

**From:** [Wardrobe, Leonardo](#)  
**To:** [gurvis.davis.civ@mail.mil](mailto:gurvis.davis.civ@mail.mil)  
**Subject:** Request for Additional Information, Control Number 601941, 19-00294-19  
**Date:** Tuesday, January 16, 2018 10:02:00 AM

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License No.: 19-00294-19

Docket No: 03004523

Control No: 601941

Mr. Davis,

This refers to your request to amend your license dated December 12, 2017. In order to continue our review of your request, the following additional information is needed:

On your form 313 (Box 2, Mailing Address of Applicant) you have,

U.S. Army Aberdeen Test Center  
400 Colleran Rd.  
Aberdeen Proving Ground, MD 21005-5059

On your current license you have,

U.S. Army Aberdeen Test Center  
TEDT-AT-CS  
400 Colleran Rd.  
Aberdeen Proving Ground, MD 21005-5059

In the request letter you sent it has,

U.S. Army Aberdeen Test Center  
TEDT-AT-COS  
400 Colleran Rd.  
Aberdeen Proving Ground, MD 21005-5059

Please update the correct address you would like on your license and all formal communication with you the licensee.

Your reply must be an originally signed and dated letter. The letter may be scanned and submitted as a pdf document attached to an email; or it may be transmitted by facsimile to (610) 337-5269; or it may be sent by regular mail. If we do not receive a reply from you within 30 calendar days from the date of this e-mail, we will assume that you do not wish to pursue your amendment request.

*Leo Wardrobe*

Health Physicist  
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