GL-705589-21
11/10/2016
NRC FORM 664
07 - 2015
10 CFR 31.5

GLTS

U.S. NUCLEAR REGULATORY COMMISSION

GENERAL LICENSEE REGISTRATION

APPROVED BY OMB: NO. 3150-0198 **EXPIRES: 04/30/2016**

Complete all six sections of this registration form. If any of the preprinted information is incorrect, provide the changes in the applicable boxes. USE CAPITAL LETTERS.

General License Registration Number
GL-705589-21

SECTION 1 - GENERAL LICENSEE INFORMATION

Enter the company name and the street address/physical location of use for your device(s). For portable devices, specify the primary storage location. Do not use a P.O. Box address.

Company Name: ROGERS CORPORATION

Department:

Address Line 1: 1 TECHNOLOGY DRIVE

Address Line 2: P.O. BOX 188

City: ROGERS

State: CT

Zip Code: 06263 - 0188 -

For NRC Use Only
(Do not write here)

Category:

Packet Receipt Date (MMDDYYYY):

Accession Number:

SECTION 1 - GENERAL LICENSEE INFORMATION (Continued)

Enter the name, telelphone number and title of the person who is the responsible individual for the device(s).

Last Name: WERBECKI

First Name: MICHAL

Middle Initial: J

Telephone: (860) 779-4765

Extension:

Title: EH&S ENGINEER

Enter the mailing address where correspondence regarding your device(s) should be sent. This address should be specific to the use or storage location of your device(s).

Department: CORPORATE EH&S

Address Line 1: 1 TECHNOLOGY DRIVE

Address Line 2: P.O. BOX 188

City: ROGERS

State: CT

Zip Code: 06263 - 0188

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SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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

NRC Device Key **680535** **(Internal Control Number)**

Distributor/Distributed By: OHMART/VEGA CORPORATION

Distributor License Number: 34-00639-03G

Manufacturer Name: OHMART/VEGA CORPORATION

Device Model (Not Source Model): BAL

Device Serial Number: 10137

Transfer Date (Receipt Date): 08/15/1984

MM DD YYYY

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

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	SR90	100.000000000	mCi
2			
3			
4			
5			
6			

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SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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

NRC Device Key **841249** **(Internal Control Number)**

Distributor/Distributed By: MAHLO CONTROL SYSTEMS AUTOMATION

Distributor License Number: GL-142-02

Manufacturer Name: MAHLO CONTROLS SYSTEMS AUTOMATION

Device Model (Not Source Model): 11-200933

Device Serial Number: AH-2307

Transfer Date (Receipt Date): 06/01/2016

MM DD YYYY

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

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	SR90	13.513513514	MBq
2			
3			
4			
5			
6			

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.

Manufacturer Name

Initial Transferor Name

Initial Transferor License Number (if known)

Device Model Number (Not Source Model)

Device Serial Number

How acquired and date (e.g., from a distributor/manufacturer, other licensee, other source)?

- ○ Manufacturer/Initial Transferor listed above
- ○ Other General Licensee
- ○ Other Source

Date Transferred: (Received) MM DD YYYY

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

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11/10/2016

SECTION 4 - NOT IN POSSESSION OF DEVICE

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) 6805535

Transfer Date: MM DD YYYY

Location of the Device:

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

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

TKY003L16

Company Name:

Chase Enuironmental Group

Department:

Address Line 1:

11450 Watterson Court

Address Line 2:

City:

Louisuille

State: Ky Zip Code: 40299 -

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

Last Name:

First Name:

Middle Initial:

Telephone Number:

Extension:

Title:

SECTION 5 - CERTIFICATION

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)

Michael Weebel 12-7-2016

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.

SECTION 6 - DEVICES NOT SUBJECT TO REGISTRATION

NRC Device Key: 565074 Manufacturer License No: 20-20675-02G

Manufacturer Name: EUROTHERM GAUGING SYSTEMS, INC.

Model Number: ASC-185 Serial #: GLDB Transfer Date: 11/15/1997

Isotope: KR85 Activity: 450.000000000 Unit: mCi

NRC Device Key: 824216 Manufacturer License No: 20-6752 (MA)

Manufacturer Name: EGS, INC.

Model Number: SCL-77A Serial #: T1625 Transfer Date: 05/14/2012

Isotope: KR85 Activity: 1000.000000000 Unit: mCi

NRC FORM 540

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

SHIPPING PAPER

1. EMERGENCY TELEPHONE NUMBER (INCLUDE AREA CODE): 800-424-9300

ORGANIZATION: CHEMTREC WSOS #: CHEN01RAD Customer #: 4395

[ ] YES [x] NO

2. TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST: 1

[ ] YES [x] NO

EPA MANIFEST NUMBER: N/A

5. SHIPPER NAME AND FACILITY
Chase Environmental Group, Inc
11450 Watterson Court
Louisville, KY 40299

USER PERMIT NUMBER: T-KY003-L16

SHIPMENT #: N/A

CONTACT: Seb Cannata

6. CARRIER NAME AND ADDRESS
SJ Transportation Co., Inc.
PO Box 169
Woodstown, NJ 08098

CONTACT: Kevin Elder

SIGNATURE: [signature]

SHIPPER ID #: N/A

X COLLECTOR

PROCESSOR

GENERATOR TYPE (SPECIFY):

TELEPHONE #: 800-306-0195

EPA ID #: NJD071629976

SHIPPING DATE: 7/14/2016

TELEPHONE #: 856-769-2741

DATE: 7/14/16

PAGE 1 OF 1 PAGE(S)

1 PAGE(S)

1 PAGE(S)

None PAGE(S)

8. Manifest Number (Use this number on all continuation pages): AL-2016-238

9. CONSIGNEE NAME AND FACILITY ADDRESS
Alaron Corporation
2138 State Route 18
Wampum, PA 16157

Contact: Mike Ollowski

Telephone Number (Include area code): 724-535-5777

SIGNATURE (Authorized consignee or receiving waste receipt): [signature]

Date: 8-10-16

10. Certification

This is to certify that the herein named materials are acceptable for disposal, are properly classified, described, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the Commission.

AUTHORIZED SIGNATURE: [signature] TITLE: Technician / Driver DATE: 7/14/16

HM	11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (including proper shipping name, hazard class, UN ID number and any additional information)	12. DOT LABEL RADIOACTIVE	13. TRANSPORT INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES	16. TOTAL PACKAGE ACTIVITY IN MBq	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME m^3	19. ID NUMBER OF PACKAGE
X	UN2915 Radioactive material, Type A package, 7 One drum with gauge for disposal	Yellow II	0.4	Solid/Oxide	Sr-90	1.74E+03	N/A	0.08	AL-SS-W-16-390

US DOT ERG# 163

16-0450

Roger Corp

Generator Certification Statement
The constituents of the waste manifested herein are known to the generator. There are no EPA RCRA, pathogenic or other hazards present other than those specifically listed on the Form 541

Paul Steinmeyer — Print name

[signature] — Signature

14 July 2016 — Date

CONSIGNEE ORIGINAL (MUST ACCOMPANY WASTE IN TRANSIT)

NRC FORM 541 — U.S. NUCLEAR REGULATORY COMMISSION

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION

1. MANIFEST TOTALS

Number of Packages	Net Waste Volume (m3)	Net Waste Weight (kg)	Special Nuclear Material (grams) U-233	U-235	Pu	Total
1	0.114	54.0 / 67.4	NP	NP	NP	NP

Activity (MBq/mCi) All Nuclides	Tritium	C-14	Tc-99	I-129	Source (kg)
1.74E+03 MBq	NP	NP	NP	NP	0.00E+00
4.70E+01 mCi					

2. MANIFEST NUMBER AL-2016-236

3. PAGE 1 OF 1 PAGE(S)

4. SHIPPER NAME: Chase Environmental Group

SHIPPER ID NUMBER: N/A

DISPOSAL CONTAINER DESCRIPTION / WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER

5. Container Identification Number/ Generator Number	6. Container Description (See Note 1)	7. Volume (m3)	8. Waste and Container Weight (kg)	9. Surface Radiation Level (R/hr)	10. Surface Contamination MBq/100 cm2 Alpha	Beta Gamma	12. Physical Description: Waste Descriptor (See Note 2)	13. Physical Description: Approximate Volume (m3)	14. Solidification Stabilization Media (See Note 3)	11. Chemical Description: Chemical Form / Chelating Agent	Weight % Chelating Agent (F-019)	15. Radiological Description: Nuclide	MBq	mCi	16. Waste Class A, B, C, or Unstable Class A
AL-SS-W-16-390 1162	4	~~0.114~~ 0.013 (SC)	4	100	<3.67E-6	<3.67E-5	36	~~0.114~~ 0.013 (SC)	100	Oxide/NP	NP	Sr-90	1.74E+03	4.70E+01	NA
												Package total	1.74E+03	4.70E+01	

NOTE 1: Container Description Codes. For containers w/ waste requiring shipped in approved structural properties the number of a code must be followed by "CP".

