

NRC FORM 7 (8-2007) 10 CFR 110		U.S. NUCLEAR REGULATORY COMMISSION		APPROVED BY OMB: NO. 3150-0027		EXPIRES: 06/30/2009	
APPLICATION FOR NRC EXPORT/IMPORT LICENSE, AMENDMENT, OR RENEWAL (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.			
PART A. FOR NRC USE ONLY		<input checked="" type="checkbox"/> PUBLIC OR <input type="checkbox"/> NON-PUBLIC		DATE RECEIVED 10-17-08			
LICENSE NUMBER DCB 105.00		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.)							
1. NAME AND ADDRESS OF APPLICANT/LICENSEE Children's Hospital of Wisconsin, Inc. 9000 W. Wisconsin Ave. Milwaukee, WI 53201		1a. NAME OF APPLICANT'S CONTACT Althea Roquemore-Goins		1b. APPLICANT'S REFERENCE NUMBER NA Appl. Dkt. 924-08			
		1c. PHONE NUMBER 414-266-2520		1d. FAX NUMBER 414-266-2779			
		1e. E-MAIL ADDRESS aroquemore-goins@chw.org					
2. TYPE OF ACTION REQUESTED (Check One). <input type="checkbox"/> EXPORT (Parts B, C, E) <input type="checkbox"/> NOTIFICATION OF EXPORT OF INCIDENTAL RADIOACTIVE MATERIAL (PART C, E) <input type="checkbox"/> IMPORT (Parts B, D, E) <input checked="" type="checkbox"/> COMBINED EXPORT/IMPORT (Parts B, C, D, E) <input type="checkbox"/> AMENDMENT/RENEWAL Existing License Number:							
3. CONTRACT NUMBER(S) Not applicable		4. FIRST SHIPMENT DATE 11-1-08		5. LAST SHIPMENT DATE 12-1-09		6. PROPOSED EXPIRATION DATE 12-1-09	
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 not applicable		8. NAME(S) / ADDRESS(ES) OF INTERMEDIATE FOREIGN CONSIGNEE(S) N/A		9. NAME(S) / ADDRESS(ES) OF ULTIMATE FOREIGN CONSIGNEE(S) Best Theratronics 413 March Road Ottawa, Ontario K2K 0E4 Canada			
7a. FUNCTION(S) PERFORMED/SERVICE(S) PROVIDED		8a. INTERMEDIATE USE(S)		9a. ULTIMATE END USE(S) Best Theratronics accepts return sources from customers for inspection, disposal, recycling or reuse			
10. DESCRIPTION OF RADIOACTIVE MATERIALS, SEALED SOURCES, NUCLEAR FACILITIES, EQUIPMENT, OR COMPONENTS; FOR NUCLEAR EQUIPMENT INCLUDE TOTAL DOLLAR VALUE OF EQUIPMENT FOR EXPORT Cesium 137 Sealed source Chemical form: Element Physical form: Solid Device: Gammacell 1000		10a. MAX TOTAL VOLUME / ELEMENT WGT (KG), OR TOTAL ACTIVITY (TBq) 1449 Ci (53.61 TBq)		10b. MAX ENRICHMENT OR WGT % N/A		10c. MAX ISOTOPE WGT (KG) N/A	
11. FOREIGN OBLIGATIONS (BY COUNTRY AND BY PERCENTAGE OF MAXIMUM TOTAL VOLUME)							

Rec'd 10-17-08
 RB

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(8-2007)
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U.S. NUCLEAR REGULATORY COMMISSION

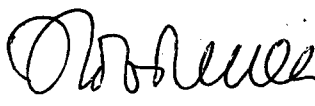
APPLICATION FOR NRC EXPORT/IMPORT
LICENSE, AMENDMENT, OR RENEWAL (Continued)

LICENSE NUMBER PCB105-00	DOCKET NUMBER	ADAMS ACCESSION NUMBER	<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 Best Theratronics 413 March Road Ottawa, Ontario K2K 0E4 Canada	13. NAME(S) / ADDRESS(ES) OF INTERMEDIATE CONSIGNEE(S) N/A	14. NAME(S) / ADDRESS(ES) OF ULTIMATE CONSIGNEE(S) N/A	
12a. NRC EXPORT LICENSE NUMBER(S) (if applicable) N/A	13a. LICENSE NUMBER(S) / EXPIRATION DATE(S) N/A	14a. LICENSE NUMBER(S) / EXPIRATION DATE(S) N/A	
	13b. INTERMEDIATE USE(S) N/A	14b. ULTIMATE END USE(S) N/A	
15. DESCRIPTION OF RADIOACTIVE MATERIALS, SEALED SOURCES, NUCLEAR FACILITIES Cesium 137 Sealed sources Chemical form: Element Physical form: Solid Device is the Grammacell 1000	15a. MAX TOTAL VOLUME / ELEMENT WGT (KG), OR TOTAL ACTIVITY (TBq) 3048 Ci (112.8 TBq)	15b. MAX ENRICHMENT OR WGT % N/A	15c. MAX ISOTOPE WGT (KG) N/A
16. FOREIGN OBLIGATIONS (BY COUNTRY AND BY PERCENTAGE OF MAXIMUM TOTAL VOLUME) N/A			

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 type="checkbox"/> NO	17a. COPIES OF RECIPIENTS' AUTHORIZATIONS PROVIDED? <input type="checkbox"/> YES <input type="checkbox"/> NO	
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 Radiation Safety Officer Robert G. Wells, MD	18b. SIGNATURE -- AUTHORIZED OFFICIAL 	18c. DATE 9/24/08

Rec'd
10-17-08
RB



Children's Hospital
of Wisconsin®

A member of Children's Hospital and Health System.

PO Box 1997
Milwaukee, WI 53201-1997
Phone (414) 266-2000
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October 13, 2008

Scott Moore, Deputy Director
Office of International Programs, MS 4E21
U. S. Nuclear Regulatory Commission
One White Flint North
11555 Rockville Pike
Rockville, Maryland 20852-2738

Re: Purchase of a Blood Irradiator

Dear Mr. Moore:

The Department of Pathology and Laboratory Services for Children's Hospital of Wisconsin, Inc. is requesting an import license for the purchase of a new blood irradiator from Best Theratronics, Ottawa, Ontario.

The completed application for NRC Export/Import license is included with this letter.

If you have any questions, please contact Altheia Roquemore-Goins at (414) 266-2520.

Thank you,

Altheia Roquemore-Goins, MS, BA, MT(ASCP)
Administrative Director
Pathology and Laboratory Services
Phone: 414-266-2520
Email: aroquemoregoins@chw.org

ARG/kl

PC B10500

*Rec'd
10-17-08
RB*