

<b>NRC FORM 7</b> (8-2007) 10 CFR 110	<b>U.S. NUCLEAR REGULATORY COMMISSION</b>	<b>APPROVED BY OMB: NO. 3150-0027</b>	<b>EXPIRES: 06/30/2009</b>
<b>APPLICATION FOR NRC EXPORT/IMPORT LICENSE, AMENDMENT, OR RENEWAL</b> (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.	

<b>PART A. FOR NRC USE ONLY</b>	<input checked="" type="checkbox"/> PUBLIC OR <input type="checkbox"/> NON-PUBLIC	DATE RECEIVED <b>5/19/08</b>
LICENSE NUMBER <b>PIB 100.0</b>	DOCKET NUMBER	ADAMS ACCESSION NUMBER

**PART B. TO BE COMPLETED FOR ALL LICENSES, AMENDMENTS, RENEWALS OR NOTIFICATIONS**  
(If more space is needed to complete any of the items, use Pages 3-4 first, and then attach additional sheets, if necessary.)

<b>1. NAME AND ADDRESS OF APPLICANT/LICENSEE</b>  <b>University of Pennsylvania</b> <b>3160 Chestnut Street, Suite 400</b> <b>Philadelphia, PA 19104</b>	<b>1a. NAME OF APPLICANT'S CONTACT</b> <b>Robert D. Forrest</b>	<b>1b. APPLICANT'S REFERENCE NUMBER</b>  <b>1c. PHONE NUMBER</b> <b>(215) 898-2109</b>	<b>1d. FAX NUMBER</b> <b>(215) 898-0140</b>
		<b>1e. E-MAIL ADDRESS</b> <b>rforrest@exchange.upenn.edu</b>	
<b>2. TYPE OF ACTION REQUESTED (Check One)</b> <input type="checkbox"/> EXPORT (Parts B, C, E) <input type="checkbox"/> NOTIFICATION OF EXPORT OF INCIDENTAL RADIOACTIVE MATERIAL (PART C, E) <input checked="" 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 <b>07/01/2008</b>	5. LAST SHIPMENT DATE <b>09/30/2012</b>	6. PROPOSED EXPIRATION DATE <b>09/30/2012</b>

**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)	
7a. FUNCTION(S) PERFORMED/SERVICE(S) PROVIDED	8a. INTERMEDIATE USE(S)	9a. ULTIMATE END USE(S)	
10. DESCRIPTION OF RADIOACTIVE MATERIALS, SEALED SOURCES, NUCLEAR FACILITIES, EQUIPMENT, OR COMPONENTS; FOR NUCLEAR EQUIPMENT INCLUDE TOTAL DOLLAR VALUE OF EQUIPMENT FOR EXPORT	10a. MAX TOTAL VOLUME / ELEMENT WGT (KG), OR TOTAL ACTIVITY (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**  
(8-2007)  
10 CFR 110

**U.S. NUCLEAR REGULATORY COMMISSION**

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

LICENSE NUMBER <b>PIB100.0</b>	DOCKET NUMBER	ADAMS ACCESSION NUMBER <b>ML</b>	<input checked="" 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  <b>Best Theratronics (formally MDS Nordion) 413 March Road Ottawa, Ontario K2K 0E4</b>	13. NAME(S) / ADDRESS(ES) OF INTERMEDIATE CONSIGNEE(S)	14. NAME(S) / ADDRESS(ES) OF ULTIMATE CONSIGNEE(S)
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12a. NRC EXPORT LICENSE NUMBER(S) (if applicable)	13a. LICENSE NUMBER(S) / EXPIRATION DATE(S)	14a. LICENSE NUMBER(S) / EXPIRATION DATE(S)
	13b. INTERMEDIATE USE(S)	14b. ULTIMATE END USE(S)

15. DESCRIPTION OF RADIOACTIVE MATERIALS, SEALED SOURCES, NUCLEAR FACILITIES  <b>Cesium 137 Sealed Sources Chemical Form: Element Physical Form: Solid Device is the Gammacell Elan 3000</b>	15a. MAX TOTAL VOLUME / ELEMENT WGT (KG), OR TOTAL ACTIVITY (TBq)  <b>113 TBq</b>	15b. MAX ENRICHMENT OR WGT %	15c. MAX ISOTOPE WGT (KG)
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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 type="checkbox"/> YES <input checked="" 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  <b>Robert D. Forrest, CHP Radiation Safety Officer</b>	18b. SIGNATURE -- AUTHORIZED OFFICIAL  	18c. DATE  <b>5-16-2008</b>
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Environmental Health & Radiation Safety

May 16, 2008

Scott W. Moore, Deputy Director  
Office of International Programs  
U.S. Nuclear Regulatory Commission  
Washington, DC 20555-0001

PIB 100.0  
Received 5/19/08

Dear Mr. Moore:

Please find enclosed an import license request for a Best Theratronics Gammacell irradiator model no GC 3000.

The University of Pennsylvania is already licensed for this device under Pennsylvania State License No. 37-00118-11. The University of Pennsylvania is a non profit educational establishment so no import license fee is required.

If you need further information in support of this request please contact Robert Forrest at (215) 898-7187

Sincerely

A handwritten signature in blue ink that reads "Matthew Finucane".

Matthew Finucane CIH  
Director

cc. Robert Forrest, CHP

Moore 08-00752 AM-dp