

NRC FORM 314 (6-2004) 10 CFR 30.36(j)(1); 40.42(j)(1); 70.38(j)(1); and 72.54(j)(1)	U.S. NUCLEAR REGULATORY COMMISSION	APPROVED BY OMB: NO. 3150-0028 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 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, (3150-0028), 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.	EXPIRES: 06/30/2007
CERTIFICATE OF DISPOSITION OF MATERIALS			
LICENSEE NAME AND ADDRESS <i>Litwar Processing Co. LLC</i> <i>P.O. Box 727</i> <i>Iaeger, WV 24844</i>		LICENSE NUMBER <i>47-23098-01</i>	DOCKET NUMBER <i>030-22315</i>
		LICENSE EXPIRATION DATE <i>3-31-2011</i>	
A. LICENSE STATUS (Check the appropriate box) <input type="checkbox"/> This license has expired. <input checked="" type="checkbox"/> 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:			
<input type="checkbox"/> 1. No radioactive materials have ever been procured or possessed by the licensee under this license.			
<input checked="" type="checkbox"/> 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:			
<input checked="" type="checkbox"/> a. Transfer of radioactive materials to the licensee listed below:			
<i>Troxler Electronic Laboratories, Inc</i> <i>3008 Cornwallis Road</i> <i>P.O. Box 12057</i> <i>Research Triangle Park, NC</i> <i>27709</i>			
<input type="checkbox"/> b. Disposal of radioactive materials:			
<input type="checkbox"/> 1. Directly by the licensee:			
<input type="checkbox"/> 2. By licensed disposal site:			
<input type="checkbox"/> 3. By waste contractor:			
<i>North Carolina Radioactive Materials</i> <i>License # 032-0182-1</i>			
<input type="checkbox"/> 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			
<input type="checkbox"/> 1. A radiation survey was conducted by the licensee. The survey confirms:			
<input type="checkbox"/> a. the absence of licensed radioactive materials			
<input type="checkbox"/> b. that any remaining residual radioactivity is within the limits of 10 CFR 20, Subpart E, and is ALARA.			
<input type="checkbox"/> 2. A copy of the radiation survey results:			
<input type="checkbox"/> a. is attached; or <input type="checkbox"/> b. is not attached (Provide explanation); or <input type="checkbox"/> c. was forwarded to NRC on: _____ Date			
<input type="checkbox"/> 3. A radiation survey is not required as only sealed sources were ever possessed under this license, and			
<input type="checkbox"/> a. The results of the latest leak test are attached; and/or <input type="checkbox"/> b. No leaking sources have ever been identified.			
The person to be contacted regarding the information provided on this form:			
NAME <i>Garnie Kennedy</i>	TITLE <i>General Manager</i>	TELEPHONE (Include Area Code) <i>304-938-5700</i>	E-MAIL ADDRESS <i>gkennedy@alpha-nr.com</i>
Mail all future correspondence regarding this license to: <i>P.O. Box 727, Iaeger, WV 24844</i>			
C. CERTIFYING OFFICIAL I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT			
PRINTED NAME AND TITLE <i>Garnie Kennedy, General Manager</i>	SIGNATURE <i>Garnie Kennedy</i>	DATE <i>6-27-06</i>	
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.			