

NRC FORM 241 (7-1999) U.S. NUCLEAR REGULATORY COMMISSION

REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES, AREAS OF EXCLUSIVE FEDERAL JURISDICTION, OR OFFSHORE WATERS
(Please read the instructions before completing this form)

APPROVED BY OMB: NO. 3150-0015 EXPIRES: 07/31/2002
Estimated burden per response to comply with this mandatory collection request is 15 minutes. This collection is required so that NRC may conduct inspection of the activities to ensure that they are conducted in accordance with requirements for protection of the public health and safety. Send comments regarding burden estimate to the Records Management Branch (7-4 EN), U.S. Nuclear Regulatory Commission, Washington, DC 20540-0001, or by Internet e-mail to rs1@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NRC-19202 (7-120-0012), Office of Management and Budget, Washington, DC 20503. If a means used to increase an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

1. NAME OF LICENSEE (Person or Firm proposing to conduct the activities described below)
Quality NDE, Inc.

2. TYPE OF REPORT
 INITIAL REVISION CLARIFICATION

3. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be located)
5200 Ridge Rd
Joelton, TN 37080

4. LICENSEE CONTACT AND TITLE
Timothy Frazee, RSO

5. TELEPHONE NUMBER (Include Area Code)
615/299-9942

6. FACSIMILE NUMBER (Include Area Code)
615/299-9943

7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 199.20
 WELL LOGGING LEAK TESTING AND/OR CALIBRATIONS TELETHERAPY/RADIATOR SERVICE
 PORTABLE GAUGES OTHER (Specify) → _____
 RADIOGRAPHY → REGISTERED AS USER OF PACKAGING (CERTIFICATES OF COMPLIANCE NUMBER) USA/9263/B(U)

8. CLIENT NAME ADDRESS CITY/COUNTY, STATE ZIP CODE
Columbia Gas
1700 McCorkle Ave
Charleston, WV 25325

9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION (Street and Number or other location. Give as complete an address, or directions as possible.)
Manakin, VA/Exit 173 off I-64 go right
1.5 mi. Hwy 250 go right to Hwy 623
go left 5 mi to Hwy 6 go east 3 mi.

10. CLIENT TELEPHONE NUMBER (Include Area Code)
540/465-6442

11. WORK LOCATION TELEPHONE NUMBER (Include Area Code)
540-333-9040

12. DATES SCHEDULED	13. NUMBER OF WORK DAYS	14. ADD	15. DELETE	16. LOCATION REFERENCE NUMBER
FROM: 11/12/99 TO: 11/12/99	1			NUMBER TO BE ASSIGNED BY NRC 000332

17. LIST ADDITIONAL WORK SITES ON SEPARATE SHEET(S) TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 8-16 ABOVE.

18. LIST RADIOACTIVE MATERIAL, WHICH WILL BE POSSESSED, USED, INSTALLED, REVICED, OR TESTED. (Provide description of type and quantity of radioactive material, sealed source or, or device to be used)
IR-192, 26 curies, Amersham Model 424-9 Sealed Source S/N D0088, Amersham Model 660B Device S/N B3600

19. 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 199.20 reprinted on the instructions of this form, 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 199.20 are limited to a total of 180 days in calendar year, with the exception of work conducted in offshore waters, which is unrestricted for an unlimited portion of time in the calendar year.
d. I understand that I may be inspected by NRC at any time under the above terms and conditions and of the licensee terms which pertain to activities performed in non-agreement States or offshore waters.
e. I understand that conduct of any activities not described above, including activities at separate sources or locations different from those described above or without NRC authorization, may subject me to enforcement action under the Atomic Energy Act and the Federal Criminal Code.

20. CERTIFYING OFFICIAL: (Title of Management Representative, Name and Title)
Timothy W. Frazee, RSO

SIGNATURE
Timothy W. Frazee

DATE
11/10/99

21. REVIEWING OFFICIAL: (Print Name and Title)
David J. Collins, Health Physicist

SIGNATURE
David J. Collins

DATE
11/10/1999

TOTAL USAGE - DAYS TO DATE
59

FOR NRC USE ONLY

WARNING: False statements in this work may be subject to civil and/or criminal penalties. NRC regulations require that submissions to the NRC be truthful 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 or to any officer within its jurisdiction.

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FAX (404) 562-4955 / VERIFY (404) 562-4723

Received in _____ on 11/10/99
cc R/X