

REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES			
1. NAME OF LICENSEE Neutron Products, Inc. (98-01) Page 1 of 1		2. TYPE OF REPORT <input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REVISION <input type="checkbox"/> CLARIFICATION	
		3. CONTROL NUMBER (Leave Blank - Number to be assigned by NRC)	
4. ADDRESS OF LICENSEE 22301 Mt. Ephraim Road, Box 68 Dickerson, Maryland 20842-0068		5. LICENSEE CONTACT Marvin M. Turkanis or Heidi Harmon	
		6. TELEPHONE NO. 301/349-5001	7. FACSIMILE NUMBER 301/349-5007
8. ACTIVITIES TO BE CONDUCTED IN NON-AGREEMENT STATES UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20			
<input type="checkbox"/> WELL LOGGING <input type="checkbox"/> LEAK TESTING AND/OR CALIBRATIONS <input checked="" type="checkbox"/> TELETHERAPY/IRRADIATOR SERVICE			
<input type="checkbox"/> PORTABLE GAUGES <input type="checkbox"/> OTHER (Specify)			
<input type="checkbox"/> RADIOGRAPHY		TRANS. QA PROGRAM APPROVAL #71-0121	REGIS. AS USER OF PACKAGING Yes
9. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE Clinton Memorial Hospital 610 West Main Street Wilmington, OH 45177		10. WORK LOCATION ADDRESS 610 West Main Street 9907120102 990604 PDR STPRG ESGMD PDR	
11. CLIENT TELEPHONE NUMBER 937/382-9353		12. WORK LOCATION TECHNICIAN AUTHORIZED TO PERFORM WORK: Jerry Fogle	13. WORK LOCATION TELEPHONE NO. 937/382-9353
14. DATES SCHEDULED FROM 06/29/99 to 06/29/99		15. NO. OF WORK DAYS 1	16. LOCATION REFERENCE NUMBER
LIST ADDITIONAL WORK SITES ON SEPARATE SHEET TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 9-16 ABOVE.			
17. LIST RADIOACTIVE MATERIAL, WHICH WILL BE POSSESSED, USED, INSTALLED, SERVICED, OR TESTED IN NON-AGREEMENT STATES. Semi-annual Preventive Maintenance on an AECL Theratron-80 teletherapy unit, having 2860 curies of cobalt-60 as of 12/14/98.			
18. AGREEMENT STATE SPECIFIC LICENSE WHICH AUTHORIZES THE UNDERSIGNED TO CONDUCT ACTIVITIES WHICH ARE THE SAME, EXCEPT FOR LOCATION OF USE, AS SPECIFIED IN ITEM 8. ABOVE.			
LICENSE NUMBER MD-31-025-03 120034	STATE Maryland	EXPIRATION DATE September 30, 2000	TOTAL USAGE DAYS TO DATE
19. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)			
20. I, THE UNDERSIGNED, HEREBY CERTIFY THAT:			
a. All information in this report is true and complete. b. I have read and understand the provision of the general license 10 CFR 150.20 reprinted on the cover sheet of this form set; and I understand that I am required to comply with those provisions as to all byproduct, source, or special nuclear material which I possess and use in non-Agreement States or offshore waters under the general license for which this report is filed with the U.S. Nuclear Regulatory Commission. c. I understand that activities, including storage, conducted in non-Agreement States under general license 10 CFR 150.20 are limited to a total of 180 days in calendar year. d. I understand that I may be inspected by NRC at above listed work site locations and at the Licensee home office address for activities performed in non-Agreement States or offshore waters. I am also aware that I will be responsible for any fees associated with such inspection. e. I understand that conduct of any activities not described above, including conduct of activities on dates or locations different from those described above or without NRC authorization, may subject me to enforcement action, including civil or criminal penalties.			
CERTIFYING OFFICER - RSO or Management Rep. Marvin Turkanis Radiation Safety Officer		SIGNATURE 	DATE June 4, 1999
WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES, NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECTS. 18 U.S.C. SECTION 1001 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.			
FOR NRC USE ONLY		AUTHOR. OFFICIAL (Typed/Printed Name, Title)	SIGNATURE
			DATE

JUN 28 1999

Linda
Mitchell
T9 E10

REGION I

TRANSMITTAL FOR NRC FORM 241 & REVISION SUBMITTALS

☐ INITIAL 241 PACKAGE

☒ REVISION

LICENSEE NAME: Neutron Products, Inc.

LICENSE NO: MD 31-025-03

CHECK NO: 26177

CHECK AMOUNT: \$ 200.00

Rebecca J. Brown
Processor Signature

6/30/99
Date

Attachments:

1. Check
2. Approval Letter/Revision Sheet
3. NRC Form 241 (for initial 241 pkg.)
4. Agreement State License (for initial 241 pkg.)

Log	<u>Sub 1 241</u>
Remitter	<u>26177 6/23/99</u>
Check No.	<u>26177</u>
Amount	<u>\$200</u>
Fee Category	<u>18</u>
Type of Fee	<u>Amel</u>
Date Check Rec'd.	<u>6/23/99</u>
Date Completed	<u>6/23/99</u>
By:	<u>Rita Messer</u>

Rev. 08/23/94

NEUTRON PRODUCTS inc.


Dickerson, Maryland 20842

DATE	INVOICE	AMOUNT

16
AA905 AMD.
Jul 1 24

26177

7-16
520

PAY <u>Two hundred and ⁰⁰/₁₀₀</u>		DOLLARS										
DATE	TO THE ORDER OF	<table border="1"> <tr> <th colspan="2">GROSS AMOUNT</th> <th rowspan="2">DISCOUNT</th> <th rowspan="2">CHECK AMOUNT</th> </tr> <tr> <th>OTHER</th> <th>ACCOUNT PAYABLE</th> </tr> <tr> <td> </td> <td> </td> <td>200.00</td> <td>200.00</td> </tr> </table>	GROSS AMOUNT		DISCOUNT	CHECK AMOUNT	OTHER	ACCOUNT PAYABLE			200.00	200.00
GROSS AMOUNT		DISCOUNT	CHECK AMOUNT									
OTHER	ACCOUNT PAYABLE											
		200.00	200.00									
6/27/91	Nuclear Regulatory Comm											
NationsBank		 MARVIN M. TURKANIS, VP										

⑈026177⑈ ⑆052000168⑆

911 120 1.11

9. Grant Medical Center, 111 South Grant Avenue, Columbus, OH 43215
10. 111 South Grant Avenue
11. 614/566-9877
12. Mr. Jerry Fogle
13. 614/566-9877
14. July 15, 1999 through July 16, 1999
15. Two (2)
17. Removal of a Picker C-9 teletherapy unit containing a cobalt-60 source, having 3260 curies as of June 1, 1999.

neutron products inc

Dickerson, Maryland 20842

U.S.A.

U.S. Nuclear Regulatory Commission
Region I
ATTN: Nuclear Materials Safety Branch
475 Allendale Road
King of Prussia, PA 19406-1415

19406-1415 02

