

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. 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: 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 **SECTION 1 - GENERAL LICENSEE INFORMATION**

GL-705529-27

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:	MARION COUNTY COAL RESOURCES, INC.																
Department:	MARIO	MARION COUNTY MINE															
Address Line 1:	3824 C	3824 CROSS ROADS ROAD															
Address Line 2:																	
City:	FAIRVII	EW															
State: WV		Zip	Code	e: 26	6570								-				
		For NR (Do not			e)	Category: Packet Receipt Date (MMDDYYYY):											
								Accession Number:									





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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 N	Nam	e:	SMI	TH																					
First N	Nam	ie:	JUS	TIN										N	liddle	e Init	ial:								
Busin	ess	Tele	epho	ne N	umb	er:	(740) 391	1-271	18				Е	xten	sion:									
7 4	10		3	3 8	9	3 1	1	0							3 2	2 0	0								
Busin	ess	E-m	nail A	Addre	ess:	jsm	ith@	acnr	inc.c	om															
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Title:			PE	RMI ⁻	ΓEN	GINE	EER																		•
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Addre	ss L	ine.	1:	MUF	RRA	Y EN	ERG	Y C	ORP.											i a					
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City:			l	SAII	NT C	LAIF	RSVIL	LE					L		1	1	1			1					
State:	Oł	- [Z	ip Co	ode:	439	50		9							_							





SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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NF	RC Device Key	99524 (Internal Control Number)	
Dist	stributor/Distributed By: Ther	mo Process	Instruments, L.P	
]
Dist	tributor License Number: L01	105		J
Mar	nufacturer name: TN TEC	HNOLOGIE	ES, INC.	
Dev	vice Model (Not Source Model):	5202		J
Dev	vice Serial Number: B378			
 Trar	nsfer Date: 12/05/2013			
			Not in possession of dev complete Section 4.)	ice (Also
	MM DD YYYY	,	— complete dection 4.)	
			'	
1	Isotope (e.g. AM241) CS137			Unit (e.g. mCi)
		500		mCi
2				
3				
3				
3 4 5				





SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2 PAGE 2 of 4

NI	RC Device Key	99525	(Internal	Control Nu	nber)			
Dis	tributor/Distributed By:	Thermo Proc	ess Instrume	ents, L.P				
Dis	tributor License Number	: L01105					,	
Mai	nufacturer name: T	N TECHNOLO	GIES. INC.					
_								
De	vice Model (Not Source I	Model): 5202						
Dev	vice Serial Number:	B374						
Tra	nsfer Date: 12/05/201	3						
						□ Not i	in possession of plete Section 4	of device (Also
						□ com	piete Section 4	.)
	MM DD	YYYY						
	Isotope (e.g. AM241)	A	Activity (e.g.	1005)				Unit (e.g. mCi)
1	CS137	; -	500					mCi
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5		7 [T		
6] [
J		7 [
		J [





SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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NR	C De	vice	Key				7	14279	9	(Inte	mal (Cont	rol N	lumb	oer)									
Dist	ributo	r/Dis	tribut	ed E	Зу:																			
Dist	ributo	r Lice	ense	Nun	nber	:													I				L e	
		7								T]											
L Man	ufactı	ırer ı	name] e:	Т	N TE	ECH	NOLO	OGII	L ES. II	NC.		J											
										T														
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Devi	ce Se	rial I	Numb	oer:	E	358						1					1						1	
Tran	sfer D	ate:	12	2/05	/201	3																		
				7														Not i	n pos	sess Secti	ion of on 4.)	f devi	ce (Also	
М	M		DD			YYY	ΥY																	
	Isoto	pe (e	e.g. A	M24	11)				Acti	ivity (e.g.	1005)										Unit (e.g. mC	Ci)
	CS13								4														Ci	
2						J												1			J	l		_
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SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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NRC Device Key 8580	58 (Internal Control Number)	
Distributor/Distributed By: Berthold To	echnologies U.S.A., LLC	
Distributor License Number: R-01082	-B23	
Manufacturer name: BERTHOLD 1	TECHNOLOGIES U.S.A., LLC	
Device Model (Not Source Model): LB	7440-F-CR	
[] [] [] [] [] [] [] [] [] []	1440-1-010	
Device Serial Number: 13859		
Device Serial Number. 13039		
Transfer Date: 06/04/2021		
	Not in possession of complete Section 4.)	f device (Also
MM DD YYYY		
Isotope (e.g. AM241)	Activity (e.g. 1005)	Unit (e.g. mCi)
1 CS137	20	mCi
2		
3		
4		
•		
5		
6		





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 licensed devices. Manufacturer Name Initial Transferor Name Initial Transferor License Number (if known) Device Model Number (Not Source Model) **Device Serial Number** Manufacturer/Initial Transferor listed above How acquired and date (e.g., from a distributor/manufacturer, Date Transferred: Other General Licensee other licensee, other source)? O Other Sources MM DD YYYY Isotope (e.g. AM241) Activity (e.g. 100) Unit (e.g. mCi) 1. 2. 3. 4. 5. 6. 7. 8. 9. 10.







11/15/2021

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. Part 1 Transfer Date: NRC Device Key: (from Section 2 or 6) MM DD YYYY Location of the Device: O Whereabouts Unknown (Complete Part 1 only) O Transferred to another general licensee (Complete Parts 2 and 3) O Never Possessed the Device (Complete Part 1 only) O Transferred to a Specific Licensee (Not the manufacturer) (Complete Part 2) O Returned to Manufacturer (Complete Part 1 only) Part 2 License Number of Recipient (if transferred to a specific licensee): Company Name: Department: Address Line 1: Address Line 2: City: State: Zip Code: Part 3 Enter the name of the individual responsibe for this device: Last name: First name: Middle Initial: **Business Telephone** Extension: Number: Title:









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)

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: