



# **TRANSFERS OF INDUSTRIAL DEVICES REPORT (TO GENERAL LICENSEES)**

(Continue on NRC Form 653, 653A or 653B, as appropriate)

Estimated burden per response to comply with this mandatory collection request 36 minutes. NRC requests quarterly reports to keep apprised of device movements. Send comments regarding the burden estimate to the FOIA, Privacy, and Information Collections Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0001), 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.

**For each "licensee" to whom a device(s) has been transferred during the reporting period, supply the following:**

NAME OF VENDOR SERVAgrouP	REPORTING PERIOD	
	FROM 01/01/2015	TO 03/31/2015
LICENSE NUMBER OK-32164-02G		

## **INTERMEDIATE PERSON(S) (if any)**

NAME OF INTERMEDIATE PERSON(S)	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE
NAME OF INTERMEDIATE PERSON(S)	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE

## **GENERAL LICENSEE INFORMATION**

NAME OF GENERAL LICENSEE SERVAgrouP	MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code) Sera Group 3600 S. 13th Duncan, OK 73533
NAME OF RESPONSIBLE INDIVIDUAL Todd Green	
TELEPHONE (580) 252-5111	
TITLE OF RESPONSIBLE INDIVIDUAL Safety Specialist	

## **INFORMATION ON DEVICE(S) TRANSFERRED**

DATE OF TRANSFER	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS
No Transfers					

## **INTERMEDIATE PERSON(S) (if any)**

NAME OF INTERMEDIATE PERSON	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE
NAME OF INTERMEDIATE PERSON	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE

## **GENERAL LICENSEE INFORMATION**

NAME OF GENERAL LICENSEE	MAILING ADDRESS AT THE LOCATION OF USE (No., P.O. Boxes, include Zip Code)
NAME OF RESPONSIBLE INDIVIDUAL	
TELEPHONE	
TITLE OF RESPONSIBLE INDIVIDUAL	

## **INFORMATION ON DEVICE(S) TRANSFERRED**

DATE OF TRANSFER	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS

# **TRANSFERS OF INDUSTRIAL DEVICES REPORT (TO GENERAL LICENSEES) (continued)**

## **INTERMEDIATE PERSON(S) (if any)**

NAME OF INTERMEDIATE PERSON(S)	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE
NAME OF INTERMEDIATE PERSON(S)	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE

## **GENERAL LICENSEE INFORMATION**

NAME OF GENERAL LICENSEE	MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)
NAME OF RESPONSIBLE INDIVIDUAL	
TELEPHONE	
TITLE OF RESPONSIBLE INDIVIDUAL	

## **INFORMATION ON DEVICE(S) TRANSFERRED**

DATE OF TRANSFER	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS

## **INTERMEDIATE PERSON(S) (if any)**

NAME OF INTERMEDIATE PERSON(S)	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE
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## **GENERAL LICENSEE INFORMATION**

NAME OF GENERAL LICENSEE	MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)
NAME OF RESPONSIBLE INDIVIDUAL	
TELEPHONE	
TITLE OF RESPONSIBLE INDIVIDUAL	

## **INFORMATION ON DEVICE(S) TRANSFERRED**

DATE OF TRANSFER	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS

**TRANSFERS OF INDUSTRIAL DEVICES REPORT  
(TO GENERAL LICENSEES) (continued)**

**INTERMEDIATE PERSON(S) (if any)**

NAME OF INTERMEDIATE PERSON(S)	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE
NAME OF INTERMEDIATE PERSON(S)	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE

**GENERAL LICENSEE INFORMATION**

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NAME OF RESPONSIBLE INDIVIDUAL	
TITLE OF RESPONSIBLE INDIVIDUAL	
TELEPHONE	

**INFORMATION ON DEVICE(S) TRANSFERRED**

DATE OF TRANSFER	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS

**INTERMEDIATE PERSON(S) (if any)**

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NAME OF RESPONSIBLE INDIVIDUAL	
TITLE OF RESPONSIBLE INDIVIDUAL	
TELEPHONE	

**INFORMATION ON DEVICE(S) TRANSFERRED**

DATE OF TRANSFER	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS

**TRANSFERS OF INDUSTRIAL DEVICES REPORT (FROM GENERAL LICENSEES)**

For each "licensee" from whom a device(s) has been received during the reporting period, supply the following:

**GENERAL LICENSEE INFORMATION**

NAME OF GENERAL LICENSEE

MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)

**INFORMATION ON DEVICE(S) RECEIVED**

DATE OF RECEIPT	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	MANUFACTURER OR INITIAL TRANSFEROR (IF NOT REPORTING PARTY)

