



GL-700511-23
01/24/2018

SECTION 1
PAGE 2 of 2

SECTION 1 - GENERAL LICENSEE INFORMATION (Continued)

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

Last Name: BARBOSA

H I L L

First Name: GUILLERMO

Middle Initial: L

T O N Y

Business Telephone Number: (574) 267-8101

Extension: ~

Title: CURRENT SAFETY OFFICER

S R , D I R E C T O R , O P E R A T I O N

Enter the mailing address where correspondence regarding your device(s) should be sent. This address should be specific to the physical location where the devices are used and/or stored.

Department: ENGINEERING

Address Line 1: 3100 NORTH DETROIT STREET

Address Line 2:

City: WARSAW

State: IN

Zip Code: 46582 -





01/24/2018

SECTION 4

PAGE 1 of 1

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

Transfer Date:

--	--	--	--	--	--	--

--	--

--	--

--	--	--	--

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]

--	--

--	--	--	--	--

Q1			

Enter the name of the individual responsible for this device:

[illegible][illegible]

7

--	--	--

--	--	--

--	--	--	--

--	--	--	--	--

[illegible]



GL-700511-23
01/24/2018

SECTION 5 - CERTIFICATION

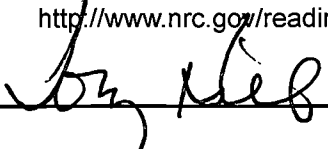
SECTION 5
PAGE 1 of 1

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>)



SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1)

8-7-18

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.



GL-700511-23
01/24/2018



SECTION 6 - DEVICES NOT SUBJECT TO REGISTRATION

SECTION 6

PAGE 1 of 1

NRC Device Key:

Manufacturer License No:

Manufacturer Name:

Model Number:

Serial #:

Transfer Date: