(3-8)	NRC-313 I 0) CFR 30	U.S. NUCLEAR REGULATORY	COMMISSION	<ol> <li>APPLICATION FOR: (Check and/or complete as appropriate</li> </ol>	
	APPLICATION FOR	BYPRODUCT MATER	IAL LICENSE	8. NEW LICENSE	
See a	attached instructions for details.			b. AMENDMENT TO: LICENSE NUMBER	
Comp Office Washi 17	oleted applications are filed in e of Nuclear Material Safety, a ington, DC 20555 or application H Street, NW, Washington, D.	duplicate with the Division of I nd Safeguards, U.S. Nuclear Re ons may be filed in person at th C. or 7915 Eastern Avenue, Si	Fuel Cycle and Material Safety, gulatory Commission, be Commission's office at ilver Spring, Maryland.	c. RENEWAL OF: LICENSE NUMBER X 48-13980-01	
2. AP	PLICANT'S NAME (Institution,	firm, person, stc.)	3. NAME AND TITLE OF PER REGARDING THIS APPLIC	SON TO BE CONTACTED	
TEL (4	EPHONE NUMBER: AREA CO 14) 259-5333 Ext. 5	DE - NUMBER EXTENSION	Alan Haase TELEPHONE NUMBER: AR (414) 259-5372	EA CODE - NUMBER EXTENSION	
4. AP (Ac sho	PLICANT'S MAILING ADDRE ddress to which NRC correspond ould be sent.)	SS (Include Zip Code) lence, notices, bulletins, etc.,	5. STREET ADDRESS WHERE (Include Zip Code)	LICENSED MATERIAL WILL BE US	
33 Mi	100 N. 124th Street 1waukee, WI 53201	- P.O. Box 702	West Allis, WI S	3214	
	(IF MORE SPACE I	S NEEDED FOR ANY ITEM	, USE ADDITIONAL PROPER	ILY KEYED PAGES.)	
6. IN	NDIVIDUAL(S) WHO WILL See Items 16 and 17 for required	USE OR DIRECTLY SUPER training and experience of each in	VISE THE USE OF LICENSE!	DMATERIAL	
	FULL	AME		TITLE	
a. Gr	egory D. Socks		Plant Manager		
c. 7. RA	ADIATION PROTECTION OFFI	CER	Attach a resume of person's trai 16 and 17 and describe his respo	ining and experience as outlined in Iten nsibilities under Item 15.	
		8. LICENS	ED MATERIAL		
		the second se	where a grant of the second state and the second state and the second state of the sec		
L I N E NO.	ELEMENT AND MASS NUMBER	CHEMICAL AND/OR PHYSICAL FORM B	NAME OF MANUFACTURES AND MODEL NUMBER (If Sealed Source) C	R MAXIMUM NUMBER OF MILLICURIES AND/OR SEALE SOURCES AND MAXIMUM AC VITY PER SOURCE WHICH WIL BE POSSESSED AT ANY ONE TH D	
L I N E NO. (1)	ELEMENT AND MASS NUMBER A CESIUM 137	CHEMICAL AND/OR PHYSICAL FORM B Segled Source	NAME OF MANUFACTURES AND MODEL NUMBER (If Sealed Source) C Nuclear - Chicago Model 850233	R MAXIMUM NUMBER OF MILLICURIES AND/OR SEALE SOURCES AND MAXIMUM AC VITY PER SOURCE WHICH WIL BE POSSESSED AT ANY ONE TI D 1 CURIE	
L I N E NO. (1)	ELEMENT AND MASS NUMBER A CESIUM 137	CHEMICAL AND/OR PHYSICAL FORM B Seeled Source	NAME OF MANUFACTURES AND MODEL NUMBER (If Sealed Source) C Nuclear - Chicago Model 850233	R MAXIMUM NUMBER OF MILLICURIES AND/OR SEALE SOURCES AND MAXIMUM AC VITY PER SOURCE WHICH WIL BE POSSESSED AT ANY ONE TI D 1 CURIE	
L I N E NO. (1) (2) (3)	ELEMENT AND MASS NUMBER A CESIUM 137	CHEMICAL AND/OR PHYSICAL FORM B Segled Source	NAME OF MANUFACTURES AND MODEL NUMBER (If Sealed Source) C Nuclear - Chicago Model 850233	R MAXIMUM NUMBER OF MILLICURIES AND/OR SEALE SOURCES AND MAXIMUM AC VITY PER SOURCE WHICH WIL BE POSSESSED AT ANY ONE TI D 1 CURIE	
L I N E NO. (1) (2) (3) (4)	ELEMENT AND MASS NUMBER A CESIUM 137	CHEMICAL AND/OR PHYSICAL FORM B Sealed Source	NAME OF MANUFACTURES AND MODEL NUMBER (If Sealed Source) C Nuclear - Chicago Model 850233	R MAXIMUM NUMBER OF MILLICURIES AND/OR SEALE SOURCES AND MAXIMUM AC VITY PER SOURCE WHICH WIL BE POSSESSED AT ANY ONE TI D 1 CURIE	
L I NO. (1) (2) (3) (4)	ELEMENT AND MASS NUMBER A CESIUM 137	CHEMICAL AND/OR PHYSICAL FORM B Sealed Source DESCRIBE USE OF	NAME OF MANUFACTURES AND MODEL NUMBER (If Sealed Source) C Nuclear - Chicago Model 850233	R MAXIMUM NUMBER OF MILLICURIES AND/OR SEALE SOURCES AND MAXIMUM AC VITY PER SOURCE WHICH WIL BE POSSESSED AT ANY ONE TI D 1 CURIE	
L I NO. (1) (2) (3) (4) (1)	ELEMENT AND MASS NUMBER A CESIUM 137 Used in Kay-Ray Ma system.	CHEMICAL AND/OR PHYSICAL FORM B Sealed Source DESCRIBE USE OF Codel 7051 Source Hol	NAME OF MANUFACTURES AND MODEL NUMBER (If Sealed Source) C Nuclear - Chicago Model 850233	A MAXIMUM NUMBER OF MILLICURIES AND/OR SEALE SOURCES AND MAXIMUM AC VITY PER SOURCE WHICH WIL BE POSSESSED AT ANY ONE TH D 1 CURIE A as part of level gaug	
L I NO. (1) (2) (3) (4) (1) (2)	ELEMENT AND MASS NUMBER A CESIUM 137 Used in Kay-Ray Ma system.	CHEMICAL AND/OR PHYSICAL FORM B Sealed Source DESCRIBE USE OF Codel 7051 Source Hol	NAME OF MANUFACTURES AND MODEL NUMBER (If Sealed Source) C Nuclear - Chicago Model 850233	A MAXIMUM NUMBER OF MILLICURIES AND/OR SEALI SOURCES AND MAXIMUM AC VITY PER SOURCE WHICH WIL BE POSSESSED AT ANY ONE TI D 1 CURIE A as part of level gauge	
L I NO. (1) (2) (3) (4) (1) (2) (1)	ELEMENT AND MASS NUMBER A CESIUM 137 Used in Kay-Ray Ma system. 8707230475 87031 REG3 LIC30	CHEMICAL AND/OR PHYSICAL FORM B Sealed Source DESCRIBE USE OF Codel 7051 Source Hol	NAME OF MANUFACTURES AND MODEL NUMBER (If Sealed Source) C Nuclear - Chicago Model 850233	A MAXIMUM NUMBER OF MILLICURIES AND/OR SEAL SOURDES AND MAXIMUM AC VITY PER SOURCE WHICH WII BE POSSESSED AT ANY ONE T D 1 CURIE a as part of level gaug	

ft     CONTAINER AND/OP DEVICE IN WHICH EACH SEALED     NAME OF MANUFACTURER     MODEL NUM       SOURCE WILL BE STORED ON USED.     R.     C.       (1)     GAMMA SOURCE UNIT     KAY-RAY INC.     7051       (2)		and and designed and the strength strength and solar process	1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 -	9. STORAGE OF	SEALED SOURC	28	
(1)       CAMMA SOURCE UNIT       KAY-RAY INC.       7051         (2)	L-NENO.	CONTAINER AND SOURCE WILL BE	OR DEVICE IN WHICH STORED OR USED. A.	EACH SEALED	NAME OF M	B.	MODEL NUMBER
12       10. RADIATION DETECTION INSTRUMENTS         140       10. RADIATION DETECTION INSTRUMENTS         141       TYPE         142       NAME         143       NUMBER         144       NUMBER         15       RADIATION OF INSTRUMENTS         16       NAME         17       NAME         18       C         19       N.A.         10       N.A.         11       CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10         11       CALIBRATED BY SERVICE COMPANY         14       11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10         14       11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10         14       11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10         14       11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10         15       CALIBRATED BY SERVICE COMPANY         16       CALIBRATED BY SERVICE COMPANY         17       PREGURACY         18       SUPPLIER         19       Check and/or complete as appropriate)         10       FUFER         10       FUFER         11       CALIBRATED BY SERVICE         12       PERSONNEL MONITORING DEVICES         13	(1) -	GAMMA SOURCE	UNIT		KAY-RAY IN	с.	7051
(3)       10. RADIATION DETECTION INSTRUMENTS         10. RADIATION DETECTION INSTRUMENTS       PADIATION         11. TYPE       NAME         NAME       NUMBER         A       B         C       D         11. RADIATION CETECTION INSTRUMENTS         11. RADIATION         NAME         11. RADIATION OF INSTRUMENTS LISTED IN ITEM 10         12. CALIBRATED BY SERVICE COMPANY         NAME, RODRESS, AND FREQUENCY         N.A.         12. CALIBRATED BY SERVICE COMPANY         N.A.         13. A.J.         14.         14.         15. CALIBRATED BY SERVICE COMPANY         N.A.         16. CALIBRATED BY SERVICE COMPANY         N.A.         17. PERSONNEL MONITORING DEVICES         18. Childrante and/or comparise and appropriate.)         19. THE MOLUMINESCENCE         10. DOSIMETRY SERVICE         10. OTHER (Specify):         13. FACILITIES AND EQUIPMENT (Check were appropriate and attach annotated sk etchles) and description(s).         10. ALBORATORY FACILITIES, FUMM FACILITIES, FUMM HOODS (Incluse filtration, Hany), ETC.         18. ABORATORY PROLITIES CONTAINERS, SPECIAL SHIELDING (Insel and attach annotated sk etchles) and description(s).         19. ALBORATORY PROTECTIV	(2)			6) Constraining Constrained and constraint of a group of the constraint of the co			
(4)       10. RADIATION DETECTION INSTRUMENTS         TYPE       MANUFACTUBERS       NUMBER       AVAILABLE       RADIATION         (1)       NAME       NUMBER       AVAILABLE       RADIATION       SENSITIVIT         (1)       N.A.       B       C       D       Ramoe       Imiliance regions, or construint       or construint         (1)       N.A.       B       C       D       Rector)       F       F         (1)       N.A.       Imiliance regions, or construint       F       F       F       F         (1)       N.A.       Imiliance regions, or construint       F       F       F       F         (1)       N.A.       Imiliance regions, or construint       Imiliance regions, or construint       F       F         (2)       Imiliance regions, or construint       Imiliance regions, or construint       Imiliance regions, or construint       F         (3)       Imiliance regions, and regions, or construint       Imiliance regions, or construint       Imiliance regions, or construint       F         (3)       Imiliance regions, or construint, regions, regio	(3)					enner die die mit die gescher Unsels sonder sonder versie die eine	
10. RADIATION DETECTION INSTRUMENTS         TYPE INSTRUMENT       MAMUFACTURERS NAME       NUMBER NUMBER NUMBER       NUMBER AVAILABLE       RADIATION DETECTED (alpha, beta, parma, neutron)       SENSITIVIT ARAGE (millineerspan, or construmn, parma, neutron)         10       N.A.       B       C       D       E       Construction       F         20       N.A.       B       C       D       E       Construction       F         31       International States       Construction       Construction       E       Construction       F         33       International States       International States       International States       International States       F       F         41       International States       Internation	(4)		forder of a state in the second s	and and the second s			
Type OF NAME         MANUFACTURERS NAME         MODEL NUMBER         NUMBER AVAILABLE         DETECTOD (sight, pers, parma, nutron)         SEGUTIVE (miname, parma, nutron)           A         B         C         D         DETECTOD (sight, pers, parma, nutron)         SEGUTIVE (sight, pers, parma, nutron)           11         N.A.         B         C         D         E         SEGUTIVE (sight, pers, parma, nutron)         SEGUTIVE (sight, pers, parma, nutron)           11         N.A.         B         C         D         E         SEGUTIVE (sight, pers, parma, nutron)         SEGUTIVE (sight, pers, parma, nutron)         SEGUTIVE (sight, pers, parma, nutron)           11         CALIBRATED BY SERVICE COMPANY NAME, ADDRES, AND FREQUENCY N.A.         Intermethod, frequency and size used to calibriting nutromats. N.A.           12.         PERSONNEL MONITORING DEVICES Type (Check and/or complete as appropriate.)         EXCHANGE FREQUENCY (Service Company)         EXCHANGE FREQUENCY B           2(2) THERMOUMINESCENCE DOSIMETER (TLD)         ICN DOSIMETRY SERVICE 26201 Miles Road Cleveland, Ohio 44128         OUARTERLY O OTHER (Specify): 			10. R	ADIATION DETE	CTION INSTRUM	ENTS	
T         OF         NAME         NUMBER         AVAILABLE         DETECTED         RANCE           INSTRUMENT         B         C         D         Bandot         Gamma, neutron)         F           III         N.A.         B         C         D         Bandot         Gamma, neutron)         F           III         N.A.         B         C         D         E         Gamma, neutron)         F           III         N.A.         D         D         E         D         E         Gamma, neutron)         F           III         N.A.         D         D         Calibrated by Service Company         D         D         Calibrated by APPLICANT           N.A.         D         Calibrated by Service Company         D         Calibrated by APPLICANT         Action associate sheet describing method, frequency and statued for calibrating instruments.         N.A.           III         FEED         FEED         Supprise         Supprise         Supprise         C           III         Calibrate associate sheet describing method, frequency and statued for calibrating instruments.         N.A.         N.A.         N.A.           IIII calibrated associate sheet describing method, frequency and statued for calibrating instruments.         N.A.         III	. 1	TYPE	MANUFACTURER'S	MODEL	NUMBER	RADIATION	SENSITIVITY
(1)       N.A.         (2)       11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10         (3)       11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10         (4)       11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10         (4)       11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10         (4)       11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10         (5)       Calibrated by SERVICE COMPANY         NAME, ADDRESS, AND FREQUENCY       Attach a supparts these description greathed, frequency and status of calibrating instruments.         N.A.       12. PERSONNEL MONITORING DEVICES         SUPPLIER       Supplices         (Check and/or comparise as appropriate.)       Issreace Company)         C       EXCHANCE FREQUENCY         (Check and/or comparise as appropriate.)       Issreace Company)         (Check and/or comparise as appropriate.)       Issreace Company)         (Check and/or comparise as appropriate.)       Issreace Company)         (2)       THERMOLUMINESCENCE       Supplices Road         (2)       THERMOLUMINESCENCE       C         (3)       OTHER (Specify):       OTHER (Specify)         (3)       OTHER (Specify):       OTHER (Specify)         (3)       OTHER (Specify):       OTHER (Specify)         (3)       OTHER (Specify):	NENO.	OF INSTRUMENT A	B	NUMBER	AVAILABLE	DETECTED (alpha, beta, gamma, neutron) E	RANGE (milliroentgens/hour or counts/minute)
22       33       34       11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10         34.       11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10       35. CALIBRATED BY SERVICE COMPANY         36. CALIBRATED BY SERVICE COMPANY       36. CALIBRATED BY APPLILIANT         37. NAME, ADDRESS, AND FREQUENCY       37. CALIBRATED BY SERVICE COMPANY         38. N.A.       12. PERSONNEL MONITORING DEVICES         39. TYPE       (Service Company)         40. COLUMNESCENCE       (Service Company)         50. COLUMNESCENCE       26.201 Miles Road         39. OTHER (Specify):       0 OUARTERLY         313. OTHER (Specify):       0 OTHER (Specify):         314. BABORATORY FACILITIES, PLANT FACILITIES, FUME HOODS (Include filtration, if any), ETC.         32. RENOTE HANDLING TOOLS OR EQUIPMENT, ETC.       N.A.         33. ARE TORY PROTECTIVE EQUIPMENT, ETC.       N.A.         33. THE HANDLING TOOLS OR EQUIPMENT, ETC.       N.A.         33. OTHER HANDLING TOOLS OR EQUIPMENT, ETC.       N.A.         34. RESPIRATORY PROTECTIVE EQUIPMENT, ETC.       N.A.         35. STORAGE FACILITI	(1)	N.A.					
(3)       11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10         (4)       11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10         (4)       11. CALIBRATED BY SERVICE COMPANY         NAME, ADDRESS, AND FREQUENCY       Calibrate as a sense that descripting method, frequency and status of the calibratis their descripting method, frequency and status as defined company)         N.A.       N.A.         12. PERSONNEL MONITORING DEVICES         SUPPLIER       SUPPLIER         (Check and/or complete as appropriate.)       (Struce Company)         2       C         X(1) FILM BADGE       ICN DOSIMETRY SERVICE         J(2) THERMOLUMINESCENCE       C         DOSIMETER (TLD)       OUARTERLY         (3) OTHER (Specify):       OUARTERLY         (3) OTHER (Specify):       OTHER (Specify):         (4)       OUARTERLY         (3) OTHER SAND EQUIPMENT (Check were appropriate and attach annotated sk etch(es) and description(s).         14. LABORATORY FACILITIES, PLANT FACILITIES, FUME HOODS (Include filtration, if any). ETC.         15. STORAGE FACILITIES, ONTAINERS, SPECIAL SHIELDING (Issee and/or tempostry). ETC.         16. REBORATORY PROTECTIVE EQUIPMENT, ETC.       N.A.         17. MARE OF COMMERCIAL WASTE DISPOSAL SERVICE EMPLOYED         18. LABORATORY PROTECTIVE EQUIPMENT, ETC.       N.A.         14. WASTE DISPO	(2)						