1 Wooden Box or Crate
2 Metal Box
3 Plastic Drums or Pail
4 Metal Drums or Pail
5 Metal Tank or Liner
6 Concrete Tank or Liner
7 Polyethylene Tank or Liner
8 Fiberglass Tank or Liner
9 Construction
10 Gas Cylinder
11 Bulk Unpackaged Waste
12 Unpackaged Components
13 High Integrity Container
14 Other - describe in Item 9 or additional page

Note 2: Waste Description Codes (Choose up to three which predominate by volume)

20 Charcoal
21 Ion Exchange Resin
22 Soil
23 Gas
24 Oil
25 Aqueous Liquid
26 Filter Media
27 Mechanical Filter
28 Pipe or Scale Hardware
29 Contaminated Rubble
30 Cotton or Exchange Media
31 Asbestos Insulation Media
32 Allied Dry Ion Exchange Media
33 Contaminated Equipment
34 Organic Liquid (Except Oil)
35 Glassware or Labware
36 Sealed Sources or Devices
37 Pipes or Piping
38 Evaporator Bottom or Sludge
Cement Waste
39 Compactable Trash
40 Homogenous Solid Waste
41 Animal Carcass
42 Biological Material (Except Animal Carcass)
43 Activated Material
99 Other - Describe in Item 11, or Additional Page

Note 3: Solidification Media (Not more required are to ensure stability requirements. The number of media must be followed by "S".
Note 4: Radiological Nuclide: Use nuclide symbols (Sr-90) and those nuclides that can be identified in Item 13. Case 120 = NUCLIDE REQUIRED

Solidification: 60 Sphere Dry; 51 Cement; 52 Fiber Drum; Superblock; 53 Hi Dry; 54 Step-T-Solid; 55 Solidi-Dry; 66 Plastic; 67 Fiber; 68 Sub-A-Solid; 69 Charcoal 30; 70 Charcoal 50; 71 Charcoal 3030; 72 Dragon HP300; 73 Dragon HP200; 74 Pennwalt; 75 Pennwalt; 76 Aquasol; 77 Aquasol; 80 Other - Describe in Item 11 or additional page

Substrate: 81 Cement; 81 Cement (Nonsolidified); 82 Bitumen; 83 Vinyl Fiber; 84 Vinyl Fiber Drums; 88 Other - Describe in Item 11 or Additional Page; 120 None Required

NRC FORM 542
(5-1999)

U.S. NUCLEAR REGULATORY COMMISSION

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

MANIFEST INDEX AND REGIONAL COMPACT TABULATION

List #2 original "PROCESSED WASTE" before "COLLECTED WASTE"

1. WASTE COLLECTOR/PROCESSOR

NAME: Chase Environmental Group, Inc.

IDENTIFICATION NUMBER: T-KY003-L16

SHIPPING DATE: 7/14/2016

SHIPPER USE ONLY

2. MANIFEST NUMBER: AL-2016-236

3. PAGE_1_OF_1_PAGE(S)

4 GENERATOR IDENTIFICATION NUMBER	5 GENERATOR NAME PERMIT NUMBER AND TELEPHONE NUMBER	6 GENERATOR FACILITY ADDRESS	7 PREPROCESSED WASTE (OR MATERIAL) VOLUME (m3)	8 [illegible]	9 WASTE CODE	10 [illegible]	11 AS PROCESSED/COLLECTED TOTAL A SOURCE MATERIAL (kg)	B SNM (g)	C ACTIVITY (MBq)	D VOLUME (m3)
1162	Rogers Corporation 860-779-4765	1 Technology Dr. Rogers, CT 06263	~~0.114~~ (5) 0.018	NA	C	CT	0.00E+00	NP	1.74E+03	~~0.114~~ (5) 0.018
TOTALS OF ALL PAGES (NRC FORMS 542 AND 542A)							0.000	0.000	1.74E+03	0.018 ~~0.114~~ (5)

BILL OF LADING – SHORT FORM – NOT NEGOTIABLE

SHIP FROM	Bill of Lading Number: N/A
[Name] Rogers Corporation [Street Address] 1 Technology Drive [City, ST ZIP Code] Rogers, CT 06263 SID No.: N/A	BAR CODE SPACE
SHIP TO	**Carrier Name: Radiation Safety Associates, Inc.**
[Name] Radidation Safety Associates [Street Address] 19 Pendleton Drive [City, ST ZIP Code] Hebron, CT 06248 CID No.: N/A	Trailer number: POV, CT Tag No. 297-ZWT Serial number(s): N/A
THIRD PARTY FREIGHT CHARGES BILL TO	**SCAC: N/A**
[Name] [Street Address] [City, ST ZIP Code]	Pro Number: N/A BAR CODE SPACE
Special Instructions: **No Placard Required**	**Freight Charge Terms** (Freight charges are prepaid unless marked otherwise): Prepaid XXX☐ Collect ☐ 3rd Party ☐ ☐ Master bill of lading with attached underlying bills of lading.

CUSTOMER ORDER INFORMATION

Customer Order No.	# of Packages	Weight	Pallet/Slip (circle one)		Additional Shipper Information
Emergency Response Phone: (860) 779-4765	1		Y	(N)	This is to certify that the herein-named
Generator's Signature:			Y	N	Materials are properly classified, described
X Michal Werbecki			Y	N	packaged, marked and labeled, and are in
Michal Werbecki, RSO			Y	N	Proper condition for transport according to the
Grand Total					applicable DOT regulations

CARRIER INFORMATION

Handling Unit		Package					LTL Only	
Qty	Type	Qty	Type	Weight	HM (X)	**Commodity Description** Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360	NMFC No.	Class
100	mCi				X	Sr-90 Sealed Source		
						UN2911 Radioactive Material		
						Type A Package ~~Special Form~~ Non Special Form		
						Class 7 Radioactive ~~White I~~ Yellow II		
						3.7 GBq ; One (1) Type A Container		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____.

COD Amount: $ N/A

Fee terms: Collect ☐ Prepaid ☐ Customer check acceptable ☐

Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC § 14706(c)(1)(A) and (B).

Received, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications, and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of charges and all other lawful fees.

Shipper Signature _____

Shipper Signature/Date	Trailer Loaded:	Freight Counted:	Carrier Signature/Pickup Date
6/8/16 This is to certify that the above named materials are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	☐ By shipper ☒ By driver	☐ By shipper ☐ By driver/pallets said to contain ☒ By driver/pieces	Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

ORIGIN ID:GONA (860) 779-5728
DEBRA CHATELLE
ROGERS
P.O. BOX 188
ONE TECHNOLOGY DRIVE
ROGERS, CT 06263
UNITED STATES US

SHIP DATE: 07DEC16
ACTWGT: 0.50 LB
CAD: 106971222/INET3790

BILL SENDER

TO ATTN: GLTS
U.S. NUCLEAR REGULATORY COMMISSION
DIR.,OFF. OF NUCLEAR MAT'L SAFETY
& SAFEGUARDS
WASHINGTON DC 20555
(301) 415-6202
INV:
PO:
REF:
DEPT:

544J1/D42F/14E8

J162016101201uv

THU - 08 DEC 3:00P
STANDARD OVERNIGHT

TRK# 0201 7778 8433 7960

EP NSFA

20555
DC-US IAD

After printing this label:
1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

Warning: Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in additional billing charges, along with the cancellation of your FedEx account number.
Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on fedex.com.FedEx will not be responsible for any claim in excess of $100 per package, whether the result of loss, damage, delay, non-delivery,misdelivery,or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim.Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental,consequential, or special is limited to the greater of $100 or the authorized declared value. Recovery cannot exceed actual documented loss.Maximum for items of extraordinary value is $1,000, e.g. jewelry, precious metals, negotiable instruments and other items listed in our ServiceGuide. Written claims must be filed within strict time limits, see current FedEx Service Guide.