

13-16501-06
230-18278

NRC Form 313 I (12-81) 10 CFR 30		U.S. NUCLEAR REGULATORY COMMISSION	
APPLICATION FOR BYPRODUCT MATERIAL LICENSE INDUSTRIAL		1. APPLICATION FOR: (Check and/or complete as appropriate)	
See attached instructions for details. Completed applications are filed in duplicate with the Division of Fuel Cycle and Material Safety, Office of Nuclear Material Safety, and Safeguards, U.S. Nuclear Regulatory Commission, Washington, DC 20555 or applications may be filed in person at the Commission's office at 1717 H Street, NW, Washington, D. C. or 7915 Eastern Avenue, Silver Spring, Maryland.		<input checked="" type="checkbox"/> a. NEW LICENSE <input type="checkbox"/> b. AMENDMENT TO: LICENSE NUMBER <input type="checkbox"/> c. RENEWAL OF: LICENSE NUMBER	
2. APPLICANT'S NAME (Institution, firm, person, etc.) CHEMICAL SERVICE LABORATORY INC. TELEPHONE NUMBER: AREA CODE - NUMBER EXTENSION		3. NAME AND TITLE OF PERSON TO BE CONTACTED REGARDING THIS APPLICATION E. V. ELDER TELEPHONE NUMBER: AREA CODE - NUMBER EXTENSION 812-282-1354	
4. APPLICANT'S MAILING ADDRESS (Include Zip Code) (Address to which NRC correspondence, notices, bulletins, etc., should be sent.) 3408 INDUSTRIAL PKW JEFFERSONVILLE, IN. 47130		5. STREET ADDRESS WHERE LICENSED MATERIAL WILL BE USED (Include Zip Code) 3408 INDUSTRIAL PKW JEFFERSONVILLE, IN. 47130	
(IF MORE SPACE IS NEEDED FOR ANY ITEM, USE ADDITIONAL PROPERLY KEYED PAGES.)			
6. INDIVIDUAL(S) WHO WILL USE OR DIRECTLY SUPERVISE THE USE OF LICENSED MATERIAL (See Items 16 and 17 for required training and experience of each individual named below)			
FULL NAME		TITLE	
a. E. V. ELDER		Gen. Mgr.	
b.			
c.			
7. RADIATION PROTECTION OFFICER E. V. ELDER		Attach a resume of person's record and experience in radiation protection under Items 16 and 17 and describe his responsibilities under Item 17. <div style="border: 1px solid black; padding: 5px; width: fit-content;"> Applicant... 10660 Check No... 1110/SL Amount/Fee... \$11.10/SL Type of Fee... License Date Check... 1/31/83 Received by... Brown </div>	
8. LICENSED MATERIAL			
LINE NO.	ELEMENT AND MASS NUMBER A	CHEMICAL AND/OR PHYSICAL FORM B	NAME OF MANUFACTURER AND MODEL NUMBER (If Sealed Source) C
(1)	Ni 63	FOIL	TRACOR 113550-3220
(2)			
(3)			
(4)			
DESCRIBE USE OF LICENSED MATERIAL E			
(1)	LOS CHROMATOGRAPH - TRACOR 550		
(2)			
(3)			
(4)			

RECEIVED BY LPMS

Date... 1/31/83

Log... Jan 19 11

By... Brown

Orig. To...

Action Comp... 2/2/83

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9. STORAGE OF SEALED SOURCES

LINE NO.	CONTAINER AND/OR DEVICE IN WHICH EACH SEALED SOURCE WILL BE STORED OR USED. A.	NAME OF MANUFACTURER B.	MODEL NUMBER C.
(1)	TEACOR GAS CHROMATOGRAPH	TEACOR	550
(2)			
(3)			
(4)			

10. RADIATION DETECTION INSTRUMENTS

LINE NO.	TYPE OF INSTRUMENT A.	MANUFACTURER'S NAME B.	MODEL NUMBER C.	NUMBER AVAILABLE D.	RADIATION DETECTED (alpha, beta, gamma, neutron) E.	SENSITIVITY RANGE (milliroentgens/hour or counts/minute) F.
(1)						
(2)						
(3)						
(4)						

11. CALIBRATION OF INSTRUMENTS LISTED IN ITEM 10

☐ a. CALIBRATED BY SERVICE COMPANY

NAME, ADDRESS, AND FREQUENCY

☐ b. CALIBRATED BY APPLICANT

Attach a separate sheet describing method, frequency and standards used for calibrating instruments.

