

(FOR LFMS USE)
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

Program Code: 03120
Status Code: 2
Fee Category: 3P
Exp. Date: 20051031
Fee Comments: _____
Decom Fin Assur Reqd: N
.....

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: CERESTAR USA, INC.
Received Date: 20051031
Docket No.: 3033973
Control No.: 314943
License No.: 13-06932-03
Action Type: Renewal

2. FEE ATTACHED

Amount: _____
Check No.: 0

3. COMMENTS

Signed D.A. Hersey
Date 11-1-2005

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 _____