

NRC FORM 241 (7-1999)		U.S. NUCLEAR REGULATORY COMMISSION		APPROVED BY OMB: NO. 3150-0013 Estimated burden per response to comply with this mandatory collection request: 15 minutes. This notification is required so that NRC may schedule inspection of the activities to ensure that they are conducted in accordance with requirements for protection of the public health and safety. Send comments regarding burden estimate to the Records Management Branch (T-6 E6), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to bjs1@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0013), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.		EXPIRES: 07/31/2002	
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. NAME OF LICENSEE (Person or firm proposing to conduct the activities described below) Daves & Kelly, Inc. d h a A Jacobson & Associates				2. TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REVISION <input type="checkbox"/> CLARIFICATION			
3. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be located) PO Box 14748 Louisville, KY 40214				4. LICENSEE CONTACT AND TITLE Michael S. Kelly, CHP			
				5. TELEPHONE NUMBER (Include Area Code) (502) 231-5621		6. FACSIMILE NUMBER (Include Area Code) (502) 361-2486	
7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20 <input type="checkbox"/> WELL LOGGING <input checked="" type="checkbox"/> LEAK TESTING AND/OR CALIBRATIONS <input type="checkbox"/> TELETHERAPY/IRRADIATOR SERVICE <input type="checkbox"/> PORTABLE GAUGES <input checked="" type="checkbox"/> OTHER (Specify) ⇒ Dose Calibrator QA & Shielding Integrity <input type="checkbox"/> RADIOGRAPHY ⇒ REGISTERED AS USER OF PACKAGING (CERTIFICATES OF COMPLIANCE NUMBERS)							
8. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE See Attached List				9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION (Street and Number or other location. Give as complete an address or directions as possible.) See Attached Client List			
				10. CLIENT TELEPHONE NUMBER (Include Area Code)		11. WORK LOCATION TELEPHONE NUMBER (Include Area Code)	
12. DATES SCHEDULED		13. NUMBER OF WORK DAYS		14. ADD		15. DELETE	
FROM See Attached		TO Client List		For 2002		NUMBER TO BE ASSIGNED BY NRC	
LIST ADDITIONAL WORK SITES ON SEPARATE SHEET(S) TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 9-16 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.) C0-57, Ba-133, Cs-137 E-vials, C0-57 Flood Sources, Generally Licensed Sources.							
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 9. ABOVE. (Four copies of the specific license must accompany the initial NRC Form 241.)				LICENSE NUMBER 201-175-55		STATE KY	
				EXPIRATION DATE 3/31/2002			
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 180 days in calendar year. With the exception of work conducted in off-shore 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 - RSO or Management Representative (Name and Title) Michael S. Kelly, President & RSO				SIGNATURE Michael S. Kelly		DATE 11/7/2002	
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		REVII Janice H. Kirby Licensing Assistant		SIGNATURE Janice H. Kirby		DATE 11/24/02	
						TOTAL USAGE - DAYS TO DATE	
NRC FORM 241 (7-1999)						PRINTED ON RECYCLED PAPER	

ATTACHMENT TO FORM 241
2002 Client List

#9 and 10 Client Name	Address	Date Worked	Date Scheduled	NRC LRN
Kings Daughter's Hospital	One King's Daughters' Way Madison, IN 47250			
Medical Center of Southern Indiana	2200 Market Street Charlestown, IN 47111			
Harrison County Hospital	Corydon, IN			
Washington County Memorial Hospital	Salem, IN			
Scott County Hospital	Scottsburg, IN			
Clark Memorial Hospital	Jeffersonville, IN			
River City Cardiology	207 Sparks Ave, Suite 104 Jeffersonville, IN 47130			
ESSROC Materials	Speed Plant, Hwy 31 North Speed, Indiana 47172			
Cardiovascular Associates Of Southern Indiana	2109 Green Valley RD New Albany, IN 47150			

Form 241;

Item 10: Work Location same as mailing address

Item 11 & 13: Not available at this time

Note: USNRC will be notified by facsimile transmission 3 days prior to the work date
if/when dates of work are determined for these facilities.

