



RECEIVED  
REGION 1

2005 JUN 10 AM 11: 25

National Institutes of Health  
Bethesda, Maryland 20892  
www.nih.gov

June 9, 2005

Materials License and Inspection Branch  
Region I  
U.S. Nuclear Regulatory Commission  
475 Allendale Road  
King of Prussia, PA 19406-1415

RE: License No. 19-00296-10 03001796

Dear Madam/Sir:

This is a request for amendment to the NIH Broad Scope License No. 19-00296-10, if necessary.

In the NRC License reapplication, dated September 22, 2002, the NRC Form 313 indicated in block 3 that the locations of use would be in Montgomery and Baltimore Counties, Maryland. Please amend the license to include facilities in Frederick County, Maryland. The National Institute of Allergy and Infectious Disease (NIAID) has in design an Integrated Research Facility to be placed on the grounds of the U.S. Army Garrison at Fort Detrick in Frederick, Maryland. The NIH intends NRC licensed activities in this new facility to be covered by the NIH Broad Scope License.

Also please note from this correspondence that the Chair of the NIH Radiation Safety Committee has changed. Dr. Ira Levin, Ph.D., a biophysicist and deputy Director of the Division of Intramural Research of the National Institute of Diabetes and Digestive and Kidney Diseases, has replaced Dr. Lance Liotta, who left the NIH at the end of May.

Please contact me if you or your staff have questions or need additional information. I may be reached at 301-496-2254 or by email at [zoonr@mail.nih.gov](mailto:zoonr@mail.nih.gov).

Sincerely

Robert A. Zoon, M.E., M.S.  
Radiation Safety Officer, NIH

cc: Dr. Levin, Chair, RSC, NIH

137191  
NMSS/RGNI MATERIALS-002

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

6/9/2005, and to inform you that the initial processing which includes an administrative review has been performed.

Amendment 19-00296-10 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** 137191.  
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: 02110  
: Status Code: 0  
: Fee Category: EX 7B 2B  
: Exp. Date: 20120930  
: Fee Comments: \_\_\_\_\_  
: Decom Fin Assur Req'd: Y  
:.....

LICENSE FEE TRANSMITTAL

A. REGION **I**

1. APPLICATION ATTACHED

Applicant/Licensee: HEALTH & HUMAN SERVICES, DEPT. OF  
Received Date: 20050610  
Docket No.: 3001786  
Control No.: 137191  
License No.: 19-00296-10  
Action Type: Amendment

2. FEE ATTACHED

Amount:           /            
Check No.:           /          

3. COMMENTS

Signed Rebecca J. Ford  
Date 6/17/2005

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 \_\_\_\_\_