**GENERAL LICENSEE INFORMATION**

NAME OF GENERAL LICENSEE

MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)

**INFORMATION ON DEVICE(S) RECEIVED**

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**INFORMATION ON DEVICE(S) RECEIVED**

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(05-2013)  
10 CFR 32**TRANSFERS OF INDUSTRIAL DEVICES REPORT (FROM GENERAL LICENSEES)(continued)**

For each "licensee" from whom a device(s) has been received during the reporting period, supply the following:

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NAME OF GENERAL LICENSEE

MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)

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NAME OF GENERAL LICENSEE

MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)

**INFORMATION ON DEVICE(S) RECEIVED**

DATE OF RECEIPT	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	MANUFACTURER OR INITIAL TRANSFEROR (IF NOT REPORTING PARTY)

**TRANSFERS OF INDUSTRIAL DEVICES REPORT (LABEL CHANGES)****For each device for which required label information has been changed, supply the following:****GENERAL LICENSEE USER INFORMATION**

NAME OF GENERAL LICENSEE USER

MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)

**INFORMATION ON DEVICE(S) RECEIVED**

TYPE OF DEVICE	MODEL NUMBER	PREVIOUS SERIAL NUMBER	NEW SERIAL NUMBER	PREVIOUS ISOTOPE	NEW ISOTOPE	PREVIOUS LABEL ACTIVITY AND UNITS	LABEL ACTIVITY AND UNITS

**GENERAL LICENSEE USER INFORMATION**

NAME OF GENERAL LICENSEE USER

MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)

**INFORMATION ON DEVICE(S) RECEIVED**

TYPE OF DEVICE	MODEL NUMBER	PREVIOUS SERIAL NUMBER	NEW SERIAL NUMBER	PREVIOUS ISOTOPE	NEW ISOTOPE	PREVIOUS LABEL ACTIVITY AND UNITS	LABEL ACTIVITY AND UNITS

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**INFORMATION ON DEVICE(S) RECEIVED**

TYPE OF DEVICE	MODEL NUMBER	PREVIOUS SERIAL NUMBER	NEW SERIAL NUMBER	PREVIOUS ISOTOPE	NEW ISOTOPE	PREVIOUS LABEL ACTIVITY AND UNITS	LABEL ACTIVITY AND UNITS

**GENERAL LICENSEE USER INFORMATION**

NAME OF GENERAL LICENSEE USER

MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)

**INFORMATION ON DEVICE(S) RECEIVED**

TYPE OF DEVICE	MODEL NUMBER	PREVIOUS SERIAL NUMBER	NEW SERIAL NUMBER	PREVIOUS ISOTOPE	NEW ISOTOPE	PREVIOUS LABEL ACTIVITY AND UNITS	LABEL ACTIVITY AND UNITS

**TRANSFERS OF INDUSTRIAL DEVICES REPORT (LABEL CHANGES)(continued)**

For each device for which required label information has been changed, supply the following:

**GENERAL LICENSEE USER INFORMATION**

NAME OF GENERAL LICENSEE USER

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**INFORMATION ON DEVICE(S) RECEIVED**

TYPE OF DEVICE	MODEL NUMBER	PREVIOUS SERIAL NUMBER	NEW SERIAL NUMBER	PREVIOUS ISOTOPE	NEW ISOTOPE	PREVIOUS LABEL ACTIVITY AND UNITS	LABEL ACTIVITY AND UNITS

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**INFORMATION ON DEVICE(S) RECEIVED**

TYPE OF DEVICE	MODEL NUMBER	PREVIOUS SERIAL NUMBER	NEW SERIAL NUMBER	PREVIOUS ISOTOPE	NEW ISOTOPE	PREVIOUS LABEL ACTIVITY AND UNITS	LABEL ACTIVITY AND UNITS

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**INFORMATION ON DEVICE(S) RECEIVED**

TYPE OF DEVICE	MODEL NUMBER	PREVIOUS SERIAL NUMBER	NEW SERIAL NUMBER	PREVIOUS ISOTOPE	NEW ISOTOPE	PREVIOUS LABEL ACTIVITY AND UNITS	LABEL ACTIVITY AND UNITS

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**INFORMATION ON DEVICE(S) RECEIVED**

TYPE OF DEVICE	MODEL NUMBER	PREVIOUS SERIAL NUMBER	NEW SERIAL NUMBER	PREVIOUS ISOTOPE	NEW ISOTOPE	PREVIOUS LABEL ACTIVITY AND UNITS	LABEL ACTIVITY AND UNITS