



ABLE TESTING & INSPECTION INC.
PO BOX 158
HOWES CAVE, NY 12092
TELE 518-357-9079
FAX - 518-357-4683



DATE:

10/27/03

TO:

Nuclear Regulatory Commission

ATTN:

Cheryl Villar

FROM:

L. Chaunin

NUMBER OF PAGES IN THIS TRANSMITTAL 1 (NOT INCLUDING THIS COVER SHEET)

PLEASE CONTACT 518-357-9079 FOR INCOMPLETE TRANSMISSION

COMMENTS:

Date Charges on Form 241 for
vires project -

Deletions done
days of usage down
from 65 → 3

⑤ 10/29/03

ORIGINAL WILL FOLLOW BY:

US MAIL

OVERNIGHT CARRIER

OTHER

SEP-30-2003 14:26

USNRC 1 KOP PA

E10 337 5269 P.01/01

NRC FORM 241 (7-1999)		U.S. NUCLEAR REGULATORY COMMISSION		APPROVED BY OMB: NO. 3180-0013 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-8 26), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by Internet e-mail to b1@nrc.gov , and to the Desk Officer, Office of Information and Regulatory Affairs, NECR-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: 07/31/2003	
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) Able Testing & Inspection Inc.				2. TYPE OF REPORT X INITIAL REVISION <input type="checkbox"/> CLARIFICATION			
3. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be reached) PO Box 158 Howes Cave, NY 12092				4. LICENSEE CONTACT AND TITLE Michael Chauvin Radiation Safety Officer			
				5. TELEPHONE NUMBER (Include Area Code) 518-357-9079		6. FACSIMILE NUMBER (Include Area Code) 518-357-4683	
7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20 WELL LOGGING <input type="checkbox"/> LEAK TESTING AND/OR CALIBRATIONS <input type="checkbox"/> TELETHERAPY/RADIATION SERVICE <input type="checkbox"/> PORTABLE GAUGES <input type="checkbox"/> OTHER (Specify) <input checked="" type="checkbox"/> <u>XX RADIOGRAPHY</u> <input checked="" type="checkbox"/> REGISTERED AS USER OF RADIOACTIVE MATERIALS OF THIS LICENSE NUMBER <u> </u>							
8. CLIENT NAME ADDRESS CITY/COUNTY STATE ZIP CODE Vermont Gas Systems, Inc 85 Swift Street So. Burlington, VT 05403				9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION (Street and Number or other location. Give as completely as address or directions as possible.) Gas Transmissionlines on Rheume Rd, Highgate, VT & Colchester, VT (College Parkway)			
				10. CLIENT TELEPHONE NUMBER (Include Area Code) 802-863-8899		11. WORK LOCATION TELEPHONE NUMBER (Include Area Code) 802-863-8899	
12. DATES SCHEDULED		13. NUMBER OF WORK DAYS		14. ADD		15. DELETE	
FROM 10/6/03 TO 12/9/03		103				106-10/14/03 1015, 10/17-10/20 10/23-12/1/03	
						NUMBER TO BE ASSIGNED BY NRC: 001037	
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 sources, or devices to be used.) Iridium 192 Source in Amersham 6600 Exposure Device							
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 255503760		STATE NY	
						EXPIRATION DATE 11/30/2003	
19. CERTIFICATION (MUST BE COMPLETED BY APPLICANT) 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: NRC or Management Representative (Name and Title) Lynn Chauvin, President				SIGNATURE <i>Lynn Chauvin</i>		DATE 9/25/03	
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 REVIEWING SPECIAL AGENT (Name and Title) <i>Judith A. Gault</i>				DATE 9/30/03		TOTAL NUMBER OF COPIES TO DATE 3	

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TOTAL F.01



STATE OF NEW YORK DEPARTMENT OF LABOR
DIVISION OF SAFETY AND HEALTH
RADIOLOGICAL HEALTH UNIT
State Office Campus
Building 12 - Rm. 169
Albany, NY 12240
(518) 457-1202

DATE: 10/6/03

ABLE TESTING & INSPECTION, INC.
1286 PANGBURN ROAD
SCHENECTADY NY 12306

LICENSE NUMBER: 2555-3760

ACKNOWLEDGEMENT OF A TIMELY LICENSE RENEWAL

To Radioactive Materials License Holder

We have received your request for renewal of the above referenced Radioactive Materials License and the required fee.

Since the request is deemed timely, your license will continue in effect until the renewal process is completed by the Department.

This acknowledgement does not preclude the Department from asking that further information or documentation be submitted in support of the license renewal.

D. Powers