

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

State: IN

Zip Code: 46797

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

[illegible]



GL-704563-24

11/13/2018

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: CLARK

D O N N E L L Y

First Name: NATASHA

P A T R I C K

Middle Initial: C

J

Business Telephone Number: (260) 493-8710

2 6 0 4 9 3 8 0 3 5

Extension:

Title: RGEP

R A D I A T I O N S A F E T Y O F F I C E

Enter the mailing address where correspondence regarding your device(s) should be sent.

Department: EP

Address Line 1: P.O. BOX 277

Address Line 2: 18906 OLD 24 EAST

City: WOODBURN

State: IN

Zip Code: 46797

-





SECTION 2
PAGE 1 of 1

MM DD YYYY

	Isotope (e.g. AM241)	Activity (e.g. 1005)	Unit (e.g. mCi)
1	SR90 <div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	50 <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>





PAGE 1 of 1

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

--	--

--	--

--	--	--	--

DD

YYYY

1.				
----	--	--	--	--

[illegible]

--	--	--

2.					
----	--	--	--	--	--

[illegible]

--	--	--

3.					
----	--	--	--	--	--

[illegible]

--	--	--

4.					
----	--	--	--	--	--

[illegible]

--	--	--

5.					
----	--	--	--	--	--

[illegible]

--	--	--

6.					
----	--	--	--	--	--

[illegible]

--	--	--

7.					
----	--	--	--	--	--

[illegible]

--	--	--

8.				
----	--	--	--	--

[illegible]

--	--	--

9.					
----	--	--	--	--	--

[illegible]

--	--	--

10.					
-----	--	--	--	--	--

[illegible]

--	--	--





11/13/2018

SECTION 4

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) (Complete Part 2)

☐ Returned to Manufacturer (Complete Part 1 only)

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

--	--

--	--	--	--	--

--	--	--	--

[illegible][illegible]

7

--	--	--

--	--	--

--	--	--	--

--	--	--	--	--

[illegible]



GL-704563-24
11/13/2018

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.

(Copied of applicable regulations may be viewed at the NRC website at:

<http://www.nrc.gov/reading-rm/doc-collections/cfr>)

12/24/18

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. 10 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-704563-24
11/13/2018

SECTION 6 - DEVICE NOT SUBJECT TO REGISTRATION

SECTION 6
PAGE 1 of 1

NRC Device Key: 697535 **Manufacturer License No:** 034-0534-2
Manufacturer Name: SRB TECHNOLOGIES, INC.
Model Number: BR-10-BK **Serial #:** 682158 **Transfer Date:** 03/03/2006
Isotope: H3 **Activity:** 9.21 **Unit:** Ci
Isotope: **Activity:** **Unit:**
Isotope: **Activity:** **Unit:**
Isotope: **Activity:** **Unit:**
Isotope: **Activity:** **Unit:**
Isotope: **Activity:** **Unit:**

NRC Device Key: 697536 **Manufacturer License No:** 034-0534-2
Manufacturer Name: SRB TECHNOLOGIES, INC.
Model Number: BR-10-BK **Serial #:** 682159 **Transfer Date:** 03/03/2006
Isotope: H3 **Activity:** 9.21 **Unit:** Ci
Isotope: **Activity:** **Unit:**
Isotope: **Activity:** **Unit:**
Isotope: **Activity:** **Unit:**
Isotope: **Activity:** **Unit:**
Isotope: **Activity:** **Unit:**
