

[illegible]



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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).

Last Name: LAUER

[illegible]

First Name: RUSSELL

[illegible]

Middle Initial: P

7

Business Telephone Number: (202) 841-6704

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Extension:

--	--	--	--	--

Business E-mail Address:

RP L A U E R @ L A N E C O N S T R U C T . C O M

Title: QUALITY MANAGER

[illegible]

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

Department:

[illegible]

Address Line 1: 705 GLASGOW AVENUE

[illegible]

Address Line 2:

[illegible]

City: FORT WAYNE

[illegible]

State: IN

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Zip Code: 46803

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1

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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)

8 5 2 1 4 8

Transfer Date:

1 1 1 1 2 0 2 1
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):

PA-0678

Company Name:

ALARON NUCLEAR SERVICES

Department:

Address Line 1:

2138 STATE ROUTE 18

Address Line 2:

City:

WAMPUM

State:

PA

Zip Code:

16157

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>)

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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.





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SECTION 6

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SECTION 6 - DEVICE NOT SUBJECT TO REGISTRATION

NRC Device Key:

Manufacturer License No:

Manufacturer Name:

Model Number:

Serial #:

Transfer Date:

Isotope:

Activity:

Unit:

