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|  | | | | | **RADIATION PROTECTION SECTION RADIOACTIVE MATERIALS BRANCH**  **CERTIFICATE OF DISPOSITION** | | | | | | | | (RPS USE ONLY) | | |
| **INSTRUCTIONS:** Completion and submittal of this form is required pursuant to 10A NCAC 15 .0339. Complete all appropriate sections of this form, using additional sheets as necessary. Item 8 **MUST** be completed on all certificates. Completion and submission of this certification does not relieve the licensee from other requirements associated with decommissioning and/or license termination. Additional requirements are found in 10A NCAC 15 .0300 & .1600 of the North Carolina Regulations for Protection Against Radiation. E-Mail ONE copy of this application and a single copy of all supporting information to: [*LICENSING.RAM@DHHS.NC.GOV*.](mailto:LICENSING.RAM@DHHS.NC.GOV) | | | | | | | | | | | | | | | |
| 1. License No. | | | |  | | 2. Current Amendment No.: | |  | 3. Expiration Date: | | |  | | |
| 4. Licensee Name (on current license): | | | | | | |  | | | | | | | | |
| 5. Physical Address: | | | | | | |  | | | | | | | | |
| **CERTIFICATION** | | | | | | | | | | | | | | | |
| 1. The Licensee and any individual executing this certification on behalf of the licensee certify that (check the appropriate item(s) below): | | | | | | | | | | | | | | | |
|  | | * 1. No radioactive materials have been procured and/or possessed under the license. | | | | | | | | | | | | | |
| **OR** | | | | | | | | | | | | | | | |
|  | | * 1. All radioactive materials procured and/or possessed by the licensee under the license have been: | | | | | | | | | | | | | |
|  | |  | 1. Transferred to (type name and physical address(es) of institution(s)) ***(Attach letter(s) from each facility listed below which acknowledges their receipt of the radioactive material(s) that was/were transferred).*** | | | | | | | | | | |
|  | *Institution name and address* | | | | | | | | | *License No.* | | | | | |
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|  | |  | 1. Disposed of to an authorized commercial disposal facility in compliance with the provisions of 10A NCAC 15 .1628 of the North Carolina Regulations for Protection Against Radiation. ***(Attach letter(s) from each facility listed below which acknowledges their receipt of the radioactive material(s) that was/were transferred).*** | | | | | | | | | | |
|  | *Facility name and address* | | | | | | | | | *License No.* | | | | | |
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|  | | C. Disposed of by decay-in-storage pursuant to 10A NCAC 15 .0362 ***(attach survey(s) of the radioactive material which shows the material to be indistinguishable from background levels).*** | | | | | | | | | | | | | |
| 7. Documentation Attached?  Yes  No Number of pages or attachments: | | | | | | | | | | | | | | | |
| 8. **The licensee, or any official executing this certificate on behalf of the licensee named in Item 1., certify that all information contained herein, including any supplements attached hereto, has been prepared in conformity with all applicable North Carolina Laws and Regulations and is true and correct to the best of our knowledge and belief.**  BY: | | | | | | | | | | | | | | | |
| Signature of Certifying Official\*    Printed Name and Title of Certifying Official | | | | | | | | | | | Date Signed | | | | |