

VOID SHEET

TO: License Fee Management Branch

FROM: RIII - Materials Licensing Branch

SUBJECT: VOIDED APPLICATION

Control Number: 588503

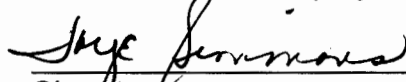
Applicant: St. John Macomb – Oakland Hospital

License Number: 21-01190-05

Docket Number: 030-02005

Date Voided: November 05, 2015

Reason for Void: The licensee requested the addition of an authorized user for 100 and 200 material. The information submitted and asked for was not sufficient to add the person to the license. Specifically, the training provided did not include generator training also the hours for classroom and work experience were not sufficient. This action was voided without prejudice.

  
\_\_\_\_\_  
Signature

11/05/15  
Date

Attachment:  
Official Record Copy of  
Voided Action  
FOR LFMB USE ONLY

Refund Authorized and processed

No Refund Due

Fee Exempt or Fee Not Required

Comments: \_\_\_\_\_ Log completed \_\_\_\_\_

Processed by: \_\_\_\_\_