

NRC FORM 664

(11 - 2020) 10 CFR 31.5

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. Nuclear 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: <u>oira submission@omb.eop.gov</u>. 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	SECTION 1 - GENERAL LICENSEE INFORMATION
GL-63420-26	

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.

Company Name: AGROPUR LAKE NORDEN

Department:					
Address Line 1: 408 D	AKOTA STREET				
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Address Line 2:	1 1 1 1				
City: LAKE	NORDEN				
State: SD	Zip Code: 5724	8		-	
	For NRC Use Only (Do not write here)	Packet Reco	Category: eipt Date (MM	DDYYYY):	
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U.S. NUCLEAR REGULATORY COMMISSION

SECTION 1 PAGE 1 of 2







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).

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Enter the mailing address where correspondence regarding your device(s) should be sent.

Department:

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	ECTION 2 - DEVICES SUBJECT TO REGISTRATIO nese devices. Please update the information as necessary.	N SECTION 2 PAGE 1 of 1
	3459 (Internal Control Number)	PAGE FORT
Distributor/Distributed By: BSI Inst	ruments, Inc.	
Distributor License Number: 37-212	226-02G	
Manufacturer name: BSI INSTRI	UMENTS	
Device Model (Not Source Model): L	B 7400 D/L	
Device Serial Number: 61-1-92		
Transfer Date:		
	Not in posses complete Sect	sion of device (Also tion 4.)
Isotope (e.g. AM241)	Activity (e.g. 1005)	Unit (e.g. mCi)
1 CS137	50	mCi
2		
3		
4		
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SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

SECTION 3

	PAGE 1 of 1
Provide information about other devices you have that are subject to registration. Do not report specifically li	censed devices.

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SECTION 4 - NOT IN POSSESSION OF DEVICE

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 lateling.
- C. I am aware of the requirements of the general lice ise, provided in 10 CFR 31.5. (Copies of applicable regulations may be viewed it the NRC website at: http://www.nrc.gov/reading-rm/doc-collections/cfr

12.16.21

DATE

SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1)

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: