

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
475 ALLENDALE ROAD
KING OF PRUSSIA, PA 19406-1415

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

RECEIVED APR 23 2012

(1-2012)
10 CFR 30.36(j)(1); 40.42(j)(1);
70.38(j)(1); and 72.54(k)(5)(1)(1)

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 Information Services Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects.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

Crane Army Ammunition Activity
300 Highway 361
Crane, IN 47522-5099

LICENSE NUMBER

13-18235-01

DOCKET NUMBER

030-14708

LICENSE EXPIRATION DATE

11/30/2011

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: **DATE: 11 APR 2012**
Southwest Research Institutes (SwRI) LO4958 NOTE: Neutron Products (License # 19-25203-01) removed/shipped to SwRI
POC: Jim Durham 210/522-6934
- ☐ 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
Walter F. Shearin	Radiation Safety Officer	(812) 854-1246	walter.f.shearin.civ@mail.mil

Mail all future correspondence regarding this license to:

Walter F. Shearin, Crane Army Ammunition Activity, ATTN: JMCN-SF, 300 HWY 361, Crane, IN 47522-5099

C. CERTIFYING OFFICIAL

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

PRINTED NAME AND TITLE	SIGNATURE	DATE
Norman R. Thomas, Civilian Executive Assistant		04/18/2012

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.

Submit by Email

NRC FORM 748

(6-2010)
10 CFR 20.2207

U.S. NUCLEAR REGULATORY COMMISSION

APPROVED BY OMB: NO. 3150-0202

EXPIRES: 12/31/2012

NATIONAL SOURCE TRACKING TRANSACTION REPORT

Estimated burden per response to comply with this mandatory information collection request: 9.5 minutes. NRC requires this information to populate the National Source Tracking System for certain sealed sources. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to infocollects.resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0202), 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.

1. LICENSEE INFORMATION

A. LICENSEE NAME CRANE ARMY AMMUNITION ACTIVITY	B. LICENSE NO. 13-18235-01	C. LICENSEE STREET ADDRESS 300 HWY. 361	D. CITY CRANE	E. STATE IN	F. ZIP CODE 47522-5099
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2. TRANSACTION DATE

3A. TRANSACTION INFORMATION

3B. TRANSACTION TYPE (Check all that apply)

(Only transactions completed on the same date may be reported together on this form)

04/11/2012☒ NEW☐ CORRECTION

IF CORRECTION, PREVIOUS TRANSACTION DATE:

☐ REPORT SOURCE
INVENTORY☒ TRANSFER☐ RECEIPT☐ DISPOSAL☐ NEW SOURCE
MANUFACTURED☐ IMPORT☐ EXPORT☐ DISASSEMBLE

4. PREPARER INFORMATION

A. NAME OF PREPARER Patricia Staggs	B. DATE PREPARED 04/16/2012	C. PREPARER PHONE 812-854-4069	D. PREPARER E-MAIL (REQUIRED FOR CONFIRMATION) patricia.s.staggs.civ@mail.mil
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6. SOURCE TRANSFER DATA

A1. RECEIVING LICENSEE NAME Southwest Research Institute	B1. RECEIVING LICENSEE LICENSE NO. L04958	C1. RECEIVING LICENSEE SHIPPING ADDRESS 6220 Culebra Road	D1. CITY San Antonio	E1. STATE TX	F1. ZIP CODE 78238		
G1. SOURCE MAKE Neutron Products	H1. SOURCE MODEL NPTT-SERIES	I1. SOURCE SERIAL NUMBER T-1528	J1. ISOTOPE Co-60	K1. ACTIVITY AND UNIT 1203 Ci	L1. ACTIVITY DATE 04/11/2012	M1. WASTE MANIFEST NO. (For waste shipments only)	N1. CONTAINER ID (For waste shipments only)
O1. ESTIMATED ARRIVAL DATE 04/13/2012	P1. COMMENTS						

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 RESPECTS. 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.

NRC FORM 748 (6-2010) 10 CFR 20.2207		U.S. NUCLEAR REGULATORY COMMISSION NATIONAL SOURCE TRACKING TRANSACTION REPORT (continued)			LICENSEE NAME CRANE ARMY AMMUNITION ACTIVITY		LICENSE NO. 13-18235-01		
6. SOURCE TRANSFER DATA (continued)									
A2. RECEIVING LICENSEE NAME		B2. RECEIVING LICENSEE LICENSE NO.		C2. RECEIVING LICENSEE SHIPPING ADDRESS		D2. CITY		E2. STATE	F2. ZIP CODE
G2. SOURCE MAKE		H2. SOURCE MODEL		I2. SOURCE SERIAL NUMBER	J2. ISOTOPE	K2. ACTIVITY AND UNIT	L2. ACTIVITY DATE	M2. WASTE MANIFEST NO. (For waste shipments only)	N2. CONTAINER ID (For waste shipments only)
O2. ESTIMATED ARRIVAL DATE		P2. COMMENTS							
A3. RECEIVING LICENSEE NAME		B3. RECEIVING LICENSEE LICENSE NO.		C3. RECEIVING LICENSEE SHIPPING ADDRESS		D3. CITY		E3. STATE	F3. ZIP CODE
G3. SOURCE MAKE		H3. SOURCE MODEL		I3. SOURCE SERIAL NUMBER	J3. ISOTOPE	K3. ACTIVITY AND UNIT	L3. ACTIVITY DATE	M3. WASTE MANIFEST NO. (For waste shipments only)	N3. CONTAINER ID (For waste shipments only)
O3. ESTIMATED ARRIVAL DATE		P3. COMMENTS							
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 RESPECTS. 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.									

CAAA RADIOLOGICAL SURVEY REPORT

PERSON (S) PERFORMING SURVEY & PHONE NUMBER: Pamela Morrison (812) 854-5472 Robert Gillis (812) 854-6968	START DATE & TIME : 4-17-12 1300	END DATE & TIME: 4-17-12 1400	SURVEY TYPE (circle all that apply) : CONTAMINATION / RADIATION
NRMP OR NRC LICENSE NUMBER: NRC License 13-18235-01		LOCATION: Building 104 Cobalt-60 Vault	
RADIOACTIVE MATERIALS INVOLVED: Closeout survey for removed Cobalt -60 source.			

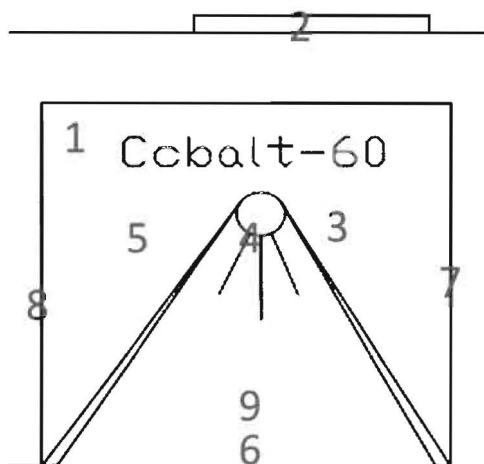
ADDITIONAL INFORMATION / COMMENTS / SPECIAL INSTRUCTIONS:

Survey is used to document the closeout survey of the vault after 1199 curie Cobalt 60 source was removed.

RADIAC USED (MODEL NUMBER)	SERIAL NUMBER	CAL DATE	CAL DUE
AN/PDR-77	0770A	23 August 2011	17 August 2012

N/A: NOT APPLICABLE. DIAGRAM OR SKETCH OF AREA SURVEY IS ATTACHED (if applicable).

ITEM	DESCRIPTION	RADIATION MEASUREMENT (mR/hr)	SWIPE SAMPLE (dpm/100cm ²)
	Background	.019	21.0
1	Camera Housing	.016	0.0
2	Doorway to Vault	.016	0.0
3	Left Track in Vault Floor	.017	8.0
4	Middle of Vault Floor	.017	0.0
5	Right Track in Vault Floor	.017	0.0
6	Vault Access Port	.015	4.0
7	Interior Left Vault Wall	.017	0.0
8	Interior Right Vault Wall	.017	0.0
9	Interior Vault Ceiling	.018	4.0



RADIATION SAFETY OFFICER REVIEW:

PRINT NAME WALTER F. SHEARIN	SIGNATURE <i>Walter F Shearin</i>	DATE 18 APRIL 2012
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RADIOGRAPHY LAB B-104

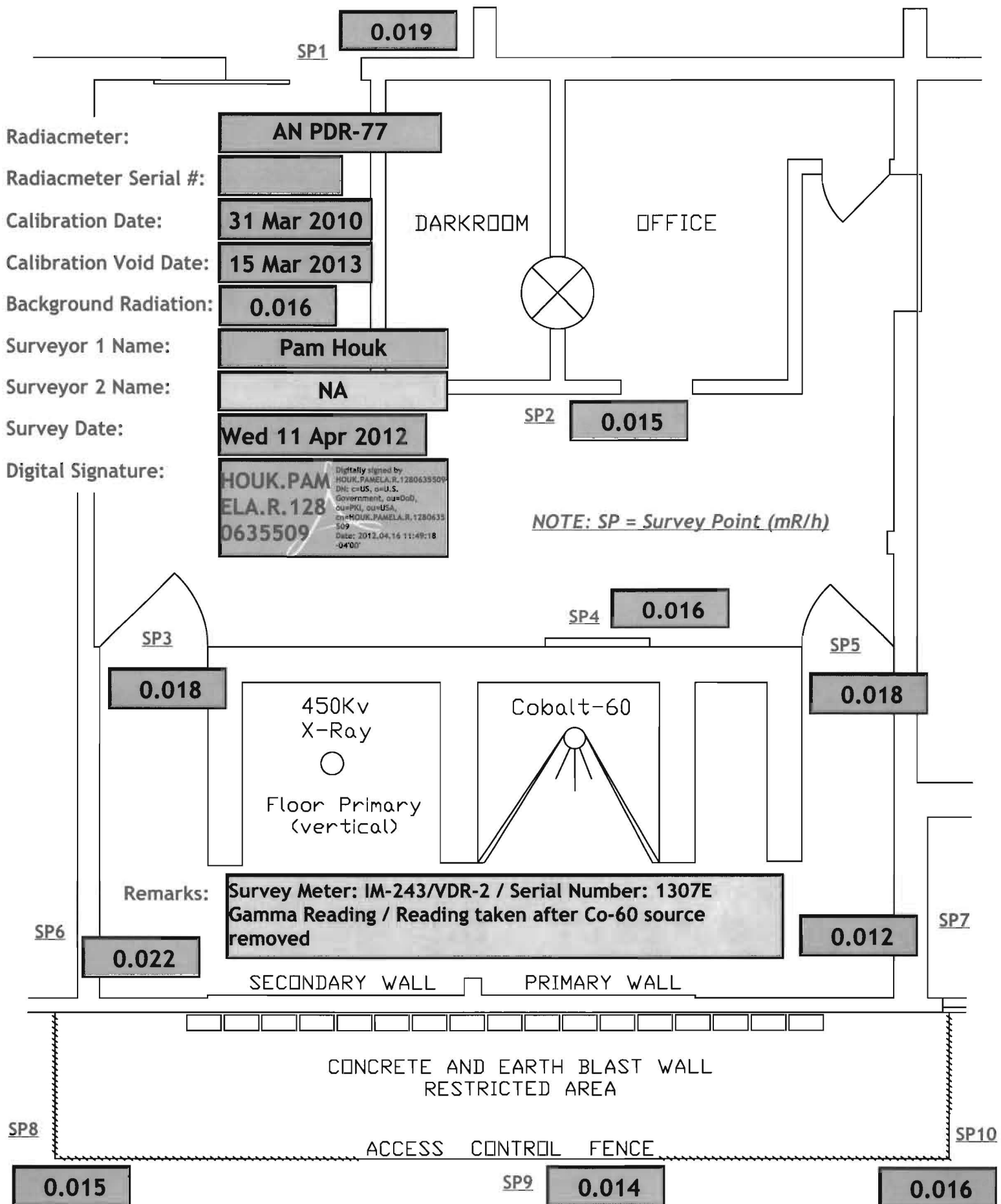


FIG 4-5



MIRION
TECHNOLOGIES

Dosimetry Services Division
2652 McGaw Avenue
Irvine, CA 92614

Toll Free: (800) 251-3331
Tel. (949) 419-1000
Fax. (949) 296-1144
www.mirion.com

Customer: 91337L
Location ID 00000DPT
Report Number: 3040

Sealed Radioactive Source Leak Test Certificate
Save this report for your records

Neutron Products, Inc.
Ed Derosa
22301 Mt. Ephraim Road
P. O. Box 68
Dickerson, MD 20842

RECEIVED MAR 09 2012

Isotope	Activity/ Date	Source Manufacturer:	Collected By:	Analyzed By:	Result (uCi)
Co-60	1521 Ci	Neutron Products Inc	Kenric Tingle	GDS Counting Lab	0.0000
	7/1/2010	Model: NPTT Series	Collected On: 2/22/2012	Analyzed On: 03/02/2012	
		Serial: T-1528	Using GDS Q1 ki		

The Leak Tests were analyzed in accordance with Global Dosimetry Solutions, Inc. procedures and Radioactive Material License #4635-30. Calibration and Quality Control records are maintained for the Leak Test Counting Equipment at Global Dosimetry Solutions, Inc.

Radiation Safety Officer Review:

Date

3/7/2012

NEUTRON PRODUCTS, INC., 22301 Mt. Ephraim Rd., P.O. Box 68, Dickerson, MD 20842

Phone: 301/349-5001

For internal use only

File, ED, ORIG: KT

Project No. 3344

Warranty: Yes ☐ No ☐

Time _____ hours on site _____ hours travel _____ hours pre and post _____

Service Number: 30-12-079

Control Number: 30-12-112

Shipping Number: _____

Service Report

Date Requested February 3, 2012

Date of Service February 22, 2012

Customer Crane Army Ammunition Activity

Engineer Ken Tingle

Address Attn: SIOC-IOQ-M-BLDG 148, 300 Highway 361

Type of Unit Picker Cyclops

Crane, Indiana 47522-5001

Serial Number 105

Contact Ms. Patricia Staggs

Telephone 812/854-4069

Authorization: Purchase Order Number W52P1J-11-P-3014

Oral Per _____

Was visit requested by customer: Yes ☒ No ☐

By Whom Ms. Staggs

Confirmed Customer License /N/A/ Spoke to _____

By _____

Customer's complaint/work to be carried out:

PM Inspection on a Picker Cyclops unit. Perform source leak test.

Engineer's report (symptoms, diagnosis, services performed, recommendations, and parts used):

PREVENTIVE MAINTENANCE CHECKLIST COMPLETE PER CHECKLIST.

Repairs carried out and unit working satisfactorily

Kenneth J. Tingle

Date 2/22/12

Customer's Signature

James A. Davis

Position

NDT L-II

Date

2-22-12

Model Number NPTT-Series	Catalog Number NPI-15-2000W	Serial Number T-1528	1,248 Curies as of January 1, 2012
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The latest approved revision of P-9 "Procedures for Source Transfer, Maintenance, and Service Associated with Teletherapy is Revision 5, dated September 9, 2010. This procedure and the applicable appendix has been reviewed and is understood by each source installer and assistant on this job.

Signature:

Kenneth J. Tingle

Date:

2/12/12

The following statement applies to sub-contractors and non employees only:

_____ occupational exposure for 2012 is _____ R per the written report dated _____. Assigning 1.25 R for each missing quarter or part thereof makes the "current allowable dose limit" for 2012 _____ R (5 - ____). Since the "current allowable dose limit" is: // more, // less than 1 R, review by the RSO : // is, // is not required before this work is assigned.

Preventive Maintenance Checklist

Model Picker Cyclops, s/n 105

Customer: Crane Army Ammunition

Address: 300 Highway 361, Crane, Indiana 47522

Check all items applicable to this unit

CONTROL CONSOLE

Check operation of key switch	<input checked="" type="checkbox"/>
Clean control console	<input checked="" type="checkbox"/>
Check wiring and terminals	<input checked="" type="checkbox"/>
Check operation of arm switch	<input checked="" type="checkbox"/>
Test treatment mode switches	<input checked="" type="checkbox"/>
Check all indicating lamps	<input checked="" type="checkbox"/>
Check operation and accuracy of timer	<input checked="" type="checkbox"/>
Test door interlock switch	<input checked="" type="checkbox"/>
Test operation of emergency bar	<input checked="" type="checkbox"/>

HEAD, ARM, COUNTERWEIGHT AND STAND

Check field light operation	<input type="checkbox"/>
Check ODI light operation	<input type="checkbox"/>
Check back pointer light operation	<input type="checkbox"/>
Check head swivel operation	<input type="checkbox"/>
Check/lubricate head tilt gears	<input checked="" type="checkbox"/>
Check/lubricate yoke rotation gears	<input checked="" type="checkbox"/>
Check yoke wiring	<input checked="" type="checkbox"/>
Check arm wiring	<input checked="" type="checkbox"/>
Check/clean interior of main frame	<input checked="" type="checkbox"/>
Check/lubricate gantry drive chain	<input checked="" type="checkbox"/>
Check chain sprocket set screws - tighten	<input type="checkbox"/>
Check oil level in gantry gear reducer	<input type="checkbox"/>

OPERATIONAL TEST

Test collimator functions	<input checked="" type="checkbox"/>
Check isocenter	<input checked="" type="checkbox"/>
Remove all tools from unit and control console	<input checked="" type="checkbox"/>

SOURCE DRIVE

Check condition of V-belt	<input checked="" type="checkbox"/>
Check tension of idler pulley	<input checked="" type="checkbox"/>
Clean gears and pulleys	<input checked="" type="checkbox"/>
Check tightness of set screws	<input checked="" type="checkbox"/>
Check wiring and terminals	<input checked="" type="checkbox"/>
Check stop bar operation	<input checked="" type="checkbox"/>
Check operation of micro switches	<input checked="" type="checkbox"/>
Check zoneguard lamp	<input checked="" type="checkbox"/>
Check source indicator lamps	<input checked="" type="checkbox"/>
Test manual source return wheel	<input checked="" type="checkbox"/>

TREATMENT STRETCHER

Check, couch motor switches	<input type="checkbox"/>
Check upper limit switch	<input type="checkbox"/>
Check lower limit switch	<input type="checkbox"/>
Check longitudinal brake	<input checked="" type="checkbox"/>
Check lateral brake	<input checked="" type="checkbox"/>
Check floor brake	<input checked="" type="checkbox"/>
Check elevation drive chain	<input checked="" type="checkbox"/>
Check wiring and terminals	<input checked="" type="checkbox"/>
Check lateral cross bars	<input checked="" type="checkbox"/>
Clean longitudinal tracks	<input type="checkbox"/>
Test emergency switches	<input type="checkbox"/>
Check condition of hand control	<input type="checkbox"/>

Additional services performed: _____

Licensed Source Handler: Kenneth Tingle Date: 2/22/12

Signature: Kenneth F. Tingle

NEUTRON PRODUCTS, INC.

DEPARTMENT OF THE ARMY
CAAA SAFETY OFFICE BLDG 3373
300 HIGHWAY 361
CRANE IN 47522-5099
OFFICIAL BUSINESS

OFFICIAL MAIL

FIRST CLASS

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

