

[illegible]



SECTION 1
PAGE 2 of 2

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

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

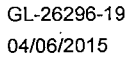
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YY YY

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

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	SR90 <div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	20.000000000 <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>
2	<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></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>
3	<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></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>
4	<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></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>
5	<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></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>
6	<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></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>





SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

Provide information about other devices you have that are subject to registration. Do not report specifically licensed devices.

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

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(Received)

MM

DD

Y Y Y Y

Unit (e.g. mCi)

1.					
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[illegible]

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2.					
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[illegible]

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3.					
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[illegible]

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4.					
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[illegible]

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5.					
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[illegible]

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6.					
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[illegible]

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7.					
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[illegible]

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8.					
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[illegible]

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9.					
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[illegible]

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10.					
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[illegible]

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SECTION 4 - NOT IN POSSESSION OF DEVICE**SECTION 4**

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Provide information about devices listed in Section 2 or 6, but no longer in your possession.**Part 1**

NRC Device Key:

(from Section 2 or 6)

2 4 0 2 1 1

Transfer Date:

0 7

MM

2 9

DD

2 0 1 5

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) (complete Part 2)
- ☐ Returned to Manufacturer (complete Part 1 only)

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

R 7 3 0 2 1 E 1 5

Company Name:

B I O N O M I C S

Department:

Address Line 1:

1 5 5 0 B e a r C R E E K R O A D

Address Line 2:

City:

State:

T N

Zip Code:

3 7 8 3 0 -

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

Last Name:

N i p p e r

First Name:

P a u l

Middle Initial:

Telephone Number:

8 6 5

2 2 0

8 5 0 1

Extension:

Title:

Q u a l i t y A s s u r a n c e M a n a g e r





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SECTION 5 - CERTIFICATION

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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>)

8/6/15

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

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NRC Device Key: 247769

Manufacturer License No: GL14-0208-97

Manufacturer Name: ASOMA-TWIN CITY INC.

Model Number: BETASCOPE

Serial #: GLDB

Transfer Date: 08/15/1992

Isotope: PM147

Activity: 0.600000000

Unit: mCi

NRC Device Key: 248481

Manufacturer License No: GL14-0208-97

Manufacturer Name: ASOMA-TWIN CITY INC.

Model Number: TC 1600

Serial #: 31400

Transfer Date: 11/15/1987

Isotope: PM147

Activity: 0.900000000

Unit: mCi
