

NRC FORM 241
(7-1999)

U.S. NUCLEAR REGULATORY COMMISSION

APPROVED BY NRC: NO. 2455-2013

EXPIRES: 07/31/2002

Estimated burden for responses to comply with this mandatory collection request: 15 minutes. This notification is required so that NRC may schedule inspection of the collection to ensure that it is conducted in accordance with requirements for protection of the public health and safety. Send comments regarding burden estimates to the Records Management Branch (P-4 204), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0004, or by Internet e-mail to: rmbr@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NE-08-10292 (3125-0013), Office of Management and Budget, Washington, DC 20503. If a review is 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.

**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) Geotechnical & Environmental Consultants		2. TYPE OF REPORT <input type="checkbox"/> INITIAL <input type="checkbox"/> REVISION <input checked="" type="checkbox"/> CLARIFICATION	
3. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be reached) 5021 Mercer University Drive Suite D-2 Macon, GA 31210		4. LICENSEE CONTACT AND TITLE George Ken Lawrence (RSO)	
		5. TELEPHONE NUMBER (Include Area Code) (478) 757-1606	6. FACSIMILE NUMBER (Include Area Code) (478) 757-1608
7. 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"/> TELETHERAPY/RADIATOR SERVICE <input checked="" type="checkbox"/> PORTABLE GAUGES <input type="checkbox"/> OTHER (Specify) <input type="checkbox"/> RADIOGRAPHY <input type="checkbox"/> REGISTERED AS USER OF PACKAGING (CERTIFICATES OF COMPLIANCE NUMBERS)			
8. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE W.L. Hailey & Company, Inc. 2971 Kraft Drive P.O. Box 40646 Nashville, TN 37204-0646		9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION (Street and Number or other location. Give an exemption in address or directions as possible.) Robins AFB Flight Line, North & West of Runway	
		10. CLIENT TELEPHONE NUMBER (Include Area Code) (615) 255-3161	11. WORK LOCATION TELEPHONE NUMBER (Include Area Code) (478) 923-6069
12. DATES SCHEDULED FROM March 25-02 TO March 29-02		13. NUMBER OF WORK DAYS 5	14. ADD 15. DELETE 16. LOCATION REFERENCE NUMBER NUMBER TO BE ASSIGNED BY NRC 000516
17. LIST ADDITIONAL WORK SITES ON SEPARATE SHEET(S) TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 8-16 ABOVE. 17. LIST RADIOACTIVE MATERIAL, WHICH WILL BE POSSESSED, USED, INSTALLED, SERVICED, OR TESTED (Include description of type and quantity of radioactive material, sealed source, or device to be used.) Radioactive Material Activity-CS-137 Troxler Moisture & Density Gauge .30 GBQ (8.000mCi AM--241:BE 1.48 GBQ (40.000mCi) 3400 Series			
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 GA 1388-1	STATE GA
		EXPIRATION DATE 12/31/2004	
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 100 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) Janice H. Kirby Licensing Assistant		SIGNATURE <i>Janice H. Kirby</i>	DATE 3/20/02
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