(4)       11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10         Image: State of the state state of the state of the state of the state of the st	(3)	andred allow a second constant of the second s					
11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10         Image: Collaboration of the state of the second of the state of the state of the second of the state of th	(4)				+	*********	
			11. CALIBE	ATION OF INST	RUMENTS LISTE	DINITEM 10	
NAME, ADDRESS, AND FREQUENCY       Attach a separate sheet describing method, frequency and statused for calibreting instruments.         N.A.       N.A.         12. PERSONNEL MONITORING DEVICES         TYPE       Surpliere as appropriate.)         Strive Company.)       ExcHANCE FREQUENCY         6       Surpliere         2(1) FILM BADGE       ICN DOSIMETRY SERVICE         2(2) THERMOLUMINESCENCE       C         DOSIMETER (TLD)       C         3(3) OTHER (Specify):       C         13. FACILITIES AND EQUIPMENT (Check were applpriste and attach annotated sk etch(es) and description(s).         1 & LABORATORY FACILITIES, PLANT FACILITIES, FUME HOODS (Include filtration, if any), ETC.         1 & RESPIRATORY PROTECTIVE EQUIPMENT (Check were applpriste and attach annotated sk etch(es) and description(s).         1 & LABORATORY FACILITIES, CONTAINERS, SPECIAL SHELDING (fixed and/or temporary). ETC.         1 & RESPIRATORY PROTECTIVE EQUIPMENT, ETC.         1 & WASTE DISPOSAL SERVICE IS NOT EMPLOYED         1 & COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED         1 & COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED         1 & COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED SUBMIT A DETAILED DESCRIPTION OF ME	. I	CALIBRATED BY SE	ERVICE COMPANY		Db. CALIBRATE	DRV APPLICANT	
N.A.       used for calibrating instruments.         N.A.       N.A.         12. PERSONNEL MONITORING DEVICES         TYPE         (Check and/or complete as appropriate.)         A       (Service Company)         EXCHANGE FREQUE       (Service Company)         C       C         B(1) FILM BADGE       ICN DOSIMETRY SERVICE         DOSIMETER (TLD)       C         D(2) THERMOLUMINESCENCE       C         DOSIMETER (TLD)       C         D(3) OTHER (Specify):       C         D(4) ABORATORY FACILITIES, PLANT FACILITIES, FUME HOODS (Include filtration, if any), ETC.         D & STORAGE FACILITIES, ONT ANTERS, SPECIAL SHIELDING (Include filtration, if any), ETC.         D & STORAGE FACILITIES, ONT EMPLOYED         D & STORAGE FACILITIES, CONTAINERS, SPECIAL SHIELDING (Include filtration, if any), ETC.         D & STORAGE FACILITIES, ONT EMPLOYED         D & STORAGE FACILITIES, CONTAINERS, SPECIAL SHELDING (		NAME ADDRESS A	ND FREQUENCY		Attach a separate	sheet describing met	and fractional and standards
N.A.       N.A.         12. PERSONNEL MONITORING DEVICES         TYPE         ICheck and/or complete as appropriate.)       SUPPLIER (Service Company)       EXCHANGE FREQU C         ICheck and/or complete as appropriate.)       IS SUPPLIER (Service Company)       EXCHANGE FREQU C         ICheck and/or complete as appropriate.)       ICN DOSIMETRY SERVICE 26201 Miles Road Cleveland, Ohio 44128       IQUARTERLY         ICheck mere fr.D)       ICN DOSIMETRY SERVICE 26201 Miles Road Cleveland, Ohio 44128       IQUARTERLY         ICheck mere fr.D)       ICN OFFICE (Specify):       ICN OFFICE (Specify)         ICHER (Specify):       ICN OFFICE (Specify)       ICN OFFICE (Specify)			ne shequenet		used for calibrat	ing instruments.	iou, rrequency and standards
12. PERSONNEL MONITORING DEVICES         TYPE         (Check and/or complete as appropriate.)         SUPPLIER         (Service Company)         EXCHANGE FREDUCE         (Check and/or complete as appropriate.)         (Service Company)         EXCHANGE FREDUCE         (Service Company)         (Check and/or complete as appropriate.)         (Check model and the company)         (Check model and the company)         (Check model and the company)         (Check model and the colspan="2">(Check model and the company)         (Check model and the colspan="2">(Check model and the company)         (Check model and the colspan="2">(Check model and the company)         (Check model and the colspan="2">(Check model and the colspan="2"), ETC.         (Check model and the colspan="2"), ETC.<		N.A.				N.A.	
12. PERSONNEL MONITORING DEVICES         SUPPLIER         ICheck and/or complete as appropriate.)       SUPPLIER         ICheck and/or complete as appropriate.)       ICN DOSIMETRY SERVICE       EXCHANGE FREDUC         ICN DOSIMETRY SERVICE       ICN DOSIMETRY SERVICE       ICN MONTHLY         ICN DOSIMETER (TLD)       ICN DOSIMETRY SERVICE       ICN MONTHLY         ICN DOSIMETER (TLD)       OUARTERLY       OUARTERLY         ICN DOSIMETER (TLD)       OTHER (Specify):       OUARTERLY         ICN DOSIMETER (TLD)       OUARTERLY       OTHER (Specify)         ICN DOSIMETER (TLD)       ICN							
SUPPLIER       SUPPLIER       EXCHANGE FREQUE         (Check and/or complete as appropriate.)       (Service Company)       EXCHANGE FREQUE         (Service Company)       EXCHANGE FREQUE       C         (I) FILM BADGE       ICN DOSIMETRY SERVICE       IXMONTHLY         (2) THERMOLUMINESCENCE       DOSIMETER (TLD)       OUARTERLY         (3) OTHER (Specify):       OTHER (Specify):       Interfection         (3) OTHER (Specify):       Interfection       Interfection         (1) A LABORATORY FACILITIES, PLANT FACILITIES, FUME HOODS (Include filtration, if any), ETC.       Interfection         (a REMOTE HANDLING TOOLS OR EQUIPMENT, ETC.       N.A.         (a RESPIRATORY PROTECTIVE EQUIPMENT, ETC.       N.A.         14. WASTE DISPOSAL       SERVICE EMPLOYED         IF COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED.       SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH HE USED FOR DISPOSING OF RALIDACTIVE WASTES AND ESTIMATES OF THE TYPE AND AMOUNT OF ACTIVITY INVOLVE THE APPLICATION IS FOR SEALED SOURCES AND DEVICES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO         The sealed source will be serviced or removed by the manufacturer when such servis required.			12. PE	RSONNEL MON	ITORING DEVICE	S	
