



SECTION 1

PAGE 1 of 2

U.S. NUCLEAR REGULATORY COMMISSION

GENERAL LICENSEE REGISTRATION

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.

SECTION 1 - GENERAL LICENSEE INFORMATION

GL-642464-21

Company Name: KINGSTON MINING, INC

Department:

Address Line 1 600 RESOURCE DRIVE

Address Line 2:

City: SCARBRO

State: WV

Zip Code: 25917 -

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Category:

Packet Receipt Date (MMDDYYYY):

Accession Number:

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
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04/11/2017

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: RAYNES

[illegible]

First Name: KENNETH

[illegible]

Middle Initial: A

Telephone: (304) 469-2925

[illegible]

Extension: ~~1378~~

1	3	1	2	
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Title: RADIATION SAFETY OFFICER

[illegible]

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: KINGSTON PREP-PLANT

[illegible]

Address Line 1: 600 RESOURCE DRIVE

[illegible]

Address Line 2:

[illegible]

City: SCARBRO

[illegible]

State: WV

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Zip Code: 25917

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04/11/2017

SECTION 2

PAGE 1 of 4

(Internal Control Number)

KANAWHA SCALES & SYSTEMS

[illegible]

03214250005

[illegible]

ME INSTRUMENTS PTY LTD.

[illegible]

del): ASHSCAN

[illegible][illegible]

01/06/2009

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

DD

YYYY

Activity (e.g. 100)

Unit (e.g. mCi)

300.0000000000

mCi

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[illegible]

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[illegible]

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[illegible]

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[illegible]

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[illegible]

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[illegible][illegible]



04/11/2017

SECTION 2

PAGE 2 of 4

NRC Device Key **591562** **(Internal Control Number)**

Distributor/Distributed By: **TN TECHNOLOGIES, INC.**

[illegible]

Distributor License Number: L01105

[illegible]

Manufacturer Name: TN TECHNOLOGIES, INC.

[illegible]

Device Model (Not Source Model): 5201

[illegible]

Device Serial Number: B3142

[illegible]

Transfer Date (Receipt Date): 01/20/1998

[illegible]

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

MM

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	CS137	100.000000000	mCi
2			
3			
4			
5			
6			



04/11/2017

SECTION 2

PAGE 4 of 4

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

MM DD YYYY

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	CS137 <div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	15.000000000 <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>
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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>



04/11/2017

SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

PAGE 1 of 1

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

Manufacturer Name

[illegible]

Initial Transferor Name

[illegible]

Initial Transferor License Number (if known)

[illegible]

Device Model Number (Not Source Model)

[illegible]

Device Serial Number

[illegible]

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

- Ⓢ Manufacturer/Initial Transferor listed above

- ☐ Other General Licensee

Date Transferred:

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- ☐ Other Source

(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.																			



GL-642464-21
04/11/2017

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>)

Kenneth A. Rayner

8/7/2017

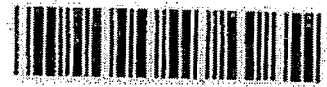
SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1)

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.



GL-642464-21
04/11/2017



SECTION 6 - DEVICES NOT SUBJECT TO REGISTRATION

SECTION 6

PAGE 1 of 1

NRC Device Key:
Manufacturer Name:
Model Number:

Manufacturer License No:

Serial #:

Transfer Date: