

NRC Form 313R
(4-82)
10 CFR 34

U.S. NUCLEAR REGULATORY COMMISSION
APPLICATION FOR BYPRODUCT MATERIAL LICENSE—
USE OF SEALED SOURCES IN RADIOGRAPHY

Approved by OMB
3150-0023
Expires 12-31-84

(SEE ATTACHED NRC FORM 313R INSTRUCTIONS AND NRC REGULATORY GUIDE 10.6—USE SUPPLEMENTAL SHEET WHERE NECESSARY) BE SURE ALL ITEMS ARE COMPLETED AND THAT ALL NECESSARY ATTACHMENTS ARE FURNISHED. IF ANY PORTION OF THE APPLICATION IS NOT APPLICABLE SPECIFICALLY TO STATE, DEFICIENT OR INCOMPLETE APPLICATIONS MAY BE RETURNED WITHOUT CONSIDERATION. LICENSE FEE REQUIRED. SEE ITEM 7 OF INSTRUCTIONS.

83 JUL 29 P2:27

(I) NAME AND ADDRESS OF APPLICANT AND TELEPHONE NUMBER

Crane Midwest Fittings
1450 South Second Street
St. Louis, MO 63166

(II) TELEPHONE NO.: Area Code (314) 621-8300

2. THIS IS AN APPLICATION FOR (Check appropriate item)

A. ☐ NEW LICENSE

B. ☐ AMENDMENT TO LICENSE NO.

C. ☒ RENEWAL OF LICENSE NO. 24-00563-02

(C) APPLICANT IS: An individual ☐ A partnership ☐ A Corporation ☒ An Unincorporated Association ☐ Other ☐ If applicant is other than an individual, the applicable section on the reverse side must be completed.

3. LOCATION(S) WHERE SEALED SOURCES WILL BE USED AND/OR STORED. (If use will be made in places other than named in (I), they should be listed here.)

Crane Midwest Fittings
1450 South Second Street
St. Louis, MO 63166

4. SEALED SOURCES TO BE USED IN RADIOGRAPHY (Attach supplementary pages, if necessary)

BYPRODUCT MATERIAL (Element and Mass No.)	SOURCE MODEL NUMBER	NAME OF MANUFACTURER	MAXIMUM ACTIVITY PER SOURCE	NUMBER OF SOURCES
A. Iridium-192	A. A-424-1	A. Technical Opera.	A. 50 Curies	A. 1
B. Cobalt-60	B. A-424-3	B. Technical Opera.	B. 20 Curies	B. 1
C. Cobalt-60	C. A-453-2	C. Technical Opera.	C. 20 Curies	C. 1

5(a) RADIOGRAPHIC EXPOSURE DEVICES (Attach supplementary pages, if necessary)

MODEL NUMBER	NAME OF MANUFACTURER (Include description if custom made)
A. T.O. Model 412	A. Technical Operations
B. T.O. Model 491	B. Technical Operations
C. T.O. Model 520	C. Technical Operations

Applicant: 171176
Check No. 171176
Amount: Fee Category 2150
Type of Fee: Renewal
Date Check Recd: 8/9/83
Received By: Brown

5(b) RADIOGRAPHIC SOURCE CHANGERS (Attach supplementary pages, if necessary)

MODEL NUMBER	NAME OF MANUFACTURER (Include description if custom made)
A. TO Model 650 & CMF Model #1	A. Technical Operations-Crane-See Section VI
B. TO Model 416 or 771 & CMF Mod.#1	B. Technical Operations-Crane-See Section VI
C. TO Model 416 or 771 & CMF Mod.#1	C. Technical Operations-Crane-See Section VI

6. THE FOLLOWING INFORMATION IS ATTACHED AS A PART OF THIS APPLICATION. (Attach appropriate sheets and attach information called for in the instructions with this form.)

	RECEIVED BY LFRS	Attached	Previously Submitted
(a) Description of radiographic facilities (Instruction 6-1)	8/9/83	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Description of radiation detection instruments (Instruction 6-2)	8/9/83	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c) Instrument calibration procedures (Instruction 6-3)	8/9/83	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(d) Personnel monitoring equipment (Instruction 6-4)	8/9/83	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(e) Operating and emergency procedures (Instruction 6-5)	8/9/83	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(f) Training program (Instruction 6-6)	8/9/83	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(g) Interim reaction system or other management system (Instruction 6-7)	8/9/83	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(h) Overall organizational structure (Instruction 6-8)	8/9/83	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(i) Leak testing procedures (Instruction 6-9)	8/9/83	<input checked="" type="checkbox"/>	<input type="checkbox"/>

CERTIFICATE (This item must be completed by applicant)

7. THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATE ON BEHALF OF THE APPLICANT NAMED IN ITEM 1, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PART 30, AND THAT ALL INFORMATION CONTAINED HEREIN, INCLUDING ANY SUPPLEMENTS ATTACHED HERETO, IS TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF.

LICENSE FEE ENCLOSED \$ 150.00

8507260159 850702
REG L1C30
24-00563-02 PDR

Date July 27, 1983

BY

George W. Eckert

(Signature)

George W. Eckert

(Type or print name of certifying official)

Superintendent Quality Assurance 15450

(Title of certifying official)

WARNING: - 18 U.S.C., Section 1001, Act of June 25, 1948, 62 Stat. 749, makes it a criminal offense to make a willfully false statement or representation to any department or agency of the United States or to any member thereof in connection with...

SENT REGION

15450

rec. 8/2/83

LEGAL STRUCTURE OF APPLICANT

If applicant is a corporation, complete items 8 through 11; if applicant is a partnership, complete items 12 through 14; if applicant is an unincorporated association or a legal entity other than a partnership or corporation, complete items 15 and 16. Attach separate sheets where space provided proves inadequate.

CORPORATION

8. STOCK OF APPLICANT CORPORATION

NO. OF SHARES AUTHORIZED	NO. OF SHARES ISSUED	NO. OF SHARES SUBSCRIBED	TOTAL NUMBER OF:	
			(a) Stockholders	(b) Subscribers
REFERENCE LICENSE NO. 24-00563-02				

9. Is applicant corporation directly or indirectly controlled by another corporation or other legal entity?

YES ☐NO ☒

If answer is "YES" give name and address of other corporation or other legal entity and describe how such control exists and the extent thereof.

Reference License No. 24-00563-02

10. (a) Identify by name and address any individual, corporation, or other legal entity (1) owning 10 percent or more of the stock of applicant corporation (issued and outstanding) or (2) subscribing to 10 percent or more of the authorized but unissued stock of the corporation.
(b) Identify by name and address all officers and directors of the corporation.

Reference License No. 24-00563-02

11. Identify the State, District, Territory, or possession under the laws of which the applicant is incorporated.

Reference License No. 24-00563-02

RECEIVED BY LFMB

Date 8/9/83

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By Jacques

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Action Compl

PARTNERSHIP

12. Name and address of each individual or legal entity having a partnership interest in the applicant.

Reference License No. 24-00563-02

13. State the percent of ownership of the applicant partnership held by each of the individuals or legal entities listed in item 12.

14. Identify the State, District, Territory, or possession under the laws of which the applicant partnership is organized.

OTHER

15. Describe the nature of the applicant and identify the State, District, Territory, or possession under the laws of which it is organized.

16. State the total number of members or persons holding an ownership in the applicant, identify each by name and address, and indicate the ownership interest thereof.