Revised 1/3/02

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COMMONWEALTH OF KENTUCKY
RADIOACTIVE MATERIAL LICENSE

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1. LICENSEE AND 2. ADDRESS

DAVES & KELLY INC
DBA A JACOBSON & ASSOCIATES
BOX 14748 4709 SOUTHERN PKWY
LOUISVILLE, KY 40214

ATTENTION: MICHAEL S. KELLY, MS CHP
TELEPHONE: 502-485-0457

PURSUANT TO KRS 211.842 ET SEQ., THE KENTUCKY CABINET FOR HUMAN
RESOURCES REGULATIONS, 902 KAR 100, AND IN RELIANCE ON STATEMENTS
AND REPRESENTATIONS HERETOFORE MADE BY THE LICENSEE, A LICENSE IS
HEREBY ISSUED TO RECEIVE, ACQUIRE, OWN, POSSESS AND TRANSFER
RADIOACTIVE MATERIAL LISTED BELOW; AND TO USE SUCH RADIOACTIVE
MATERIAL FOR THE PURPOSE(S) AND AT THE PLACE(S) DESIGNATED BELOW.
THIS LICENSE IS SUBJECT TO ALL APPLICABLE RULES, REGULATIONS, AND
ORDERS OF THE CABINET FOR HEALTH SERVICES, NOW OR HEREINAFTER IN
EFFECT AND TO ANY CONDITIONS SPECIFIED BELOW.

3. LICENSE NUMBER: 201-175-55
AMENDMENT NO. 30
4. EXPIRATION DATE: MARCH 31, 2002
5. REVIEWER: 12

6. LICENSED MATERIAL	7. FORM	8. POSSESSION LIMIT
A. ANY RADIOACTIVE MATERIAL	A. ANY	A. 1 MILLICURIE
B. TECHNETIUM 99M	B. PERTECHNETATE	B. 150 MILLICURIES
C. CESIUM 137	C. SEALED SOURCE (TECH OPS MODEL 77302)	C. NO SINGLE SOURCE TO EXCEED 165 MILLICURIES

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D. COBALT 57	D. SEALED SOURCE	D. NO SINGLE SOURCE TO EXCEED 5 MILLICURIES
E. BARIUM 133 CESIUM 137 COBALT 60 TIN 113	E. SEALED SOURCE	E. NO SINGLE SOURCE TO EXCEED 3 MILLICURIES

9. AUTHORIZED USE

- A. THE LICENSEE IS AUTHORIZED TO PERFORM TESTS FOR LEAKAGE AND/OR CONTAMINATION UPON SEALED SOURCES CONTAINING RADIOACTIVE MATERIAL AND UPON DEVICES WHICH CONTAIN SUCH SEALED SOURCES.
- B. SHIELDING EVALUATION MEASUREMENTS IN RADIOLOGICAL EXAM ROOMS.
- C. FOR USE IN TECHNICAL OPERATIONS MODEL 773 CALIBRATION UNIT FOR CALIBRATION OF RADIATION MEASURING INSTRUMENTS.
- D AND E. INSTRUMENT QUALITY ASSURANCE TESTING.

CONDITIONS:

- 10. THE LICENSEE SHALL COMPLY WITH THE PROVISIONS OF THE KENTUCKY CABINET FOR HEALTH SERVICES ADMINISTRATIVE RADIATION REGULATIONS, 902 KAR 100.
- 11. RADIOACTIVE MATERIAL SHALL BE USED AT THE UNIVERSITY OF LOUISVILLE, RADIATION SAFETY OFFICE, COMMONS BUILDING, LOUISVILLE, KENTUCKY.

RADIOACTIVE MATERIAL DESCRIBED IN ITEM 6.C. SHALL BE USED AT HAYES TESTING LABORATORY, 2521 HOLLOWAY ROAD, HOLLOWAY INDUSTRIAL PARK, LOUISVILLE, KENTUCKY.
- 12. COPIES OF RECORDS REQUIRED PURSUANT TO 902 KAR 100 OR CONDITIONS OF THE LICENSE SHALL BE MAINTAINED FOR INSPECTION BY THE CABINET AT 2521 HOLLOWAY ROAD, HOLLOWAY INDUSTRIAL PARK, LOUISVILLE, KENTUCKY.

