

USNRC REGION II - MATERIALS LICENSING/INSPECTION BRANCHES (FAX 404-562-4955) (VERIFY 404/562-4723)

NRC FORM 241 U. S. NUCLEAR REGULATORY COMMISSION

REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES

(Please read the instructions on the cover sheet before completing this form.)

APPROVED BY OMB: NO. 3160-0075 **EXPIRES: 30 DAYS**
Estimated burden for resolution to comply with this mandatory information collection request is 15 minutes. This information is required as that NRC may schedule inspections of the licensee to ensure that they are conducted in accordance with requirements for protection of the public health and safety. For more information regarding burden estimates for the information and Records Management Branch (1-6 F33), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, and to the Paperwork Reduction Project (2150-0013), Office of Management and Budget, Washington, DC 20503 NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

1. NAME OF LICENSEE (Person or firm proposing to conduct the activities described below) LAW ENGINEERING & ENVIRONMENTAL SVCS		2. TYPE OF REPORT INITIAL REVISION CLARIFICATION	3. CONTROL NUMBER (Leave Blank - Number to be assigned by NRC)
4. ADDRESS OF LICENSEE (Mailing address) or OTHER LOCATION WHERE LICENSEE MAY BE CONTACTED 1000 BUSINESS CENTER DR SUITE 90 SAVANNAH, GA 31405		5. LICENSEE CONTACT JAMES PERKINS ASS 1R50	6. TELEPHONE NUMBER (Include Area Code) 912-238-3888
7. FACSIMILE NUMBER (Include Area Code) 912-234-1749		8. ACTIVITIES TO BE CONDUCTED IN NON-AGREEMENT STATES UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20	
WELL LOGGING	LEAK TESTING AND/OR CALIBRATIONS	TELE THERAPY/RADIATOR SERVICE	
PORTABLE GAUGES	SYSTEM (Specify)		
RADIOGRAPHY =	TRANSPORTATION OR PROGRAM APPROVAL NO & REV NO GA-951	REGISTERED AS USER OF PACKAGINGS (CERTIFICATES OF COMPLIANCE NOS) SPECIAL FORM N.O.S. UN294RQ	
9. CLIENT NAME ADDRESS CITY/COUNTY STATE ZIP CODE IHP INDUSTRIAL CONTRACTORS 1701 SOUTH 8TH ST ST. JOSEPH MO 64502		10. WORK LOCATION ADDRESS (Street and Number or other location. Give as complete an address or directions as possible) HUNTER ARMY AIRFIELD BULK STORAGE	
11. CLIENT TELEPHONE NUMBER (Include Area Code) 912-354-8999	12. WORK LOCATION TECHNICIAN AUTHORIZED TO PERFORM WORK JAMES PERKINS / MARK DEGENS	13. WORK LOCATION TELEPHONE NUMBER (Include Area Code) 912-354-8997	
14. DATES SCHEDULED FROM 1-31-2000 TO 1-31-2000		15. NUMBER OF WORK DAYS	16. LOCATION REFERENCE NUMBER 00002
17. LIST ADDITIONAL WORK SITES ON SEPARATE SHEET TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 9-16 ABOVE.			
18. LIST RADIOACTIVE MATERIAL WHICH WILL BE POSSESSED, USED, INSTALLED, SERVICED, OR TESTED IN NON-AGREEMENT STATES (Include description of type and quantity of radioactive material, source, sources, or devices to be used) FR142 SOURCE D7430 90 G2			
19. AGREEMENT STATE SPECIFIC LICENSE WHICH AUTHORIZES THE UNDERSIGNED TO CONDUCT ACTIVITIES WHICH ARE THE SAME EXCEPT FOR LOCATION OF USE AS SPECIFIED IN ITEM 8 ABOVE (Four copies of the license must accompany the initial NRC Form 241)			
LICENSE NUMBER GA-952-1	STATE GA	EXPIRATION DATE 10-31-2000	TOTAL USAGE DAYS TO DATE
20. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)			
I, THE UNDERSIGNED, HEREBY CERTIFY THAT:			
a. All information in this report is true and complete.			
b. I have read and understand the provision of the general license 10 CFR 150.20 reprinted on the cover sheet of this form set and I understand that I am required to comply with these provisions as to all byproduct, source, or special nuclear material which I possess and use in non-Agreement States or offshore waters under the general license for which this report is filed with the U.S. Nuclear Regulatory Commission.			
c. I understand that activities, including storage, conducted in non-Agreement States under general license 10 CFR 150.20 are limited to a total of 180 days in calendar year.			
d. I understand that I may be inspected by NRC at the above listed work site location and at the licensee home office address for activities performed in non-Agreement States or offshore waters. I am aware that I will be responsible for any fees associated with such inspections.			
e. I understand that conduct of any activities not described above, including conduct of activities on dates or locations different from those described above or without NRC authorization, may subject me to enforcement action, including civil or criminal penalties.			
CERTIFYING OFFICER - RSO or Management Representative (Typed/Printed Name and Title) JAMES PERKINS SUPERVISOR		SIGNATURE <i>James Perkins</i>	DATE 1-28-2000
WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECTS. 18 U.S.C. SECTION 1001 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.			
FOR NRC USE ONLY	DATE D.M. Heim, LADNMS	SIGNATURE <i>D.M. Heim</i>	DATE

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