

NRC FORM 314 <small>(1-2012) 10 CFR 30.38(j)(1); 40.42(j)(1); 70.38(j)(1); and 72.54(k)(5)(1)(1)</small>	U.S. NUCLEAR REGULATORY COMMISSION	APPROVED BY OMB: NO. 3150-0028	EXPIRES: 10/31/2013
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 Information Services Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by Internet e-mail to InfoCollects.Resource@nrc.gov , and to the Desk Officer, Office of Information and Regulatory Affairs, NECB-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 <i>Synergy Mobile Imaging</i> <i>29488 Woodward Ave #284</i> <i>Royal Oak, MI 48073</i>	LICENSE NUMBER <i>2132673-01</i>	DOCKET NUMBER <i>03037551</i>
LICENSE EXPIRATION DATE <i>11/30/2017</i>		

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:

b. Disposal of radioactive materials:

1. Directly by the licensee:

2. By licensed disposal site:

3. By waste contractor: *Radiological Physics Service, Inc.*
Ray Carlson

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	TITLE	TELEPHONE (Include Area Code)	E-MAIL ADDRESS
			<i>Synergy mobile imaging@gmail.com</i>

Mail all future correspondence regarding this license to:

C. CERTIFYING OFFICIAL

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

PRINTED NAME AND TITLE <i>Terry Sewald CNMT</i>	SIGNATURE <i>Terry A. Sewald</i>	DATE <i>5/1/2012</i>
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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.

Synergy Mobile Imaging
Weekly Wipe Record

Close Out Wipes
Trigger Level (DPM): 2000 dpm

Wipe	1	2	3	4	5
Net DPM					
Swipe	6	7	8	9	10
Net DPM					
Name				Date	

Swipe	1	2	3	4	5
Net DPM					
Swipe	6	7	8	9	10
Net DPM					
Name				Date	

Swipe	1	2	3	4	5
Net DPM					
Swipe	6	7	8	9	10
Net DPM					
Name				Date	

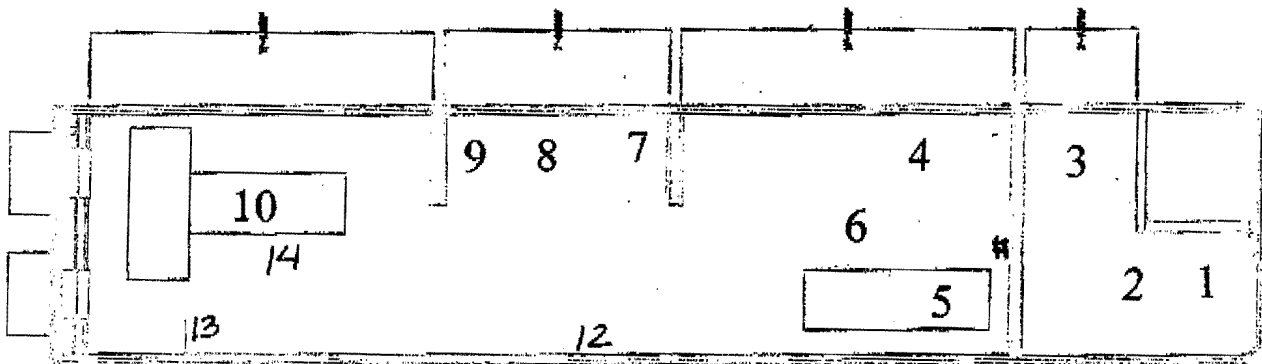
Swipe	1	2	3	4	5
Net DPM					
Swipe	6	7	8	9	10
Net DPM					
Name				Date	

Swipe	1	2	3	4	5
Net DPM					
Swipe	6	7	8	9	10
Net DPM					
Name				Date	

Swipe	1	2	3	4	5
Net DPM	10	12	24	16	18
Swipe	6	7	8	9	10
Net DPM	14	12	11	17	14
Name <i>Pepin, Edward, ONMT</i>				Date <i>5/1/2012</i>	

Swipe	<i>11</i>	<i>12</i>	<i>13</i>	<i>14</i>	
Net DPM	<i>9</i>	<i>13</i>	<i>15</i>	<i>22</i>	

AREA SURVEY MAP



Key

- | | |
|------------------------------|-----------------|
| 1. Hot Lab Area | 6. Floor - Rug |
| 2. Floor - Dose Storage Area | 7. Rt. Arm Rest |
| 3. Computer Workstation | 8. Table |
| 4. Treadmill | 9. Lt. Arm Rest |
| 5. Exam Table | 10. Camera |

- 11. Hot Lab Door
- 12. Entrance Door
- 13. Acquisition Station
- 14. Camera Area Floor

TRANSMISSION VERIFICATION REPORT

TIME : 05/22/2012 17:10
NAME : TWEDDLE GROUP
FAX : 5863073997
TEL : 5863073997
SER. # : BROE7J649527

DATE, TIME 05/22 17:10
FAX NO./NAME 16305151259
DURATION 00:00:38
PAGE(S) 03
RESULT OK
MODE STANDARD
ECM

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Attn: Materials Lic
Branch