

GL-728515-28 11/09/2022

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: 11/30/2022

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

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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:	DEPARTMENT OF ARMY (CORPS OF ENGINEERS)																	
Department:	DREDGE JADWIN																	
Address Line 1:	2449 H	2449 HAINING ROAD																
Address Line 2:																		2
								110000000000000000000000000000000000000										
City:	VICKSE	BURG				200 - 111							•					
State: MS		- 4	Zip C	ode	: 39	9183								- [
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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: MCCOY Middle Initial: J First Name: THOMAS Extension: Business Telephone Number: (601) 631-5795 THOMAS.J.MCCOY@USACE.ARMY.MIL Business E-mail Address: Title: ASSIST CHIEF ENGINEER Enter the mailing address where correspondence regarding your device(s) should be sent. Department: DREDGE JADWIN Address Line 1: 2449 HAINING ROAD Address Line 2: City: **VICKSBURG** Zip Code: 39183 State: MS





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SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2 PAGE 1 of 1

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

852149 (Internal Control Number)

NRC Device Key	852149 (Internal Control Number)	
Distributor/Distributed By:	Ronan Engineering Company	
Distributor License Number:	IND-267-95G	
Distributer 2.00m		
	NAN ENGINEERING COMPANY	
Manufacturer name: RO	NAN ENGINEERING COM ANT	
Device Model (Not Source M	odel): SA1-C5	
Device Serial Number: 75	42CP	
Transfer Date: 11/11/2014	Not in possession of device (Also	
	Complete Section 4.)	
MM DD	YYYY	(See alaka)
Isotope (e.g. AM241)	Activity (e.g. 1005) Unit (e.g. mCi)	
1 CS137	2080 mCi	
2		
3		
4		
5		
6		





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SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

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









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SECTION 5 - CERTIFICATION

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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)

Way 28 2023

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



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NRC Device Key:

Manufacturer License No:

Manufacturer Name:

Model Number:

Serial #:

Transfer Date:

Isotope:

Activity:

Unit: