

6 - Pages

HelvetiaTime

100 N WILKES-BARRE BLVD. SUITE 303 WILKES-BARRE, PA 18702
TELEPHONE: 870-822-1900 FAX: 870-822-4890

37-30532-01
03035199

U.S. Nuclear Regulatory Commission
Washington, DC 20555-0001

12/01/04

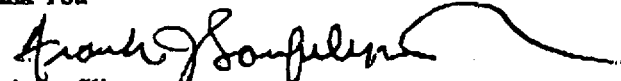
Attn: Leah Tremper

This letter is to advise you that Helvetia Time Corp is no longer in business and we have no need to renew the license numbers AM0411-05 and AM0412-05 please see attached copies.

(RE)

(H.A. LIC.)
ACTION

Thank You


Frank Sanfilippo

136078

NMSS/RGNI MATERIALS-002

REC'D IN LAT DEC - 6 2004

(5-2004)
10 CFR 20.380(1); 40.420(1);
70.380(1); and 70.400(1)

Estimated burden per response to comply with this mandatory collection request: 30 minutes. This submission is used by NRC as part of the basis for its determination that the facility is released for unrestricted use. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (7-6 F&Z), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to info.comments@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEGB-10202, (3160-0020), Office of Management and Budget, Washington, DC 20503. If a record 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

HELVETIA TIME CORP
SUITE 303
100 N. WILKES-BARRE BLVD
WILKES-BARRE, PA 18702

LICENSE NUMBER

Am0411-05

DOCKET NUMBER

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:
- ☐ b. Disposal of radioactive materials:
- COMPANY OUT OF BUSINESS
- ☐ 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: _____
- ☐ 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: FRANK SANFILIPPO TITLE: VP TELEPHONE (include Area Code): 570-822-1900 E-MAIL ADDRESS: _____

Mail all future correspondence regarding this license to:

C. CERTIFYING OFFICIAL

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

PRINTED NAME AND TITLE

SIGNATURE

DATE

WARNING: FALSIFYING OR MISREPRESENTING INFORMATION MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. THE SIGNATURE OF ANY PERSON MAKING A SUBMISSION TO THE NRC MUST BE COMPLETELY AND ACCURATE IN ALL MATERIAL RESPECT. IF 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.

U. S. NUCLEAR REGULATORY COMMISSION
 FY 2005 Annual Materials Fee Invoice
 Period 10/1/2004 - 9/30/2005
 10 CFR 171.16

Invoice Date

=====

11/01/2004

License Anniversary Month

=====

November

Invoice Number

=====

AM0411-05

HELVETIA TIME CORPORATION

ATTENTION: RADIATION SAFETY OFFICER

SUITE 303

100 N. WILKES BARRE BLVD.

WILKES BARRE

PA 18702

***** Mark THIS COPY with any billing address changes *****

License/Approval/
 Registration/
 Certificate Number

=====

37-30532-01

Code

AA905

=====

ANN

Annual Fee

Category(s)

=====

3P

Fee Amount

=====

\$ 2,500.00

TOTAL:

\$ 2,500.00

TOTAL INVOICE:

\$ 2,500.00

If paid by Fedwire see attached Terms and Conditions. If paid by check,
 make check payable to the NRC (reference Invoice no.) and mail to:

=====

U.S. Nuclear Regulatory Commission

License Fee & Accounts Receivable Branch

P.O. Box 954514

St. Louis, MO 63195-4514

<=== This PO Box address is

<=== for receipt of payments

<=== only.

For terms and conditions see attached.

Payment must be received within 30 days of the
 date of this invoice to avoid late charges.

Questions: call 301/415-7554

 *
 * P A Y M E N T C O P Y *
 *

===> To ensure accurate credit, return this copy of the <===
 ===> invoice with your payment. Processing may be <===
 ===> delayed if the invoice is not included. <===

BETWEEN: : (FOR LFMS USE)
: INFORMATION FROM LTS
: -----
:
License Fee Management Branch, ARM : Program Code: 03214
and : Status Code: 0
Regional Licensing Sections : Fee Category: 3P
: Exp. Date: 20091130
: Fee Comments: _____
: Decom Fin Assur Req'd: N
: ::::::::::::::::::::::::::::::::::

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED

Applicant/Licensee: HELVETIA TIME CORPORATION
Received Date: 20041206
Docket No: 3035199
Control No.: 136078
License No.: 37-30532-01
Action Type: Termination

2. FEE ATTACHED

Amount: _____
Check No.: _____

3. COMMENTS

Signed M. A. Perkins
Date 12/7/09

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered /__/)

1. Fee Category and Amount: _____

2. Correct Fee Paid. Application may be processed for:

Amendment _____
Renewal _____
License _____

3. OTHER _____

Signed _____
Date _____