

CERTIFICATE OF DISPOSITION OF MATERIALS

PLEASE READ THESE INSTRUCTIONS BEFORE COMPLETING NRC FORM 314.

Subpart E of 10 CFR Part 20 establishes the radiological criteria for license terminations/decommissioning of facilities licensed under 10 CFR Parts 30, 40, 50, 60, 61, 70, and 72, as well as other facilities subject to the Commission's jurisdiction under the Atomic Energy Act of 1954, as amended, and the Energy Reorganization Act of 1974, as amended.

INSTRUCTIONS

Section B, Item 2.

Licensees should describe the specific radioactive material transfer actions. If radioactive wastes were generated in terminating this license, the licensee should describe the disposal actions taken, including the disposition of low-level radioactive waste, mixed waste, greater-than-Class-C waste, and sealed sources.

Section B, Item 2.a.

The information provided concerning the transfer of radioactive material to another licensee should specify the date of the transfer, the name of the licensee recipient, an individual contact name and telephone number for the licensee recipient, and the recipient's NRC or Agreement State license number.

Section B, Item 2.b.

For disposal of radioactive materials, licensees should describe the specific disposal method or procedure (e.g., decay-in-storage). For those cases when radioactive materials are disposed of by a licensed disposal site or by a waste contractor, the licensee should specify the name, address, and telephone number of the licensed disposal site operator or waste contractor.

Section B, Item 2.c.

"Residual radioactivity," as defined in 10 CFR 20.1003, means radioactivity in 'areas' (structures, materials, soils, etc.) remaining as a result of activities (licensed and unlicensed) under the licensee's control from sources used by the licensee, excluding background radiation. ALARA is defined in 10 CFR 20.1003.

FILE CERTIFICATES AS FOLLOWS:

IF YOU ARE LOCATED IN:

ALABAMA, CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, FLORIDA, GEORGIA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, NORTH CAROLINA, PENNSYLVANIA, PUERTO RICO, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, VERMONT, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND CERTIFICATES TO:

LICENSING ASSISTANT SECTION
NUCLEAR MATERIALS SAFETY BRANCH
U.S. NUCLEAR REGULATORY COMMISSION, REGION I
2100 RENAISSANCE BOULEVARD, SUITE 100
KING OF PRUSSIA, PA 19406-2713

ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND CERTIFICATES TO:

MATERIALS LICENSING SECTION
U.S. NUCLEAR REGULATORY COMMISSION, REGION III
2443 WARRENVILLE ROAD, SUITE 210
LISLE, IL 60532-4352

IF YOU ARE LOCATED IN:

ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MISSISSIPPI, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND CERTIFICATES TO:

MATERIAL RADIATION PROTECTION SECTION
U. S. NUCLEAR REGULATORY COMMISSION, REGION IV
1600 E. LAMAR BOULEVARD
ARLINGTON, TX 76011-4511



**CERTIFICATE OF DISPOSITION
OF MATERIALS**

Estimated burden per response to comply with this mandatory collection request: 30 minutes. This submittal is used by NRC as part of the basis for its determination that the facility is released for unrestricted use. Send comments regarding burden estimate to the FOIA, Privacy, and Information Collections Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by e-mail to Infocollections.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0028), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

LICENSEE NAME AND ADDRESS St. Catherine Regional Hospital 2200 Market Street Charlesotwn, IN 47111	LICENSE NUMBER	DOCKET NUMBER
	13-23655-01	
LICENSE EXPIRATION DATE		

A. LICENSE STATUS (Check the appropriate box)

- This license has expired. This license has not yet expired; please terminate it.

B. DISPOSAL OF RADIOACTIVE MATERIAL

(Check the appropriate boxes and complete as necessary. If additional space is needed, provide attachments)

The licensee, or any individual executing this certificate on behalf of the licensee, certifies that:

- 1. No radioactive materials have ever been procured or possessed by the licensee under this license.
- 2. All activities authorized by this license have ceased, and all radioactive materials procured and/or possessed by the licensee under this license number cited above have been disposed of in the following manner.
 - a. Transfer of radioactive materials to the licensee listed below:
Energy Solutions, 1500 Bear Creek Rd., Oak Ridge, TN 37830
 - b. Disposal of radioactive materials:
 - 1. Directly by the licensee:
 - 2. By licensed disposal site:
 - 3. By waste contractor:
 - c. All radioactive materials have been removed such that any remaining residual radioactivity is within the limits of 10 CFR Part 20, Subpart E, and is ALARA.

C. SURVEYS PERFORMED AND REPORTED

- 1. A radiation survey was conducted by the licensee. The survey confirms:
 - a. the absence of licensed radioactive materials
 - b. that any remaining residual radioactivity is within the limits of 10 CFR 20, Subpart E, and is ALARA.
- 2. A copy of the radiation survey results:
 - a. is attached; or b. is not attached (Provide explanation); or c. was forwarded to NRC on: _____ Date
- 3. A radiation survey is not required as only sealed sources were ever possessed under this license, and
 - a. The results of the latest leak test are attached; and/or
 - b. No leaking sources have ever been identified.

The person to be contacted regarding the information provided on this form:

NAME	TITLE	TELEPHONE (Include Area Code)	E-MAIL ADDRESS
James H Wesp	CEO	502-386-0767	502-386-0767

Mail all future correspondence regarding this license to:
2100 Market Street, Charlestown, IN 47111

C. CERTIFYING OFFICIAL
I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT

PRINTED NAME AND TITLE	SIGNATURE	DATE
James H. Wesp, CEO		02-22-2018

WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECT. 18 U.S.C. SECTION 1001 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.

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 Services Branch (7-6 F52), U.S. Nuclear Regulatory Commission, Washington, DC 20545-0001, or by Internet e-mail to info@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOS-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.

FORM 541 EnergySolutions, Bear Creek Processing Operations										1. MANIFEST TOTALS				2. MANIFEST NUMBER			
UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST										NET WASTE VOLUME		NET WASTE WEIGHT		SPECIAL NUCLEAR MATERIAL (grams)		3. PAGE 1 OF 1 PAGE(S)	
CONTAINER AND WASTE DESCRIPTION										U-234		U-235		Pu		TOTAL	
Additional Nuclear Regulatory Commission (NRC) Requirements for Control, Transfer and Disposal of Radioactive Waste										ACTIVITY (MBq/mCi) (LID UNITS IN µCi/cc)		Tc-99		I-129		SOURCE	
DISPOSAL CONTAINER DESCRIPTION										ALL NUCLIDES		TRITIUM		C-14		SHIPMENT ID NUMBER	
WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER										MBq		NP		NP		NP	
16. WASTE CLASSIFICATION										mCi		NP		NP		NP	
6. CONTAINER IDENTIFICATION NUMBER/GENERATOR NUMBER	7. CONTAINER DESCRIPTION (See Note 1) PROCESS REQUESTED (See Note 1A) BURIAL/DISPOSITION (See Note 2A)	8. VOLUME m ³ / ft ³	9. WASTE AND CONTAINER WEIGHT kg / lb	10. SURFACE RADIATION LEVEL mSv/hr / µR/hr	11. SURFACE CONTAMINATION MBq/100 cm ² / µCi/100 cm ²	12. PHYSICAL DESCRIPTION	13. APPROXIMATE WASTE VOLUME(S) IN CONTAINER m ³ / ft ³	14. SOLIDIFICATION OR STABILIZATION MEDIA (See Note 3)	15. CHEMICAL FORM/ CHELATING AGENT	16. WEIGHT % CHELATING AGENT IF > 0.1%	17. RADIOLOGICAL DESCRIPTION	18. INDIVIDUAL RADIONUCLIDES AND ACTIVITY AND CONTAINER TOTAL ACTIVITY AND RADIONUCLIDE PERCENT	19. MBq	20. mCi	21. CLASSIFICATION		
4 - Powerpack Container																	
18-000250 (SCH-01)	19 Other Fiber Box	0.1300	3.63	2.000E-02	< 3.3400E-07	< 1.6700E-05	59(PLASTIC)	0.1300	100	SOLID OXIDES / NP	NP	OX-57	2.6086E-02	6.7800E-04	AU		
4725	C	4.5908	8.00	2.0000E+00	< 2.0000E+01	< 1.0000E+03		4.5908				SUB TREN	2.5086E-02	6.7800E-04			
												Package Total	2.5086E-02	6.7800E-04			
Shipments Total		0.1300	3.63									2.5086E-02	6.7800E-04				
		4.5908	8.00														

NOTE 1: Container Description Codes. For containers whose disposal is approved structural casks, the numerical code must be followed by "CB".

1. Glass Box or Crate	8. Drum/Canister
2. Metal Box	9. Drum/Canister
3. Plastic Drum or Pail	10. Bulk Unpackaged Waste
4. Metal Drum or Pail	11. Bulk Unpackaged Waste
5. Metal Tank or Liner	12. Unpackaged Component
6. Concrete Tank or Liner	13. High Integrity Container
7. Polyethylene Tank or Liner	14. Other: Describe in Item 6 or additional page
8. Fiberglass Tank or Liner	

NOTE 1A: Process Requested

C. Compositon
SR. Sewer Relieving
DI. Direct Incineration
S. Sort & Re-eman
D. Decay
C. Clean to Clean
M. Metal Melt
T. Trap-Stop
LI. Liquid for Incineration
DI. Oil for Incineration
O. Other (Describe)

NOTE 2: Waste Description Codes. (Choose up to three which predominate by volume.)

19. Charcoal	24. Demolition Rubble	38. Explosive/Pyrotechnic/Strategic Concentration
20. Incinerator Ash	25. Carbon Ion-exchange Media	39. Compressible Trash
21. Soil	26. Mixed Bed Ion-exchange Media	40. Noncompressible Trash
22. Gas	27. Contaminated Equipment	41. Animal Carcass
23. Oil	28. Organic Liquid (except oil)	42. Biological Hazard (except animal carcass)
24. CB	29. Concrete or Limestone	43. Amorphous Material
25. Aquatic Liquid	30. Sewage or Litter	44. Other: Describe in Item 11, or additional page
26. Filter Media	31. Solid Source/Device	
27. Mechanical Filter	32. Paper or Plastic	
28. EPA or State Hazardous		

NOTE 2A: Burial/Disposition Site

B. Bear Creek Waste Management Facility
E. EnergySolutions / Other
R. Richland, WA
PR. Property and Return
O. Other

NOTE 3: Solidification and Stabilization Media Codes. (Choose up to three which predominate by volume.) For media meeting disposal site structural stability requirements, the numerical code must be followed by "S" and the media number and brand name must also be identified in Item 14. Code "S0" Name Required

Solidification:	84. Vinyl Ester Styrene
80. Cement	89. Other: Describe in Item 13, or additional page
91. Concrete (encapsulation)	92. Bitumen
93. Bitumen	100. Name Required
94. Vinyl Chloride	

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-6 P32), 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, NEOH-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.

FORM 540 EnergySolutions, Bear Creek Processing Operations UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST SHIPPING PAPER		5. SHIPPER - NAME AND FACILITY St. Catherine Hospital 2200 Market Street Charleston, IN 47111		SHIPMENT ID NUMBER 0212018(LINW)	7. FORM 540 AND 540A FORM 541 AND 541A FORM 542 AND 542A ADDITIONAL INFORMATION	PAGE 1 OF 1 PAGE(S) 1 PAGE(S) NONE PAGE(S) NONE PAGE(S)	8. MANIFEST NUMBER (Use this number on all continuation pages) 0218SCH		
1. EMERGENCY TELEPHONE NUMBER (Include Area Code) (800) 424-9300 ORGANIZATION CHEMTRAC / CNRS25454		USER PERMIT NUMBER SHIPMENT NUMBER 0218SCH		X GENERATOR TYPE (Specify) M	9. CONSIGNEE - Name and Facility Address EnergySolutions, Bear Creek Processing Operations Operated By EnergySolutions 1560 Bear Creek Road Oak Ridge, TN 37630		CONTACT Fred Schulz TELEPHONE NUMBER (Include Area Code) (865) 481-0222		
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 ***** 1	6. CARRIER - Name and Address Bionomics, Inc. 1560 Bear Creek Road Oak Ridge, TN 37830		Truck #: Trailer #:	EPA ID NUMBER TND982116493	SIGNATURE - Authorized consignee acknowledging waste receipt			
4. DOES EPA REGULATED WASTE REQUIRING A MANIFEST ACCOMPANY THIS SHIPMENT? If "Yes", provide Manifest Number *****	EPA MANIFEST NUMBER N/A	CONTACT John M. Cormick		TELEPHONE NUMBER (Include Area Code) 865-220-8501	SHIPPING DATE 02/16/2018	10. CERTIFICATION 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 in proper condition for transportation and disposal in accordance with the requirements of 10 CFR Parts 20 and 61, or equivalent state regulation.			
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 mCi	17. LSA/SCO CLASS	18. TOTAL WEIGHT OR VOLUME (Use appropriate units)	19. IDENTIFICATION NUMBER OF PACKAGE
Non-Radioactive per DOT PLASTIC 1 - 0.13 M3 FIBER BOX		NA	NA	SOLID/OXIDES	CO-57	2.50B6E-02 (6.7800E-04)	NA	4.59 ft ³ 9.00 ft ³	SCH-01 (18-000259)
FOR CONSIGNEE USE ONLY Tennessee "License For Delivery" No. _____ South Carolina Transport Permit No. _____ US Ecology Generator No. _____ US Ecology Permit No. _____			20. Generator Certification Statement A) Radioactive Materials. Certification is hereby made that this shipment of low-level radioactive waste has been prepared in accordance with a radioactive waste management program which has been approved by the Nuclear Regulatory Commission or an Agreement State regulatory agency and with the current edition of the Low-Level Radioactive Waste Acceptance Criteria. B) Hazardous Materials. Generator hereby certifies that this material does not contain a hazardous waste as defined in 40 CFR 263. C) Date. Generator hereby represents and warrants that all data set forth in this (UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST) are true and correct in all respects and in accordance with all applicable governmental laws, rules, regulations and site Radioactive Material Licenses. D) INFECTIOUS SUBSTANCE. Generator hereby certifies that this material does not contain an infectious substance as defined in 49CFR 173.134 Robert Doley Print Name Fred Schulz Signature 2/16/2018 Date						

Song, Taehoon

From: Forster, Sara
Sent: Friday, February 23, 2018 9:22 AM
To: Pavon, Sandy; Sandrik, Lauren; Song, Taehoon
Subject: FW: RE: FW: Bionomics
Attachments: NRC314 St. Catherine Hospital.pdf; Bionomics_waste manifestsRcvd02222018.pdf

Please scan in and return to me. It is info to Lic. 13-23655-01 for a new termination request.

From: James Wesp [mailto:JWesp@Dhvaj.com]
Sent: Thursday, February 22, 2018 3:49 PM
To: Forster, Sara <Sara.Forster@nrc.gov>
Cc: Brenda Sheehan <BSheehan@Dhvaj.com>; Jayesh Sheth Gmail <jsheth12@gmail.com>
Subject: [External_Sender] RE: FW: Bionomics

Sara,

The NRC 314 is attached. Please attach to the manifests sent yesterday. I trust this completes the termination process.

Jim Wesp

CEO
Dhvaj, Inc.
North Clark Community Hospital
2200 Market Street
Charlestown, IN 47111
812-220-5220

From: Forster, Sara [mailto:Sara.Forster@nrc.gov]
Sent: Thursday, February 22, 2018 11:49 AM
To: James Wesp <JWesp@Dhvaj.com>
Cc: Brenda Sheehan <BSheehan@Dhvaj.com>
Subject: RE: FW: Bionomics

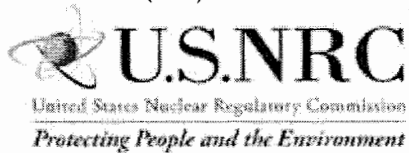
Thank you for the information, Mr. Wesp. Unfortunately, the NRC cannot process this information except under a signed and dated termination request. When do you plan to submit the NRC Form 314 (or equivalent)?

When you submit the NRC Form 314, please attach copies of the waste manifests referenced below.

Sincerely,

Sara A. Forster, Health Physicist Licensing Reviewer
U.S. Nuclear Regulatory Commission - Region III
Division of Nuclear Materials Safety
2443 Warrenville Rd. - Ste. 210

Lisle, IL 60532-4352
sara.forster@nrc.gov
Direct: (630) 829-9892
Facsimile: (630) 515-1078



From: James Wesp [<mailto:JWesp@Dhvaj.com>]
Sent: Thursday, February 22, 2018 9:13 AM
To: Forster, Sara <Sara.Forster@nrc.gov>
Cc: Jayesh Sheth Gmail <jsheth12@gmail.com>
Subject: [External_Sender] FW: Bionomics
Importance: High

Sara,

Here are the signed manifests for the disposition of the radioactive material in our hot lab. It is no void of any radioactive material.

Jim Wesp

CEO
Dhvaj, Inc.
North Clark Community Hospital
2200 Market Street
Charlestown, IN 47111
812-220-5220

From: Brenda Sheehan
Sent: Friday, February 16, 2018 1:17 PM
To: James Wesp <JWesp@Dhvaj.com>
Subject: Bionomics
Importance: High

Greetings Jim,

Bionomics left this paperwork for you. I have made copies of it. I will place it in Zoho.

Thanks,
Brenda

Brenda Sheehan
Administrative Assistant
Dhvaj, Inc.

North Clark Community Hospital
2200 Market St.
Charlestown, IN 47111
Office: (812) 220-5220 ext. 406
<mailto:BSheehan@DHVAJ.com>