



Region I Office  
Division of Nuclear Materials Safety  
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## Telephone Conversation Record

Date: May 16, 2019

License No. 47-31126-01

Docket No.(no hyphens): 03037131

Mail Control/Report No. 611667

Licensee Name: Summersville Regional Medical Center (Change of Control)

Participant(s) Name/Title: Mr. Kelly

Work Telephone No. 7242890722

Business Cellphone No.

NRC Representative Name/Title: Farrah Gaskins, Health Physicist

Subject: Inquiring on Status of Request

Discussion: Mr. Kelly, licensee's consultant, called to inquire about the status of the change of control notification sent by the licensee. I mentioned that I had also contacted counsel for the licensee as I needed additional information. The documentation submitted did not address the question which asks the transferee to confirm that records pertaining to decommissioning will be transferred. The licensee answered, not applicable. I mentioned to Mr. Kelly that the confirmation requested is in regards to the records such as leak tests and surveys that are required to be maintained and that will be important should the facility be decommissioned. He stated he understood and would have the licensee send in the confirmation. I gave him my email address to send the additional information directly to me.

Action Required: Place in ADAMS

SUNSI REVIEW		
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SUNSI Review Completed by: Fgaskins		