

ACCEPTANCE REVIEW MEMO

Licensee: Delta Testing & Inspection, Inc.

License No.: 17-26873-01

Docket No.: 030-29769

Mail Control No.: 470944

Type of Action: Term Date of Requested Action: 03-30-06

Reviewer Assigned: Jackie Date Assigned to Reviewer: 04-06-06

Reviewer(s) Who
Performed Review: Cook

Response Received	Deficiencies Noted During Acceptance Review
4/24/06	1. Resubmit Form 314 and complete applicable boxes and insert the correct expiration date.
	2.
	3.
	4.

Reviewer's Initials: JAC

Date: 4/24/06

Branch Chief's and/or SR. HP's Initials: RJC

Date: 4/25/06

- ☐ Yes ☐ No Action - decommissioning notification should be issued within 30 days.
- ☐ Yes ☐ No Termination request < 90 days from date of expiration
- ☐ Yes ☐ No Action to be expedited
- _____ Medical emergency
- _____ Licensee in noncompliance (i.e. no RSO, location of use/storage not on license, radioactive material in possession not on license)
- _____ National Security
- _____ Other (_____)

Branch Chief's and/or Sr. HP's Initials: _____

Date: _____

SISP Review

☐ Yes ☒ No

Non-Publicly Available, Sensitive if any item below is checked

- _____ Radionuclides, forms, and quantities
- _____ Location of RAM
- _____ Building drawings with locations of RAM
- _____ Security of RAM (locks, alarms, etc.)
- _____ SS&D Catalog information
- _____ Specifics of Emergency Plan (routes to and from RAM, response to security events, etc.)
- _____ Safeguards Information

Branch Chief's and/or Sr. HP's Initials: JAC

Date: 4/6/06

From:
Ken Meyn, P.E.,
Cell 504-259-4921

Delta Testing and
Inspection, Inc.

Fax

APR 24 2006

To: COLLENE MURNATHAN From: Ken Meyn
Fax: 817-860-8263 Pages: 2
Phone: _____ Date: 3/21/06 4/24/06
Re: _____ CC: _____

☐ Urgent ☒ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

• Comments:

COLLENE - WE ARE CONTINUING TO
OPERATE OUR SOIL TESTING NUCLEAR
GALLOPS UNDER OUR LOUISIANA LICENSE.
PLEASE CALL ME IF YOU NEED MORE
INFO. FORM 314 ATTACHED
THANKS.

Ken Meyn

NRC FORM 314 (6-2004) 10 CFR 30.380(1); 40.420(1); 70.380(1); and 72.540(1)		U.S. NUCLEAR REGULATORY COMMISSION APPROVED BY OMB: NO. 3150-0028 EXPIRES: 06/30/2007 <small>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 and FOIA/Privacy Services Branch (T-5 F52), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by Internet e-mail to infocoll@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOS-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.</small>	
CERTIFICATE OF DISPOSITION OF MATERIALS		<small>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 and FOIA/Privacy Services Branch (T-5 F52), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by Internet e-mail to infocoll@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOS-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.</small>	
LICENSEE NAME AND ADDRESS DELTA TESTING AND INSPECTION, Inc. P.O. Box 19172 New Orleans, LA 70179		LICENSE NUMBER 17-26873-01	DOCKET NUMBER 630-29769
LICENSE EXPIRATION DATE April 30, 2013		LICENSE EXPIRATION DATE April 30, 2013	
A. LICENSE STATUS (Check the appropriate box) <input type="checkbox"/> This license has expired. <input checked="" type="checkbox"/> This license has not yet expired; please terminate it.			
B. DISPOSAL OF RADIOACTIVE MATERIAL <small>(Check the appropriate boxes and complete as necessary. If additional space is needed, provide attachments)</small> The licensee, or any individual executing this certificate on behalf of the licensee, certifies that:			
<input type="checkbox"/> 1. No radioactive materials have ever been procured or possessed by the licensee under this license.			
<input type="checkbox"/> 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:			
<input type="checkbox"/> a. Transfer of radioactive materials to the licensee listed below:			
<input type="checkbox"/> b. Disposal of radioactive materials:			
<input type="checkbox"/> 1. Directly by the licensee:			
<input type="checkbox"/> 2. By licensed disposal site:			
<input type="checkbox"/> 3. By waste contractor:			
<input type="checkbox"/> 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			
<input type="checkbox"/> 1. A radiation survey was conducted by the licensee. The survey confirms:			
<input type="checkbox"/> a. the absence of licensed radioactive materials			
<input type="checkbox"/> b. that any remaining residual radioactivity is within the limits of 10 CFR 20, Subpart E, and is ALARA.			
<input type="checkbox"/> 2. A copy of the radiation survey results:			
<input type="checkbox"/> a. is attached; or <input type="checkbox"/> b. is not attached (Provide explanation); or <input type="checkbox"/> c. was forwarded to NRC on: _____ Date: _____			
<input type="checkbox"/> 3. A radiation survey is not required as only sealed sources were ever possessed under this license, and			
<input type="checkbox"/> a. The results of the latest leak test are attached; and/or <input type="checkbox"/> b. No leaking sources have ever been identified.			
The person to be contacted regarding the information provided on this form:			
NAME Ken Meyn	TITLE PRESIDENT / CEO	TELEPHONE (Include Area Code) 504-259-4931	E-MAIL ADDRESS KMEYN@DELTA-TESTING.COM
Mail all future correspondence regarding this license to: P.O. Box 19172, New Orleans, LA 70179			
C. CERTIFYING OFFICIAL I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT			
PRINTED NAME AND TITLE Kenneth J. Meyn, President	SIGNATURE <i>Kenneth J. Meyn</i>	DATE 3/30/06	
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.			

