

VOID SHEET

TO: License Fee Management Branch

FROM: RIII - Materials Licensing Branch

SUBJECT: VOIDED APPLICATION

Control Number: 315633

Applicant: Laporte Hospital & Health Services

License Number: 13-15151-01

Docket Number: 030-08653

Date Voided: November 8, 2006

Reason for Void: This request was to add an Authorized User. The licensee did not provide sufficient training and experience information to proceed with this amendment. The information sent with letter dated November 1, 2006 was complete except in one respect, 10 CFR 35.290(c)(1)(ii)(G) was not provided. The missing information was discussed with the RSO on November 17, 2006, it will take some time to obtain the information requested. Therefore, this action is voided without prejudice and may be reinstated when the appropriate information is provided.


Signature

11/9/06
Date

Attachment:
Official Record Copy of
Voided Action
FOR LFMB USE ONLY

- ☐ Refund Authorized and processed
- ☐ No Refund Due
- ☐ Fee Exempt or Fee Not Required

Comments: _____ Log completed _____

Processed by: _____