Oct. 14	3P	
AMOUNT RECEIVED	CHECK NUMBER	APPROVED BY	
\$230	19929	S. K... DATE 9628 12/18/87	

FORMAL TRAINING IN RADIATION SAFETY AND EXPERIENCE
(Ref:NRC Form 313, Items 7 & 8)

This is to certify that the following individuals have attended the Glenbrook Technologies' Radiation Safety Course in accordance with the course descriptions on file with the US Nuclear Regulatory Commission (for lixiscope training).

Names (Type or Print in ink.)

Signatures

PAUL R BRANAGAN

Paul R Branagan

NERLYN WITCKE

[Signature]

R.S.O.

Company Name: MAINE ELECTRONICS

Address: P.O. BOX 48

City, State, Zip: LISBON, ME 04250

Telephone No.: (207) 353-8611

A brief biography of the individuals listed above is attached. This also certifies that these individual(s) have personally operated a working iso-fluoroscope under supervision, in the aforementioned course.

The applicant and any instructor executing this certificate on behalf of the 2 person(s) listed above, certify that this document is prepared in conformity with Title 10, U.S. Code of Federal Regulations, and that all information contained herein is true and correct to the best of our knowledge and belief.

WARNING: 18 U.S.C., Sec. 1001; Act of 6/25/48: 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.

Certification by: Glenbrook Technologies, Inc.
Morris Plains, NJ 07950
U.S.N.R.C. Lic. No. 29-21464-01

Instructor: Gilbert Zweig *Gilbert Zweig*
(signature)

Date training was completed on: Sept. 8, 1988

Radioactive Material

[Ref: NRC Form 313, Item 5]

Element and mass number: Iodine-125

Chemical and/or physical form: Sealed, solid source.

Maximum amount which will
be possessed at any one time: 500 mCi per device.

Name of Manufacturer and Model Number: Sealed sources model nos.;
Amersham IMC.P2 or AECL C.324

Purpose(s) for which licensed material will be used.

[Ref: NRC Form 313, Item 6]

The radioactive material will be used in the Gienbrook models no. RT-112 or RT-113 real time x-ray systems (employing a lixi LS-82-X iso-fluoroscope) for the inspection of multi-layer printed circuit boards.

Facilities and Equipment.

[Ref: NRC Form 313, Item 9]

Storage Facilities:

The fluoroscope defined in this application will be kept locked and inactivated with the keylocks and pad locks provided, when not in use. The location of the fluoroscope is a secured area at the licensee's address. This equipment will only be used under the supervision of those individuals having received radiation safety training.

Special Shielding.

The (lixi) iso-fluoroscope is a self shielded device with no radiation above background (approx. 0.05 mR/hr.) when in the "off" condition. The (lixi) iso-fluoroscope is table mounted with a leaded acrylic shield to prevent even low levels of scattered radiation from reaching the operator. In the "on" condition no radiation above background can be detected outside this shield.

Remote Handling Equipment and Safety Procedures:

Instruction Manual directions will be followed. Remote handling devices, such as tongs, will be used when indicated to avoid any licensed user from placing their hands in the beam. The leaded acrylic shield prevents accidental insertion of hands in the beam.

All Glenbrook fluoroscopes come with a Monitor-4 GM meter as part of the licensee's radiation safety program. Survey measurements are taken by the source head supplier prior to shipment and sent with the device. DOT white labels are used for both original and return shipments of source heads. Shipping kit instructions will be followed for proper packing and labeling for return shipments.

Radiation Safety Program

[Ref: NRC Form 313, Item 10]

1. Radiation Surveys:

Every Glenbrook real time x-ray inspection system, employing a lixi iso-fluoroscope, comes with a Monitor-4 GM survey meter. The Monitor-4 is capable of detecting alpha, beta gamma and x-ray with a sensitivity range of .0-50 mR/hr.

The initial certification of radiation survey of the loaded source holder is provided with each unit in the training manual and should be kept on file.

