BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

(FOR LFMS U
INFORMATION FR

Program Code: _____
Status Code: 3
Fee Category: _____
Exp. Date: 0
Fee Comments: _____
Decom Fin Assur Reqd

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED
   Applicant/Licensee: BASILICO ENGINEERING INC
   Received Date: 20080417
   Docket No: 3037746
   Control No.: 317082
   License No.:
   Action Type: New Licensee

2. FEE ATTACHED
   Amount: 12 00.00
   Check No.: 64

3. COMMENTS

Signed Rosemary Ione
Date 4-22-08

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is ent

1. Fee Category and Amount: _____

2. Correct Fee Paid. Application may be processed for:
   Amendment _____
   Renewal _____
   License _____

3. OTHER _____
   _____

Signed _____
Date _____