

FEE INFORMATION

Company Name: Tamko Roofing Products, Inc.
Registration Number: GL-700152-2
Payment by Check Number: 356740
Amount Received: \$620
Fee Category: 3Q
Date Received: 4/28/04
Date Completed: 4/28/04
Completed by: Brenda Brown

Information in this record was deleted
in accordance with the Freedom of Information
Act, exemptions 7F
FOIA-PA-2011-0313

NMSS10

B-2

Title: **ROUND 2**

Description: **MARCH 16, 2004**

| Rec. Code | Recipient Name | Held | Process | Printed | City | St. | Anniv. | Letter Date | Fee Category Cd | Fee Type | Due Date | Recv'd D |
|-----------|----------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------|-----|--------|-------------|-----------------|----------|------------|----------|
| 700152 | TAMKO ROOFING PRODUCTS INC | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | JOPLIN | MO | JAN | 03/26/2004 | 3Q | Paid | 05/10/2004 | 00/00/00 |



CH
356740
620-00

April 5, 2004

U.S. Bank
Accounts Receivable Team
U.S. Nuclear Regulatory Commission
P.O. Box 74514
St. Louis, MO 63195-4514

To Whom It May Concern:

Attached are the annual registration forms and fees for the Nuclear Devices located at our facility (b)(7)(F), Missouri at (b)(7)(F).

If you have any questions or concerns, please don't hesitate to contact me at (417) 624-6644 or Sara Cooper, on my staff.

Best regards,

For TAMKO Roofing Products Inc.

A handwritten signature in black ink, appearing to read "PR/DR".

Peter Reich
General Manager

Cc: Bob Hockman, Steve Szczepanik, Sara Cooper

Certified Mail: 7003 0500 0005 1848 4645



GL-700152-2
03/26/2004
NRC FORM 664
01 - 2001
10 CFR 31.5

SECTION 1
PAGE 1 of 2

U.S. NUCLEAR REGULATORY COMMISSION

GENERAL LICENSEE REGISTRATION

APPROVED BY OMB: NO. 3150-0198

EXPIRES: 01/31/2004

Estimated burden per response to comply with this mandatory collection request: 20 minutes. NRC will use this information to track general licensees and their devices to ensure a higher level of device accountability. 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 bjst@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0000), 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.

Complete all six sections of this registration form. If any of the preprinted information is incorrect, provide the changes in the applicable boxes. USE CAPITAL LETTERS.

General License

SECTION 1 - GENERAL LICENSEE INFORMATION**Registration Number**

GL-700152-2 01

Enter the company name and the street address/physical location of use for your device(s). For portable devices, specify the primary storage location. Do not use a P.O. Box address.

Company Name: TAMKO ROOFING PRODUCTS INC

[illegible]

Department:

[illegible]

Address Line 1: (b)(7)(F)

[illegible]**Address Line 2:**[illegible]

City:

(b)(7)(F)

[illegible]

State: MO

| | |
|--|--|
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Zip Code:

(b)(7)(F)

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| For NRC Use Only <i>(Do not write here)</i> | | | | Category: | | | |
| | | | | Packet Receipt Date (MMDDYYYY) | | | |
| | | | | | | | |
| | | | | Accession Number: | | | |
| | | | | | | | |



GL-700152-2
03/26/2004

SECTION 1
PAGE 2 of 2

SECTION 1 - GENERAL LICENSEE INFORMATION (Continued)

Enter the name, telephone number and title of the person who is the responsible individual for the device(s).

Last Name: REICH ~~DR~~

Reich

First Name: PETER

Middle Initial:

Telephone: (417) 624-6644

Extension: 3500

Title: GENERAL MFG MANAGER

Enter the mailing address where correspondence regarding your device(s) should be sent.
This address should be specific to the use or storage location of your device(s).

Department:

Address Line 1: (b)(7)(F)

Address Line 2:

City: (b)(7)(F)

State: MO

Zip Code:

(b)(7)(F)

-





GL-700152-2
03/26/2004

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2
PAGE 1 of 3

Our records indicate that you have these devices. Please update the information as necessary.

NRC Device Key **595577**

Manufacturer Name: NDC INFRARED ENGINEERING, INC.

[illegible]

Manufacturer License Number: ~~1933-20-01~~

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| 1 | 9 | 3 | 3 | - | 1 | 9 | - | 6 | L | | | |
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Device Model: 301

[illegible]

Device Serial Number: (b)(7)(F)

[illegible]

Isotope: (b)(7)(F)

Receipt Date: ~~03/31/2000~~

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| 1 | 2 | 2 | 8 | 1 | 9 | 9 | 9 |
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☐ Not in possession of device
(Also complete Section 4.)

