

ACCEPTANCE REVIEW MEMO (ARM)

Licensee: Aguirre Engineers, Inc. License No.: 02-29275-01
Docket No.: 030-37566 Mail Control No.: 471766
Type of Action: Term Date of Requested Action: 03-20-08
Reviewer Assigned: ARM reviewer(s): Torres

Response	Deficiencies Noted During Acceptance Review
	<input type="checkbox"/> Open ended possession limits. Submit inventory. Limit possession. <input type="checkbox"/> Submit copies of latest leak test results. <input type="checkbox"/> Add IC L.C./Fingerprint LC, add SUNSI markings to license. <input type="checkbox"/> Confirm with licensee if they have NARM material.

Reviewer's Initials: _____ Date: _____

<input type="checkbox"/> Yes <input type="checkbox"/> No	Request for unrestricted release Group 2 or >. Consult with Bravo Branch.
<input type="checkbox"/> Yes <input type="checkbox"/> No	Termination request < 90 days from date of expiration
<input type="checkbox"/> Yes <input type="checkbox"/> No	Expedite (medical emergency, no RSO, location of use/storage not on license, RAM in possession not on license, other)
<input type="checkbox"/> Yes <input type="checkbox"/> No	TAR needed to complete action.

Branch Chief's and/or HP's Initials: _____ Date: _____

SUNSI Screening according to RIS 2005-31

Yes No Sensitive and Non-Publicly Available if any item below is checked

General guidance:

- _____ RAM = or > than Category 3 (Table 1, RIS 2005-31), use Unity Rule
- _____ Exact location of RAM (whether = or > than Category 3 or not)
- _____ Design of structure and/or equipment (site specific)
- _____ Information on nearby facilities
- _____ Detailed design drawings and/or performance information
- _____ Emergency planning and/or fire protection systems

Specific guidance for medical, industrial and academic (above Category 3):

- _____ RAM quantities and inventory
- _____ Manufacturer's name and model number of sealed sources & devices
- _____ Site drawings with exact location of RAM, description of facility
- _____ RAM security program information (locks, alarms, etc.)
- _____ Emergency Plan specifics (routes to/from RAM, response to security events)
- _____ Vulnerability/security assessment/accident-safety analysis/risk assess
- _____ Mailing lists related to security response

Branch Chief's and/or HP's Initials: *ATC* Date: APR 16 2008

COMPASS BUSINESS SOLUTIONS LLC

■ 6610 E. Meadowlark Ln
■ Paradise Valley
■ AZ 85253
■ hemant@v-gen.us

March 20, 2008

NRC Region IV
ATTN: Licensing Assistant
611 Ryan Plaza Drive, Suite 400
Arlington, TX 76011-4005

RECEIVED

MAR 24 2008

DNMS


Ref.: Aguirre Engineers, Inc.; License no. 02-29275-01

To whom it may concern,

I am the CEO of Compass Business Solutions LLC, the owner of Aguirre Engineers, Inc. effective October 1st, 2007. There was a corporate restructuring at Aztec Engineering Group, Inc. and I obtained control of Compass as a result of this change. I am writing this letter to inform you that we have no intent of pursuing the nuclear field of business and have not engaged in any related activities since we have been in control of Aguirre Engineers Inc.. In fact we have terminated the firm of Aguirre Engineers, Inc. since it had no revenue or viability. NRC form 314 is attached requesting termination of the referenced license.

I appreciate your assistance and if you have any questions I can be reached at 602 509 1060. Please direct any mail related to this matter to the above address.

Sincerely,



Hemant Patel, CEO

(6-2004)
10 CFR 30.36(j)(1); 40.42(j)(1);
70.38(j)(1); and 72.54(j)(1)

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 infocollects@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-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.

CERTIFICATE OF DISPOSITION OF MATERIALS

LICENSEE NAME AND ADDRESS

Aguirre Engineers, Inc.
4561 E. McDowell Rd.
Phoenix AZ 85008

LICENSE NUMBER

02-29275-01

DOCKET NUMBER

030-37566

LICENSE EXPIRATION DATE

October 30, 2009

This license has expired. **A. LICENSE STATUS (Check the appropriate box)** 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:
 - 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 HEMANT PATEL	TITLE CEO, COMPASS BUSINESS SOLUTIONS LLC	TELEPHONE (Include Area Code) 602 509 1060	E-MAIL ADDRESS hemant@v-gen-us
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Mail all future correspondence regarding this license to:
6610 E. MEADOWLARK LN., PARADISE VALLEY, AZ 85253

C. CERTIFYING OFFICIAL

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

PRINTED NAME AND TITLE HEMANT PATEL CEO, COMPASS BUSINESS SOLUTIONS LLC	SIGNATURE 	DATE 3-20-08
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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.

4-18-08

DATE

This is to acknowledge the receipt of your letter/application dated 3-20-08, 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** 471766.
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

: (FOR LFMS USE)
: INFORMATION FROM LTS
: -----
:
: Program Code: 03219
: Status Code: 0
: Fee Category: 1D 2C 3N 4B
: Exp. Date: 20091031
: Fee Comments: _____
: Decom Fin Assur Reqd: N
:

BETWEEN:
License Fee Management Branch, ARM
and
Regional Licensing Sections

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: AGUIRRE ENGINEERS, INC.
Received Date: 20080320
Oocket No: 3037566
Control No.: 471766
License No.: 02-29275-01
Action Type: Termination

2. FEE ATTACHED

Amount: _____
Check No.: /

3. COMMENTS

Signed Cecilia Murahara
Date 4-15-08

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 _____

CBS LLC.
6610 E. Meadowlark Ln.
Scottsdale Valley
AZ 85253

POSTAGE WILL BE PAID BY ADDRESSEE
FIRST CLASS PERMIT NO. 1000
SCOTTSDALE, ARIZONA



471766

76011+4005