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13. RADIOACTIVE MATERIAL MAY ALSO BE USED AT TEMPORARY JOB SITES, IN AREAS NOT UNDER EXCLUSIVE FEDERAL JURISDICTION, ANYWHERE IN THE COMMONWEALTH OF KENTUCKY WHERE THE CABINET MAINTAINS JURISDICTION FOR REGULATING THE USE OF RADIOACTIVE MATERIAL.
14. RADIOACTIVE MATERIAL SHALL BE USED BY:

JODI L. DAVES
SARAH C. HUGHES
MICHAEL KELLY
15. THE RADIATION SAFETY OFFICER FOR THE ACTIVITIES AUTHORIZED BY THIS LICENSE IS MICHAEL S. KELLY .
16. TESTS FOR LEAKAGE AND/OR CONTAMINATION SHALL BE PERFORMED ONLY AT CUSTOMER'S FACILITIES BY THE LICENSEE FOR EVALUATION AT THE UNIVERSITY OF LOUISVILLE, COMMONS BUILDING, LOUISVILLE, KENTUCKY.
17. TESTS FOR LEAKAGE AND/OR CONTAMINATION SHALL BE CAPABLE OF DETECTING THE PRESENCE OF 0.005 MICROCURIES OF RADIOACTIVE MATERIAL ON THE TEST SAMPLE OR, IN THE CASE OF RADIUM, THE ESCAPE OF RADON AT A RATE OF 0.001 MICROCURIES PER TWENTY-FOUR HOURS.
18. THE LICENSEE SHALL PROVIDE THE CUSTOMER A WRITTEN REPORT OF LEAK TEST RESULTS IN TERMS OF MICROCURIES.
19. SEALED SOURCES CONTAINING RADIOACTIVE MATERIAL SHALL NOT BE OPENED OR REMOVED FROM THEIR RESPECTIVE SOURCE HOLDERS BY THE LICENSEE.
20. THE LICENSEE SHALL CONDUCT A PHYSICAL INVENTORY EVERY SIX (6) MONTHS TO ACCOUNT FOR ALL SEALED SOURCES RECEIVED AND POSSESSED UNDER THE LICENSE. THE RECORDS OF THE INVENTORIES SHALL BE MAINTAINED FOR FIVE (5) YEARS FROM THE DATE OF THE INVENTORY FOR INSPECTION BY THE CABINET, AND SHALL INCLUDE THE RADIONUCLIDES, QUANTITIES, MANUFACTURER'S NAME AND MODEL NUMBERS, LOCATION OF SEALED SOURCES, AND THE DATE OF THE INVENTORY.
21. INSTRUMENTS SHALL BE CONSIDERED CALIBRATED ONLY IF THE INSTRUMENTS READING ARE WITHIN PLUS OR MINUS TEN PERCENT OF THE CALCULATED VALUE.

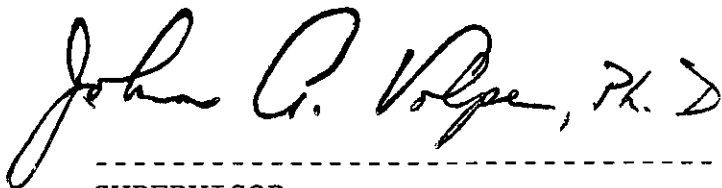
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22. THE LICENSEE MAY TRANSPORT RADIOACTIVE MATERIAL, OR DELIVER RADIOACTIVE MATERIAL TO A CARRIER FOR TRANSPORT, IN ACCORDANCE WITH THE PROVISIONS OF 902 KAR 100:070, AND OTHER DEPARTMENTS OF THE COMMONWEALTH OF KENTUCKY HAVING JURISDICTION.
23. EXCEPT AS SPECIFICALLY PROVIDED OTHERWISE IN THIS LICENSE, THE LICENSEE SHALL CONDUCT ITS PROGRAM IN ACCORDANCE WITH THE STATEMENTS, REPRESENTATIONS, AND PROCEDURES CONTAINED IN THE DOCUMENTS, INCLUDING ANY ENCLOSURES, LISTED BELOW. THE CABINET FOR HEALTH SERVICES REGULATIONS, 902 KAR 100, SHALL GOVERN UNLESS STATEMENTS, REPRESENTATIONS, AND PROCEDURES IN THE LICENSEE'S APPLICATION AND CORRESPONDENCE ARE MORE RESTRICTIVE THAN THE REGULATION.
- A. APPLICATION DATED JULY 24, 1997, SIGNED BY MICHAEL S. KELLY, PRESIDENT.
- B. RADIATION SAFETY MANUAL DATED JULY 16, 1997.
- C. LETTER DATED OCTOBER 30, 1997, SIGNED BY JODI L. DAVES, CONSULTING RADIATION PHYSICIST.



SUPERVISOR
RADIATION HEALTH & TOXIC
AGENTS BRANCH

MARCIA R. MORGAN

SECRETARY
CABINET FOR HEALTH SERVICES

DATE ISSUED MAY 25, 2001