

COMPLETE AND RETURN THIS FORM TO:

Nuclear Regulatory Commission
Director of Material Safety and Safeguards
Washington, D.C. 20555

NOTICE OF RECEIPT OF "GENERALLY" LICENSED RADIATION DEVICE

1. NAME OF FIRM RECEIVING DEVICE

X-PERT

Conier Service Inc.

DALLAS

2. ADDRESS IN FULL OF INSTALLATION WHERE DEVICE WILL BE USED

COUNTY

2570 Southwell

Dallas, TX 75229

3A. ADDRESS OF FIRM IF DIFFERENT FROM ABOVE

3. INDUSTRY IN WHICH FIRM IS ENGAGED

copiers --SALES & SERVICE

4. TOTAL NO. OF EMPLOYEES WORKING WITH RADIATION: *4*

5. ARE THE SOURCES NOW BEING REPORTED ON THIS FORM A PART OF AN INSTALLATION PREVIOUSLY REGISTERED WITH THE DIVISION OF INDUSTRIAL HYGIENE? ☐ YES ☒ NO IF YES, WHAT IS OUR REGISTRATION NUMBER FOR THAT INSTALLATION?

6. DESCRIPTION OF DEVICE(S):

A. Quantity Fixed Mobile	B. Name, Model No. and Manufacturer of Device(s)	C. Quantity and Type of Radio- active Material Contained	D. Use and Machine on Which Installed	E. No. Workers Using Device
1	Model 450PBAS S/N 3356 Trek Inc. 3932 Salt Works Road Medina, NY 14103	(1) Nickel 63 10uC max. each		

7. NAME, TITLE AND BUSINESS ADDRESS OF PERSON RESPONSIBLE FOR DEVICE

4-27-90

Date

Mike Buesing

Signature of Person Responsible for Device

Manufacturers GL License No. (GL) 2207-2924

Issued By: State of New York, Department of Labor, Div. of Safety and Health

Issued To: TREK INC., Medina, New York

Date of Issuance December 27, 1978

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PDR RC *

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