UNITED STATES NUCLEAR REGULATORY COMMISSION REGION II ATLANTA FEDERAL CENTER 61 FORSYTH ST SW STE 23T85 ATLANTA GA 30303-3415

OFFICIAL BUSINESS
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V. A. Medical Center Tennessee Valley Healthcare System Alvin C. York Campus ATTN: P. Corley 3400 Lebanon Pipe Murfreesboro, TN 37219

	5-4-01
This is to acknowledge the receipt of your letter/application dated	DATE
5-/-0/ , and to inform you that the initial processing,	
which includes an administrative review, has been performed.	•
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There were no administrative omissions. Your application was assi reviewer. Please note that the technical review may identify addition additional information.	
Please provide to this office within 30 days of your receipt of this ca	rd:
The action you requested is normally processed in 20 days.	
A copy of your action has been forwarded to our License Fee & Accounts will contact you separately if there is a fee issue involved.	s Receivable Branch, who
Your action has been assigned Mail Control Number When calling to inquire about this action, please refer to this mail control You may call me at 404-562-4719.	number.
Sincerely,	

NRC FORM 532 (RII) (4-2001)

Licensing Assistant