NRC FORM 314 (02-2014) 10 CFR 30.36(j)(1); 40.42(j)(1); 70.38(j)(1); and 72.54(k)(5)(1)(1)



U.S. NUCLEAR REGULATORY COMMISSION

APPROVED BY OMB: NO. 3150-0028

EXPIRES: 02/28/2017

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 FOIA, Privacy, and Information Collections Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects. Resource@rcc.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	2.0	LICENSE NUMBER	DOCK	ET NUMBER
Old Dominion University	1) /2. d	45-09599-03		03016045
EH&S Department	<i>y</i> -	45-09599-04		03037926
5255 Hampton Blvd. Spong Hall Suite 2501 Norfolk, VA 23529	!	LICENSE EXPIRATION DATE		
			··· <u>·</u>	
1 _		appropriate box)		
This license has expired. ✓ This license has not ye				
B. DISPOSAL (Check the appropriate boxes and complete as	OF RADIOACT		ido ettechi	
The licensee, or any individual executing this certificate on bel			OVIUE attacim	nents)
No radioactive materials have ever been procured or			ense.	
2. All activities authorized by this license have ceased	d, and all radioact	tive materials procured and		ed by the licensee
under this license number cited above have been d	lisposed of in the	following manner.		, a.c.
a. Transfer of radioactive materials to the licensee I	isted below:			
✓ b. Disposal of radioactive materials:				70
1. Directly by the licensee:				Ã
				RECRG 1 09 28 *15 AM07:07
				-
2. By licensed disposal site:) Ch
				0
				ម្ចា ទ
√ 3. By waste contractor:				្នី
Bionomics	1 075.0		,	Š
P. O. Box 817 Kingston, TN 37763 (phon		,		
c. All radioactive materials have been removed such Part 20, Subpart E, and is ALARA.	that any remain	ing residual radioactivity is	within the iir	nits of 10 CFR
l <u> </u>	PERFORMED AN			
1. A radiation survey was conducted by the licensee. The	ie survey confirm	IS:		
✓ a. the absence of licensed radioactive materials				
b. that any remaining residual radioactivity is within	the limits of 10 C	FR 20, Subpart E, and is A	ALARA.	, /
2. A copy of the radiation survey results:				a latur
✓ a. is attached; or ☐ b. is not attached (Provide explain attached) ✓ a. is attached; or ☐ b. is not attached. ✓ a. is attached; or ☐ b. is not attached. ✓ a. is attached; or ☐ b. is not attached. ✓ a. is attached; or ☐ b. is not attached. ✓ a. is attached. ✓ a. is attached; or ☐ b. is not attached. ✓ a. is attached	planation); or	c. was forwarded to NR	RC on:	9/18/15
3. A radiation survey is not required as only sealed source	es were ever po	ssessed under this license	, and	Date /
a. The results of the latest leak test are attached; an	id/or	b. No leaking sources have	ve ever been	identified.
The person to be contacted regarding the information provided on this				
NAME TITLE .		TELEPHONE (Include Area Code)	E-MAIL ADDRESS	
Sheri A. Vann Compliance Officer/RS	10	757-683-5834	svann@odu	.edu
Mail all future correspondence regarding this license to:				
Old Dominion University EH&S Department 5255 Hampton Blvd. Suite 2501 Norfolk, V	VA 23529			
C. C	ERTIFYING OFFIC			
I CERTIFY UNDER PENALTY OF PER	JURY THAT THE F	OREGOING IS TRUE AND C		ATE . /
	SIGNATURE			
Sheri Ann Vann		1 7/1 /n.	,	Cr / 10/1
' I	(->	num / (Junn		9/18/2015

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.

588977 NMSS/RGNI MATERIALS-002



Occupational Safety & Health

MEMORANDUM

Environmental

Health

DATE:

September 21, 2015

Laboratory

Safety

TO:

NRC

Industrial

Hygiene

Radiation

Safety

Hazardous Waste

Pollution Prevention

Licensing Assistant Section

Nuclear Materials Safety Branch

U.S. Nuclear Regulatory Commission, Region I

2100 Renaissance Boulevard, Suite 100

King of Prusia, PA 19406-2713

FROM: Sheri Vann

Environmental Health & Safety Department

Old Dominion University

5255 Hampton Boulevard Spong Hall Suite 2501

Norfolk, VA 23529

Deactivating our current license and applying for another license **SUBJECT:**

January 28, 2015 the University was inspected by Dennis Lawyer. I'm in the process of trying to have our current license deactivated and an application for a new license so we can still use sea vessels to work with radioactive material on board.

I have completed the Form 314 which is enclosed; I have also enclosed a swipe survey for the sea vessel SLOVER which was used in 2008 and 2009 by (2) Authorized Users here at the University at that particular time these individuals only use long half-life items; the documented swipe survey is enclosed. The sea vessel was swiped on September 8, 2015.

I have also included radioactive waste shipments from 2008 and 2009. We use Bionomics to pick up our radioactive waste from the University. Their address is P.O. Box 817 Kingston TN 87763 or by calling them at 865.220.8501.

The Form 374 is an internal Form and is being shipped here for completion, I was told by Deborah A. Hersey that it would be mailed directly here for completion so until I have that document I cannot provide the Form 374. I was told it would be shipped here for completion. I will complete the Form once it arrives here at the University.



This is the only information I can provide at the current time, date, and year.

Thank you Sheri A. Vann EH&S Department Old Dominion University 5255 Hampton Blvd. Spong Hall Suite 2501 Norfolk, VA 23529

```
SYSTEM NORMALIZED
C14 IPA DATA PROCESSED - 04-Sep-2015 14:13
    C14 Eff (0-156 keV) = 95.47 %
H3 IPA DATA PROCESSED - 04-Sep-2015 14:14
    H3 Eff (0-18.6 keV) = 61.45 %
BKG IPA DATA PROCESSED - 04-Sep-2015 15:14
    Bkg (0-18.6 keV) = 12.45 cpm
    Bkg (0-156 keV) = 21.32 cpm
    C14 E^2/B (1-156 keV) = 521.19
    H3 E^2/B (1-18.6 keV) = 303.86
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Protocol #:21
                    Name: Swipe test
                                                    08-Sep-2015 11:45
Region A: LL-UL= 0.0-18.0 Lcr=
                                   0 Bkg= 0.00 %2 Sigma=0.00
Region B: LL-UL= 0.0-156.
                           Lcr=
                                   0 Bkg= 0.00 %2 Sigma=0.00
Region C: LL-UL= 0.0-2000 Lcr=
                                   0 Bkg= 0.00 %2 Sigma=0.00
Time = 1.00
                 QIP = tSIE/AEC
                                   ES Terminator = Count
Luminescence Correction On
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                                                                    SER VESSEL
                               CPMC FLAG tSIE LUM
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P.O. Box 817 - Kingston, TN 37763 - (865) 220-8501

October 02, 2008

Ms. Sherri Vann Old Dominion University Radiation Safety Office Hughes Hall, Rm. #2061 4807 Hampton Blvd. Norfolk, VA 23529

Dear Ms. Sherri Vann:

This letter certifies that Duratek, Inc. (Energy Solutions) has processed the materials from your shipment as indicated below:

Please reference the following table for detailed disposal information.

Manifest Number	Shipment Date	Container Number	Incineration Date
41508D	4/15/2008	2008-01	5/30/2008
41508D	4/15/2008	2008-02	5/30/2008

Note: Any ash from the incineration process becomes Duratek's (Energy Solutions) waste.

If you have any questions please feel free to contact me at (865) 220-8501.

Sincerely,

Rene Guy

Administrative Manager

Cc: File



P.O. Box 817 — Kingston, TN 37763 — (865) 220-8501

May 01, 2008

Ms. Sherry Vann Old Dominion University Radiation Safety Office Hughes Hall, Rm. #2061 4807 Hampton Blvd. Norfolk, VA 23529

Dear Ms. Sherry Vann,

As required by 10 CFR Part 20 (Appendix G), this letter is notification that Energy Solutions (formerly Duratek) has received the shipment recently picked up at your facility on **April 15, 2008.** Attached you will find a copy of your NRC Form 540, the only change from the original is in Item No. 9 "signature" which identifies that Energy Solutions is acknowledging receipt of waste from your facility.

Please keep this with your original, as well as future disposal certifications.

If you have any questions please feel free to contact me at (865) 220-8501.

Sincerely

Administrative Manager

Cc: File GTS-08-09

NRC FORM	UNIFORM LOW-LE WASTE N	EVEL RADIOACTIVE MANIFEST G PAPER	STONOMICE, INC.	5. SHIPPER N Old Dominion 1070 W. 47th Norfolk, VA 23	University Street	Ϋ́		8+41*+58	COLLECTOR PROCESSOR	7. NRC FORE 548 AND NRC 641 AND 641A NRC 642 AND 641A ADDITIONAL SHFOR		PAGE 1	OF 1 1 0 0 0 0	PAGE(8) 8. MANFEE PAGE(8) (Line tile til PAGE(8) (segen) PAGE(8)	T NUMBER LITER SE DE SENSITION SE
1	D1 80 Y 40			USER PERM	IT NUMBER	SHIPMEN	TNUMBER		GENERATOR TYPE (Specif	O CONSIGNEE - Name	and Facility Address			CONTACT	
1. EME	RGENCY TELEPHONE NUMBER	(Include Area Code)		1				A		Energy Solutions					ed Schuitz
		20-8520		CONTACT	_				HONE NUMBER	1560 Bear Creek F Oak Ridge, TN 371					UNIDER product from their
ORGAN	IZATION	20-0320		1	Sherr	i Vaun			(757) 683-5834	Cax radge, 114 37	5 1			(865)	481-0222
	BIONOM	NCS, INC.		I. CARRIER - No	two baid Address				D. NUMBER	BIGNATURE - Authorize	T.	dging waste receipt		DATE	alm
	IN AN EXCLUSIVE USE SHIPMENT?	3. PACKAGES DENTIFIED		Bionomics,					TND982116493 ~	Dancel			STIFICATION	1410	9108
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MANE	PEET ACCOMPANY	N/A				cConnick			(865) 220-8501	diagnost sa photostad by	ecognizates with the r			r oquivalent etake regulption	
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25-Apr-08

OLD DOMINION UNIVERSITY
SHERI VANN
ENVIRONMENTAL SAFETY
1070 W 47TH STREET
NORFOLK VA

REF: MANIFEST NUMBER:

23508

28938

SHIPMENT NUMBER:

BIO-340

SHIPMENT DATE:

04/22/2008

ON THE ABOVE DATE, YOUR WASTE MATERIAL WAS RECEIVED AT OUR FACILITY.

THIS MATERIAL WILL BE DISPOSED OF IN FULL IN ACCORDANCE WITH ALL APPLICABLE FEDERAL, STATE AND LOCAL LAWS AND REGULATIONS

THIS ENTIRE PROCESS IS GENERALLY COMPLETED WITHIN A 30-DAY PERIOD FROM THE DATE OF THE SHIPMENT.

1940 N.W. 67th Place

P	ease r	frint or type. (Form designed for use on elite (12-pitch) typewriter.)	,								2050-003
		IFORM HAZARDOUS 1. Generator ID Number	1 - 1				4. Manifest	Tracking N	lumber		Ш
		WASTE MANIFEST VIHO SULLY SULL							, Q	ਂ ਹ	JN
	5. G	Generator's Name and Mailing Address		Genera	ator's Site Address	(if different	than mailing addre	ess)			
		AND TO MAKE AND						,			
	W	SPASCR VA 255									
	Gen	nerator's Phone (757) 533 533 1									
	6. Ti	ransporter 1 Company Name	Additional Information Additional Information INTERPATION: Thereby declare that the contents of this contignment are fully and accurately described above by the proper shipping name, and are classified, package of this contignment in the interpretation proper shipping name, and are classified, package of this contignment in the interpretation propers of the interpretation of this content of th								
		MIDAISMICS /NC					TNU	9321	16047	ra C	
	7. Tr	ransporter 2 Company Name					U.S. EPA ID	Number			
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	1 8	Exporter, I certify that the contents of this consignment conform to the terms of the attached	EPA Acknowle	dgmen	t of Consent.		1	и олрон он	rpmork and t	an, ao , an	u.y
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		rator's/Offeror's Printed/Typed Name	Signa	ture _		-	/				
+		HERI VANN	<		- Jour	16	comm			1/3	08
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SIGNATED	Facility 18c. Si	s Phone: gnature of Alternate Facility (or Generator) zardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatm		nd rec	ycling systems)				Mo	nth Day	Year
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VRC FORM 541

UNIFORM LOW-LEVEL RADIOACTIVE MANIFEST **WASTE MANIFEST**

CONTAINER AND WASTE DESCRIPTION

Additional Numbear Regulatory Commission (NRC) Requirements for Control. Transfer and Disposal of Radioactive Waste

î				1 MANIF	ESTITOTALS			2 MANIFEST SUMBER
1	PACKAGES/D :	NET VOL.ME	NE.™ NEIGHT		SPECIA NUCLEAR	MA GRIAL grams		41508D
-	SPOSAL CONTAINERS	m	kg	U-233	U-235	٦,	13744	3 PAGE 1 OF 1 PA 55-
I	2	0 22	19 50	0	0	0	0	4 SHIPPER NAME
I	4,	L. NUCLIDES	TRITION	G-14	Tc 99	1129	SOURCE	Old Dominion University
ŀ	ива 1.	61582700	0 03700	0 0370370	0	0	kg O	SHIPMENT O NUMBER

	DISPOSAL (CONTAINE	R DESCRIPT	ION					WASTE DE	SCRIPTION FOR EACH		PE IN CONTA			WASTE
	6	7	8	9	10	105465		PHYSICAL DESCRIPTION		14 CHEMICAL DESCRIP	TION	15	NKE."		CLASSIF -
CONTAINER DENTIFICATION NUMBER (CONTAINER DESCRIPTION SHE WAS THE PROCESS	YOU ME	WASTE AND CONTAINER WEIGHT	SURFACE RADIATION LEVEL	THEE	JRFACE AMINATION q/100 cm ²	WASTE DESCRIPTOR (See Note 2)	APPROXIMATE WASTE VOLUME(S)	SOLIDIFICATION OR STABILIZATION	CHEMICAL FORM I CHE!, ATING AGENT	WEIGHT % CHELATING AGENT		IA RADIONUCLIDES AI INER TOTAL OR CONTAINI PADIONUCLIDE P	ER TOTAL ACTIVITY	CATION AS-Class Stable AU- Class Unstable
GENERATOR ID NUMBER	TYPE 'See Note 1A:	m²	kg	mS#hr	A) PHA	BETA- JAMMA		IN CONTAINER m3	MEDIA See Note 31		F > 0 1 %	RADIONUCLIDES	МВq	PACKAGE TOTAL (MBg)	6- Class C- Class
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NOTE:	Container	Descrip	ybon.	Codes	F.	ir conf	Sicremia.	
	njuiring des						overpac	¥,
the rum	encal code	TUS! "	e toli	c/vec	bγ	50		

- Wooden Box or Crafe 2 Metal Sox 3 Plante Drum or 2 w
- 12 unpackaged 1 vir ponents 13 High Integrity Container 4 Metai Orum or cail ir adorbunal page
- 5 Metal "ank or Liner Concrete Tank or Tines Polyethylene Tank or Liner
- B Fiberglass Tank ur liner Demmeralizer 10 Jas Cylinder 11 Bulk: Unpackaged Vvayle
- 3 Jimer Desimble in tem 9 194 Feer Box 198 reversació
 - 5AEncapsulate SAMetal Met "A Sort 3,4 10AOther, Specify in the block or on attached page

one disposal sits

*ASupercompact

2Aincineration

Miranship

4A Soledify

and Only Apply To How The Waste Will de Processed?
Handled By The Cinsigner Use up to two process bodes and

11A Barrywell

13A Richland

*4A Return

13A Emirocare

20A Other Specify of the book in orran attached bage.

- 20 Charcoal 21 incimerator Ash
- 22.304 23 Gas '4 Od 15 Aquests Liquid 26 Filter Minute

34 EPA or Intermacer house

- 29 Demorbon Rubbie 30 Cation ion-evchange Media 31 Anion Ion-exchange Media 32 Mixed Bed ion-emhange Media 33 Contaminated E-automent
- 34 Organic Equid 35 Diaseware or Jackets 36 Sesied source / Device 51 Paint or Pleting 2" Mechanica: In-r.
- 38 Evaporator Botton's / Sudges / Boncentraties
- 19 Compactable Trash 40 Noncompactable Trash
- 41 Ammal Carcasses 42. Biological Material rescupt animal car lasses:
- 43 Achiveted Material 59. Other Describe in tem 1 эг «dditional ради

Note 3. Fix scirtification media that meet disposal site structrul stability requirements, the numerical pode meat be followed by 1.31. For all solid/lication media, the vendur, manufacture and brand name must also be identified in item 13, 00 se 100 PNONE REQUIRED.

teamper en

SURPTURE 17 Aquaser 60 Speuck C Sold 4 Sorb Chemel 30 ity Other 61 Caletoin Chemisal 50 Describe in rhen: 13 m Supernie Chemeá 3030 Dicapert HP200 acidmona. 63 m Jr 63 NUM 64 Safe Tourn 65 Nafe Not 66 Forco 67 Forco Oxapert HP500 page Petrosat SOUTHERNATION 90 Cement Accesset

NRC FORM 540		BIONOMICS, INC	5. SHIPPER N		JTY		SHIPPER	RID NUMBER	7 NRC FORM 540 AND		PAGE 1 OF	1 PAGE(S) 1 PAGE(S)		NUMBER
			Old Dominion 1070 W. 47th	Street				COLLECTOR	NRC 541 AND 541A NRC 542 AND 542A		-	O PAGE(S)	bedne) (nee are un	THE ON AN CONSTRUCTION
WASTE	LEVEL RADIOACTIVE E MANIFEST PING PAPER		Norfolk, VA 2	3508				PROCESSOR	ADDITIONAL INFOR	RMATION	-	0 PAGE(S)	4	1508D
			USER PERM	IT NUMBER	SHIPMEN	T NUMBER	A	GENERATOR TYPE (Specif	9. CONSIGNEE - Name	and Facility Address			CONTACT	
1. EMERGENCY TELEPHONE NUMBER	ER (Include Area Code)		1						Energy Solutions 1560 Bear Creek I	Bood				MBER (Including Area Code)
(865)	220-8520		CONTACT	Sherr	i Vaun			PHONE NUMBER g Area Code)	Oak Ridge, TN 37					481-0222
ORGANIZATION			6 CARRIER - Na		1 Vuon			(757) 883-5834 D. NUMBER	SIGNATURE - Authorize	d consignee acknowle	doing waste receipt		DATE	
2. IS THIS AN "EXCLUSIVE USE" SHIPMENT?	OMICS, INC.		Bionomics					TND982116493	The residence	a consignor points	aging master receipt			
X YES	ON THIS MANIFEST	2		Creek Roa	d			ING DATE			10. CERTIFICAT	TION		
NO	=====>	-	Oak Ridge				4/15/2006		This is to certify that the	herein-named materia	is are properly classified, des	cribed, peckaged, marked	, and labeled a	nd ere
4. DOES EPA REGULATED YES WASTE REQUIRING A X NO	EPA MANIFEST NUMBER		CONTACT				TELEP	PHONE NUMBER			to the applicable regulations			
MANIFEST ACCOMPANY	N/A			John M	cCormick			(865) 220-8501	disposal as discritted in	recognize with the re	equirements of 10 CFR Parts			
THIS SHIPMENT? If "Yes" provide Manifest Number =====>	N/A		SIGNATURE - W		knowledging waste	receipt	DATE	4/15/2008	AUTHOR ED SIEVED	Vann	TITLE RSO			DATE
11 U.S. DEPARTMENT OF TRANSPO		12.	13	1	14	T		15.		16a	17	18a TOT	AL VOLUME	19 IDENTIFICATION
(Including proper shipping name, hezza and any additional info		"RADIOACTIVE"	TRANSPORT		CAL AND			INDIVIDUAL RADIONUCLIDES		TOTAL PACKAGE ACTIVITY IN MBq	LSA/SCO CLASS		m³	NUMBER OF PACKAGE
Radioactive Material, low specific activity (LSA II), 7, U	JN3321													
		N/A	N/A	Solid /	Oxides	H 3, C 14				0.074	LSAII		0.11	2008-01
Radioactive Material, low specific activity (LSA II), 7, U	JN3321						, , , , , ,	7, Na 22, Co 60, Po 210						
		N/A	N/A	Solid /	Oxides	Ba 137, Cl 36.	, Ba 13	3, Cs 137, Pb 210, C 14	}	1.541827	LSAII).11	28-02
			-		~~*******									
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						1								
- the second sec														
									BIONOMICS,	INC.				
									1					

Instructions

- 1 In Column 1 identify all USEPA hazardous waste codes that apply to this waste shipment.
- 2 In Column 2, choose the appropriate treatability group: Non-Wastewater (NWW) or Wastewater (WW)
- 3 In Column 3, enter the appropriate Subcategory, if applicable, and also enter "Contaminated Soil" or "Debris" if the waste can be treated using one of the alternative treatment technologies provided by 268 49(c) (soil) or 268.45 (debris).
- 4 In Column 4 circle the letter of the appropriate LDR management categories on the back of this form
- 5 In Column 5, enter the Reference Number(s) from the LDR-UHC Constituent Table for any constituents subject to treatment in your waste stream

Go to 1988 1990 Contituent Table

Manifest Line	1 USEPA HAZARDOUS WASTE	2.	NWW or		4	HOW	MUS	т тн		ASTE	BF I	/AN	AGED (Check				5 REFERENCE NUMBER(s) of Hazardous Constituents
Item #	CODES		WW	3. SUBCATEGORY	Α	8	С	D	E	F	G	Н		5	ioil C	inly	contained in the waste
11 A	D001, F003, F005	Х	NWW	High TOC									Does			is subject to	
, , , ,	L//01, F003, F003		ww	High TOO	A								Does Not			complies with	
11.R			NWW										Does			is subject to	
			ww										Does Not			compiles with	
11 ()			NWW										Does			is subject to	
			ww	:									Does Not			complies with	
11 D			NWW										Does			is subject to	
.,,,			ww										Does Not			complies with	

I hereby certify that all information submitted on this and all associated documents is complete and accurate to the best of my knowledge and information

SHERL VANN	RSO	4/4	5/0	18
Generator Name	Title	Date	7	

- A THIS RESTRICTED WASTE REQUIRES TREATMENT TO THE APPLICABLE STANDARD. This waste must be treated to the applicable performance based treatment standard set forth in 40CFR Part 268 Subpart C, 268 32, Subpart D, 268.40 or RCRA Section 3004(d) pnor to land d
- B THIS HAZARDOUS DEBRIS MAY BE TREATED USING THE DEBRIS ALTERNATIVE TREATMENT STANDARDS OF 40 CFR 268.45. I certify under penalty of law that I personally have examined and am familiar with the waste and that the statement above is true and that this waste m
- C. THIS <u>RESTRICTED WASTE</u> HAS <u>BEEN TREATED TO THE APPLICABLE TREATMENT STANDARD(S)</u> I certify under penalty of law that I personnally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this ce
- D THIS RESTRICTED DEBRIS HAS BEEN TREATED IN ACCORDANCE WITH 40 CFR 268.45. I certify under penalty of law that the debns has been treated in accordance with the requirements of 40 CFR 268.45. I am aware that there are significant penalties for making falls
- E THIS LAB PACK DOES NOT CONTAIN ANY WASTES IDENTIFIED AT APPENDIX IV TO PART 268 I certify under penalty of law that I personally have examined and am familiar with the waste and that the statement above is true and that this lab pack will be sent to a co
- F. IHIS RESTRICTED WASTE HAS BEEN TREATED TO REMOVE THE HAZARDOUS CHARACTERISTIC. I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268 40 to remove the hazardous characteristic. This decharacterized
- G THIS RESTRICTED WASTE HAS BEEN TREATED TO REMOVE THE HAZARDOUS CHARACTERISTIC AND BEEN TREATED FOR UNDERLYING HAZARDOUS CONSTITUENTS | certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to re
- H THIS RESTRICTED WASTE IS SUBJECT TO AN EXEMPTION FROM LAND DISPOSAL (Please include the date the waste is subject to the prohibitions in Column 5) This waste is subject to an exemption from a prohibition on the type of land disposal method utilized for I
- S THIS CONTAMINATED SQIL (DOES / DOES NOT) CONTAIN LISTED HAZARDOUS WASTE AND (DOES / DOES NOT) EXHIBIT A CHARACTERISTIC OF HAZARDOUS WASTE AND (IS SUBJECT TO / COMPLIES WITH) THE SQIL TREATMENT STANDARDS AS PROVIDED BY 268.49(c) OR THE UNIVERSAL TREATMENT

P.O. Box 817 — Kingston, TN 37763 — (865) 220-8501

September 08, 2008

Ms. Sherri Vann Old Dominion University Radiation Safety Office Hughes Hall, Rm. #2061 4807 Hampton Blvd. Norfolk, VA 23529

Dear Ms. Sherri Vann:

This is to certify that the radioactive material picked up at your facility on May 28, 2008 on manifest #52808, has been processed at Energy Solutions (formerly Duratek) in Oak Ridge, TN and disposed of at Energy Solutions (formerly Envirocare) in Clive, Utah.

Please reference the following table for detailed disposal information.

Manifest Number	Container Number	Disposal Volume (ft³)	Disposal Shipment Number	Disposal Date
52808	UL-1	2.40000	T083152	08/07/2008
52808	ODU-1	2.40000	T083152	08/07/2008

If you have any questions please feel free to contact me at (865) 220-8501.

officerery,

Rene Guy

Administrative Manager

Cc: File



P.O. Box 817 — Kingston, TN 37763 — (865) 220-8501

June 12, 2008

Ms. Sherri Vann Old Dominion University Radiation Safety Office Hughes Hall, Rm. #2061 4807 Hampton Blvd. Norfolk, VA 23529

Dear Ms. Sherri Vann,

As required by 10 CFR Part 20 (Appendix G), this letter is notification that Energy Solutions (formerly Duratek) has received the shipment recently picked up at your facility on May 28, 2008. Attached you will find a copy of your NRC Form 540, the only change from the original is in Item No. 9 "signature" which identifies that Energy Solutions is acknowledging receipt of waste from your facility.

Please keep this with your original, as well as future disposal certifications.

If you have any questions please feel free to contact me at (865) 220-8501.

Sincerely,

Rene Guy

Administrative Manager

Cc:

File GTS-08-14

Engineered burden par response to comby with this information collection, request: 45 manuses. This uniform mention by NPC to most reporting requirements of Federal and State Agenciae for the sale transportation and disposat of love-level waste. Send comments with the Information and Federal State Agenciae for the sale transportation and requirements of Federal and State Agenciae for the sale transportation and requirements of Federal State Agenciaes for the sale transportation and requirements of Federal State Agenciaes for the sale transportation and requirements of Federal State Agenciaes for the sale transportation and requirements of Federal State Agenciaes for the sale transportation and requirements of Federal State Agenciaes for the sale transportation and requirements of Federal Agency (1998). The sale transportation and requirements of Federal Agenciaes for the sale transportation and requirements of Federal Agency (1998). The sale transportation and federal State Agency (1998) and the Proposition of Federal Agency (1998) and the APPROVED BY OMB: NO. 3150-0164 EXPIRES: 07/31/2010 OLD DOMINION UNIVERSITY HISSEL TO HUMBER 7. NRC FORM \$40 AND \$40A PAGE 1 OF U.S. NUCLEAR REGULATORY COMMISSION PAGE(S) MANIFEST NUMBER
(Use this number on all continuation pages) NRC FORM 540 NRC FORM 541 AND 541A PAGE(3) 7.2007) 4867 Hampton. BUD. COLLECTOR NRC PORM 542 AND 542A \$ PAGE(S) UNIFORM LOW-LEVEL RADIOACTIVE Norfolk, VA. 23529 52808 PROCESSOR ADDITIONAL INFORMATION PAGE(S) **WASTE MANIFEST** USER PERMIT NUMBER SHIPMENT NUMBER GENERATOR TYPE . CONSIGNEE - Name and Facility Address SHIPPING PAPER DONNIE Brackett GHERRY SOLUTIONS 1560 Bear Crock Rd 1. EMERGENCY TELEPHONE NUMBER (Include Area Carle) TELEPHONE NUMBER projude Area Code TELEPHONE NUMBER (Include Arga Coda) (757) 683-58734 CONTACT (865) 220- 8520 OAK Cidas, TN. 37831 Sherri Vann 865) 481-0222 ORGANIZATION BIONOMICS INC. Bronomics INC. EPA LO. NAMBER LeKStob TN10982116493 author allund TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST 2. IS THUS AN "EXCLUSIVE USE" SHIPMENT? 1550 Boar Creek FORD (OUR 1-10 80-7864 10. CERTIFICATION HIPPING DATE W YES 3 OPK Ridge, TN. 37830 5-28-08 _____ ND PIELEPHONE NUMBER
Anchole Area Codel
Sec 220-850 EPA MANE EST NUMBER effect, packaged product, and labeled and are in proper condition for by with the applicable requirements of 10 CFR Parts 20 and 81, or equ DOES EPA REQULATED YES John McCornick WASTE REQUIRING A
MASTER TACOMPANY
THIS SEPTIMENT?
I "You," provide Manifest Number HNO RSO 5/28/08 5-28-08 18. IDENTIFICATION MINISTER OF PACKAGE U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (Including proper shipping name, featerd date, UN IO number, and any additional inforation) 17. LSA/3CO CLASS 18. TOTAL WEIGHT OR VOLUME (Line appropriate units 15. INDIVIDUAL RADIONACLIDES DOT LABEL TRADIOACTIVE TRANSPORT PIDEX PHYSICAL AND CHEMICAL FORM 0.13 m3 BOX-1 8 Clau; Coles; Ciu; Ha KODIOAUTIVE MATERIAL NA NA SOLID/OXIDES 1.01051hBq LSPII Specific act Nitu (ISAI) 7 UN3321 0.0041 635 1164 0.02 N3 26411 004-1 KADIDALTNE MATERIAL, low Specific Rezza : Phzio: Thzza: Thzzz A ALLLUZCHBO NA NA Soud/OXIDGS 4238 4234 activity (SAN). 7, UN3321 0.000 481 0 0.02 13 41-1 M M Sour/OXIDES 4238 L-570-11 activity (16A11), 7, 4N3321 FOR CONSIGNEE USE ONLY

NRC FORM 540 (7-2007)

PRINTED ON RECYCLED PAPER

CONSIGNEE ORIGINAL COPY (MUST ACCOMPANY WASTE IN TRANSIT)

Invoice

Bionomics, Inc. P O Box 817 Kingston, TN 37763 Invoice Number: 08341

> Invoice Date: Jun 9, 2008

Voice: Fax:

865-220-8501 865-220-8532

Tax Exemption ID: 85-0366891

Page

Sold To: Old Dominion University Rollins Hall, Room 206 Norfolk, VA 23529

Ship to: Old Dominion University Sherri Vann 4807 Hampton Blvd Norfolk, VA 23529

Custome	rID	C	Customer PO		Payment T	erms
ODU		DO10596	9635 Net 30		Days	
Sales Rep	ID	S	hipping Method		Ship Date	Due Date
Ray Alexander		Bionomics			/28/08	7/9/08
Quantity	Item		Description		Unit Price	Extension

ay Alexande	er	Bionomics	5/28/08	7/9/08		
Quantity	Item	Description	Unit Price	Extension		
10.00	Lbs	Boxes for Incineration	8.00	80.00		
11.00		Compaction in Drums	9.00	99.00		
1.00		Uranyl Compound	800.00	800.00		
1.00		Nitric Acid	5,800.00	5,800.00		
1.00		HCL	3,800.00	3,800.00		
1.00		Flammable	2,250.00	2,250.00		
1.00		Supplies/DAW Boxes	5.00	5.00		
1.00		Supplies/5 Gal Metal Pail	12.00	12.00		

WE ACCEPT ALL MAJOR CREDIT CARDS

12,846.00 Subtotal Sales Tax

Check No:

Total Invoice Amount Payment Received

TOTAL

12,846.00 0.00 12,846.00

Remit To: Bionomics, Inc.

PO Box 817 Kingston, TN 37763

Questions: Call Karen McCormick at

865-220-8501

Constrator Name Constrator USEPA ID No VADOUF 1448 465 Constrator Address ABC 1 HAM plan REVD. City/S1/Zip Manifest Doc No COC3Z898237K

Instructions

- 1. In Column 1 identify all USEPA hazardous waste codes that apply to this waste shipment
- 2 In Column 2, choose the appropriate treatability group. Non-Wastewater (NWW) or Wastewater (WW)
- 3 In Column 3, enter the appropriate Subcategory, if applicable, and also enter "Contaminated Soil" or "Debns" if the waste can be treated using one of the alternative treatment technologies provided by 268.49(c) (soil) or 268.45 (debns).
- 4. In Column 4, circle the letter of the appropriate LDR management categories on the back of this form.
- 5 in Column 5, enter the Reference Number(s) from the LDR-UHC Constituent Table for any constituents subject to treatment in your waste stream

Go to LDR-UHC Contituent Table

Manifest Line	1 USEPA HAZARDOUS WASTE CODES	2	NWW or WW	3	SUBCATEGORY		4 HOW MUST THE WASTE BE MANAGED (Check one) A B C D E F G H Soll Only											_	REFERENCE NUMBER(s) of Hazardous Constituents contained in the waste.
96.1	DOUZ	L	NWW			V				Γ				Does			is subject to		
70.1			ww											Does Not			complies with		
0 1- 2	Down Foos	k-	NWW			L	F		Γ	Γ				Does			is subject to		
90.4	F00 3		ww			L	L		L	L				Does Not			complies with		
0. 7	Dooz	V	NWW			V	F							Does			is subject to		
9b.3			ww							L				Does Not			complies with		
01			NWW											Does			is subject to		
96.4			ww											Does Not			compiles with		

I hereby certify that all information submitted on this and all associated documents is complete and accurate to the best of my knowledge and information.

1/11/		<i>j</i> /
The / Was	rin RSD	5/28/08
Generator Name	Title	Date

- A. THIS RESTRICTED WASTE REQUIRES TREATMENT TO THE APPLICABLE STANDARD. This waste must be treated to the applicable performance based treatment standard set forth in 40CFR Part 268 Subpart C, 268 32, Subpart D, 268.40 or RCRA Section 3004(d) prior to land disposal.
- B. THIS HAZARDOUS DEBRIS MAY BE TREATED USING THE DEBRIS ALTERNATIVE TREATMENT STANDARDS OF 40 CFR 268.45, I certify under penalty of law that I personally have examined and am familiar with the waste and that the statement above is true and that this waste meets the definition of debris and can be treated using the alternate methods specified in 40 CFR 268.45, I am aware that there are significant penalties for submitting a false certification including possibility of fine or imprisonment.
- C. THIS RESTRICTED WASTE HAS BEEN TREATED TO THE APPLICABLE TREATMENT STANDARD(S), I certify under penalty of law that I personnally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR 268 Subpart D. I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.
- D. THIS RESTRICTED DEBRIS HAS BEEN TREATED IN ACCORDANCE WITH 40 CFR 268.45. I certify under penalty of law that the debns has been treated in accordance with the requirements of 40 CFR 268.45. I am aware that there are significant penalties for making false certification, including the possibility of a fine and imprisonment.
- E. THIS LAB PACK DOES NOT CONTAIN ANY WASTES IDENTIFIED AT APPENDIX IV TO PART 268. I certify under penalty of law that I personally have examined and am familiar with the waste and that the statement above is true and that this lab pack will be sent to a combustion facility in compliance with the alternative treatment standards for lab packs at 40 CFR 268.42(c). I am aware that there are significant penalties for submitting a false certification including possibility of line or imprisonment.
- F. THIS RESTRICTED WASTE HAS BEEN TREATED TO REMOVE THE HAZARDOUS CHARACTERISTIC. I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.
- G. THIS RESTRICTED WASTE HAS BEEN TREATED TO REMOVE THE HAZARDOUS CHARACTERISTIC AND BEEN TREATED FOR UNDERLYING HAZARDOUS CONSTITUENTS. I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268 40 to remove the hazardous characteristic, and that underlying hazardous constituents, as defined in 268 48 Universal Treatment Standards. I am aware that there are significant, penalties for submitting false certification, including the possibility of fine and impossionment.
- H THIS RESTRICTED WASTE IS SUBJECT TO AN EXEMPTION FROM LAND DISPOSAL. (Please include the date the waste is subject to the prohibitions in Column 5) This waste is subject to an exemption from a prohibition on the type of land disposal method utilized for the waste (such as, but not limited to, a case-by-case extension under 40 CFR Part 268.5, or an exemption under 40 CFR 268.6
- S THIS CONTAMINATED SOIL (DOES / DOES NOT) CONTAIN LISTED HAZARDOUS WASTE AND (DOES / DOES NOT) EXHIBIT A CHARACTERISTIC OF HAZARDOUS WASTE AND (IS SUBJECT TO / COMPLIES WITH) THE SOIL TREATMENT STANDARDS AS PROVIDED BY 268 49(c) OR THE UNIVERSAL TREATMENT STANDARDS. I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and believe that it his been maintained and operated properly so as to comply with treatment standards specified in 40 CFR 268 49 without impermissible dilution of the prohibited wastes. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

WASTE MANIFEST VADO41449465	865 220-	se Phone	00	Tracking N	umber	2 J	JK
	Generator's Site Addres	ss (if different	than mailing addre	ess)			
Generator's Phone:							
6. Transporter 1 Company Name			U.S. EPA ID		16.31	62	
7. Transporter 2 Company Name			U.S. EPA ID		164		
Designated Facility Name and Site Address			U.S. EPA ID	Number			
GHONW bith Place GHINESUILLE FL. 32653	-						
Facility's Phone:	*		FLQ9	807	1107		
9a. By U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Cont No.	ainers Type	11. Total Quantity	12. Unit Wt./Vol.	13. V	Waste Code	es
X Specific activity (SSAII), 7, (8), UN332	1 001	DE	03.6	LTR	2000		
X 2 Worle KADIONATIVE MATERIAL 16W Specific CLEINING (SAN), 7, (3), UN3321	TIT				1800		
	001	DF	03.0	Lile	FUD3		
X activity (LEAN), 7, (8), 4133321	2	DE	03,3	LTE.	Soot.	and the second s	
·	001	100	9-01				-
4.						helifabrusseren kurrere paseren ver	-
P. B. Z. Lab Pack Misso hards 2-500 ML Gloss Bolt I	CALLE DANA OD	3 Pla	es Bott et a Bot recover	HAME S	OME TO	Talan Talah F Ma	nila nila
14. Special Handling Instructions and Additional Information 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment at marked end labeled/placarded, and are in all respects in proper condition for transport according to applice Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowled Legrify that the waste minimization statement identified in 40 CFR 282 27(a) (if I am a large quantity generally described and the contents of the	re fully and accurately of able international and needgment of Consent.	described abo	ve by the proper si mental regulations	hipping name	e, and are clas	sified, pack	aged,
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment at marked end labeled/piacarded, and are in all respects in proper condition for transport according to applicate Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowle I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity gene Generator's/Offeror's Printed/Typed Name Sign	re fully and accurately of able international and na edgment of Consent. rator) or (b) (if I am a sr ature	described abo	ve by the proper si mental regulations	hipping name	e, and are clas	sified, pack am the Prim	raged, nary
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15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment at marked end labeled/placarded, and are in all respects in proper condition for transport according to applicate Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowle I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity gene Generator's/Offeror's Printed/Typed Name Sign 16. International Shipments Import to U.S. Export from U. Transporter signature (for exports only):	re fully and accurately of able international and ni- adgment of Consent. rator) or (b) (if I am a sr ature	described abo ational govern mall quantity g	ve by the proper signantial regulations generator) is true.	hipping name	e, and are clas hipment and I a	sified, pack am the Prim	raged, nary
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment at marked end labeled/placarded, and are in all respects in proper condition for transport according to applicate Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowle I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity gene Generator's/Offeror's Printed/Typed Name 16. International Shipments Import to U.S. Export from U. Transporter signature (for exports only):	re fully and accurately of able international and ni- adgment of Consent. rator) or (b) (if I am a sr ature	described abo ational govern mall quantity g	ve by the proper signantial regulations generator) is true.	hipping name	a, and are clas hipment and I a Mon	sified, pack am the Prim th Day	raged, nary Yea
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July 27, 2009

Ms. Sheri Vann
Old Dominion University
Environmental Health & Safety
5255 Hampton Blvd.
Spong Hall, Suite 203
Norfolk, VA 23529

Dear Ms. Sheri Vann:

This letter certifies that EnergySolutions (formerly Duratek) has processed the materials from your shipment as indicated below:

Please reference the following table for detailed disposal information.

Manifest Number	SHIPMENT DATE	CONTAINER NUMBER	Incineration Completion Date
32509	3/25/2009	2009-1	6/24/2009

Note: Any ash from the incineration process becomes Duratek's (EnergySolutions) waste.

If you have any questions please feel free to contact me at (865) 220-8501.

Sincerely.

Rene Guy Administrative Manager

Cc: File GTS-09-09



July 28, 2009

Ms. Sheri Vann Old Dominion University Environmental Health & Safety 5255 Hampton Blvd. Spong Hall, Suite 203 Norfolk, VA 23529

Dear Ms. Sheri Vann:

This letter certifies that EnergySolutions (formerly Duratek) has recycled the lead from your shipment as indicated below:

Please reference the following table for detailed disposal information.

MANIFEST	SHIPMENT	CONTAINER	RECYCLE
NUMBER	DATE	NUMBER	DATE
32509	3/25/2009	ODU-2	6/24/2009

Note: Any ash from the incineration process becomes Duratek's (EnergySolutions) waste.

If you have any questions please feel free to contact me at (865) 220-8501.

Sincerely

Rene Guy

Administrative Manager

Cc: File GTS-09-09



P.O. Box 817 — Kingston, TN 37763 — (865) 220-8501

April 8, 2009

Ms. Sheri Vann Old Dominion University Env. Health & Safety Office 5255 Hampton Blvd Spong Hall, Suite 203 Norfolk, VA 23529

Dear Ms. Sheri Vann,

As required by 10 CFR Part 20 (Appendix G), this letter is notification that Energy Solutions (formerly Duratek) has received the shipment recently picked up at your facility on March 25, 2009. Attached you will find a copy of your NRC Form 540, the only change from the original is in Item No. 9 "signature" which identifies that Energy Solutions is acknowledging receipt of waste from your facility.

Please keep this with your original, as well as future disposal certifications.

If you have any questions please feel free to contact me at (865) 220-8501.

Sincerely,

Rene Guy

Administrative Manager

Cc:

File GTS-09-09

NRC FORM 540	ONOMICS, INC.	5. SHIPPER - N	AME AND FAC	ILITY		SHIPPE	R I.D. NUMBER	7 NRC FORM \$46 AND	\$40A PAGE 1 OF			MANIFEST NUMBER (Use this number on all continuation					
	IF DADIOACTIVE		Old Dominion 5255 Hampton					COLLECTOR	NRC 541 AND 541A			PAGE(S)	bather)				
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,	20-8520		CONTACT		l		TELEP	HONE NUMBER	1560 Bear Creek R	<u> </u>	DOMNIE BIOTONETT						
ORGANIZATION	20-6520		Sheri Vann					(757)683-5834	Oak Ridge, TN 378	331		['] 865- 481-0222					
BIONOM	ICS, INC.		6. CARRIER - Name and Address					D. NUMBER	SIGNATURE - Author	eipt DA	TE / / / O						
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U.S. EPA Form 8700-22

Read all instructions before completing this form.

- 1. This form has been designed for use on a 12-pitch (elite) typewriter which is also compatible with standard computer printers; a firm point pen may also be used—press down hard.
- Federal regulations require generators and transporters of hazardous waste and owners or
 operators of hazardous waste treatment, storage, and disposal facilities to complete this form
 (EPA Form 8700–22) and, if necessary, the continuation sheet (EPA Form 8700–22A) for
 both inter- and intrastate transportation of hazardous waste.

Public reporting burden for this collection of information is estimated to average: 30 minutes for generators, 10 minutes for transporters, and 25 minutes for owners or operators of treatment, storage, and disposal facilities. This includes time for reviewing instructions, gathering data, completing, reviewing and transmitting the form. Any correspondence regarding the PRA burden statement for the manifest must be sent to the Director of the Collection Strategies Division in EPA's Office of Information Collection at the following address: U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Ave., NW., Washington, DC 20460. Do not send the completed form to this address.

I. Instructions for Generators

Item 1. Generator's U.S. EPA Identification Number

Enter the generator's U.S. EPA twelve digit identification number, or the State generator identification number if the generator site does not have an EPA identification number.

Item 2. Page 1 of __

Enter the total number of pages used to complete this Manifest (i.e., the first page (EPA Form 8700-22) plus the number of Continuation Sheets (EPA Form 8700-22A), if any).

Item 3. Emergency Response Phone Number

Enter a phone number for which emergency response information can be obtained in the event of an incident during transportation. The emergency response phone number must:

- Be the number of the generator or the number of an agency or organization who is capable of and accepts responsibility for providing detailed information about the shipment;
- Reach a phone that is monitored 24 hours a day at all times the waste is in transportation (including transportation related storage); and
- Reach someone who is either knowledgeable of the hazardous waste being shipped and has comprehensive emergency response and spill cleanup/incident mitigation information for the material being shipped or has immediate access to a person who has that knowledge and information about the shipment.

Note: Emergency Response phone number information should only be entered in Item 3 when there is one phone number that applies to all the waste materials described in Item 9b. If a situation (*e.g.*, consolidated shipments) arises where more than one Emergency Response phone number applies to the various wastes listed on the manifest, the phone numbers associated with each specific material should be entered after its description in Item 9b.

Item 4. Manifest Tracking Number

This unique tracking number must be pre-printed on the manifest by the forms printer.

Item 5. Generator's Mailing Address, Phone Number and Site Address

Enter the came of the generator, the mailing address to which the completed manifest signed by the designated facility should be mailed, and the generator's telephone number. Note, the telephone number (including area code) should be the normal business number for the generator or the number where the generator or his authorized agent may be reached to provide includings in the event the designated and/or alternate (if any) facility rejects some or all of the stap ment. Also enter the physical site address from which the shipment originates only if thes address is different than the mailing address.

Item 6. Transporter 1 Company Name, and U.S. EPA ID Number

Enter the company name and U.S. EPA ID number of the first transporter who will transport the waste. Vehicle or driver information may not be entered here.

Item 7. Transporter 2 Company Name and U.S. EPA ID Number

If applicate enter the company name and U.S. EPA ID number of the second transporter who will transporter who will transporter who will transporter who will transport the waste. Vehicle or driver information may not be entered here.

If more to the two transporters are needed, use a Continuation Sheet(s) (EPA Form 8700-22A).

Item 8. Descripted Facility Name, Site Address, and U.S. EPA ID Number

Enter the company name and site address of the facility designated to receive the waste listed on this manifest. Also enter the facility's phone number and the U.S. EPA twelve digit identification number of the facility.

Item 9. U.S. DOT Description (Including Proper Shipping Name, Hazard Class or Division, Identification Number, and Packing Group)

Item 9a. If the wastes identified in Item 9b consist of both hazardous and nonhazardous materials, then identify the hazardous materials by entering an "X" in this Item next to the corresponding hazardous material identified in Item 9b.

Item 9b. Enter the U.S. DOT Proper Shipping Name, Hazard Class or Division, Identification Number (UN/NA) and Packing Group for each waste as identified in 49 CFR 172. Include technical name(s) and reportable quantity references, if applicable.

Note: 'f additional space is needed for waste descriptions, enter these additional descriptions in Item 27 on the Continuation Sheet (EPA Form 8700-22A). Also, if more than one Emergency Response phone number applies to the various wastes described in either Item 9b or Item 27, enter applicable Emergency Response phone numbers immediately following the shipping descriptions for those Items.

Item 10. Containers (Number and Type)

Enter the number of containers for each waste and the appropriate abbreviation from Table I (below) for the type of container.

TABLE I .-- TYPES OF CONTAINERS

BA = Burlap, cloth, paper, or plastic bags.

CF = Fiber or plastic boxes, cartons, cases.

CM = Metal boxes, cartons, cases (including roll-offs)

DT = Dump truck.

DW = Wooden drums, barrels, kegs.

HG = Hopper or gondola cars.

CW = Wooden boxes, cartons, cases. TC = Tank cars. CY = Cylinders. TP = Portable tanks.

DF = Fiberboard or plastic drums, barrels, kegs. TT = Cargo tanks (tank trucks).

DM = Metal drums, barrels, kegs.

Item 11. Total Quantity

Enter, in designated boxes, the total quantity of waste. Round partial units to the nearest whole unit, and *do not* enter decimals or fractions. To the extent practical, report quantities using appropriate units of measure that will allow you to report quantities with precision. Waste quantities entered should be based on actual measurements or reasonably accurate estimates of actual quantities shipped. Container capacities are not acceptable as estimates.

Item 12. Units of Measure (Weight/Volume)

Enter, in designated boxes, the appropriate abbreviation from Table II (below) for the unit of

TABLE II.--UNITS OF MEASURE

G = Gallons (liquids only).

K = Kilograms.

P = Pounds.

T = Tops (2000 Pc)

L = Liters (liquids only). T = Tons (2000 Pounds).
M = Metric Tons (1000 kilograms). Y = Cubic Yards.

Note: Tons, Metric Tons, Cubic Meters, and Cubic Yards should only be reported in connection with very large bulk shipments, such as rail cars, tank trucks, or barges.

Item 13. Waste Codes

Enter up to six federal and state waste codes to describe each waste stream identified in Item 9b. State waste codes that are not redundant with federal codes must be entered here, in addition to the federal waste codes which are most representative of the properties of the

Item 14. Special Handling Instructions and Additional Information

- 1. Generators may enter any special handling or shipment-specific information necessary for the proper management or tracking of the materials under the generator's or other handler's business processes, such as waste profile numbers, container codes, bar codes, or response guide numbers. Generators also may use this space to enter additional descriptive information about their shipped materials, such as chemical names, constituent percentages, physical state, or specific gravity of wastes identified with volume units in
- 2. This space may be used to record limited types of federally required information for which there is no specific space provided on the manifest, including any alternate facility designations; the manifest tracking number of the original manifest for rejected wastes and residues that are re-shipped under a second manifest; and the specification of PCB waste descriptions and PCB out-of-service dates required under 40 CFR 761.207. Generators, however, cannot be required to enter information in this space to meet state regulatory requirements.

Item 15. Generator's/Offeror's Certifications

- 1. The generator must read, sign, and date the waste minimization certification statement. In signing the waste minimization certification statement, those generators who have not been exempted by statute or regulation from the duty to make a waste minimization certification under section 3002(b) of RCRA are also certifying that they have complied with the waste minimization requirements. The Generator's Certification also contains the required attestation that the shipment has been properly prepared and is in proper condition for transportation (the shipper's certification). The content of the shipper's certification statement is as follows: "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 labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent." When a party other than the generator prepares the shipment for transportation, this party may also sign the shipper's certification statement as the offeror of the shipment.
- Generator or Offeror personnel may preprint the words, "On behalf of" in the signature block or may hand write this statement in the signature block prior to signing the generator/offeror certification, to indicate that the individual signs as the employee or agent of the named principal.

Note: All of the above information except the handwritten signature required in Item 15 may be pre-printed.

LAND DISPOSAL RESTRICTION & CERTIFICATION FORM

DSSI . M&EC . Perma-Fix of Florida

Generator Name

Old Dominion University

Generator Address:

Senerator Address:

State Manifest No.

N/A

Old Dominion University

Generator USEPA ID No.

VAD041448465

Oity ST 7::

Norfolk, VA 23508

Manifest Doc, No.

CC33345 78 7777

Instructions

- 1. In Column 1 identify all USEPA hazardous waste codes that apply to this waste shipment
- 2. In Column 2, choose the appropriate treatability group: Non-Wastewater (NWW) or Wastewater (NWW)
- 3 In Column 3, enter the appropriate Subcategory of applicable, and also enter "Contaminated Soil" or "Debris" of the waste can be treated using one of the alternative treatment technologies provided by 268.49(b) (soil) or 268.45 (debris).
- 4 in Column 4, place an "x" in the block that corresponds to the appropriate LDR management category described at the bottom of this form
- 5. In Column 5, enter the Reference Number(s) from the LDR-UHC Constituent Table for any constituents subject to treatment in your waste stream

Go to . " He got head to the

Manifest Line	1 USEPA HAZARDOUS WASTE	2.	NWW or	4. HOW MUST THE WASTE BE MANAGES: "Check one) A B C D E F G H Soil Only													5 REFERENCE NUMBER(s) of Hazardous Constituents	
Item #	CODES		WW	3. SUBCATEGORY	Α	В	С	D	Ε	F	G	Н		S		contained in the waste		
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I hereby certify that all information submitted on this and all associated documents is complete and accurate to the best of my knowledge and information

The Alland	RSO	11/06/09
Generator Name	Title	Date

- A THIS RESTRICTED WASTE REQUIRES TREATMENT TO THE APPLICABLE STANDARD. This waste must be treated to the applicable performance based treatment standard set forth in 40CFR Part 268 Subpart C. 268.32. Subpart D. 268.40 or RCRA Section 3004(d) prior to land disposal
- B. THIS HAZARDOUS DEBRIS MAY BE TREATED USING THE DEBRIS ALTERNATIVE TREATMENT STANDARDS OF 40 CFR 268.45. Learning under penalty of law that I personally have examined and am familiar with the waste and that the statement above is true and that this waste meets the definition of debris and can be treated using the alternate methods specified in 40 CFR 268.45. Lam aware that there are significant penalties for submitting a false certification including possibility of fine or imprisonment.
- C IHIS RESTRICTED WASTE HAS BEEN TREATED TO THE APPLICABLE TREATMENT STANDARD(S). I certify under penalty of law that I personnally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR 268. Subpart D. I believe that the information I submitted is true accurate and complete I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.
- D. THIS RESTRICTED DEBRIS HAS BEEN TREATED IN ACCORDANCE WITH 40 CFR 268.45. Licertify under penalty of law that the debris has been treated in accordance with the requirements of 40 CFR 268.45. Lam aware that there are significant penalties for making false certification, including the possibility of a fine and imprisonment.
- E THIS LAB PACK DOES NOT CONTAIN ANY WASTES IDENTIFIED AT APPENDIX IV TO PART 268. I certify under penalty of law that I personally have examined and am familiar with the waste and that the statement above is true and that this lab pack will be sent to a combustion facility in compliance with the alternative treatment standards for lab packs at 40 CFB 268 42(c). I am aware that there are significant penalties for submitting a false certification including possibility of fine or imprisonment.
- F THIS RESTRICTED WASTE HAS BEEN TREATED TO REMOVE THE HAZARDOUS CHARACTERISTIC. Licertify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. Lam aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.
- G THIS RESTRICTED WASTE HAS BEEN TREATED TO REMOVE THE HAZARDOUS CHARACTERISTIC AND BEEN TREATED FOR UNDERLYING HAZARDOUS CONSTITUENTS. I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268 40 to remove the hazardous characteristic and that underlying hazardous constituents, as defined in 268.48 Universal Treatment Standards. I am aware that there are significant, penalties for submitting false certification, including the possibility of fine and impresentation.
- H THIS RESTRICTED WASTE IS SUBJECT TO AN EXEMPTION FROM LAND DISPOSAL (Please include the date the waste is subject to the prohibitions in Column for This waste is subject to an exemption from a prohibition on the type of land disposal method utilized for the waste (such as ibut not limited to, a case-by-case extension under 40 CFR Part 268.5 or an exemption under 40 CFR 268.6
- S THIS CONTAMINATED SOIL (DOES / DOES NOT) CONTAIN LISTED HAZARDOUS WASTE AND (DOES / DOES NOT) EXHIBIT A CHARACTERISTIC OF HAZARDOUS WASTE AND (IS SUBJECT TO / COMPLIES WITH) THE SOIL TREATMENT STANDARDS AS PROVIDED BY 258.49(c) OR THE UNIVERSAL TREATMENT STANDARDS I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and believe that it his been maintained and operated properly so as to comply with treatment standards specified in 40 CFR 268.49 without impermissible dilution of the prohibited wastes. Lam aware that there are significant penalties for submitting a false certification, including the possibility of fine and improspment.

Bionomics, Inc. P O Box 817 Kingston, TN 37763

USA

Voice:

Fax:

865-220-8501 865-220-8532

Tax Exemption ID: 85-0366891

Ship to:

Sheri Vann/EH&S Office 5255 Hampton Blvd.

Spong Hall, Suite 203

Norfolk, VA 23529

Invoice Number 09423

Invoice

Invoice Date Nov 20, 2009

Page

Sold To: Old Dominion University Finance Office Rollins Hall, Room 206 Norfolk, VA 23529

Customer ID Customer PO Payment Terms ODU Net 30 Days Sales Rep ID Shipping Method Ship Date **Due Date**

Bryan Kirk	Bionomics	11/6/09	12/20/09
Quantity Ite	n Description	Unit Price	Extension
46.00 Lbs 1.00 1.00 1.00	Boxes for Incineration 30 Gal Exempt Scint Vials 5 Gal Mixed Waste Flammable Supplies/30 Gal Drums	8.00 325.00 3,400.00 28.00	368.00 325.00 3,400.00 28.00

WE ACCEPT ALL MAJOR CREDIT CARDS

Subtotal Sales Tax 4,121.00

Total Invoice Amount

4,121.00

Payment Received

0.00

TOTAL

4,121.00

Remit To:

Bionomics, Inc. PO Box 817

Check No:

Kingston, TN 37763

Questions: Call Karen McCormick at 865-220-8501



November 18, 2009

Ms. Sheri Vann
Old Dominion University
Environmental Health & Safety
5255 Hampton Blvd.
Spong Hall, Suite 203
Norfolk, VA 23529

Dear Ms. Sheri Vann,

As required by 10 CFR Part 20 (Appendix G), this letter is notification that EnergySolutions (formerly Duratek) has received the shipment recently picked up at your facility on November 06, 2009. Attached you will find a copy of your NRC Form 540, the only change from the original is in Item No. 9 "signature" which identifies that EnergySolutions is acknowledging receipt of waste from your facility.

Please keep this with your original, as well as future disposal certifications.

If you have any questions please feel free to contact me at (865) 220-8501.

Sincerely,

Rene Guy

Administrative Manager

Cc: File GTS-09-28

APPROVED BY OMB: NO. 3150-0164

Estimated burden per response to comply with this information collection request: 45 minutes. This uniform manifest is required by NPC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level wests. Send comments regarding burden estimates to the Records and FOA/Privacy Services Branch (T-6-FS2), U.S. Nuclear Regulatory Commission, New York (Total Control of Information and Regulatory Affairs, NEOB-10202, (150-0164), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently varied OMB control number, the NRC may not conduct or sponsor, and a person is not required to respons to, the Information collection.

NRC FORM 546 U (7-2007)	S. NUCLEAR REGULATO	RY COMMISSION	S. SHIPPER - N	MENIDENCELLY	N KE	Si	RIPPER I.D. NUMBER	7. NRC FORM 540 AM		PAGE(S)	8. MANIFEST NUMBE (Use this number on	R all continuation pages)	
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7. Transporter Ac	knowledgment	of Receipt of Materials								
ransporter 1 Prin	ted/Typed Nan	10	Si	gnature				Month	Day	Y
ransporter 2 Prin	nted/Typed Nan	ne	SI	gnature				Month	Day	Y
8. Discrepancy										
8a. Discrepancy	Indication Spa	Ce Quantity	Туре	Residu		Partial R	ejection		Full Rejec	ion
8b. Alternate Fac	cility (or Genera	ator)		Manifest Re	ference Number:	U.S. EPA ID	Number			
acility's Phone:						1				
	Alternate Facili	ity (or Generator)						Month	Day	1
9. Hazardous W	aste Report Ma	anagement Method Codes (i.e., codes	for hazardous waste treatment, dispos	al, and recycling sys	tems)					
		2.	3.			4.				
20 Decimand 5	acilih, Ourse	r Operator: Certification of receipt of ha	examous materials covered by the	nifect execut as exten	Lin Item 18a					_
20. Designated Fi Printed/Typed Na		Operator. Certification of receipt of ha		gnature	7 H1 (1011) 106			Month	Day	1
			1							1

Estimated burden per response to comply with this information collection request: 45 minutes. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of tow-level waste. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F52), U.S. Nuclear Regulatory Affairs, NEOB-10202, (3150-0164), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection. APPROVED BY OMB: NO. 3150-0164 EXPIRES: 07/31/2010 U.S. NUCLEAR REGULATORY COMMISSION 5. SHIPPER - NAME AND FACILITY NRC FORM 540 NRC FORM 540 AND 540A PAGE 1 OF PAGE(S) MANIFEST NUMBER OLD DOMINION UNIVERSITY (Use this number on all continuation pages) (7-2007)NRC FORM 541 AND 541A PAGE(S) 4807 HAMPton BUD. **UNIFORM LOW-LEVEL RADIOACTIVE** COLLECTOR NRC FORM 542 AND 542A PAGE(S) NORFOLK, Virginia 23529 28982 **WASTE MANIFEST** PAGE(S) PROCESSOR ADDITIONAL INFORMATION USER PERMIT NUMBER GENERATOR TYPE SHIPPING PAPER SHIPMENT NUMBER 9. CONSIGNEE - Name and Facility Address CONTACT (Specify) A Perma. FX 67th Place 1. EMERGENCY TELEPHONE NUMBER (Include Area Code) KATING-PWhittle TELEPHONE NUMBER (Include Area Code) TELEPHONE NUMBER CONTACT (865) 220.8520 (Include Area Code) GANNESVIlle, FL. 32653 ORGANIZATION Sherri Vann 757 683-9874 362) 373-6066 BIDDOMICS INC CARRIER - Name and Address EPA I.D. NUMBER SIGNATURE - Authorized consignee acknowledging waste receipt DATE BIONOMIC INC. TNO982116493 2. IS THIS AN "EXCLUSIVE USE" SHIPMENT? TOTAL NUMBER OF 1650 Boar Creek Rel **PACKAGES IDENTIFIED** X YES SHIPPING DATE 10. CERTIFICATION ON THIS MANIFEST 3 OLK Ridge TN 37130 5-28-08 NO =====> This is to certify that the herein-named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation This also certifies that the materials are classified, packaged, marked, and labeled and are in proper condition for transportation and TELEPHONE NUMBER EPA MANIFEST NUMBER CONTACT 4. DOES EPA REGULATED X YES (Include Area Code) WASTE REQUIRING A disposal as described in accordance with the applicable requirements of 10 CFR Parts 20 and 61, or equivalent state John McCornick 865 270.850 NO MANIFEST ACCOMPANY SIGNATURE - Authorized carrier acknowledging waste receipt DATE THIS SHIPMENT? 000 328982 JJK AUTHORIZED SIGNATURE TITLE If "Yes," provide Manifest Number 5.28.08 ann U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION
 (Including proper shipping name, hazard class, UN ID number, and any additional inforation) 12. DOT LABEL "RADIOACTIVE" 13. TRANSPORT 14. PHYSICAL AND 15. INDIVIDUAL 16. TOTAL PACKAGE ACTIVITY IN SI UNITS 17. LSA/SCO CŁASS 18. TOTAL WEIGHT OR VOLUME 19. IDENTIFICATION NUMBER OF PACKAGE INDEX RADIONUCLIDES (Use appropriate units) ODU-Z Liquio/ Acid Pb210; CS 137 4236; Pb208 ADIABLTING MATERIAL 114 5.7949 nBa 15411 0.02 m 233 Th229: Kazze: Ba133: Class, Eursy ORGANIC 0.02 m3 ODU-3 0.07474 MBs SOLVENTS 4-SA 11 NA NA LIGUIDI 0.12 13 1229 Th232 4234 POZIO OD4-4 LIGUID/ Acid UA NA 21.00626 MBg P0209 B0133 PUZUZ, CIL PSZUB, C/36 FOR CONSIGNEE USE ONLY

Estimated burden per response to comply with this information collection request: 45 minutes. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level waste. 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, (3150-0164), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently vailed OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection. APPROVED BY OMB: NO. 3150-0164 EXPIRES: 07/31/2010 U.S. NUCLEAR REGULATORY COMMISSION 5. SHIPPER - NAME AND FACILITY NRC FORM 540 7. NRC FORM 540 AND 540A PAGE(S) MANIFEST NUMBER Chicago Was designed (7-2007) (Use this number on all continuation pages) NRC FORM 541 AND 541A PAGE(S) THAT PRINTER PRINTERS UNIFORM LOW-LEVEL RADIOACTIVE COLLECTOR NRC FORM 542 AND 542A PAGE(S) survived Printy south and Tark PAGE(S) **WASTE MANIFEST PROCESSOR** ADDITIONAL INFORMATION USER PERMIT NUMBER SHIPPING PAPER SHIPMENT NUMBER GENERATOR TYPE 9. CONSIGNEE - Name and Facility Address CONTACT (Specify) A EMERGENCY TELEPHONE NUMBER (Include Area Code) Many Man G Partiers TELEPHONE NUMBER (Include Area Code) TELEPHONE NUMBER (Include Area Code) CONTACT 80-17-032 ORGANIZATION CHICANTE, H. 126-3 The THY VIEW ICT MANAGES OF 6. CARRIER - Name and Address EPA I.D. NUMBER DATE SIGNATURE - Authorized consignee acknowledging waste receipt HILLIER LAK 2. IS THIS AN "EXCLUSIVE USE" SHIPMENT? JETSZ HEVY TOTAL NUMBER OF PACKAGES IDENTIFIED - Son Barrers work Built SHIPPING DATE YES 10. CERTIFICATION ON THIS MANIFEST 1/4 Bulaco 10 372 10 =====> NO 5 28 08 This is to certify that the herein-named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation This also certifies that the materials are classified, packaged, marked, and labeled and are in proper condition for transportation and TELEPHONE NUMBER **EPA MANIFEST NUMBER** CONTACT DOES EPA REGULATED 1 YES (Include Area Code) WASTE REQUIRING A disposal as described in accordance with the applicable requirements of 10 CFR Parts 20 and 61, or equivalent state John Melinemiele SELECTION OF SELECTION MANIFEST ACCOMPANY NO regulations. THIS SHIPMENT? CON BASSEBUSE DATE SIGNATURE - Authorized carrier acknowledging waste receipt AUTHORIZED SIGNATURE DATE TITLE If "Yes," provide Manifest Number 5 25 08 V = 517 11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION 13. TRANSPORT INDEX 18. TOTAL WEIGHT OR VOLUME 19. IDENTIFICATION DOT LABEL
"RADIOACTIVE" 14. PHYSICAL AND CHEMICAL FORM 16. TOTAL PACKAGE ACTIVITY IN SI UNITS 17. LSA/9CO CLASS (Including proper shipping name, hazard class, UN ID number, and any additional inforation) INDIVIDUAL RADIONUCLIDES NUMBER OF PACKAGE (Use appropriate units) bin Csist Use Ibace 00 2 1 have here to course less Emily PM-5 2 Tu To Pitte AJA -D = 6 - 44 Un KANDERS THE MANY FIRE LOVE a six 16222 21 or ble Wy BUY BUILDS PURCE, EIL 162 4 C/36 FOR CONSIGNEE USE ONLY

NRC FORM 540 (7-2007)

PRINTED ON RECYCLED PAPER

SHIPPER COPY

APPROVED BY OMB: NO. 3150-0166 EXPIRES: 07/31/2010

Estimated burden per response to comply with this information collection request. 3.3 hours. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level waste. Send comments regarding burden estimate to the Records and FOIA/Privacy Service Branch (T-5 F52), U.S. Nuclear Regulatory Affairs, NEOB-10202, (3150-0166), 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.

NRC FORM 541 U.S. NUCLEAR REGULATORY COMMISSION						N.		2. MANIFEST NUMBER								
(7-2007)						PACE ES	NUMBER OF NET WASTE NET WASTE SPECIAL NUCLEAR I					L NUCLEAR MATERIAL (grams)				
					DISPOSAL CONTAINER	s (m ³)	(kg)	U-233	U-235	Pu	TOTAL	3				
UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST						3	Culle	345	A.J.	10.1-	6 600 Z	1-1-4-2	PAGE OF	PAGE(S)		
									A	CTIVITY (MBq)			SOURCE	4. SHIPPER NAME		
	CONT	AINER AND	WASTE DE	SCRIPTION			ALI	NUCLIDES	TRITIUM	C-14	Tc-99	I-129	(kg)	ODU		
Additional Nuclear Regulatory Commission (NRC) Requirements for Control, Transfer and Disposal of Rdioactive Waste						268	759	NE	1.369	NAME AND		0027000029	SHIPPER I.D. NUMBER			
	DISP	OSAL CONT	AINER DES	CRIPTION						WASTE DESCRI	IPTION FOR EA	CH WASTE TY	PE IN CONTAINER	16.		
5.	6.	7.	8.	9.	10. SUR	FACE MINATION		PHYSICAL DESCRIPTION 14. CHEMICAL DESCRIPTION 15. RADIOLOGICAL DESCRIPTION						ICAL DESCRIPTION	WASTE	
CONTAINER IDENTIFICATION	CONTAINER DESCRIP-		WASTE AND	SURFACE RADIATION LEVEL		100cm ²	11. WASTE	12. APPROXIMATE	13. SORBENT SOLIDIFICATION.			WEIGHT			CATION AS-Class / Stable AU-Class /	
NUMBER/ GENERATOR ID NUMBER(S)	(See Note 1)	(m ³)	CONTAINER WEIGHT (kg)	(µSv/hr)	ALPHA	BETA- GAMMA	DESCRIP- TOR (See Note 2)	WASTE VOLUME(S) IN CONTAINER	STABILIZATION, MEDIA (See Note 3)		AL FORM NG AGENT	CHELATING AGENT IF > 0.1%	CONTAINER TOTAL; O	LIDES AND ACTIVITY (MBq) AND R CONTAINER TOTAL ACTIVITY NUCLIDE PERCENT	Unstable B-Class B C-Class C	
													P6210=1.034	7		
0114-2	3	0.02	## D. C.	0.005	4227			DIPZPI	100	Acre/ 1	IF	- A	C=137=0444	NA		
		0.02 55 0.005 473E 416E	-1.60	Z8.	8 11-41		/			236 = 0.037 [a cocos6 Ky]						
					AND THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED I								Pez-B-C-L			
									- CALL STATE OF THE STATE OF TH				PLINE = 015 6 This = 0074 [sse likg1		
													Fazzo = 0.0111 Bar33 = 0.189 Clab = 3811			
													Euls# = 0 10 37			
					N I III.							-	101AL=5 1941			
					The second secon					i-Anti-	<i>t</i> .					
000-3	3	p.m.2	5.0	0.0002	4382	LIKE	28	002113	100	DELLAHITS/	\$CP	444	214 6 0747	/ .	NA	
														1		

the numerical code must be followed by "-OP."

- 1. Wooden Box or Crate
- 2. Metal Box
- 3. Plastic Drum or Pail
- 4. Metal Drum or Pail 5. Metal Tank or Liner
- 6. Concrete Tank or Liner

- 9. Demineralizer
- 10. Gas Cylinder
- 11. Bulk Unpackaged Waste
- 12. Unpackaged Components 13. High Integrity Container
- 19. Other. Describe in item 6,
- 7. Polyethylene Tank or Liner or additional page
- 8. Fiberglass Tank or Liner

- 20. Charcoal
- 21. Incinerator Ash
- 22. Soil 23. Gas
- 24. Oil
- 25. Aqueous Liquid
- 26. Filter Media
- - 27. Mechanical Filter
- 29. Demolition Rubble
- 30. Cation lon-exchange Media 39. Compactible Trash
- 31. Anion Ion-exchange Media
- 32. Mixed Bed Ion-exchange Media 41. Animal Carcass
- 33. Contaminated Equipment 34. Organic Liquid (except oil)
- 35. Glassware or Labware 36. Sealed Source/Device
- 28. EPA or State Hazardous 37. Paint or Plating

- 38. Evaporator Bottoms/Sludges/Concentrates
- 40. Noncompactible Trash
- 42. Biological Material (except animal carcass)
- 43. Activated Material
- 59. Other, Describe in Item 11, or additional page

Sorption

63. Hi Dri

Superfine

- 60. Speedi Dri 64. Safe T Sorb 61. Celetom 62. Floor Dry/
 - 65. Safe N Dri 66. Florco
 - 67. Florco X
 - 68. Solid A Sorb 73. Diceperl HP500

69. Chemsil 30

70. Chemsil 50 75. Petroset II 71. Chemsil 3030 76. Aquaset 72. Dicaperi HP200 77. Aquaset II

74. Petroset

89. Other.

page

- Describe in item 13, or additional
- 90. Cement 91. Concrete
 - (encapsulation) 92. Bitumen 93. Vinyl Chloride

Solidification

- 99. Other. Describe
 - in item 13, or additional page 100. None Required

94. Vinyl Ester Styrene

NRC FORM 541A

UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST

CONTAINER AND WASTE DESCRIPTION (CONTINUATION)

U.S. NUCLEAR REGULATORY COMMISSION

2. MANIFEST NUMBER

28982

SE OF PAGE(S)

DISPOSAL CONTAINER DESCRIPTION WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER SURFACE PHYSICAL DESCRIPTION CHEMICAL DESCRIPTION RADIOLOGICAL DESCRIPTION CLASSIFI CONTAMINATION CATION AS-Class A Stable AU-Class A SURFACE 13. SORBENT CONTAINER CONTAINER WASTE RADIATION MBa/100cm² WEIGHT DESCRIP-WASTE **IDENTIFICATION** VOLUME AND **APPROXIMATE** SOLIDIFICATION LEVEL. 96 INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND NUMBER CONTAINER DESCRIP WASTE STABILIZATION. CHEMICAL FORM/ CONTAINER TOTAL, OR CONTAINER TOTAL ACTIVITY
AND RADIONUCLIDE PERCENT TOR CHELATING GENERATOR Unstable WEIGHT BETA-(µSv/hr) VOLUME(S) IN MEDIA CHELATING AGENT AI PHA ID NUMBER(S) (See Note 1) (kg) AGENT B-Class B GAMMA CONTAINER (See Note 2) C-Class C H (mSv/hr) IF > 0.1% (See Note 3) Th 229= 2013/35 [64 76 E-116] 25 00012 435 44E 28 012m3 100 ACID/NP ODU-4 3 012 TA 232 - 0 102 ED 025 101] XX 4236 = 6 000185 [1 1 E-8 kg] POZIU=000444 Pozen = 08325 Ba133=0037: P. 242:010296/U 0002917] C14 1367 P6208 - 000/85 2/36=185 TITAL - 41 Cuicas

Estimated burden per response to comply with this information collection request: 45 minutes. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level waste. 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 Deak Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0164), 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. APPROVED BY OMB: NO. 3150-0164 EXPIRES: 07/31/2010 5. SHIPPER - NAME AND FACILITY SHIPPER I.D. NUMBER NRC FORM 540 U.S. NUCLEAR REGULATORY COMMISSION 7. NRC FORM 540 AND 540A PAGE 1 OF PAGE(S) MANIFEST NUMBER The Monte of the Control of The (Use this number on all continuation pages) (7-2007) NRC FORM 541 AND 541A PAGE(S) 4 ret Windy to Blance UNIFORM LOW-LEVEL RADIOACTIVE COLLECTOR NRC FORM 542 AND 542A PAGE(S) North 1 KINA LINEY PAGE(S) **WASTE MANIFEST** ADDITIONAL INFORMATION **PROCESSOR** GENERATOR TYPE USER PERMIT NUMBER SHIPMENT NUMBER SHIPPING PAPER 9. CONSIGNEE - Name and Facility Address (Specify) A 1. EMERGENCY TELEPHONE NUMBER (Include Area Code) CHERTY SELITION ME SINGKELL TELEPHONE NUMBER (Include Area Code) TELEPHONE NUMBER (Include Area Code) CONTACT

			(2-7) (-3 3 4				1-122			
					ging waste receipt	DATE				
	75 54 5	- reek Full	SHIPPING DATE							
-3	DHE	Getge, Till 378	Su 5-28-08				rked, and labeled and ar			
	CONTACT	ha Mechan	TELEPHONE NUMBER (Include Area Code)	certifies that the materials are classified, package	on for transportation and					
	SIGNATURE - A	uthorized carrier asknowledging waste rec		AUTHORIZED SIGNATURE	TITLE		DATE			
	-4		- 6- 8							
12. DOT LABEL "RADIOACTIVE"	13. TRANSPORT INDEX	14. PHYSICAL AND CHEMICAL FORM	15. INDIVIDUAL RADIONUCLIDES	TOTAL PACKAGE	LSAVSCO CLASS	18. TOTAL WEIGHT OR VOLUME (Use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE			
2,12	127		C136,	113 001:5144	L5.11	L 13-41	B1-4-1			
	K-1-		terre their in	25 , 0 214 115 415	L=3,4 W	21.27.0	004-1			
			1123 - 11-51							
	WA	1 10	1123	0.200 481		دددا	42-1			
				-	1		ł			
The state of the s	DOT LABEL "RADIOACTIVE"	CONTACT SIGNATURE - A TRANSPORT INDEX	CONTACT SIGNATURE - Authorized carrier acknowledging waste rec 12. DOT LABEL TRANSPORT PHYSICAL AND CHEMICAL FORM	6. CARRIER - Name and Address EPA LD. NUMBER SHIPPING DATE CONTACT TELEPHONE NUMBER (Include Area Code) SIGNATURE - Authorized carrier seknowledging waste receipt DATE 12. DOT LABEL RANSPORT PHYSICAL AND CHEMICAL FORM TRANSPORT CHEMICAL FORM RADIONUCLIDES	6. CARRIER - Name and Address EPAID. NUMBER SIGNATURE - Authorized consignee acknowled TELEPHONE NUMBER (Include Area Code) SIGNATURE - Authorized carrier seknowledging waste receipt DATE TRANSPORT TRANSPORT TRANSPORT TRANSPORT TRANSPORT CHEMICAL FORM TOTAL PACKAGE ACTIVITY IN SI UNITS ACTIVI	EPA I.D. NUMBER SIGNATURE - Authorized consignee acknowledging waste receipt CONTACT TELEPHONE NUMBER (Include Area Code) SIGNATURE - Authorized carrier asknowledging waste receipt TOTAL PACKAGE TRADIONACTIVE TRANSPORT PHYSICAL AND CHEMICAL FORM TOTAL PACKAGE ACTIVITY IN SI UNITS SIGNATURE - Authorized consignee acknowledging waste receipt TOTAL PACKAGE ACTIVITY IN SI UNITS 17. 18. 19. 19. 19. 19. 19. 10. CERTIFICA This is to certify that the herein-named materials are roperly classified in proper condition for transportation according to the applicable requirements regulations. SIGNATURE - Authorized consignee acknowledging waste receipt Total packaged, merked, and labe disposal as described in accordance with the applicable requirements regulations. AUTHORIZED SIGNATURE TOTAL PACKAGE ACTIVITY IN SI UNITS CLASS 17. 18. 19. 19. 19. 19. 19. 10. 11. 10. 11. 11. 11. 12. 12. 13. 14. 15. 15. 16. 17. 17. 17. 18. 18. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19	6. CARRIER - Name and Address EPA I.D. NUMBER SIGNATURE - Authorized consignee acknowledging waste receipt DATE OOTTACT TELEPHONE NUMBER (Include Area Code) SIGNATURE - Authorized carrier gaknowledging waste receipt DATE TOTAL PECKAGE RADIOACTIVE TRANSPORT INDEX TRANSPORT PHYSICAL AND CHEMICAL FORM TOTAL PECKAGE RADIONUCLIDES SIGNATURE - Authorized consignee acknowledging waste receipt DATE DATE SIGNATURE - Authorized consignee acknowledging waste receipt DATE TOTAL PECKAGE LSA/SCO (Use appropriate units)			

APPROVED BY OMB: NO. 3150-0166 EXPIRES: 07/31/2010

Estimated burden per response to comply with this information collection request: 3.3 hours. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level waste. Send comments regarding burden estimate to the Records and FOIA/Privacy Service Branch (T-5 F52), U.S. Nuclear Regulatory Affairs, NEOB-10202, (3150-0166), 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.

IRC FORM 541 U.S. NUCLEAR REGULATORY COMMISSION					1. MANIFEST TOTALS							2. MANIFEST NUMBER				
(7-2007)							PACKAGES DISPOSAL CONTAINER	NET WASTE	NET WASTE WEIGHT		SPECIAL NUC	CLEAR MATERIAL	L (grams)	6-10-10		
					CONTAINER	s (m ³)	(kg)	U-233	U-235	Pu	TOTAL	3				
UNIFORM LOW-LEVEL RADIOACTIVE												5. P		PAGE OF PAGE(S)		
										CTIVITY (MBq)		1	SOURCE	4. SHIPPER NAME		
	CON	TAINER AND	WASTE DE	SCRIPTION			ALI	NUCLIDES	TRITIUM	C-14	Tc-99	I-129	(kg)	COU		
Additional Nuclear Regulatory Commission (NRC) Requirements for Control, Transfer and Disposal of Rdioactive Waste						0.02	51045	C ADUSC	0.00255	NP	NE	0 5004	SHIPPER I.D. NUMBER			
	DISF	OSAL CONT	TAINER DES	CRIPTION						WASTE DESCR	IPTION FOR EAC	CH WASTE T	YPE IN CONTAINER		16.	
5.	6.	7.	8.	9.	10. SUI	RFACE		PHYSICAL DESCR		14. CHE	MICAL DESCRIPTION		15. RADIOLO	GICAL DESCRIPTION	WASTE CLASSIFI-	
CONTAINER	CONTAINER DESCRIP-	VOLUME	WASTE. AND	SURFACE		/100cm ²	11. WASTE	12.	13. SORBENT		WEIGHT			CATION AS-Class A Stable		
NUMBER/ GENERATOR ID NUMBER(S)	TION (See Note 1)	(m³)	CONTAINER WEIGHT (kg)	LEVEL (µSv/hr) (mSv/hr)	ALPHA	BETA- GAMMA	DESCRIP- TOR (See Note 2)	APPROXIMATE WASTE VOLUME(S) IN CONTAINER	SOLIDIFICATION, STABILIZATION, MEDIA (See Note 3)		AL FORM NG AGENT	CHELATING AGENT IF > 0.1%	AND RADIONUCLIDE PERCENT		Stable AU-Class / Unstable B-Class B C-Class C	
Bux-1	19	2/13	4.8	o occ	-33e	-140	Plactic	0.1341	10 276	DI DEE/	MF	XI A	C136 = C106 = 7 C166 = D10 = 37 C10 = C10 = C10	H3 = O CLOS G TOTAL = A NOSI	Аи	
cou-I	4	0.02	5.2	S000.	43.3c	1.62	3 ግ	3020	Teles	c. 8 1. Je s /	Po p ⁻²	~11		4 [1 2486-12 4]	AL	
++-+						100 mm							UL3820001	165 [0 0000 5 4] 4 [0.000 6 4] 1		
													TOTAL=ONLY	1/35		
44-1	3	L. 11 2	12.4	12112	4336	s-1.4-27	35	02m ³	1	-11004/1	×	ЮA	1/238 - C	51 [c. 6063714]]	44	
														:		
NOTE 1: Container Des waste requiring dispose the countries of each of the countries of the				OTE 2: Weste D		e. (Choose up		predominate by vol	ume.)	NOTE 3: F	or solidification med	lia that meet disp	posal site structural stability requirent	nents, the numerical code must be followed be identified in item 13. Code 100=NONE REQU	by "-8. UIREC	

- 1. Wooden Box or Crate
- 2. Metal Box
- 3. Plastic Drum or Pail
- 4. Metal Drum or Pail
- 5. Metal Tank or Liner
- 6. Concrete Tank or Liner
- 7. Polyethylene Tank or Liner 8. Fiberglass Tank or Liner
- 9. Demineralizer
- 22. Soil 10. Gas Cylinder
- 11. Bulk Unpackaged Waste
- 12. Unpackaged Components
- 13. High Integrity Container
- 19. Other. Describe in item 6,
- or additional page

- 21. Incinerator Ash
- 23. Gas 24. Oil
- 25. Aqueous Liquid
- 26. Filter Media 27. Mechanical Filter

- 30. Cation Ion-exchange Media
- 31. Anion Ion-exchange Media 32. Mixed Bed Ion-exchange Media 41. Animal Carcass
- 33. Contaminated Equipment 34. Organic Liquid (except oil)
 - 35. Glassware or Labware 36. Sealed Source/Device
- 28. EPA or State Hazardous 37. Paint or Plating
- Evaporator Bottoms/Sludges/Concentrates
- 39. Compactible Trash
- 40. Noncompactible Trash
- 42. Biological Material (except animal carcass)
- 43. Activated Material
- 59. Other. Describe in item 11, or additional page

Sorption

63. Hi Dri

- 60. Speedi Dri 64. Safe T Sorb 61. Celetom 65. Safe N Dri 62. Floor Dry/ 66. Florco
 - Superfine
 - 67. Florco X 68. Solid A Sorb 73. Dicaperl HP500
- 70. Chemsil 50 75. Petroset II 71. Chemsil 3030 76. Aquasel 72. Dicapert HP200 77. Aquaset II

69. Chemsil 30

89. Other.

74. Petroset

Describe in item 13, or additional

page

90. Cement 91. Concrete 92. Bitumen

Solidification

- (encapsulation) 93. Vinyl Chloride
- 99. Other. Describe in item 13, or additional page 100. None Required

94. Vinyl Ester Styrene

PRINTED ON RECYCLED PAPER



P.O. Box 817 — Kingston, TN 37763 — (865) 220-8501

December 18, 2008

Ms. Sherri Vann Old Dominion University Radiation Safety Office Hughes Hall, Rm. #2061 4807 Hampton Blvd. Norfolk, VA 23529

Dear Ms. Sherri Vann:

This letter certifies that Duratek, Inc. (Energy Solutions) has processed the materials from your shipment as indicated below:

Please reference the following table for detailed disposal information.

Manifest	Shipment	Container	Incineration
Number	Date	Number	Date
52808	5/28/2008	Box-1	07/18/08

Note: Any ash from the incineration process becomes Duratek's (Energy Solutions) waste.

If you have any questions please feel free to contact me at (865) 220-8501.

Sincerely

Rene Guy

Administrative Manager

Cc: File



11-Nov-08

OLD DOMINION UNIVERSITY
SHERI VANN
ENVIRONMENTAL SAFETY
1070 WEST 47TH STREET
NORFOLKD VA

REF: MANIFEST NUMBER:

23508

003345614JJK

SHIPMENT NUMBER:

BIO-350

SHIPMENT DATE:

11/04/2008

ON THE ABOVE DATE, YOUR WASTE MATERIAL WAS RECEIVED AT OUR FACILITY.

THIS MATERIAL WILL BE DISPOSED OF IN FULL IN ACCORDANCE WITH ALL APPLICABLE FEDERAL, STATE AND LOCAL LAWS AND REGULATIONS.

THIS ENTIRE PROCESS IS GENERALLY COMPLETED WITHIN A 30-DAY PERIOD FROM THE DATE OF THE SHIPMENT.

1	UNIF	nerator's Name and Mailing Address	1.4		gency Response			Tracking Nu	Approved.	JMB No. 2	
		. 1	, 1	ı							
		rator's Phone: Insporter 1 Company Name					U.S. EPA ID	Number			
	7. Tra	insporter 2 Company Name					U.S. EPA ID I	Number			
	8. Des	signated Facility Name and Site Address	=				U.S. EPA ID I	Number			
	Facilit	ty's Phone:					Lall				
	9a. HM	9b. U.S. DOT Description (including Proper Shippi and Packing Group (if any))	ng Name, Hazard Class, ID Number,	****	10. Contain	ers Type	11. Total Quantity	12. Unit Wt./Vol.	13. V	/aste Codes	
LATOR -		1.	- 9 ;						-		
- GENERATOR		2.				. 901	Nosella.		To an annual section of the section		
		3.									
		4.							deconstruction of the control of the	enevistantee detrocerations	
		pecial Handling Instructions and Additional Informatio									***************************************
	15. (GENERATOR'S/OFFEROR'S CERTIFICATION: I he marked and labeled/placarded, and are in all respects exporter, I certify that the contents of this consignment certify that the waste minimization statement identificator's/Offeror's Printed/Typed Name	in proper condition for transport acc at conform to the terms of the attache	cording to applicable inte ed EPA Acknowledgment	national and nation of Consent.	nal governme	ental regulations.	. If export ship		m the Prima	
<u></u>	16. Int	ternational Shipments Import to U.S.	1.	Export from U.S.	Port of ent	- dovit-	1 and				- 12
INT	Trans	porter signature (for exports only):		a export from 0.5.	Date leavin						
TRANSPORTER	Transp	ansporter Acknowledgment of Receipt of Materials porter 1 Printed/Typed Name		Signature	_<<;	×_			Monti	122	Year
TRAN	Transp	porter 2 Printed/Typed Name		Signature					Mont	h Day	Year
1		screpancy			ŧ						