12. PERSONNEL MONITORING DEVICES

TYPE (Check and/or complete as appropriate.) A.	SUPPLIER (Service Company) B.	EXCHANGE FREQUENCY C.
<input type="checkbox"/> (1) FILM BADGE <input type="checkbox"/> (2) THERMOLUMINESCENCE DOSIMETER (TLD) <input type="checkbox"/> (3) OTHER (Specify): _____ _____ _____		<input type="checkbox"/> MONTHLY <input type="checkbox"/> QUARTERLY <input type="checkbox"/> OTHER (Specify): _____ _____ _____

13. FACILITIES AND EQUIPMENT (Check where appropriate and attach annotated sketch(es) and description(s).)

- ☒ a. LABORATORY FACILITIES, PLANT FACILITIES, FUME HOODS (Include filtration, if any), ETC.
☐ b. STORAGE FACILITIES, CONTAINERS, SPECIAL SHIELDING (fixed and/or temporary), ETC.
☐ c. REMOTE HANDLING TOOLS OR EQUIPMENT, ETC.
☐ d. RESPIRATORY PROTECTIVE EQUIPMENT, ETC.

14. WASTE DISPOSAL

a. NAME OF COMMERCIAL WASTE DISPOSAL SERVICE EMPLOYED

b. IF COMMERCIAL WASTE DISPOSAL SERVICE IS NOT EMPLOYED, SUBMIT A DETAILED DESCRIPTION OF METHODS WHICH WILL BE USED FOR DISPOSING OF RADIOACTIVE WASTES AND ESTIMATES OF THE TYPE AND AMOUNT OF ACTIVITY INVOLVED. IF THE APPLICATION IS FOR SEALED SOURCES AND DEVICES AND THEY WILL BE RETURNED TO THE MANUFACTURER, SO STATE.

CHEMICAL SERVICE LABORATORY, INC.

: 3408 INDUSTRIAL PARKWAY
: P. O. Box 220
: JEFFERSONVILLE, INDIANA 47130
: 812-282-1359

ADDITIONAL INFORMATION

FACILITIES & EQUIPMENT

No special shielding, hoods, etc. are required for operation of the device. One area will be set aside and properly posted for work with foil. Only persons named in item #4 of this application will work with the material described in item #6B.

RADIATION PROTECTION PROGRAM

Instrument will be regulated at all times to prevent foil temperatures above 400°C. The instruction manual will be used as a guide for handling material to prevent low level contamination of lab. When detector is not being used it will be kept in a locked storage area labeled, "Caution -- Radioactive Material."

WASTE DISPOSAL

No waste is anticipated. Detector will be returned to Tracor, Inc. for all maintenance.

LEAK TEST MONITORING

Safety wipe test kits (Tracor Catalog No. 1111-31 0001) will be used according to the manufactures instructions. This kit will then be submitted to Tracor for analysis and a written report will be filed.

RESUME OF INDIVIDUAL USING AND/OR SUPERVISING THE USE OF LICENSED MATERIAL.

Eugene V. Elder - (B.S. Chemistry) Work related experience using Tracor 550 since initial purchase - trained by David Whitfield during early operation of instrument in use of Ni-63 detector as per operating manuals from Tracor.

CONTROL 073 9 2

INFORMATION REQUIRED FOR ITEMS 15, 16 AND 17

Describe in detail the information required for Items 15, 16 and 17. Begin each item on a separate page and key to the application as follows:

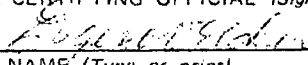
15. **RADIATION PROTECTION PROGRAM.** Describe the radiation protection program as appropriate for the material to be used including the duties and responsibilities of the Radiation Protection Officer, control measures, bioassay procedures (if needed), day-to-day general safety instruction to be followed, etc. If the application is for sealed source's also submit leak testing procedures, or if leak testing will be performed using a leak test kit, specify manufacturer and model number of the leak test kit.
16. **FORMAL TRAINING IN RADIATION SAFETY.** Attach a resume for each individual named in Items 6 and 7. Describe individual's formal training in the following areas where applicable. Include the name of person or institution providing the training, duration of training, when training was received, etc.
 - a. Principles and practices of radiation protection.
 - b. Radioactivity measurement standardization and monitoring techniques and instruments.
 - c. Mathematics and calculations basic to the use and measurement of radioactivity.
 - d. Biological effects of radiation.
17. **EXPERIENCE.** Attach a resume for each individual named in Items 6 and 7. Describe individual's work experience with radiation, including where experience was obtained. Work experience or on-the-job training should be commensurate with the proposed use. Include list of radioisotopes and maximum activity of each used.

18. CERTIFICATE

(This item must be completed by applicant)

The applicant and any official executing this certificate on behalf of the applicant named in Item 2, certify that this application is prepared in conformity with Title 10, Code of Federal Regulations, Part 30, and that all information contained herein, including any supplements attached hereto, is true and correct to the best of our knowledge and belief.

WARNING.--18 U.S.C., Section 1001; Act of June 25, 1948; 62 Stat. 749; 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.

a. LICENSE FEE REQUIRED (See Section 170.31, 10 CFR 170) BY PRODUCT MATERIAL (K) \$110.00	b. CERTIFYING OFFICIAL (Signature)  c. NAME (Type or print) EUGENE V. ELDER
(1) LICENSE FEE CATEGORY: NEW LICENSE	d. TITLE: CFM MGR
(2) LICENSE FEE ENCLOSED: \$ 110.00	e. DATE 1-17-83