



SECTION 1
PAGE 1 of 2

GENERAL LICENSEE REGISTRATION

[illegible]



05/06/2020

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: MOORE

[illegible]

First Name: ERMAN

[illegible]

Middle Initial: A

11

Business Telephone Number: (304) 380-0334

--	--	--	--

Extension:

--	--	--	--	--

Business E-mail Address: emoore@blackhawkmining.com

[illegible]

Title: CURRENT SAFETY OFFICER

[illegible]

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

Department: TECHNICAL SERVICES

[illegible]

Address Line 1: 3228 SUMMIT SQUARE PLACE

[illegible]

Address Line 2: SUITE 180

[illegible]

City: LEXINGTON

[illegible]

State: KY

--	--

Zip Code: 40509

--	--	--	--	--

-

--	--	--	--





GL-30878-25

05/06/2020

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2

Our records indicate that you have these devices. Please update the information as necessary.

PAGE 1 of 2

NRC Device Key**695087 (Internal Control Number)**

Distributor/Distributed By: KAY-RAY/SENSALL, INC.

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

Distributor License Number: IL-01010-02

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

Manufacturer name: KAY-RAY/SENSALL, INC.

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

Device Model (Not Source Model): 7062BP

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

Device Serial Number: 24767

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

Transfer Date: 08/15/1988

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

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

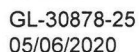
MM

DD

YYYY

	Isotope (e.g. AM241)	Activity (e.g. 1005)	Unit (e.g. mCi)																					
1	CS137 <table><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						100 <table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>													mCi <table><tr><td></td><td></td><td></td></tr></table>				
2	<table><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>														<table><tr><td></td><td></td><td></td></tr></table>			
3	<table><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>														<table><tr><td></td><td></td><td></td></tr></table>			
4	<table><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>														<table><tr><td></td><td></td><td></td></tr></table>			
5	<table><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>														<table><tr><td></td><td></td><td></td></tr></table>			
6	<table><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>														<table><tr><td></td><td></td><td></td></tr></table>			





SECTION 3

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:

--	--	--	--

MM

DD

YYYY

- ☐ Other Sources

Isotope (e.g. AM241)

Activity (e.g. 100)

Unit (e.g. mCi)

[illegible]



GL-30878-25
05/06/2020

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>)

Erman Moore

5/19/2020

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-30878-25

05/06/2020



SECTION 6 - DEVICE NOT SUBJECT TO REGISTRATION

SECTION 6
PAGE 1 of 1

NRC Device Key:

Manufacturer License No:

Manufacturer Name:

Model Number:

Serial #:

Transfer Date:

Isotope:

Activity:

Unit:

