REGULATORY INFORMATION DISTRIBUTION SYSTEM (RIDS) ACCESSION NBR: 7902200024 DOC.DATE: 79/02/05 NOTA-1ZED: NO DOCKET # FACIL:50-220 Nine Mile Point Nuclear Stations, Niagara Mohawk Powe 05000220 AUTH.NAME AUTHOR AFFILIATION DISE, D.P. Niagara Mohawk Power Corp. RECIP. NAME RECIPIENT AFFILIATION License Fee Management Branch DIGGS, R.M. SUBJECT: Forwards addl fee for review completion & approval of Tech Spec amend request re deletion of continuous leak rate monitoring.W/encl memo re distribution. DISTRIBUTION CODE: MOORS COPIES RECEIVED:LTR \(\subseteq \) ENCL \(\oldsymbol{\Omega} \) SIZE: \(\subseteq \subseteq \). TITLE: LICENSE FEES NOTES: RECIPIENT COPIES RECIPIENT COPIES ID CODE/NAME LTTR ENCL ID CODE/NAME LTTR ENGL 04 BC ORB #3 ACTION: 3 LA OKB #3 1 INTERNAL OI REG FILE O2 NRC PDR 07 MIECER, LFMB EXTERNAL: 03 LPDR

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NIAGARA MOHAWK POWER CORPORATION/300 ERIE BOULEVARD WEST, SYRACUSE, N.Y. 13202/TELEPHONE (315) 474-1511

February 5, 1979

Ms. Reba M. Diggs
License Fee Management Branch
Office of Administration
U. S. Nuclear Regulatory Commission
Washington, D. C. 20555

Dear Ms. Diggs:

Re: Nine Mile Point Unit 1

Docket No. 50-220

DPR-63

Enclosed is a check for \$2,800 requested in your letter dated January 31, 1979. The additional fee is required to complete your review and approve our request to amend the Nine Mile Point Unit 1 Technical Specifications to delete the requirement for continuous leak rate monitoring.

Very truly yours,

NIAGARA MOHAWK POWER CORPORATION

Donald P. Dise

Vice President-Engineering

PEF/szd

Enclosure

2/12/79

NOTE TO: Mike Collins & Don Lanham, DSB (016)

· FROM:

Reba M. Diggs, License Fee Management Branch, ADM

PROCESSING LETTERS WITH CHECKS RECEIVED DIRECTLY BY THE SUBJECT:

LICENSE FEE MANAGEMENT BRANCH

·Please process the enclosed letter under the applicable docket and give the following distribution under code MOO8:

> Original of 1tr to Regulatory Docket File Action CY w/check to W. O. Miller, LFMB (L-233) 3 Cys to applicable Branch of DOR or DPM 1 to LPDR

1 to PDR

I am retaining the check and the following information is for your ·records.

Check No: S

Amount:

Date:

Applicant:

Thanks!

Reba M. Diggs License Fee Management Branch Office of Administration

