

Materials License Termination/Retirement Form

LICENSE #(s): 457-25464-01
ADDRESS: Mid Vol Leasing, Inc.
P.O. Box 196
Horserpen, VA

DOCKET #(s): 030-349.27
EXPIRATION DATE: 7-28-09
DATE OF CONTACT: 3-23-05
CONTACTED BY: Russ Lambert
TITLE: RSD
TELEPHONE: 304-325-8195

LICENSE TERMINATED:

LICENSE TRANSFERRED:

LICENSE TRANSFERRED TO: Name: Mid-Vol Core Sales, Inc.
Address: P.O. Box 1112
Route 122 / Airport Road
Princeton, WV
Telephone: (304) 325-8195

BASIS FOR TERMINATION AND/OR RETIREMENT: Administrative Change

TERMINATION DOCUMENTATION

1. License termination meets Type I criteria: Y N

Licensee used sealed sources only and the most recent leak test demonstrates that they did not leak while in the licensee's possession

Licensee used radioactive material with $T_{1/2} \leq 60$ days and it has decayed to less than the activity in 10 CFR Part 20 Appendix C

2. License termination meets Type II criteria: Y N

Licensee possessed and used only sealed sources but cannot demonstrate that the sources did not leak while in the licensee's possession

Licensee possessed unsealed radioactive material with $T_{1/2} \leq 60$ days but the maximum activity authorized under the license has not decayed to less than the quantity specified in 10 CFR Part 20, Appendix C

Licensee possessed unsealed radioactive material with $T_{1/2} > 60$ days but ≤ 120 days.

Licensee possessed ^{14}C or ^3H but the total activity(s) and use authorized under the license warrants decommissioning under Type II (describe rationale above)

3. License termination meets Type III criteria: Y__N__
 ___ Decommissioning qualifies for a categorical exclusion under 10 CFR 51.22 (c) and
 ___ Licensee will decommission its facility in accordance with the NRC's criteria for unrestricted use.
4. License termination meets Type IV criteria: Y__N__
 ___ Decommissioning does not qualify for a categorical exclusion under 10 CFR 51.22 (c)
 ___ Licensee will decommission its facility such that residual radioactive material may remain in excess of NRC's criteria for unrestricted use.
5. Termination survey required: Y__N__ ✓
 ___ Termination survey submitted by licensee
 ___ Termination survey satisfies NRC survey requirements
6. Form 314 or equivalent submitted: N/A Y__N__
 ___ Staff verified disposition of sealed sources:
 or unsealed radioactive material
 by:
 ___ letter from Form 314 recipient
 ___ call to Form 314 recipient
7. Licensee transfer records discussed in 10 CFR Parts 30.35, 30.36,
 30.51; 40.36, 40.42, 40.61; or 70.25, 70.38, 70.51 Y__N__
 ___ To USNRC
 ___ To individual assuming responsibility for the license, with a copy of the cover letter to NRC
8. NRC closeout inspection required: Y__N__
 ___ Closeout inspection performed:
 on: _____
 Inspector: _____
9. Closeout survey performed: Y__N__
 on: _____
 by: _____

Licensing assistant completing form: _____ Date: _____

or

License reviewer completing form: *[Signature]* Date: 4-18-05

Branch Chief: _____ Date: _____