

From: Sandra Gabriel
To: Mike Bohan
Date: Tue, Aug 1, 2006 3:02 PM
Subject: Additional information for NRC amendment request, mail control 139001

Licensee: Yale-New Haven Ambulatory Services Corporation
License No.: 06-30445-01
Docket No.: 03034705
Mail Control No.: 139001

To: Mike Bohan, Radiation Safety Officer

This is in reference to your request to change the licensee and administrator names on your gamma knife license. Please provide the following additional information for receipt by the NRC within 30 calendar days. You may mail the signed response or fax it to 610-337-5269, referencing mail control 139001. You may wish to leave a voicemail or e-mail message to alert me when you send a fax.

Please send an e-mail to confirm receipt of this message.

A. It is necessary for your request to be signed by a member of senior management. Please resubmit it under signature of senior management, including the following additional information.

B. Please indicate whether the corporate reorganization effort will also involve a transfer of control for NRC licenses 06-00819-03 and 06-00819-05 issued to Yale-New Haven Hospital.

C. For each affected license, please provide the "Information Needed for Transfer of Control" listed in Appendix F to NUREG-1556, Vol. 15, as follows, noting that a number of the items may not be applicable:

"Licensees must provide full information and obtain NRC's prior written consent before transferring control of the license. Control of a license is in the hands of the person or persons who are empowered to decide when and how that license will be used. That control is to be found in the person or persons who, because of ownership or authority explicitly delegated by the owners, possess the power to determine corporate policy and thus the direction of the activities under the license. A transferee is an entity that proposes to purchase or otherwise gain control of an NRC-licensed operation. A transferor is an NRC licensee selling or otherwise giving up control of a licensed operation. Provide the following information concerning changes of control by the applicant (transferor and/or transferee, as appropriate). If any items are not applicable, so state.

1. Provide a complete description of the transaction (transfer of stocks or assets, or merger). Indicate whether the name has changed and include the new name. Include the name and telephone number of a licensee contact who NRC may contact if more information is needed.

2. Describe any changes in personnel or duties that relate to the licensed program. Include training and experience for any new personnel.

3. Describe any changes in the organization, location, facilities, equipment or procedures that relate to the licensed program.

4. Describe the status of the surveillance program (surveys, wipe tests, quality control) at the present time and the expected status at the time that control is to be transferred.

5. Confirm that all records concerning the safe and effective decommissioning of the facility will be transferred to the transferee or to NRC, as appropriate. These records include

documentation of surveys of ambient radiation levels and fixed and/or removable contamination, including methods and sensitivity.

6. Confirm that the transferee will abide by all constraints, conditions, requirements and commitments of the transferor or that the transferee will submit a complete description of the proposed licensed program."

In addition, if your license requires financial assurance for decommissioning, you will need to address changes to financial assurance for name changes and/or change in ownership (control). If your organization's name is changing and there is no change of ownership, you will need to amend your financial assurance instruments and supporting documents to address the change in name. If there has been a change of ownership (control), the transferee must submit new financial assurance in accordance with Chapter 4 to Volume 3 of NUREG-1757, "Consolidated NMSS Decommissioning Guidance."

Thank you for your assistance. If you have any questions, you may e-mail me or call at 610-337-5182.

Sandy Gabriel
Senior Health Physicist
Medical Branch
NRC Region I

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From: Sandra Gabriel

Created By: SLG2@nrc.gov

Recipients
yale.edu
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Post Office

Route
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MESSAGE	5650	Tuesday, August 1, 2006 3:02 PM

Options
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