

April 14, 1999

G.M. Smith, Jr.
Apgee Corporation
103 Corporation Drive
Aliquippa, PA 15001

Dear Mr. Smith:

Based on the information submitted in your letter dated December 5, 1997, and subsequent letters, with enclosures thereto, we have transferred the following registration certificates to inactive status. The registration numbers of the certificates have been changed as indicated in the table.

Old Certificate Number	New Certificate Number	Model Number
NR-112-D-104-B	NR-112-D-804-B	LB 378
NR-112-D-112-B	NR-112-D-805-B	LB-BW Series
NR-112-D-106-B	NR-112-D-806-B	LB 300 L and LP Series
NR-112-D-107-S	NR-112-D-807-S	LB 300 IRL Series
NR-112-D-101-B	NR-112-D-808-B	LB 379

Please review the registration certificates (copies enclosed) in their entirety and notify us immediately if there are any errors or omissions.

If you have any questions, please contact me at (301) 415-7868 or Mr. Douglas Broaddus at (301) 415-5847.

Sincerely,

John W. Lubinski, Mechanical Engineer
Materials Safety and Inspection Branch
Division of Industrial and
Medical Nuclear Safety
Office of Nuclear Material Safety
And Safeguards

Enclosure: As stated

cc w/encl: Skimberley, LFDCB

Distribution:

IMNS r/f

NE01 *JK*

97-44

97-76

97-43

97-77

97-42

(NR-112-D-807-S) (NR-112-D-805-B) (NR-112-D-806-B) (NR-112-D-804-B) (NR-112-D-808-B)

DOCUMENT NAME: P:\NR112CMP.WP2

To receive a copy of this document, indicate in the box: "C" = Copy without attachment/enclosure "E" = Copy with attachment/enclosure "N" = No copy

OFFICE	MSIB	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME	JLubinski								
DATE	04/14/99								

OFFICIAL RECORD COPY

9904270112 990414
PDR RC *
SSD PDR

NRC FORM 567

(8-93)

U. S. NUCLEAR REGULATORY COMMISSION

REQUEST FOR A SEALED SOURCE OR DEVICE EVALUATION

INSTRUCTIONS: Send this request AND a copy of all related letters/applications and drawings to: The Sealed Source Safety Section, ATTN: Chief, OWFN Mail Stop 6 H3. Change the License Tracking System milestone to 19 and assign to reviewer code I-5.

NOTE: Retain a copy of this request with the application and background files.

REQUESTER <i>Apgee Corp</i>		REGION/LOCATION: <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> HQ <input type="checkbox"/> LFDCB	
TELEPHONE NUMBER	DATE	TYPE OF ACTION REQUESTED (Check as appropriate)	
APPLICANT'S NAME <i>Bud Smith</i>		<input type="checkbox"/> SOURCE REVIEW <input type="checkbox"/> AMENDMENT OF REGISTRATION SHEET NUMBER(S)	
MAIL CONTROL NUMBER(S)		<input type="checkbox"/> DEVICE REVIEW	
LETTER/APPLICATION DATE <i>6/4/97</i>	LICENSE NUMBER(S)	<input type="checkbox"/> CUSTOM REVIEW <i>NR-112-D-19-S</i>	

COMMENTS
*Hopewell Business & Industrial PARK
103 Corporation Dr.
Alliquippa, PA 15001*

FOR SSSS USE ONLY			
REVIEWER	MODEL NUMBERS <i>LB 300 IRL</i>	NUMBER ASSIGNED <i>97-44</i>	
DATE RECEIVED <i>6/12/97</i>	DATE ASSIGNED	DATE TO FEES <i>6/12/97</i>	

TYPE OF ACTION (Indicate the number of each type)			
COMMERCIAL DISTRIBUTION (FORMAL)		USE BY A SINGLE APPLICANT (CUSTOM)	
SOURCE (9C)	DEVICE (9A)	SOURCE (9D)	DEVICE (9B)
<input type="checkbox"/> NEW <input type="checkbox"/> AMENDMENT	<input type="checkbox"/> NEW <input checked="" type="checkbox"/> AMENDMENT	<input type="checkbox"/> NEW <input type="checkbox"/> AMENDMENT	<input type="checkbox"/> NEW <input type="checkbox"/> AMENDMENT
<input type="checkbox"/> NO SAFETY EVALUATION REQUIRED <input type="checkbox"/> NO FEES REQUIRED		<input type="checkbox"/> LICENSING ACTION REQUIRED IF KNOWN	
<input type="checkbox"/> OTHER (Specify)		<input type="checkbox"/> YES <input type="checkbox"/> NO	

	TOTAL NUMBER OF REVIEW HOURS	NOTES
	NUMBER OF DEFICIENCY LETTERS	
	NUMBER OF DEFICIENCY CALLS	

FOR BILLING PURPOSES ONLY			
<input type="checkbox"/> NAME CHANGE	<input type="checkbox"/> ADDRESS CHANGE	<input type="checkbox"/> NEW REGISTRATION -- ADD TO BILLING	<input type="checkbox"/> PRODUCT INACTIVE -- REMOVE FROM BILLING

TYPE OF FEE <i>AMD</i>		FEE CATEGORY <input type="checkbox"/> 9A <input type="checkbox"/> 9B <input type="checkbox"/> 9C <input type="checkbox"/> 9D	
AMOUNT RECEIVED <i>\$4,800 \$1,200</i>	CHECK NUMBER <i>16192</i>	<input type="checkbox"/> MATANN UPDATED AS REQUIRED	
DATE OF CHECK <i>6/6/97</i>	LOG <i>June 97, SSAD</i>	<input type="checkbox"/> MATSYS UPDATED AS REQUIRED	
APPROVED BY <i>sh</i>	DATE RETURN <i>6/12/97</i>	DATE	

COMMENTS