JOSE D. MACATANGAY
MATERIALS LICENSING BRANCH
UNITED STATES NUCLEAR REGULATORY COMMISSION
REGION III
2443 WARRENVILLE ROAD STE 210
LISLE, ILLINOIS 60532-4352
OFFICE: (630)-829-9892 FAX: (630) 515-1078

CONVERSATION RECORD ACTUALLY FAXED?	TIME **Yes**	DATE **09/22/2009**

NAME OF PERSON(S) CONTACTED	ORGANIZATION	TELEPHONE NO
Kevin B. Miller, consultant	Covenant Medical Center, Inc.	O: 800-321-2207 M: 810-923-8675 F: 734-662-9224

SUBJECT
License No.: 21-01492-02 Control No.: 318402

SUMMARY
We have reviewed your letter dated July 31, 2009, and find that we need additional information as follows:

1. Please verify if Dr. Henry A. Shevitz will be added as an authorized user to your license.

We will be unable to continue processing your request until we receive this information. In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice, " a copy of this letter will be available electronically in the NRC Public Document Room or from the Publicly Available Record (PARS) component of NRC's document system (ADAMS) accessible from the NRC Website at http://www.nrc.gov/reading-rem/adams.html.

ACTION REQUIRED

Please submit a written response within 30-days or contact me to arrange an alternate response date. Be sure to reference control number 318402 to facilitate correct processing of your response.

If we do not receive a written response within 30-days, please note that we may void this request in order to enable you to prepare a quality response without time constraints. This would be done without prejudice to the resubmission of your request at a later date. Upon receipt of your response we will resume our review. Address your written response to my attention at the above address.

Please note that a "Void" is an administrative procedure that puts your amendment request "On Hold" (takes it out of our active casework database) until you reactivate it via submission of a written response.

Upon receipt of your response we will resume our review.

PLEASE DIRECT ANY QUESTIONS YOU MAY HAVE TO ME AT (630) 829-9892.

NAME OF PPERSON DOCUMENTING CONVERSATION	SIGNATURE	DATE
Jose Macatangay	Jose Macatangay	September 22, 2009

NRC FORM 386 (RIII)
(4-2004)

UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION III
2443 Warrenville Road, Suite 210
Lisle, Illinois 60532-4352

TELEFAX TRANSMITTAL

DATE: 09/22/2009

NUMBER OF PAGES: 2
(including this page)

SEND TO: **Kevin B. Miller, consultant**

LOCATION: **Covenant Medical Center, Inc.**

FAX NUMBER: **734 - 662 - 9224** ☑ ***VERIFY BY CALLING SENDER***

FROM:
(SENDER) **Jose Macatangay** JM

TELEPHONE NUMBER: **630 - 829 - 9892** FAX NUMBER: **630 - 515 - 1078**

If you do not receive the complete fax transmittal, please contact the sender as soon as possible at the telephone number provided above.

MESSAGE

TRANSMISSION VERIFICATION REPORT

TIME : 09/22/2009 08:11
NAME : USNRC RIII
FAX : 6308299782
TEL :
SER.# : 000A7J925774

DATE,TIME	09/22 08:11
FAX NO./NAME	87346629224
DURATION	00:00:40
PAGE(S)	02
RESULT	OK
MODE	STANDARD ECM

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MESSAGE