

DEPARTMENT OF VETERANS AFFAIRS NEW YORK HARBOR HEALTHCARE SYSTEM

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In Reply Refer To:

15 May 2003

P-9

Dr. Ronald Bellamy
Nuclear Regulatory Commission
Decommissioning and Laboratory Branch
475 Allendale Road
King of Prussia, PA 19406

030-34751

Subject: Final Inspection and termination of Holding License 31-02892-06

Dear Mr. Bellamy,

We are in receipt of the final inspection report pertaining to remediation work at Building 90, VA Primary and Extended Care Center in St Albans, Queens, License Number 31-02892-06. The expiration date for this holding license is August 21, 2003.

The report concludes that the remediation work in performed in Building 90 was successful and that the area is satisfactory for free and unrestricted access.

We are hereby requesting that the NRC holding License No. 31-02892-06 for Building 90, VA Primary and Extended Care Center in St Albans, Queens be terminated and the area be released for free and unrestricted use.

Sincerely,

Medical Centers

Brooklyn Campus 800 Poly Place Brooklyn NY 11209 (718) 836-6600

New York Campus 423 East 23rd Street New York NY 10010 (212) 686-7500

Primary & Extended Care Center

St. Albans Campus 179th St. & Linden Boulevard St. Albans NY 11425 (718) 526-1000

Health Care Centers

Chapel Street Center 40 Flatbush Avenue Ext. 8th Floor Brooklyn NY 11201 (718) 439-4300

Harlem Center 55 West 125th Street 11th Floor New York NY 10027 (212) 828-5265

SoHo Center 245 West Houston Street New York NY 10014 (212) 337-2569

Staten Island Center 21 Water Street Staten Island NY 10304 (718) 630-3550

132863



Medical Center 800 Poly Place Brooklyn, NY 11209

Official Business Penalty for private use \$300



Dr. Ronald Bellamy Nuclear Regulatory Commission Decommissioning and Laboratory Branch 475 Allendale Road King of Prussia, PA 19406

This is to acknowledge the receipt o	of your letter/application dated	
5/15/2003, aincludes an administrative review h	nd to inform you that the initial processing which as been performed.	
	-8 ? 2 - 06 nissions. Your application was assigned to a that the technical review may identify 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 / 32.663. When calling to inquire about this action, please refer to this control number. You may call us on (610) 337-5398, or 337-5260.		
• •	Sincerely, Licensing Assistance Team Leader	

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		: (FOR LFMS USE)
BETV	WEEN:	: INFORMATION FROM LTS :
	ense Fee Management Branch, ARM and ional Licensing Sections	: Program Code: 03900 : Status Code: 0 : Fee Category: EX 14 : Exp. Date: 20030831 : Fee Comments: : Decom Fin Assur Reqd: Y
LICE	ENSE FEE TRANSMITTAL	
A.	REGION I	
	APPLICATION ATTACHED Applicant/Licensee: V. A. MEDICAL Received Date: 20030516 Docket No: 3034751 Control No.: 132863 License No.: 31-02892-06 Action Type: Termination	CENTER IN BROOKLYN
	FEE ATTACHED Amount: Check No.:	
3. C	COMMENTS Signed Date	M.a. Pakins 5/ro/2003
B. I	LICENSE FEE MANAGEMENT BRANCH (Chec.	k when milestone 03 is entered //)
1.	Fee Category and Amount:	
	Correct Fee Paid. Application may Amendment Renewal License	be processed for:
3.	OTHER	
	Signed	

Date