

|                                                                                                                                                                                                                                                                                      |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                  |                                                   |                                      |                 |                                       |             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|---------------------------------------------------|--------------------------------------|-----------------|---------------------------------------|-------------|
| <b>NRC FORM 7</b><br>(5-2003)<br>10 CFR 110                                                                                                                                                                                                                                          |                                                                                                                                           | <b>U.S. NUCLEAR REGULATORY COMMISSION</b> |                                        | APPROVED BY OMB: NO. 3150-0027                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                  | EXPIRES: 05/31/2006                               |                                      |                 |                                       |             |
| <b>APPLICATION FOR LICENSE TO EXPORT NUCLEAR MATERIAL AND EQUIPMENT</b><br><i>(See Instructions on Reverse)</i>                                                                                                                                                                      |                                                                                                                                           |                                           |                                        | Estimated burden per response to comply with this mandatory collection request: 2.4 hours. This submittal is reviewed to ensure that the applicable statutory, regulatory, and policy considerations are satisfied. Send comments regarding burden estimate to the Records Management Branch (T-8 E8), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to infocollects@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0027), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection. |                                                                                  |                                                   |                                      |                 |                                       |             |
| 1. APPLICANT'S USE                                                                                                                                                                                                                                                                   |                                                                                                                                           | a. DATE OF APPLICATION<br>Sept. 29, 2005  | b. APPLICANT'S REFERENCE<br>DLN:05:060 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 2. NRC USE                                                                       |                                                   | a. DOCKET NUMBER<br><b>1700 5580</b> |                 | b. LICENSE NUMBER<br><b>XSNM03416</b> |             |
| 3. APPLICANT'S NAME AND ADDRESS                                                                                                                                                                                                                                                      |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 4. SUPPLIER'S NAME AND ADDRESS<br><i>(Complete if applicant is not supplier)</i> |                                                   |                                      |                 |                                       |             |
| a. NAME<br>Framatome ANP, Inc.                                                                                                                                                                                                                                                       |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | a. NAME                                                                          |                                                   |                                      |                 |                                       |             |
| b. STREET ADDRESS (Facility Site)<br>2101 Hom Rapids Road                                                                                                                                                                                                                            |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | b. STREET ADDRESS                                                                |                                                   |                                      |                 |                                       |             |
| c. CITY<br>Richland                                                                                                                                                                                                                                                                  |                                                                                                                                           |                                           | d. STATE<br>WA                         | e. ZIP CODE<br>99354                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                  | c. CITY                                           |                                      |                 | d. STATE                              | e. ZIP CODE |
| f. TELEPHONE NUMBER<br>(509) 375-8380                                                                                                                                                                                                                                                |                                                                                                                                           | g. FAX<br>(509) 375-8707                  |                                        | h. E-MAIL<br>Dan.Noss@frama                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                  |                                                   |                                      |                 |                                       |             |
| 5. FIRST SHIPMENT SCHEDULED                                                                                                                                                                                                                                                          |                                                                                                                                           | 6. FINAL SHIPMENT SCHEDULED               |                                        | 7. APPLICANT'S CONTRACTUAL DELIVERY DATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                  | 8. PROPOSED LICENSE EXPIRATION DATE<br>04/30/2007 |                                      | 9. CONTRACT NO. |                                       |             |
| 10. ULTIMATE FOREIGN CONSIGNEE                                                                                                                                                                                                                                                       |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 11. ULTIMATE END USE<br><i>(Include plant or facility name)</i>                  |                                                   |                                      |                 |                                       |             |
| a. NAME<br>Tohoku Electric Power Company, Inc.                                                                                                                                                                                                                                       |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Reload Fuel 18th for Onagawa Unit 1 and<br>Reload Fuel 4th for Onagawa Unit 3    |                                                   |                                      |                 |                                       |             |
| b. STREET ADDRESS (Facility Site)<br>1, Maeda, Tsukahama, Onagawa-cho, Oshika-gun,                                                                                                                                                                                                   |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 11a. DATE REQUIRED 10/31/2006                                                    |                                                   |                                      |                 |                                       |             |
| c. CITY<br>Miyagi-ken                                                                                                                                                                                                                                                                |                                                                                                                                           |                                           | d. COUNTRY<br>Japan                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 13. INTERMEDIATE END USE                                                         |                                                   |                                      |                 |                                       |             |
| 12. INTERMEDIATE FOREIGN CONSIGNEE                                                                                                                                                                                                                                                   |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Fuel Fabrication                                                                 |                                                   |                                      |                 |                                       |             |
| a. NAME<br>Nuclear Fuel Industries, Ltd. Tokai Works                                                                                                                                                                                                                                 |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 13a. DATE REQUIRED                                                               |                                                   |                                      |                 |                                       |             |
| b. STREET ADDRESS (Facility Site)<br>3135-41, Muramatsu, Tokai-mura, Naka-gun,                                                                                                                                                                                                       |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                  |                                                   |                                      |                 |                                       |             |
| c. CITY<br>Ibaraki-ken                                                                                                                                                                                                                                                               |                                                                                                                                           |                                           | d. COUNTRY<br>Japan                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 15. INTERMEDIATE END USE                                                         |                                                   |                                      |                 |                                       |             |
| 14. INTERMEDIATE FOREIGN CONSIGNEE                                                                                                                                                                                                                                                   |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 15a. DATE REQUIRED                                                               |                                                   |                                      |                 |                                       |             |
| a. NAME                                                                                                                                                                                                                                                                              |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                  |                                                   |                                      |                 |                                       |             |
| b. STREET ADDRESS (Facility Site)                                                                                                                                                                                                                                                    |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                  |                                                   |                                      |                 |                                       |             |
| c. CITY                                                                                                                                                                                                                                                                              |                                                                                                                                           |                                           | d. COUNTRY                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                  |                                                   |                                      |                 |                                       |             |
| 16. COM CODE                                                                                                                                                                                                                                                                         | 17. DESCRIPTION<br><i>(Include chemical and physical form of nuclear material; give dollar value of nuclear equipment and components)</i> |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 18. MAX. ELEMENT WEIGHT                                                          | 19. MAX. WT. %                                    | 20. MAX. ISOTOPE WEIGHT              | 21. UNIT        |                                       |             |
|                                                                                                                                                                                                                                                                                      | Enriched Uranium                                                                                                                          |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                  |                                                   |                                      |                 |                                       |             |
| 22. FOREIGN OBLIGATIONS BY COUNTRY AND PERCENTAGE <i>(Use separate sheet if necessary)</i><br>Canada source material enriched in USA: 27.8% Canada source material enriched in EU: 51.7% Russia source material enriched in Russia: 9.4% Niger source material enriched in EU: 11.1% |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                  |                                                   |                                      |                 |                                       |             |
| 23. ADDITIONAL INFORMATION ON CONSIGNEES, END USES, AND PRODUCT DESCRIPTION <i>(Use separate sheet if necessary)</i>                                                                                                                                                                 |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                  |                                                   |                                      |                 |                                       |             |
| 24. The applicant certifies that this application is prepared in conformity with Title 10, Code of Federal Regulations; and that all information in this application is correct to the best of his/her knowledge.                                                                    |                                                                                                                                           |                                           |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                  |                                                   |                                      |                 |                                       |             |
| 25. AUTHORIZED OFFICIAL                                                                                                                                                                                                                                                              |                                                                                                                                           | a. SIGNATURE<br><i>D. K. Noss</i>         |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                  | b. TITLE<br>Senior Scientist                      |                                      |                 |                                       |             |

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September 29, 2005  
DLN:05:060

U.S. Nuclear Regulatory Commission  
Attn: Ms. Janice Dunn Lee, Director  
Office of International Programs  
Mail Stop 04E21  
Washington, DC 20555

Dear Ms. Dunn Lee:

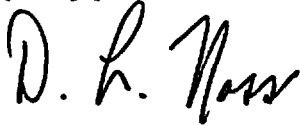
Enclosed is a request for issuance of an export license authorizing the export of enriched uranium to Nuclear Fuel Industries, Ltd. in Japan for fabrication into finished fuel. The application is as follows:

| Utility                             | Facilities          |
|-------------------------------------|---------------------|
| Tohoku Electric Power Company, Inc. | Onagawa Units 1 & 3 |

Authorization for Payment by Credit Card totaling \$2,400.00 is enclosed.

If you have any questions, please contact me at (509) 375-8380.

Very truly yours,



D. L. Noss  
Supervisor, MC&A

Enclosure

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