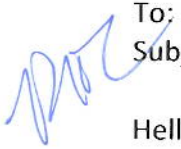


From: Irene Sakimoto [mailto:isakimot@hawaii.edu]  
Sent: Friday, September 07, 2012 7:36 PM  
To: Cook, Jackie  
Subject: NRC License amendment



SEP 10 2012

Hello Ms. Cook,

Docket No.: 030-07571  
License No.: 53-00017-23  
Control: 575912

The University of Hawaii would like to amend our NRC license to remove line item 6. Z. Americium-241, Foil source (Nuclear Radiation Development, LLC Model A-001, 1 millicurie. The source was disposed by sending it back to NRC, LLC. The Return Authorization Form and the Proof of Compliance papers are attached as requested.

Please let me know if you need additional information.

Thank you very much for your attention to this matter.

Sincerely,  
Irene Sakimoto  
Radiation Safety Officer  
University of Hawaii  
Environmental Health and Safety Office  
2040 Eat-West Road  
Honolulu, HI 96822  
Phone: 808-956-6475  
Fax: 808-956-3205  
email: [isakimot@hawaii.edu](mailto:isakimot@hawaii.edu)

PUBLIC  
 Immediate Release  
 Normal Release

NON-PUBLIC  
 A.3 Sensitive-Security Related  
 A.7 Sensitive Internal  
 Other: \_\_\_\_\_

Reviewer: ISC Date: 9-19-12

579107



NRD, LLC  
 2937 ALT BOULEVARD  
 PO BOX 310  
 GRAND ISLAND, NY  
 14072-0310

800-525-8076  
 716-773-7634  
 716-773-7744 FAX  
 service@nrdinc.com

Friday, September 07, 2012

UNIV. OF HAWAII  
 BYRON BLOMQUIST  
 2040 EAST-WEST ROAD  
 HONOLULU, HI 96822

ATTN: SAFETY MANAGER

We are in receipt of the item(s) returned to NRD, LLC for waste disposal.

This letter serves as Proof of Compliance that the device(s) listed below have been disposed, and the service performed under New York State License 1391-1811.

<u>Device/Model</u>	<u>Qty</u>	<u>Serial #</u>	<u>To Serial#</u>	<u>Manufactured</u>	<u>NRD's Sales Order#</u>	<u>Millieuries</u>
A001	1	n/a	n/a	N/A		1
					<u>Total Millieuries</u>	1

Isotope: Americium 241

Your Original Po #

NRD's Original Sales Order #

Very truly yours,

Douglas Davis

Safety Officer

1579107



NRD, LLC  
 2937 ALT BOULEVARD  
 PO BOX 310  
 GRAND ISLAND, NY  
 14072-0310

800-525-8076  
 716-773-7634  
 716-773-7744 FAX  
 service@nrdinc.com

**Return Authorization Form**

RA No. 2365      Issued By SA      Date Issued 8/22/2012      Return Date  
 Customer PO      Sales Order#      Order Date 8/22/2012  
 Company Name UNIVERSITY OF HAWAII  
 Contact Name BYRON BLOMQUIST  
 Street Address 2040 EAST WEST RD  
 City HONOLULU      State HI      Zip 96822  
 Phone 808-956-6475

Return Packaging:  Packaging    Labels    Both    None Required  
 Date Pack/Labels Shipped:  AM-241    NI-63    PO-210    TRITIUM    OTHER  
 Reason for Return  
 Disposal    12mos or more    Less than 12mos    Other   0 Disposal Fee %  
 Credit    Full Credit    Partial Less   0 % Restocking Fee    30day Performance  
 Other    Service    Repair    Evaluation  
 Comments AM-241 DISPOSAL

Qty	Model	Device Description	Mfg Date	Serial Nos
1	AM-241	stock code: BX0001 Model: A-001	receipt date: 9/2007	037980 1.0mCi (37MBq)



DATE  
09/17/2012

NAME AND ADDRESS OF APPLICANT AND/OR LICENSEE

University of Hawaii  
Office of the President  
ATTN: Irene K. Sakimoto  
Radiation Safety Officer  
2444 Dole Street  
Honolulu, HI 96822

LICENSE NUMBER

53-00017-23

MAIL CONTROL NUMBER

579107

LICENSING AND/OR TECHNICAL REVIEWER

ch

This is to acknowledge the receipt of your:

LETTER and/or  APPLICATION      DATED: 09/10/2012

The initial processing, which included an administrative review, has been performed.

AMENDMENT     TERMINATION     NEW LICENSE     RENEWAL

- There were no administrative omissions identified during our initial review.
- This is to acknowledge receipt of your application for renewal of the material(s) license identified above. Your application is deemed timely filed, and accordingly, the license will not expire until final action has been taken by this office.
- Your application for a new NRC license did not include your taxpayer identification number. Please fill out NRC Form 531, located at the following link:

<http://www.nrc.gov/reading-rm/doc-collections/forms/nrc531.pdf>

Send the completed NRC Form 531, by facsimile, to the following number: (301) 415-5387

A copy of your action has been emailed to our License Fee and Accounts Receivable Branch, in our Headquarters office in Rockville, MD. You will be contacted separately if there is a fee issue involved.

Your application has been assigned the above listed **MAIL CONTROL NUMBER**. When calling to inquire about this action, please refer to this control number. Your application has been forwarded to a technical reviewer. Please note that the technical review, which is normally completed within 180 days for a renewal application (90 days for all other requests), may identify additional omissions or require additional information. If you have any questions concerning the processing of your application, our contact information is listed below:

Region IV  
U. S. Nuclear Regulatory Commission  
DNMS/NMSB - B  
1600 E. Lamar Boulevard  
Arlington, TX 76011-4511  
(817) 200-1103 or (817) 200-1140

*9/17/12*

BETWEEN:

Accounts Receivable/Payable  
and  
Regional Licensing Branches

[ FOR ARPB USE ]  
INFORMATION FROM WBL

Program Code: 01100  
Status Code: Pending Amendment  
Fee Category: 3L 3P  
Exp. Date:  
Fee Comments: 170.11(A)(4)  
Decom Fin Assur Req'd: Y

## License Fee Worksheet - License Fee Transmittal

### A. REGION

#### 1. APPLICATION ATTACHED

Applicant/Licensee: HAWAII, UNIVERSITY OF  
Received Date: 09/10/2012  
Docket Number: 3007517  
Mail Control Number: 579107  
License Number: 53-00017-23  
Action Type: Amendment

#### 2. FEE ATTACHED

Amount: \_\_\_\_\_

Check No.: \_\_\_\_\_

#### 3. COMMENTS

Signed: Carl L. Hill

Date: 9/17/12

### B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered / / )

1. Fee Category and Amount: \_\_\_\_\_

#### 2. Correct Fee Paid. Application may be processed for:

Amendment: \_\_\_\_\_

Renewal: \_\_\_\_\_

License: \_\_\_\_\_

3. OTHER \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_