

Ciba Specialty Chemicals Corporation
North America
Corporate
Remediation Services

Ciba



February 28, 2005

VIA FAX 610-337-5269

US Nuclear Regulatory Commission, Region 1
Nuclear Materials Safety Section B
475 Allendale Road
King of Prussia, PA 119406
Attention: L.A.T.

RE: Nuclear Materials License (# 29-09009-02) 03008786

Gentlemen:

Enclosed is the documentation for the return of the Troxler moisture gauge that Ciba transferred to CPN International, Inc. Ciba never removed the unit from the original packaging and never put the unit to use. Included are the following attachments:

- NRC Form 314
- Letter of Receipt of Gauge
- Certificate of Leak Test
- Shipper's Declaration

We would appreciate it very much if your office can proceed with termination of the above referenced License. If you have any questions regarding this information, please contact me at (732) 914-2867. Thank you in advance

Sincerely,

Ciba Specialty Chemicals Corporation
Thomas Smith

Route 37 West
P. O. Box 71
Toms River, New Jersey 08754-0071

136565
NMSS/RGNI MATERIALS-002

NRC FORM 314 (7-2001) 10 CFR 30.38(j)(1), 40.42(j)(1), 70.38(j)(1), and 72.54(j)(1)	U.S. NUCLEAR REGULATORY COMMISSION	APPROVED BY OMB: NO. 3150-0028 EXPIRES: 07/31/2004
CERTIFICATE OF DISPOSITION OF MATERIALS		
Estimated burden per response to comply with this mandatory collection request 30 minutes. This submittal is used by NRC as part of the basis for its determination that the facility is released for unrestricted use. Send comments regarding burden estimate to the Records Management Branch (T-6 E6), U.S. Nuclear Regulatory Commission, Washington, DC 20000-0001, or by Internet e-mail to bjs1@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NE08-10202, (3150-0028), Office of Management and Budget, Washington, DC 20503. If a 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.		

LICENSEE NAME AND ADDRESS CIBA SPECIALTY CHEMICALS OAK RIDGE PARKWAY P.O. BOX 71 TOMS RIVER, NJ 08754	LICENSE NUMBER 29-09009-02	DOCKET NUMBER
LICENSE EXPIRATION DATE 03/31/2005		

A. LICENSE STATUS (Check the appropriate box)

This license has expired. This license has not yet expired; please terminate it.

B. DISPOSAL OF RADIOACTIVE MATERIAL

(Check the appropriate boxes and complete as necessary. If additional space is needed, provide attachments)

The licensee, or any individual executing this certificate on behalf of the licensee, certifies that:

1. No radioactive materials have ever been procured or possessed by the licensee under this license.

2. All activities authorized by this license have ceased, and all radioactive materials procured and/or possessed by the licensee under this license number cited above have been disposed of in the following manner.

a. Transfer of radioactive materials to the licensee listed below:

CPN INTERNATIONAL, INC.
 2830 HOWE ROAD
 MARTINEZ, CA 94553

b. Disposal of radioactive materials:

1. Directly by the licensee:

2. By licensed disposal site:

3. By waste contractor.

c. All radioactive materials have been removed such that any remaining residual radioactivity is within the limits of 10 CFR Part 20, Subpart E, and is ALARA.

C. SURVEYS PERFORMED AND REPORTED

1. A radiation survey was conducted by the licensee. The survey confirms:

a. the absence of licensed radioactive materials

b. that any remaining residual radioactivity is within the limits of 10 CFR 20, Subpart E, and is ALARA.

2. A copy of the radiation survey results:

a. is attached; or b. is not attached (Provide explanation); or c. was forwarded to NRC on: _____ Date _____

3. A radiation survey is not required as only sealed sources were ever possessed under this license, and

a. The results of the latest leak test are attached; and/or b. No leaking sources have ever been identified.

The person to be contacted regarding the information provided on this form:

NAME THOMAS SMITH	TITLE ENVIRONMENTAL ASSOCIATE	TELEPHONE (include Area Code) 732 914 2867	E-MAIL ADDRESS thomas.smith@cibaspc.com
Mail all future correspondence regarding this license to: P.O. Box 71, TOMS RIVER, NJ 08754			

C. CERTIFYING OFFICIAL

I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT

PRINTED NAME AND TITLE THOMAS SMITH ASSOCIATE	SIGNATURE 	DATE 2/28/05
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WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECT. 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 AS TO ANY MATTER WITHIN ITS JURISDICTION.



Advanced Instrumentation for Density
& Moisture Testing of Soils & Pavements

CPN International, Inc.
2830 Howe Road
Martinez, CA 94553 USA
Phone: (925) 228-9770
Fax: (925) 228-3183
e-mail: cpn@cpn-intl.com

Return Authorization Number: 0666

LETTER OF RECEIPT OF GAUGE / SEALED SOURCE

To Radioactive Material Licensing Agencies:

CPN International Inc. has taken possession of the following nuclear gauge(s). A certificate of leak test is on file.

Date of Transfer Possession:

Date: April 1, 2003

Model No. 4302

Serial No. 476

Activity: <11 mCi

Nuclide: Am-241/Be

Licensee: Ciba Specialty Chemicals
Oak Bridge Parkway
Toms River, NJ 08754

Attn: Tom Smith

Ph: (732) 914-2867

A handwritten signature in cursive script that reads "Douglas Carter".

Douglas Carter
Radiation Safety Officer
CPN International, Inc.
(California License No. 1100-07)



Advanced Instrumentation for Density
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Fax: (925) 228-3183
e-mail: cpn@cpn-intl.com

CERTIFICATE OF LEAK TEST

CIBA SPECIALTY CHEMICALS
ATTN: TOM SMITH
OAK RIDGE PARKWAY
TOMS RIVER, NJ 08754

Customer No: 1111100
Date Sample Collected: 3/28/2003
Test Number: 37665

This is to certify that the leak test on the indicated source (s) was counted on 4/1/2003 and the results shown accurately represent the level of removable contamination.

Model: TROXLER 4302 Source(s)/Gauge Serial Number: 426

<u>Source</u>	<u>Activity</u>	* <u>Removable Contamination</u> <u>(in microCuries)</u>
Am-241/Be	10 mCi	.0000033

* 0.005 microcuries (185 Bq) or greater constitutes a leaking source.

This Source : May Remain in use.

Maria Lau

Reviewed by: Leak Testing Quality Control

SHIPPER'S DECLARATION FOR DANGEROUS GOODS

(Provide at least three copies to FedEx Express)

Shipper Tom Smith Ciba Specialty Chemicals Oak Ridge Parkway Toms River, NJ 08754 (732-914-2867)	Air Waybill No Page 1 of 1 Pages Shipper's Reference Number RA# 0666
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Consignee CPN International Inc 2830 Howe Road Martinez, CA 94553 (D. Carter 925-228-9770)	
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Two completed and signed copies of this Declaration must be handed to the operator.	WARNING Failure to comply in all respects with the applicable Dangerous Goods Regulations may be in breach of the applicable law, subject to legal penalties. This Declaration must not, in any circumstances, be completed and/or signed by a consolidator, a forwarder or an IATA cargo agent.		
TRANSPORT DETAILS This shipment is within the limitations prescribed for <i>(delete non-applicable)</i>	Airport of Departure		
<table border="1"> <tr> <td style="text-align: center;">PASSENGER AND CARGO AIRCRAFT</td> <td style="text-align: center;">CARGO AIRCRAFT ONLY</td> </tr> </table>	PASSENGER AND CARGO AIRCRAFT	CARGO AIRCRAFT ONLY	
PASSENGER AND CARGO AIRCRAFT	CARGO AIRCRAFT ONLY		

Airport of Destination	Shipment type: <i>(delete non-applicable)</i> NON-FLAMMABLE LIQUID RADIOACTIVE
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NATURE AND QUANTITY OF DANGEROUS GOODS

Dangerous Goods Identification							
Proper Shipping Name	Class or Division	UN or ID No.	Pack- ing Group	Subel- diary Risk	Quantity and Type of packing	Packing Inst.	Authorization
RQ:Radioactive Material Type A Package	7	UN 2974			Americium 241/Ba (10 mCi) All contained in one Type A Package (1) 58cm x 28cm x 36cm	White I T.I.O.2.	Special Form Cert. #s GB7/S
Additional Handling Information This shipment prepared in accordance with ICAO/IATA Emergency Telephone Number 800-962-6933 (24 hr)							

I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.	Name/Title of Signatory Tom Smith - Environmental Associate Place and Date Toms River, NJ 6/23/03 Signature <i>(see warning above)</i> 
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IF ACCEPTABLE FOR PASSENGER AIRCRAFT, THIS SHIPMENT CONTAINS RADIOACTIVE MATERIAL INTENDED FOR USE IN, OR INCIDENT TO, RESEARCH, MEDICAL DIAGNOSIS, OR TREATMENT

This is to acknowledge the receipt of your letter/application dated

2/29/2005, and to inform you that the initial processing which includes an administrative review has been performed.

Term 24-09 009.02 There were no administrative omissions. Your application was assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.

Please provide to this office within 30 days of your receipt of this card

A copy of your action has been forwarded to our License Fee & Accounts Receivable Branch, who will contact you separately if there is a fee issue involved.

Your action has been assigned **Mail Control Number** 136565.
When calling to inquire about this action, please refer to this control number.
You may call us on (610) 337-5398, or 337-5260.

BETWEEN: : (FOR LFMS USE)
 : INFORMATION FROM LTS
 : -----
 :
 License Fee Management Branch, ARM : Program Code: 03800
 and : Status Code: 0
 Regional Licensing Sections : Fee Category: EX 3P
 : Exp. Date: 20050331
 : Fee Comments: STORAGE ONLY EFF 3/27/03
 : Decom Fin Assur Req'd: N
 :

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED
 Applicant/Licensee: CIBA SPECIALTY CHEMICALS CORP.
 Received Date: 20050228
 Docket No: 3008786
 Control No.: 136565
 License No.: 29-09009-02
 Action Type: Termination

2. FEE ATTACHED
 Amount: /
 Check No.:

3. COMMENTS
 Signed Rebecca Head
 Date 3/31/05

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered /__/)

1. Fee Category and Amount: _____
 2. Correct Fee Paid. Application may be processed for:
 Amendment _____
 Renewal _____
 License _____
 3. OTHER _____

Signed _____
 Date _____