X(1) FILM BADGE       ICN DOSIMETRY SERVICE       XMONTHLY         (2) THERMOLUMINESCENCE       26201 Miles Road       OUARTERLY         (1) OTHER ( <i>Specify</i> ):       OTHER ( <i>Specify</i> ):       OTHER ( <i>Specify</i> ):         (3) OTHER ( <i>Specify</i> ):       OTHER ( <i>Specify</i> ):       OTHER ( <i>Specify</i> ):         13. FACILITIES AND EQUIPMENT (Check were appropriate and attach annotated sketch(es) and description(s).       OTHER ( <i>Specify</i> ).         14. BABGRATORY FACILITIES, CONTAINERS, SPECIAL SHIELDING ( <i>fixed and/or temporary</i> ). ETC.       N.A.         14. WASTE DISPOSAL       N.A.         14. WASTE DISPOSAL       NAME OF COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED. SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH BE USED FOR DISPOSAL SERVICE IS NOT EMPLOYED. SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH BE USED FOR DISPOSAL SERVICE IS NOT EMPLOYED. SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH BE USED FOR DISPOSAL SERVICE IS NOT EMPLOYED. SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH BE USED FOR DISPOSAL SERVICE IS NOT EMPLOYED. SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH BE USED FOR DISPOSAL SERVICE IS NOT EMPLOYED. SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH BE USED FOR DISPOSAL SERVICE IS NOT EMPLOYED. SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH BE USED FOR DISPOSAL SERVICE IS NOT EMPLOYED. SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH BE USED FOR DISPOSING OF RADIOACTIVE WASTES AND ESTIMATES OF THE TYPE AND AMOUNT OF ACTIVITY INVOLVE THE APPLICATION IS FOR SEALED SOURCES AND DEVICES AND THEY WILL BE RETURNED TO THE MANUFACTURER. SO THE explication is FOR SEALED SOURCES AND DEVICES AND THEY WILL BE RETURNED TO THE MANUFACTURER. SO THE sealed source will be serviced or removed by the manuf	1	Check and/or complet A	te as appropriate,)	1	SUPPLIER (Service Company) B		EXCHANGE FREQUENCY
26201 Miles Road       Image: Construction of the second sec	X (1)	FILM BADGE		ICN DOSI	METRY SERVICE		REMONTHLY
C12) THERMOLUMINESCENCE DOSIMETER ( <i>TLD</i> )       C1eveland, Ohio 44128       DUARTERLY         C13) OTHER ( <i>Specify</i> ):       OTHER ( <i>Specify</i> ):       OTHER ( <i>Specify</i> ):         C13) OTHER ( <i>Specify</i> ):       OTHER ( <i>Specify</i> ):       OTHER ( <i>Specify</i> ):         C14)       C1eveland, Ohio 44128       OTHER ( <i>Specify</i> ):         C15)       C1eveland, Ohio 44128       OTHER ( <i>Specify</i> ):         C15)       C1eveland, Ohio 44128       OTHER ( <i>Specify</i> ):         C15)       C1eveland, Ohio 44128       OTHERLY         C16)       C1eveland, Ohio 44128       OTHER( <i>Specify</i> )         C16)       C1eveland, Ohio 44128       OTHER( <i>Specify</i> )         C16)       C1eveland, Ohio 54121       Otherseteene				26201 Mi	les Road		ARMONTALY
1(3) OTHER (Specify): <ul> <li>OTHER (Specify):</li> <li>Item (Specify):</li></ul>	] (2)	THERMOLUMINESC DOSIMETER (TLD)	CENCE	Clevelan	d, Ohio 4412	8	C QUARTERLY
13. FACILITIES AND EQUIPMENT (Check were appropriate and attach annotated sketch(es) and description(s).         a. LABORATORY FACILITIES, PLANT FACILITIES, FUME HOODS (Include filtration, if any), ETC.         b. STORAGE FACILITIES, CONTAINERS, SPECIAL SHIELDING (fixed and/or temporary), ETC.         c. REMOTE HANDLING TOOLS OR EQUIPMENT, ETC.         d. RESPIRATORY PROTECTIVE EQUIPMENT, ETC.         14. WASTE DISPOSAL         NAME OF COMMERCIAL WASTE DISPOSAL SERVICE EMPLOYED         IF COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED, SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH IS USED FOR DISPOSING OF RADIOACTIVE WASTES AND ESTIMATES OF THE TYPE AND AMOUNT OF ACTIVITY INVOLVE THE APPLICATION IS FOR SEALED SOURCES AND DEVICES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO         The sealed source will be serviced or removed by the manufacturer when such servis required.	] (3)	OTHER (Specify):					OTHER (Specify):
13. FACILITIES AND EQUIPMENT (Check were appropriate and attach annotated sketch(es) and description(s).   a. LABORATORY FACILITIES, PLANT FACILITIES, FUME HOODS (Include filtration, if any), ETC.   b. STORAGE FACILITIES, CONTAINERS, SPECIAL SHIELDING (fixed and/or temporary), ETC.   c. REMOTE HANDLING TOOLS OR EQUIPMENT, ETC.   d. RESPIRATORY PROTECTIVE EQUIPMENT, ETC.   14. WASTE DISPOSAL   NAME OF COMMERCIAL WASTE DISPOSAL SERVICE EMPLOYED   IF COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED, SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH IBE USED FOR DISPOSING OF RADIOACTIVE WASTES AND ESTIMATES OF THE TYPE AND AMOUNT OF ACTIVITY INVOLVE THE APPLICATION IS FOR SEALED SOURCES AND DEVICES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO THE sealed source will be serviced or removed by the manufacturer when such serv is required.		1979 (1999) (199					
<ul> <li>a. LABORATORY FACILITIES, PLANT FACILITIES, FUME HOODS (Include filtration, if any), ETC.</li> <li>b. STORAGE FACILITIES, CONTAINERS, SPECIAL SHIELDING (fixed and/or temporary), ETC.</li> <li>c. REMOTE HANDLING TOOLS OR EQUIPMENT, ETC.</li> <li>d. RESPIRATORY PROTECTIVE EQUIPMENT, ETC.</li> <li>14. WASTE DISPOSAL</li> <li>NAME OF COMMERCIAL WASTE DISPOSAL SERVICE EMPLOYED</li> <li>IF COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED, SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH IS USED FOR DISPOSING OF RADIOACTIVE WASTES AND ESTIMATES OF THE TYPE AND AMOUNT OF ACTIVITY INVOLVE THE APPLICATION IS FOR SEALED SOURCES AND DEVICES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO THE SEALED SOURCE WILL BE SERVICE OF THE SEALED SOURCE AND DEVICES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO THE SEALED SOURCE WILL BE SERVICE OF THE SEALED SOURCE WERE SOURCES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO THE SEALED SOURCE WILL BE SERVICE OF THE SEALED SOURCE WILL SERVICE AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO THE SEALED SOURCE WILL BE SERVICE WASTES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO THE SEALED SOURCE WILL BE SERVICE AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO THE SEALED SOURCE WILL BE SERVICE WASTES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO THE SEALED SOURCE WILL BE SERVICE AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO THE SEALED SOURCE WILL BE SERVICED TO THE MANUFACTURER, SO THE SEALED SOURCE WILL BE SERVICED TO THE MANUFACTURER, SO THE SEALED SOURCE WILL BE SERVICED TO THE MANUFACTURER, SO THE SEALED SOURCE WILL BE SERVICED SOURCE WILL SERVICE SERVICE SERVICED SOURCE SERVICE SERVICE SERVICED SOURCE WILL SERVICE SERVICE</li></ul>		13. FACILITIES	AND EQUIPMENT (C	heck were approp	riate and attach and	notated sketch(es) a	nd description(s)
<ul> <li>b. STORAGE FACILITIES, CONTAINERS, SPECIAL SHIELDING (fixed and/or temporary), ETC.</li> <li>c. REMOTE HANDLING TOOLS OR EQUIPMENT, ETC.</li> <li>d. RESPIRATORY PROTECTIVE EQUIPMENT, ETC.</li> <li>14. WASTE DISPOSAL</li> <li>NAME OF COMMERCIAL WASTE DISPOSAL SERVICE EMPLOYED</li> <li>IF COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED, SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH IS BE USED FOR DISPOSING OF RADIOACTIVE WASTES AND ESTIMATES OF THE TYPE AND AMOUNT OF ACTIVITY INVOLVE THE APPLICATION IS FOR SEALED SOURCES AND DEVICES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO THE sealed source will be serviced or removed by the manufacturer when such serv is required.</li> </ul>	] а.	LABORATORY FAC	CILITIES, PLANT FACIL	LITIES, FUME HOO	DS (Include filtration	, if any), ETC.	
C. REMOTE HANDLING TOOLS OR EQUIPMENT, ETC.       N.A.         Id. RESPIRATORY PROTECTIVE EQUIPMENT, ETC.       14. WASTE DISPOSAL         NAME OF COMMERCIAL WASTE DISPOSAL SERVICE EMPLOYED         IF COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED, SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH IB USED FOR DISPOSING OF RADIOACTIVE WASTES AND ESTIMATES OF THE TYPE AND AMOUNT OF ACTIVITY INVOLVE THE APPLICATION IS FOR SEALED SOURCES AND DEVICES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO         The sealed source will be serviced or removed by the manufacturer when such servis required.	] b.	STORAGE FACILIT	IES, CONTAINERS, SPE	CIAL SHIELDING	fixed and/or tempora	v), ETC.	
14. WASTE DISPOSAL 14. WASTE DISPOSAL NAME OF COMMERCIAL WASTE DISPOSAL SERVICE EMPLOYED IF COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED, SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH I BE USED FOR DISPOSING OF RADIOACTIVE WASTES AND ESTIMATES OF THE TYPE AND AMOUNT OF ACTIVITY INVOLVE THE APPLICATION IS FOR SEALED SOURCES AND DEVICES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO The sealed source will be serviced or removed by the manufacturer when such serv is required. DRM NRC-3131 (3-80)	] c.	REMOTE HANDLIN	G TOOLS OR EQUIPME	NT, ETC.		N.A.	
14. WASTE DISPOSAL NAME OF COMMERCIAL WASTE DISPOSAL SERVICE EMPLOYED IF COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED, SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH BE USED FOR DISPOSING OF RADIOACTIVE WASTES AND ESTIMATES OF THE TYPE AND AMOUNT OF ACTIVITY INVOLVE THE APPLICATION IS FOR SEALED SOURCES AND DEVICES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO The sealed source will be serviced or removed by the manufacturer when such serv is required. RM NRC-3131 (3-80)	Jd.	RESPIRATORY PRO	TECTIVE EQUIPMENT	, ETC.		-	
IF COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED, SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH I BE USED FOR DISPOSING OF RADIOACTIVE WASTES AND ESTIMATES OF THE TYPE AND AMOUNT OF ACTIVITY INVOLVE THE APPLICATION IS FOR SEALED SOURCES AND DEVICES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO The sealed source will be serviced or removed by the manufacturer when such serv is required.	NAN		WASTE DISPOSAL OF	14. WASTE	DISPOSAL		-
IF COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED, SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH BE USED FOR DISPOSING OF RADIOACTIVE WASTES AND ESTIMATES OF THE TYPE AND AMOUNT OF ACTIVITY INVOLVE THE APPLICATION IS FOR SEALED SOURCES AND DEVICES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO The sealed source will be serviced or removed by the manufacturer when such serv is required. RM NRC-3131 (3-80)			E MADIE DIGIODAL GL	INVICE EMPLOTED			
The sealed source will be serviced or removed by the manufacturer when such serv is required.	IF C BE I THE	OMMERCIAL WAST USED FOR DISPOSIN APPLICATION IS F	E DISPOSAL SERVICE NG OF RADIOACTIVE I OR SEALED SOURCES	IS NOT EMPLOYED WASTES AND ESTIN	SUBMIT A DETAIL	ED DESCRIPTION O E AND AMOUNT OF	F METHODS WHICH WILL ACTIVITY INVOLVED. IF
PRM NRC-313 I (3-80)	This	e sealed sour required.	ce will be ser	viced or reme	oved by the m	anufacturer w	hen such service
	RM	NRC-3131 (3-80)					
		10.001					

	INFORMATION REQUIRED FOR ITEMS 15, 16 AND 17
Describe separate	e in detail the information required for Items 15, 16 and 17. Begin each item on a page and key to the application as follows:
15.	RADIATION PROTECTION PROGRAM. Describe the radiation protection program as appropriate for the material to be used including the duties and responsibilities of the Radiation Protection Officer, control measures, bioassay procedures ( <i>if needed</i> ), day-to-day general safety instruction to be followed, etc. If the application is for sealed source's also submit leak testing procedures, or if leak testing will be performed using a leak test kit, specify manufacturer and model number of the laak test kit.
16.	FORMAL TRAINING IN RADIATION SAFETY. Attach a resume for each individual named in Items 6 and 7. Describe individual's formal training in the following areas where applicable. Include the name of person or institution providing the training, duration of training, when training was received, etc.
	e. Principles and practices of radiation protection.
	b. Radioactivity measurement standardization and monitoring techniques and instruments.
	c. Mathematics and calculations basic to the use and measurement of radioactivity.
	d. Biological effects of radiation.
17.	EXPERIENCE Attuck a second of the second of
17.	EXPERIENCE. Attach a resume for each individual named in Items 6 and 7. Describe individual's work experience with radiation, including where experience was obtained. Work experience or on-the-job training should be commensurate with the proposed use. Include list of radioisotopes and maximum activity of each used.
17.	EXPERIENCE. Attach a resume for each individual named in Items 6 and 7. Describe individual's work experience with radiation, including where experience was obtained. Work experience or on-the-job training should be commensurate with the proposed use. Include list of radioisotopes and maximum activity of each used.
17.	EXPERIENCE. Attach a resume for each individual named in Items 6 and 7. Describe individual's work experience with radiation, including where experience was obtained. Work experience or on-the-job training should be commensurate with the proposed use. Include list of radioisotopes and maximum activity of each used. 18. CERTIFICATE (This item must be completed by applicant)
RNING	EXPERIENCE. Attach a resume for each individual named in Items 6 and 7. Describe individual's work experience with radiation, including where experience was obtained. Work experience or on-the-job training should be commensurate with the proposed use. Include list of radioisotopes and maximum activity of each used. <b>18. CERTIFICATE</b> (This item must be completed by applicant) The applicant and any official executing this certificate on behalf of the applicant named in Item 2, certify that this application is prepared in conformity with Title 10, Code of Federal Regulations, Part 30, and that all information contained herein, including any supplements attached hereto, is true and correct to the best of our knowledge and belief. <b>18. U.S.C.</b> , Section 1001; Act of June 25, 1948; 62 Stat. 749; makes it a criminal offense to make a willfully false statement on to any depariment or agency of the United States as to any matter within its jurisdiction.
RNING teentation	EXPERIENCE. Attach a resume for each individual named in Items 6 and 7. Describe individual's work experience with radiation, including where experience was obtained. Work experience or on-the-job training should be commensurate with the proposed use. Include list of radioisotopes and maximum activity of each used. <b>18. CERTIFICATE</b> (This item must be completed by applicant) The applicant and any official executing this certificate on behelf of the applicant named in Item 2, certify that this application is prepared in conformity with Trite 10, Code of Federal Regulations, Part 30, and that all information contained herein, including any supplements attached hereto, is true and correct to the best of our knowledge and belief. <b>18. US.C., Section 1001;</b> Act of June 25, 1948; 62 Stat. 749; makes it a criminal offense to make a willfully false statement on to any department or agency of the United States as to any matter within its jurisdiction.
RNING resentation UENSE F re Section	EXPERIENCE. Attach a resume for each individual named in Items 6 and 7. Describe individual's work experience with radiation, including where experience was obtained. Work experience or on-the-job training should be commensurate with the proposed use. Include list of radioisotopes and maximum activity of each used.         18. CERTIFICATE [This item must be completed by applicent]         The applicant and any official executing this certificate on behrif of the applicant named in Item 2, certify that this application is prepared in conformity with Trite 10, Code of Federal Regulations, Part 30, and that all information contained herein, including any supplements attached hereto, is true and correct to the best of our knowledge and belief.         -16 U.S.C., Section 1001; Act of June 25, 1948; 62 Stat. 749; makes it a criminal offense to make a willfully false statement on to any department or agency of the United States as to any matter within its jurisdiction.         FEE REQUIRED na 120.31, 10 CFR 170)       b. CERTIFYING OFFICIAL Constants
RNING resentation UENSE F re Section	EXPERIENCE. Attach a resume for each individual named in Items 6 and 7. Describe individual's work experience with radiation, including where experience was obtained. Work experience or on-the-job training should be commensurate with the proposed use. Include list of radioisotopes and maximum activity of each used.         18. CERTIFICATE (This item must be completed by applicent)         The applicant and any officiel executing this certificate on behelf of the applicant named in Item 2, certify that this application is prepared in conformity with Title 10, Code of Federal Regulations, Part 30, and that all information contained herein, including any supplements attached hereto, is true and correct to the best of our knowledge and belief.         -16 U.S.C., Section 1001; Act of June 25, 1948; 62 Stat, 749; makes it a criminal offense to make a willfully false statement on to any department or agency of the United States as to any matter within its jurisdiction.         EE REQUIRED not contained the into any department or agency of the United States as to any matter within its jurisdiction.       b. CERTIFYING OFFICIAL Content on the interment of the its interment of agency of the United States as to any matter within its jurisdiction.         EE REQUIRED not 2000       b. CERTIFYING OFFICIAL Content of the its interment of the its interment of agency of the United States as to any matter within its jurisdiction.         EE REQUIRED not 2000       b. CERTIFYING OFFICIAL Content of the its interment of the its its its interment of the its interment of
RNING resentation UENSE F re Section	EXPERIENCE. Attach a resume for each individual named in items 6 and 7. Describe individual's work experience with radiation, including where experience was obtained. Work experience or on-the-job training should be commensurate with the proposed use. Include list of radioisotopes and maximum activity of each used.         18. CERTIFICATE (This item must be completed by applicant)         The applicant and any official executing this certificate on behalf of the applicant named in Item 2, certify that this application is prepared in conformity with Trite 10, Code of Federal Regulations, Part 30, and that all information contained herein, including any supplements attached hereto, is true and correct to the best of our knowledge and belief.         THE REQUIRED in 1001; Act of June 25, 1948; 62 Stat, 749; makes it a criminal offense to make a willfully false statement on to any department or agency of the United States as to any matter within its jurisdiction.         THE REQUIRED in 170,31, 10 CFR 170)       b. CERTIFYING OFFICIAL Completed of the statement of the true or print!         B110.00       C. NAME (Typef or print)         FEE CATEGORY:       3 L

