

OCT - 1 1987

NMLS:CLC  
Control No. 461645

Western Stress, Inc.  
ATTN: Mr. Fred Frongillo, Jr.  
Health Physics Director  
4321 Directors Row  
Houston, Texas 77092

Gentlemen:

This is in reference to your application dated August 28, 1987, requesting a byproduct material license for use of sealed sources and devices for industrial radiography. We have completed review of your application and have the following comments and need for additional information.

1. The following information is needed concerning your training program for radiographers and radiographer's assistants:
  - a. You should provide a more detailed description or outline of the "specific" and "practical" exams identified in Item 5 of Section 16 of your application.
  - b. Your radiation safety training course outline does not indicate that the course will include a review of case histories. This topic is required by Appendix A of 10 CFR Part 34. Indicate that such a topic will be included in the course.
2. Item 5.7 of Section 4 of your application identifies three firms that will provide instrument calibration services. This section also states that other licensed firms may also be used.

It will be necessary for you to specifically identify each firm that you plan to use to provide such services. Unless you identify additional contractors in your response, you will be authorized to use only the three identified firms. Use of firms other than those identified to us will first require submittal of a request to the NRC for license amendment.
3. Item 4.0 of Section 14 of your application describes your internal inspection program. You should clearly specify that an individual who has not performed radiography for more than 3 months will be inspected the first time that person engages in radiographic operations.
4. You should amend your application to state where and how dosimetry equipment should be stored when not in use.

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5. Item 2.1 of Section 7 of your application should be amended to describe the circumstances for which DOT labels White I and Yellow II are required.
6. The telephone number for the NRC Region II office should be amended in your emergency procedures to read (404) 331-4503.
7. You should indicate your understanding that equipment defects identified may require reporting to the NRC in accordance with 10 CFR Part 21.
8. You should identify the model numbers of the leak test kits you plan to use. Also, as in our Item 2 above, you may only use those firms that have been specifically identified by you in your application.

If we do not receive a reply from you within 30 calendar days from the date of this letter, we shall assume that you do not wish to pursue your application. Please reply in duplicate and refer to Control No. 461645.

Sincerely,

C. L. Cain, Chief  
Nuclear Materials Licensing Section

bcc:  
R. L. Bangart

BETWEEN: LICENSE FEE MANAGEMENT BRANCH, ARM  
AND  
REGIONAL LICENSING SECTIONS

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: PROGRAM CODE: -----
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: STATUS CODE: 3
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: FEE CATEGORY: -----
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: EXP. DATE: 0
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: FEE COMMENTS: -----
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03030175

## A. REGION

1. APPLICATION ATTACHED  
APPLICANT/LICENSEE: WESTERN STRESS,  
APPLICATION DATE: 870901  
CONTROL NO.: 461645  
LICENSE NO.:  
ACTION TYPE: NEW LICENSEE



2. FEE ATTACHED

AMOUNT:

CHECK NO.:

### 3. COMMENTS

SIGNED  
DATE

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

1. FEE CATEGORY AND AMOUNT:

2. CORRECT FEE PAID. APPLICATION MAY BE PROCESSED FOR:

AMENDMENT

RENEWAL

LICENSE

3. OTHER

SIGNED  
DATE