

(FOR LFMS USE)  
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM  
and  
Regional Licensing Sections

Program Code: 03121  
Status Code: 0  
Fee Category: 3P  
Exp. Date: 20120531  
Fee Comments:  
Decom Fin Assur Reqd: N

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: DLZ INDIANA, LLC  
Received Date: 20051212  
Docket No: 3018110  
Control No.: 315056  
License No.: 13-20218-01  
Action Type: Amendment

2. FEE ATTACHED

Amount: 0  
Check No.: 0

3. COMMENTS

Signed D. A. Hersey  
Date 12-12-2005

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 \_\_\_\_\_