	18a. D	Discrepancy Indication Space Quantity	Туре		Residue	Number:	Partial Rej	ection		Trull Rejec	tion
ACILITY	18b. A	dternate Facility (or Generator)			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		U.S. EPA ID N	Number			
DESIGNATED FACILITY		y's Phone: iignature of Alternate Facility (or Generator)							Mon	th Day	Year
DESIG	19. Ha	azardous Waste Report Management Method Codes 2.	(i.e., codes for hazardous waste trea	atment, disposal, and rec	rcling systems)		4.				
		esignated Facility Owner or Operator: Certification of d/Typed Name	receipt of hazardous materials cover	ed by the manifest exce Signature	t as noted in Item	18a		and the second	Mont	h Day	Year
-	C.	9700 22 Pay 2 05) Provious aditions are ab	1-4-	N .		200					

P.O. Box 817 — Kingston, TN 37763 — (865) 220-8501

November 03, 2008

Ms. Sherri Vann Old Dominion University Radiation Safety Office Hughes Hall, Rm. #2061 4807 Hampton Blvd. Norfolk, VA 23529

Dear Ms. Sherri Vann,

As required by 10 CFR Part 20 (Appendix G), this letter is notification that Energy Solutions (formerly Duratek) has received the shipment recently picked up at your facility on **October 22, 2008.** Attached you will find a copy of your NRC Form 540, the only change from the original is in Item No. 9 "signature" which identifies that Energy Solutions is acknowledging receipt of waste from your facility.

Please keep this with your original, as well as future disposal certifications.

If you have any questions please feel free to contact me at (865) 220-8501.

Sincerely

Administrative Manager

Cc: File GTS-08-32

EXPIRES: 07/31/2010 Estimates	nated burden per response to con usie to the Records and FOWPriv agament and Budget, Washington	nply with this information vacy Services Branch (T- n, DC 20503. If a means			manifest is required Weshington, DC 2 s not display a cum							
NRC FORM 540 U.S. (7-2007)	NUCLEAR REGULATO	RY COMMISSION		AMEAND FACILITY	NIVERSIT		HIPPER LD. NUMBER	NRC FORM 540 AN		PAGE(S)	a. MANIFEST NUMBE (Use this number on	R all continuation pages
UNIFORM LOW-LE	VEL RADIOACTIVI	 E		W, 4777 6			COLLECTOR	NRC FORM 542 AN		PAGE(S)		1.00 P
	MANIFEST		NORFO	K VA 23	508		PROCESSOR	ADDITIONAL INFO	RMATION	PAGE(S)	1022	<i>0</i> 88
	G PAPER		USER PERMIT	WH8ER	SHIPMENT NUM	BER	GENERATOR TYPE (Specify)	9. CONSIGNEE - Nam	pe and Facility Address		CONTACT	
1. EMERGENCY TELEPHONE NUMBER (Include Are)			CONTACT				ELEPHONE NUMBER	156D D	EAR CREEK	c Rd	TELEPHONE NUMBER	(Include Area Code)
(865) 220 - 8 ORGANIZATION	520			es ISANN		8	ndude Aree Code) 757 V 922 - 4495		S TN 37		(865)48	1-02ZZ
BIONOMICS	, INC.		6. CARRIER - N	lame and Address			161/683-4495 PA LD. NUMBER		red consigned actinovered		DATE	
2. IS THIS AN "EXCLUSIVE USE" SHIPMENT?	1. TOTAL NUMBER OF PACKAGES IDENTIFIED		D10N0.	MILS, INC SEAR CRE	- M	12	1098216493	. D.	ω . ω ///		1012-1-	
▼ yes	ON THIS MANFEST	4	V550 A	SEAR CRE	6703X		HIPPING DATE	7084	429/148 V1	d. CERTIFICAT		food and Inhabat and
4. DOES EPA REGULATED YES	EPA MANIFEST NUMBER		CONTACT	DUS TH	3/830	1	ELEPHONE MUMBER	in proper condition for cartifies that the mater	iransportation according to late are classified package.	the applicable regular of marked, and labels	, described, packaged, mer flons of the Department of d and ere in proper conditi of 10 CFR Perts 20 and 61,	Transpitation This alson for transportation a
WASTE REQUIRING A X NO				V Mc Carm	11CK		10/22/D'R ELEPHONE MUMBER Include Area Code) SASJ 220-ESP/	disposal as described regulations.	in accordigace with the sop	licable requirements o	of 10 CFR Perts 20 and 61,	or administrate
THIS SHIPMENT? Wes. provide Manifest Number	NB		SIGNATURE - A		dging waste receipt	O	ALE ,	AUTHORIZED SIGN	and all	THE RSO	^	DATE
			4	200			10/25/08	100	71 Venn			10/22/C
 U.S. DEPARTMENT OF TRANSPORTA (Including proper shipping name, hazard of and any additional inforst 	TION DESCRIPTION class, UN ID number, ion)	12. DOT LABEL "RADIOACTIVE"	TRANSPORT INDEX	PRIVICAL POLICAL	AND ORM		15, INDIVIDUAL RADIONUCUDES		16. TOTAL PACKAGE ACTIVITY IN SI UNITS	LSA/SCO CLÁSS	18. TOTAL WEIGHT OR VOLUME (Use appropriate units)	NUMBER OF PACKAGE
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NRC FORM 540 (7-2007)				. р	RINTED ON RECY	CLED PAPER				CONCIONE	E ORIGINAL COP	V

Ple	ase pri	nt or type. (Form desig	ned for use on el	ite (12-pitch) typew	riter.)							Approved. Ol	MB No. 2	050-0039
1		FORM HAZARDOUS ASTE MANIFEST	1. Generator ID Nu	umber		2. Page 1 of	3. Emer	gency Response	Phone	4. Manifest	Tracking Nur	nber	JJ	K
	5. Ger	nerator's Name and Mailin	g Address				Generato	or's Site Address	(if different tha	n mailing addre	ss)			
	Gener	rator's Phone:				ı								
	6. Trai	Insporter 1 Company Name	е							U.S. EPA ID	Number			
	7 Teo.	Insporter 2 Company Nami								U.S. EPA ID	N. mb az			
	7. Irai	insporter 2 Company Nami	е							U.S. EPAID	vumber			
	8. Des	signated Facility Name and	Site Address							U.S. EPA ID	Number			
		ty's Phone:	on /including Proper	Chinning Name Have	and Class ID Number			10. Contair			T			
	9a. HM	9b. U.S. DOT Description and Packing Group (if a	ny))	Snipping Name, Haza	ard Class, ID Number,		ŀ	No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Wa	ste Codes	
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	14 Cr	pecial Handling Instruction	and Additional Inf	o-mation									ary manage	
	14. Sp	pecial Handling Instructions	s and Additional init	omation										
	r	GENERATOR'S/OFFEROI marked and labeled/placar	ded, and are in all r	espects in proper con-	dition for transport acc	cording to appli	cable inter	national and nati						
	E	Exporter, I certify that the c I certify that the waste mini	ontents of this cons mization statement	signment conform to the identified in 40 CFR 2	ne terms of the attache 262.27(a) (if I am a larg	ed EPA Acknow ge quantity gen	rledgment nerator) or	of Consent. (b) (if I am a sma	II quantity gene	erator) is true.				
		rator's/Offeror's Printed/Typ					nature			·····		Month	Day	Year
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NT.	ļ	ternational Shipments	Import to	U.S.	L	Export from U	U.S.	Port of en						
TRANSPORTER INT'L	-	sporter signature (for expor ansporter Acknowledgment		ials				Date leavi	ng 0.3					
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RA	Transp	porter 2 Frimeu/Typeu Nar	ne			 	nature					Month	Day 	Year
<u></u>	18. Dis	screpancy												
	18a. D	Discrepancy Indication Spa	ce Quar	ntity	Туре			Residue		Partial Re	ection		Full Reject	tion
				•	•									
<u>-</u>	18b. A	Alternate Facility (or General	ator)				Ma	nifest Reference	Number:	U.S. EPA ID I	Number			
딩		, (,											
FA		y's Phone:												
DESIGNATED FACILITY	18c. S	ignature of Alternate Facili	ty (or Generator)									Month	Day I	Year
IGN	19. Ha	azardous Waste Report Ma	nagement Method	Codes (i.e., codes for	hazardous waste trea	itment, disposa	il, and recy	vcling systems)						\vdash
DES	1.	and the state of t		2.		3.	.,	,		4.				
1														
		esignated Facility Owner or	r Operator: Certifica	ation of receipt of haza	rdous materials cover		ifest excep inature	ot as noted in Item	n 18a			Month	Day	Year
Ш	Luured	d/Typed Name				- Sig	, 10.010					Mondi	Lay	, , , ,

DSSI • M&EC • Perma-Fix of Florida										
Generator Name	Old Dominion University	Generator USEPA ID No.	VAD041448465							
Generator Address	1070 West 47th Street	City/ST/Zip Norfolk	, VA 23508							
State Manifest No.	N/A	Manifest Doc. No.	003345614JJK							

Instructions

- 1 In Column 1 identify all USEPA hazardous waste codes that apply to this waste shipment.
- 2 In Column 2, choose the appropriate treatability group: Non-Wastewater (NWW) or Wastewater (WW).
- 3 In Column 3, enter the appropriate Subcategory, if applicable, and also enter "Contaminated Soil" or "Debris" if the waste can be treated using one of the alternative treatment technologies provided by 268.49(c) (soil) or 268.45 (debris).
- 4 In Column 4, place an "x" in the block that corresponds to the appropriate LDR management category described at the bottom of this form.
- 5 In Column 5, enter the Reference Number(s) from the LDR-UHC Constituent Table for any constituents subject to treatment in your waste stream

Go to LDR-UHC Contituent Table

Manifest Line	1. USEPA HAZARDOUS WASTE CODES	2.	NWW or	3. SUBCATEGORY	4.	 v MUS	эт тн		one)	BE !	MAN	AGED (Check	s	soil O	nly	5. REFERENCE NUMBER(s) of Hazardous Constituents contained in the waste.
11,A		х	NWW		x		or contract					Does			is subject to	
II.A	D001, F003, F)05		ww	High TOC	Ĺ							Does Not			complies with	
11.B			NWW									Does			is subject to	
11.0			ww									Does Not			complies with	
11.C			NWW			Name of Street Street,					Shortson	Does			is subject to	
17.0			ww									Does Not			complies with	
11.D			NWW					ĺ				Does			is subject to	
11.0			ww									Does Not			complies with	

I hereby certify that all information submitted on this and all associated documents is complete and accurate to the best of my knowledge and information.

		j
SHERI	VANN RSO	10/22/08
Generator Name	Title	Date /

- A. THIS RESTRICTED WASTE REQUIRES TREATMENT TO THE APPLICABLE STANDARD. This waste must be treated to the applicable performance based treatment standard set forth in 40CFR Part 268 Subpart C, 268.32, Subpart D, 268.40 or RCRA Section 3004(d) prior to land disposal.
- B. THIS HAZARDOUS DEBRIS MAY BE TREATED USING THE DEBRIS ALTERNATIVE TREATMENT STANDARDS OF 40 CFR 268.45. I certify under penalty of law that I personally have examined and am familiar with the waste and that the statement above is true and that thiswaste meets the definition of debris and can be treated using the alternate methods specified in 40 CFR 268.45. I am aware that there are significant penalties for submitting a false certification including possibility of fine or imprisonment.
- C. THIS RESTRICTED WASTE HAS BEEN TREATED TO THE APPLICABLE TREATMENT STANDARD(S). I certify under penalty of law that I personnaly have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR 268 Subpart D. I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.
- D. THIS RESTRICTED DEBRIS HAS BEEN TREATED IN ACCORDANCE WITH 40 CFR 268.45. I certify under penalty of law that the debris has been treated in accordance with the requirements of 40 CFR 268.45. 1 am aware that there are significant penalties for making false certification, including the possibility of a fine and imprisonment.
- E. THIS LAB PACK DOES NOT CONTAIN ANY WASTES IDENTIFIED AT APPENDIX IV TO PART 268. I certify under penalty of law that I personally have examined and am familiar with the waste and that the statement above is true and that this lab pack will be sent to a combustion facility in compliance with the alternative treatment standards for lab packs at 40 CFR 268.42(c). I am aware that there are significant penalties for submitting a false certification including possibility of fine or imprisonment.
- F. <u>THIS RESTRICTED WASTE HAS BEEN TREATED TO REMOVE THE HAZARDOUS CHARACTERISTIC</u>. I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.
- G. THIS RESTRICTED WASTE HAS BEEN TREATED TO REMOVE THE HAZARDOUS CHARACTERISTIC AND BEEN TREATED FOR UNDERLYING HAZARDOUS CONSTITUENTS. I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic, and that underlying hazardous constituents, as defined in 268.48 Universal Treatment Standards. I am aware that there are significant, penalties for submitting false certification, including the possibility of fine and imprisonment.
- H. THIS RESTRICTED WASTE IS SUBJECT TO AN EXEMPTION FROM LAND DISPOSAL. (Please include the date the waste is subject to the prohibitions in Column 5) This waste is subject to an exemption from a prohibition on the type of land disposal method utilized for the waste (such as, but not limited to, a case-by-case extension under 40 CFR Part 268.5, or an exemption under 40 CFR 268.6.
- S. THIS CONTAMINATED SOIL (DOES / DOES NOT) CONTAIN LISTED HAZARDOUS WASTE AND (DOES / DOES NOT) EXHIBIT A CHARACTERISTIC OF HAZARDOUS WASTE AND (IS SUBJECT TO / COMPLIES WITH) THE SOIL TREATMENT STANDARDS AS PROVIDED BY 268.49(c) OR THE UNIVERSAL TREATMENT STANDARDS. I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and believe that it his been maintained and operated properly so as to comply with treatment standards specified in 40 CFR 268.49 without impermissible dilution of the prohibited wastes. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

APPROVED BY OMB: NO. 3150-0164

EXPIRES: 07/31/2010

Expires: 07/31/2010

Expires: 07/31/2010

Expires: 07/31/2010

Expires: 07/31/2010

Estimated burden per response to comply with this information collection request: 45 minutes. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level waste. Send comments regarding burden estimate to the Records and FOL/Privacy Services Branch (T-5 F52), U.S. Nuclear Regulatory Affairs, NEOB-10202, (3150-0164), 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.

(7-2007)	S. NUCLEAR REGULATOR		5. SHIPPER - NAME	AND FACILITY			I.D. NUMBER	7. NRC FORM 540 AI NRC FORM 541 AI NRC FORM 542 AI	ND 541A	PAGE(S) PAGE(S) PAGE(S)	8. MANIFEST NUMBE (Use this number on	R all continuation pages)			
WASTE	MANIFEST					PR	ROCESSOR	ADDITIONAL INFO	RMATION	PAGE(S)					
SHIPPI 1. EMERGENCY TELEPHONE NUMBER (Include An	NG PAPER ea Code)		USER PERMIT NUM	BER	SHIPMENT NUMBER	GE (St	ENERATOR TYPE Decify)	9. CONSIGNEE - Nan	ne and Facility Address		CONTACT				
ORGANIZATION			CONTACT			TELEPHO (Include A	NE NUMBER rea Code)	1	100	7	TELEPHONE NUMBER	(Include Area Code)			
ORGANIZATION			6. CARRIER - Name	and Address		EPA I.D. N	IUMBER	SIGNATURE - Authori	zed consignee acknowledgi	ng waste receipt	DATE				
2. IS THIS AN "EXCLUSIVE USE" SHIPMENT? YES	3. TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST				0 12	SHIPPING	DATE		10	D. CERTIFICAT	ON				
NO .						1 -	- 1	This is to certify that the herein-named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation This also							
4. DOES EPA REGULATED WASTE REQUIRING A MANIFEST ACCOMPANY NO		CONTACT	. =		TELEPHO (Include A	NE NUMBER rea Code)	in proper condition for certifies that the mater disposal as described regulations.	for transportation according to the applicable regulat terials are classified, packaged, marked, and labeled and in accordance with the applicable requirements of		ions of the Department of I d and are in proper condition 10 CFR Parts 20 and 61,	ransprtation This also on for transportation and or equivalent state				
THIS SHIPMENT? If "Yes," provide Manifest Number		SIGNATURE - Autho	rized carrier acknowle	edging waste receipt	DATE		AUTHORIZED SIGNA	TURE TITLE		1	DATE				
U.S. DEPARTMENT OF TRANSPORT (Including proper shipping name, hazard and any additional inforations)	12. DOT LABEL "RADIOACTIVE"	13. TRANSPORT INDEX	14. PHYSICAL AND CHEMICAL FORM		15. INDIVIDUAL RADIONUCLIDES		TOTAL PACKAGE ACTIVITY IN SI UNITS		17. 18. TOTAL WEIGHT LSA/SCO OR VOLUME CLASS (Use appropriate units		19. IDENTIFICATION NUMBER OF PACKAGE				
the Matter Street	10061 41	- A							7.27						
郑端 龙水	4 1			**											
FOR CONSIGNEE USE ONLY															

APPROVED BY OMB: NO. 3150-0166 EXPIRES: 07/31/2010

Estimated burden per response to comply with this information collection request: 3.3 hours. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level waste. Send comments regarding burden estimate to the Records and FOIA/Privacy Service 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, (3150-0166), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently vaild OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

NRC FORM 541							SION 1. MANIFEST TOTALS 2. MANIFEST N								
(7-2007)							PACKAGES DISPOSAL CONTAINER	NET WASTE VOLUME	NET WASTE WEIGHT		SPECIAL NUCL	EAR MATERIAL	(grams)	1	
							DISPOSAL CONTAINER	s (m ³)	(kg)	U-233	U-235	Pu	TOTAL	3	-
UN	IFORM	I OW-I	EVEL R	ADIOAC	TIVE									PAGE OF	PAGE(S)
			MANIFE		5 0 W Bes										
									A	CTIVITY (MBq)			SOURCE	4. SHIPPER NAME	
	CONTA	INER AND	WASTE DE	SCRIPTION			AL	L NUCLIDES	TRITIUM	C-14	Tc-99	I-129	(kg)		
Additional Nuc	lear Regulator	y Commissio Disposal of	n (NRC) Requ Rdioactive Wa	airements for Co	or Control, Transfer and							SHIPPER I.D. NUMBER	ĺ		
	DISPO	SAL CONT	AINER DES	CRIPTION	The state of the s	ter order open op 1868.			The second of th	WASTE DESCR	RIPTION FOR EAC	H WASTE T	YPE IN CONTAINER		16.
5.	6. 7		8.	9.	10. SURF	FACE MINATION		PHYSICAL DESCR	IPTION		MICAL DESCRIPTION			GICAL DESCRIPTION	WASTE CLASSIFI-
CONTAINER	CONTAINER		WASTE	SURFACE RADIATION	1	100cm ²	11. WASTE	12.	13. SORBENT			WEIGHT			CATION AS-Class A
IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	DESCRIP- TION (See Note 1)	VOLUME (m³)	AND CONTAINER WEIGHT (kg)	LEVEL (µSv/hr) (mSv/hr)	ALPHA	BETA- GAMMA	DESCRIP- TOR (See Note 2)	APPROXIMATE WASTE VOLUME(S) IN CONTAINER	SOLIDIFICATION, STABILIZATION, MEDIA (See Note 3)		CAL FORM/ ING AGENT	% CHELATING AGENT IF > 0.1%	CONTAINER TOTAL; (CLIDES AND ACTIVITY (MBq) AND OR CONTAINER TOTAL ACTIVITY ONUCLIDE PERCENT	Stable AU-Class A Unstable B-Class B C-Class C
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						(0)	All The second second	- A - E		NOTE 2:	Fer colidification modifi	that most diss	oeal site structural stability requirem	nents, the numerical code must be follow	wad by "-S "
NOTE 1: Container Description Codes. For containers/ waste requiring disposal in approved structural overpacks,										For all so	olidification media, the	endor (manufa	cturer) and brand name must also be	nents, the numerical code must be folloo lidentified in item 13. Code 100=NONE	REQUIRED.

umerical code must be followed by "-OP."

1. Wooden Box or Crate 9. Demineralizer

2. Metal Box

10. Gas Cylinder

3. Plastic Drum or Pail 4. Metal Drum or Pail

11. Bulk Unpackaged Waste 12. Unpackaged Components

5. Metal Tank or Liner 6. Concrete Tank or Liner

13. High Integrity Container 19. Other. Describe in item 6,

7. Polyethylene Tank or Liner

or additional page

8. Fiberglass Tank or Liner

20. Charcoal

21. Incinerator Ash

22. Soil

23. Gas

24. Oil

25. Aqueous Liquid

26. Filter Media 27. Mechanical Filter

28. EPA or State Hazardous 37. Paint or Plating

MANAGEMENT AND CONTRACTOR OF THE PROPERTY OF T

29. Demolition Rubble

30. Cation Ion-exchange Media

31. Anion ion-exchange Media

32. Mixed Bed Ion-exchange Media 41. Animal Carcass 33. Contaminated Equipment

34. Organic Liquid (except oil) 35. Glassware or Labware 36. Sealed Source/Device

43. Activated Material

or additional page

39. Compactible Trash 40. Noncompactible Trash

42. Biological Material (except animal carcass)

59. Other. Describe in item 11,

Solidification Sorption

94. Vinyl Ester Styrene 74. Petroset 89. Other. 90. Cement 60. Speedi Dri 64. Safe T Sorb 69. Chemsil 30 75. Petroset II Describe in 91. Concrete 99. Other. Describe 65. Safe N Dri 70. Chemsil 50 61. Celetom 66. Florco 71. Chemsil 3030 76. Aquaset item 13, or (encapsulation) in item 13, or 62. Floor Dry/ additional page 72. Dicaperl HP200 77. Aquaset II additional 92. Bitumen Superfine 67. Florco X 68. Solid A Sorb 73. Dicaperl HP500 63. Hi Dri 93. Vinyl Chloride 100. None Required