MM DD YYYY

NRC Device Key ~~47888~~ 21506

Manufacturer Name: GHMARTAVEGA CORPORATION

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| F | I | F | E | | C | O | R | P | O | R | A | T | I | O | N | | | | | | | |
|---|---|---|---|--|---|---|---|---|---|---|---|---|---|---|---|--|--|--|--|--|--|--|

Manufacturer License Number: 34-08639-03G

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| 3 | 5 | - | 1 | 5 | 5 | 1 | 1 | - | 0 | 3 | 6 | |
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Device Model: ~~-SFP-~~

[illegible]

Device Serial Number: (b)(7)(F)

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| $b_1(7)(F)$ |
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Isotope: (b)(7)(F)

Receipt Date: ~~02/15/1995~~

b)(7)(F)

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| 0 | 1 | 1 | 5 | 1 | 9 | 8 | 3 |
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☐ Not in possession of device
(Also complete Section 4.)

MM DD YYYY



03/26/2004

SECTION 2

PAGE 2 of 3

Manufacturer Name: OHMART/VEGA CORPORATION

[illegible][illegible]

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| O | n | m | a | r | t | | D | e | n | s | a | r | t | | S | t | - | n | - | | | | |
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b)(7)(F)

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| 0 | 7 | 1 | 5 | 1 | 9 | 9 | 3 |
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☐ Not in possession of device
(Also complete Section 4.)

MM DD YYYY

Manufacturer Name: OHMART/VEGA CORPORATION

[illegible]

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| 0 | 3 | 2 | 1 | 2 | 3 | 1 | 0 | 0 | 3 | 6 | | |
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b(7)(F)

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| 0 | 1 | 1 | 5 | 1 | 9 | 9 | 5 |
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☐ Not in possession of device
(Also complete Section 4.)

MM DD YYYY



03/26/2004

SECTION 2

PAGE 3 of 3

21506

[illegible][illegible][illegible][illegible]

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| 0 | 1 | 1 | 5 | 1 | 9 | 8 | 3 |
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☐ Not in possession of device
(Also complete Section 4.)

MM DD YYYY

35409

[illegible]

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| 0 | 4 | 1 | - | 0 | 8 | 9 | 7 | - | 1 | | | |
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| 0 | 9 | 1 | 5 | 1 | 9 | 8 | 4 |
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☐ Not in possession of device
(Also complete Section 4.)

MM DD YYYY



GL-700152-2
03/26/2004

SECTION 5 - CERTIFICATION

SECTION 5
PAGE 1 of 1

I hereby certify that:

- A. All information contained in this registration is true and complete to the best of my knowledge and belief.
- B. A physical inventory of the devices subject to registration has been completed, and the device information on this form has been checked against the device labeling.
- C. I am aware of the requirements of the general license, provided in 10 CFR 31.5.

(Copies of applicable regulations may be viewed at the NRC web site at www.nrc.gov/NRC/CFR/index.html)

Mike Reed

4/2/04

SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1)

DATE

WARNING: FALSE STATEMENTS MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL ASPECTS. 18 U.S.C. SECTION 1001 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY WRONG STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER IN ITS JURISDICTION.



03/26/2004

SECTION 6 - DEVICES NOT SUBJECT TO REGISTRATION

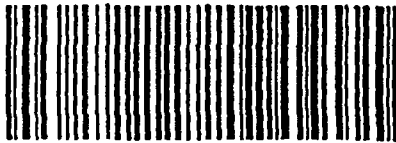
SECTION 6

PAGE 1 of 1

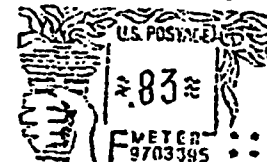


TAMKO
ROOFING PRODUCTS

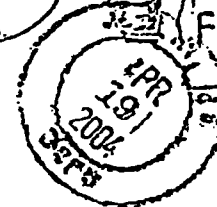
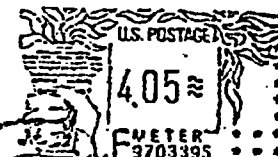
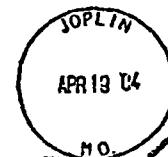
CERTIFIED MAIL



7003 0500 0005 1848 4645



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U.S. Nuclear Regulatory Commission
P.O. Box 954514
St. Louis, MO 63195-4514



63195-4514

