


SCREEN DESIGNS OF THE ONLINE FORM 748 VARIATIONS

NRC Form 748B – Transfer Source

<p>NRC FORM 748B (05-22-2023) 10 CFR 20.2207</p>  <p style="text-align: center;">U.S. NUCLEAR REGULATORY COMMISSION</p> <p style="text-align: center;">TRANSFER SOURCE NATIONAL SOURCE TRACKING TRANSACTION REPORT</p>	<p>APPROVED BY OMB: NO. 3150-0202</p> <p>Estimated burden per response to comply with this mandatory information collection request: 9.5 minutes. NRC requires this information to populate the National Source Tracking System for certain sealed sources. Send comments regarding burden estimate to the FOIA, Library, and Information Collections Branch (T-6 A10M), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by e-mail to Infocollects.Resource@nrc.gov; and the OMB reviewer at: OMB Office of Information and Regulatory Affairs, (3150-0202), Attn: Desk Officer for the Nuclear Regulatory Commission, 725 17th Street NW, Washington, DC 20503; [REDACTED]. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the document requesting or requiring the collection displays a currently valid OMB control number.</p>	<p>EXPIRES: 05/31/2026</p>
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[INSTRUCTIONS](#)

1. LICENSEE INFORMATION

A. LICENSEE NAME *	B. LICENSE NO. *	C. LICENSEE STREET ADDRESS *
<input type="text"/>	<input type="text"/>	<input type="text"/>
D. CITY *	E. STATE *	F. ZIP CODE *
<input type="text"/>	<input type="text"/>	<input type="text"/>

2. TRANSACTION DATE (Only transactions completed on the same date may be reported together on this form)

TRANSACTION DATE *

3A. TRANSACTION INFORMATION

<input type="checkbox"/> NEW	<input type="checkbox"/> CORRECTION	IF CORRECTION, PREVIOUS TRANSACTION DATE
		<input type="text" value="M/D/YYYY"/>

3B. TRANSACTION TYPE

<input type="checkbox"/> REPORT SOURCE INVENTORY	<input checked="" type="checkbox"/> TRANSFER	<input type="checkbox"/> RECEIPT
<input type="checkbox"/> DISPOSAL	<input type="checkbox"/> NEW SOURCE MANUFACTURED	<input type="checkbox"/> IMPORT
<input type="checkbox"/> EXPORT	<input type="checkbox"/> DISASSEMBLE	

4. PREPARER INFORMATION

A. NAME OF PREPARER *	B. DATE PREPARED *	C. PREPARER PHONE	D. PREPARER E-MAIL (Required for confirmation) *
<input type="text"/>	<input type="text" value="M/D/YYYY"/>	<input type="text"/>	<input type="text"/>

6. SOURCE TRANSFER DATA

A1. RECEIVING LICENSEE NAME *	B1. RECEIVING LICENSEE LICENSE NO. *	C1. RECEIVING LICENSEE SHIPPING ADDRESS *
<input type="text"/>	<input type="text"/>	<input type="text"/>
D1. CITY *	E1. STATE *	F1. ZIP CODE *
<input type="text"/>	<input type="text"/>	<input type="text"/>
G1. SOURCE MAKE *	H1. SOURCE MODEL *	I1. SOURCE SERIAL NUMBER *
<input type="text"/>	<input type="text"/>	<input type="text"/>
J1. ISOTOPE *	K1. ACTIVITY *	K1. ACTIVITY UNIT *
<input type="text"/>	<input type="text"/>	<input type="text"/>
L1. ACTIVITY DATE *	M1. WASTE MANIFEST NO. (For waste shipments only)	N1. CONTAINER ID (For waste shipments only)
<input type="text" value="M/D/YYYY"/>	<input type="text"/>	<input type="text"/>
O1. ESTIMATED ARRIVAL DATE *		
<input type="text" value="M/D/YYYY"/>		
P1. COMMENTS		
<input type="text"/>		

A2. RECEIVING LICENSEE NAME

D2. CITY

G2. SOURCE MAKE

J2. ISOTOPE

L2. ACTIVITY DATE

O2. ESTIMATED ARRIVAL DATE

P2. COMMENTS

B2. RECEIVING LICENSEE LICENSE NO.

E2. STATE

H2. SOURCE MODEL

K2. ACTIVITY

M2. WASTE MANIFEST NO. (For waste shipments only)

C2. RECEIVING LICENSEE SHIPPING ADDRESS

F2. ZIP CODE

I2. SOURCE SERIAL NUMBER

K2. ACTIVITY UNIT

N2. CONTAINER ID (For waste shipments only)

A3. RECEIVING LICENSEE NAME

D3. CITY

G3. SOURCE MAKE

J3. ISOTOPE

L3. ACTIVITY DATE

O3. ESTIMATED ARRIVAL DATE

P3. COMMENTS

B3. RECEIVING LICENSEE LICENSE NO.

E3. STATE

H3. SOURCE MODEL

K3. ACTIVITY

M3. WASTE MANIFEST NO. (For waste shipments only)

C3. RECEIVING LICENSEE SHIPPING ADDRESS

F3. ZIP CODE

I3. SOURCE SERIAL NUMBER

K3. ACTIVITY UNIT

N3. CONTAINER ID (For waste shipments only)

A4. RECEIVING LICENSEE NAME

D4. CITY

G4. SOURCE MAKE

J4. ISOTOPE

L4. ACTIVITY DATE

O4. ESTIMATED ARRIVAL DATE

P4. COMMENTS

B4. RECEIVING LICENSEE LICENSE NO.

E4. STATE

H4. SOURCE MODEL

K4. ACTIVITY

M4. WASTE MANIFEST NO. (For waste shipments only)

C4. RECEIVING LICENSEE SHIPPING ADDRESS

F4. ZIP CODE

I4. SOURCE SERIAL NUMBER

K4. ACTIVITY UNIT

N4. CONTAINER ID (For waste shipments only)

A5. RECEIVING LICENSEE NAME

D5. CITY

G5. SOURCE MAKE

J5. ISOTOPE

L5. ACTIVITY DATE

B5. RECEIVING LICENSEE LICENSE NO.

E5. STATE

H5. SOURCE MODEL

K5. ACTIVITY

M5. WASTE MANIFEST NO. (For waste shipments only)

C5. RECEIVING LICENSEE SHIPPING ADDRESS

F5. ZIP CODE

I5. SOURCE SERIAL NUMBER

K5. ACTIVITY UNIT

N5. CONTAINER ID (For waste shipments only)

05. ESTIMATED ARRIVAL DATE


P5. COMMENTS

[INSTRUCTIONS](#)

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NRC FORM 748B (05-22-2023)

Submit

NRC Form 748C – Receive Source

<p>NRC FORM 748C (05-22-2023) 10 CFR 20.2207</p>  <p>U.S. NUCLEAR REGULATORY COMMISSION</p> <p>RECEIVE SOURCE NATIONAL SOURCE TRACKING TRANSACTION REPORT</p>	<p>APPROVED BY OMB: NO. 3150-0202</p> <p>EXPIRES: 05/31/2026</p> <p>Estimated burden per response to comply with this mandatory information collection request: 9.5 minutes. NRC requires this information to populate the National Source Tracking System for certain sealed sources. Send comments regarding burden estimate to the FOIA, Library, and Information Collections Branch (T-6 A10M), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by e-mail to Infocollects.Resource@nrc.gov, and the OMB reviewer at: OMB Office of Information and Regulatory Affairs, (3150-0202), Attn: Desk Officer for the Nuclear Regulatory Commission, 725 17th Street NW, Washington, DC 20503; [REDACTED]. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the document requesting or requiring the collection displays a currently valid OMB control number.</p>
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[INSTRUCTIONS](#)

1. LICENSEE INFORMATION

A. LICENSEE NAME *	B. LICENSE NO. *	C. LICENSEE STREET ADDRESS *
<input type="text"/>	<input type="text"/>	<input type="text"/>
D. CITY *	E. STATE *	F. ZIP CODE *
<input type="text"/>	<input type="text"/>	<input type="text"/>

2. TRANSACTION DATE (Only transactions completed on the same date may be reported together on this form)

TRANSACTION DATE *

3A. TRANSACTION INFORMATION

<input type="checkbox"/> NEW	<input type="checkbox"/> CORRECTION	IF CORRECTION, PREVIOUS TRANSACTION DATE
		<input type="text" value="M/D/YYYY"/>

3B. TRANSACTION TYPE

<input type="checkbox"/> REPORT SOURCE INVENTORY	<input type="checkbox"/> TRANSFER	<input checked="" type="checkbox"/> RECEIPT
<input type="checkbox"/> DISPOSAL	<input type="checkbox"/> NEW SOURCE MANUFACTURED	<input type="checkbox"/> IMPORT
<input type="checkbox"/> EXPORT	<input type="checkbox"/> DISASSEMBLE	

4. PREPARER INFORMATION

A. NAME OF PREPARER *	B. DATE PREPARED *	C. PREPARER PHONE	D. PREPARER E-MAIL *
<input type="text"/>	<input type="text" value="M/D/YYYY"/>	<input type="text"/>	<input type="text"/>

7. SOURCE RECEIPT DATA

A1. SENDING LICENSEE NAME *	B1. SENDING LICENSEE LICENSE NO. *	C1. SENDING LICENSEE SHIPPING ADDRESS *
<input type="text"/>	<input type="text"/>	<input type="text"/>
D1. CITY *	E1. STATE *	F1. ZIP CODE *
<input type="text"/>	<input type="text"/>	<input type="text"/>
G1. SOURCE MAKE *	H1. SOURCE MODEL *	I1. SOURCE SERIAL NUMBER *
<input type="text"/>	<input type="text"/>	<input type="text"/>
J1. ISOTOPE *	K1. ACTIVITY *	K1. ACTIVITY UNIT *
<input type="text"/>	<input type="text"/>	<input type="text"/>
L1. ACTIVITY DATE *	M1. WASTE MANIFEST NO. (For waste shipments only)	N1. CONTAINER ID (For waste shipments only)
<input type="text" value="M/D/YYYY"/>	<input type="text"/>	<input type="text"/>
O1. SOURCE LOCATION ADDRESS *	P1. CITY *	Q1. STATE *
<input type="text"/>	<input type="text"/>	<input type="text"/>
R1. ZIP CODE *	S1. SAME AS STREET ADDRESS *	
<input type="text"/>	<input checked="" type="radio"/> No <input type="radio"/> Yes	

T1. COMMENTS

A2. SENDING LICENSEE NAME

B2. SENDING LICENSEE LICENSE NO.

C2. SENDING LICENSEE SHIPPING ADDRESS

D2. CITY

E2. STATE

F2. ZIP CODE

G2. SOURCE MAKE

H2. SOURCE MODEL

I2. SOURCE SERIAL NUMBER

J2. ISOTOPE

K2. ACTIVITY

K2. ACTIVITY UNIT

L2. ACTIVITY DATE

M2. WASTE MANIFEST NO. (For waste shipments only)

N2. CONTAINER ID (For waste shipments only)

O2. SOURCE LOCATION ADDRESS

P2. CITY

Q2. STATE

R2. ZIP CODE

S2. SAME AS STREET ADDRESS

No Yes

T2. COMMENTS

A3. SENDING LICENSEE NAME

B3. SENDING LICENSEE LICENSE NO.

C3. SENDING LICENSEE SHIPPING ADDRESS

D3. CITY

E3. STATE

F3. ZIP CODE

G3. SOURCE MAKE

H3. SOURCE MODEL

I3. SOURCE SERIAL NUMBER

J3. ISOTOPE

K3. ACTIVITY

K3. ACTIVITY UNIT

L3. ACTIVITY DATE

M/D/YYYY

M3. WASTE MANIFEST NO. (For waste shipments only)

N3. CONTAINER ID (For waste shipments only)

O3. SOURCE LOCATION ADDRESS

P3. CITY

Q3. STATE

R3. ZIP CODE

S3. SAME AS STREET ADDRESS

No Yes

T3. COMMENTS

A4. SENDING LICENSEE NAME

B4. SENDING LICENSEE LICENSE NO.

C4. SENDING LICENSEE SHIPPING ADDRESS

D4. CITY

E4. STATE

F4. ZIP CODE

G4. SOURCE MAKE

H4. SOURCE MODEL

I4. SOURCE SERIAL NUMBER

J4. ISOTOPE

K4. ACTIVITY

L4. ACTIVITY UNIT

L4. ACTIVITY DATE

M/D/YYYY

M4. WASTE MANIFEST NO. (For waste shipments only)

N4. CONTAINER ID (For waste shipments only)

O4. SOURCE LOCATION ADDRESS

P4. CITY

Q4. STATE

R4. ZIP CODE

S4. SAME AS STREET ADDRESS

No Yes

T4. COMMENTS

A5. SENDING LICENSEE NAME

B5. SENDING LICENSEE LICENSE NO.

C5. SENDING LICENSEE SHIPPING ADDRESS

D5. CITY

E5. STATE

F5. ZIP CODE

G5. SOURCE MAKE

H5. SOURCE MODEL

I5. SOURCE SERIAL NUMBER

J5. ISOTOPE

K5. ACTIVITY

L5. ACTIVITY UNIT

L5. ACTIVITY DATE

M/D/YYYY

M5. WASTE MANIFEST NO. (For waste shipments only)

N5. CONTAINER ID (For waste shipments only)

O5. SOURCE LOCATION ADDRESS

P5. CITY

Q5. STATE

R5. ZIP CODE

S5. SAME AS STREET ADDRESS

No Yes

T5. COMMENTS


[INSTRUCTIONS](#)

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NRC FORM 748C (05-22-2023)

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NRC Form 748D – Dispose Source

NRC FORM 748D (05-22-2023) 10 CFR 20.2207	 U.S. NUCLEAR REGULATORY COMMISSION DISPOSE SOURCE NATIONAL SOURCE TRACKING TRANSACTION REPORT	APPROVED BY OMB: NO. 3150-0202	EXPIRES: 05/31/2026
		Estimated burden per response to comply with this mandatory information collection request: 9.5 minutes. NRC requires this information to populate the National Source Tracking System for certain sealed sources. Send comments regarding burden estimate to the FOIA, Library, and Information Collections Branch (T-6 A10M), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by e-mail to Infocollects.Resource@nrc.gov , and the OMB reviewer at: OMB Office of Information and Regulatory Affairs, (3150-0202), Attn: Desk Officer for the Nuclear Regulatory Commission, 725 17th Street NW, Washington, DC 20503; [REDACTED]. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the document requesting or requiring the collection displays a currently valid OMB control number.	

[INSTRUCTIONS](#)

1. LICENSEE INFORMATION

A. LICENSEE NAME *	B. LICENSE NO. *	C. LICENSEE STREET ADDRESS *
<input type="text"/>	<input type="text"/>	<input type="text"/>
D. CITY *	E. STATE *	F. ZIP CODE *
<input type="text"/>	<input type="text"/>	<input type="text"/>

2. TRANSACTION DATE (Only transactions completed on the same date may be reported together on this form)

TRANSACTION DATE *

3A. TRANSACTION INFORMATION

<input type="checkbox"/> NEW	<input type="checkbox"/> CORRECTION	IF CORRECTION, PREVIOUS TRANSACTION DATE
		<input type="text" value="M/D/YYYY"/> 


3B. TRANSACTION TYPE

<input type="checkbox"/> REPORT SOURCE INVENTORY	<input type="checkbox"/> TRANSFER	<input type="checkbox"/> RECEIPT
<input checked="" type="checkbox"/> DISPOSAL	<input type="checkbox"/> NEW SOURCE MANUFACTURED	<input type="checkbox"/> IMPORT
<input type="checkbox"/> EXPORT	<input type="checkbox"/> DISASSEMBLE	

4. PREPARER INFORMATION

A. NAME OF PREPARER *	B. DATE PREPARED *	C. PREPARER PHONE	D. PREPARER E-MAIL *
<input type="text"/>	<input type="text" value="M/D/YYYY"/> 	<input type="text"/>	<input type="text"/>

8. SOURCE DISPOSAL DATA

A1. WASTE MANIFEST NUMBER *	B1. CONTAINER ID *	C1. METHOD OF DISPOSAL *
<input type="text"/>	<input type="text"/>	<input type="text"/>
D1. SOURCE MAKE *	E1. SOURCE MODEL *	F1. SOURCE SERIAL NUMBER *
<input type="text"/>	<input type="text"/>	<input type="text"/>
G1. ISOTOPE *	H1. ACTIVITY *	H1. ACTIVITY UNIT *
<input type="text"/>	<input type="text"/>	<input type="text"/>
I1. ACTIVITY DATE *		
<input type="text" value="M/D/YYYY"/> 		
J1. COMMENTS		
<input type="text"/>		
K1. SOURCE DISPOSAL ADDRESS *	L1. CITY *	M1. STATE *
<input type="text"/>	<input type="text"/>	<input type="text"/>
N1. ZIP CODE *	O1. SAME AS STREET ADDRESS *	
<input type="text"/>	<input checked="" type="radio"/> No <input type="radio"/> Yes	
A2. WASTE MANIFEST NUMBER	B2. CONTAINER ID	C2. METHOD OF DISPOSAL
<input type="text"/>	<input type="text"/>	<input type="text"/>

D2. SOURCE MAKE

E2. SOURCE MODEL

F2. SOURCE SERIAL NUMBER

G2. ISOTOPE

H2. ACTIVITY

H2. ACTIVITY UNIT

I2. ACTIVITY DATE

J2. COMMENTS

K2. SOURCE DISPOSAL ADDRESS

L2. CITY

M2. STATE

N2. ZIP CODE

O2. SAME AS STREET ADDRESS

No Yes

A3. WASTE MANIFEST NUMBER

B3. CONTAINER ID

C3. METHOD OF DISPOSAL

D3. SOURCE MAKE

E3. SOURCE MODEL

F3. SOURCE SERIAL NUMBER

G3. ISOTOPE

H3. ACTIVITY

H3. ACTIVITY UNIT

I3. ACTIVITY DATE

J3. COMMENTS

K3. SOURCE DISPOSAL ADDRESS

L3. CITY

M3. STATE

N3. ZIP CODE

O3. SAME AS STREET ADDRESS

No Yes

A4. WASTE MANIFEST NUMBER

B4. CONTAINER ID

C4. METHOD OF DISPOSAL

D4. SOURCE MAKE

E4. SOURCE MODEL

F4. SOURCE SERIAL NUMBER

G4. ISOTOPE

H4. ACTIVITY

H4. ACTIVITY UNIT

I4. ACTIVITY DATE

J4. COMMENTS

K4. SOURCE DISPOSAL ADDRESS

L4. CITY

M4 STATE

N4. ZIP CODE

O4. SAME AS STREET ADDRESS

No Yes

A5. WASTE MANIFEST NUMBER

B5. CONTAINER ID

C5. METHOD OF DISPOSAL

D5. SOURCE MAKE

E5. SOURCE MODEL

F5. SOURCE SERIAL NUMBER

G5. ISOTOPE

H5. ACTIVITY

H5 ACTIVITY UNIT

I5. ACTIVITY DATE

J5. COMMENTS

K5. SOURCE DISPOSAL ADDRESS

L5. CITY

M5. STATE

N5. ZIP CODE

O5. SAME AS STREET ADDRESS

No Yes


[INSTRUCTIONS](#)

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NRC FORM 748D (05-22-2023)

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NRC Form 748E – New Source Manufactured

<p>NRC FORM 748E (05-22-2023) 10 CFR 20.2207</p>  <p style="text-align: center;">U.S. NUCLEAR REGULATORY COMMISSION</p> <p style="text-align: center;">NEW SOURCE MANUFACTURED NATIONAL SOURCE TRACKING TRANSACTION REPORT</p>	<p>APPROVED BY OMB: NO. 3150-0202 EXPIRES: 05/31/2026</p> <p>Estimated burden per response to comply with this mandatory information collection request: 9.5 minutes. NRC requires this information to populate the National Source Tracking System for certain sealed sources. Send comments regarding burden estimate to the FOIA, Library, and Information Collections Branch (T-6 A10M), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by e-mail to Infocollects.Resource@nrc.gov, and the OMB reviewer at: OMB Office of Information and Regulatory Affairs, (3150-0202), Attn: Desk Officer for the Nuclear Regulatory Commission, 725 17th Street NW, Washington, DC 20503; [REDACTED]. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the document requesting or requiring the collection displays a currently valid OMB control number.</p>
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[INSTRUCTIONS](#)

1. LICENSEE INFORMATION

A. LICENSEE NAME *	B. LICENSE NO. *	C. LICENSEE STREET ADDRESS *
<input type="text"/>	<input type="text"/>	<input type="text"/>
D. CITY *	E. STATE *	F. ZIP CODE *
<input type="text"/>	<input style="width: 100%;" type="text"/>	<input type="text"/>

2. TRANSACTION DATE (Only transactions completed on the same date may be reported together on this form)

TRANSACTION DATE *

3A. TRANSACTION INFORMATION

<input type="checkbox"/> NEW	<input type="checkbox"/> CORRECTION	IF CORRECTION, PREVIOUS TRANSACTION DATE
		<input type="text" value="M/D/YYYY"/>

3B. TRANSACTION TYPE

<input type="checkbox"/> REPORT SOURCE INVENTORY	<input type="checkbox"/> TRANSFER	<input type="checkbox"/> RECEIPT
<input type="checkbox"/> DISPOSAL	<input checked="" type="checkbox"/> NEW SOURCE MANUFACTURED	<input type="checkbox"/> IMPORT
<input type="checkbox"/> EXPORT	<input type="checkbox"/> DISASSEMBLE	

4. PREPARER INFORMATION

A. NAME OF PREPARER *	B. DATE PREPARED *	C. PREPARER PHONE	D. PREPARER E-MAIL (Required for confirmation) *
<input type="text"/>	<input type="text" value="M/D/YYYY"/>	<input type="text"/>	<input type="text"/>

9. NEW MANUFACTURED SOURCE DATA

A1. SOURCE MAKE *	B1. SOURCE MODEL *	C1. SOURCE SERIAL NUMBER *
<input type="text"/>	<input type="text"/>	<input type="text"/>
D1. ISOTOPE *	E1. ACTIVITY *	E1. ACTIVITY UNIT *
<input type="text"/>	<input type="text"/>	<input type="text"/>
F1. COMMENTS		
<input type="text"/>		
G1. SOURCE LOCATION ADDRESS *	H1. CITY *	I1. STATE *
<input type="text"/>	<input type="text"/>	<input type="text"/>
J1. ZIP CODE *	K1. SAME AS STREET ADDRESS	
<input type="text"/>	<input checked="" type="radio"/> No <input type="radio"/> Yes	
A2. SOURCE MAKE	B2. SOURCE MODEL	C2. SOURCE SERIAL NUMBER
<input type="text"/>	<input type="text"/>	<input type="text"/>
D2. ISOTOPE	E2. ACTIVITY	E2. ACTIVITY UNIT
<input type="text"/>	<input type="text"/>	<input type="text"/>
F2. COMMENTS		
<input type="text"/>		

G2. SOURCE LOCATION ADDRESS

H2. CITY

I2. STATE

J2. ZIP CODE

K2. SAME AS STREET ADDRESS

No Yes

A3. SOURCE MAKE

B3. SOURCE MODEL

C3. SOURCE SERIAL NUMBER

D3. ISOTOPE

E3. ACTIVITY

E3. ACTIVITY UNIT

F3. COMMENTS

G3. SOURCE LOCATION ADDRESS

H3. CITY

I3. STATE

J3. ZIP CODE

K3. SAME AS STREET ADDRESS

No Yes

A4. SOURCE MAKE

B4. SOURCE MODEL

C4. SOURCE SERIAL NUMBER

D4. ISOTOPE

E4. ACTIVITY

E4. ACTIVITY UNIT

F4. COMMENTS

G4. SOURCE LOCATION ADDRESS

H4. CITY

I4. STATE

J4. ZIP CODE

K4. SAME AS STREET ADDRESS

No Yes

A5. SOURCE MAKE

B5. SOURCE MODEL

C5. SOURCE SERIAL NUMBER

D5. ISOTOPE

E5. ACTIVITY

E5. ACTIVITY UNIT

F5. COMMENTS

G5. SOURCE LOCATION ADDRESS

H5. CITY

I5. STATE

J5. ZIP CODE

K5. SAME AS STREET ADDRESS

No Yes


[INSTRUCTIONS](#)

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NRC FORM 748E (05-22-2023)

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NRC Form 748F – Import Source

<p>NRC FORM 748F (05-22-2023) 10 CFR 20.2207</p>  <p>U.S. NUCLEAR REGULATORY COMMISSION</p> <p>IMPORT SOURCE NATIONAL SOURCE TRACKING TRANSACTION REPORT</p>	<p>APPROVED BY OMB: NO. 3150-0202 EXPIRES: 05/31/2026</p> <p>Estimated burden per response to comply with this mandatory information collection request: 9.5 minutes. NRC requires this information to populate the National Source Tracking System for certain sealed sources. Send comments regarding burden estimate to the FOIA, Library, and Information Collections Branch (T-6 A10M), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by e-mail to Infocollects.Resource@nrc.gov; and the OMB reviewer at: OMB Office of Information and Regulatory Affairs, (3150-0202), Attn: Desk Officer for the Nuclear Regulatory Commission, 725 17th Street NW, Washington, DC 20503; [REDACTED]. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the document requesting or requiring the collection displays a currently valid OMB control number.</p>
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[INSTRUCTIONS](#)

1. LICENSEE INFORMATION

A. LICENSEE NAME *	B. LICENSE NO. *	C. LICENSEE STREET ADDRESS *
D. CITY *	E. STATE *	F. ZIP CODE *

2. TRANSACTION DATE (Only transactions completed on the same date may be reported together on this form)

TRANSACTION DATE *


3A. TRANSACTION INFORMATION

NEW CORRECTION IF CORRECTION, PREVIOUS TRANSACTION DATE







3B. TRANSACTION TYPE

- | | | |
|--|--|--|
| <input type="checkbox"/> REPORT SOURCE INVENTORY | <input type="checkbox"/> TRANSFER | <input type="checkbox"/> RECEIPT |
| <input type="checkbox"/> DISPOSAL | <input type="checkbox"/> NEW SOURCE MANUFACTURED | <input checked="" type="checkbox"/> IMPORT |
| <input type="checkbox"/> EXPORT | <input type="checkbox"/> DISASSEMBLE | |

4. PREPARER INFORMATION

A. NAME OF PREPARER * <input type="text"/>	B. DATE PREPARED * <input type="text" value="M/D/YYYY"/> 	C. PREPARER PHONE <input type="text"/>	D. PREPARER E-MAIL (Required for confirmation) * <input type="text"/>
--	--	--	---

10. SOURCE IMPORT DATA

A1. FOREIGN COMPANY NAME * <input type="text"/>	B1. IMPORT LICENSE NO * <input type="text"/>	C1. FOREIGN COMPANY ADDRESS * <input type="text"/>
D1. CITY * <input type="text"/>	E1. COUNTRY * <input type="text"/>	F1. SOURCE MAKE * <input type="text"/> 
G1. SOURCE MODEL * <input type="text"/> 	H1. SOURCE SERIAL NUMBER * <input type="text"/>	I1. ISOTOPE * <input type="text"/> 
J1. ACTIVITY * <input type="text"/>	J1. ACTIVITY UNIT * <input type="text"/> 	K1. ACTIVITY DATE * <input type="text" value="M/D/YYYY"/> 
L1. COMMENTS <input type="text"/>		
M1. SOURCE LOCATION ADDRESS * <input type="text"/>	N1. CITY * <input type="text"/>	O1. STATE * <input type="text"/> 
P1. ZIP CODE * <input type="text"/>	Q1. SAME AS STREET ADDRESS <input checked="" type="radio"/> No <input type="radio"/> Yes	
A2. FOREIGN COMPANY NAME <input type="text"/>	B2. IMPORT LICENSE NO <input type="text"/>	C2. FOREIGN COMPANY ADDRESS <input type="text"/>

D2. CITY

E2. COUNTRY

F2. SOURCE MAKE

G2. SOURCE MODEL

H2. SOURCE SERIAL NUMBER

I2. ISOTOPE

J2. ACTIVITY

J2. ACTIVITY UNIT

K2. ACTIVITY DATE

L2. COMMENTS

M2. SOURCE LOCATION ADDRESS

N2. CITY

O2. STATE

P2. ZIP CODE

Q2. SAME AS STREET ADDRESS

No Yes

A3. FOREIGN COMPANY NAME

B3. IMPORT LICENSE NO

C3. FOREIGN COMPANY ADDRESS

D3. CITY

E3. COUNTRY

F3. SOURCE MAKE

G3. SOURCE MODEL

H3. SOURCE SERIAL NUMBER

I3. ISOTOPE

J3. ACTIVITY

J3. ACTIVITY UNIT

K3. ACTIVITY DATE

L3. COMMENTS

M3. SOURCE LOCATION ADDRESS

N3. CITY

O3. STATE

P3. ZIP CODE

Q3. SAME AS STREET ADDRESS

No Yes

A4. FOREIGN COMPANY NAME

B4. IMPORT LICENSE NO

C4. FOREIGN COMPANY ADDRESS

D4. CITY

E4. COUNTRY

F4. SOURCE MAKE

G4. SOURCE MODEL

H4. SOURCE SERIAL NUMBER

I4. ISOTOPE

J4. ACTIVITY

J4. ACTIVITY UNIT

K4. ACTIVITY DATE

L4. COMMENTS

M4. SOURCE LOCATION ADDRESS

N4. CITY

O4. STATE

P4. ZIP CODE

Q4. SAME AS STREET ADDRESS

No Yes

A5. FOREIGN COMPANY NAME

B5. IMPORT LICENSE NO

C5. FOREIGN COMPANY ADDRESS

D5. CITY

E5. COUNTRY

F5. SOURCE MAKE

G5. SOURCE MODEL

H5. SOURCE SERIAL NUMBER

I5. ISOTOPE

J5. ACTIVITY

J5. ACTIVITY UNIT

K5. ACTIVITY DATE

L5. COMMENTS

M5. SOURCE LOCATION ADDRESS

N5. CITY

O5. STATE

P5. ZIP CODE

Q5. SAME AS STREET ADDRESS


No Yes

INSTRUCTIONS

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Submit

NRC Form 748G – Export Source

NRC FORM 748G (05-22-2023) 10 CFR 20.2207	 U.S. NUCLEAR REGULATORY COMMISSION	APPROVED BY OMB: NO. 3150-0202	EXPIRES: 05/31/2026
		Estimated burden per response to comply with this mandatory information collection request: 9.5 minutes. NRC requires this information to populate the National Source Tracking System for certain sealed sources. Send comments regarding burden estimate to the FOIA, Library, and Information Collections Branch (T-6 A10M), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by e-mail to Infocollects.Resource@nrc.gov , and the OMB reviewer at: OMB Office of Information and Regulatory Affairs, (3150-0202), Attn: Desk Officer for the Nuclear Regulatory Commission, 725 17th Street NW, Washington, DC 20503; [REDACTED]. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the document requesting or requiring the collection displays a currently valid OMB control number.	
EXPORT SOURCE NATIONAL SOURCE TRACKING TRANSACTION REPORT			

[INSTRUCTIONS](#)

1. LICENSEE INFORMATION

A. LICENSEE NAME *	B. LICENSE NO. *	C. LICENSEE STREET ADDRESS *
<input type="text"/>	<input type="text"/>	<input type="text"/>
D. CITY *	E. STATE *	F. ZIP CODE *
<input type="text"/>	<input type="text"/>	<input type="text"/>

2. TRANSACTION DATE (Only transactions completed on the same date may be reported together on this form)

TRANSACTION DATE *

3A. TRANSACTION INFORMATION

NEW CORRECTION

IF CORRECTION, PREVIOUS TRANSACTION DATE

3B. TRANSACTION TYPE

<input type="checkbox"/> REPORT SOURCE INVENTORY	<input type="checkbox"/> TRANSFER	<input type="checkbox"/> RECEIPT
<input type="checkbox"/> DISPOSAL	<input type="checkbox"/> NEW SOURCE MANUFACTURED	<input type="checkbox"/> IMPORT
<input checked="" type="checkbox"/> EXPORT	<input type="checkbox"/> DISASSEMBLE	

4. PREPARER INFORMATION

A. NAME OF PREPARER *	B. DATE PREPARED *	C. PREPARER PHONE	D. PREPARER E-MAIL (Required for confirmation) *
<input type="text"/>	<input type="text" value="M/D/YYYY"/>	<input type="text"/>	<input type="text"/>

11. SOURCE EXPORT DATA

A1. FOREIGN COMPANY NAME *	B1. EXPORT LICENSE NO. *	C1. ULTIMATE CONSIGNEE ADDRESS *
<input type="text"/>	<input type="text"/>	<input type="text"/>
D1. CITY *	E1. COUNTRY *	F1. SOURCE MAKE *
<input type="text"/>	<input type="text"/>	<input type="text"/>
G1. SOURCE MODEL *	H1. SOURCE SERIAL NUMBER *	I1. ISOTOPE *
<input type="text"/>	<input type="text"/>	<input type="text"/>
J1. ACTIVITY *	J1. ACTIVITY UNIT *	K1. ACTIVITY DATE *
<input type="text"/>	<input type="text"/>	<input type="text" value="M/D/YYYY"/>
L1. CONTAINER ID		
<input type="text"/>		
M1. COMMENTS		
<input type="text"/>		
A2. FOREIGN COMPANY NAME	B2. EXPORT LICENSE NO.	C2. ULTIMATE CONSIGNEE ADDRESS
<input type="text"/>	<input type="text"/>	<input type="text"/>
D2. CITY	E2. COUNTRY	F2. SOURCE MAKE
<input type="text"/>	<input type="text"/>	<input type="text"/>

G2. SOURCE MODEL

H2. SOURCE SERIAL NUMBER

I2. ISOTOPE

J2. ACTIVITY

J2. ACTIVITY UNIT

K2. ACTIVITY DATE

L2. CONTAINER ID

M2. COMMENTS

A3. FOREIGN COMPANY NAME

B3. EXPORT LICENSE NO.

C3. ULTIMATE CONSIGNEE ADDRESS

D3. CITY

E3. COUNTRY

F3. SOURCE MAKE

G3. SOURCE MODEL

H3. SOURCE SERIAL NUMBER

I3. ISOTOPE

J3. ACTIVITY

J3. ACTIVITY UNIT

K3. ACTIVITY DATE

L3. CONTAINER ID

M3. COMMENTS

A4. FOREIGN COMPANY NAME

B4. EXPORT LICENSE NO.

C4. ULTIMATE CONSIGNEE ADDRESS

D4. CITY

E4. COUNTRY

F4. SOURCE MAKE

G4. SOURCE MODEL

H4. SOURCE SERIAL NUMBER

I4. ISOTOPE

J4. ACTIVITY

J4. ACTIVITY UNIT

K4. ACTIVITY DATE

L4. CONTAINER ID

M4. COMMENTS

A5. FOREIGN COMPANY NAME

B5. EXPORT LICENSE NO.

C5. ULTIMATE CONSIGNEE ADDRESS

D5. CITY

E5. COUNTRY

F5. SOURCE MAKE

G5. SOURCE MODEL

H5. SOURCE SERIAL NUMBER

I5. ISOTOPE

J5. ACTIVITY

J5. ACTIVITY UNIT

K5. ACTIVITY DATE

L5. CONTAINER ID

M5. COMMENTS

[INSTRUCTIONS](#)

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Screenshots of the dropdown menus

Lookup for the Source Make drop down:

Lookup records

Search

Choose one record and click Select to continue

<input checked="" type="checkbox"/>	MAKE ↑
<input type="checkbox"/>	Advanced Medical Systems
<input type="checkbox"/>	AEA Technology/QSA, Inc.
<input type="checkbox"/>	American Nuclear Corporation
<input type="checkbox"/>	Amersham Corporation
<input type="checkbox"/>	Atomic Energy of Canada, Ltd. (AECL)
<input type="checkbox"/>	Best Theratronics, Ltd.
<input type="checkbox"/>	Bristol-Myers Squibb Medical Imaging

< **1** 2 3 4 5 6 >

Lookup for the Source Model drop down:

Lookup records

Search

Choose one record and click Select to continue

<input checked="" type="checkbox"/>	MODEL ↑
<input type="checkbox"/>	1
<input type="checkbox"/>	10
<input type="checkbox"/>	100F
<input type="checkbox"/>	130010
<input type="checkbox"/>	130011
<input type="checkbox"/>	2
<input type="checkbox"/>	22

< **1** 2 3 4 5 6 7 8 .. 51 >