# Hill, Carol

From:

Traci Hollingshead <Traci.Hollingshead@avera.org>

Sent:

Monday, November 14, 2016 1:39 PM

To:

Hill, Carol

Subject:

[External\_Sender] Avera McKennan amendment request

**Attachments:** 

Form 313.pdf; 2016-11-14 Add Dr. Stephen J. Dick as AU for HDR.pdf

Please see attached amendment request.

Thank you, Traci

Traci Hollingshead Radiation Safety Officer Avera Radiation Oncology 1000 E. 23rd Street, Suite 100 Sioux Falls, SD 57105 (605) 310-0916 traci.hollingshead@avera.org

PUBLIC Immediate Release
Di-Normal Release
NON-PUBLIC
A.3 Sensitive-Security Related
A.7 Sensitive Internal
Other:
Reviewer: Date: 29-16

NRC FORM 313 (06-2016) 10 CFR 30, 32, 33, 34 U.S. NUCLEAR REGULATORY COMMISSION

APPROVED BY OMB: NO. 3150-0120

EXPIRES: 06/30/2019

35, 36, 37, 39, and 40

# APPLICATION FOR MATERIALS LICENSE

Estimated burden per response to comply with this mandatory collection request: 4.3 hours. Submittal of the application is necessary to determine that the applicant is qualified and that adequate procedures exist to protect the public health and safety. Send comments regarding burden estimate to the FOIA, Privacy, and information Collections Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0120), Office of Management and Budget, Washington, DC 20503. If a means used to Impose an information collection does not displey a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

INSTRUCTIONS: SEE THE CURRENT VOLUMES OF THE NUREG-1556 TECHNICAL REPORT SERIES ("CONSOLIDATED GUIDANCE ABOUT MATERIALS LICENSES") FOR DETAILED INSTRUCTIONS FOR COMPLETING THIS FORM: <a href="http://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1556/">http://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1556/</a>. SEND TWO COPIES OF THE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW.

SEND TWO COPIES OF THE COMPLETED APPLICATION TO THE NRC OFFICE	SPECIFIED BELOW.						
APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH:	IF YOU ARE LOCATED IN:						
MATERIALS SAFETY LICENSING BRANCH DIVISION OF MATERIAL SAFETY, STATE, TRIBAL AND RULEMAKING PROGRAMS OFFICE OF NUCLEAR MATERIALS SAFETY AND SAFEGUARDS U.S. NUCLEAR REGULATORY COMMISSION	ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO: MATERIALS LICENSING BRANCH						
WASHINGTON, DC 20555-0001	U.S. NUCLEAR REGULATORY COMMISSION, REGION III 2443 WARRENVILLE ROAD, SUITE 210						
ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:  IF YOU ARE LOCATED IN:	LISLE, IL 60532-4352						
ALABAMA, CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, FLORIDA, GEORGIA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, NORTH CAROLINA, PENNSYLVANIA, PUERTO RICO, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, VERMONT, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA,	ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MISSISSIPPI, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING,						
SEND APPLICATIONS TO:	SEND APPLICATIONS TO:						
LICENSING ASSISTANCE TEAM DIVISION OF NUCLEAR MATERIALS SAFETY U.S. NUCLEAR REGULATORY COMMISSION, REGION I 2100 RENAISSANCE BOULEVARD, SUITE 100 KING OF PRUSSIA, PA 19406-2713	NUCLEAR MATERIALS LICENSING BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION <b>IV</b> 1600 E. LAMAR BOULEVARD ARLINGTON, TX 78011-4511						
PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE L AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S.NUCLEAR REGU							
THIS IS AN APPLICATION FOR (Check appropriate item)	2, NAME AND MAILING ADDRESS OF APPLICANT (Include ZIP code)						
A. NEW LICENSE	Avera McKennan						
B. AMENDMENT TO LICENSE NUMBER 40-16571-01	1325 South Cliff Avenue						
C. RENEWAL OF LICENSE NUMBER	Sioux Falls, SD 57117						
3. ADDRESS WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED	4. NAME OF PERSON TO BE CONTACTED ABO	OUT THIS APPLICATION					
	Traci Hollingshead, Radiation Safety Officer						
	BUSINESS TELEPHONE NUMBER BUSINESS CELLULAR TELEPHONE NUMBER						
	(605) 310-0916	(605) 310-0916					
	BUSINESS EMAIL ADDRESS						
	traci.hollingshead@avera.org						
SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER. THE TYPE AND SCOPE OF INFORMAT	TON TO BE PROVIDED IS DESCRIBED IN THE LI	CENSE APPLICATION GUIDE.					
5. RADIOACTIVE MATERIAL	6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED.						
Element and mass number; b. chemical and/or physical form; and c. maximum amount which will be possessed at any one time.	<ol> <li>INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING AND EXPERIENCE.</li> </ol>						
8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS,	9. FACILITIES AND EQUIPMENT.						
10. RADIATION SAFETY PROGRAM,	11. WASTE MANAGEMENT.						
<ol> <li>LICENSE FEES (Fees required only for new applications, with few exceptions*) (See 10 CFR 170 and Section 170.31)         *Amendments/Renewals that increase the scope of the existing license to a new or higher</li> </ol>	L	AMOUNT \$					
<ol> <li>CERTIFICATION. (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT UPON THE APPLICANT.</li> </ol>	ALL STATEMENTS AND REPRESENTATIONS MA	ADE IN THIS APPLICATION ARE BINDING					
THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, 38, 37, 38, AND 40, AND THAT ALL INFORMATION CONTANED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.  WARNING: 18 U.S.C. SECTION 1001 ACT OF JUNE 25, 1948 62 STAT, 749 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.							
CERTIFYING OFFICER - TYPED/PRINTED NAME AND TITLE	SIGNATURE	DATE					
Traci Hollingshead Radiation Safety Officer	Traci Hollings	11-14-16					
The state of the s	USE ONLY						
TYPE OF FEE LOG FEE CATEGORY AMOUNT RECEIVED CHECK NUMBER COMMENTS							
APPROVED SY DATE							



1325 S. Cliff Ave. P.O. Box 5045 Sioux Falls, SD 57117-5045 605-322-8000

AveraMcKennan.org

November 14, 2016

Nuclear Regulatory Commission Nuclear Materials Safety Branch B Region IV 1600 East Lamar Boulevard Arlington Texas 76011

RE: NRC license #40-16571-01

To whom it may concern:

The intent of this amendment request is to add Stephen J. Dick as an authorized user for 10 CFR 35.600 remote afterloader unit. Dr. Dick is currently authorized for this use under NRC license number 40-15633-01.

Please contact me at (605) 310-0916 or by email at traci.hollingshead@avera.org if you have any questions regarding this amendment request.

Sincerely,

Traci Hollingshead

Radiation Safety Officer

Traci Hallupherl



### **ACKNOWLEDGEMENT - RECEIPT OF CORRESPONDENCE**

## Name and Address of Applicant and/or Licensee

Tracy Hollingshead, Radiation Safety Officer Nuclear Medicine Department Avera McKennan 1325 South Cliff Avenue Sioux Falls. SD 57117-5045

License Number(s)		
40	-16571-01	
Mail Control Number(	s)	
	592476	
Licensing and/or Tecl	hnical Revi	ewer or Branch
JAB		
or Application	Dated:	11/14/2016
review, has been perfo	ormed.	

This	is to acknowledge receipt of your: 🗸 Letter and/or 🗌 Application Dated: 11/14/2016							
The	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, Request for Taxpayer Identification Number, located at the following link: <a href="http://www.nrc.gov/reading-rm/doc-collections/forms/nrc531.pdf">http://www.nrc.gov/reading-rm/doc-collections/forms/nrc531.pdf</a> Send the completed NRC Form 531, by facsimile, to the following number: (301) 415-5387							
	The following administrative omissions have been identified:							

A copy of your action has been e-mailed 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) 200-1140 or (817) 200-1209

# BETWEEN: Accounts Receivable/Payable Regional Licensing Branches

[FOR ARPB USE] INFORMATION FROM WBL

Program Code: 02310 Status Code: Pending Amendment Fee Category:2B 7A 7C

Exp. Date:

e.

			Decom Fin Assur Reqd:			
License Fee	Worksheet	- License	Fee Transmittal			
A. REGION						
1. APPLICATION AT Applicant/Licensee Received Date: Docket Number: Mail Control Numb License Number: Action Type:	: Avera McKenna 11/14/2016 3011252	ın				
2. FEE ATTACHED						
Amount:						
Check No.:						
3. COMMENTS						
	Signed:	flunife	Budeu 12-8-16	_		
B. LICENSE FEE MA	ANAGEMENT BRA	NCH (Check w	hen milestone 03 is entered	-   1	,	)
1. Fee Category and	d Amount:			_		
2. Correct Fee Paid.	Application may be	processed for:				
Amendment:		•				
Renewal:						
License:						
3. OTHER			-			
	Signed:			-		
	Date:			_		