

DATE: NOVEMBER 18, 2004

AMENDMENT TO IRREVOCABLE STANDBY LETTER OF CREDIT NUMBER: 

AMENDMENT NUMBER 4

**BENEFICIARY**  
U.S. NUCLEAR REGULATORY COMMISSION  
475 ALLENDALE ROAD  
KING OF PRUSSIA, PA 19406  
ATTN: DAVID B. EVERHART

**APPLICANT**  
HOWARD UNIVERSITY  
2400 6TH ST., N.W. #317  
ADMIN. BLDG.  
WASHINGTON, DC 20059

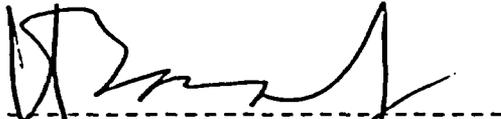
THIS AMENDMENT IS TO BE CONSIDERED AN INTEGRAL PART OF THE ABOVE CREDIT AND MUST BE ATTACHED THERETO.

THE ABOVE MENTIONED CREDIT IS AMENDED AS FOLLOWS:

THE AMOUNT OF THIS CREDIT HAS BEEN INCREASED BY USD 375,000.00  
THE AGGREGATE AMOUNT OF THE CREDIT IS NOW USD 1,125,000.00

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED.

IF YOU REQUIRE ANY ASSISTANCE OR HAVE ANY QUESTIONS REGARDING THIS AMENDMENT, PLEASE CALL 213-345-0071.



-----  
AUTHORIZED SIGNATURE

THIS DOCUMENT CONSISTS OF 1 PAGE(S).

**LAWRENCE BANALES**

136007

**NONNEGOTIABLE**

04  
NOV 19 /

RECEIVED  
REGION

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

November 18, 2004, and to inform you that the initial processing which includes an administrative review has been performed.

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. *Financial Assurance*

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 136007.  
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 (R1)  
(6-96)

Sincerely,  
Licensing Assistance Team Leader

BETWEEN:

License Fee Management Branch, ARM  
and  
Regional Licensing Sections

: (FOR LFMS USE)  
: INFORMATION FROM LTS  
: -----  
:  
: Program Code: 01100  
: Status Code: 0  
: Fee Category: EX 3L  
: Exp. Date: 20140731  
: Fee Comments: 170.11(A)(4)-1/21/85 CALL  
: Decom Fin Assur Reqd: Y  
: ::

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: HOWARD UNIVERSITY  
Received Date: 20041119  
Docket No: 3011063  
Control No.: 136007  
License No.: 08-00386-19  
Action Type: Fin. Assurance

2. FEE ATTACHED

Amount: \_\_\_\_\_  
Check No.: \_\_\_\_\_

3. COMMENTS

Signed \_\_\_\_\_  
Date 11/23/04

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 \_\_\_\_\_