



Soldiers + Sailors Memorial Hospital

32-36 Central Avenue
Wellsboro, PA 16901-1899

(570) 723-7764
Fax: (570) 724-7235

November 23, 2004

U.S. Nuclear Regulatory Commission
Materials Licensing Branch
Region I
475 Allendale Road
King of Prussia, PA 19406

03011497

RE: Amendment to Radioactive Material License No. 37-16602-01
Soldiers & Sailors Memorial Hospital

To whom it may concern:

Please delete Dr. Joseph Roco as an authorized user.

If you have any questions or require additional clarification, please do not hesitate to contact the undersigned.

Sincerely,

A handwritten signature in black ink, appearing to read "Jan Fisher", is written over a horizontal line.

Jan Fisher
Executive Director for Health Care Services

136071

NMSS/RGNI MATERIALS-002

This is to acknowledge the receipt of your letter/application dated

11/23/2008, and to inform you that the initial processing which includes an administrative review has been performed.

☒ Amend. 37-16602-d
There were no administrative omissions. Your application was assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.

☐ Please provide to this office within 30 days of your receipt of this card

A copy of your action has been forwarded to our License Fee & Accounts Receivable Branch, who will contact you separately if there is a fee issue involved.

Your action has been assigned Mail Control Number 136071.
When calling to inquire about this action, please refer to this control number.
You may call us on (610) 337-5398, or 337-5260.

BETWEEN: : (FOR LFMS USE)
: INFORMATION FROM LTS
: -----
:
License Fee Management Branch, ARM : Program Code: 02121
and : Status Code: 0
Regional Licensing Sections : Fee Category: 7C
: Exp. Date: 20120131
: Fee Comments: CODE 23
: Decom Fin Assur Req'd: N
: ::::::::::::::::::::::::::::::::::::::

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED

Applicant/Licensee: SOLDIERS & SAILORS MEMORIAL HOSP.
Received Date: 20041201
Docket No: 3011497
Control No.: 136071
License No.: 37-16602-01
Action Type: Amendment

2. FEE ATTACHED

Amount: /
Check No.: /

3. COMMENTS

Signed M. A. Perkins
Date 12/15/04

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 _____