

**NAME CHANGE REQUEST**

**License No. 45-25239-01**

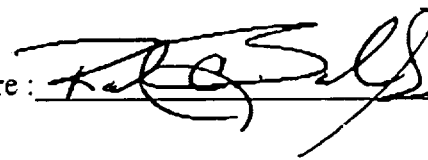
**03033097**

**Licensee**

	FROM		TO
1)	ECS, LTD		ECS MID-ATLANTIC, LLC
	2119-D North Hamilton Street		2119-D North Hamilton Street
	Richmond, Virginia 23230		Richmond, Virginia 23230

Contact Person – Raymond C. Boyd, Sr. (804) 353-6333

- 2) N/A
- 3) N/A
- 4) N/A
- 5) N/A
- 6) N/A

Signature : 

**RBoyd**

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**From:** Bryan Parker [BAP@nrc.gov]  
**Sent:** Thursday, May 19, 2005 01:51 pm  
**To:** RBoyd  
**Subject:** NRC License Info

Mr. Boyd,

Here is the info we discussed to document your company name change. Briefly answer the 6 questions below and submit to NRC Region I (address is in my sig block at bottom) - ATTN: LAT.

Thanks.  
Bryan

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Appendix F, NUREG-1556, Vol. 15

Information Needed for Transfer of Control

Definitions:

**Control:** Control of a license is in the hands of the person or persons who are empowered to decide when and how that license will be used. That control is to be found in the person or persons who, because of ownership or authority explicitly delegated by the owners, possess the power to determine corporate policy and thus the direction of the activities under the license.

**Transferee:** A transferee is an entity that proposes to purchase or otherwise gain control of an NRC-licensed operation.

**Transferor:** A transferor is an NRC licensee selling or otherwise giving up control of a licensed operation.

Licensees must provide full information and obtain NRC's prior written consent before transferring control of the license. Provide the following information concerning changes of control by the applicant (transferor and/or transferee, as appropriate). If any items are not applicable, so state.

1. Provide a complete description of the transaction (transfer of stocks or assets, or merger). Indicate whether the name has changed and include the new name. Include the name and telephone number of a licensee contact who NRC may contact if more information is needed.
2. Describe any changes in personnel or duties that relate to the licensed program. Include training and experience for new personnel.
3. Describe any changes in the organization, location, facilities, equipment or procedures that relate to the licensed program.
4. Describe the status of the surveillance program (surveys, wipe tests, quality control) at the present time and the expected status at the time that control is to be transferred.
5. Confirm that all records concerning the safe and effective decommissioning of the facility will be transferred to the transferee or to NRC, as appropriate. These records include documentation of surveys of ambient radiation levels and fixed and/or removable contamination, including methods and sensitivity.
6. Confirm that the transferee will abide by all constraints, conditions, requirements and commitments of the transferor or that the transferee will submit a complete description of the proposed licensed program.

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

6/1/2005, and to inform you that the initial processing which includes an administrative review has been performed.

- Amendment 45-25239-01 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
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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** 137107.  
When calling to inquire about this action, please refer to this control number.  
You may call us on (610) 337-5398, or 337-5260.

(FOR LFMS USE)  
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM  
and  
Regional Licensing Sections

: Program Code: 03121  
: Status Code: 0  
: Fee Category: 3P  
: Exp. Date: 20130831  
: Fee Comments: \_\_\_\_\_  
: Decom Fin Assur Reqd: N  
: .....

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED  
Applicant/Licensee: ECS, LTD.  
Received Date: 20050601  
Docket No: 3033097  
Control No.: 137107  
License No.: 45-25239-01  
Action Type: Amendment

2. FEE ATTACHED  
Amount:    /     
Check No.:           

3. COMMENTS

Signed Rebecca J. Jones  
Date 6/21/05

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 \_\_\_\_\_