NRC FORM 314 (6-2004) 10 CFR 30.36(j)(1); 40.420(i); 70.38(j)(1); and 72.54(j)(1)		U.S. NUCLEAR REGULATORY COMMISSION		APPROVED BY OMB: NO. 3150-0028		EXPIRES: 06/30/2007	
CERTIFICATE OF DISPOSITION OF MATERIALS							
LICENSEE NAME AND ADDRESS <i>DELTA TESTING AND INSPECTION, Inc.</i> <i>P.O. Box 19172</i> <i>New Orleans, LA 70179</i>				LICENSE NUMBER <i>17-26873-01</i>		DOCKET NUMBER <i>030-29769</i>	
				LICENSE EXPIRATION DATE <i>MARCH 31, 2006</i>			
A. LICENSE STATUS (Check the appropriate box) <input type="checkbox"/> This license has expired. <input checked="" type="checkbox"/> 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: <input type="checkbox"/> 1. No radioactive materials have ever been procured or possessed by the licensee under this license. <input type="checkbox"/> 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: <input type="checkbox"/> a. Transfer of radioactive materials to the licensee listed below: <input type="checkbox"/> b. Disposal of radioactive materials: <input type="checkbox"/> 1. Directly by the licensee: <input type="checkbox"/> 2. By licensed disposal site: <input type="checkbox"/> 3. By waste contractor. <input type="checkbox"/> 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 <input type="checkbox"/> 1. A radiation survey was conducted by the licensee. The survey confirms: <input type="checkbox"/> a. the absence of licensed radioactive materials <input type="checkbox"/> b. that any remaining residual radioactivity is within the limits of 10 CFR 20, Subpart E, and is ALARA. <input type="checkbox"/> 2. A copy of the radiation survey results: <input type="checkbox"/> a. is attached; or <input type="checkbox"/> b. is not attached (Provide explanation); or <input type="checkbox"/> c. was forwarded to NRC on: _____ Date _____ <input type="checkbox"/> 3. A radiation survey is not required as only sealed sources were ever possessed under this license, and <input type="checkbox"/> a. The results of the latest leak test are attached; and/or <input type="checkbox"/> b. No leaking sources have ever been identified.							
The person to be contacted regarding the information provided on this form:							
NAME <i>KEN MEYN</i>		TITLE <i>PRESIDENT / CEO</i>		TELEPHONE (Include Area Code) <i>504-259-4921</i>		E-MAIL ADDRESS <i>KMEYN@DELTA-TESTING.COM</i>	
Mail all future correspondence regarding this license to: <i>P.O. Box 19172 New Orleans, LA 70179</i>							
C. CERTIFYING OFFICIAL I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT							
PRINTED NAME AND TITLE <i>KENNETH J. MEYN, PRESIDENT</i>		SIGNATURE <i>Ken Meyn</i>		DATE <i>3/30/06</i>			
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.							

APR 27 2006

DATE

This is to acknowledge the receipt of your letter/application dated 3-30-06, and to inform you that the initial processing, which includes an administrative review, has been performed.

☒ There were no administrative omissions. Your application will be 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:

The action you requested is normally processed within 90 days.

☐ 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 470944.
When calling to inquire about this action, please refer to this mail control number.
You may call me at 817-860-8103.

Sincerely,

Colleen Murnahan
Licensing Assistant

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

(FOR LEMS USE)
: INFORMATION FROM LTS
: -----
: Program Code: 03121
: Status Code: 0
: Fee Category: 3P
: Exp. Date: 20130430
: Fee Comments:
: Decom Fin Assur Reqd: N
:
:

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: DELTA TESTING & INSPECTION, INC.
Received Date: 20060331
Docket No: 3029769
Control No.: 470944
License No.: 17-26873-01
Action Type: Termination

2. FEE ATTACHED

Amount:
Check No.:

3. COMMENTS

Signed
Date

Gregory M. Mendenhall
4/5/06

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