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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).

[illegible][illegible]

1

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[illegible]

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

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

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SECTION 2

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Distributor/Distributed By: VEGA Americas, Inc.

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

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

MM DD YYYYY

	Isotope (e.g. AM241)	Activity (e.g. 1005)	Unit (e.g. mCi)
1	CS137	10	
2			
3			
4			
5			
6			





	Isotope (e.g. AM241)	Activity (e.g. 1005)	Unit (e.g. mCi)
1	CS137 <div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	20 <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>





SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

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Manufacturer Name

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

YYYY

Unit (e.g. mCi)

1.					
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[illegible]

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2.					
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[illegible]

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3.					
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[illegible]

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4.					
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[illegible]

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5.					
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[illegible]

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[illegible]

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7					
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[illegible]

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[illegible]

[illegible]

[illegible]

10.					
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[illegible]

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SECTION 4

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Part 1

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Transfer Date:

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MM

DD

Y Y Y Y

Location of the Device:

- ☐ 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)

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

[illegible]

Company Name:

[illegible]

Department:

[illegible]

Address Line 1:

[illegible]

Address Line 2:

[illegible]

City:

[illegible]

State:

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Zip Code:

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

Last name:

[illegible]

First name:

[illegible]

Middle Initial:

7

Business Telephone
Number:

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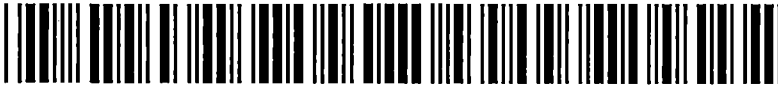
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Extension:

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Title:

[illegible]



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SECTION 5 - CERTIFICATION

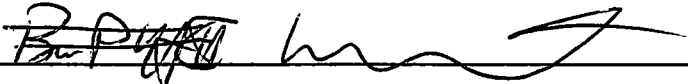
SECTION 5
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I hereby certify that:

- 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>)



5/1/2019 5-8-19

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.



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SECTION 6 - DEVICE NOT SUBJECT TO REGISTRATION

SECTION 6
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NRC Device Key: 802401

Manufacturer License No: 34-00639-04

Manufacturer Name: OHMART/VEGA CORPORATION

Model Number: SR-A

Serial #: OV0885

Transfer Date: 11/30/2009

Isotope: CS137

Activity: 5

Unit: mCi

NRC Device Key: 802402

Manufacturer License No: 34-00639-04

Manufacturer Name: OHMART/VEGA CORPORATION

Model Number: SR-A

Serial #: OV0856

Transfer Date: 11/30/2009

Isotope: CS137

Activity: 5

Unit: mCi

