



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), Atm: 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

GL-705592-27

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.

Com	pany	/ Na	me:	REFRESCO BEVERAGES US INC.																	
Dep	artm	ent:			ن						•	•								* - :	
Address Line 1: 1100 INDEPENDENCE AVENUE															* .						
Add	ress	Line	2;			-	•			•		•						•			
City	:			EV	ANS	VILL	Ē								-						
Sta	te: II	۷ [Zip	Code	e: 4°	7714	ŀ							-		<u></u>	
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SECTION 1 PAGE 2 of 2

SECTION 1 - GENERAL LICENSEE INFORMATION (Continued)

Enter the name, telephone number and title of the pers	on who is the responsible individual for the device(s).
Last Name: HILL	
First Name: DANNY	Middle Initial:
Business Telephone Number: (812) 424-7978	Extension:
Business E-mail Address:	
Title: CURRENT SAFETY OFFICER	
	·
Enter the mailing address where correspondence rega	rding your device(s) should be sent.
Department:	·
Address Line 1: 1100 INDEPENDENCE AVENUE	
Address Line 2:	
City: EVANSVILLE	` .
State: IN Zip Code: 47714	





SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2 PAGE 1 of 2

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

NR	C Device Key	524397														
Dist	ributor/Distributed By:	Industrial Dyn	namics Company, Ltd.													
Dist	ributor License Number:	1586-70GL														
Man	nufacturer name:	NDUSTRIAL DY	YNAMICS CO., LTD.													
Dev	rice Model (Not Source I	Model): FT-50-)-C													
Dev	rice Serial Number:	115191														
~																
Irai	nsfer Date: 11/15/199)6 	Not in possession of device (Also													
			Complete Section 4.)													
	AM DD	YYYY														
	Isotope (e.g. AM241)	ļ	Activity (e.g. 1005) Unit (e.g. mCi)													
1	AM241	_ · .	100 mCi													
2																
3		··														
4																
5																
6																





SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2

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

PAGE 2 of 2

NRC Device Key	857217	(Internal Control Number)	
Distributor/Distributed By:	Industrial Dyn	amics Company, Ltd.	
Distributor License Number:	1586-19GL		
	·		
Manufacturer name: INI	DUSTRIAL DY	NAMICS CO., LTD.	
Device Model (Not Source M	odel): FT-50-	-C	
			•
Device Serial Number: 50			٠.,
T5 D-I 44/45/4000			
Transfer Date: 11/15/1996	· · · · · · · · · · · · · · · · · · ·	☐ Not in possession of device	e (Also
		complete Section 4.)	
WM DD	YYYY		
Isotope (e.g. AM241)	A	Activity (e.g. 1005)	Jnit (e.g. mCi)
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SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

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

SECTION 3 PAGE 1 of 1

Man	Manufacturer Name																								
Initia	l Trai	nsfer	or Na	ame						÷															
									T									-		•					
Initial Transferor License Number (if known)																		,							
									<u> </u>																
Device Model Number (Not Source Model)																									
Devi	ce Se	erial I	Num	ber																					
															. T										
How acquired and date (e.g., of the form a distributor/manufacturer, other licensee, other source)? Other General Licensee Date Transferred: MM DD YY																									
		Isoto	pe (e.g	AM2	41)	-					(e.g.	100)										Unit	(e.g.	mCi)
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2.												<u> </u>					Ì]				
3.]	!			
4.															1.										
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9.																									
10.																\prod									





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:							T	T	T				Γ					7								
from	Sect	ion 2	or 6	3)	<u> </u>	<u> </u>				l			L	 MN		<u>.</u>	L DD		┵,	L /YY	l v					
.ocat	ocation of the Device:													10111	•	1	טכ			1 1 1	ī	ė				
O Whereabouts Unknown (Complete Part 1 only)												O Tr	ansf	erred	to ar	nothe	er gei	neral	lice	nsee	(Cor	nplete	e Parl	:s 2 a	ind 3)	
O Never Possessed the Device (Complete Part 1 only))						cific t	_icer	see	(Not	the r	nanuf	actur	er)		
0	Retu	irned	l to N	lanu	factu	rer (C	Comp	lete	Part	1 on	ly)		(c	Jomp	lete l	-aπ 2	2)									
Part 2 License Number of Recipient (if transferred to													spec	cific li	cens	ee):										
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Com	pany	Nan	ne:			1	.	·				·	_					•								
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SECTION 5 - CERTIFICATION

SECTION 5

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: