SECTION 1 PAGE 1 of 2 U.S. NUCLEAR REGULATORY COMMISSION

GL-718799-18 01/08/2014

NRC FORM 664

02 - 2004 10 CFR 31.5

GENERAL LICENSEE REGISTRATION

APPROVED BY OMB: NO. 3150-0198

Company Name: GATORADE OF PUERTO RICO

EXPIRES: 03/31/2010

Estimated burden per response to comply with this mandatory collection request: 20 minutes. NRC will use this information to track general licensees and their devices to ensure a higher level of device accountability. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F52), U. S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by infernet e-mail to indecollects@nrc.gov to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0000). Office of Management and Budget, Washington, DC 20503. If e means used to impose 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.

Complete all six sections of this registration form. If any of the preprinted information is incorrect, provide the changes in the applicable boxes. USE CAPITAL LETTERS.

General License

SECTION 1 - GENERAL LICENSEE INFORMATION

Registration Number

GL-718799-18

Enter the company name and the street address/physical location of use for your device(s). For portable devices, specify the primary storage location. Do not use a P.O. Box address.

6	A	1	O	R	A	V	E		0	F		ρ	U	Б	R	ļ	ø		R	į	C	0
Department: PUERTO RICO																						
P	Ü	Ë	2	٣	0		R	1	C	0												
Address Line 1: ROAD 545 KM 0.3																						
R	o	A	0		5	4	5		K	in	ϕ	ď	3									
Address Line 2: BO. PASO SECO																						
В	9		P	À	S	0		Ŋ	ت	C	O											
City: SANTA ISABEL																						
5	A	N	· † ·	A		Ľ	5	ļτ	β	E	L											
State: PR PP							Zip C	ode:	00	757	-		ф	φ	7	7	7	-				
						For NRC Use Only (Do not write here) Packet F						et Ro	Category: Category: Receipt Date (MMDDYYYY):									
						Accession Number:																

GL -	7	1	8	7	9	9	-	1 8	
Date		01/	08/						

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: 6 A R Ċ First Name: Middle Initial: PA 5 B Telephone: Extension: 7 8 7 D Title: C 0 Enter the mailing address where correspondence regarding your device(s) should be sent. Department: 1+ 0 6 A Address Line 1: 0 B O λ-Address Line 2: City: B J Á Zip Code: State:

GL-718799-18

01/08/2014

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2

Our records indicate that you have these devices. Please update the information as necessary. PAGE 1 of 1 **NRC Device Key** 735585 (Internal Control Number) Distributor/Distributed By: PECO CONTROLS CORPORATION (0 O A 0 E Distributor License Number: 3823-43 GL 8 .2 3 6 Manufacturer Name: PECO CONTROLS CORPORATION Ċ R ς 12 C Device Model (Not Source Model): GAMA 101P A M 0 Device Serial Number: G030360526 2 6 5 3 O 3 O Transfer Date (Receipt Date): 07/18/2005 Not in possession of device 8 7 O (Also complete Section 4.) DD YYYY MM Isotope (e.g. AM241) Activity (e.g. 100) Unit (e.g. mCi) AM241 100.000000000 1 mCi \boldsymbol{C} 2 3 4 5 6

GL-718799-18 01/08/2014

SECTION 3

SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

PAGE 1 of 1

Provide information about other devices you have that are subject to registration. Do not report specifically licensed devices. Manufacturer Name Initial Transferor Name Initial Transferor License Number (if known) Device Model Number (Not Source Model) Device Serial Number O Manufacturer/Initial Transferor listed above How acquired and date (e.g., O Other General Licensee from a distributor/manufacturer, Date Transferred: other licensee, other source)? (Received) O Other Source YYYY MM DD Isotope (e.g. AM241) Activity (e.g. 100) Unit (e.g. mCi) 1. 2. 3. 4. 5. 6. 7. 8. 9. 10.

GL-718799-18 01/08/2014

SECTION 4 - NOT IN POSSESSION OF DEVICE

SECTION 4 PAGE 1 of 1

Provide information about devices listed in Section 2 or 6, but no longer in your possession.

Frovide information about devices listed in Section 2	or of partito longer in your possession.									
Part 1	Transfer Date:									
NRC Device Key:										
(from Section 2 or 6)	MM DD YYYY									
Location of the Device:	WIN DD TTT									
O Whereabouts Unknown (complete Part 1 only)	O Transferred to another general licensee (complete Parts 2 and 3									
 Never Possessed the Device (complete Part 1 only Returned to Manufacturer (complete Part 1 only) 	 O Transferred to a Specific Licensee (Not the manufacturer) (complete Part 2) 									
Part 2 License Number of Recipient (if transferred to a sp										
Fait 2 License Number of Necipient (in transferred to a s										
Company Name:										
Department:										
Address Line 1:										
Address Line 2:										
City:										
State: Zip Code:										
Part 3 Enter the name of the individual responsible for this device: Last Name:										
First Name:	Middle Initial:									
Telephone Number:	Extension:									
Title:										

SECTION 5 - CERTIFICATION

GL-718799-18 01/08/2014

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/peapling-rm/doc-collections/cfr)

(Yalls) 10/12/2014

SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1) DA

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.

GL-718799-18 01/08/2014

SECTION 6 - DEVICES NOT SUBJECT TO REGISTRATION

SECTION 6

PAGE 1 of 1

NRC Device Key:

Manufacturer License No:

Manufacturer Name:

Model Number:

Serial #:

Transfer Date: