

08/07/01 10:50 FAX 502 266 7577
US NRC REGION 2

HAYES TESTING
404 562 4955

08/03 '07 16:46 NO.449 01/01
NRC
0002
U001

08/03/01 15:30 FAX 502 266 7577

HAYES TESTING

NRC FORM 241 (7-1999)		U.S. NUCLEAR REGULATORY COMMISSION		APPROVED BY OMB: NO. 3182-0015		EXPIRATION DATE: 07/12/2002	
REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES, AREAS OF EXCLUSIVE FEDERAL JURISDICTION, OR OFFSHORE WATERS (Please read the instructions before completing this form)				1. TYPE OF REPORT <input type="checkbox"/> INITIAL <input type="checkbox"/> REVISION <input checked="" type="checkbox"/> CLARIFICATION			
1. NAME OF LICENSEE (Person or firm proposing to conduct the activities described below) HAYES TESTING LABORATORY, INC.				2. LICENSEE CONTACT AND TITLE DANIEL J. HAYES, SR., PRESIDENT			
3. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be located) 2521 HOLLOWAY ROAD LOUISVILLE, KY 40299				4. TELEPHONE NUMBER (Include Area Code) 502/266-9729		5. FACSIMILE NUMBER (Include Area Code) 502/266-7577	
6. ACTIVITIES TO BE CONDUCTED 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"/> THERAPY/RADIATION SERVICE <input type="checkbox"/> PORTABLE GAUGES <input type="checkbox"/> OTHER (Specify) <input checked="" type="checkbox"/> RADIOGRAPHY REGISTERED AS USER OF PACKAGING (CERTIFICATE OF COMPLIANCE NUMBER)				7. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION (Street and Number or other location. Give as complete an address or directions as possible.) TRANSMONTAIGNE 20 JACKSON ST. NEW ALBANY, IN 47150			
8. CLIENT NAME ADDRESS, CITY, COUNTY, STATE, ZIP CODE PITTSBURGH TANK & TOWER P.O. BOX 36 HENDERSON, KY 42420				10. CLIENT TELEPHONE NUMBER (Include Area Code) 502-826-9000		11. WORK LOCATION TELEPHONE NUMBER (Include Area Code) 812/948-2458	
12. DATES SCHEDULED		13. NUMBER OF WORK DAYS		14. ADD		15. LOCATION REFERENCE NUMBER	
FROM 8-8-2001 TO 8-8-2001		1				NUMBER TO BE ASSIGNED BY NRC 001267	
17. LIST ADDITIONAL WORK SITES ON SEPARATE SHEET(S) TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 3-16 ABOVE							
17. LIST RADIOACTIVE MATERIAL, WHICH WILL BE POSSESSED, USED, INSTALLED, SERVICED, OR TESTED (Include description of type and quantity of radioactive material, sealed sources, or devices to be used.) IR-192 MAX. CURIES 100							
18. AGREEMENT STATE SPECIAL LICENSE WHICH AUTHORIZES THE LICENSEE TO CONDUCT ACTIVITIES WHICH ARE THE SAME, EXCEPT FOR LOCATION OF USE, AS DESCRIBED IN ITEM 6 ABOVE. (File copy of the special license with supporting the initial NRC Form 241.)				LICENSE NUMBER 201-168-05		STATE KY	
						EXPIRATION DATE 7-31-02	
19. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)							
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 instructions of this form, 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 120 days in calendar year, with the exception of work conducted in offshore waters, which is authorized for an unlimited period of time in the 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. 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 - NRC or Management Representative (Name and Title) DANIEL J. HAYES, SR., PRESIDENT				SIGNATURE [Signature] DATE 8-3-2001			
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		Signature Janice H. Kirby Licensing Assistant		Signature [Signature]		DATE 8/3/01	
NRC FORM 241						TOTAL LICENSE - DAYS TO DATE 555	

Asks knowledge of Janice Kirby 8/7/01