

BETWEEN:
License Fee Management Branch, ARM
and
Regional Licensing Sections

(FOR LFMS USE)
INFORMATION FROM LTS

Program Code: 03613
Status Code: 0
Fee Category: EX 17
Exp. Date: 20501111
Fee Comments: _____
Decom Fin Assur Reqd: Y
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LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED
Applicant/Licensee: V. A., DEPARTMENT OF
Received Date: 20050428
Docket No: 3034325
Control No.: 314467
License No.: 03-23853-01VA
Action Type: Decommissioning

2. FEE ATTACHED
Amount: _____
Check No.: Ø

3. COMMENTS

Signed D.A. Hervey
Date 3-23-2005

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 _____