

VOID SHEET

TO: License Fee Management Branch

FROM: RIII - Materials Licensing Branch

SUBJECT: VOIDED APPLICATION

Control Number: 316731

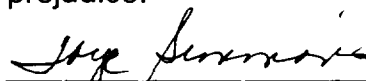
Applicant: Northern Michigan Hospital

License Number: 21-16732-01

Docket Number: 030-11715

Date Voided: March 7, 2008

Reason for Void: The licensee requested the addition of an Authorized User (AU), however, the training and experience information provided was not sufficient to add this individual to the license. This matter was discussed with the RSO on or about 2/13/08. As of this date void, the licensee has not been able to obtain the information required to complete this action. Therefore, this action is voided without prejudice.



Signature

3/7/08

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: _____
