



**RESPONSE TO FREEDOM OF INFORMATION ACT (FOIA) / PRIVACY ACT (PA) REQUEST**

2008-0337

1

RESPONSE TYPE  FINAL  PARTIAL

REQUESTER

Jarrad Kantor

DATE

OCT - 7 2008

**PART I. -- INFORMATION RELEASED**

- No additional agency records subject to the request have been located.
- Requested records are available through another public distribution program. See Comments section.
- APPENDICES **A** Agency records subject to the request that are identified in the listed appendices are already available for public inspection and copying at the NRC Public Document Room.
- APPENDICES **B** Agency records subject to the request that are identified in the listed appendices are being made available for public inspection and copying at the NRC Public Document Room.
- Enclosed is information on how you may obtain access to and the charges for copying records located at the NRC Public Document Room, 11555 Rockville Pike, Rockville, MD 20852-2738.
- APPENDICES **B** Agency records subject to the request are enclosed.
- Records subject to the request that contain information originated by or of interest to another Federal agency have been referred to that agency (see comments section) for a disclosure determination and direct response to you.
- We are continuing to process your request.
- See Comments.

**PART I.A -- FEES**

AMOUNT \*  
\$ 54.80

- You will be billed by NRC for the amount listed.  None. Minimum fee threshold not met.
- You will receive a refund for the amount listed.  Fees waived.

\* See comments for details

**PART I.B -- INFORMATION NOT LOCATED OR WITHHELD FROM DISCLOSURE**

- No agency records subject to the request have been located.
- Certain information in the requested records is being withheld from disclosure pursuant to the exemptions described in and for the reasons stated in Part II.
- This determination may be appealed within 30 days by writing to the FOIA/PA Officer, U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001. Clearly state on the envelope and in the letter that it is a "FOIA/PA Appeal."

**PART I.C COMMENTS (Use attached Comments continuation page if required)**

The records identified on Appendix A are publicly available in the NRC's Public Electronic Reading Room at <http://www.nrc.gov/reading-rm.html>. If you need assistance in obtaining these records, please contact the NRC's Public Document Room (PDR) at 301-415-4737, or 1-800-397-4209, or by e-mail to [PDR.Resource@nrc.gov](mailto:PDR.Resource@nrc.gov).

The incoming FOIA/PA-2008-0337 request is located in ADAMS at ML082670412.

The actual fees for processing your request are:

1/2 hr. professional search @ \$53.80 per hr. = \$26.90  
 1/2 hr. professional review @ \$53.80 per hr. = \$26.90  
 5 pages of duplication @ \$0.20 per page = \$1.00  
 Total = \$54.80

SIGNATURE - FREEDOM OF INFORMATION ACT AND PRIVACY ACT OFFICER

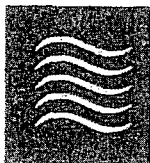
Donna L. Sealing *Donna L. Sealing*

**APPENDIX A  
RECORDS ALREADY PUBLICLY AVAILABLE**

| <u>NO.</u> | <u>DATE</u> | <u>ACCESSION<br/>NUMBER</u> | <u>DESCRIPTION/(PAGE COUNT)</u>   |
|------------|-------------|-----------------------------|---|
| 1.         | 03/13/2008  | ML080940245                 | St. James Hospital, Termination Request<br>dtd 03/13/2008 (12 pages)                                  |
| 2.         | 04/23/2008  | ML081190468                 | St. James Hospital, License Termination,<br>License Amendment No. 30, Control No.<br>142209 (4 pages) |
| 3.         | 01/16/2007  | ML070230080                 | Columbus Hospital, License Amendment<br>No. 30, Control No. 139935 (5 pages)                          |
| 4.         | 06/18/2008  | ML082120491                 | Columbus Hospital, Submittal of Additional<br>Information (9 pages)                                   |
| 5.         | 06/26/2008  | ML081980609                 | Columbus Hospital, Termination Request<br>Ltr. (3 pages)  |
| 6.         | 07/29/2008  | ML082180140                 | Columbus Hospital, Deficiency Response<br>Fax (3 pages)   |
| 7.         | 07/31/2008  | ML082180023                 | Columbus Hospital, License Termination<br>Amendment 31, Control No. 142563 (3<br>pages)               |

APPENDIX B  
RECORDS BEING RELEASED IN THEIR ENTIRETY

| <u>NO.</u> | <u>DATE</u> | <u>ACCESSION<br/>NUMBER</u> | <u>DESCRIPTION/(PAGE COUNT)</u>  |
|------------|-------------|-----------------------------|--|
| 1.         | 06/26/2002  | ML021770591                 | St. James Hospital, Issuance of License<br>Amendment, Control No. 131615 (5 pages) |



# Property Solutions INC.

Environmental & Engineering Consulting

31A Northfield Avenue • Edison, New Jersey 08837 • 732-417-0999 • Fax 732-417-0888

September 16, 2008

U.S. Nuclear Regulatory Commission  
OPA FOIA Officer  
11555 Rockville Pike  
Rockville, MD 20852

### FOIA/PA REQUEST

|              |                  |
|--------------|------------------|
| Case no.     | <u>2008-0337</u> |
| Date Rec'd   | <u>9-23-08</u>   |
| Specialist   | _____            |
| Related Case | _____            |

**RE: Columbus Hospital**  
495 North 13<sup>th</sup> Street  
Newark, NJ 07107  
Property Solutions #: 20082046


**St. James Hospital**  
155 Jefferson Street  
Newark, NJ  
Property Solutions #: 20082047

Dear Freedom of Information Officer:

Property Solutions, Inc. is conducting a Phase I Environmental Assessment at the aforementioned subject property. As part of a property assessment, are submitting this request under the U.S. Freedom of Information Act. We are interested in locating information pertaining to the use of/ permits for radioactive materials at the properties listed above.

**If you have any questions, please call me at 732-417-0999, or email me at [jkantor@propertyolutionsinc.com](mailto:jkantor@propertyolutionsinc.com). If you have no information on the property, please fill in the box below and fax back to me at 732-417-0888. Thank you for your assistance.**

Sincerely,

  
Jarrad Kantor  
Environmental Scientist

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> | No Files for subject property or address |
| Name:                    | _____                                    |
| Title:                   | _____                                    |
| Phone:                   | _____                                    |
| X                        | _____                                    |
| Signature                | Date                                     |

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