



814 LaPorte Avenue
Valparaiso, IN 46383
219.263.4600

www.porterhealth.org

September 27, 2007

US Nuclear Regulatory Commission
Region III
Materials Licensing Branch
2443 Warrenville Road
Suite 210
Lisle, IL 60532

REF: Transfer of Control

Dear Madam or Sir:

We wish to inform NRC of the following "Transfer of Control" for our facility as per NUREG 1556, Rev. 1, Appendix G as follows:

1. CHS/Community Health Systems, Inc., a Delaware corporation has purchased substantially all of the assets (Asset Purchase Agreement) of Porter Memorial Hospital (Porter) from the Board of Trustees of Porter Memorial Hospital, the Board of Commissioners of Porter County and the County Council of Porter County.

At closing Porter agreed to sell, convey, transfer and deliver to CHS all of the assets owned or used by Porter in connection with the operation of the Facilities.

2. There will be no changes in personnel or duties that relate to the licensed program
3. There will be no changes in the location, facilities, equipment or procedures that relate to the licensed program.
4. The status of the surveillance program (surveys, wipe tests, quality control) are conducted in full compliance with NRC standards at this time and will be expected to remain so in the future.
5. Not Applicable

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6. constraints conditions, requirements and commitments of Porter Memorial Hospital – Valparaiso Hospital Campus (transferor) with regards to our licensed program.

Sincerely,

A handwritten signature in black ink, appearing to read 'William H. Cummins', with a long horizontal flourish extending to the right.

William H. Cummins
Chief Operating Officer

NRC FORM 313
(10-2005)
10 CFR 30, 32, 33,
34, 35, 36, 39, and 40

U.S. NUCLEAR REGULATORY COMMISSION

APPROVED BY OMB: NO. 3150-0120

EXPIRES: 10/31/2008

Estimated burden per response to comply with this mandatory collection request: 4.4 hours. Submittal of the application is necessary to determine that the applicant is qualified and that adequate procedures exist to protect the public health and safety. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (7-5 F53), 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, (3150-0120), 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.

APPLICATION FOR MATERIAL LICENSE

INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW.

APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH:

DIVISION OF INDUSTRIAL AND MEDICAL NUCLEAR SAFETY
OFFICE OF NUCLEAR MATERIALS SAFETY AND SAFEGUARDS
U.S. NUCLEAR REGULATORY COMMISSION
WASHINGTON, DC 20555-0001

ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:

IF YOU ARE LOCATED IN:

ALABAMA, CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, FLORIDA, GEORGIA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, MISSISSIPPI, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, NORTH CAROLINA, PENNSYLVANIA, PUERTO RICO, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, VERMONT, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND APPLICATIONS TO:

LICENSING ASSISTANCE TEAM
DIVISION OF NUCLEAR MATERIALS SAFETY
U.S. NUCLEAR REGULATORY COMMISSION, REGION I
475 ALLENDALE ROAD
KING OF PRUSSIA, PA 19406-1415

IF YOU ARE LOCATED IN:

ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO:

MATERIALS LICENSING BRANCH
U.S. NUCLEAR REGULATORY COMMISSION, REGION III
2443 WARRENVILLE ROAD, SUITE 210
LISLE, IL 60532-4352

ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND APPLICATIONS TO:

NUCLEAR MATERIALS LICENSING BRANCH
U.S. NUCLEAR REGULATORY COMMISSION, REGION IV
611 RYAN PLAZA DRIVE, SUITE 400
ARLINGTON, TX 76011-4005

PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S. NUCLEAR REGULATORY COMMISSION JURISDICTIONS.

1. THIS IS AN APPLICATION FOR (Check appropriate item)

- A. NEW LICENSE
 B. AMENDMENT TO LICENSE NUMBER 13-17073-01
 C. RENEWAL OF LICENSE NUMBER

2. NAME AND MAILING ADDRESS OF APPLICANT (Include ZIP code)

Porter Hospital, LLC d/b/a Porter, Valparaiso Hospital
814 LaPorte Avenue
Valparaiso, IN 46383-5898

3. ADDRESS WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED

814 LaPorte Avenue
Valparaiso, IN 46383-5898

4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION

Terri Sabella, RN JD

TELEPHONE NUMBER

(214) 727-8943

SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER. THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.

5. RADIOACTIVE MATERIAL

a. Element and mass number; b. chemical and/or physical form; and c. maximum amount which will be possessed at any one time

6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED

7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE

8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS

9. FACILITIES AND EQUIPMENT

10. RADIATION SAFETY PROGRAM

11. WASTE MANAGEMENT

12. LICENSE FEES (See 10 CFR 170 and Section 170.31)

FEE CATEGORY AMOUNT ENCLOSED \$

13. CERTIFICATION (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT.

THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, 36, 39, AND 40, AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.

WARNING: 18 U.S.C. SECTION 1001 ACT OF JUNE 25, 1948 62 STAT. 749 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.

CERTIFYING OFFICER, TYPE/PRINTED NAME AND TITLE

William D. Cummins

SIGNATURE

William D. Cummins

DATE

OCT 15 2007

FOR NRC USE ONLY

TYPE OF FEE	FEE LOG	FEE CATEGORY	AMOUNT RECEIVED	CHECK NUMBER	COMMENTS
			\$		

APPROVED BY

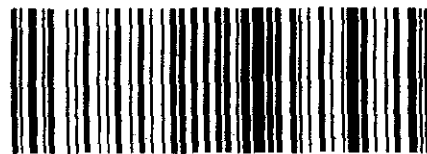
DATE

VPorter

814 LaPorte Avenue
Valparaiso, Indiana 46383

ADDRESS SERVICE REQUESTED

CERTIFIED MAIL™



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Hoster

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\$05.210
10/30/2007

US POSTAGE

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Lisle, IL 60532

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