

UNITED STATES
NUCLEAR REGULATORY COMMISSION
WASHINGTON, D. C. 20555

December 6, 1976

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

McDonnell Douglas Corp.
ATTN: Thomas C. L'ack
P.O. Box 314
St. Louis, MO 63166
Gentlemen:

Subject: Expired License No. STB-49

Our records show that your Material License No. STB-49
expired on May 31, 1976 that no renewal application has been filed
in accordance with Section of Title 10, Code of Federal Regulations,
Part 40.

If you do not have any source material in your possession and you no longer wish to be licensed, please complete the enclosed form "Certificate of Disposition of Materials" (Form AEC-314 or NRC-314) and return it to this office within 15 days.

If the activities conducted under the expired license were subject to the reporting requirements of 10 CFR 20.407, an annual report prepared in accordance with the provisions of 20.407 for the current calendar year and a termination report prepared in accordance with the requirements of 20.408, for those individuals who have been engaged in activities under the expired license, should be submitted to the Office of Administration, U.S. Nuclear Regulatory Commission, Washington, D.C. 20555, Attention: Mr. J. B. Winningham.

Should you have source material in your possession, and if such possession is not authorized by Sections 40.13 and 40.22, "Unimportant quantities of source material" and "Small quantities of source material" respectively, you may be in violation of Section 40.3, 10 CFR 40. Therefore if you possess source material not authorized by Section 40.13 and/or 40.22, you should either: (a) divest yourself of the source material immediately in a lawful manner, execute the attached "Certificate" and forward it to this office as prescribed above; or (b) complete and submit the enclosed "Application for Source Material License," Form NRC-2 (or AEC-2) within fifteen (15) days.

Since the license has expired, your application for renewal will be processed as a request for a new license. Accordingly, you should determine if your program is subject to a license fee as required by Section 170.31, 10 CFR 170. The appropriate fee should accompany the application if one is required.



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1 - FILE - JPY

A. TYPE OF ACTION AND IDENTIFICATION CODES

<input type="checkbox"/> NEW LICENSE	<input type="checkbox"/> AMENDMENT TO RENEW LICENSE	<input checked="" type="checkbox"/> AMENDMENT TO TERMINATE	<input checked="" type="checkbox"/> VOID	DOCKET NUMBER 040-00029	MAIL CONTROL NUMBER 04007 00000	CHANGE NAME/ ADDRESS <input type="checkbox"/>
<input type="checkbox"/> NEW LICENSE AND NEW LICENSEE	<input type="checkbox"/> OTHER AMENDMENT	<input type="checkbox"/> CLERICAL CHANGE NO AMENDMENT				

B. INDICATIVE INFORMATION:

1	NAME (LAST, FIRST, MIDDLE)	NAME (LAST, FIRST, MIDDLE)
	NAME (LAST, FIRST, MIDDLE)	NAME (LAST, FIRST, MIDDLE)
	NAME (LAST, FIRST, MIDDLE)	NAME (LAST, FIRST, MIDDLE)
2	ORGANIZATION NAME (ALPHABETIC SEQUENCE) McDonnell Douglas Corporation	
	DEPARTMENT OR BUREAU	
3	BUILDING, STREET P. O. Box 516	CITY St. Louis
		STATE MO
4	TYPE OF APPLICANT <input type="checkbox"/> U.S. GOVERNMENT AGENCY <input type="checkbox"/> INDIVIDUAL LICENSEE <input checked="" type="checkbox"/> ORGANIZATIONAL LICENSEE	DATE REQUEST RECEIVED 12/29/76
	INSTITUTION CODE 02261	PENDING PROG. CODE ACTUAL PROG. CODE
5	SECONDARY PROGRAM CODES AS REQUIRED: #1 #2 #3 #4 #5	
	LICENSE NUMBER STB-49	DATE LICENSE ISSUED OR ACTION COMPLETED EXPIRATION DATE

