

American Red Cross Blood Services
32 North Prospect Street
Burlington, Vermont 05405

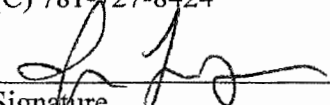
Br. 2
03038627

Termination of Materials License 20-15418-03 (form 314)
U.S. Nuclear Regulatory Commission Radiation Control Program

The licensee, American Red Cross Blood Services located at 32 North Prospect Street Burlington, Vermont 05405 (Lic # 20-15418-03) is going to terminate their license. The sources were transferred to Southwest Research Institute (Lic # L04958) on 01/10/2017 and acknowledgment of receipt occurred on 01/12/2017.

Element & Mass number: Cesium – 137
Chemical and/or physical form: Sealed Source / Gammacell 1000-B Sealed Source
Maximum amount that will be possessed at any one time: Not to exceed 1632 curies total

John Lauzon
American Red Cross Blood Services
Manager – Distribution/RSO
Massachusetts and NNE Region
John.Lauzon@redcross.org
(C) 781-727-8424

 / 01/13/17
Signature Date

License Termination Form 314
Lic # 20-15418-03
1 of 1

Date: 01/13/2017
592819

REC'D IN LAT 01/17/2017

NRC/SRONI MATERIALS-002



**CERTIFICATE OF DISPOSITION
OF MATERIALS**

Estimated burden per response to comply with this mandatory collection request: 30 minutes. This submittal is used by NRC as part of the basis for its determination that the facility is released for unrestricted use. 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 Internet e-mail to Infocollections.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0028), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display 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.

LICENSEE NAME AND ADDRESS

American red Cross Blood Services
180 Rustcraft Rd Dedham, MA 02026

LICENSE NUMBER

20-15418-03

DOCKET NUMBER

030-38627

LICENSE EXPIRATION DATE

05/31/2023

A. LICENSE STATUS (Check the appropriate box)

- This license has expired. This license has not yet expired; please terminate it.

B. DISPOSAL OF RADIOACTIVE MATERIAL

(Check the appropriate boxes and complete as necessary. If additional space is needed, provide attachments)

The licensee, or any individual executing this certificate on behalf of the licensee, certifies that:

1. No radioactive materials have ever been procured or possessed by the licensee under this license.
2. All activities authorized by this license have ceased, and all radioactive materials procured and/or possessed by the licensee under this license number cited above have been disposed of in the following manner.
- a. Transfer of radioactive materials to the licensee listed below:
L04958: Southwest Research Institute
- b. Disposal of radioactive materials:
1. Directly by the licensee:
2. By licensed disposal site:
3. By waste contractor:
- c. All radioactive materials have been removed such that any remaining residual radioactivity is within the limits of 10 CFR Part 20, Subpart E, and is ALARA.

C. SURVEYS PERFORMED AND REPORTED

1. A radiation survey was conducted by the licensee. The survey confirms:
- a. the absence of licensed radioactive materials
- b. that any remaining residual radioactivity is within the limits of 10 CFR 20, Subpart E, and is ALARA.
2. A copy of the radiation survey results:
- a. is attached; or b. is not attached (Provide explanation); or c. was forwarded to NRC on: _____ Date
3. A radiation survey is not required as only sealed sources were ever possessed under this license, and
- a. The results of the latest leak test are attached; and/or b. No leaking sources have ever been identified.

The person to be contacted regarding the information provided on this form:

NAME	TITLE	TELEPHONE (Include Area Code)	E-MAIL ADDRESS
John Lauzon	Radiation Safety Officer	(781) 727-8424	John.lauzon@redcross.org

Mail all future correspondence regarding this license to:

C. CERTIFYING OFFICIAL

I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT

PRINTED NAME AND TITLE	SIGNATURE	DATE
John Lauzon / Radiation Safety Officer		01/13/2017

WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECT. 18 U.S.C. SECTION 1001 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.

Best Theratronics Project #: 53559
Licensee Information: Licensee's Name: AMERICAN RED CROSS
Licensee's Location: BURLINGTON RED CROSS
Site License Number and Expiry Date (Canada): N/A
Contact Name and Phone Number: John Lauzon 781-461-2179

Survey Meter Make and Model: Bickon
Survey Meter S.N.: B037Z Pancake Probe S.N.: 001007 Calibration Expiry Date: MARCH 29/17

Irradiator Type and Radiation Source Characteristics: NOTE: Initial relevant boxes
Source and Irradiator Type: ^{137}Cs GC3000 , GC1000 , GC40 , IBL , ^{60}Co GC220
Unit Serial Number: 0088

Wipe Test Details and Measurement Results:
Wipe Test Performed on: 1. SURFACE OF TRANSPORT PACKAGE
2. CATEGORY I & II IRRADIATORS (e.g. GC1000/GC3000/GC40/GC220)
Description of Material Used: Initial One or more: Filter Paper , Other:
Number of Wipes Used: 5
Check all wipes, record the highest reading on this form.

1. SURFACE OF TRANSPORT PACKAGE: OR N/A
Wipe Test Results:
 Negative. Contamination < 11.9 Bq/cm². No further action is required. Staple plastic bags, containing used wipes, to customer report and leave on site.
 Positive. Contamination ≥ 11.9 Bq/cm². Follow Procedure 4.01-SE-44, Section 10.

2. CATEGORY I & II IRRADIATORS: OR N/A
Instrument Conversion Factor: (i) 969 cpm = 5 nCi (185 Bq) for ^{60}Co (Cobalt)
(Taken from the Certificate of Calibration) OR (ii) 1288 cpm = 5 nCi (185 Bq) for ^{137}Cs (Cesium)

Measured Removable Contamination
Background Reading: 70 cpm (A)
Gross Wipe Reading: 70 cpm (B)
Net Wipe Reading: 0 cpm (C) = (B) - (A).

Measured Removable Contamination = $\frac{(C)}{(i \text{ or } ii)} \times 5 \text{ nCi} = \frac{0}{1289 \text{ cpm}} \times 5 \text{ nCi} = 0 \text{ nCi}$

Wipe Test Results:
 Negative Contamination < 5 nCi No further action is required. Staple plastic bags, containing used wipes, to customer report and leave on site.
 Positive Contamination ≥ 5 nCi Follow Procedure 4.01-SE-44, Section 10.

Wipe Test Performed by and Result Certified by:
(Name) FRUC McBlinnis (Initial) FRUC (Signature) FRUC McBlinnis (Date) JAN 10/17

ATRO # 2016:94

Off-Site Source Recovery Project
Authorization to Transfer/Relinquishment of Ownership/Custody

SOURCE OWNER: RC - Burlington Donor Center TELEPHONE: 781-461-2179
 LICENSE: FAX:
 CONTACT NAME: John Lauzon
 ADDRESS: 32 North Prospect St
 Burlington, VT 05401

Pursuant to its authority under the Atomic Energy Act, the U.S. Department of Energy (DOE) National Nuclear Security Administration (NNSA) has directed Los Alamos National Security, LLC (LANS), to recover and store excess, unwanted, abandoned, orphan radioactive sealed sources and other radioactive material sources on behalf of DOE/NNSA.

LANS has determined that the sealed source(s) identified below meet the requirements of the Los Alamos National Laboratory Off-Site Source Recovery Project and, on behalf of DOE/NNSA, authorizes RC - Burlington Donor Center to transfer the sealed source(s) to the following designated LANS support subcontractor: Southwest Research Institute.

RC - Burlington Donor Center affirms it is the owner/custodian of the sealed source(s) identified below, and hereby irrevocably relinquishes all rights, title and ownership/custody in the sealed source(s) to DOE/NNSA in furtherance of the OSRP. LANS accepts the sealed sources on behalf of DOE/NNSA, pursuant to DOE/NNSA contract no. DE-AC52-06NA25396, upon the execution of the Acknowledgment of Receipt of the source(s) or container(s) by the designated LANS support subcontractor below.

SOURCE INFORMATION

Isotope:	Mfr/Model:	Serial No:	SFC No.:	Original Curies (Date):	Decayed Curies (Date):
137Cs	ISO/ISO-1000	84Cs 107		6.725E+02 (7/6/86)	3.356E+02 (9/19/16)
137Cs	ISO/ISO-1000	84Cs 88		6.725E+02 (7/6/86)	3.356E+02 (9/19/16)

*Sources Contained in AECL GC1000, SN:88

SOURCE OWNER:
 OFFICIAL NAME/TITLE: John Lauzon Radiation Safety Officer
 NAME (Please Print or Type) TITLE (Please Print or Type)
 SIGNATURE [Signature] DATE 10/04/16

LANS AUTHORIZATION:
 OFFICIAL NAME/TITLE: Team Leader, Off-Site Source Recovery Project
 SIGNATURE [Signature] DATE 11/05/16

ACKNOWLEDGEMENT OF RECEIPT BY DESIGNATED LANS SUPPORT SUBCONTRACTOR:
 Southwest Research Institute
 OFFICIAL NAME/TITLE: John P. Hageman RSD
 NAME (Please Print or Type) TITLE (Please Print or Type)
 SIGNATURE [Signature] DATE 1-12-2017



Today's Date: 01/13/2017 Version 2.7 .Print | .PDF | .Excel
 User ID: fsmpph001 Licensee user (license number: L04953) Back to Main Menu

View Own Inventory

[Help](#)

Search Criteria:

The wildcard (*) can appear at the start, middle or end of the search text.

Make: Device Make:

Model: Device Model:

Serial Number: Device Serial Number:

Source ID: Alternate Source ID:

Source Status:

Source Acquisition Begin Date: (mm/dd/yyyy) Source Acquisition End Date: (mm/dd/yyyy)

Source Removed Begin Date: (mm/dd/yyyy) Source Removed End Date: (mm/dd/yyyy)

Isotope: Operator: Activity: Unit:

Address: City: State:

Search Results:

2 items found, displaying all items. Total number of pages: 1

Make	Model	Serial Number	Source ID	Alternate Source ID	Isotope Name	Activity	Activity Unit	Activity Date	Acquisition Date	Location Address	Device Make	Device Model	Device Serial Number	Comment
Isomedix, Inc.	ISO-1000	84CS107	110374	LA ARCB 84CS 107	Cesium-137	1345.0	CI	10/03/1984	01/12/2017	6220 Culebra Road San Antonio TX 78238	AECL	Gammacell 1000	88	Comment
Isomedix, Inc.	ISO-1000	84CS88	62580	LA ARCB 84Cs 88	Cesium-137	1345.0	CI	10/03/1984	01/12/2017	6220 Culebra Road San Antonio TX 78238	AECL	Gammacell 1000	88	Comment

[Back to Menu](#)



Today's Date: 01/12/2017 Version 2.7 [Print](#)
 User ID: ismpjph001 Licensee user (license number: L04958) [Back to Main Menu](#)

Enter Receipt Shipment/Transfers Information (Domestic)

[Help](#)

* indicates required field

Shipment ID: 103725

Shipment:

Sending Licensee				Shipment Information			
Licensing Agency	License Number	Docet Number	Licensee Name	Carrier	Tracking Number	Sending Date	Manifest Number
U.S. Nuclear Regulatory Commission	20-15418-03	3038627	American Red Cross Blood Services			01/10/2017	

Shipment Status:

Shipment Status	Receipt Date	Location Address	Comment
Shipped	01/12/2017	6220 Culebra Road San Antonio TX 78238	

[Enter Unrecorded Locations](#)

Transferred Sources:

Receive All


Transfer Status	Source No	Container ID	Transfer ID	Make	Model	Serial Number	Source ID	Alternate Source ID	Isotope	Activity	Activity Unit	Activity Date
Received	1		330688	Isomedix, Inc.	ISO-1000	84CS88	62980		Cesium-137	638.71	CI	01/12/2017
Received	2		330687	Isomedix, Inc.	ISO-1000	84CS107	110374		Cesium-137	638.71	CI	01/12/2017

Additional Transfers:

Additional Transfers

Enter the number of additional transfers, and click on Add Transfers.

Number of Additional Transfers:

NRC FORM 748B <small>(01-2016)</small> <small>10 CFR 20.2207</small>		U.S. NUCLEAR REGULATORY COMMISSION	APPROVED BY OMB: NO. 3150-0202	EXPIRES: 01/31/2019
TRANSFER SOURCE NATIONAL SOURCE TRACKING TRANSACTION REPORT			Estimated burden per response to comply with this mandatory information collection request 9.5 minutes. NRC requires this information to populate the National Source Tracking System for certain sealed sources. 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 internet e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0202), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display 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.	

1. LICENSEE INFORMATION

A. LICENSEE NAME American Red Cross Blood Services	B. LICENSE NO. 20-15418-03	C. LICENSEE STREET ADDRESS 32 North Prospect Street	D. CITY Burlington	E. STATE VT	F. ZIP CODE 05405
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2. TRANSACTION DATE

3A. TRANSACTION INFORMATION

3B. TRANSACTION TYPE (Check all that apply)

(Only transactions completed on the same date may be reported together on this form) 01/10/2017	<input checked="" type="checkbox"/> NEW <input type="checkbox"/> CORRECTION IF CORRECTION, PREVIOUS TRANSACTION DATE:	<input type="checkbox"/> REPORT SOURCE INVENTORY <input checked="" type="checkbox"/> TRANSFER <input type="checkbox"/> RECEIPT <input type="checkbox"/> DISPOSAL <input type="checkbox"/> NEW SOURCE MANUFACTURED <input type="checkbox"/> IMPORT <input type="checkbox"/> EXPORT <input type="checkbox"/> DISASSEMBLE
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4. PREPARER INFORMATION

A. NAME OF PREPARER John Lauzon	B. DATE PREPARED 01/10/2017	C. PREPARER PHONE 781-461-2179	D. PREPARER E-MAIL (REQUIRED FOR CONFIRMATION) John.Lauzon@redcross.org
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6. SOURCE TRANSFER DATA

A1. RECEIVING LICENSEE NAME Southwest Research Institute	B1. RECEIVING LICENSEE LICENSE NO. L04958	C1. RECEIVING LICENSEE SHIPPING ADDRESS 6220 Culebra Road	D1. CITY San Antonio	E1. STATE TX	F1. ZIP CODE 78238		
G1. SOURCE MAKE Isomedix, Inc.	H1. SOURCE MODEL ISO-1000	I1. SOURCE SERIAL NUMBER 84CS88	J1. ISOTOPE Cs-137	K1. ACTIVITY AND UNIT 1345 Ci	L1. ACTIVITY DATE 10/03/1984	M1. WASTE MANIFEST NO. (For waste shipments only)	N1. CONTAINER ID (For waste shipments only)
O1. ESTIMATED ARRIVAL DATE 01/13/2017	P1. COMMENTS 1 of 2 sources in Gammacell 1000, SN 88. Shipped by Best Theratronics						

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TRANSFER SOURCE
NATIONAL SOURCE TRACKING TRANSACTION REPORT
(continued)

LICENSEE NAME
American Red Cross Blood Services

LICENSE NO.
20-15418-03

6. SOURCE TRANSFER DATA (continued)

A2. RECEIVING LICENSEE NAME Southwest Research Institute		B2. RECEIVING LICENSEE LICENSE NO. L04958		C2. RECEIVING LICENSEE SHIPPING ADDRESS 6220 Culebra Road			D2. CITY San Antonio		E2. STATE TX	F2. ZIP CODE 78238
G2. SOURCE MAKE Isomedix, Inc.		H2. SOURCE MODEL ISO-1000		I2. SOURCE SERIAL NUMBER 84CS107	J2. ISOTOPE Cs-137	K2. ACTIVITY AND UNIT 1345 Ci		L2. ACTIVITY DATE 10/03/1984	M2. WASTE MANIFEST NO. (For waste shipments only)	N2. CONTAINER ID (For waste shipments only)
O2. ESTIMATED ARRIVAL DATE 01/13/2017		P2. COMMENTS 2 of 2 sources in Gammacell 1000, SN 88. Shipped by Best Theratronics								
A3. RECEIVING LICENSEE NAME		B3. RECEIVING LICENSEE LICENSE NO.		C3. RECEIVING LICENSEE SHIPPING ADDRESS			D3. CITY		E3. STATE	F3. ZIP CODE
G3. SOURCE MAKE		H3. SOURCE MODEL		I3. SOURCE SERIAL NUMBER	J3. ISOTOPE	K3. ACTIVITY AND UNIT		L3. ACTIVITY DATE	M3. WASTE MANIFEST NO. (For waste shipments only)	N3. CONTAINER ID (For waste shipments only)
O3. ESTIMATED ARRIVAL DATE		P3. COMMENTS								

WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECTS. 18 U.S.C. SECTION 1001 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.

**TRANSFER SOURCE
NATIONAL SOURCE TRACKING TRANSACTION REPORT
(continued)**

LICENSEE NAME
American Red Cross Blood Services

LICENSE NO.
20-15418-03

6. SOURCE TRANSFER DATA (continued)

A4. RECEIVING LICENSEE NAME	B4. RECEIVING LICENSEE LICENSE NO.	C4. RECEIVING LICENSEE SHIPPING ADDRESS		D4. CITY	E4. STATE	F4. ZIP CODE
					<input type="text"/>	

G4. SOURCE MAKE	H4. SOURCE MODEL	I4. SOURCE SERIAL NUMBER	J4. ISOTOPE	K4. ACTIVITY AND UNIT	L4. ACTIVITY DATE	M4. WASTE MANIFEST NO. (For waste shipments only)	N4. CONTAINER ID (For waste shipments only)
			<input type="text"/>	<input type="text"/>			

O4. ESTIMATED ARRIVAL DATE	P4. COMMENTS						

A5. RECEIVING LICENSEE NAME	B5. RECEIVING LICENSEE LICENSE NO.	C5. RECEIVING LICENSEE SHIPPING ADDRESS		D5. CITY	E5. STATE	F5. ZIP CODE
					<input type="text"/>	

G5. SOURCE MAKE	H5. SOURCE MODEL	I5. SOURCE SERIAL NUMBER	J5. ISOTOPE	K5. ACTIVITY AND UNIT	L5. ACTIVITY DATE	M5. WASTE MANIFEST NO. (For waste shipments only)	N5. CONTAINER ID (For waste shipments only)
			<input type="text"/>	<input type="text"/>			

O5. ESTIMATED ARRIVAL DATE	P5. COMMENTS						

WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECTS. 18 U.S.C. SECTION 1001 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.

INSTRUCTIONS TO NRC AND AGREEMENT STATE LICENSEES FOR REPORTING HIGH-RISK SEALED SOURCE TRANSACTIONS

The completed form is considered to be Official Use Only – Security Related Information; it is not considered to be Safeguards Information.
Use an addendum sheet for reporting additional sources.

Note to Licensees: This form may be used to report source transactions in lieu of using the NSTS online application. Sections 1-4 on Page 1 of the form are required for all source transaction types. Sections 5-12 should only be populated for the associated Transaction Type (3B) selected. For example, when reporting a Source Transfer and a Source Export, Sections 6 and 11 should be populated. Multiple Transaction Types may be selected if they occur on the same Transaction Date, and should be reported on NRC Form 748. Licensees reporting only one transaction type may use the condensed form for the Transaction Type. For example, when reporting a Source Receipt, NRC Form 748c should be used.

