

NRC FORM 241
(8-98)
 10 CFR 150

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.)

1. NAME OF LICENSEE (Name of the individual or the activity's designated leader)
UNIVERSITY OF ALABAMA

2. ADDRESS OF LICENSEE (Mailing address or other location where license may be carried)
**PO Box 870178
 TUSCALOOSA, AL. 35487-0178**

3. TYPE OF REPORT
 INITIAL
 REVISION
 CLARIFICATION

4. LICENSE CONTACT
HAL BARRETT
(Include Area Code)
 TELEPHONE NUMBER
205-348-5905
 FEDERAL LICENSE NUMBER
205-348-7773

5. 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	
PORTABLE GAUGES	<input checked="" type="checkbox"/> X
RADIOGRAPHY	<input type="checkbox"/>
OTHER (Specify)	WETLANDS RESEARCH

6. CLIENT NAME ADDRESS (PREVIOUS STATE ZIP CODE)
**UNIVERSITY OF ALABAMA
 370 CAMPUS DR.
 TUSCALOOSA, AL. 35487-0178**

7. CLIENT TELEPHONE NUMBER
(Include Area Code)
205-348-7773

8. WORK LOCATION # (INDICATE AUTHORITY TO PERFORM WORK)
(Include Area Code)
0170 NC 28763

9. WORK LOCATION ADDRESS (Client and number of other locations. Give as complete an address as possible in this box.)
**CONVERTA HYDROLOGIC LAB
 NANTHALA NATIONAL FOREST
 999 CONWETA LAB RD.
 OTTO, NC 28763**

10. DATE(S) SCHEDULED

12/3/99	12/4/99
2 7AM	2 5PM
2	000807

11. NUMBER WORK DAYS

12. LOCATION REFERENCE NUMBER
LEAVE BLANK FOR INITIAL NRC FORM 241 REUSE DATE NUMBER TO BE FURNISHED BY YOU

13. ADDITIONAL WORK SITES ON SEPARATE SHEET TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 9-16 ABOVE.
PREVIOUSLY SUBMITTED

14. AGREEMENT STATE SPECIFIC LICENSE WHICH AUTHORIZES THE UNDER SIGNED TO CONDUCT ACTIVITIES WHICH ARE THE SAME EXCEPT FOR LOCATION OF USE AS SPECIFIED IN ITEMS 9 ABOVE FROM STATES OF THE SEVERAL STATES MUST ACCOMPANY THE FORM (NRC Form 241)
ALABAMA

15. EXPIRATION DATE
OCTOBER 1999

16. TOTAL USAGE DATES TO DATE
8

17. THE UNDERSIGNED, HEREBY CERTIFY THAT:

- All information in this report is true and complete.
- I have read and understand the provision in the General license 10 CFR 150.20 printed on the cover sheet of this form and, and 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.
- 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.
- I understand that I may be selected by NRC at the above listed work site locations and at the licensee home office address for activities performed in non-agreement States or offshore waters. I am also aware that I will be responsible for any fees associated with such inspections.
- I understand that conduct of any activity not described on this report, including conduct of activities or locations different from those described above or without NRC authorization, may subject me to enforcement action, including civil or criminal penalties.

18. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)
 SIGNATURE: **HAL BARRETT, DIRECTOR EHS/RSO**
 DATE: **11/10/99**

19. SIGNATURE OF INDIVIDUAL OR ENTITY AUTHORIZED TO REPRESENT THE LICENSEE AND FOR SIGNATURE TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECTS. IF 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
 SIGNATURE: **David J. Collins**
 DATE: **11/10/99**

20. AUTHORIZED REPRESENTATIVE (Printed name and title)
David J. Collins, Health Physicist
 Division of Nuclear Materials Safety
 USNRC Region II

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