



200 Power Mill Road Experimental
Station E400/3213
Wilmington, DE 19803

January 15, 2018

VIA FEDERAL EXPRESS

Mr. Dennis Lawyer
Health Physicist
Licensing Assistance Team
US Nuclear Regulatory Commission Region I
2100 Renaissance Boulevard, Suite 100
King of Prussia, PA 19406-2713

Subject: **Mail Control No. 601936**
Response to Correspondence dated January 8, 2018
License No. 0735398-01 *103039018*
Prelude Therapeutics Incorporated
Newark, Delaware

Dear Mr. Lawyer:

In reference to your e-mail dated January 8, 2018, Prelude provides the following responses:

1. NRC: You state in section 3.5 of your report that wipe data was printed in units of cpm and dpm/100cm² (surface activity) as seen in the MicroBeta printouts in Attachments A and B. However, the printout data was not included in these attachments. Please provide the individual count data from the wipes. Please include any quality assurance printouts for any daily checks associated with the MicroBeta.

Prelude Response: See attached.

2. NRC: Please confirm that the only area of use was the biology lab. Please provide survey data of any other areas of use such as waste storage rooms.

Prelude Response: Yes, the only area of RAM use was the biology lab. RAM waste as stored in a locked cabinet within the biology lab. No RAM was used or stored anywhere else in the facility.

3. NRC: In your application dated December 23, 2016, you stated that you would dispose of material in the sanitary sewer. It is not clear that the disposal area was surveyed. Please provide surveys or state which wipes were performed on drains used to dispose of liquid material.

Prelude Response: Only solid waste and LSC waste was generated. Both were disposed via a reputable vendor. No drain disposal of RAM was performed.

REC'D 10117 18 PM 0124

RECEIVED 1/15/18

4. NRC: Prior to termination of a license, 10 CFR 30.35(g), 30.36(k)(4) and 30.51 require that you submit certain records to the NRC. As you are decommissioning a facility, please submit the following records associate with the facility, or explain why such records are not applicable to your licensed activities.

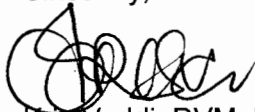
- a. for unsealed materials with half-lives greater than 120 days, records for disposal made pursuant to 10 CFR 20.2002 (alternate disposal procedures, including burial authorized prior to January 28, 1981), 20.2003 (disposals to the sanitary sewerage system), 20.2004 (incineration of wastes), 20.2005 (disposal of specific wastes including liquid scintillation cocktail and animal tissue), and 20.2103(b)(4), evaluations of effluent releases.

Prelude Response: Prelude had a total of three RAM waste pickups by Veolia: the first 0.47 mCi of 3H on March 24, 2017, the second 1.68 mCi of 3H on June 5, 2017, and the third and final of 3.04 mCi of 3H on November 22, 2017 for a total of 5.19 mCi disposed. No drain disposal, burial, or other methods of waste disposal were utilized. See attached manifests.

- b. records important for decommissioning as described in 30.35(g). Examples of such records include but are not limited to: records of contamination, identifying the radionuclides, quantities and concentrations; as-built drawings and modifications of structures and equipment in restricted areas and locations of inaccessible contamination such as buried pipes; a single list, updated at least every 2 years, of areas to which access is limited for the purpose of radiation protection (restricted areas); and records related to the provision of financial assurance.

Prelude Response: As shown above, RAM use was minimal and limited to only one lab and only one authorized user. Licensed activities occurred for less than one calendar year (from February 16, 2017 to November 21, 2017). A map of the facility was provided with the initial license application and the Final Status Survey. There were no changes made to the facility in the months between. No areas of contamination were found. No spills resulting in fixed contamination occurred during the 9 months of use.

Sincerely,



Kris Vaddi, DVM, Ph.D.
CEO and Founder
Prelude Therapeutics Incorporated
Phone: 302-644-5400
Email: kv@preludetx.com

Enclosure

cc: M. Wang, Prelude
J. Leonard, IES

Attachment A_Facility Wipe Results

c:\users\administrator\prelude therapeutics\microbeta - raw output\wipe test\decommission lab LST 11212017.txt

PROTOCOL INFORMATION:

=====
Name: wipe test
Id: 10

General:

Labels: H-3, C-14
Cassette type: 24 wells, 4 by 6
Quench correction: Off
Assay type: Normal
Paralux used: No
Counting time: 1 min
Detector norm.: PE C14 H3 normalization (52)
Status: n

Corrections:

BGND corr. : Normalization

Counting control:

Precision: 0.20
Repeats: 1
Cycles: 1
Cycle delay: 0
Plate delay: 0
Barcode delay: 0
Cooldown delay disabled
Plate orientation: Normal

Plate map:

Cassette 1 rows: ABCD
Row A: 1 1 1 1 1 1
Row B: 1 1 1 1 1 1
Row C: 1 1 1 1 1 1
Row D: 1 1 1 1 1 1

Other:

Detector setup: Normal
Window 1: 5 - 360
Window 2: 150 - 650
Window 3: 1 - 1

RUN INFORMATION:

=====
Counting protocol no: 10
Name: wipe test
Detector normalization protocol no: 52
MicroBeta² serial number: 5129231

Tue 21-Nov-2017 12:30

COLUMNS:

=====
POS CCPM1 H3_DPM CCPM2 C14_DPM CCPM3 P32_DPM SQP(I)
A01 35 68.1 27 97.7 0 86.9 333.2
A02 9 26.0 6 40.1 0 35.6 351.2
A03 17 42.1 17 63.9 0 56.8 319.2
A04 14 32.1 7 46.3 0 41.2 316.0
A05 10 24.0 3 35.0 0 31.1 0.0
A06 12 32.0 10 48.8 0 43.4 327.3

Attachment A_Facility Wipe Results

B01	0	22.0	22	50.1	0	44.5	423.3
B02	21	46.1	17	67.7	0	60.1	311.1
B03	0	22.0	18	46.4	0	41.2	395.3
B04	13	26.0	1	35.1	0	31.2	330.3
B05	8	20.0	0	28.8	0	25.6	0.0
B06	29	48.1	9	62.6	0	55.7	257.9
C01	0	22.0	14	37.6	0	33.4	0.0
C02	0	24.0	25	48.8	0	43.4	392.8
C03	0	24.0	17	42.6	0	37.8	370.0
C04	13	48.2	25	71.5	0	63.5	314.1
C05	0	8.0	7	18.8	0	16.7	0.0
C06	7	36.0	17	53.8	0	47.8	303.5
D01	6	24.0	3	30.0	0	26.7	0.0
D02	4	22.0	2	27.5	0	24.5	0.0
D03	0	12.0	14	28.8	0	25.6	0.0
D04	0	28.1	19	47.6	0	42.3	391.9
D05	0	14.0	4	21.3	0	18.9	0.0
D06	0	16.0	9	27.5	0	24.5	0.0
Total count rate 1:		199.6	CCPM				
2:		292.0	CCPM				

END

Attachment A_Lab wipe Results

c:\users\administrator\prelude therapeutics\microbeta - raw output\wipe test\decommission hallway LST 11212017.txt

PROTOCOL INFORMATION:

=====
Name: Wipe test
Id: 10

General:

Labels: H-3, C-14
Cassette type: 24 wells, 4 by 6
Quench correction: Off
Assay type: Normal
Paralux used: No
Counting time: 1 min
Detector norm.: PE C14 H3 normalization (52)
Status: n

Corrections:

BGND corr. : Normalization

Counting control:

Precision: 0.20
Repeats: 1
Cycles: 1
Cycle delay: 0
Plate delay: 0
Barcode delay: 0
Cooldown delay disabled
Plate orientation: Normal

Plate map:

Cassette 1 rows: ABC
Row A: 1 1 1 1 1 1
Row B: 1 1 1 1 1 1
Row C: 1 1 1 1 1 1
Row D: 0 0 0 0 0 0

Other:

Detector setup: Normal
Window 1: 5 - 360
Window 2: 150 - 650
Window 3: 1 - 1

RUN INFORMATION:

=====
Counting protocol no: 10
Name: Wipe test
Detector normalization protocol no: 52
MicroBeta² serial number: 5129231

Tue 21-Nov-2017 13:17

COLUMNS:

=====
POS CCPM1 H3_DPM CCPM2 C14_DPM CCPM3 P32_DPM SQP(I)
A01 0 16.0 10 33.8 0 30.1 441.5
A02 0 26.1 22 53.9 0 47.9 414.5
A03 11 22.1 0 30.1 0 26.8 0.0
A04 8 20.1 0 28.9 0 25.7 0.0
A05 10 26.1 5 38.9 0 34.6 352.4
A06 12 32.1 10 48.9 0 43.5 311.5

Attachment A_Lab Wipe Results

B01	32	58.1	18	80.2	0	71.3	291.6
B02	0	18.1	12	37.6	0	33.4	480.4
B03	25	44.2	9	59.0	0	52.4	268.0
B04	18	38.1	11	55.2	0	49.0	326.5
B05	29	52.2	14	71.5	0	63.5	324.7
B06	22	40.1	7	53.9	0	47.9	297.9
C01	4	26.1	8	36.4	0	32.3	308.0
C02	1	40.1	30	68.9	0	61.3	374.5
C03	34	66.2	21	85.2	0	75.8	238.2
C04	23	46.2	9	56.4	0	50.2	206.2
C05	15	48.2	22	69.0	0	61.3	305.9
C06	4	36.1	20	56.4	0	50.2	328.5
Total count rate	1:	248.5	CCPM				
	2:	229.8	CCPM				
END							



SHIPPING DOCUMENT		1. Generator ID Number CESOG	2. Page 1 of 1	3. Emergency Response Phone (877) 818-0087	4. Shipping Document Tracking Number ZZ 00557996		
5. Generator's Name and Mailing Address PRELUDE THERAPEUTICS INC. 550 S COLLEGE AVENUE, SUITE 110 STAR CAMPUS II NEWARK, DE 19713				Generator's Site Address (if different than mailing address) SAME			
Generator's Phone: 302 273-3365							
8. Transporter 1 Company Name VEOLIA ES TECHNICAL SOLUTIONS				U.S. EPA ID Number N J D 0 8 0 6 3 1 3 6 9			
7. Transporter 2 Company Name S J TRANSPORTATION CO INC				U.S. EPA ID Number N J D 0 7 1 6 2 9 9 7 6			
8. Designated Facility Name and Site Address ALARON NUCLEAR SERVICES 2138 STATE ROUTE 18 WAMPUM, PA 16157				U.S. EPA ID Number P A D 9 8 7 4 0 0 1 5 7			
Facility's Phone: 724 535-5777							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Codes
	X	1. UN2910, RADIOACTIVE MATERIAL, EXCEPTED PACKAGE- LIMITED QUANTITY OF MATERIAL, 7	1	D F	16	P	NONE RW399
		2.					
		3.					
		4.					
14. Special Handling Instructions and Additional Information ER Service Contracted by VESTS - 1) DRY ACTIVE WASTE (H3)							
15. GENERATOR S/OFFEROR S CERTIFICATION: 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.							
Generator's/Offeror's Printed/Typed Name Min Wang				Signature <i>Min Wang</i>		Month Day Year 10 6 17	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Shipment							
Transporter 1 Printed/Typed Name Salvatore A. Greco				Signature <i>Salvatore A. Greco</i>		Month Day Year 10 05 17	
Transporter 2 Printed/Typed Name E. Hook				Signature <i>E. Hook</i>		Month Day Year 10 19 17	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Shipping Document Tracking Number: _____							
18b. Alternate Facility (or Generator)				U.S. EPA ID Number			
Facility's Phone: _____							
18c. Signature of Alternate Facility (or Generator)				Signature		Month Day Year	
19. Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)							
1. _____		2. _____		3. _____		4. _____	
20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a							
Printed/Typed Name Jimmy Lease				Signature <i>Jimmy Lease</i>		Month Day Year 10 12 17	

DESIGNATED FACILITY TO GENERATOR

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 FOIA, Privacy and Information Collections Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to InfoCollect.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NE08-10302, (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 (01-2014)		U.S. NUCLEAR REGULATORY COMMISSION UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST SHIPPING PAPER		5. SHIPPER - NAME AND FACILITY PRELUDE THERAPEUTICS INC. 580 S. COLLEGE AVENUE SUITE 110 NEWARK, DE 19713		SHIPPER ID NUMBER CESGG		7. NRC FORM 540 AND 540A PAGE 1 OF 1 PAGE(S) NRC FORM 541 AND 541A PAGE(S) NRC FORM 542 AND 542A PAGE(S) ADDITIONAL INFORMATION None PAGE(S)		8. MANIFEST NUMBER (Use this number on all continuation pages) ZZ00557996	
1. EMERGENCY TELEPHONE NUMBER 877-818-0087		(Include Area Code)		USER PERMIT NUMBER NA		SHIPMENT NUMBER		9. CONSIGNEE - Name and Facility Address Veolia ES Alaron, LLC d/b/a/ Alaron Nuclear Services PA State Route 18 & Park St Wampum, Pa 18157		CONTACT Dan D'Nri TELEPHONE NUMBER (Include Area Code) 724-535-5777	
ORGANIZATION VESTS		3. TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST 1		4. CARRIER - Name and Address Transporter #1 Veolia ES Technical Solutions, I.L.C. 1 Eden Lane Flowers, NJ 07836		Transporter #2 S J Transportation Company US Route 40 Wendover, NJ 08098		EPA ID Number #1 NJD080631369 #2 NJD071639975 Ship Date: 6/5/17 Telephone #1: 973-347-7111 #2: 856-769-2711		SIGNATURE -- Authorized consignee acknowledging waste receipt <i>[Signature]</i> DATE 6-12-17	
2. IS THIS AN "EXCLUSIVE USE" SHIPMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		EPA MANIFEST NUMBER		SIGNATURE -- Authorized carrier acknowledging waste receipt <i>[Signature]</i> Date 6/5/17		EPA ID Number #1 NJD080631369 #2 NJD071639975 Ship Date: 6/5/17 Telephone #1: 973-347-7111 #2: 856-769-2711		10. CERTIFICATION This is to certify that the herein-named materials are acceptable for disposal, 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 and the Commission.		DATE 6-12-17	
4. DOES EPA REGULATED WASTE REQUIRING A MANIFEST ACCOMPANY THIS SHIPMENT? If "Yes," provide Manifest Number		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE -- Authorized carrier acknowledging waste receipt <i>[Signature]</i> Date 6/5/17		EPA ID Number #1 NJD080631369 #2 NJD071639975 Ship Date: 6/5/17 Telephone #1: 973-347-7111 #2: 856-769-2711		AUTHORIZED SIGNATURE <i>[Signature]</i>		TITLE RSC	
11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (Including proper shipping name, hazard class, UN ID number, and any additional information)		12. DOT LABEL "RADIOACTIVE"		13. TRANSPORT INDEX		14. PHYSICAL AND CHEMICAL FORM		15. INDIVIDUAL RADIONUCLIDES		16. TOTAL PACKAGE ACTIVITY (MBq)	
UN 2910, Radioactive material, excepted package-limited quantity of material, 7		NA		NA		SOLID ORGANIC		H-3		6.2160E+01	
										17. LSA/SCO CLASS	
										NA	
										18. TOTAL WEIGHT OR VOLUME (Use appropriate units)	
										16 LBS; 1.89 FT3	
										19. IDENTIFICATION NUMBER OF PACKAGE	
										PJ 2833646000 001-01	
FOR CONSIGNEE USE ONLY											

17-0761

APPROVED BY OMB: NO. 3150-0186
EXPIRES: 12/31/2016

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 estimates to the FOIA, Privacy, and Information Collections Branch (T-8 F33), U.S. Nuclear Regulatory Commission, Washington, DC 20553-0001, or by internet e-mail to infocollections.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOS-1028Z, (3150-0186), Office of Management and Budget, Washington, DC 20503. If a waste 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 (01-2014) U.S. NUCLEAR REGULATORY COMMISSION										1. MANIFEST TOTALS				2. MANIFEST NUMBER				
UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST										NUMBER OF PACKAGES/ DISPOSAL CONTAINERS	NET WASTE VOLUME (m ³)	NET WASTE WEIGHT (kg)	SPECIAL NUCLEAR MATERIAL (grams)				Total	ZZD0557998
													U-233	U-235	Pu			
CONTAINER AND WASTE DESCRIPTION										1	0.0535	7.2575	NP	NP	NP	NP	3. PAGE 1 OF 1 PAGE(S)	
										ACTIVITY (MBq)				SOURCE (kg)				
Additional Nuclear Regulatory Commission (NRC) Requirements for Control, Transfer and Disposal of Radioactive Waste										ALL NUCLIDES	TRITIUM	C-14	Tc-99		I-129	NA	4. SHIPPER NAME PRELUDE THERAPEUTICS INC.	
										6.2160E+01	6.2160E+01	NP	NP	NP	SHIPPER I.D. NUMBER CESQG			
DISPOSAL CONTAINER DESCRIPTION										WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER						16. WASTE CLASSIFICATION		
5. CONTAINER IDENTIFICATION NUMBER/ GENERATOR ID NUMBER(S)	6. CONTAINER DESCRIPTION (See Note 1)	7. VOLUME (m ³)	8. WASTE AND CONTAINER WEIGHT (kg)	9. SURFACE RADIATION LEVEL (uSv/hr) (mSv/hr)	10. SURFACE CONTAMINATION (MBq/100 cm ²)		11. PHYSICAL DESCRIPTION			14. CHEMICAL DESCRIPTION		15. RADIOLOGICAL DESCRIPTION						
				<input checked="" type="checkbox"/>	ALPHA	BETA-GAMMA	11. WASTE DESCRIPTOR (See Note 2)	12. APPROXIMATE WASTE VOLUME(S) IN CONTAINER (m ³)	13. SORBENT/SOLIDIFICATION, STABILIZATION, MEDIA (See Note 3)	14. CHEMICAL FORM/ CHELATING AGENT	WEIGHT % CHELATING AGENT IF > 0.1%	INDIVIDUAL RADIONUCLIDES AND ACTIVITY (MBq) AND CONTAINER TOTAL; OR CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT						
PJ 2833648000 001011/CESQG	1/4 Fiber drum	0.0535	7.2575	<5.0000E+00	<3.6740E-05	<3.6740E-04	39	0.0535	100 100	ORGANIC/NP	NP	H-3	6.2160E+01	NA				
												Total	6.2160E+01					
Shipment Totals		0.0535	7.2575										6.2160E+01					

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

NRC FORM 541 (01-2014)

NOTE 2: Waste Descriptor Codes. (Choose up to three which predominates by volume.)

20. Charcoal	29. Demolition Rubble	38. Evaporator Bottoms/Sludges/Concentrates
21. Incinerator Ash	30. Cation Ion-exchange Media	39. Compacible Trash
22. Soil	31. Anion Ion-exchange Media	40. Noncompacible Trash
23. Gas	32. Mixed Bed Ion-exchange Media	41. Animal Carcass
24. Oil	33. Contaminated Equipment	42. Biological Material (except animal carcass)
25. Aqueous Liquid	34. Organic Liquid (except oil)	43. Activated Material
26. Filter Media	35. Glassware or Labware	59. Other Describe in Item 11, or additional page
27. Mechanical Filter	36. Sealed Source/Device	
28. EPA or State Hazardous	37. Paint or Plating	

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

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



SHIPPING DOCUMENT	1. Generator ID Number	2. Page 1 of 3	3. Emergency Response Phone	4. Shipping Document Tracking Number ZZ00650391		
5. Generator's Name and Mailing Address Generator's Site Address (if different than mailing address)						
Generator's Phone:						
6. Transporter 1 Company Name			U.S. EPA ID Number			
7. Transporter 2 Company Name WASTON / Co Inc			U.S. EPA ID Number PA021625976			
8. Designated Facility Name and Site Address SEARCH NUCLEAR SERVICES 2138 STATE ROUTE 16 WAMPUM, PA 17077			U.S. EPA ID Number			
Facility's Phone: 717 535-5777						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type	11. Total Quantity	12. Unit Wt./Vol.	13. Codes
	1.	1. SEARCH NUCLEAR SERVICES LIMITED QUANTITY MATERIAL				
	2.					
	3.					
	4.					
14. Special Handling Instructions and Additional Information See Service Contract for WASTON 4-1-1 DRY ACTIVE WASTE						
15. GENERATOR S/OFFEROR S CERTIFICATION: 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						
Generator's/Offendor's Printed/Typed Name MIN WANG			Signature 		Month Day Year 	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Shipment					
	Transporter 1 Printed/Typed Name Salvatore A. Sueno			Signature 		Month Day Year 11 22 17
Transporter 2 Printed/Typed Name BRIAN FORD			Signature 		Month Day Year 11 28 17	
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Shipping Document Tracking Number: _____ U.S. EPA ID Number _____						
DESIGNATED FACILITY	18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____					
	Facility's Phone: _____					
	18c. Signature of Alternate Facility (or Generator) _____ Month Day Year					
19. Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)						
1		2		3		4
20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in item 18a						
Printed/Typed Name Francis Owens			Signature 		Month Day Year 11 1 2017	

ASAC # 17-0798

DESIGNATED FACILITY TO GENERATOR
SEARCH CORPORATION

APPROVED BY OMB: NO. 3150-0164
EXPIRES: 12/31/2016

Estimated burden per response to comply with this information collection request: 45 minutes. This unit regarding burden estimate to the FOIA, Privacy and Information Collections Branch (1-8 F33), U.S. Nuclear Affairs, NEOS-10202, (3100-0164), Office of Management and Budget, Washington, DC 20503. If a means respond to the information collection.

NRC FORM 540 (01-2014)		U.S. NUCLEAR REGULATORY COMMISSION UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST SHIPPING PAPER		5. SHIPPER - NAME AND FACILITY PRELUDE THERAPEUTICS INC. 550 S. COLLEGE AVENUE SUITE 110 NEWARK, DE 19713		SHIPPER ID. NUMBER 			
1. EMERGENCY TELEPHONE NUMBER 877-818-0087		<small>(Include Area Code)</small>		USER PERMIT NUMBER NA		TELEPHONE NUMBER		Den D'iri TELEPHONE NUMBER 724-535-5777	
ORGANIZATION VESTS		2. IS THIS AN "EXCLUSIVE USE" SHIPMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		3. TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST 2		6. CARRIER - Name and Address		SIGNATURE - Authorized consignee acknowledging receipt 	
4. DOES EPA REGULATED WASTE REQUIRING A MANIFEST ACCOMPANY THIS SHIPMENT? If "Yes," provide Manifest Number		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		EPA MANIFEST NUMBER		7. CARRIER - Name and Address		10. CERTIFICATION 	
				8. TRANSPORTER #1 Voitia ES Technical Solutions, L.L.C. 1 Eden Lane Flanders, NJ 07836 Contact: Dispatch		TRANSPORTER #2 S J Transportation Company US Route 40 Woodstown, NJ 08098 Dispatch		EPA NJID071629976 Ship 11/27/17 Telephone	
				SIGNATURE - Authorized carrier acknowledging receipt 		SIGNATURE - Authorized carrier acknowledging receipt 		AUTHORIZED SIGNATURE RS	
				11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (including proper shipping name, hazard class, UN ID number, and any additional information)		12. DOT LABEL "RADIOACTIVE"		13. TRANSP INDE:	
				14. PHYSICA CHEMICAL				DATE	
				UN 2910, Radioactive material, excepted package-limited quantity of material, 7		NA		NA	
				UN 2910, Radioactive material, excepted package-limited quantity of material, 7		NA		NA	
FOR CONSIGNEE USE ONLY RECEIVED DEC 11 2017 ALARON CORPORATION									



SHIPPING DOCUMENT		1. Generator ID Number CESQG	2. Page 1 of 1	3. Emergency Response Phone (877) 818-0087	4. Shipping Document Tracking Number ZZ 00604757				
5. Generator's Name and Mailing Address PRELUDE THERAPEUTICS INC. 550 S COLLEGE AVENUE, SUITE 110 STAR CAMPUS II NEWARK, DE 19713				Generator's Site Address (if different than mailing address) SAME					
Generator's Phone: 302 273-3365		6. Transporter 1 Company Name VEOLIA ES TECHNICAL SOLUTIONS		U.S. EPA ID Number N J D 0 8 0 6 3 1 3 6 9					
7. Transporter 2 Company Name S J TRANSPORTATION CO INC.		U.S. EPA ID Number N J D 0 7 1 6 2 9 9 7 6							
8. Designated Facility Name and Site Address ALARON NUCLEAR SERVICES 2138 STATE ROUTE 18 WAMPUM, PA 16157		U.S. EPA ID Number P A D 9 8 7 4 0 0 1 5 7							
Facility's Phone: 724 535-5777									
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Codes	
	X	1. UN2910, RADIOACTIVE MATERIAL, EXCEPTED PACKAGE-LIMITED QUANTITY OF MATERIAL, 7		No.	Type	15	P	NONE	
		2.						RW399	
		3.							
		4.							
14. Special Handling Instructions and Additional Information ER Service Contracted by VESTS - 1) DRY ACTIVE WASTE H3									
15. GENERATOR S/OFFEROR S CERTIFICATION: 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.									
Generator's/Officer's Printed/Typed Name MIN WANG				Signature <i>[Signature]</i>		Month Day Year 03 24 17			
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
17. Transporter Acknowledgment of Receipt of Shipment									
Transporter 1 Printed/Typed Name Schwartz A Bruno				Signature <i>[Signature]</i>		Month Day Year 03 29 17			
Transporter 2 Printed/Typed Name RCSIPPY JR				Signature <i>[Signature]</i>		Month Day Year 03 31 17			
18. Discrepancy									
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
Shipping Document Tracking Number: _____									
18b. Alternate Facility (or Generator) U.S. EPA ID Number _____									
Facility's Phone: _____									
18c. Signature of Alternate Facility (or Generator) Month Day Year _____									
19. Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)									
1.		2.		3.		4.			
20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a									
Printed/Typed Name Francis Owens				Signature <i>[Signature]</i>		Month Day Year APR 10 3 12017			

RECEIVED

APR 10 3 12017

DESIGNATED FACILITY TO GENERATOR

ALARON CORPORATION

17-0280

APPROVED BY OMB: NO. 2190-0184
EXPIRES: 12/31/2018

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 FOIA, Privacy and Information Collection Branch (T-5 F5B), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by Internet e-mail to infocollections@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEGB-10206, (3150-0184), 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 (01-2014)		U.S. NUCLEAR REGULATORY COMMISSION UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST SHIPPING PAPER		5. SHIPPER - NAME AND FACILITY PRELUDE THERAPEUTICS INC. 698 S. COLLEGE AVENUE SUITE 110 NEWARK, DE 19713		SHIPPER I.D. NUMBER CESQG <input type="checkbox"/> COLLECTOR <input type="checkbox"/> PROCESSOR <input checked="" type="checkbox"/> GENERATOR TYPE (Specify) M		7. NRC FORM 540 AND 540A PAGE 1 OF 1 PAGE(S) NRC FORM 541 AND 541A PAGE(S) NRC FORM 542 AND 542A NAME PAGE(S) ADDITIONAL INFORMATION PAGES		8. MANIFEST NUMBER (Use this number on all continuation pages) Z20004757							
ORGANIZATION VESTS				USER PERMIT NUMBER NA		SHIPMENT NUMBER		TELEPHONE NUMBER (Include Area Code) 302-273-3365		CONTACT Dan D'Amico TELEPHONE NUMBER (include Area Code) 724-535-5777 DATE 04-03-17							
2. IS THIS AN "EXCLUSIVE USE" SHIPMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		3. TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST 1		6. CARRIER - Name and Address Transporter #1 Veolia ES Technical Solutions, L.L.C. 1 Eden Lane Flinders, NJ 07836 Transporter #2 S J Transportation Company US Route 40 Woodstown, NJ 08096 Contact: Dispatch Contact: Dispatch				EPA ID Number #1 NUD002631369 #2 NUD071629976 Ship Date: 3/24/17 Telephone #1: 973-347-2111 #2: 856-769-2741		SIGNATURE - Authorized person acknowledging waste receipt <i>[Signature]</i> DATE 04-03-17							
4. DOES EPA REGULATED WASTE REQUIRING A MANIFEST ACCOMPANY THIS SHIPMENT? If "Yes," provide Manifest Number		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		EPA MANIFEST NUMBER		10. CERTIFICATION This is to certify that the herein-named materials are acceptable for disposal, 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 and the Commission.											
11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (Including proper shipping name, hazard class, UN ID number, and any additional information)		12. DOT LABEL "RADIOACTIVE"		13. TRANSPORT INDEX		14. PHYSICAL AND CHEMICAL FORM		15. INDIVIDUAL RADIONUCLIDES		16. TOTAL PACKAGE ACTIVITY (mCi)		17. LS/SCO CLASS		18. TOTAL WEIGHT OR VOLUME (Use appropriate units)		19. IDENTIFICATION NUMBER OF PACKAGE	
UN 2810, Radioactive material, excepted package-limited quantity of material, 7		NA		NA		SOLID ORGANIC		H-3		1.7390E+01		NA		15 LBS; 1.89 FT3		PJ 2783223000 001-01	
FOR CONSIGNEE USE ONLY																	
<p>RECEIVED</p> <p>APR 03 2017</p> <p>ARSH04#17-0200</p> <p>ALARON CORPORATION</p>																	

NRC FORM 540 (1-2014)