

S. R. Draper Paving Company

4742 Old Rocky Mount Road
Roanoke, Virginia 24014

Phone (540) 774-4419 - FAX (540) 774-8180

March 17, 2005

US Nuclear Regulatory Commission
Region #1
ATTN: LAT
475 Allendale Road
King of Prussia, PA 19406
FAX #610-337-5269

45-25072-01
03031356

It has come to our attention that the license for our nuclear gauge will expire March 31, 2005. We are currently working on the renewal application which we will send as soon as we gather all the needed information.

Thank you for your consideration.

Sincerely,

Jo Lynn Draper
Jo Lynn Draper
Secy/Treas

136602
NMCC/RGNI MATERIALS-002

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

2/17/2005, and to inform you that the initial processing which includes an administrative review has been performed.

Renew 45-25072-01 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 136602.
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: : (FOR LFMS USE)
 : INFORMATION FROM LTS
 : -----
 :
 License Fee Management Branch, ARM : Program Code: 03121
 and : Status Code: 2
 Regional Licensing Sections : Fee Category: 3P
 : Exp. Date: 20050331
 : Fee Comments: _____
 : Decom Fin Assur Reqd: N
 :

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED

Applicant/Licensee: S.R. DRAPER PAVING CO., INC.
 Received Date: 20050317
 Docket No: 3031356
 Control No.: 136602
 License No.: 45-25072-01
 Action Type: Renewal

2. FEE ATTACHED

Amount:
 Check No.:

3. COMMENTS

Signed *[Signature]*
 Date 3/17/05

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 _____