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APR 16 2008

DNMS

April 10, 2008

Mr. Jack Whitten
Nuclear Materials Licensing Section
U.S. Nuclear Regulatory Commission
611 Ryan Plaza Drive
Arlington, TX 76011-8064

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DNMS

Dear Jack,

Big Sky Laser Technologies, Inc., hereby requests to amend Materials License #25-27639-01 to reflect the following changes in the titling and administration of the license:

1. Update the Licensee Name to Quantel USA.
 - a. Big Sky Laser has officially changed its name to Quantel USA in 2008.
2. Remove the following personnel as an authorized user for reason of termination of employment with Quantel USA.
 - a. Mr. Lucas Zemlicka

Should you or your staff have any question regarding this materials license amendment, please feel free to contact Mr. Jason Yager at the following:

Mr. Jason Yager
Radiation Safety Officer
(406) 586-0131-156
jyager@quantelusa.com

Sincerely,

Mr. Jason Yager, Systems Integration Manager/RSO
Quantel USA

QUANTEL USA

PO Box 8100
Bozeman, MT 59715
Tel. +1 406 586 0131
Fax +1 406 586 2924
www.quantel-laser.com

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No 4 7 1 7 8 0

Please provide the following information concerning changes of control (transferor and/or transferee, as appropriate). If any items are not applicable, so state.

1. Provide a complete description of the transaction (ie., transfer of stocks or assets, or merger). Indicate whether the name has changed and include the new name. Include the name and telephone number of a licensee contact who NRC may contact if more information is needed.

A. Description a complete description of the transaction: Big Sky Laser Tech., a division of Quantel since 1998, has changed its name to Quantel USA to better reflect the relationship between the groups in the market place.

*

B. No name change

New name of licensed organization: Quantel USA

C. No change in contact

New contact: _____

New telephone number: _____

2. Describe any changes in personnel or duties that relate to the licensed program. Include training and experience for new personnel.

A. No changes in personnel having control over licensed activities.

Changes in personnel having control over licensed activities (e.g. officers of a corporation):

B. No changes in personnel named in the license.

Changes in personnel named in the license (e.g. RSO, AUs) - include training, experience and responsibilities:

3. Describe, in detail, any changes in the organization, location, facilities, equipment or procedures that relate to the licensed program.

Organization:

Equipment:

Location:

Procedures:

Facility:

Not applicable

4. Describe the status of the surveillance program (e.g., surveys, wipe tests, quality control) at the present time and the expected status at the time that control is to be transferred.

A. Description of the status of all surveillance program: Current

B. Surveillance items & records: calibrations, leak tests, surveys, inventories, and accountability requirements will be current at the time of transfer.

Yes No (explain)

5. Confirm that all records concerning the safe and effective decommissioning of the facility will be transferred to the transferee or to NRC, as appropriate. These records include documentation of surveys of ambient radiation levels and fixed and/or removable contamination, including methods and sensitivity.

Records transferred to:

New licensee NRC for license termination Not applicable

6. Confirm that the transferee will abide by all constraints, conditions, requirements and commitments of the transferor or that the transferee will submit a complete description of the proposed licensed program. (Complete one of the following three items.)

A. _____ will abide by all constraints, conditions,
(transferee company)

requirements and commitments of _____
(transferor company)

Signature Title
Transferee Official

Signature Title
Transferor Official

Date

Date

OR

B. Description of proposed licensed program from transferee with signature, attached.

OR

* C. Not applicable (name change only)

[Signature]
Certifying Officer - Signature

4/16/08
Date

JASON A. YAGER, RSO
Certifying Officer - Typed name and title

MAY 8 2008

DATE

This is to acknowledge the receipt of your letter/application dated 4-10-08, and to inform you that the initial processing, which includes an administrative review, has been performed.

There were no administrative omissions. Your application will be assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.

Please provide to this office within 30 days of your receipt of this card:

The action you requested is normally processed within 90 days.

A copy of your action has been forwarded to our License Fee & Accounts Receivable Branch, who will contact you separately if there is a fee issue involved.

Your action has been assigned **Mail Control Number** 471780.
When calling to inquire about this action, please refer to this mail control number.
You may call me at 817-860-8103.

Sincerely,



Licensing Assistant

: (FOR LFMS USE)
: INFORMATION FROM LTS
: -----
:
: Program Code: 03620
: Status Code: 0
: Fee Category: 3M
: Exp. Date: 20090930
: Fee Comments:
: Decom Fin Assur Req: N
:

BETWEEN:
License Fee Management Branch, ARM
and
Regional Licensing Sections

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: BIG SKY LASER TECHNOLOGIES, INC.
Received Date: 20080416
Docket No: 3035151
Control No.: 471780
License No.: 25-27639-01
Action Type: Amendment

2. FEE ATTACHED

Amount: _____
Check No.: /

3. COMMENTS

Signed *Coleen Munsan*
Date 4-24-08

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 _____