C FORM 699 U.S. NUCLEAR REGULATORY COMMISSION			DATE OF SIGNATURE	
(03-2013) CONVERSATION RECORD			10/02/2014	
NAME OF PERSON(S) CONTACTED OR IN	CONTACT WITH YOU		DATE OF CONTACT	TYPE OF CONVERSATION
Dennis Ream		10/02/2014	E-MAIL ✓ TELEPHONE	
E-MAIL ADDRESS		TELEPHONE NUMBER	INCOMING	
dream@bowser-morner.com			(937) 236-8805	OUTGOING
ORGANIZATION		DOCKET NUMBER(S)		
Radiation Safety Officer Bowser-Morner, Inc.		030-35052		
LICENSE NUMBER(S)		CONTROL NUMBER(S)		
34-17390-02		584886		
SUBJECT				
Additional Information for New Radiation Safety Officer.				
SUMMARY				
In your request, you have indicated that your RSO will be leaving the company. Please note that you will not be able to change and name your RSO internally; NRC must do that for you via the amendment process. Please provide the following additional information: 1. Please provided the training certificates for the training received by the proposed RSO, John E. Gray. 2. Please provide written, signed (by both senior management and the proposed RSO) and a currently dated statement that stipulates your proposed RSO accepts the position and understands the duties and responsibilities associated with the position. A sample Delegation of Authority memo is attached to this document in Attachment 1.				
Continue on Page 2				
Please submit your response by October 17, 2014, and reference it to my attention as "additional information to control number 584886" to facilitate proper handling in our office. Your response must be currently dated and signed by a senior management representative. If you have any questions or require clarification of any of the information stated above, please do not hesitate to contact me at 630-829-9607 In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be available electronically for public inspection in the NRC Public Document Room or from the NRC's Agencywide Documents Access and Management System (ADAMS), accessible from the NRC Web site at http://www.nrc.gov/reading-rm/adams.html. Continue on Page 3				
NAME OF PERSON DOCUMENTING CONVERSATION				
Jennifer L. Bishop				
SIGNATURE SIGNATURE SIGNATURE				

Attachment 1

Model Delegation of Authority:

	Radiation Safety Officer	
From:	Chief Executive Officer	
Subject:	Delegation of Authority	
for ensuring Protection or providing unsafe active the authoric byproduct of shutting do to notify maissues. In a	g the safe use of radiation. You are reprogram; identifying radiation protecting corrective actions; verifying implementations; and ensuring compliance with the stynecessary to meet those responsible material by employees who do not measure of the styne operations where justified to main anagement if staff does not cooperate addition, you are free to raise issues were it is estimated that you will spend	
Signature	of Management Representative	Date
Signature (or Management Nepresentative	Date
I accept the	e above responsibilities,	
Signature of	of Radiation Safety Officer	Date
cc: Affecte	d department heads	