



For NRC Use Only <i>(Do not write here)</i>										Category:	
										<div style="border: 1px solid black; width: 40px; height: 30px;"></div> <div style="border: 1px solid black; width: 40px; height: 30px;"></div>	
<b>Packet Receipt Date (MMDDYYYY):</b>											
<b>Accession Number:</b>											



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]

11

O.K.

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

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## SECTION 2 - DEVICES SUBJECT TO REGISTRATION

## SECTION 2

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

**NRC Device Key**                      **802421**                      **(Internal Control Number)**

Distributor/Distributed By: VEGA AMERICA'S CORPORATION

[illegible]

Distributor License Number: 34-00639-04

[illegible]

Manufacturer Name: OHMART/VEGA CORPORATION

[illegible]

Device Model (Not Source Model): SHLD-1

[illegible]

Device Serial Number: M-4060

[illegible]

Transfer Date (Receipt Date): 12/01/2009

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MM

DD

YY YY

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

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	CS137	80.000000000	mCi
2			
3			
4			
5			
6			





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## SECTION 4

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## Part 1

NRC Device Key:

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Y Y Y Y

☐ 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)

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

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### Part 3

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

**Last Name:**

[illegible]

First Name:

[illegible]

**Middle Initial:**

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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>)

5.23.16

**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:**

Manufacturer License No:

Manufacturer Name:

Model Number:

Serial #:

Transfer Date: