



RECEIVED
REGION I

25 Science Park ▲ Suite 360 ▲ New Haven CT. ▲ 06511

Phone (203) 776-1790 ▲ Fax (203) 772-3655

e-mail: GardnerC@ALXN.com

Cheryl S. Gardner

Manager of Environmental
Health and Safety

200 NOV -3 AM 11: 23

NMSB 2

030-32976

November 1, 2000

United States Nuclear Regulatory Commission
Region I
Licensing Assistance Section
475 Allendale Road
King of Prussia, PA 19406-1415

Facsimile: (610) 337-5393
Hardcopy to follow

EXPEDITED REVIEW

Re: Expedited Review for License Number 06-28799-01

Dear Licensing Section:

On or about November 18, 2000, Alexion Pharmaceuticals, Inc. (Alexion), license number 06-28799-01, will move to Cheshire, CT. In our last license amendment dated August 4, 2000, the NRC approved our Cheshire change of address. However on October 27, 2000, Alexion was informed that the Cheshire, CT US Post Office split the single mailing address of 350 Knotter Drive into two separate mailing addresses to differentiate between the two companies housed in the single structure (Arch Chemicals and Alexion Pharmaceuticals, Inc.). Given the above, Alexion Pharmaceuticals, Inc. respectfully request expedited review for the following license amendment changes:

- 1) Under Section 10: Change of address as instituted by the US Post Office – **Please change** authorized use location from 350 Knotter Drive to **“352 Knotter Drive”**.
- 2) Under Section 11A: **Please Add** – “Yi Wang, Ph.D.”

Isotope Experience of Yi Wang, Ph.D. (Immunology), Director of Preclinical Studies, Alexion Pharmaceuticals, Inc.

- University of Colorado Health Science Center, Post Doc Fellow, H-3 Thymidine, I-125, 1985 - 1990
- National Jewish Hospital, Research Associate, H-3 Thymidine, C-14, P-32, P-33, 1990 – 1993
- Alexion Pharmaceuticals, Dir. Of Preclinical Studies, H-3 Thymidine, 1993 – to Present

If you have any questions please feel free to contact me, Cheryl Gardner, at (203) 776-1790, x210. Thank you for your expedited review of this license amendment.

Sincerely,

Cheryl S. Gardner, RSO

1 2 8 8 2 3

Cc: Dan Caron

NMSS/RGN MATERIALS-002

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

(FOR LFMS USE)
INFORMATION FROM LTS

: Program Code: 03620
: Status Code: 0
: Fee Category: 3M
: Exp. Date: 20030430
: Fee Comments: _____
: Decom Fin Assur Req'd: N
:

LICENSE FEE TRANSMITTAL

A. REGION Z

1. APPLICATION ATTACHED

Applicant/Licensee: ALEXION PHARMACEUTICALS, INC.
Received Date: 20001103
Docket No: 3032976
Control No.: 128823
License No.: 06-28799-01
Action Type: Amendment

2. FEE ATTACHED

Amount: _____
Check No.: _____

3. COMMENTS

Signed R. J. Brown
Date 11/3/00

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 _____

FAX

This is to acknowledge the receipt of your letter/application dated

11-01-00, and to inform you that the initial processing which includes an administrative review has been performed.

Amend *06-28799-01*
There were no administrative omissions. Your application was assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.

Please provide to this office within 30 days of your receipt of this card

A copy of your action has been forwarded to our License Fee & Accounts Receivable Branch, who will contact you separately if there is a fee issue involved.

Your action has been assigned Mail Control Number 1 2 8 8 2 3
When calling to inquire about this action, please refer to this control number.
You may call us on (610) 337-5398, or 337-5260.

NRC FORM 532 (R)
(6-96)

Sincerely,
Licensing Assistance Team Leader