APPROVED BY OMB: NO. 3150-0166 EXPIRES: 07/31/2010

Estimated burden per response to comply with this information collection request: 3.3 hours. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level waste. Send comments regarding burden estimate to the Records and FOIA/Privacy Service Branch (T-5 F92), U.S. Nuclear Regulatory African Shington, DC 20555-0001, or by internet e-mail to infocollects@nrc.gov, and to the Desk Officer, or fofice of Information and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently vailed OMB control number, the NRC may not conduct or sponsor, and a person fice of information collection does not display a currently vailed OMB control number, the NRC may not conduct or sponsor, and a person fice of information collection does not display a currently vailed OMB control number, the NRC may not conduct or sponsor, and a person fice of information collection does not display a currently vailed OMB control number, the NRC may not conduct or sponsor, and a person fice of information collection does not display a currently vailed OMB control number, the NRC may not conduct or sponsor, and a person fice of information collection does not display a currently vailed OMB control number, the NRC may not conduct or sponsor, and the number of the NRC may not conduct or sponsor, and the number of the NRC may not conduct or sponsor, and the NRC may not conduct or sponsor, and the number of the NRC may not conduct or sponsor and the number of the NRC may not conduct or sponsor and the number of the NRC may not conduct or sponsor and the number of the NRC may not conduct or sponsor and the number of the NRC may not conduct or sponsor and the number of the NRC may not conduct or sponsor and the number of the NRC may not conduct or sponsor and the number of the NRC may not conduct or sponsor and the number of the NRC may not conduct or sponsor and the number of the NRC may not conduct or sponsor an

RC FORM 541			U.S. NUCI	LEAR REGUL	ATORY CO	MMISSION				1. MANIFES	T TOTALS			2. MANIFEST NUMBER	AND DESCRIPTION OF THE PARTY OF
2007)							NUMBER OF PACKAGES/ DISPOSAL CONTAINERS	NET WASTE VOLUME	NET WASTE WEIGHT		SPECIAL NU	CLEAR MATERIAL	(grams)	A	
							CONTAINERS	(m ³)	(kg)	U-233	U-235	Pu	TOTAL	3.	
UN				ADIOAC	TIVE			0,15				900		PAGE OF	PAGE(S)
		WASTE	MANIFE	EST			1	1.6.0		CTIVITY (MBq)	-		SOURCE	4. SHIPPER NAME	
	CONT	AINER AND	WASTE DE	SCRIPTION			ALL	NUCLIDES	TRITIUM	C-14	Tc-99	I-129	(kg)	1311	
Additional Nuc	clear Regulate	ory Commission	on (NRC) Requ	uirements for Co	ontrol, Transfe	r and	3.70	199	NE	11/19	NF	NI	AUT F	SHIPPER I.D. NUMBER	
			TAINER DES				-				4 1/4 14		YPE IN CONTAINER		16.
	6.	7.	8.	9.	10. SUR	FACE		PHYSICAL DESCR	IPTION		MICAL DESCRIPTION			OGICAL DESCRIPTION	WASTE CLASSIFI-
CONTAINER IDENTIFICATION	CONTAINER DESCRIP-	VOLUME	WASTE AND	SURFACE RADIATION LEVEL		100cm ²	WASTE	12. APPROXIMATE	13. SORBENT SOLIDIFICATION.			WEIGHT	INDERFOLIAL PADION	IUCLIDES AND ACTIVITY (MBq) AND	CATION
NUMBER/ GENERATOR ID NUMBER(S)	(See Note 1)	(m³)	CONTAINER WEIGHT (kg).	(µSv/hr)	ALPHA	BETA- GAMMA	DESCRIP- TOR (See Note 2)	WASTE VOLUME(S) IN CONTAINER	STABILIZATION, MEDIA (See Note 3)		AL FORM NG AGENT	CHELATING AGENT IF > 0.1%	CONTAINER TOTAL	; OR CONTAINER TOTAL ACTIVITY DIONUCLIDE PERCENT	Stable AU-Class A Unstable B-Class B C-Class C
OD11-4	4	.12	1.0	0002	-7	£1.6€	28	12 m	10.0	C FANC	1 2 1	ALM	CM - 1/1		
·															
OTE 1: Container Descraste requiring disposal in numerical code must	in approved at be followed by	tructural overp	acks,	OTE 2: Waste Do 0. Charcoal 1. Incinerator Ash	29.	s. (Choose up Demolition Rub Cation Ion-exch	ble	predominate by volume 38. Evaporator Bo 39. Compactible T	ottoms/Sludges/Concent	For all sol	idification media, th	dia that meet disp e vendor (manufa	rosal site structural stability requirecturer) and brand name must also	ements, the numerical code must be followe be identified in item 13. Code 100=NONE R Solidification	ed by "-S." EQUIRED.

1. Wooden Box or Crate

2. Metal Box

3. Plastic Drum or Pail

4. Metal Drum or Pail

6. Concrete Tank or Liner

5. Metal Tank or Liner

19. Other. Describe in Item 6, 7. Polyethylene Tank or Liner

9. Demineralizer 10. Gas Cylinder

22. Soil 23. Gas 11. Bulk Unpackaged Waste 24. Oil

12. Unpackaged Components 25. Aqueous Liquid 13. High integrity Container 26. Filter Media 27. Mechanical Filter

or additional page

31. Anion Ion-exchange Media

32. Mixed Bed Ion-exchange Media 41. Animal Carcass 33. Contaminated Equipment 34. Organic Liquid (except oil)

35. Glassware or Labware

36. Sealed Source/Device 28. EPA or State Hazardous 37. Paint or Plating

40. Noncompactible Trash

42. Biological Material (except animal carcass)

59. Other. Describe in item 11, or additional page

43. Activated Material

60. Speedi Dri 64. Safe T Sorb 61. Celetom 65. Safe N Drl 62. Floor Dry/ 66. Florco Superfine 67. Florco X

63. Hi Dri

69. Chemsil 30 70. Chemsil 50 71. Chemsil 3030 72. Dicaperl HP200 77. Aquaset II

68. Solid A Sorb 73. Dicaperl HP500

74. Petroset 75. Petroset II 76. Aquaset

89. Other. item 13, or additional

page

90. Cement Describe in 91. Concrete

94. Vinyl Ester Styrene (encapsulation) 92. Bitumen 93. Vinyl Chloride

99. Other. Describe in item 13, or additional page 100. None Required

APPROVED BY OMB: NO. 3150-0164

EXPIRES: 07/31/2010

Expires: 07/31/2010

Expires: 07/31/2010

Expires: 07/31/2010

Expires: 07/31/2010

Estimated burden per response to comply with this information collection request: 45 minutes. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level waste. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F52), U.S. Nuclear Regulatory Affairs, NEOB-10202, (3150-0164), 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. 5. SHIPPER - NAME AND FACILITY SHIPPER I.D. NUMBER NRC FORM 540 U.S. NUCLEAR REGULATORY COMMISSION 7. NRC FORM 540 AND 540A MANIFEST NUMBER PAGE(S) (Use this number on all continuation pages) (7-2007) NRC FORM 541 AND 541A PAGE(S) UNIFORM LOW-LEVEL RADIOACTIVE COLLECTOR NRC FORM 542 AND 542A PAGE(S) **WASTE MANIFEST** PAGE(S) ADDITIONAL INFORMATION **PROCESSOR** USER PERMIT NUMBER SHIPMENT NUMBER SHIPPING PAPER GENERATOR TYPE CONSIGNEE - Name and Facility Address (Specify) 1. EMERGENCY TELEPHONE NUMBER (Include Area Code) AIXITIE TELEPHONE NUMBER (Include Area Code) TELEPHONE NUMBER (Include Area Code) CONTACT ORGANIZATION - - - - -1 . 5 - 6 EPA I.D. NUMBER . CARRIER - Name and Address DATE SIGNATURE - Authorized consignee acknowledging waste receipt 2. IS THIS AN "EXCLUSIVE USE" SHIPMENT? TOTAL NUMBER OF PACKAGES IDENTIFIED 001241 SHIPPING DATE YES 10. CERTIFICATION ON THIS MANIFEST =====> This is to certify that the herein-named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation This also certifies that the materials are classified, packaged, marked, and labeled and are in proper condition for transportation and - -2. TELEPHONE NUMBER EPA MANIFEST NUMBER CONTACT DOES EPA REGULATED YES (Include Area Code) WASTE REQUIRING A disposal as described in accordance with the applicable requirements of 10 CFR Parts 20 and 61, or equivalent state NO MANIFEST ACCOMPANY THIS SHIPMENT? DATE SIGNATURE - Authorized carrier acknowledging waste receipt AUTHORIZED SIGNATURE TITLE DATE If "Yes," provide Manifest Number 3.2 no U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (Including proper shipping name, hazard class, UN ID number, and any additional inforation) 19. IDENTIFICATION 12. DOT LABEL "RADIOACTIVE" 13. TRANSPORT INDEX 14. PHYSICAL AND CHEMICAL FORM 15. INDIVIDUAL RADIONUCLIDES 17. LSAVSCO CLASS 16. TOTAL PACKAGE 18. TOTAL WEIGHT OR VOLUME NUMBER OF PACKAGE **ACTIVITY IN SI UNITS** (Use appropriate units) 4 4 4 =1 1 1+6 FOR CONSIGNEE USE ONLY

NRC FORM 540 (7-2007)

INRC F	ORM	1541
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BIONOMICS, INC.

UNIFORM LOW-LEVEL RADIOACTIVE MANIFEST **WASTE MANIFEST**

CONTAINER AND WASTE DESCRIPTION

Additional Nuclear Regulatory Commission (NRC) Requirements for Control, Transfer and Disposal of Radioactive Waste

		2. MANIFEST NUMBER					
NUMBER OF PACKAGES/	NET	NET	3)	32509			
DISPOSAL CONTAINERS	VOLUME (m3)	WEIGHT (kg)	U-233	U-235	Pu	TOTAL	3. PAGE 1 OF 1 PAGE(S)
3	0.19	50.1					4. SHIPPER NAME
		AC	TIVITY (MBq)			SOURCE	
Al	L NUCLIDES	TRITIUM	C-14	Tc-99	I-129	(kg)	Old Dominion University
309.0	47	251.711	57.644	NP	NP	NP	SHIPMENT ID NUMBER

													116.
	DISPOSAL	CONTAIN	ER DESCRIP	TION								TYPE IN CONTAINER	WASTE
5. CONTAINER IDENTIFICATION NUMBER / GENERATOR	CONTAINER DESCRIPTION (See Note 1)	7. VOLUME	8. WASTE AND CONTAINER WEIGHT	9. SURFACE RADIATION LEVEL	CONTA	FACE MINATION 100 cm ²	11. WASTE DESCRIP- TOR		SORBENT, SOLIDIFICATION,	CHEMICAL DESC	WEIGHT % CHELATING	15. RADIOLOGICAL DESCRIPTION INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL, OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	CLASSIFI- CATION AS-Class A Stable AU- Class A
ID NUMBER	(See Note 1)	(m3)	(kg)	(mSv/hr)	ALPHA	BETA- GAMMA	(See Note 2)	CONTAINER (m3)	STABILIZATION MEDIA (See Note 3)		AGENT IF > 0.1%		Unstable B- Class B C- Class C
2009-1	19Other,Fiber Box	0.15	15.7	0.0002	<3.34E-7	<1.67E-5	59.Other, Incinerable	0.15	100	Oxides / N/A	N/A	H3 251.711 C14 57.646 Total 309.394 Cl36 0.037	ΑU
ODU-2	4Metal Drum or Pail	0.02	29.1	t doll	<3.34E-7	<1.67E-5	59.Lead for recycling	0.02	100	Oxides / N/A	N/A	C130 z 6.37	ΑU
ODU-3	4Metal Drum or Pail	0.02	S. 3	6.0102	<3.34E-7	<1.67E-5	39.Compacta ble Trash	0.02	100	Oxides / N/A	N/A	11238 = 6.637 [3.3E-3Kg] Pb216 = 0.637 Rizze = 0.637	ΑU
												Th232 20.037 [2.636 -03kg] Th232 20.037 [9.076-03kg] TOTAL 20.185	
									1				

NOTE1: Container Description Codes: For containers/ waste requiring disposal in approved structural overpacks, the numerical code must be followed by "-OP."

- 1 .Wooden Box or Crate
- 2 .Metal Box
- Plastic Drum or Pail
- .Metal Drum or Pail .Metal Tank or Liner
- .Concrete Tank or Liner
- .Polyethylene Tank or Liner
- 3 .Fiberglass Tank or Liner
- 9 .Demineralizer
- 10 .Gas Cylinder
- 11 .Bulk, Unpackaged Waste

or additional page.

- 12 .Unpackaged Components 13 .High Integrity Container
 - 19 .Other. Describe in item 6.
- 6A Metal Melt

 - 10A Other, Specify in the block or on attached page.

- NOTE 1A: Process Type Codes Are Specific To Bionomics and Only Apply To How The Waste Will Be Processed /
- Handled By The Cinsignee. Use up to two process codes and one disposal site.
- 1A Supercompact
- 2A Incineration
 - 12A Richland
- 3A Tranship 13A Envirocare
- 4A Solidify 14A Return
- 20A .Other, Specify in the block or 5A Encapsulate

11A Bamwell

- on an attached page.
- 7A Sort
- 8A

- Note 2: Waste Descriptor Codes: (Choose up to three predominate by volume.)
- 20 .Charcoal
- 29 .Demolition Rubble
- 21 .Incinerator Ash 22 .Soil
- 23 .Gas 24 .Oil 25 .Aqueous Liquid
- 26 .Filter Media
- 27 .Mechanical Filter
- 32 .Mixed Bed Ion-exchange Media 33 .Contaminated Equipment
- 34 .Organic Liquid 35 .Glassware or Labware
- 36 .Sealed Source / Device 28 .EPA or State Hazardous 37 .Paint or Plating
- 30 .Cation Ion-exchange Media 39 .Compactable Trash 31 .Anion lon-exchange Media 40 Noncompactable Trash
 - 42 .Biological Material (except animal carcasses)

38 .Evaporator Bottoms / Sludges / Concentrates

- 41 Animal Carcasses 43 Activated Material
- 59 .Other. Describe in item 11, or additional page.

Note 3: For solidification media that meet disposal site structrul stability requirements, the numerical code must be followed by "-S". For all solidification media, the vendor (manufacture)and brand name must also be identified in Item 13. Code 100=NONE REQUIRED.

SORPTION

- 60 .Speedi Dri 68 .Solid A Sorb 61 Celetom 69 Chemsil 30 70 .Chemsil 50
- 62 .Floor Dry/ Superfine
- 63 Hi Dri
- 64 .Safe T Sorb 65 .Safe N Dri
- 66 Florco 67 .Florco X
- 73 Dicaperl HP500 74 Petroset 75 .Petroset II 76 .Aquasel

71 .Chemsil 3030

72 .Dicaperl HP200

- 89 Other Describe in Item 13, or
- additional

77 .Aquaset II

92 Bituman 93 . Vinyl Chloride 94 .Other. Describe in Item 13, or additional

(encapsulation)

91 .Concrete

- SOLIDIFICATION 90 .Cement
- 100 None Required

NRC FORM 540	В	BIONOMICS, INC.	. 5. SHIPPER - N	NAME AND FAC	JILITY		SHIPPE	R I.D. NUMBER	7. NRC FORM 540 AND	540A PAGE 1 OF			MANIFEST NUMBER
			Old Dominion	University				COLLECTOR	NRC 541 AND 541A]_	PAGE(\$)	(Use this number on all continuation pages)
UNIFORM LOW-LE	VEL RADIOACTIVE		5255 Hamptor					COLLEGION	NRC 542 AND 542A		'&_	PAGE(S)	
WASTE N	MANIFEST		Norfolk, Va.23	529				PROCESSOR	1		<i>(</i>		32509
SHIPPING	G PAPER		LICED DEDM	IT NI IMPED	SHIPMENT	NUMBER	-	GENERATOR TYPE	ADDITIONAL INFOR 9. CONSIGNEE - Name		<u>C-</u>	. PAGE(S)	NTACT
			JUSER PERIVI	11 NOWBER	SHIPWENT	NUMBER	x	(Specify)	b. Golfoldizz Hamo	and raomy radioos		00	
 EMERGENCY TELEPHONE NUMBER ((Include Area Code)							A	Energy Solutions	<u> </u>	DONNIE BRACKETT		
(865) 2	20-8520		CONTACT					PHONE NUMBER g Area Code)	1560 Bear Creek F Oak Ridge, TN 378				
ORGANIZATION			-	Sheri	i Vann		(middan)	(757)683-5834	Oak Ridge, 114 370		865- 481-0222		
	IICS, INC.		6. CARRIER - I	Name and Addre	ess		EPA I.I	D. NUMBER	SIGNATURE - Author	rized consignee acknowl	edging waste red	ceipt DAT	E
2. IS THIS AN "EXCLUSIVE USE" SHIPMENT?	USIVE USE" SHIPMENT? 7 TOTAL NUMBER OF			,Inc.			-	TND982116493					
X YES	ON THIS MANIFEST	3		50 Bear Creek Road				ING DATE			10. CERTIFI	ICATION	
NO YES	====>			ak Ridge,Tn.37830				25-09	This is to certify that th	e herein-named materials	are properly class	sified, described, package	ed, marked, and labeled and are
4. DOES EPA REGULATED YES	EPA MANIFEST NUMBER		CONTACT	, , , , , , , , , , , , , , , , , , , ,			1 -	HONE NUMBER	in proper condition for	transportation according	to the applicable r	regulations of the Departr	ment of Transportation. This also
WASTE REQUIRING A X NO				John M	cCormick		(Including	g Area Code)					condition for transportation and
MANIFEST ACCOMPANY								(865)220-8501					uivalent state regulations
THIS SHIPMENT?			SIGNATURE - Aut	thorized earrier act	knewledging waste	receipt	DATE	25-09	AUTHORIZED SIGNATO	I ann	TITLE CS		3/25/09
If "Yes" provide Manifest Number =====> 11. U.S. DEPARTMENT OF TRANSPORT	TATION DESCRIPTION	12. //	13.	A CONTRACTOR OF THE PARTY OF TH	14		1 7	15.	(bu	16.	17.	18. TOTAL WEIGHT	19. IDENTIFICATION
(Including proper shipping name, hazard of		DOT LABEL	TRANSPORT	PHYSI	ICAL AND			INDIVIDUAL		TOTAL PACKAGE	LSA/SCO	OR VOLUME	NUMBER OF
and any additional informa	ation)	"RADIOACTIVE"	INDEX	CHEMIC	CAL FORM		-	RADIONUCLIDES		ACTIVITY IN SI UNITS	CLASS	(Use appropriate units)	PACKAGE
Radioactive Material , excepted packag	je- limited quantity of	1	,	Solid /		H3;C	1.4	CI36		309.394MBq			2009-1
material, 7, UN2910		N/A	N/A	Solid /	Oxides	113,0	14	CISO		303.334WBQ	N/A	0.13m3	2003-1
Radioactive Material, excepted packag	ge- limited quantity of			0 11 1						_			ODILO
material, 7, UN2910		N/A	N/A	Solid /	Oxides	C136				637 MBa	N/A	0.13m3	ODU-2
Radioactive Material , excepted packag	ge- limited quantity of	 	1000										
material, 7, UN2910	,o miniou quantity or			Solid /	Ovidos	Re. 226	: 1123	* P6210 This	Th 232	0.185 nB=	N/A	0.13m3	ODU-3
		N/A	N/A		Oxides	-		/		-	18//	0.13113	
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FOR CONSIGNEE USE ONLY									BIONOMICS, I	INC.			
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LAND DISPOSAL RESTRICTION & CERTIFICATION FORM

OSSI . M&EC . l'erina fix offlorida

Generator Name

OLD DOMINION UNIVERSITY

Concrator USEPA ID NO VADO41448465

Generator Address

5255 HAMPTON BIND, SPONG HALL

CHYSTRIP NORFOLK, VA. 23529

Manifest Doc No 003345698 JTK

State Manifest No Instructions

- In Column 1 identify all USEPA hazardous waste codes that apply to this waste shipment
- 2 In Column 2, choose the appropriate treatability group. Non-Wastewater (NWW) or Wastewater (WW).
- 3. In Column 3, enter the appropriate Subcategory, if applicable, and also enter "Contaminated Soil" or "Debns" if the waste can be treated using one of the attemative treatment technologies provided by 268.49(c) (soil) or 268.45 (debris)
- In Column 4, circle the letter of the appropriate LDR management categories on the back of this form.

 In Column 5, enter the Reference Number(s) from the LDR-UHC Constituent Table for any constituents subject to treatment in your waste stream

Go to LDR-UHC Contituent Table

Manifest Line	1 USEPA HAZARDOUS WASTE	2	NWW or		4. HOW MUST THE WASTE BE MANAGED (Check one)							5. REFERENCE NUMBER(s) of Hazardous Constituents					
Nom #	CODES		ww	3. SUBCATEGORY	A	В	С	D	E	F	G	н		\$ oil O	inly	╝	contained in the waste.
96.1	Doci	b~	-www		L	_							Does		is subject to		
[0.1	F003		ww		Ĺ						L		Does Not		complies with		
0 h 2	Dexy	L	NWW		L						Г	П	Does		is subject to		
90,2	FOUS FOUS		ww					L	L		L		Does Not		'complies with		
			NWW										Does		is subject to		,
9b.3			ww					L	L				Does Not		complies with		
01			NWW									П	Does		is subject to		
96.4			ww										Does Not		complies with		

I hereby certify that all information submitted on this and all associated documents is complete and accurate to the best of my knowledge and information.

		. , , , , , , , , , , , , , , , , , , ,
The of lann	KSO	3/25/04
Generator Name	Title	Date

- A. THIS RESTRICTED WASTE REQUIRES TREATMENT TO THE APPLICABLE STANDARD. This waste must be treated to the applicable performance based treatment standard set forth in 40CFR Part 268 Subpart C, 268.32, Subpart D, 268.40 or RCRA Section 3004(d) prior to land disposal.
- B. THIS HAZARDOUS DEBRIS MAY BE TREATED USING THE DEBRIS ALTERNATIVE TREATMENT STANDARDS OF 40 CFR 268.45, I certify under penalty of law that I personally have examined and am familiar with the waste and that the statement above is true and that thiswaste meets the definition of debris and can be treated using the alternate methods specified in 40 CFR 268.45. I am aware that there are significant penalties for submitting a false certification including possibility of fine or imprisonment.
- C. THIS RESTRICTED WASTE HAS BEEN TREATED TO THE APPLICABLE TREATMENT STANDARD(S), I certify under penalty of law that I personnaly have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR 268 Subpart D. I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.
- O. THIS RESTRICTED DEBRIS HAS BEEN IREATED IN ACCORDANCE WITH 40 CFR 268.45. I certify under penalty of law that the debris has been treated in accordance with the requirements of 40 CFR 268.45. 1 am aware that there are significant penalties for making false certification, including the possibility of a fine and imprisonment