C. STATISTICAL INFORMATION:

MEDICAL CATEGORY:	<input type="checkbox"/> FOR HUMAN USE ONLY	<input type="checkbox"/> FOR HUMAN AND NONHUMAN USE	<input type="checkbox"/> FOR NONHUMAN USE ONLY
POSSESSION OF THE MATERIAL IS AUTHORIZED IN ONE OF THE FOLLOWING AREAS.			
<input type="checkbox"/> SAME AS "STATE" IN ADDRESS	<input type="checkbox"/> ALL STATES	<input type="checkbox"/> ALL NON-AGREEMENT STATES	
AND/OR IN THE STATE(S), TERRITORY(S), COUNTRY CHECKED BELOW.			
ALABAMA -AL	GEORGIA -GA	MARYLAND -MD	NEW JERSEY -NJ
ALASKA -AK	HAWAII -HI	MASSACHUSETTS -MA	NEW MEXICO -NM
ARIZONA -AZ	IDAHO -ID	MICHIGAN -MI	NEW YORK -NY
ARKANSAS -AR	ILLINOIS -IL	MINNESOTA -MN	NORTH CAROLINA -NC
CALIFORNIA -CA	INDIANA -IN	MISSISSIPPI -MS	NORTH DAKOTA -ND
COLORADO -CO	IOWA -IA	MISSOURI -MO	OHIO -OH
CONNECTICUT -CT	KANSAS -KS	MONTANA -MT	OKLAHOMA -OK
DELAWARE -DE	KENTUCKY -KY	NEBRASKA -NB	OREGON -OR
WASHINGTON DC -DC	LOUISIANA -LA	NEVADA -NV	PENNSYLVANIA -PA
FLORIDA -FL	MAINE -ME	NEW HAMPSHIRE -NH	RHODE ISLAND -RI
			SOUTH CAROLINA -SC
			SOUTH DAKOTA -SD
			TENNESSEE -TN
			TEXAS -TX
			UTAH -UT
			VERMONT -VT
			VIRGINIA -VA
			WASHINGTON -WA
			WEST VIRGINIA -WV
			WISCONSIN -WI
			WYOMING -WY
			AMERICAN SAMOA -AS
			CANAL ZONE -CZ
			GUAM -GU
			PUERTO RICO -PR
			VIRGIN ISLANDS -VI
			CANADA -CN

D. POSSESSION LIMITS OF SOURCE AND SPECIAL NUCLEAR MATERIALS AND TRITIUM

SOURCE MATERIAL CEILING		<input type="checkbox"/> GRAMS	SNM CEILING		<input type="checkbox"/> GRAMS	<input type="checkbox"/> "X" HERE IF FOR POWER REACTOR
		<input type="checkbox"/> KILOGRAMS			<input type="checkbox"/> KILOGRAMS	
MAT	AMOUNT	UNIT	CONFIG	ENRICH	MAT	AMOUNT
U5		<input type="checkbox"/> G <input type="checkbox"/> Kg	<input type="checkbox"/> S <input type="checkbox"/> UNS			<input type="checkbox"/> G <input type="checkbox"/> Kg
U3		<input type="checkbox"/> G <input type="checkbox"/> Kg	<input type="checkbox"/> S <input type="checkbox"/> UNS			<input type="checkbox"/> G <input type="checkbox"/> Kg
PU		<input type="checkbox"/> G <input type="checkbox"/> Kg	<input type="checkbox"/> S <input type="checkbox"/> UNS			<input type="checkbox"/> G <input type="checkbox"/> Kg
UR		<input type="checkbox"/> G <input type="checkbox"/> Kg	<input type="checkbox"/> S <input type="checkbox"/> UNS			<input type="checkbox"/> G <input type="checkbox"/> Kg
TH		<input type="checkbox"/> G <input type="checkbox"/> Kg	<input type="checkbox"/> S <input type="checkbox"/> UNS			<input type="checkbox"/> G <input type="checkbox"/> Kg
		<input type="checkbox"/> G <input type="checkbox"/> Kg	<input type="checkbox"/> S <input type="checkbox"/> UNS			<input type="checkbox"/> G <input type="checkbox"/> Kg
		<input type="checkbox"/> G <input type="checkbox"/> Kg	<input type="checkbox"/> S <input type="checkbox"/> UNS			<input type="checkbox"/> G <input type="checkbox"/> Kg
H3		<input type="checkbox"/> CURIES <input type="checkbox"/> MILLICURIES	<input type="checkbox"/> MICROCURIES	RIS CODES		

U5=U235, U3=U233, PU=PLUTONIUM, UR=URANIUM, TH=THORIUM, H3=TRITIUM, G=GRAMS,
Kg=KILOGRAMS, S=SEALED, UNS=UNSEALED