



U.S. NUCLEAR REGULATORY COMMISSION

## GENERAL LICENSEE REGISTRATION

**EXPIRES: 03/31/2010**

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 and FOIA/Privacy Services Branch (7-5 F52), U. S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to [infocollections@nrc.gov](mailto:infocollections@nrc.gov) 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.

**GL-716412-17**

Company Name: NESTLE PURINA PETCARE SUPPORT CENTER

[illegible]

Department:

[illegible]

Address Line 1: 5100 COLUMBIA AVENUE

[illegible]

Address Line 2:

[illegible]

City: SAINT LOUIS

[illegible]

State: MO


Zip Code: 63139 -

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**Category:**

NAME	DATE
SCORE	
1. The first step in the scientific method is to ask a question.	
2. A hypothesis is a statement that can be tested.	
3. The purpose of an experiment is to test a hypothesis.	
4. Data are the results of an experiment.	
5. A conclusion is a statement that summarizes the results of an experiment.	
6. The scientific method is a process that scientists use to answer questions.	
7. A hypothesis is a statement that can be tested.	
8. The purpose of an experiment is to test a hypothesis.	
9. Data are the results of an experiment.	
10. A conclusion is a statement that summarizes the results of an experiment.	

Packet Receipt Date (MMDDYYYY):

101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	524	525	526	527	528	529	530	531	532	533	534	535	536	537	538	539	540	541	542	543	544	545	546	547	548	549	550	551	552	553	554
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Accession Number:

[illegible]

TSMEIO



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).**

[illegible][illegible]

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

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## SECTION 2 - DEVICES SUBJECT TO REGISTRATION

## SECTION 2

PAGE 1 of 1

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

**NRC Device Key**                      **709404**                      **(Internal Control Number)**

Distributor/Distributed By: THERMO SCIENTIFIC PORTABLE ANALYTICAL INSTR

[illegible]

Distributor License Number: 53-0388

[illegible]

Manufacturer Name: NITON CORPORATION

[illegible]

Device Model (Not Source Model): XLP818

[illegible]

Device Serial Number: 6236

[illegible]

Transfer Date (Receipt Date): 03/26/2004

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DD

YYYY

☐ Not in possession of device  
(Also complete Section 4.)

Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1 AM241 <div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	30.000000000 <div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	mCi <div> <div></div> <div></div> <div></div> </div>
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## SECTION 4

PAGE 1 of 1

**Provide information about devices listed in Section 2 or 6, but no longer in your possession.**

## Transfer Date:

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(from Section 2 or 6)

0	1	1	1	2	0	1	3
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MM

DD

YYYY

Location of the Device:

- ☐ Whereabouts Unknown (complete Part 1 only)      ☐ Transferred to another general licensee (complete Parts 2 and 3)  
☐ Never Possessed the Device (complete Part 1 only)      ☐ Transferred to a Specific Licensee (Not the manufacturer)  
☒ Returned to Manufacturer (complete Part 1 only)      (complete Part 2)

**Part 2** License Number of Recipient (if transferred to a specific licensee):

[illegible]

Company Name:

[illegible]

Department:

[illegible]

Address Line 1:

[illegible]

Address Line 2:

[illegible]

City:

[illegible]

State:

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Zip Code:

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**Part 3**      **Enter the name of the individual responsible for this device:**

**Last Name:**

[illegible]

First Name:

[illegible]

Middle Initial:

9

Telephone Number:

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**Extension:**

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Title:

[illegible]



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**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 website at:

<http://www.nrc.gov/reading-rm/doc-collections/cfr>)

*Robert H. Pacanowski*

*3-1-13*

**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.





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**SECTION 6 - DEVICES NOT SUBJECT TO REGISTRATION**

**SECTION 6**

**PAGE 1 of 1**

**NRC Device Key:**

**Manufacturer License No:**

**Manufacturer Name:**

**Model Number:**

**Serial #:**

**Transfer Date:**