

United States Nuclear Regulatory Commission Form 313

NRC FORM 313 (1-2012) 10 CFR 30, 32, 33, 34, 35, 36, 39, and 40	U.S. NUCLEAR REGULATORY COMMISSION	APPROVED BY OMB: NO. 3180-0120 Estimated burden per response to comply with this mandatory collection request: 4.3 hours. Submittal of the application is necessary to determine that the applicant is qualified and that adequate procedures exist to protect the public health and safety. Send comments regarding burden estimate to the Information Services Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to InfocollctsResource@nrc.gov , and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0120), 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: (03/31/2012)
APPLICATION FOR MATERIALS LICENSE			


INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW.

APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH: OFFICE OF FEDERAL & STATE MATERIALS AND ENVIRONMENTAL MANAGEMENT PROGRAMS DIVISION OF MATERIALS SAFETY AND STATE AGREEMENTS U.S. NUCLEAR REGULATORY COMMISSION WASHINGTON, DC 20555-0001	IF YOU ARE LOCATED IN: ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO: MATERIALS LICENSING BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION III 2443 WARRENVILLE ROAD, SUITE 210 Lisle, IL 60532-4352
ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS: IF YOU ARE LOCATED IN: ALABAMA, CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, FLORIDA, GEORGIA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, NORTH CAROLINA, PENNSYLVANIA, PUERTO RICO, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, VERMONT, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND APPLICATIONS TO: LICENSING ASSISTANCE TEAM DIVISION OF NUCLEAR MATERIALS SAFETY U.S. NUCLEAR REGULATORY COMMISSION, REGION I 475 ALLENDALE ROAD KING OF PRUSSIA, PA 19406-1415	IF YOU ARE LOCATED IN: ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MISSISSIPPI, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND APPLICATIONS TO: NUCLEAR MATERIALS LICENSING BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION IV 1600 E. LAMAR BOULEVARD ARLINGTON, TX 76011-4511

PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S. NUCLEAR REGULATORY COMMISSION JURISDICTIONS.

1. THIS IS AN APPLICATION FOR (Check appropriate item) <input checked="" type="checkbox"/> A. NEW LICENSE <input type="checkbox"/> B. AMENDMENT TO LICENSE NUMBER _____ <input type="checkbox"/> C. RENEWAL OF LICENSE NUMBER _____	2. NAME AND MAILING ADDRESS OF APPLICANT (Include ZIP code) EMPIRE PAVING 30 BERNHARD RD NORTH HAVEN, CT 06473
3. ADDRESS WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED 130 SCOTT RD WATERBURY CT 06705 "TEMPORARY JOB SITES ANYWHERE IN THE U.S. WHERE NRC MAINTAINS JURISDICTION"	4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION BRIAN FESTA BRIAN@EMPIREPAVING.COM TELEPHONE NUMBER 203-752-0002
SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER. THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.	
5. RADIOACTIVE MATERIAL a. Element and mass number; b. chemical and/or physical form; and c. maximum amount which will be possessed at any one time.	6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED.
7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE.	8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS.
9. FACILITIES AND EQUIPMENT.	10. RADIATION SAFETY PROGRAM.
11. WASTE MANAGEMENT.	12. LICENSE FEES (See 10 CFR 170 and Section 170.31) FEE CATEGORY _____ AMOUNT ENCLOSED \$ _____

13. CERTIFICATION. (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT.
 THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, 36, 39, AND 40, AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR 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.

CERTIFYING OFFICER - TYPED/PRINTED NAME AND TITLE Brian J. Festa General Manager	SIGNATURE 	DATE 4/30/15
FOR NRC USE ONLY		
TYPE OF FEE	FEE LOG	FEE CATEGORY
AMOUNT RECEIVED	CHECK NUMBER	COMMENTS
APPROVED BY	DATE	

NRC FORM 313 (1-2012)

APPENDIX B

SUGGESTED FORMAT FOR PROVIDING INFORMATION REQUESTED IN ITEMS 5 THROUGH 11 OF U.S. NUCLEAR REGULATORY COMMISSION FORM 313

Items 5 and 6: Materials To Be Possessed and Proposed Uses

Yes	No	Radionuclide	Manufacturer or Distributor Model No.	Quantity	Use as Listed on SSD Registration Certificate	Specify Other Uses Not Listed on SSD Registration Certificate
X		Cesium-137	Gauge manufacturer or distributor and model number of the gauge: <u>QSA GLOBAL INC.</u> <u>X.1218, X.8, XN 30/0</u> <u>TROXLER: 3400 SERIES</u> <u>HUMBOLDT: 5001 SERIES</u>	Specify activity per source and number of gauges requested. <u>2</u> <u>.3 GBq</u>	Yes <input checked="" type="checkbox"/> Specific description of the gauge use: <u>TO MEASURE DENSITY</u>	<input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Uses are: (Submit safety analysis supporting safe use)
X		Americium-241	Gauge manufacturer or distributor and model number of the gauge: <u>QSA GLOBAL INC.</u> <u>Ax1, X.1, X.1/2, X.2084</u> <u>TROXLER: 3400 SERIES</u> <u>HUMBOLDT: 5001 SERIES</u>	Specify activity per source and number of gauges requested. <u>2</u> <u>1.48 GBq</u>	Yes <input type="checkbox"/> Specific description of the gauge use: <u>TO MEASURE MOISTURE</u>	<input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Uses are: (Submit safety analysis supporting safe use.)