.

. . .

(

CONTROL NO. 8 1 8 1 6. GPO 866 632

1

. . .

· · · · · · · ·

ITEM 17 - Experience

Gregory D. Socks 3 years on the job experience with the equipment covered by this license. Alan Haase Chief Chemist and Environmental Engineer. B.S. Chemical Engineering, University of Wisconsin

GE/jo 5/81

.

. . . .

#### ITEM 15 - Radiation Protection Program

.

:

Film badges supplied by ICN Dosimetry Service are worn by employees working near cupola. The film badges are tested and replaced on a monthly basis.

Leak Tests are performed every six months in accordance with the attached procedure using the leak test kit HP-C17 supplied by Health Physics Associates. The kit is then sent to Health Physics Associates, 3304 Commercial Avenue, Northbrook, Illinois, 60062, for testing.

GE/jo 5/81

# CONTROL NO. 81817

LEAK TEST KIT HP-C17



Instructions for Leak/Wipe Testing Industrial Nucleonics Model No. SH-302/S-6 137-Cs Level Gauges

HEALTH PHYSICS ASSOCIATES LTD. CONSULTANTS IN RADIATION SAFETY

## 3304 COMMERCIAL AVENUE, NORTHBROOK, ILLINOIS 60062 312/564-3330

#### MATERIALS:

Three swab sticks in tubes Vial with detergent (Turco) Plastic gloves in bag Set of wipe test instructions Information sheet

### RADIATION SAFETY PRECAUTIONS:

Establish that source is in its shielded position by the indicating green lights on the control and operational consoles. Turn MAIN POWER SWITCH OFF (this will turn off the green lights). Operator shall also check that source is properly shielded and source shutter is in place of survey with appropriate radiation survey meter. Operator shall wear the disposable gloves provided while taking the wipes. The gloves are removed after the wipes are placed into the test tubes by a sterile technique (i.e., by grasping inner surface at wrist). The gloves are placed in the bag provided and returned to Health Physics Associates. Wash hands when through.

## LEAK TESTING PROCEDURES:

- 1. Add water to tube containing EDTA or use other suitable solvent. It will be used to wet applicator stick before making wipes.
- 2. Remove cover plate to electronic controls located adjacent to source housing.
- 3. Wet applicator stick #1 in solvent and wipe shaft that extends into source housing at point adjacent to source housing. Replace cover plate.
- 4. Wet applicator stick #2 in solvent and wipe the weld of the source housing to the mounting plate and representative areas of the outside surface of the source housing.
- 5. Wet applicator stick #3 in solvent and wipe the bolt threads and nuts used to mount source housing to support plate.
- 6. Place all swab stick tubes in returnable mailing container, remove gloves per instructions above and place in bag provided for return to Health Physics Associates.
- 7. Set survey meter to its most sensitive range in a low background area. Bring container with swabs to meter and note maximum deflection of meter above background.
- 8. If meter indication is 0.4 mR/hr or less, above background, place the return lable provided on container and return to Health Physics Associates, with completed information sheet enclosed.
- 9. If available survey meter is not a geiger counter type (e.g. ion chamber) and cannot read down to 0.4 mR/hr, determine that reading is less than 2.0 mR/hr on contact. Return container to Health Physics Associates via common carrier. Do not ship if indicated surface activity is greater than 2.0 mR/hr and call Health Physics Associates for further instructions.

. : •

. . . . .

## ITEM 16 - Formal Training in Radiation Safety

Installation, start-up, radiation checkout of equipment and safety training of foundry personnel was provided by Modern Equipment Company, Port Washington, Wisconsin 53074, under their license #48-12277-03.

GE/jo 5/81

CONTROL NO. 81817

. : \*

· · · · · · ·

.....

.

ITEM 17 - Experience

Gregory D. Socks 3 years on the job experience with the equipment covered by this license. Alan Haase Chief Chemist and Environmental Engineer. B.S. Chemical Engineering, University of Wisconsin

GE/jo 5/81