

VARIAN
medical systems

Notice of Proposed Reciprocity Activity

JAN - 7 2000

Licensee Name Varian Medical Systems 911 Hansen Way, MS C-080 Palo Alto, CA 94304	Licensee Contact Tony Sorensen, Radiation Safety Officer 650-424-6662 650-855-7375 (fax)
License Information State of California, Department of Health Services # 1025-43 Expiration Date: 11/25/97 (timely renewal)	Person Authorized to Perform Activity Richard Nusspickel Contact #: 800-864-1672

Description of Device Varian Model VariSource High Dose Rate Remote Afterloader (CA661D103S)	Activity to be Performed PMI/Routine Service
Description of Source Omnitron International Model SL-777/777V (LA0760S102S) Iridium-192, Special Form, Sealed Source Maximum Activities: 13 curies (shipped) 10 curies (installed)	

Site Name and Address LeHigh Valley Hospital Cedar Crest And I-78 P.O. Box 689 Allentown, PA 18105	Site Contact Person Name C. Pierno Telephone 610-555-1212
Licensee/Site Identification Number NA 000150	Dates on which work will performed From 1/14/00 to 1/15/00

Comments RTS # 512

I hereby certify that the above information is true and complete.
Signed <u><i>[Signature]</i></u> Date <u>1/7/00</u>

M. C. Hernandez
 Signature M. C. Hernandez
 Title: Radiation Specialist
 Date: 1/7/00