1. **Licensee Information** – Enter the name, license number, and street address of the licensed facility.
2. **Transaction Date** – Enter the date the transaction occurred, which would be the date of the transfer, receipt, manufacture, etc.
3. **Transaction Information and Transaction Type** – Indicate if this is a new transaction or a correction. For corrections, select the date of the previously submitted transaction that the correction should be associated with. Select the Transaction Type. Report Source should only be used for initial inventory submissions, or to report a source excluded from the initial inventory submission. Dispose Source should only be used by a Disposal Licensee. If you are sending your source back to the manufacturer, or sending it to a disposal facility, the transaction should be recorded as a Transfer. Multiple Transaction Types may be selected if they occur on the same Transaction Date.
4. **Preparer Information** – An email address is required for a confirmation. For regulatory purposes, your source transaction report is not considered complete without a confirmation from the NSTS Help Desk that the transaction report has been received.
5. **Source Inventory Data** – This section should only be used for initial inventory submissions. The Make, Model, and Serial Number refer to the Source, not the Device. All fields are required in Section 5 EXCEPT G. Comments. If the licensee is reporting multiple sources on the Source Inventory transaction at the same Source Location Address, the location address information may be populated once, and referenced in the Comments block for the additional sources.
6. **Source Transfer Data** – For Transfer transaction reports, all fields in Section 6 are required EXCEPT M. Waste Manifest Number, N. Container ID, and P. Comments. If the licensee is reporting multiple sources on the Transfer transaction to the same Receiving Licensee, the receiving licensee information may be populated once, and referenced in the Comments block for the additional sources.
7. **Source Receipt Data** – For Receipt transaction reports, all fields in Section 7 are required EXCEPT M. Waste Manifest Number, N. Container ID, and T. Comments. If the licensee is reporting multiple sources on the Receipt transaction at the same Source Location Address, the location address information may be populated once, and referenced in the Comments block for the additional sources.
8. **Source Disposal Data** – For Disposal transaction reports, all fields in Section 8 are required EXCEPT J. Comments. If the licensee is reporting multiple sources on the Disposal transaction at the same Source Disposal Address, the source disposal address information may be populated once, and referenced in the Comments block for the additional sources.
9. **New Manufactured Source Data** – For New Manufactured Source transaction reports, all fields in Section 9 are required EXCEPT F. Comments. If the licensee is reporting multiple sources on the Manufacturer transaction at the same Source Location Address, the location address information may be populated once, and referenced in the Comments block for the additional sources.
10. **Source Import Data** – For Import Source transaction reports, all fields are required EXCEPT L. Comments. If the licensee is reporting multiple sources on the Import transaction at the same Source Location Address, the location address information may be populated once, and referenced in the Comments block for the additional sources.
11. **Source Export Data** – For Export Source transaction reports, all fields are required EXCEPT M. Comments. If the licensee is reporting multiple sources on the Export transaction to the same Foreign Company/Foreign Address, the information in cells A-E may be populated once, and referenced in the Comments block for the additional sources.
12. **Source Disassemble Data** – For Disassemble Source transaction reports, all fields are required EXCEPT H. Comments. If the licensee is reporting multiple sources on the Disassemble transaction at the same Source Location Address, the location address information may be populated once, and referenced in the Comments block for the additional sources.

DISTRIBUTION

For most timely processing, click the "Submit by Email" button on page 1.

You may also:

- > manually submit this form by email to: NSTSFax.Resource@nrc.gov,
- > FAX to: 1-888-821-2534, or
- > mail to: NSTS Help Desk
30 West Gude Drive, Suite 300
Rockville, MD 20850

R1LAT RESOURCE

From: Gaskins, Farrah
Sent: Tuesday, January 17, 2017 4:28 PM
To: R1LAT RESOURCE
Subject: Please control attachment as new amendment
Attachments: [External_Sender] Termination Lic # 20-15418-03

The document in the attached email was sent by a licensee requesting termination. The action should be controlled as an amendment request and assigned to the branch 2 folder.

Thanks!

Farrah C. Gaskins

Health Physicist
U.S. NRC, Region I
2100 Renaissance Blvd, Suite 100
King of Prussia, PA 19406
(610) 337-5143 office
(610) 337-5269 fax



ACKNOWLEDGEMENT - RECEIPT OF CORRESPONDENCE

Name and Address of Applicant and/or Licensee

American Red Cross Blood Services
ATTN: John Lauzon, Manager-Distribution
180 Rustcraft Road
Dedham, MA 02026

Date

January 23, 2017

License Number(s)

20-15418-03

Mail Control Number(s)

592819

Licensing and/or Technical Reviewer or Branch

Commercial, Industrial, R&D, & Academic Branch
(Branch 2)

This is to acknowledge receipt of your: Letter and/or Application Dated: 01/13/2017

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 complete and submit NRC Form 531, Request for Taxpayer Identification Number, located at the following link: <http://www.nrc.gov/reading-rm/doc-collections/forms/nrc531.pdf>
Follow the instructions on the form for submission.

The following administrative omissions have been identified:

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 I
U. S. Nuclear Regulatory Commission
Division of Nuclear Materials Safety
2100 Renaissance Boulevard, Suite 100
King of Prussia, PA 19406-2713
(610) 337-5260, (610) 337-5313,
(610) 337-5398, or (610) 337-5239