



The
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January 26, 2005

U.S. Nuclear Regulatory Commission, Region II
Materials Licensing
Division of Nuclear Materials Safety
Atlanta Federal Center
61 Forsyth Street, SW, Suite 23T85
Atlanta, GA 30303

03039466

RE: Request for License Amendment (45-25533-01)

Dear Sirs:

We are requesting an amendment to our radioactive materials license to add a new location. The facility is located at:

1625 N. George Mason Drive
Suite 414
Arlington, VA 22205

Please find the enclosed floor plan showing the location of the scan room and hot lab. All conditions and representations previously submitted in the previous application and any amendments remain unchanged. The authorized users and Radiation Safety Officer remain unchanged.

Please contact me should you have any questions or need additional information. We wish to have this application expedited in order to provide diagnostic services to our patients. Your assistance with this request is much appreciated.

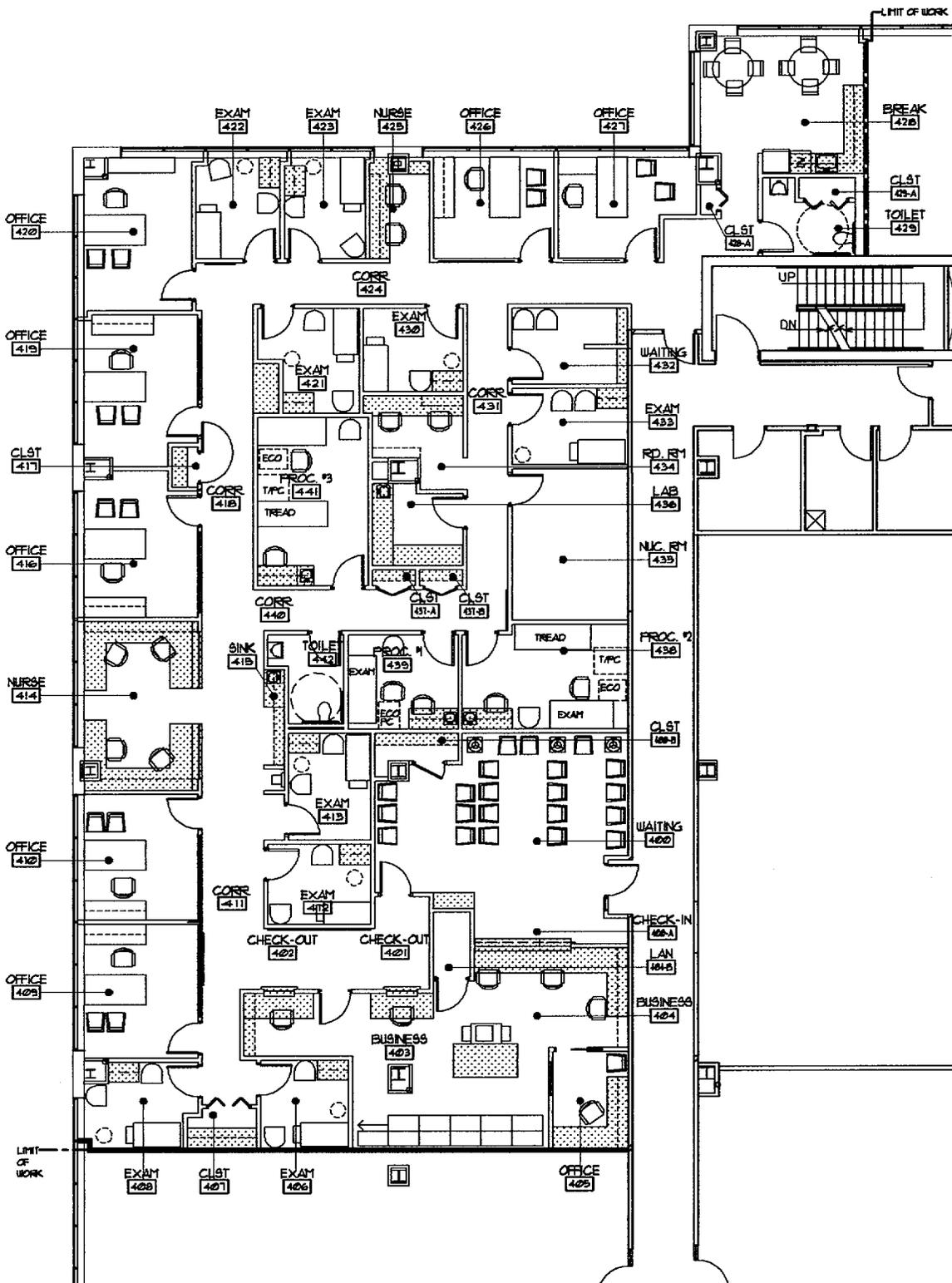
Sincerely,

Neil Smarte, C.N.M.T.
Radiation Safety Officer

Enclosures

136382
NMSS/RGNI MATERIALS-002

REC'D IN LAT 1/31/2005



Final Scheme
CARDIOVASCULAR GROUP, P.C. - VIRGINIA HOSPITAL CNTR. - 4TH FLOOR

SCALE: NOT TO SCALE
 REVISED 06/21/04



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

1/26/2005, and to inform you that the initial processing which includes an administrative review has been performed.

Amendment 45-25533-01
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** 136382.
When calling to inquire about this action, please refer to this control number.
You may call us on (610) 337-5398, or 337-5260.

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

: (FOR LFMS USE)
: INFORMATION FROM LTS
: -----
:
: Program Code: 02201
: Status Code: 0
: Fee Category: 7C
: Exp. Date: 20101031
: Fee Comments: _____
: Decom Fin Assur Reqd: N
: ::

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED

Applicant/Licensee: CARDIOVASCULAR GROUP (THE)
Received Date: 20050131
Docket No: 3035466
Control No.: 136382
License No.: 45-25533-01
Action Type: Amendment

2. FEE ATTACHED

Amount: /
Check No.: /

3. COMMENTS

Signed Rebecca J. Jend
Date 2/11/2005

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 _____