NITED STATES ATOMIC ENERGY COMMISSION

APPLICATION FOR BYPRODUCT MATERIAL LICENSE

for copiers budge bure. No 38-#027

Die supplemental sheets where necessary. Item 16 must be completed on all applications. Mail two copies to: U.S. Atomic Energy Compassion, Wishington, D.C., 20545, Attention: Isotopes Branch, Division of Materials Licensing. Upon approval of this application, the applications of Materials License is issued in accordance with the general requirements contained in Title 10, Cade of Federal Regulations, Part 30, and the Licensee is subject to Title 10, Cade of Federal Regulations, Part 20.

(a) NAME AND STREET ADDRESS OF APPLICANT. (Institution, firm, hospital,

Waltham Compass Corporation 601 Main Street Waltham, Massachusetts (b) STREET ADDRESS(ES) AT WHICH BYPRODUCT MATERIAL WILL BE USED THE different from 1 (a). Include ZIP Code.)

Waltham Compass Corporation 601 Main Street Waltham, Massachusetts

2. DEPARTMENT TO USE BYPRODUCT MATERIAL

See la

3 PREVIOUS LICENSE NUMBER(S). (if this is an application for immend of a license, please indicate and give number.)

None

 NDIVIDUAL USER(S). (Name and title of individual(s) who will use or directly supervise use of byproduct material. Give training and experience in Items 8 and 9.)

a) Fred Marcellb) Benjamin Pollack

5 RADIATION PROTECTION OFFICER (Name of person designated as radiation protection officer if other than individual user. Affoch resume of his framing and experience as in Items 8 and 9.)

See 4a

 (a) BYPRODUCT MATERIAL. (Elements and mass number of each.)

Promethium147

(b) CHEMICAL AND, OR PHYSICAL FORM AND MAXIMUM NUMBER OF MILLICURIES OF EACH CHEMICAL AND OR PHYS.

ICAL FORM THAT YOU WILL POSSESS AT ANY ONE TIME (If seeled source s) also state name of manufactures model number, number of sources and maximum activity per source.)

Sealed sources in the form of compass cards and compass crystals. Each card and crystal to have a maximum of 0.5 millicuries of activity on it as 3M Co. Model 1A2A Radioluminous paint. Maximum number of compass cards and compass crystals in possession at any one time is 5000 of each.

DESCRIBE PURPOSE FOR WHICH BYPRODUCT MATERIAL WILL BE USED. (If byproduct material is for human use: supplement A form AEC-313a) must be completed in lieu of this item. If byproduct material is in the form of a sealed source, include the make and model number of the storage container and or device in which the source will be stored and/or used.)

See attached sheet

8209230470 820901 PDR FOIA BICKMAN82-368 PDR

60237

I D ITPE OF INAINING			AL NAMED IN ITE	M 4 (Use supplemental s	sheets if necessory	_	
WHERE TRAINED DURATION OF TRAINING				ON THE JOB (Circle onswer)	NO.		
protection tory for Electronics, Inc., 1601 Trapelo Road, Waltham, Mass.				Yes No	(Yes.)		
b. Radioactivity measurement standards tion and monitoring techniques and struments	Institu	te of Tech	inology, wh	ssachusetts	Yes No	Yes	,
e. Mathematics and calculations basic to a use and measurement of radioactivity	1716	M. Bolton		L Safety Office	Yes No	Yes	
d Biological effects of radiation	torv fo	rlab, a Di or Electro	vision of La	abora- 2 days	Yes No	(Yes)	,
	al use of radiois	otopes or equivaler	it experience.)	m, Mass.			-
ISOTOPE MAXIMUM AMOUNT	WHERE EXPERIENC	E WAS GAINED	DURATION	N OF EXPERIENCE	TYPE OF	USE	-
See Commonwealth of		nenta sheets if nec					
(Include make and model number of each)	NUMSER AVAILABLE	RADIATION DETECTED	SENSITIVITY RANGE	WINDOW THICKNESS	(Monitoring, surve		
I. METHOD, FREQUENCY, AND STANDARDS	USED IN CALIBRA	ITING INSTRUMENT	S LISTED ABOVE.				
				of calibrating and processing,	or name of supplie	•)	
2. FILM BADGES, DOSIMETERS, AND BIO ASS	SAY PROCEDURES	USED. (For film b	adges, specify method o			٠)	
of facility is attached. (Circle answer)	ON TO BE	USED. (For film b	N ADDITIONAL g equipment, storage of	SHEETS IN DUPLICA	ATE pools, etc. Explan	atory sketch	
INFORMATI 3. FACILITIES AND EQUIPMENT. Describe to of facility is attached. (Circle answer) 1. RADIATION PROTECTION PROGRAM. Describe procedures where applicable, name, icing, maintenance and repair of the source.	SAY PROCEDURES ION TO BE oboratory facilities Yes No escribe the radials haining, and exp See a	SUBMITTED O and remate handling evence of person to ttached	N ADDITIONAL og equipment, storage of more including control in perform leak tests, an Sheet.	SHEETS IN DUPLICA	ATE posis, etc. Explan	otory sketch	
INFORMATI FACILITIES AND EQUIPMENT. Describe to of facility is amached. (Circle onswer) RADIATION PROTECTION PROGRAM. DO	SAY PROCEDURES ON TO BE oboratory facilities Yes No escribe the radiati haining, and exp See a	SUBMITTED O and remote handling on protection progenies of person to ttached	N ADDITIONAL or equipment, storage or mincluding control in perform leak tests, an Sheet.	SHEETS IN DUPLICA containers, shielding, fume ha neasures. If application cavid diarrangements for performin	en sealed sources, g initial radiation	submit lead survey, serv	
INFORMATI FACILITIES AND EQUIPMENT. Describe lo of facility is affached. (Circle answer) RADIATION PROTECTION PROGRAM. Describe procedures where applicable, name, icing, maintenance and repair of the source. WASTE DISPOSAL. If a commercial waste be used for disposing of radioactive wastes.	SAY PROCEDURES ON TO BE Oboratory facilities Yes No escribe the radiation haining, and exp See a disposal service in and estimates of in	SUBMITTED O and remate handler than the distribution protection progerience of person to ttached a employed, specify the type and amount this item must	N ADDITIONAL or equipment, storage of the company of activity involved.	SHEETS IN DUPLICA containers, shielding, fume has been seasures. If application covid arrangements for performin otherwise, submit detailed detaile	en sealed sources, so initial radiation scription of method	submit leasurey, sen	
INFORMATI FACILITIES AND EQUIPMENT. Describe lo of facility is attached. (Circle answer) RADIATION PROTECTION PROGRAM. Detecting procedures where applicable, name, icing, maintenance and repair of the source. WASTE DISPOSAL. If a commercial waste be used for disposing of radioactive wastes.	SAY PROCEDURES ION TO BE aboratory facilities Yes No escribe the radiation haining, and exp See a disposal service in and estimates of ERTIFICATE (T	SUBMITTED O and remate handling on protection progerience of person to ttached as employed, specify the type and amount in item must	N ADDITIONAL g equipment, storage of the perform leak tests, an Sheet. name of company. (I of activity involved. the completed alf Of the applicant art 30, and that all ur knowledge and the completed art so, and that all ur knowledge and the completed art so, and that all ur knowledge and the completed art so, and that all ur knowledge and the completed art so, and that all ur knowledge and the complete art so, and that all ur knowledge and the complete art so, and that all ur knowledge and the complete art so, a	SHEETS IN DUPLICA containers, shielding, fume he measures. If application conditions arrangements for performing the measures, submit detailed deta	en sealed sources, grinital radiation scription of method Sheet.	submit lead survey, sen is which will ICATION IS DING ANY	
INFORMATI FACILITIES AND EQUIPMENT. Describe to of facility is affeched. (Circle onswer) RADIATION PROTECTION PROGRAM. Describe procedures where applicable, name, icing, maintenance and repair of the source wastes be used for disposing of radioactive wastes. CE THE APPLICANT AND ANY OFFICIAL EFEC PREPARED IN CONFORMITY WITH TITLE 12. SUPPLEMENTS ATTACHED HERETO, IS 79.	SAY PROCEDURES ION TO BE aboratory facilities Yes No escribe the radiation haining, and exp See a disposal service in and estimates of ERTIFICATE (T	SUBMITTED O and remate handling on protection progerience of person to ttached as employed, specify the type and amount in item must	N ADDITIONAL To a quipment, shorage of the company of activity involved. The completed of the applicant at the completed are so, and that at the complete and the complete are so, and that at the complete and the complete are so, an	SHEETS IN DUPLICA containers, shielding, fume he containers, shielding, fume he containers. If application covid arrangements for performing the containers of the containers	en sealed sources, so initial radiation scription of method sheet. Y that this apple to HEREIN, INCLU-	submit lead survey, sen is which will ICATION IS DING ANY	
INFORMATI FACILITIES AND EQUIPMENT. Describe to of facility is affeched. (Circle answer) RADIATION PROTECTION PROGRAM. Describe procedures where applicable, name, icing, maintenance and repair of the source. WASTE DISPOSAL. If a commercial waste be used for disposing of radioactive wastes. CE THE APPLICANT AND ANY OFFICIAL EFEC PREPARED IN CONFORMITY WITH TITLE 15	SAY PROCEDURES ION TO BE aboratory facilities Yes No escribe the radiation haining, and exp See a disposal service in and estimates of ERTIFICATE (T	SUBMITTED O and remate handling on protection progerience of person to ttached as employed, specify the type and amount in item must	N ADDITIONAL To a quipment, shorage of the company of activity involved. The completed of the applicant art at the completed art of the applicant no applicant	SHEETS IN DUPLICA containers, shielding, fume he measures. If application conditions arrangements for performing the measures, submit detailed deta	en sealed sources, so initial radiation scription of method sheet. Y THAT THIS APPLED HEREIN, INCLU-	submit lead survey, sen is which will ICATION IS DING ANY	
INFORMATI FACILITIES AND EQUIPMENT. Describe to of facility is affeched. (Circle onswer) RADIATION PROTECTION PROGRAM. Describe procedures where applicable, name, icing, maintenance and repair of the source wastes be used for disposing of radioactive wastes. CE THE APPLICANT AND ANY OFFICIAL EFEC PREPARED IN CONFORMITY WITH TITLE 12. SUPPLEMENTS ATTACHED HERETO, IS 79.	SAY PROCEDURES ION TO BE aboratory facilities Yes No escribe the radiation haining, and exp See a disposal service in and estimates of ERTIFICATE (T	SUBMITTED O and remate handling on protection progerience of person to ttached as employed, specify the type and amount in item must	N ADDITIONAL In a perform leak tests, an sheet. In a company. It of activity involved. It be completed all Of the applicant no appli	SHEETS IN DUPLICA containers, shielding, fume he neasures. If application cavid arrangements for performin Otherwise, submit detailed det	en sealed sources, so initial radiation scription of method sheet. Y THAT THIS APPLED HEREIN, INCLU-	submit lead survey, sen is which will ICATION IS DING ANY	

NITHE JOB PORTER (CC)

Question #7

These parts are to be used in the assembly of radioluminous compasses. As the parts are received from the manufacturer they will be inspected by one of the two individual users and stored until needed in a locked metal cabinet. The cabinet shall be marked "Caution - Radioactive Material" at all times that the luminous parts are stored therein. As they are needed for production, the parts will be removed from the cabinet by one of the two individual users.

At the end of the work day, all unassembled parts and assembled compasses that are not to be shipped immediately, will be returned to the cabinet.

Any damaged or defective parts will be stored in a plastic bag and disposed of by a company licensed to dispose of radioactive material. A maximum of 50 millicuries of radioactivity will be placed in any one bag.

The assembled compasses will be marked according to the end users requirements and will be shipped only to users who possess a valid AEC or agreement state license.

In addition, a maximum of 10 assembled compasses, under the personal control of Benjamin Pollack, will be carried to various parts of the United States for demonstration purposes.

Question #14

All personnel will be told that they are working with radioactive material. All personnel handling the unassembled parts will wear rubber gloves on both hands. All assembly of the parts will be done using soft-tipped tweezers.

Any parts damaged during assembly will be disposed of as radioactive waste.

Before leaving the work area, and before eating, drinking or smoking, all assembly workers will wash their hands and check them under an ultraviolet light. Any contamination remaining will be immediately cleaned off with a paper cloth or towel and disposed of as radioactive waste. Since contamination levels are expected to be extremely low, hand washing water will be dumped to the sanitary sewer.

Page -2-

Question #14 (cont.)

At the end of the work day, after all radioluminous parts have been removed from the work area, the work area will be wiped with a damp cloth or towel. In addition, the work area will be surveyed with an ultraviolet light and any contamination found will be immediately cleaned up and disposed of as radioactive waste.

The workers assembling these parts have had extensive experience with radium activated luminous materials and hence, are somewhat familiar with radioactive materials. The workers have also been inspected several times by the Massachusetts State Board of Health, in regard to their working with radium activated compass parts.

Question #15

All radioactive waste will be returned to the manufacturer or will be shipped to a company having a valid license allowing it to dispose of radioactive material.

a monoderical Cipe Commonwealth, of ellin Figure Roylston Street on. Massachusetts 02113

DEPARTMENT OF LABOR AND INDUSTRIES DIVISION OF INDUSTRIAL SAFETY 473 STATE HOUSE, BOSTON 33

Tile No	
Reg. No	

DEGIC DATION OF IONITING DATIATION COMPOSE

I. Employe	er-Name	Commen	Co Contain ton on	A Fred Marcell d/b/	a Waltham Compaca
Address			y, both located at: Name	nelmeetes ,	
2. Confine	s of lestalla	ition			
3. RADIA	TION PR	ODUCINO	G EQUIPMENT (Use Additiona	Sheets if Necessary) :	
TVPF	NAME AND ADDRESS OF TAXABLE PARTY.	IBER	DESCRIPTION OF (Size, Rating, Mer., Gi	EQUIPMENT	DITE PAGE OF THE
III'L'	TYPE* FIXED MOBILE		(SIZE, RATING, MIR., OI	PURPOSE OR USE	
*Specify if bet	a ray gauge,	high voltage	equipment, industrial x-ray, nuclear rea	ctor, particle accelerator, shoe fl	uoroscope, static eliminator. etc.
4 PADIO	ACTIVE		16 01 1111 161 162		
4. RADIO		MATERIA IBER	LS (Use Additional Sheets if Ne	QUANTITY USED	
TYPE.	FIEED	Monile	DESCRIPTION OF MATERIAL.	ANNUALLY ON HAND	PURPOSE OR USE
33 112			RADILLM POINT	O Reg.	COMPASSONER LABOR AND HOLDS
*Indicate if sea	aled or unsea	lei, source st	rength, location, etc.		
5. RADIA	TION PR	OTECTIO	N OFFICER		
	nd Address				
Qualific	Qualifications Compare Compare Compared to a				
Zaarine					(Cleri)
June 2	5, 1963 Date		Ly:	Signature of Employer	or Radiation Protestion G., et