2. Records Management Program:

The Radiation Safety Officer is responsible for reviewing and keeping the radiation survey records as well as maintaining the following records:

- [a] Receipt, use and disposal records of all source heads received along with copies of all leak test certificates for those source heads.
- [b] Dosimetry reports of all participating personnel.
- [c] Documentation of an annual radiation safety review.
- [d] License applications, amendment applications and corresponding license and amendment documents.

3. Semi-annual Leak Test.

The semi-annual leak test is to be performed using the "Leak Test Kit for Sealed Sources" from S.A.Huber Consultants, Inc 200 N. Cedar Rd. New Lenox, IL 60451

The leak test kit (Model LT-3) for airborne radiocontaminants is provided with each source head for return shipment monitoring.

4. Instructions to Personnel:

All personnel, in whose presence and under whose supervision this equipment must be used, must have attended the NRC authorized and approved radiation safety training course provided under NRC Lic. 29-21464-01. (See training certificates enclosed.)

The following safety guidelines will be followed:

- a) The equipment will never be left on unattended, or in an area accessible to unauthorized personnel.

- b) All operators will be familiar with the operating manual and safety precautions.
- c) Address and telephone number of Glenbrook Technologies, the regional NRC office and/or the State Radiation Control Agency will be posted near the equipment should any questions or problems arise.
- d) The local fire department should be notified of the presence of radioactive materials at the licensee's facility so that the proper precautions can be taken in the event of a fire.
- e) Incoming radioactive shipments (source head exchanges) are to be immediately delivered to the RSO for proper monitoring, checking and record maintenance.

Waste Management

[Ref: NRC Form 313, Item 11]

Spent sources will be returned to the supplier or to Glenbrook Technologies who will, in turn, return them to the source supplier.

NAME: MERLYN E. WITZKE

ADDRESS: RT. 2, BOX 3520
BOWDOINHAM ROAD
SABATTUS, MAINE 04280

PLACE OF EMPLOYMENT: MAINE ELECTRONICS
P.O. BOX 48
RIVER STREET
LIBBON, MAINE 04250

TITLE: AUTOMATION AND TOOLING ENGINEER

EDUCATION: BACHELOR OF SCIENCE, MECHANICAL ENGINEERING

NAME: PAUL R. BRANAGAN

ADDRESS: RT. 2, BOX 850
BULL RUN ROAD
GREENE, MAINE 04236

PLACE OF EMPLOYMENT: MAINE ELECTRONICS
P.O. BOX 48
RIVER STREET
LIBBON, MAINE 04250

TITLE: ENGINEERING ASSISTANT/DRAFTSMAN

EDUCATION: ASSOCIATES DEGREE, MECHANICAL ENGINEERING

PREREQUISITES

Follow your NRC or Agreement State license conditions for radiation safety procedures and any instructions from the manufacturer/supplier of the radiation source you possess.

TESTING FOR LEAKAGE - SURFACE CONTAMINATION

1. Place the source behind shielding (if applicable) or check that direct radiation exposure is not possible.
2. Remove alcohol swab (Item 1) from the packet to soak the "Wet Swab" (Item 2) cotton applicator.
3. Wipe all accessible surfaces of the source with the wet swab. (Or nearest the source container, as applicable.)
4. Return the wet swab cotton applicator to the plastic sleeve marked "Wet Swab" (Item 2), seal the open end (tape or staple).
5. Remove the "Dry Swab" (Item 3) cotton applicator and wipe the same surfaces that have been wiped with the wet swab.
6. Return the "Dry Swab" cotton applicator to the plastic sleeve marked "Dry Swab" (Item 3) and seal the open end.
7. Return the source to storage (if applicable) or check that the device is in the proper safeguard mode. Or proceed with testing for airborne contamination.
8. Survey each swab with a G.M. survey meter, or other sensitive radiation detector. If reading is above the normal background, note this in the "REMARKS" section of this kit and call S. A. Huber Consultants, Inc. for further instructions. If your radioactive materials license does not include the possession of such radiation detection instruments, this step may be disregarded.

TESTING FOR LEAKAGE - AIRBORNE CONTAMINATION

1. Remove the charcoal pad from the plastic envelope (Item 4), and place the pad in a closed box or other sealed container, close to the radiation source holder or device to be tested.
2. Leave the charcoal pad in the radiation source container at least overnight (preferably 1 day). Do NOT expose the pad for more than 3 days.
3. After the charcoal pad has been exposed (per step 2), return the pad to the plastic envelope on this sheet.
4. Return this kit (containing the swabs from the surface contamination test and the exposed charcoal pad from the airborne contamination test) to S. A. Huber Consultants, Inc. (SAHCI) for analysis.

CERTIFICATION INFORMATION

If you have any questions, please call SAHCI at (815) 485-6161 or write a note on the "REMARKS" page of this kit.

After testing, mail the kit to S. A. Huber Consultants, Inc. in a standard size business envelope. The assay results will be reported on 2 Leak Test Certificates, one for surface contamination results and another for airborne contamination results. If our assay results should confirm leakage, we will immediately contact you by telephone. Along with the certificates, you will receive another Combo-LT Kit for you to keep on file until this test is due again.

FEE AND BILLING INFORMATION

The charge per kit is \$40, which includes assaying for both surface and airborne contamination. You may either include payment when you return the kit to SAHCI, or be invoiced at a later date (please include your purchase order number).

MODEL COMBO-LT LEAK TEST KIT

For Surface and Airborne Radiocontaminants

This Combo-LT Leak Test Kit is to be used when both the wipe test (swab) and air test (charcoal pad) are performed at the same time for the same radiation source. Please read the instructions for both tests before proceeding.

Please complete all items:

FACILITY _____

CITY _____ STATE _____

FEDERAL NRC LICENSE NO. _____ or

AGREEMENT STATE LICENSE NO. _____

RADIONUCLIDE _____

ACTIVITY _____ (mCi) ON ORIGINAL CALIBRATION DATE

ORIGINAL CALIBRATION DATE _____

MANUFACTURER _____

MODEL NUMBER _____

ANY OTHER DESCRIPTION _____

TEST DATE _____

TESTED BY _____

NEXT TEST DUE _____

Please note any special billing or other instructions in the "Remarks" section of this kit.

STAN A. HUBER CONSULTANTS, INC.
200 N. CEDAR ROAD — NEW LENOX, IL 60451
TELEPHONE (815) 485-6161

HALL

[310]

LAMINATION
[320]

X-RAY ROOM

X-RAY

DEVELOPER

13X18

[332]

TABLE

FILES

61X11
300PS
W/FILES

[331]

OFFICE

FABRICATION
[340]

MANUFACTURING
AREA

FACILITY SKETCH

STORAGE AREA FOR IODINE-125

AS OF SEP 15, 1988

(FOR LFMS USE)
INFORMATION FROM LTS

BETWEEN:

LICENSE FEE MANAGEMENT BRANCH, ARM
AND
REGIONAL LICENSING SECTIONS

PROGRAM CODE: _____
STATUS CODE: 3
FEE CATEGORY: _____
EXP. DATE: 0
FEE COMMENTS: _____

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED
APPLICANT/LICENSEE: MAINE ELECTRONICS
RECEIVED DATE: 880926
DOCKET NO: 3030832
CONTROL NO.: 109628
LICENSE NO.:
ACTION TYPE: NEW LICENSEE

2. FEE ATTACHED
AMOUNT: \$ 230.00
CHECK NO.: 19409

3. COMMENTS

SIGNED R. J. Brown
DATE 88/09/30

B. LICENSE FEE MANAGEMENT BRANCH (CHECK WHEN MILESTONE 03 IS ENTERED 1)

1. FEE CATEGORY AND AMOUNT: 3P \$ 230

2. CORRECT FEE PAID. APPLICATION MAY BE PROCESSED FOR:
AMENDMENT _____
RENEWAL _____
LICENSE

3. OTHER _____

SIGNED S. Lynde
DATE 10/18/88