

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

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[illegible]

NMSSID
NMSS



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Enter the name, telephone number and title of the person who is the responsible individual for the device(s).

[illegible][illegible][illegible]

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

1	2	3
4	5	6

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	Isotope (e.g. AM241)	Activity (e.g. 1005)	Unit (e.g. mCi)
1	AM241	1000	
2			
3			
4			
5			
6			





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SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

SECTION 3

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

Manufacturer Name

A D V A N C E D G A U G I N G T E C H

Initial Transferor Name

A D V A N C E D G A U G I N G T E C H

Initial Transferor License Number (if known)

3 4 - 3 2 0 2 1 - 0 2

Device Model Number (Not Source Model)

A G T 4 0 0

Device Serial Number

3 9 1 3

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

☒ Manufacturer/Initial Transferor listed above

☐ Other General Licensee

☐ Other Sources

Date Transferred:

0 1 2 2 2 0 2 0

MM

DD

YYYY

Isotope (e.g. AM241)

Activity (e.g. 100)

Unit (e.g. mCi)

1. A M 2 4 1

1 0 0 0

M C i

2.

3.

4.

5.

6.

7.

8.

9.

10.



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SECTION 4 - NOT IN POSSESSION OF DEVICE



SECTION 4

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Provide information about devices listed in Section 2 or 6, but no longer in your possession.

Part 1

NRC Device Key:
(from Section 2 or 6)

1 9 2 1 9

Transfer Date:

03 19 2020

MM

DD

YYYY

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):

34 - 32021 - 02

Company Name:

ADVANCED GAUGING TECH

Department:

Address Line 1:

0430 ESTATES COURT

Address Line 2:

City:

PLAIN CITY

State:

OH

Zip Code:

43064

Part 3

Enter the name of the individual responsible for this device:

Last name:

First name:

Middle Initial:

Business Telephone
Number:

Extension:

Title:



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SECTION 4 - NOT IN POSSESSION OF DEVICE



SECTION 4

PAGE 1 of 1

Provide information about devices listed in Section 2 or 6, but no longer in your possession.

Part 1

NRC Device Key:

(from Section 2 or 6)

595486

Transfer Date:

03 19 2020

MM

DD

YYYY

Location of the Device:

- ☐ Whereabouts Unknown (Complete Part 1 only)
- ☐ Never Possessed the Device (Complete Part 1 only)
- ☐ Returned to Manufacturer (Complete Part 1 only)

- ☐ Transferred to another general licensee (Complete Parts 2 and 3)
- ☒ Transferred to a Specific Licensee (Not the manufacturer) (Complete Part 2)

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

34-32021-02

Company Name:

ADVANCED GAUGING TECH

Department:

Address Line 1:

8430 ESTATES COURT

Address Line 2:

City:

PLAIN CITY

State:

OH

Zip Code:

43064

Part 3

Enter the name of the individual responsible for this device:

Last name:

First name:

Middle Initial:

Business Telephone Number:

Extension:

Title:



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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.
(Copies of applicable regulations may be viewed at the NRC website at:
<http://www.nrc.gov/reading-rm/doc-collections/cfr>)

Jeffrey R. Smith
SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1)

6/15/21
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.



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SECTION 6 - DEVICE NOT SUBJECT TO REGISTRATION

SECTION 6
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NRC Device Key:

Manufacturer License No:

Manufacturer Name:

Model Number:

Serial #:

Transfer Date:

Isotope:

Activity:

Unit:

