



NRC FORM 664

(11 - 2020) 10 CFR 31.5 SECTION 1 PAGE 1 of 2

U.S. NUCLEAR REGULATORY COMMISSION

# **GENERAL LICENSEE REGISTRATION**

#### APPROVED BY OMB: NO. 3150-0198

**OMB EXPIRATION DATE: 09/30/2022** 

Estimated burden per response to comply with this mandatory collection request: 20 minutes. NRC will use this information to track general licensees and their devices to ensure a higher level of device accountability. Send comments regarding burden estimate to the FOIA, Library, and Information Collections Branch (T-6 A10M), U. S. Nuclea Regulatory Commission, Washington, DC 20555-0001, or by e-mail to Infocollects.Resource@nrc.gov, and the OMB reviewer at: OMB Office of Information and Regulatory Affairs, (3150-0198), Attn: Desk Officer for the Nuclear Regulatory Commission, 725 17th Street NW, Washington, DC 20503; e-mail: oira submission@omb.eop.gov. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the document requesting or requiring the collection displays a currently valid OMB control number.

Complete all six sections of this registration form. If any of the preprinted information is incorrect, provide the changes in the applicable boxes. USE CAPITAL LETTERS.

General License Registration Number

Company Name: GOYA DE PUERTO RICO INC.

GL-724172-26

**SECTION 1 - GENERAL LICENSEE INFORMATION** 

Enter the company name and the street address for the physical location of use for your device(s). For portable devices, specify the primary storage location. Do not use P.O. Boxes.

Dep	artm	ent:		TRA	ADE'	WIN	D FO	OD,	INC	•												
Addı	ress	Line	1:	LUCHETTI INDUSTRIAL PARK															-			
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NM5510 NM55



Zip Code: 00961



GL-724172-26 07/06/2021

State: PR

SECTION 1 PAGE 2 of 2

## **SECTION 1 - GENERAL LICENSEE INFORMATION (Continued)**

Enter the name, telephone number and title of the person who is the responsible individual for the device(s). Last Name: NAZARIO First Name: LUIS Middle Initial: A **Business Telephone Number:** (787) 622-4900 Extension: 2178 **Business E-mail Address:** Title: **ENVIRONMENTAL DIRECTOR** Enter the mailing address where correspondence regarding your device(s) should be sent. TRADEWIND FOOD, INC. Department: Address Line 1: LUCHETTI INDUSTRIAL PARK Address Line 2: ROAD #5, CORNER #28 City: **BAYAMON** 





## **SECTION 2 - DEVICES SUBJECT TO REGISTRATION**

SECTION 2 PAGE 1 of 3

Our records indicate that you have these devices. Please update the information as necessary.

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Distributor/Distributed By: Industrial Dynamics Company, Ltd.																
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Dietribute	or License Num	hor: 16	586-19GL		<u> </u>	<u> </u>	<u> </u>		!	1						
	JI LICEIISE INGIII	Dei. 1	1301			7										
Manufacturer name: INDUSTRIAL DYNAMICS CO., LTD.																
Manufac	turer name:	INDUS	STRIAL D	YNAMIC	S CO., I	.TD.										
Device M	Model (Not Sour	ce Mode	l): FT-50	)	<u> </u>	-L										
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Device S	Serial Number:	 11739	 18	1					<u>L</u>			<u></u>	<u> </u>	<u> </u>		
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## **SECTION 2 - DEVICES SUBJECT TO REGISTRATION**

SECTION 2 PAGE 2 of 3

Our records indicate that you have these devices. Please update the information as necessary.

NRC Device Key	800138														
Distributor/Distributed By: In	dustrial Dyn	amics Company, Ltd.													
Distributor License Number:	1586-19GL														
Manufacturer name: INDL	JSTRIAL DY	NAMICS CO., LTD.													
Device Model (Not Source Mod	lel): FT-50														
Device Serial Number: 1173	399														
Transfer Date: 05/07/2009	1 1														
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		☐ complete Section 4.	)												
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## **SECTION 2 - DEVICES SUBJECT TO REGISTRATION**

Our records indicate that you have these devices. Please update the information as necessary.

SECTION 2 PAGE 3 of 3

NRC Device Key							0139															
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#### **SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION**

SECTION 3 PAGE 1 of 1

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07/06/2021

# **SECTION 4 - NOT IN POSSESSION OF DEVICE**

SECTION 4 PAGE 1 of 1

Provide information about devices listed in Section 2 or 6, but no longer in your possession.

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#### **SECTION 5 - CERTIFICATION**

SECTION 5 PAGE 1 of 1

#### I hereby certify that:

- A. All information contained in this registration is true and complete to the best of my knowledge and belief.
- B. A physical inventory of the devices subject to registration has been completed, and the device information on this form has been checked against the device labeling.
- C. I am aware of the requirements of the general license, provided in 10 CFR 31.5. (Copies of applicable regulations may be viewed at the NRC website at:

http://www.nrc.gov/reading-rm/doc-collections/cfr)

SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1)

01/11/21

DATE

WARNING: FALSE STATEMENTS MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL. MATERIAL ASPECTS. 18 U.S.C SECTION 1001 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY WRONG STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER IN ITS JURISDICTION.







## **SECTION 6 - DEVICE NOT SUBJECT TO REGISTRATION**



SECTION 6 PAGE 1 of 1

NRC Device Key:

Manufacturer License No:

Manufacturer Name:

Model Number:

Serial #:

Transfer Date:

Isotope:

Activity:

Unit:



