

C & J's NDT, Inc.

P.O. Box 7025
Bismarck, ND 58507-7025

Telephone: (701) 258-3881
Fax: (701) 258-5411

NRC 241 Clarification Form

(817) 860-8263

FEB 22 2000

<u>License Number</u>	<u>State</u>	<u>Expiration Date</u>	<u>NRC Control Number</u>
33-35523-01	ND	July 30, 2004	

Registered as User of Packagings (Certificates of Compliance NOS)

Spec 150 USA- 9263/B(U)-85

Radioactive Material:

Spec 150, Ir 192 150 curies (max)

Client Name, & Address:

Northern Horizons
Rt 1 Box 6658
Solway, MN 56678

Work Location Address:

Solway, MN

Client Telephone Number: (218) 467-9353

Work Location Technician Authorized to Perform Work: Chuck & June Schaan

Work Location Telephone Number: (701) 391-3881

Dates Scheduled: 2-22 + 2-23-00

Certifying Officer - RSO or Management Representative:

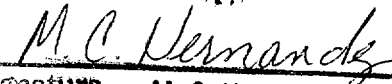


Chuck Schaan - RSO

June Schaan - President

Date: 2-22-00

Date: _____



Signature M. C. Hernandez
Radiation Specialist

Title: _____
Date: 2/22/00



UNITED STATES
NUCLEAR REGULATORY COMMISSION

REGION IV
611 RYAN PLAZA DRIVE, SUITE 400
ARLINGTON, TEXAS 76011-8064

FEB 22 2000

MEMORANDUM Shirley Crutchfield
TO: License Fee & Accounts Receivable Branch (T9 E10)
FROM: Christi Hernandez
Nuclear Materials Licensing Branch, Region IV *MCH*
SUBJECT: FEE TRANSMITTAL

A. Region IV

1. NRC FORM 241 ATTACHED

Applicant/Licensee:
NRC Form 241 Dated:
Agreement State License:
Program Code(s):

2. REVISION ATTACHED

Licensee:
Agreement State License:

3. CLARIFICATION ATTACHED

Licensee: *C + J's NDT, Inc.*
Agreement State License: *ND 33-35523-01*

4. FEE ATTACHED

Amount: \$ Check: #

5. COMMENTS

B. LICENSE FEE & ACCOUNTS RECEIVABLE BRANCH

1. Fee Category and Amount: _____
2. Correct Fee Paid. Submittal may be processed for:
General License _____
Revision _____

Signed _____ Date _____