UNITED STATES NUCLEAR REGULATORY COMMISSION REGION III 2443 WARRENVILLE RD STE 210 LISLE IL 60532-4352

OFFICIAL BUSINESS

Andrew F. Marciniak, M.D.
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Community Hospital of Anderson & Madison County
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NRC FORM 532A (RIII) (10-2004)	LICENSE NUMBER	13-1	0205-01	MAIL CONTROL NUMBER	3/4825
	AMENDMENT	<u>X</u>	TERMINATION	NEW LICENSE	
This is to acknowledge the receipt of your letter application dated 8/10/05, and to inform you that the initial processing, which included an administrative review, has been performed.					
There were no administrative omissions identified during our initial review.					
Your application for a new NRC license did not include your taxpayer identification number. Please fill out NRC Form 531, which is being sent to you separately.					
A copy of your action h			License Fee and Accou	nts Receivable Bra	anch, who will

Your application has been assigned the above listed MAIL CONTROL NUMBER. When calling to inquire about this action, please refer to this control number. Your application has been forwarded to a technical reviewer. Please note that the technical review, which is normally completed within 180 days for a renewal application (90 days for all other requests), may identify additional omissions or require additional information. If you have any questions concerning the processing of your application, you may contact us at 630-829-9887.