

DIAGNOSTIC ONCOLOGY CRO, INC.

RECEIVED
REGION 1

April 12, 2005

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Licensing Assistance Team
U.S. NRC Region I
475 Allendale Road
King of Prussia, PA 19406-1415

03034800

RE: Amendment Request for Materials License # 06-30469-01

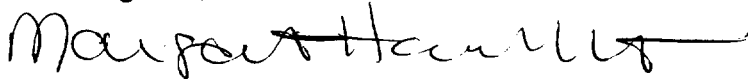
Dear Sir or Madam:

Please change the Radiation Safety Officer (RSO) from Maria Pernyeszi to Dominick Scaramuzzino, Ph.D. Effective date April 8, 2005.

Please call me if you have any question.

Thank you.

Best Regards,



Margaret Haraczek
Office Manager
Diagnostic Oncology CRO, Inc.
73 Cogwheel lane
Seymour, CT 06483
203.881.1032 X100
mharaczekwi@docro.com

136882

NMSS/RGNI MATERIALS-002

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

4/12/2005, and to inform you that the initial processing which includes an administrative review has been performed.

☒ Amendment 06-30469-01 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** 136982.
When calling to inquire about this action, please refer to this control number.
You may call us on (610) 337-5398, or 337-5260.

(FOR LFMS USE)
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

: Program Code: 03620
: Status Code: 0
: Fee Category: 3M
: Exp. Date: 20081031
: Fee Comments: _____
: Decom Fin Assur Req'd: N
:

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED

Applicant/Licensee: DIAGNOSTIC ONCOLOGY CRO, INC.
Received Date: 20050415
Docket No: 3034800
Control No.: 136882
License No.: 06-30469-01
Action Type: Amendment

2. FEE ATTACHED

Amount: _____
Check No.: _____

3. COMMENTS

Signed Rebecca Jones
Date 4/22/2005

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 _____