

USNRC REGION II - MATERIALS LICENSING/INSPECTIL. BRANCHES (FAX 404-562-4955) (VERIFY 404-562-1732)

NRC FORM 241 (6-96) 10 CFR 150		U. S. NUCLEAR REGULATORY COMMISSION		APPROVED BY OMB: NO. 3150-0013		EXPIRES: 6/30/99	
<p align="center"><b>REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES</b></p> <p align="center"><i>(Please read the instructions on the cover sheet before completing this form.)</i></p>							
1. NAME OF LICENSEE (Person or firm proposing to conduct the activities described below)				2. TYPE OF REPORT		3. CONTROL NUMBER	
EG&G Berthold				INITIAL		(Leave Blank - Number to be assigned by NRC)	
				REVISION			
				CLARIFICATION			
4. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be located)				5. LICENSEE CONTACT		6. TELEPHONE NUMBER	
100 Midland Rd				Bob Schrock		(Include Area Code)	
Oak Ridge, TN 37831						7. FACSIMILE NUMBER	
						(Include Area Code)	
						423 483-2261 423 425-1357	
8. ACTIVITIES TO BE CONDUCTED IN NON-AGREEMENT STATES UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20							
WELL LOGGING		LEAK TESTING AND/OR CALIBRATIONS		TELETHERAPY/RADIATOR SERVICE			
PORTABLE GAUGES		OTHER (Specify)					
		Service Visit					
RADIOGRAPHY		TRANSPORTATION OR PROGRAM APPROVAL NO. & REV. NO.		REGISTERED AS USER OF PACKAGINGS (CERTIFICATE OF COMPLIANCE NOS.)			
NO		NO LONGER APPLICABLE					
9. CLIENT NAME ADDRESS CITY/COUNTY STATE ZIP CODE				10. WORK LOCATION ADDRESS (Street and Number or other location. Give as complete an address or directions as possible.)			
Solvay Minerals				SAME			
61 Westvaco Rd							
Green River, WY 82935							
11. CLIENT TELEPHONE NUMBER (Include Area Code)		12. WORK LOCATION TECHNICIAN AUTHORIZED TO PERFORM WORK		13. WORK LOCATION TELEPHONE NUMBER (Include Area Code)			
14. DATES SCHEDULED		15. NUMBER OF WORK DAYS		16. LOCATION REFERENCE NUMBER			
FROM		TO		LEAVE BLANK FOR INITIAL NRC FORM 241 REQUESTS NUMBER TO BE ASSIGNED BY NRC			
Oct 26, 1999		Oct 26, 1999		1 ✓ 001109			
LIST ADDITIONAL WORK SITES ON SEPARATE SHEET TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 9-16 ABOVE.							
17. LIST RADIOACTIVE MATERIAL WHICH WILL BE POSSESSED, USED, INSTALLED, SERVICED, OR TESTED IN NON-AGREEMENT STATES (Include description of type and quantity of radioactive material, sealed sources, or devices to be used.)							
18. AGREEMENT STATE SPECIFIC LICENSE WHICH AUTHORIZES THE UNDERSIGNED TO CONDUCT ACTIVITIES WHICH ARE THE SAME, EXCEPT FOR LOCATION OF USE, AS SPECIFIED IN ITEM 8 ABOVE (Four copies of the specific license must accompany the initial NRC Form 241.)							
LICENSE NUMBER		STATE		EXPIRATION DATE		TOTAL USAGE DAYS TO DATE	
R-01082-002		TN		04-30-02		35	
19. CERTIFICATION (MUST BE COMPLETED BY APPLICANT) <i>(INITIALED)</i>							
I, THE UNDERSIGNED, HEREBY CERTIFY THAT:							
a. All information in this report is true and complete							
b. I have read and understand the provision of the general license 10 CFR 150.20 reprinted on the cover sheet of this form set, and I understand that I am required to comply with these provisions as to all byproduct, source, or special nuclear material which I possess and use in non-Agreement States or offshore waters under the general license for which this report is filed with the U.S. Nuclear Regulatory Commission.							
c. I understand that activities, including storage, conducted in non-Agreement States under general license 10 CFR 150.20 are limited to a total of 180 days in calendar year.							
d. I understand that I may be inspected by NRC at the above listed work site locations and at the Licensee home office address for activities performed in non-Agreement States or offshore waters. I am also aware that I will be responsible for any fees associated with such inspections.							
e. I understand that conduct of any activities not described above, including conduct of activities on dates or locations different from those described above or without NRC authorization, may subject me to enforcement action, including civil or criminal penalties.							
CERTIFYING OFFICER - CEO or Management Representative (Type/Printed Name and Title)				SIGNATURE		DATE	
Bob Schrock, Service Dept				Bob Schrock		10/23/99	
WARNING - FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECTS. 18 U.S.C. SECTION 1001 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.							
FOR NRC USE ONLY		AUTHORIZING OFFICIAL (Type/Printed Name and Title)		SIGNATURE		DATE	
		David J. Collins, District Director		David J. Collins		10/22/1999	
		Division of Nuclear Safety					
		USNRC Region II					

ENCLOSURE 7

Received in Region II NEO 5  
10/22/1999 cci: \_\_\_\_\_