10	: Form 313 I ((12-81)) CFR 30	U.S. NUCLEAR REGULATORY (COMMISSION	1. APPLICATION FOR: (Check and/or complete as appropriate)		
	APPLICATION FOR	R BYPRODUCT MATERI INDUSTRIAL	AL LICENSE	8. NEW LICENSE		
See	ittached instructions for details.			5. AMENDMENT TO		
Comp Office Nashi 1717	leted applications are filed in d of Nuclear Material Safety, ai ngton, DC 20555 or applicatio H Street, NW, Washington, D	duplicate with the Division of Fi nd Safeguards, U.S. Nuclear Regi ons may be filed in person at the C. or 7915 Eastern Avenue, Silv	uel Cycle and Material Safety, ulatory Commission, Commission's office at er Spring, Maryland.	X C. RENEWAL OF LICENSE NUMBER 23-17885-01		
APANU	PLICANT'S NAME (Institution att. Seafood Qualit ational Marine Fish .S. Dept. of Commer	ling person, etc.) y & Inspection Lab. leries Service ce	3. NAME AND TITLE OF PER REGARDING THIS APPLIC Bobby J. Wood	SON TO BE CONTACTED		
TEL	EPHONE NUMBER AREA CO	DE - NUMBER EXTENSION	TELEPHONE NUMBER: AR	EA CODE - NUMBER EXTENSION		
AP (Ac sho P	PLICANT'S MAILING ADDRES Underson to which NRC correspondent uid be sent.) . O. Drawer 1207 ascagoula, MS 39567	SS (Include Zip Code) ence, notices, bulletins, etc., 2=0112	601-762-4591 573-799-4257 5. STREET ADDRESS WHERE LICENSED MATERIAL WILL BE US (Include Zip Code) 3209 Frederic St. Pascagoula, MS 39567-0112			
. IN	(IF MORE SPACE IS DIVIDUAL (\$) WHO WILL (me James 16 and 12 for required i	S NEEDED FOR ANY ITEM, USE OR DIRECTLY SUPERV	USE ADDITIONAL PROPER	NLY KEYED PAGES.) D MATERIAL		
1.5	FULLN	IAME		TITLE		
	Bobby Jack Wood		Chemical Services Leader			
RA	DIATION PROTECTION OF FIG	CER	Attach a resume of person's trail	ning and experience as outlined in Items		
RA	DIATION PROTECTION OFFIC Bobby J. Wood	CER	Attach a resume of person's trai 16 and 17 and describe his respo	ning and experience as outlined in Item nsibilities under Item 15.		
RA	DIATION PROTECTION OFFIC Bobby J. Wood	B. LICENSE	Attach a resume of person's train 16 and 17 and describe his responded DMATERIAL	ning and experience as outlined in Item nsibilities under Item 15.		
RA L I N E	ELEMENT MASS NUMBER	8. LICENSE CHEMICAL AND/OR PHYSICAL FORM	Attach a resume of person's trail 16 and 17 and describe his response OMATERIAL NAME OF MANUFACTUREF AND MODEL NUMBER (If Sealed Source)	ning and experience as outlined in Item nsibilities under Item 15. MAXIMUM NUMBER OF MILLICURIES AND/OR SEALE SOURCES AND MAXIMUM ACT VITY PER SOURCE WHICH WILL BE POSSESSED AT ANY ONE TIM		
RA L I N E O.	DIATION PROTECTION OFFIC Bobby J. Wood ELEMENT AND MASS NUMBER A	8. LICENSEI CHEMICAL AND/OR PHYSICAL FORM B	Attach a resume of person's trail 16 and 17 and describe his response D MATERIAL NAME OF MANUFACTUREF AND MODEL NUMBER (If Sealed Source) C	ning and experience as outlined in Item nsibilities under Item 15. MAXIMUM NUMBER OF MILLICURIES AND/OR SEALEI SOURCES AND MAXIMUM ACT VITY PER SOURCE WHICH WILL BE POSSESSED AT ANY ONE TIM		
RA L I N E O.)	DIATION PROTECTION OFFIC Bobby J. Wood ELEMENT AND MASS NUMBER A Nickel 63	B B CHEMICAL AND/OR PHYSICAL FORM B See attachment for	Attach a resume of person's train 16 and 17 and describe his response OMATERIAL NAME OF MANUFACTUREF AND MODEL NUMBER (If Sealed Source) C	ning and experience as outlined in Item nsibilities under Item 15. MAXIMUM NUMBER OF MILLICURIES AND/OR SEALE SOURCES AND MAXIMUM ACT VITY PER SOURCE WHICH WILL BE POSSESSED AT ANY ONE TIM		
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RA L I N E IO. I)	DIATION PROTECTION OFFIC Bobby J. Wood ELEMENT AND MASS NUMBER A Nickel 63	B See attachment for	Attach a resume of person's trail 16 and 17 and describe his respondence D MATERIAL NAME OF MANUFACTUREF AND MODEL NUMBER (If Sealed Source) C r 9a.	ning and experience as outlined in Item nsibilities under Item 15. MAXIMUM NUMBER OF MILLICURIES AND/OR SEALE! SOURCES AND MAXIMUM ACT VITY PER SOURCE WHICH WILL BE POSSESSED AT ANY ONE TIM RECF' DEC 0.2 1982		
RA L I N E O.)	DIATION PROTECTION OFFIC Bobby J. Wood ELEMENT AND MASS NUMBER A Nickel 63	8. LICENSEI CHEMICAL AND/OR PHYSICAL FORM B See attachment fo	Attach a resume of person's train 16 and 17 and describe his respondent DMATERIAL NAME OF MANUFACTUREF AND MODEL NUMBER (If Sealed Source) C C C C C C	ning and experience as outlined in Item nsibilities under Item 15. R MAXIMUM NUMBER OF MILLICURIES AND/OR SEALEI SOURCES AND MAXIMUM ACT VITY PER SOURCE WHICH WILL BE POSSESSED AT ANY ONE TIM RECF' DEC 02 1982 8. MUCIEIR REGILATERY		
BA	DIATION PROTECTION OFFIC Bobby J. Wood ELEMENT AND MASS NUMBER A Nickel 63	B See attachment for DESCRIBE USE OF L	Attach a resume of person's train 16 and 17 and describe his response OMATERIAL NAME OF MANUFACTUREF AND MODEL NUMBER (If Sealed Source) C C C C C C C C C C C C C C C C C C C	ning and experience as outlined in Item nsibilities under Item 15. R MAXIMUM NUMBER OF MILLICURIES AND/OR SEALEI SOURCES AND MAXIMUM ACT VITY PER SOURCE WHICH WILL BE POSSESSED AT ANY ONE TIM RECF' DEC 02 1982 8. MUCLEAR REGULATION COLUMNON Mail Sector		
RA	DIATION PROTECTION OFFIC Bobby J. Wood ELEMENT AND MASS NUMBER A Nickel 63 The sealed detect	B See attachment for DESCRIBE USE OF L E tor cell containing for	Attach a resume of person's train 16 and 17 and describe his respondence D MATERIAL NAME OF MANUFACTUREF AND MODEL NUMBER (If Sealed Source) C C C C C C C C C C C C C	ning and experience as outlined in Item nsibilities under Item 15. MAXIMUM NUMBER OF MILLICURIES AND/OR SEALEI SOURCES AND MAXIMUM ACT VITY PER SOURCE WHICH WILL BE POSSESSED AT ANY ONE TIM RECF' DEC 02 1982 BE MUCIEAR MEDIILATE COMMENT Mail Sector be used in Perkin-		
RA L I N E O.)))))	DIATION PROTECTION OFFIC Bobby J. Wood ELEMENT AND MASS NUMBER A Nickel 63 The sealed detect Elmer Model SIGMA	B. LICENSET	Attach a resume of person's train 16 and 17 and describe his respondence DMATERIAL NAME OF MANUFACTURES AND MODEL NUMBER (If Sealed Source) C r 9a. C r 9a. ICENSED MATERIAL NAME 63 foil shall oh with Temperature	ning and experience as outlined in Items nsibilities under Item 15. MAXIMUM NUMBER OF MILLICURIES AND/OR SEALED SOURCES AND MAXIMUM ACT VITY PER SOURCE WHICH WILL BE POSSESSED AT ANY ONE TIM RECF! DEC 02 1982 BE NOULEAR MEDILATION Notestar MEDILATION Mail Sector be used in Perkin- Protection Circuitry		
L 1 N EE IO. 1) 2) 3) 1)	DIATION PROTECTION OFFIC Bobby J. Wood ELEMENT AND MASS NUMBER A Nickel 63 The sealed detect Elmer Model SIGMA that cuts off at	B See attachment for DESCRIBE USE OF C E tor cell containing M A 1, Gas Chromatograp 450°C.	Attach a resume of person's train 16 and 17 and describe his respondence D MATERIAL NAME OF MANUFACTURER AND MODEL NUMBER (If Sealed Source) C T 9a. ICENSED MATERIAL NICENSED MATERIAL NICKEL 63 foil shall oh with Temperature	ning and experience as outlined in Items nsibilities under Item 15. MAXIMUM NUMBER OF MILLICURIES AND/OR SEALER SOURCES AND MAXIMUM ACT VITY PER SOURCE WHICH WILL BE POSSESSED AT ANY ONE TIM RECF' DEC 02 1982 BECE be used in Perkin- Protection Circuitry		

_	and the second se	9.	STORAGE OF	SEALED SOURC	ES	12.
L-ZWO.	CONTAINER AND/OR DEVICE IN WHICH E SOURCE WILL BE STORED OR USED. A.		EACH SEALED NAME OF MANUFACTURER B.		B.	MODEL NUMBER
(1)	See attac	hment.				
(2)						
(3)						
(4)	and the second					
		10 BAC	DIATION DETE	CTION INSTRUM	ENTO	
1	TYPE	MANUFACTURER'S	MODEL	NUMBER	RADIATION	RENGITIVITY
L-ZWO	OF INSTRUMENT	NAME	NUMBER	AVAILABLE	DETECTED (alpha, beta, gamma, neutron)	RANGE (milliroentgens/hour or counts/minute)
	Α	В	С	D	E	F
(1)	None					
2)						
3)						
4)						
		11. CALIBRA	TION OF INSTR	NUMENTS LISTE	D IN ITEM 10	
] a.	CALIBRATED BY SI	ERVICE COMPANY		Db. CALIBRATE	D BY APPLICANT	
	NAME, ADDRESS, A	AND FREQUENCY		Attach a separat	e sheet describing meth	od frequency and standards
				used for calibrat	ing instruments.	
	Not applicat	hle		Not appl	icable	
	not appricat	ure		nee appr		
		12. PER	SONNEL MONI	TORING DEVICE	S	
	ICheck and/or complete as appropriate.)		SUPPLIER (Service Company) B		EXCHANGE FREQUENCY	
10	FILM BADGE	Not applicable				
	COLUMN BECKEVE					MONTHLY
] (2)	THERMOLUMINES	CENCE			자신공	D QUARTERLY
] (3)	OTHER (Specify):					OTHER (Specify):
-						
	13. FACILITIES	AND EQUIPMENT (Che	ck were appropr	iate and attach an	notated sketch(es) ar	nd description(s)
X a.	LABORATORY FAC	CILITIES, PLANT FACILIT	IES, FUME HOOI	DS (Include filtratio	n, if anyl, ETC.	and a second
Jb.	STORAGE FACILIT	IES, CONTAINERS, SPECI	AL SHIELDING /	fixed and/or tempora	YY), ETC.	
1 1	RESPIRATORY POR	IG TOOLS OR EQUIPMENT	F, ETC.			
	in the second se	FEGUIVE EQUIPMENT, E	14 WASTE	DISPOSAL		
NA	ME OF COMMERCIA	L WASTE DISPOSAL SERV	VICE EMPLOYED	DISPUSAL		
15 /	COMMERCIAL WAST			1		
BE	USED FOR DISPOSI E APPLICATION IS F	E DISPOSAL SERVICE IS NG OF RADIOACTIVE WA FOR SEALED SOURCES AN	NOT EMPLOYED STES AND ESTIN ND DEVICES AND	SUBMIT A DETAIL ATES OF THE TYP THEY WILL BE RE	ED DESCRIPTION OF E AND AMOUNT OF ETURNED TO THE MA	METHODS WHICH WILL ACTIVITY INVOLVED. IF INUFACTURER, SO STAT
CF	ORM 313 I (12-81)	Raharahadi wana kanany angkanan Gaba agine malada penananan ang				

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.
 - Radioactivity measurement standardization and monitoring techniques and instruments.
 - 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, meruaing 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 cr minal offense to make 4 willhully false statement or representation to any department or agency of the United States as to any matter within 's jurisdiction.

		2010
a. LICENSE FEE REQUIRED (See Section 170.31, 10 CFR 170)	b. CENTIFYING OFFICIAL Isignatory	
	C. NAME (Type or print) BODDY J. WED DEFO 02 15	082
(1) LICENSE FEE CATEGORY:	ChEMICAL SERVICES LEADER	and the for
(2) LICENSE FEE ENCLOSED: \$	e. DATE 11/30/82 Mail Baction	A
NRC FORM 313 1 (12-81)	6 PO 886-428	0

9a. Deposited on gold or platinum foil, sealed in Detector Cell, Perkin-Elmer Part No. 330-0119.

Foil manufactured by:

New England Nuclear Corp. 575 Albany Boston, MA Foil Model NER-002 OR

Nuclear Radiation Development Corp. 2937 Alt Blvd. Grand Island, NY Foil Model N1001

OR

Amersham/Searle Corp. 2637 S. Clearbrook Dr. Arling Heights, IL Foil Model N.B.C. 7020

Foil strength is 10 millicuries. No single detector contains more than 15 millicuries.

1 1 1 1 1 1 2 1

13a. Laboratory walls constructed of Arkansas tile and celling of sheetrock. The floor space is 96 sq. ft. with cabinets on one side and end, with floor and cabinets of wood construction. The laboratory is cooled by a 1-1/2 ton air conditioner window unit.



15. Licensed material used by or under supervision of Bobby J. Wood.

Laboratory housing the instrument has signs posted warning of radioactive material and off limits to unauthorized personnel.

The wipe test is performed as follows:

1. Switch the Analyzer off and allow the detector to cool.

- 2. Expose the detector by pulling the detector cover forward and downward. The cover may be detached completely if required.
- 3. Pull off the collector housing.
- Refer to the instructions included with the wipe test kit (part No. 009-1667) supplied with the detector, and wipe 4. the external surfaces of the cell. Once the wipe test paper has been moistened and any part of the cell has been wiped, do not re-moisten the paper. Also, do not allow any of the wipe test solution to enter the cell.
- 5. Put the paper in the container provided in the wipe test. Include a data sheet stating that the wipe test was performed on a Perkin-Elmer electron capture detector cell, and give date of the test.

16. No training received.

in the

17. Bobby J. Wood has 1-1/2 years experience with H₃ (130 mc) working with FDA, New Orleans, LA, and 6 years working with H₃ (130 mc) and 5 years Ni 63 (15 mc) at the laboratory in Pascagoula, MS.