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AUG 20 2019

DEPARTMENT OF THE ARMY
MADIGAN ARMY MEDICAL CENTER
9040 JACKSON AVENUE
TACOMA WA 98431-1100

DNMS

August 14, 2019

U.S. Nuclear Regulatory Commission, Region IV
Material Radiation Protection Section
1600 East Lamar Boulevard
Arlington, TX 76001-8064

Dear Sir or Madam:

Request NRC License No. 46-02645-03 for Madigan Army Medical Center be terminated in coordination with NRC Region 1 no earlier than October 1, 2019.

As of this date, Madigan will begin operations under the Defense Health Agency's NRC License No. 45-35423-01. The purpose of this request is to ensure only one NRC license is in effect at this location.

The point of contact is Mr. Jeffrey T. Jennelle, Alternate Radiation Safety Officer, at 253-968-4295 or jeffrey.t.jennelle.civ@mail.mil.

Sincerely,

Thomas S. Bundt
Colonel, U.S. Army
Commanding

PUBLIC

- ☐ Immediate Release
☒ Normal Release

NON-PUBLIC

- ☐ A.3 Sensitive-Security Related
☐ A.7 Sensitive Internal
☐ Other: _____

Reviewer: RLZ Date: 8-21-19

No. 6 1 3 9 5 6

Hill, Carol

From: Jennelle, Jeffrey T CIV USARMY MEDCOM MAMC (US) <jeffrey.t.jennelle.civ@mail.mil>
Sent: Tuesday, August 20, 2019 1:07 PM
To: Hill, Carol
Cc: Bower, Mark W CIV USARMY MEDCOM RHC-P (US); Stewart, Harry M (Mike) JR LTC USARMY DHA FBCH (USA)
Subject: [External_Sender] License Termination Request... (UNCLASSIFIED)
Attachments: 20190806 - License Termination Request.pdf
Signed By: jeffrey.t.jennelle.civ@mail.mil

CLASSIFICATION: UNCLASSIFIED

Carol,

Attached is a request to terminate our NRC license, #46-02645-03, for Madigan Army Medical Center. We are transitioning to the Defense Health Agency's broad scope license, #45-35423-01, which is managed under Region 1 starting no earlier than October 1, 2019.

Thank you...

JEFFREY T. JENNELLE, MHP
Assistant Radiation Safety Officer| Madigan Army Medical Center
O: (253) 968-4295 | F: (253) 968-4301 |
jeffrey.t.jennelle.civ@mail.mil

One Team . . . One Purpose! Conserving the Fighting Strength!

CLASSIFICATION: UNCLASSIFIED

No. 6 1 3 9 5 6



ACKNOWLEDGEMENT - RECEIPT OF CORRESPONDENCE

Name and Address of Applicant and/or Licensee

MAJ Thomas J. Costeira
Radiation Safety Officer
Department of the Army
MCHJ-CLY-R (Health Physics Service)
Madigan Army Medical Center
Tacoma, WA 98431-1100

Date

08/21/2019

License Number(s)

46-02645-03

Mail Control Number(s)

613956

Licensing and/or Technical Reviewer or Branch

C. Hill

This is to acknowledge receipt of your: ☒ Letter and/or ☐ Application Dated: 08/14/2019

The initial processing, which included an administrative review, has been performed.

☐ Amendment ☒ Termination ☐ New License ☐ Renewal

☐ There were no administrative omissions identified during our initial review.

☐ This is to acknowledge receipt of your application for renewal of the material(s) license identified above. Your application is deemed timely filed, and accordingly, the license will not expire until final action has been taken by this office.

☐ Your application for a new NRC license did not include your taxpayer identification number. Please complete and submit NRC Form 531, Request for Taxpayer Identification Number, located at the following link: <http://www.nrc.gov/reading-rm/doc-collections/forms/nrc531.pdf>
Follow the instructions on the form for submission.

☐ The following administrative omissions have been identified:

Your application has been assigned the above listed MAIL CONTROL NUMBER. When calling to inquire about this action, please refer to this control number. Your application has been forwarded to a technical reviewer. Please note that the technical review, which is normally completed within 180 days for a renewal application (90 days for all other requests), may identify additional omissions or require additional information. If you have any questions concerning the processing of your application, our contact information is listed below:

Region IV
U. S. Nuclear Regulatory Commission
DNMS/NMSB - B
1600 E. Lamar Boulevard
Arlington, TX 76011-4511
(817) 200-1103 or (817) 200-1140

✓ 8/21

BETWEEN:

Accounts Receivable/Payable
and
Regional Licensing Branches

[FOR ARPB USE]
INFORMATION FROM WBL

Program Code: 02240
Status Code: Pending Termination
Fee Category: 7C
Exp. Date:
Fee Comments: 2B exempt under footnote#18 171.16
Decom Fin Assur Req'd: N

License Fee Worksheet - License Fee Transmittal

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: Department of the Army
Received Date: 08/20/2019
Docket Number: 3003368
Mail Control Number: 613956
License Number: 46-02645-03
Action Type: Termination

2. FEE ATTACHED

Amount: _____

Check No.: _____

3. COMMENTS

Signed: _____

Date: _____

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: _____