



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION IV
1600 EAST LAMAR BOULEVARD
ARLINGTON, TEXAS 76011-4511

June 24, 2013

Construction Testing & Engineering, Inc.
ATTN: Rodney D. Ballard
Radiation Safety Officer
1441 Montiel Road, Suite 115
Escondido, California 92026

SUBJECT: VOIDANCE OF APPLICATION FOR LICENSE AMENDMENT, CONTROL NO.
580295

Dear Mr. Ballard:

This concerns the subject application received on March 4, 2013, for amendment of your material license, and our telephone calls in which we notified you that the application was deficient and that certain additional information was required. To date, we have not received a response to our telephone calls. Because you were not able to supply the additional information required to complete the requested action, we have voided your application. This action is taken without prejudice to the resubmission of your request.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter will be available electronically for public inspection in the NRC Public Document Room or from the NRC's document system (ADAMS). ADAMS is accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html>.

Thank you for your cooperation.

Sincerely,

/RA/

Michelle Simmons, Health Physicist
Nuclear Materials Safety Branch B

Docket: 030-34317
License: 04-29106-01
Control: 580295

Enclosures: As stated



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ARLINGTON, TEXAS 76011-4511

VOID SHEET

TO: License Fee and Accounts Receivable Branch

FROM: Region IV, DNMS, NMSB-B

SUBJECT: VOIDED AMENDMENT REQUEST

Applicant: Construction Testing & Engineering, Inc.

License No.: 04-29106-01

Control No.: 580295

Docket No.: 03034317

Reason for Void: Licensee did not submit enough information to complete the amendment request. Attempts to contact the licensee were unsuccessful.

Reviewer: M. Simmons

Date: 06/24/13

Licensing Assistant: *am*

Date: *6/24/13*

Attachment:

ML Control No. of Voided Action: 580295

FOR LFMB USE ONLY

Refund Authorized and Processed

No Refund

Fee Exempt or Fee Not Required

Comments:

Log Completed

Processed By: _____