

5/3/2022

P-Americas
5411 West 78th Street
Indianapolis, IN 46268

Director, Office of Nuclear Material Safety and Safeguards
ATTN: Document Control Desk/GLTS
U.S. Nuclear Regulatory Commission
Washington D.C. 20555-001

RE: Annual Notification for License Registration GL-704419-27

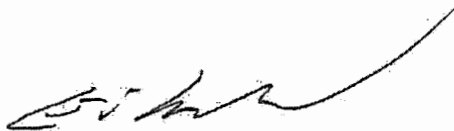
To whom it may concern,

As per 10 CFR 31.5 enclosed is our Annual Notification for Registration, NRC Form 664, for our License GL 704419-26 which is associated with the registration for P-Americas located at the following address:

5411 West 78th Street
Indianapolis, IN 46278

If you have any questions or concerns please feel free to contact me at (317) 876-6860 or email me at eric.wagner@pepsico.com.

Best Regards,



Eric Wagner
PepsiCo Beverages North America
Indianapolis Plant Director



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04/21/2022
NRC FORM 664
(11 - 2020)
10 CFR 31.5

SECTION 1
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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: oir_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-704419-27

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: P-AMERICAS LLC

P - A m e r i c a s L L C

Department:

E H S

Address Line 1: 5411 WEST 78TH STREET

5 4 1 1 W e s t 7 8 t h S t r e e t

Address Line 2:

City: INDIANAPOLIS

I n d i a n a p o l i s

State: IN IN

Zip Code: 46268 4 6 2 6 8

For NRC Use Only (Do not write here)	Category:	<input type="text"/>
	Packet Receipt Date (MMDDYYYY):	<input type="text"/>
	Accession Number:	<input type="text"/>



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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 Name: WAGNER

W a g n e r

First Name: ERIC

E r i c

Middle Initial: R

Business Telephone Number: (317) 876-6860

3 1 7 8 7 6 6 8 6 0

Extension:

Business E-mail Address: ERIC.WAGNER@PEPSICO.COM

E r i c . W a g n e r @ P e p s i c o . c o m

Title: PLANT DIRECTOR

P l a n t D i r e c t o r

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

Department: EHS MAMAGER

E H S

Address Line 1: 5411 WEST 78TH STREET

5 4 1 1 W e s t 7 8 t h S t r e e t

Address Line 2:

City: INDIANAPOLIS

I n d i a n a p o l i s

State: IN

I N

Zip Code: 46268

4 6 2 6 8 -





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SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

SECTION 3

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Provide information about other devices you have that are subject to registration. Do not report specifically licensed devices.

Manufacturer Name

N / A

Initial Transferor Name

Initial Transferor License Number (if known)

Device Model Number (Not Source Model)

Device Serial Number

How acquired and date (e.g., from a distributor/manufacturer, other licensee, other source)?

- Manufacturer/Initial Transferor listed above
- Other General Licensee
- Other Sources

Date Transferred:

MM		DD		YYYY			

Isotope (e.g. AM241)

Activity (e.g. 100)

Unit (e.g. mCi)

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			





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SECTION 5 - CERTIFICATION

SECTION 5
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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.





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SECTION 6 - DEVICE NOT SUBJECT TO REGISTRATION

SECTION 6

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NRC Device Key:

Manufacturer License No:

Manufacturer Name:

Model Number:

Serial #:

Transfer Date:

Isotope:

Activity:

Unit:

