

VOID SHEET

TO: License Fee Management Branch

FROM: Evelyn MATSON

SUBJECT: VOIDED APPLICATION

Control Number: 301663

Applicant: Richmond Heights General Hospital

Date Voided: 8/6/96

Reason for Void: The request for

NRC consent to an ownership change does  
not require an amendment. Nothing on license  
changed - no name change - no RSO change etc.  
The licensee did have an ownership change

Ellettr  
Signature

8/6/96  
Date

Attachment:  
Official Record Copy of  
Voided Action

FOR LFMB USE ONLY

Final Review of VOID Completed:

- ☒ Refund Authorized and processed  
☐ No Refund Due  
☐ Fee Exempt or Fee Not Required

Comments: 070024

Log completed ☒

Processed by: SAC 9/25/96

9610070069 960806  
PDR ADOCK 03013410  
C PDR

ML 0/1  
30  
SD

AUG 14 1996

Richard J. Tessitore  
Vice President  
Primary Health Systems, Inc.  
1275 Drummers Lane, Suite 102  
Wayne, PA 19087

Dear Mr. Tessitore:

This refers to the letter dated July 22, 1996, notifying the NRC of the transfer of ownership and control of License No. 34-17835-01, issued to Richmond Heights General Hospital. Based on the information submitted, the NRC consents to the transfer as described.

We determined that the transaction as described does not require the issuance of a new license or an amendment to the existing license. However, the transferee should note their new responsibility and liability as an NRC licensee. Specifically, responsibility is emphasized with regard to NRC inspection and enforcement issues, investigations, facility decontamination, and decommissioning funding resources.

If you have any questions or require clarification on any of the information stated above, you may contact us at (630) 829-5500.

Sincerely,

Original Signed By  
Evelyn R. Matson  
Nuclear Materials Licensing Branch

License No. 34-17835-01  
Docket No. 030-13410

DOCUMENT NAME: M:\03013410.CO6

To receive a copy of this document, indicate in the box: "C" = Copy without enclosures "E" = Copy with enclosures "N" = No copy

OFFICE	DNMS/RIII <i>RM</i>								
NAME	ERMATSON:jaw								
DATE	08/17/96								

OFFICIAL RECORD COPY



UNITED STATES  
NUCLEAR REGULATORY COMMISSION

REGION III  
801 WARRENVILLE ROAD  
LISLE, ILLINOIS 60532-4351

July 31, 1996

Kingsley Orraca-Tetteh, M.D.  
Radiation Safety Officer  
Primary Health Systems, Inc.  
27100 Chardon Road  
Richmond Heights, OH 44143

SUBJECT: ACKNOWLEDGEMENT OF CORRESPONDENCE  
(☒ Letter Dated July 22, 1996)

Dear Licensee:

In response to your request, we have completed the initial processing, which is an administrative review of your application for a(n):

☐ New License                      ☒ Amendment                      ☐ Renewal  
☐ Termination                      ☐ Auth User (Amendment not required)                      ☐ QMP Revision  
☐ Other \_\_\_\_\_

Administrative deficiencies were identified during this initial review as outlined below. However, it should be noted that a technical review may identify additional omissions in the submitted information, technical issues that require additional information, or policy/technical issues that require coordination with headquarters or other NRC regional offices.

It appears that your request is routine (see 1-3 below as, applicable); however, your request is incomplete.

Incomplete information is as follows: In order for us to complete your request the required fee is necessary. Please contact our License Fee & Debt Collection Branch, located in our headquarters office, as referenced below.

1. New and amendment actions are normally processed within 90 days, unless we find major deficiencies, or policy issues requiring central program office assistance.
2. Renewal actions are normally processed within 180 days, however under timely filing (before expiration) you may continue to operate under your existing license.
3. Termination actions are normally processed within 90 days, unless confirmatory surveys following decontamination/decommissioning activities are involved.

A copy of your correspondence has been forwarded to our Licensing Fee and Debt Collection Branch (301/415-6097) for approval of the fee category and amount.

If you have a compelling safety or business-related reason for requesting expedited review, please contact the Materials Licensing Branch at (708) 829-9887. We will try to complete your request as soon as practicable. Any correspondence about this request should reference the control number.

Nuclear Materials Support Branch

Mail Control No. 301663  
License No. 34-17835-01

**PHS**

**PRIMARY HEALTH SYSTEMS, INC.**

1275 Drummers Lane, Suite 102

Wayne, Pennsylvania 19087

(610) 687-7800 FAX (610) 687-7839

030-13410

August 6, 1996

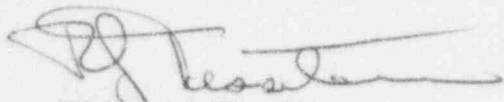
US Nuclear Regulatory Commission  
801 Warrenville Road  
Lisle, IL 60532-4351

**RE: License No: 34-17835-01**  
**Richmond Heights General Hospital**

Dear sir or madam:

Enclosed is a check for \$440.00 as the fee to amend the NRC license at Richmond Heights General Hospital, license number 34-17835-01.

Sincerely,



Richard J. Tessitore  
Vice President, Management Services

RJT/kps

Enclosure

cc: Denise Moebius, Director of Radiology, Richmond Heights General Hospital  
Kingsley Orraca-Tetteh, M.C. Radiation Safety Officer

Log	Aug 2 III
Remitter	
Check No.	5984
Amount	\$440
Fee Category	7C
Type of Fee	Amo
Date Check Rec'd	8/2/96
Date Completed	8/23/96
By	SC

Fee sheet has been misplaced

PM 8/6/96

**RECEIVED**  
**AUG 12 1996**  
**REGION III**

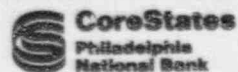
AUG 12 1996

301663

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND - NOT A WHITE BACKGROUND

**PRIMARY HEALTH SYSTEMS, INC.**

GLENHARDT CORPORATE CENTER  
1275 DRUMMERS LANE  
SUITE 102 - BLDG. 1  
WAYNE, PA 19087



3-1  
310

004984

DATE	CHECK NO.
03/05/96	4984

PAY

DOLLARS AND  
\*\*440

CENTS  
00

PAY EXACTLY

\*\*\*440.00

TO THE  
ORDER OF

US NUCLEAR REGULATORY COMMISSION REGION III  
801 WARRENVILLE ROAD  
LISLE, IL 60532-4351

VENDOR #60532

*Robert W. Fleming*

⑈004984⑈ ⑆031000011⑆ 14123⑈04953⑈

301663

**PHS**

**PRIMARY HEALTH SYSTEMS, INC.**

1275 Drummers Lane, Suite 102

Wayne, Pennsylvania 19087

(610) 687-7800 FAX (610) 687-7839

*needs  
file*

July 22, 1996

United States Nuclear Regulatory Commission  
Medical Licensing Branch  
Region III  
801 Warrenville Road  
Lisle, IL 60532-4351

*A*  
*030-13410*

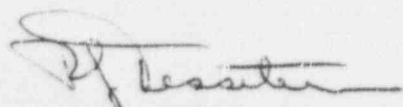
**RE: Richmond Heights General Hospital**  
**License Number: 34-17835-01**  
**Docket or Reference Number: 030-13410**

Dear Sir or Madam:

This letter is notification that Richmond Heights General Hospital located at 27100 Chardon Road, Richmond Heights, OH 44143, will be sold to Primary Health Systems, Inc., (through a subsidiary PHS Mt. Sinai, Inc.), on or about August 23, 1996. We believe the information you require is outlined below.

- ◆ The name and address of the hospital are shown above.
- ◆ There is no change in the personnel named in the license.
- ◆ The seller will not remain in business without a license.
- ◆ PHS Mt. Sinai, Inc., is purchasing substantially all of the assets of Richmond Heights General Hospital.
- ◆ There are no planned changes in organization, location, facilities, equipment, procedures or personnel at this time.
- ◆ There are no planned changes in the use, possession or storage of the licensed materials.
- ◆ The facility is exempt from submitting decontamination plans, including financial assurance arrangements of the transferee.
- ◆ The transferee PHS Mt. Sinai, Inc., is committed to abide by all constraints, conditions, requirements, representatives and commitments identified in the existing license.

Very Truly Yours,



Richard J. Tessitore  
Vice President, Management Services

RJT/kps

**RECEIVED**

**JUL 26 1996**

*JUL 26 1996*

**REGION III**

*301663*

*Pm 7/25/96*





**PRIMARY HEALTH SYSTEMS, INC.**

1275 Drummers Lane, Suite 102

Wayne, Pennsylvania 19087

(610) 687-7800 FAX (610) 687-7839

July 22, 1996

United States Nuclear Regulatory Commission  
Medical Licensing Branch  
Region III  
801 Warrenville Road  
Lisle, IL 60532-4351

**RE: *Richmond Heights General Hospital***  
***Licensed Number: 34-17835-01***  
***Docket or Reference Number: 030-13410***

Dear Sir or Madam:

We the transferees agree to the change in ownership and control of the licensed material and activity from the transferor in the above stated license.

Very truly yours,

A handwritten signature in dark ink, appearing to read "R. Tessitore", is positioned above the printed name of the signatory.

Richard J. Tessitore  
Vice President, Management Services

RJT/kps



Richmond Heights  
General Hospital  
27100 Chardon Road  
Richmond Heights, Ohio 44143  
(216) 585-6500

Executive Offices

July 23, 1996

United States Nuclear Regulatory Commission  
Medical Licensing Branch  
Region III  
801 Warrenville Road  
Lisle, IL 60532-4351

**RE: Richmond Heights General Hospital**  
**License Number: 34-17835-01**  
**Docket or Reference Number: 030-13410**

Dear Sir or Madam:

We the transferor agree to the change in ownership and control of the licensed material and activity to the transferee, PHS Mt. Sinai, Inc., for the above stated license.

Sincerely,

Keith J. Petersen  
Chief Executive Officer

KJP/jfz



**DIVISION OF ACCOUNTING AND FINANCE  
REQUEST FOR REFUND TO EMPLOYEE/VENDOR**

THE EMPLOYEE/VENDOR IDENTIFIED BELOW HAS OVERPAID THE NUCLEAR REGULATORY  
COMMISSION FOR GOODS AND/OR SERVICES PROVIDED AND IS DUE A REFUND

EMPLOYEE/VENDOR/PAYEE CODE: \_\_\_\_\_

NAME: Primary Health Systems, Inc.

ADDRESS: Attn: Richard Tessitore, VP, Mgt. Svcs

ADDRESS: 1275 Summers Lane Ste 102 Bldg 1

CITY: Wayne STATE: PA ZIP: 19087

TRANS CODE: PX

TRANS TYPE: FE FUND: X5280 JOB CODE: \_\_\_\_\_ AMOUNT: \$440<sup>00</sup>

TRANS TYPE: IR FUND: R1435 JOB CODE: INTR AMOUNT: \_\_\_\_\_

TRANS TYPE: IR FUND: R1099 JOB CODE: ADCH AMOUNT: \_\_\_\_\_

TRANS TYPE: IR FUND: R1099 JOB CODE: FINE AMOUNT: \_\_\_\_\_

TOTAL REFUND AMOUNT: \$440<sup>00</sup>

COMMENTS: Lic 34-17835-01/CK 4984/Rfnd

8/6/96 Reg

(Limit comments to 40 characters, including spaces)

PREPARED BY: Shirley Crutchfield DATE: Sept. 25, 1996

AUTHORIZED BY: Sandra Kimberly DATE: 9/26/96

ORIGINAL INV. NO: \_\_\_\_\_ DATE PAID: \_\_\_\_\_ AMOUNT: \_\_\_\_\_

REFUND ENTERED INTO COLLECT BY: \_\_\_\_\_

REFUND DETERMINED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

PLEASE ATTACH APPROPRIATE SUPPORTING DOCUMENTATION

Aug 2 III

TC AMD \$440

CK #4984

201163