- E. THIS LAB PACK DOES NOT CONTAIN ANY WASTES IDENTIFIED AT APPENDIX IV TO PART 268. I certify under penalty of law that I personally have examined and am familiar with and that the statement above is true and that this lab pack will be sent to a combustion facility in compliance with the alternative treatment standards for lab packs at 40 CFR 268 42(c) I am aware that there are significant penalties for submitting a false certification including possibility of fine or imprisonment.
- THIS RESTRICTED WASTE HAS BEEN TREATED TO REMOVE THE HAZARDOUS CHARACTERISTIC. I certify under penalty of law that the waste has been treated in accordance rith the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment
- G THIS RESTRICTED WASTE HAS BEEN TREATED TO REMOVE THE HAZARDOUS CHARACTERISTIC AND BEEN TREATED FOR UNDERLYING HAZARDOUS CONSTITUENTS. I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic, and that underlying hazardous constituents, as defined in 268.48 Universal Treatment Standards. I am aware that there are significant, penalties for submitting false certification, including the possibility of fine and
- H THIS RESTRICTED WASTE IS SUBJECT TO AN EXEMPTION FROM LAND DISPOSAL (Please include the date the waste is subject to the prohibitions in Column 5) This waste is subject to an exemption from a prohibition on the type of land disposal method utilized for the waste (such as, but not limited to, a case-by-case extension under 40 CFR Part 268.5, or an exemption under 40 CFR 268 6
- THIS CONTAMINATED SOIL (DOES / DOES NOT) CONTAIN LISTED HAZARDOUS WASTE AND (DOES / DOES NOT) EXHIBIT A CHARACTERISTIC OF HAZARDOUS WASTE AND (IS SUBJECT TO I COMPLIES WITH) THE SOIL TREATMENT STANDARDS AS PROVIDED BY 268 49(c) OR THE UNIVERSAL TREATMENT STANDARDS. I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and believe that it his been maintained and operated properly so as to comply with treatment standards specified in 40 CFR 268.49 without impermissible dilution of the prohibited wastes. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment



16-Apr-09

OLD DOMINION UNIVERSITY
SHERI VANN
ENVIRONMENTAL SAFETY
5255 HAMPTON BLVD SPONG HALL
NORFOLK VA 23529

REF: MANIFEST NUMBER:

003345698JJK

SHIPMENT NUMBER:

BIO-356

SHIPMENT DATE:

04/09/2009

ON THE ABOVE DATE, YOUR WASTE MATERIAL WAS RECEIVED AT OUR FACILITY.

THIS MATERIAL WILL BE DISPOSED OF IN FULL IN ACCORDANCE WITH ALL APPLICABLE FEDERAL, STATE AND LOCAL LAWS AND REGULATIONS.

THIS ENTIRE PROCESS IS GENERALLY COMPLETED WITHIN A 30-DAY PERIOD FROM THE DATE OF THE SHIPMENT.

UNIFORM HAZARDOUS WASTE MANIFEST 1. Generator ID Number 2. Page 1 of 3. Emergency Res WASTE MANIFEST 5. Generator's Name and Mailing Address Generator's Phone: 6. Transporter 1 Company Name	*	e 4	4. Manifest 1	Tracking N	lumber			
Generator's Phone:	11 . /2 1'55		w.	· · · ·	s s		JJ	K
	aaress (if ame	erent than ma	nailing addres	ss)				
1 o. manaporter i company mame		11	J.S. EPA ID N	dumber				
		I	J.S. EPA ID N	4umber				
7. Transporter 2 Company Name		U,	J.S. EPA ID N	lumber				
Designated Facility Name and Site Address		U	J.S. EPA ID N	lumber				
Facility's Phone:								
9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) 10.0 No.	Containers T		11. Total Quantity	12. Unit Wt./Vol.	13	. Waste (Codes	
2. 2. 3, 1111-19-1, 1			4				CONTRACTOR OF STATE O	***************************************
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APPROVED BY OMB: NO. 3150-0164

EXPIRES: 07/31/2010

Estimated burden per response to comply with this information collection request: 45 minutes. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level waste. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F52), U.S. Nuclear Regulatory Affairs, NEOB-10202, (3150-0164), Office of Management and Budget, Washington, DC 20553-0001, or by internet e-mail to infocollects@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0164), 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. NRC FORM 540 SHIPPER I.D. NUMBER NRC FORM 540 AND 540A U.S. NUCLEAR REGULATORY COMMISSION MANIFEST NUMBER LO DOMINION UNIVERSITY (Use this number on all continuation pages) (7-2007) NRC FORM 541 AND 541A PAGE(S) HAMPTIN BLVD, Spon, HALL UNIFORM LOW-LEVEL RADIOACTIVE COLLECTOR NRC FORM 542 AND 542A PAGE(S) PAGE(S) **WASTE MANIFEST** 0 ADDITIONAL INFORMATION PROCESSOR USER PERMIT NUMBER SHIPMENT NUMBER SHIPPING PAPER GENERATOR TYPE (Specify) MIMOND A/exan 1. EMERGENCY TELEPHONE NUMBER (Include Area Code) TELEPHONE NUMBER TELEPHONE NUMBER (Include Area Code) CONTACT (865) 220-8520 (Include Area Code) ORGANIZATION 757183-583 3521373-6066 51 Nomics INC EPA I.D. NUMBER DATE 6. CARRIER - Name and Address SIGNATURE - Authorized consignee acknowledging waste receipt BIONOMIES IN 2. IS THIS AN "EXCLUSIVE USE" SHIPMENT? ND9821649 3. TOTAL NUMBER OF PACKAGES IDENTIFIED SHIPPING DATE YES 10. CERTIFICATION ON THIS MANIFEST =====> This is to certify that the herein-named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation This also certifies that the materials are classified, packaged, marked, and labeled and are in proper condition for transportation and NO 3.25-0 TELEPHONE NUMBER EPA MANIFEST NUMBER CONTACT DOES EPA REGULATED YES (Include Area Code) disposal as described in accordance with the applicable requirements of 10 CFR Parts 20 and 61, or equivalent state WASTE REQUIRING A 15/220-850 NO MANIFEST ACCOMPANY 003345698JJIL THIS SHIPMENT? SIGNATURE - Authorized carrier acknowledging waste receipt DATE AUTHORIZED SIGNATURE RSO If "Yes," provide Manifest Number 3-25-09 ann 19. IDENTIFICATION 15. INDIVIDUAL RADIONUCLIDES 17. LSA/SCO CLASS 11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION 13. TRANSPORT 18. TOTAL WEIGHT OR VOLUME 16. TOTAL PACKAGE ACTIVITY IN SI UNITS NUMBER OF PACKAGE (Including proper shipping name, hazard class, UN ID number, and any additional inforation) DOT LABEL PHYSICAL AND "RADIOACTIVE" INDEX CHEMICAL FORM (Use appropriate units) ORGANIC 370999 NA 0.12 m3 ODU - 4 NA NA HUNDAL ING 1 FTERIAL FOR CONSIGNEE USE ONLY

APPROVED BY OMB: NO. 3150-0164

EXPIRES: 07/31/2010

Estimated burden per response to comply with this information collection request: 45 minutes. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation a 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 Deak Officer, Office of Information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required U.S. NUCLEAR REGULATORY COMMISSION 5. SHIPPER - NAME AND FACILITY NRC FORM 540 7. NRC FORM 540 AND 540A PAGE 1 OF (7-2007)NRC FORM 541 AND 541A UNIFORM LOW-LEVEL RADIOACTIVE NRC FORM 542 AND 542A COLLECTOR **WASTE MANIFEST** PROCESSOR ADDITIONAL INFORMATION USER PERMIT NUMBER SHIPMENT NUMBER SHIPPING PAPER GENERATOR TYPE 9. CONSIGNEE - Name and Facility Address (Specify) 1. EMERGENCY TELEPHONE NUMBER (Include Area Code) ELINA VILLE TELEPHONE NUMBER THE THUS LET ! CONTACT (Include Area Code) ORGANIZATION -1 VOAA THINE WOLK I L 6. CARRIER - Name and Address EPA LD. NUMBER SIGNATURE - Authorized consignee acknowledging \ or see that - - year 2. IS THIS AN "EXCLUSIVE USE" SHIPMENT? TOTAL NUMBER OF 1 10211 - 173 PACKAGES IDENTIFIED 2 LATTER CHAP SHIPPING DATE YES 10. ON THIS MANIFEST ====> Did Kurasa 17 NO This is to certify that the herein-named materials are ; in proper condition for transportation according to the TELEPHONE NUMBER (Include Area Code) EPA MANIFEST NUMBER CONTACT . DOES EPA REGULATED YES certifies that the materials are classified, packaged, in WASTE REQUIRING A disposal as described in accordance with the applicat WILL THE SHIP NO 25 VZ.E regulations. MANIFEST ACCOMPANY THIS SHIPMENT? - P 345757 5 \-DATE SIGNATURE - Authorized carrier acknowledging waste receipt AUTHORIZED SIGNATURE If "Yes," provide Manifest Number 11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION 13. TRANSPORT INDEX 15. INDIVIDUAL (Including proper shipping name, hazard class, UN ID number, and any additional inforation) DOT LABEL PHYSICAL AND CHEMICAL FORM TOTAL PACKAGE RADIONUCLIDES **ACTIVITY IN SI UNITS** 1434 an | | - | - | - | FOR CONSIGNEE USE ONLY

APPROVED BY OMB: NO. 3150-0166 EXPIRES: 07/31/2010

Estimated burden per response to comply with this information collection request: 3.3 hours. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation a estimate to the Records and FOIA/Privacy Service 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 Informa 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 require

NRC FORM 541			U.S. NUCI	EAR REGUI	LATORY CO	MMISSION				1. MANIF	EST TOTALS		
(7-2007)					NUMBER OF PACKAGES DISPOSAL CONTAINER	NET WASTE	NET WASTE WEIGHT		SPECIAL NUC	LEAR MATERIAL	(grams)		
							CONTAINER	ks (m ³)	(kg)	U-233 U-235		Pu	TOTAL
U				ADIOAC	TIVE			31 434			78		
		WASTE	MANIFE	ST			-	1	1	CTIVITY (MBq)			SOURCE
	CONT	AINER AND	WASTE DE	SCRIPTION			AL	L NUCLIDES	TRITIUM	C-14 Tc-99		I-129	(kg)
Additional N	uclear Regulat	ory Commission	on (NRC) Requ f Rdloactive W	uirements for Co	ontrol, Transfer	and		1 - 1 - 2	12502	1.724	4		. 3
	DISPOSAL CONTAINER DESCRIPTION									WASTE DESCRIPTION FOR EA		H WASTE T	YPE IN CONTAINER
5.	6.	7.	8.	9.	10. SURFACE			PHYSICAL DESCR	RIPTION		HEMICAL DESCRIPTION		15.
CONTAINER IDENTIFICATION NUMBER/	CONTAINER DESCRIP- TION	VOLUME	WASTE AND CONTAINER	SURFACE RADIATION LEVEL		100cm ²	WASTE DESCRIP-	12. APPROXIMATE WASTE	13. SORBENT SOLIDIFICATION,	Olisa	AICAL FORW	WEIGHT	INDIVIDUAL F
GENERATOR ID NUMBER(S)	(See Note 1)	(m ³)	WEIGHT (kg)	(µSv/hr) (mSv/hr)	ALPHA	BETA- GAMMA	TOR (See Note 2)	VOLUME(S) IN	STABILIZATION, MEDIA (See Note 3)		ATING AGENT	CHELATING AGENT IF > 0.1%	CONTAINER
					1	-							m 1,20
				P	3/1-	8							11 1724
Pid	14	= 117	-T	SE.	40	L.	28	0.334	1 7458	J. F. /LEG	INF	Ne	COURS TO
1													
					1		-						
												1 3	
			7										
										l			
NOTE 1: Container Dec	cription Codes	For containers		TE 2: Waste De	acriptor Cortes	(Choose up	to three which	predominate by vol	uma.)	NOTE :	3: For solidification medi	a that most disc	osal site structural stability
weste requiring disposi the numerical code mus	al in approved si	tructural overpa	icks,						ttoms/Sludges/Concent	For all	solidification media, the	vendor (manufa	cturer) and brand name mus
4 Manda Day of Contra				. Charcoal . Incinerator Ash		Demolition Rubl Cation Ion-exch		39. Compactible T		Som	tion		

- 2. Metal Box
- 3. Plestic Drum or Pail
- 4. Metal Drum or Pail
- 5. Metal Tank or Liner
- 6. Concrete Tank or Liner
- 7. Polyethylene Tank or Liner 8. Fiberglass Tank or Liner
- 10. Gas Cylinder
- 11. Bulk Unpackaged Waste
- 12. Unpackaged Components 13. High Integrity Container
- 19. Other. Describe in item 6,
 - or additional page
- 22. Soil 23. Ges
- 24. Oil
- 25. Aqueous Liquid 26. Filter Media
- 27. Mechanical Filter 28. EPA or State Hazardous 37. Paint or Plating
- 31. Anion ion-exchange Media 40. Noncompactible Trash 32. Mixed Bed Ion-exchange Media 41. Animal Carcess
- 34. Organic Liquid (except oil) 35. Glassware or Labware
- 36. Sealed Source/Device

- 33. Contaminated Equipment 42. Biological Meterial (except animal carcass)
 - 43. Activated Material

59. Other. Describe in Item 11, or additional page

63. Hi Dri

- 61. Celetom
- 60. Speedi Dri 64. Safe T Sorb 69. Chemsil 30
- 65. Safe N Dri 62 Floor Dry/ 66. Florco
- 70. Chemsil 50 71. Chemsil 3030 72. Dicaperl HP200 77. Aquaset II
- Superfine 67. Florco X 68. Solid A Sorb 73. Dicaperl HP500

74. Petroset

76. Aqueset

75. Petroset II

Estimated burden per response to comply with this information collection request: 45 minutes. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation assimate 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 Collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required APPROVED BY OMB: NO. 3150-0164 EXPIRES: 07/31/2010 U.S. NUCLEAR REGULATORY COMMISSION 5. SHIPPER - NAME AND FACILITY NRC FORM 540 AND 540A PAGE 1 OF NRC FORM 540 (7-2007) NRC FORM 541 AND 541A UNIFORM LOW-LEVEL RADIOACTIVE NRC FORM 542 AND 542A COLLECTOR **WASTE MANIFEST** PROCESSOR ADDITIONAL INFORMATION SHIPPING PAPER USER PERMIT NUMBER SHIPMENT NUMBER **GENERATOR TYPE** 9. CONSIGNEE - Name and Facility Address (Specify) 1. EMERGENCY TELEPHONE NUMBER (Include Area Code) TELEPHONE NUMBER CONTACT THE PERSON LINE (Include Area Code) ORGANIZATION EPA I.D. NUMBER 6. CARRIER - Name and Address SIGNATURE - Authorized consignee acknowledging v 2. IS THIS AN "EXCLUSIVE USE" SHIPMENT? 3. TOTAL NUMBER OF 1 N - 3/1 | 1 S - 3/1 | N -PACKAGES IDENTIFIED SHIPPING DATE YES ON THIS MANIFEST OF ANTICAL STATE =====> This is to certify that the herein-named materials are p NO in proper condition for transportation according to the TELEPHONE NUMBER EPA MANIFEST NUMBER CONTACT certifies that the materials are classified, packaged, m DOES EPA REGULATED YES (Include Area Code) disposal as described in accordance with the applicat WASTE REQUIRING A NO regulations. MANIFEST ACCOMPANY THIS SHIPMENT? DATE **AUTHORIZED SIGNATURE** SIGNATURE - Authorized carrier acknowledging waste receipt If "Yes," provide Manifest Number 11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION 12. DOT LABEL 13. TRANSPORT 15. TOTAL PACKAGE 14. (Including proper shipping name, hazard class, UN ID number, PHYSICAL AND INDIVIDUAL **ACTIVITY IN SI UNITS** and any additional inforation) "RADIOACTIVE" INDEX CHEMICAL FORM RADIONUCLIDES

FOR CONSIGNEE USE ONLY

10.

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APPROVED BY OMB: NO. 3150-0166

Extinated burden per response to comply with this information collection request: 3.3 hours. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation a setting of the safe transportation as the safe transportation of the safe transportation and the safe transportation as the safe transportatio

NRC FORM 541				LEAR REGUL			The state of the s	mation contaction do	as not display a content		ANIFEST TOTALS	not concoor or apone	sor, and a person is not require
(7-2007)							NUMBER OF PACKAGES DISPOSAL CONTAINERS	- NET WASTE VOLUME	NET WASTE WEIGHT		SPECIAL	NUCLEAR MATERIA	L (grams)
							DISPOSAL CONTAINERS	s (m ³)	(kg)	U-233	U-235	Pu	TOTAL
U				ADIOAC	TIVE						1.:		
	1	WASIE	MANIF	ESI					<i>A</i>	CTIVITY (MBq)			SOURCE
	CONT	AINER AND	WASTE DE	SCRIPTION			ALL	NUCLIDES	TRITIUM	C-14	Tc-99	1-129	(kg)
Additional N	uclear Regulate	ory Commissi Disposal o	on (NRC) Required W	uirements for Co	ontrol, Transfe	er and				74			
			TAINER DES						<u> </u>	WASTE D	ESCRIPTION FOR	EACH WASTE	TYPE IN CONTAINER
5.		7.	8.	9.		RFACE MINATION		PHYSICAL DESCR	RIPTION	14.	CHEMICAL DESCRIPT		15.
CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	CONTAINER DESCRIP- TION (See Note 1)	VOLUME (m³)	WASTE AND CONTAINER WEIGHT (kg)	SURFACE RADIATION LEVEL (µSv/hr) (mSv/hr)		/100cm ² BETA- GAMMA	11. WASTE DESCRIP- TOR (See Note 2)	APPROXIMATE WASTE VOLUME(S) IN CONTAINER	13. SORBENT SOLIDIFICATION, STABILIZATION, MEDIA (See Note 3)		CHEMICAL FORM CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	INDIVIDUAL F CONTAINER
1/2		Car 11		V ²		Nº5		os Mari	3	<u>y</u> -,/1	INF	N/P	7
7 =				7	77	N. S.		E = 1/411					
MOTE 1: Container Des weste requiring disposi- tive numerical code must 1. Wooden Box or Crate 2. Metal Box 3. Plastic Drum or Pail 4. Metal Drum or Pail 5. Metal Tank or Liner 8. Concrete Tank or Line 7. Polyethylens Tank or 8. Fibersiass Tank or Line 8. Fibersiass Tank or Line	9. Demi 10. Gas (11. Bulk 12. Ungs 13. High 17. Other 19. Other Uner or ad	ructural overp "-OP." neralizer	acits, 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	OTE 2: Waste Do 0. Charcoal 1. Incinerator Ash 2. Soil 3. Gas 4. Oil 6. Filter Media 7. Mechanical File 8. EPA or State f-	29. 30. 31. 32. 33. d 34. 36. der 36.	Demolition Rub Cation Ion-exch Anlon Ion-exch Mixed Bed Ion- Contaminated Organic Liquid Glassware or Li Sealed Source/	ble senge Media sege Media sechange Media genenent (except oil) styrare Device	39. Compactible 40. Noncompactile 41. Animal Carca	ottoms/Sludges/Concen Frash Ne Trash se erial (except animal ca erial se in item 11,	rcass) 6		T Sorb 69. Che N Dri 70. Che o 71. Che o X 72. Dica	

UNIFORM HAZARDOUS	Generator ID Number	2. Page 1 of	3 Emergency Respons	se Phone	4. Manifest	Tracking N	umber	
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APPROVED BY OMB: NO. 3150-0164

EXPIRES: 97/31/2010

Expires: 97/31/2010 5. SHIPPER - NAME AND FACILITY 7. NRC FORM 540 AND 540A PAGE 1 OF U.S. NUCLEAR REGULATORY COMMISSION NRC FORM 540 DOMINION SKIN (7-2007) NRC FORM 541 AND 541A 55 Ham 351223 UNIFORM LOW-LEVEL RADIOACTIVE NRC FORM 542 AND 542A COLLECTOR **WASTE MANIFEST** ADDITIONAL INFORMATION W-XL UM 2 37 **PROCESSOR** USER PERMIT NUMBER SHIPMENT NUMBER SHIPPING PAPER **GENERATOR TYPE** (Specify) . EMERGENCY TELEPHONE NUMBER (Include Area Code) TELEPHONE NUMBER CONTACT (Include Area Code) ORGANIZATION DREKI VIII 757)603 SIGNETHIES EPA I.D. NUMBER 6. CARRIER - Name and Address SIDNING ILLS INC. INUYSEL ETT 2. IS THIS AN "EXCLUSIVE USE" SHIPMENT? TOTAL NUMBER OF PACKAGES IDENTIFIED SES RUMA CREEK /4 SHIPPING DATE YES ON THIS MANIFEST THE RIDGE TH 37835 ====> NO TELEPHONE NUMBER EPA MANIFEST NUMBER CONTACT DOES EPA REGULATED YES (Include Area Code) WASTE REQUIRING A DIN 11/2 COZNIKA B6120 - 3 NO regulations. MANIFEST ACCOMPANY DATE THIS SHIPMENT? SIGNATURE - Authorized carrier acknowledging waste receipt 003346787JJA

9. CONSIGNEE - Name and Facility Address ERMA-FIX 1940 NWGTITH PL DAINE VILLE FL 320 SIGNATURE - Authorized consignee acknowledging 10. This is to certify that the herein-named materials are ; in proper condition for transportation according to the certifies that the materials are classified, packaged, in disposal as described in accordance with the applicat AUTHORIZED SIGNATURE If "Yes." provide Manifest Number 11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION TRANSPORT 14. 16. TOTAL PACKAGE 15. (Including proper shipping name, hazard class, UN ID number, and any additional inforation) DOT LABEL PHYSICAL AND INDIVIDUAL INDEX CHEMICAL FORM RADIONUCLIDES **ACTIVITY IN SI UNITS** NIH 3.1352 UNITE ISH DIVALTING I HATERYA UXIDES FOR CONSIGNEE USE ONLY

Sheri A. Vann
EH&S Department
Old Dominion University
5255 Hampton Blvd.
Spong Hall, Suite 2501
Norfolk, VA 23529



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Licensing Assistant Section

Nuclear Materials Safety Branch

Nuclear Regulatory Commission, Region I

U.S. Nuclear Regulatory Commission, Region I

2100 Renaissance Boulevard, Suite 100

2100 Private PA 19406-2713

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includes an administrative response to the control of the control	ative omissions. Your application was assigned to a se note that the technical review may identify additional
Branch, who will contact you Your action has been assign	een forwarded to our License Fee & Accounts Receivable u separately if there is a fee issue involved. ned Mail Control Number 58977. ut this action, please refer to this control number. 7-5398, or 337-5260.
NRC FORM 532 (RI) (6-96)	Sincerely, Licensing Assistance Team Leader

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