

USNRC REGION II - MATERIALS LICENSING/INSPECTION BRANCHES (FAX 404-562-4955) (VERIFY 404/562-4723)

NRC FORM 241 (6-98) 10 CFR 150		U. S. NUCLEAR REGULATORY COMMISSION		APPROVED BY OMB: NO. 2158-0012 Estimate based on response to comply with this mandatory information collection request: 18 minutes. This information is required so that NRC may schedule inspection of the activities to ensure that they are conducted in accordance with requirements for protection of the public health and safety. Forward comments regarding burden estimate to the Information and Records Management Branch (T-6 F33) U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001 and to the Paperwork Reduction Project (2158-0012) Office of Management and Budget, Washington, DC 20503. NRC may not conduct or sponsor and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number.		EXPIRES: 6/30/99	
REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES (Please read the instructions on the cover sheet before completing this form.)				2. TYPE OF REPORT		3. CONTROL NUMBER (Leave blank - number to be assigned by NRC)	
1. NAME OF LICENSEE (Person or firm proposing to conduct the activities described below) Weldtek Testing Labs. A Division of Gallet & Assoc., Inc.				☒ INITIAL ☐ REVISION ☐ CLARIFICATION			
4. ADDRESS OF LICENSEE (Mailing address or other location where activities may be located) 2241 Hwy. 78 West Oxford, AL 36203				5. LICENSEE CONTACT Sherry A. Cable			
				6. TELEPHONE NUMBER (Include Area Code) (256) 835-1155		7. FACSIMILE NUMBER (Include Area Code) (256) 831-4996	
B. ACTIVITIES TO BE CONDUCTED IN NON-AGREEMENT STATES UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20							
WELL LOGGING		LEAK TESTING AND/OR CALIBRATIONS		TELETHERAPY/RADIATOR SERVICE			
PORTABLE GAUGES		OTHER (Specify)					
☒ RADIOGRAPHY $\Rightarrow$		TRANSPORTATION QA PROGRAM APPROVAL NO & REV NO N/A		REGISTERED AS USER OF PACKAGINGS (CERTIFICATES OF COMPLIANCE NOS) 9033			
9. CLIENT NAME ADDRESS CITY/COUNTY STATE ZIP CODE Bechtel National, Inc. P.O. Box 1983 Anniston, (Calhoun) AL. 36202				10. WORK LOCATION ADDRESS (Specify and number or other location. Give as complete an address or directions as possible) Incinerator Anniston, AL			
11. CLIENT TELEPHONE NUMBER (Include Area Code) (256) 238-0173		12. WORK LOCATION TECHNICIAN AUTHORIZED TO PERFORM WORK Donald Mann		13. WORK LOCATION TELEPHONE NUMBER (Include Area Code) (256) 369-2674			
14. DATES SCHEDULED				15. NUMBER OF WORK DAYS		16. LOCATION REFERENCE NUMBER	
FROM January 1, 1999		TO December 31, 1999		180		LEAVE BLANK FOR INITIAL NRC FORM 241 REQUESTS NUMBER TO BE ASSIGNED BY NRC 000832	
9905030200 990420 PDR STPRG ESGAL PDR							
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 (Include description of type and quantity of radioactive material, sealed sources, or devices to be used) 100 curies & Iridium 192 Source 424-9							
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 (If no copies of the specific license must accompany the initial NRC Form 241.)							
LICENSE NUMBER 1017		STATE Alabama		EXPIRATION DATE April 30, 2000		TOTAL USAGE DAYS TO DATE 15	
19. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)							
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 these 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 the 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 inspections.							
e. I understand that conduct of any activities not described above, including conduct of activities on sites 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 Representative (Type/Print Name and Title) Gary D. Cable, Jr. RSO				SIGNATURE <i>Gary D. Cable, Jr.</i> RSO		DATE 4-20-1999	
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 USC 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		BY: D.M. Heim, LA/DNMS		SIGNATURE <i>D.M. Heim</i>		DATE 4/20/99	
NRC FORM 241 (6-98)							

Received in Region II HQ

Enclosure 6

REGION II
Calendar Year 1999

TRANSMITTAL FOR NRC FORM 241 & REVISION SUBMITTALS

[xx] INITIAL 241 PACKAGE

LRN 000832

[] REVISION

LRN _____

[] CLARIFICATION

LRN _____

LICENSEE NAME :

Weidtek Testing Labs

LICENSE STATE :

AL

NUMBER :

1017

CHECK NO:

4481

CHECK AMOUNT: \$

1100.00

FORWARDED BY: _____

	Initial	Revision	Clarification
includes: Form 241	☒	☐	☐
Fee	☒	☐	
License Copy	☒		

LICENSE FEE & ACCOUNT RECEIVABLE BRANCH

1. Fee Category and Amount: 16 \$1100

2. Correct Fee Paid. Submittal may processed for:

General License ☒

Revision _____

Signed

Rita Messier

Date

4/27/99

Log	<u>Apr 3 241</u>
Remitter	<u>12/22/98</u>
Check No.	<u>3038 4/20/99</u>
Amount	<u>\$1100</u>
Fee Category	<u>16</u>
Type of Fee	<u>Appel</u>
Date Check Rec'd.	<u>4/27/99</u>
Date Completed	<u>4/27/99</u>
By:	<u>Rem</u>

G:\DNMS\MLIB2\RECIPR99\0-FORM.FEE

GALLET & ASSOCIATES, INC.
320 Beacon Pkwy W
Birmingham, Al 35209-3104
205-995-8980

16
APR 24 DATE 4/20/99
APR 3

\$ 1100.⁰⁰

PAY
TO THE
ORDER OF

NIRC

Eleven & XX / 100

DOLLARS

AM SOUTH BANK
THE RELATIONSHIP PEOPLE

Shirley A. Calkins

FOR NRC Reciprocity.

⑈003028⑈ 1:0620000191: 75883112⑈