

NRC FORM 7 (6-2006) 10 CFR 110		U.S. NUCLEAR REGULATORY COMMISSION		APPROVED BY OMB: NO. 3150-0027	EXPIRES: 06/30/2009
APPLICATION FOR NRC EXPORT/IMPORT LICENSE, AMENDMENT, OR RENEWAL (See Instructions on Page 5)				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 and FOIA/Privacy Services Branch (T-5 F52), 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.	
				PART A. FOR NRC USE ONLY	
LICENSE NUMBER XBP86		DOCKET NUMBER		ADAMS ACCESSION NUMBER	
PART B. TO BE COMPLETED FOR ALL LICENSES, AMENDMENTS, OR RENEWALS (If more space is needed to complete any of the items, use Pages 3-4 first, and then attach additional sheets, if necessary.)					
1. NAME AND ADDRESS OF APPLICANT/LICENSEE BETH ISRAEL HOSPITAL ASSOCIATION OF PASSAIC 350 BOULEVARD PASSAIC, NJ 07055		1a. NAME OF APPLICANT'S CONTACT MARK M. BELANICH		1b. APPLICANT'S REFERENCE NUMBER	
		1c. PHONE NUMBER 845.729.0075		1d. FAX NUMBER 845.504.5061	
		1e. E-MAIL ADDRESS MBELANICH@MPOWERMED.COM			
2. TYPE OF NRC LICENSE REQUESTED (Check One)					
<input checked="" type="checkbox"/> EXPORT (Parts B, C, E) <input type="checkbox"/> IMPORT (Parts B, D, E) <input type="checkbox"/> COMBINED EXPORT/IMPORT (Parts B, C, D, E) <input type="checkbox"/> AMENDMENT/RENEWAL Existing License Number:					
3. CONTRACT NUMBER(S)		4. FIRST SHIPMENT DATE 5-15-2007		5. LAST SHIPMENT DATE 11-15-2007	
				6. PROPOSED EXPIRATION DATE 12-15-2007	
PART C. TO BE COMPLETED FOR EXPORT ONLY OR COMBINED LICENSES, AMENDMENTS, OR RENEWALS (If more space is needed to complete any of the items, use Pages 3-4 first, and then attach additional sheets, if necessary.)					
7. NAME(S) / ADDRESS(ES) OF SUPPLIERS AND/OR OTHER PARTIES TO THE EXPORT		8. NAME(S) / ADDRESS(ES) OF INTERMEDIATE FOREIGN CONSIGNEE(S)		9. NAME(S) / ADDRESS(ES) OF ULTIMATE FOREIGN CONSIGNEE(S) MDS NORDION 447 MARCH ROAD OTTAWA, ONTARIO K2K 1X8 CANADA	
7a. LIST FUNCTIONS PERFORMED/SERVICE PROVIDED		8a. INTERMEDIATE USE(S)		9a. ULTIMATE END USE(S) DISPOSAL	
10. DESCRIPTION OF RADIOACTIVE MATERIALS, SEALED SOURCES, NUCLEAR FACILITIES, EQUIPMENT, OR COMPONENTS CESIUM - 137 SEALED SOURCE CHEMICAL FORM: ELEMENT PHYSICAL FORM: SOLID DEVICE: GAMMA CELL 1000 CURRENT ACTIVITY \approx 18.0 TBq		10a. MAX TOTAL VOLUME / ELEMENT WGT (KG), OR TOTAL ACTIVITY (TBq) 18.0 TBq		10b. MAX ENRICHMENT OR WGT %	
				10c. MAX ISOTOPE WGT (KG)	
11. FOREIGN OBLIGATIONS (BY COUNTRY AND BY PERCENTAGE OF MAXIMUM TOTAL VOLUME)					

NRC FORM 7
(6-2006)
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U.S. NUCLEAR REGULATORY COMMISSION

**APPLICATION FOR NRC EXPORT/IMPORT
LICENSE, AMENDMENT, OR RENEWAL (Continued)**

LICENSE NUMBER <i>XBP86</i>	DOCKET NUMBER	ADAMS ACCESSION NUMBER	<input type="checkbox"/> PUBLIC OR <input type="checkbox"/> NON-PUBLIC
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PART D. TO BE COMPLETED FOR IMPORT ONLY, OR COMBINED LICENSES, AMENDMENTS, OR RENEWALS

(If more space is needed to complete any of the items, use Pages 3-4 first, and then attach additional sheets, if necessary.)

12. NAME(S) / ADDRESS(ES) OF FOREIGN SUPPLIERS AND/OR OTHER PARTIES TO IMPORT	13. NAME(S) / ADDRESS(ES) OF INTERMEDIATE CONSIGNEE(S)	14. NAME(S) / ADDRESS(ES) OF ULTIMATE CONSIGNEE(S)	
12a. NRC EXPORT LICENSE NUMBER(S) <i>(if applicable)</i>	13a. LICENSE NUMBER(S) / EXPIRATION DATE(S)	14a. LICENSE NUMBER(S) / EXPIRATION DATE(S)	
	13b. INTERMEDIATE USE(S)	14b. INTERMEDIATE USE(S)	
15. DESCRIPTION OF RADIOACTIVE MATERIALS, SEALED SOURCES, NUCLEAR FACILITIES	15a. MAX TOTAL VOLUME / ELEMENT WGT (KG), OR TOTAL ACTIVITY (TBq)	15b. MAX ENRICHMENT OR WGT %	15c. MAX ISOTOPE WGT (KG)

16. FOREIGN OBLIGATIONS (BY COUNTRY AND BY PERCENTAGE OF MAXIMUM TOTAL VOLUME)

PART E. TO BE COMPLETED FOR ALL LICENSES, AMENDMENTS, OR RENEWALS

17. ADDITIONAL INFORMATION PROVIDED ON PAGES 3, 4, AND/OR ON SEPARATE SHEETS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	17a. COPIES OF RECIPIENTS' AUTHORIZATIONS PROVIDED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
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18. CERTIFICATION: I, the applicant's authorized official, hereby certify that this application is prepared in conformity with Title 10, Code of Federal Regulations, and that all information provided is correct to the best of my knowledge.

18a. PRINT NAME AND TITLE OF AUTHORIZED OFFICIAL <i>LYNN McVEY, AsstVP Clinical + Support Serv.</i>	18b. SIGNATURE - AUTHORIZED OFFICIAL <i>Lynn McVey</i>	18c. DATE <i>3/1/2007</i>
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