



UNITED STATES
NUCLEAR REGULATORY COMMISSION

REGION IV
611 RYAN PLAZA DRIVE, SUITE 400
ARLINGTON, TEXAS 76011-8064

NOV - 5 1999

MEMORANDUM TO: Shirley Crutchfield
License Fee & Accounts Receivable Branch (T9 E10)
FROM: Christi Hernandez
Nuclear Materials Licensing Branch, Region IV *MCH.*
SUBJECT: FEE TRANSMITTAL

A. Region IV

1. NRC FORM 241 ATTACHED

Applicant/Licensee:
NRC Form 241 Dated:
Agreement State License:
Program Code(s):

2. REVISION ATTACHED

Licensee:
Agreement State License:

3. CLARIFICATION ATTACHED

Licensee: *Hi-Tech Testing Service, Inc.*
Agreement State License: *TX L05021*

4. FEE ATTACHED

Amount: \$ _____ Check: # _____

5. COMMENTS

B. LICENSE FEE & ACCOUNTS RECEIVABLE BRANCH

- 1. Fee Category and Amount: _____
- 2. Correct Fee Paid. Submittal may be processed for:
General License _____
Revision _____

Signed _____ Date _____

1999 NOV -9 PM 4:09



HI TECH TESTING SERVICE, INC
35 FRJ DRIVE
LONGVIEW TEXAS 75602

PHONE : 903-753-1412
FAX : 903 753-6112

FAX Cover Sheet

Date: 11/04/99

Number of pages (including cover): 2

SENT TO: Name: Christi HERNANDEZ
Company: U.S. NUCLEAR REGULATORY COMMISSION
Phone Number: (817) 860-8217
FAX Number: (817) 860-8262

SENT BY: Name: Lloyd ANDERSON

DESCRIPTION:

[Lined area for description text]

R E C E I V E D
 NOV - 4 1999

NRC FORM 241 U. S. NUCLEAR REGULATORY COMMISSION APPROVED BY OMB: NO. 3150-013 EXPIRES: 6/30/99

(8-96) 10 CFR 150

REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES

(Please read the instructions on the cover sheet before completing this form.)

1. NAME OF LICENSEE (Person or firm proposing to conduct the activities described below) HI-TECH TESTING SERVICE, INC.	2. TYPE OF REPORT <input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> CHANGE <input checked="" type="checkbox"/> CLARIFICATION	3. CONTROL NUMBER (Leave Blank - Number to be assigned by NRC)
4. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be located) P.O. BOX 12568 35 FRJ DRIVE LONGVIEW, TEXAS 75607	5. LICENSEE CONTACT Lloyd Anderson	6. TELEPHONE NUMBER (Include Area Code) (903) 753-1412
	7. FACSIMILE NUMBER (Include Area Code) (903) 753-6112	

8. ACTIVITIES TO BE CONDUCTED IN NON-AGREEMENT STATES UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20

<input type="checkbox"/> WELL LOGGING	<input type="checkbox"/> LEAK TESTING AND/OR CALIBRATIONS	<input type="checkbox"/> TELE THERAPY RADIATOR SERVICE
<input type="checkbox"/> PORTABLE GAUGES	<input type="checkbox"/> OTHER (Specify)	
<input checked="" type="checkbox"/> RADIOGRAPHY	TRANSPORTATION QA PROGRAM APPROVAL NO & REV NO	REGISTERED AS USER OF PACKAGINGS (CERTIFICATE OF COMPLIANCE NO)

9. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE Rolls Royce Industrial/Power (Pacific) Ltd. 40 ALCOA - ST. CROIX NO. 1 ESTATE ANGUILLA ST. CROIX U.S. VIRGIN ISLANDS 00051-1525	10. WORK LOCATION ADDRESS (Street and Number or other location. Give as complete an address or directions as possible) ALCOA ST. CROIX NO 1 ESTATE ANGUILLA ST. CROIX US VIRGIN ISLANDS
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11. CLIENT TELEPHONE NUMBER (Include Area Code) (340) 690-3272	12. WORK LOCATION TECHNICIAN AUTHORIZED TO PERFORM WORK COREY HEARON + GERALD CARTER	13. WORK LOCATION TELEPHONE NUMBER (Include Area Code) (340) 690-3272
14. DATES SCHEDULED FROM 10-09-99 TO 11-11-99		15. NUMBER OF WORK DAYS 3
16. LOCATION REFERENCE NUMBER 001236		

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, SERVICES, OR TESTED IN NON-AGREEMENT STATES (Include description of type and quantity of radioactive material, sealed sources, or devices to be used)

Sealed Source Iridium 192 - INCL. Model 32 SIN 9988 in INCL SR-1003/N 4639
63 COPIES (2331688)

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 LO-5021	STATE TEXAS	EXPIRATION DATE 12/31/03	TOTAL USAGE DAYS TO DATE 9
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19. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)

I, THE UNDERSIGNED, HEREBY CERTIFY THAT:

- All information in this report is true and complete.
- 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.
- 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.
- 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.
- I understand that conduct of any activities not described above, including conduct of activities on states or locations different from those described above or without NRC authorization, may subject me to enforcement action, including civil or criminal penalties.

CERTIFYING OFFICER, RPO or Management Representative (Typed Printed Name and Title) Lloyd Anderson OPER. MGR / P50	SIGNATURE <i>Lloyd Anderson</i>	DATE 11/04/99
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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 AUTORIZING OFFICIAL (Typed Printed Name and Title) M. C. Hernandez Radiation Specialist	SIGNATURE <i>M. C. Hernandez</i>	DATE 11/5/99
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