

GENERAL LICENSE STATIC ELIMINATOR DEVICE
COLLECTION FORM

1. Name and Address of General Licensee:
Bristol-Myers Products Division
8877 LADUE ROAD St. Louis, MO. 63133
2. Date of Inspection: 11 FEB 88
Signature of Inspector(s): S. E. Miller D. W. Egg
3. Principal Business of Licensee:
Manufacturer of non-prescription medicine
4. Purpose for which device(s) are used:
Clean, ^{and discharge} the exterior of plastic bottles.
5. Device Specifics:
 - a. Model Number: 907, Two each
 - b. Activity of Po-210 source 20 mCi EACH
 - c. Date Received:
 - d. Date lease expires:
6. Did licensee receive 3M notification: Yes ✓ No 880

7. Survey:

a. Has survey been performed by SM: Yes No ✓

By Consultant: Yes No ✓

If Yes list consultant's name and location:

b. Survey Performed by Inspector: 11 FEB 88

Serial Number of Device: ^{TWO 907} (WE FAILED TO LIST THEM) ^{TWO}

Direct Survey Of Device: Nothing detectable alpha dpm/100 cm²

Direct Survey Of Work Area: NOT DONE

Smear Survey of Device: Nothing detectable alpha dpm/100 cm²

Smear Survey of Work Area: NOT DONE ^{alpha dpm/100 cm²}

Survey Instrument Used: Elertline

Model: PR M-5-3 with PAC-4 S detector

Serial No.: NRC 007309 / NRC 015721

Date of Calibration: 11/7/88

(If more than one unit use additional sheets)

SMEARS: CARBERRA MODEL 2200 Low Level Gross α -B Counting System

If direct survey shows contamination, samples of product must be obtained.

Type of product: _____

