

(FOR LFMS USE)
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

Program Code: _____
Status Code: 3
Fee Category: _____
Exp. Date: 0
Fee Comments: _____
Decom Fin Assur Req'd: _____

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED
Applicant/Licensee: MICHIGAN TECHNICAL EDUCATION CENTER
Received Date: 20050405
Docket No: 3036933
Control No.: 314377
License No.: _____
Action Type: New Licensee

2. FEE ATTACHED
Amount: \$3000.00
Check No.: 87453

3. COMMENTS

Signed D. A. Hersey
Date 4-30-2005

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered / TD)

1. Fee Category and Amount: OFF FEE (ASK4) Fee sheet attached

2. Correct Fee Paid. Application may be processed for:
Amendment _____
Renewal _____
License _____

3. OTHER _____

Signed _____
Date _____

FEE INFORMATION

Log Page: May 2 (Region III)

Mail Control: 314377

Company Name: Michigan Technical Education Center

License Number: NEW (FEE EXEMPT 170.11(a)(4 - NO FEE DUE)

Check Number: 00087453

Amount Received: \$3,000.00

Refund Amount: **\$3,000.00**

Fee Category: EX 3M

Type of fee: Application

Date Received: 05/12/05

Date Completed: 05/12/05

Completed by: Brenda Brown