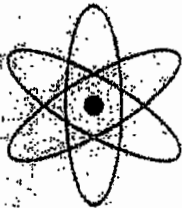
Yes	No	Radionuclide	Manufacturer or Distributor Model No.	Quantity	Use as Listed on SSD Registration Certificate	Specify Other Uses Not Listed on SSD Registration Certificate
	X	Californium-252	Gauge manufacturer or distributor and model number of the gauge: _____ _____	Specify activity per source and number of gauges requested. _____ _____	Yes <input type="checkbox"/> Specific description of the gauge use: _____ _____ _____ _____ _____ _____	<input type="checkbox"/> Not applicable <input type="checkbox"/> Uses are: _____ (Submit safety analysis supporting safe use.)
	X	Radium-226	Gauge manufacturer or distributor and model number of the gauge and number of gauges of each model that is being requested: _____ _____	Specify activity per source and number of gauges requested. _____ _____	Yes <input type="checkbox"/> Specific description of the gauge use: _____ _____	<input type="checkbox"/> Not applicable <input type="checkbox"/> Uses are: _____ (Submit safety analysis supporting safe use.)
	X	Other Isotope (Specify):	Gauge manufacturer or distributor and model number of the gauge: _____ _____	Specify activity per source and number of gauges requested. _____ _____	Yes <input type="checkbox"/> Specific description of the gauge use: _____ _____	<input type="checkbox"/> Not applicable <input type="checkbox"/> Uses are: _____ (Submit safety analysis supporting safe use.)
		Is financial assurance required? If yes, submit evidence of financial assurance				

**Items 7 through 11: Training and Experience,
Facilities and Equipment, Radiation Safety Program,
and Waste Disposal**

Item No. and Title	Suggested Response	Yes	Alternative Procedures Attached
7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING AND EXPERIENCE—RADIATION SAFETY OFFICER Name: <u>Chris Monroe</u>	Provide documentation of the training of the proposed RSO.	Submit applicable documentation.	
8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS	Before using licensed materials, authorized users will have successfully completed one of the training courses described in the "Criteria" part of the section titled "Training for Individuals Working in or Frequenting Restricted Areas" in NUREG-1556, Vol. 1, Rev. 2.	<input checked="" type="checkbox"/> TRAINING CERT. ATTACHED	<input type="checkbox"/>
9. FACILITIES AND EQUIPMENT	No information needs to be submitted in response to this item; key issues are addressed under "Radiation Safety Program—Public Dose" and "Radiation Safety Program—Operating, Emergency, and Security Procedures" below.	Need Not Be Submitted with Application	
10.1 RADIATION SAFETY PROGRAM—AUDIT PROGRAM	The applicant is <i>not</i> required to, and should not, submit its audit program to the NRC for review during the licensing phase. The audit program will be reviewed during NRC inspections.	Need Not Be Submitted with Application	
10.2 RADIATION SAFETY PROGRAM—SURVEY INSTRUMENTS	We will either possess and use, or have access to and use, a radiation survey meter that meets the criteria in the section titled "Radiation Safety Program—Instruments" in NUREG-1556, Vol. 1, Rev. 2, "Consolidated Guidance about Materials Licenses: Program-Specific Guidance about Portable Gauge Licenses," in the event of an incident.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

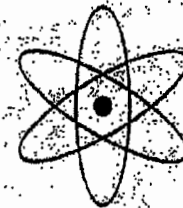
Q/C RESOURCE

TRAINING COURSE CERTIFICATION



This is to certify that

CHRISTOPHER MONROE



has completed annual refresher training in the proper transport of nuclear density gauges in accordance with CFR Title 49, Sections 170 - 189, as required by the U.S. Nuclear Regulatory Commission and the Agreement States.

Employee Signature

008-74-0759

Employee Social Sec. #

EMPIRE PAVING

Employer Name

My signature certifies that I have received training regarding the safe operation and transport of nuclear density gauges and have read, reviewed, and understand the emergency procedures instituted by my employer.

2/2/15

Date of Training

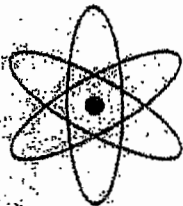
CHICOPEE, MA

Location of Training Materials

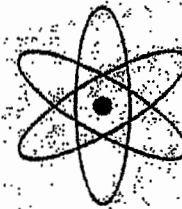
Instructor Signature

Q/C RESOURCE

TRAINING COURSE CERTIFICATION



This is to certify that



Matthew Misiura

has completed annual refresher training in the proper transport of nuclear density gauges in accordance with CFR Title 49, Sections 170 - 189, as required by the U.S. Nuclear Regulatory Commission and the Agreement States.

Matthew Misiura

Employee Signature

Employee Social Sec. #

Empire Learning

Employer Name

My signature certifies that I have received training regarding the safe operation and transport of nuclear density gauges and have read, reviewed, and understand the emergency procedures instituted by my employer.

3/2/2015

Date of Training

Location of Training Materials

Dee A. Bell

Instructor Signature

