



POPLAR BLUFF
MEDICAL PARTNERS

An affiliate of Saint Francis Healthcare System

US Nuclear Regulatory Commission
Region III
Materials Licensing Section
2443 Warrenville Road, Suite 210
Lisle, IL 60532-4351

November 08, 2011

RE: Transfer of Control

Dear Reviewer:

This is a request notifying NRC that we are seeking permission for modification of our license (NRC#24-32383-01 exp 4-30-12) to Transfer Control as follows:


- 1). The new name of the licensed organization is; Black River Community Medical Center, DBA Black River Medical Center. The address and the areas of use remain the same as currently stated on our materials license.
- 2). The phone number is; (576)727-9080. The contact person remains, Ms. Susan Merick.
- 3). There are no changes in personnel having control over this license.
- 4). The transferor will continue to exist without a license.
- 5). All current assets will be leased by Poplar Bluff Medical Partners to Black River Medical Center. There is no transfer of stocks.
- 6). There are no changes in organization, location, facility, equipment or procedures.
- 7). RAM use, possession, location and storage will remain the same.
- 8). All surveillance items and records will be current at the time of transfer.
- 9). There are no records required under 10 CFR 30.35 (g) that concern this transfer.
- 10). Surveys for contamination will be conducted per our current procedures on the day prior to the transfer. Although no contamination is anticipated, Black River Medical Center will assume full liability for the decontamination at the time of transfer of control.
- 11). There are no decommissioning plans required of this licensee under 10 CFR 30.35.
- 12). Black River Medical Center, agrees to abide by all commitments and representations previously made to NRC by Poplar Bluff Medical Partners. Black River Medical Center, accepts full liability for the site. No decommissioning is required.

There are no open inspection items for this license.

- 13). Black River Medical Center, agrees to the transfer of control of the licensed material and activity and is aware that there are no open inspection items.
- 14). Black River Medical Center, will abide by all constraints, conditions, requirements, representations and commitments identified in the current license.

Thank you in advance for your prompt attention to this request. Please feel free to contact our facility at: (573)727-9080, if you have any further questions.

Sincerely,


Name, Title



POPLAR BLUFF Medical Partners

An affiliate of Saint Francis Healthcare System

Fax

To: Rosemary Jones

From: Susan Merick

FAX: 630-515-1078

Pages: including cover

Phone: 630-829-9851

Date:

Re:

cc:

☒ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**