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DNMS

January 21, 2020

Nuclear Materials Licensing Branch
U.S. Nuclear Regulatory Commission, Region IV
1600 E. Lamar Blvd.
Arlington, TX 76011-4511

NOTIFICATION

Subject: Amendment
NRC License No. 53-18126-01
Docket No. 030-14529

Dear License Reviewer:

This letter is to advise you to please direct all future license correspondence to me as Chief Operating Officer of Straub Medical Center.

Thank you for your assistance.

Sincerely,



Travis Clegg
Chief Operating Officer

PUBLIC
 Immediate Release
 Normal Release

NON-PUBLIC
 A.3 Sensitive-Security Related
 A.7 Sensitive Internal
 Other: _____

Reviewer: C/Hill Date: 2/6/20

**HAWAI'I
PACIFIC
HEALTH**

STRAUB
MEDICAL CENTER

888 S. King Street
Honolulu, Hawai'i 96813-3009

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Commission, Region IV
1600 E. Lamar Blvd.
Arlington, TX 76011-4511



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76011#4511 0002



017840



ACKNOWLEDGEMENT - RECEIPT OF CORRESPONDENCE

Name and Address of Applicant and/or Licensee

Mr. Ronald Frick
Radiation Safety Officer
Straub Clinic & Hospital
888 S King St
Honolulu, HI 96813

Date

02/06/2020

License Number(s)

53-18126-01

Mail Control Number(s)

617840

Licensing and/or Technical Reviewer or Branch

E. Gilman

This is to acknowledge receipt of your: Letter and/or Application Dated: 01/21/2020

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 IV
U. S. Nuclear Regulatory Commission
DNMS/NMSB - B
1600 E. Lamar Boulevard
Arlington, TX 76011-4511
(817) 200-1103 or (817) 200-1140**

BETWEEN:

Accounts Receivable/Payable
and
Regional Licensing Branches

[FOR ARPB USE]
INFORMATION FROM WBL

Program Code: 02120
Status Code: Pending Amendment
Fee Category: 7C
Exp. Date: 10/31/2025
Fee Comments: PC 02410 fee exempt with 7C activiti
Decom Fin Assur Reqd: N

License Fee Worksheet - License Fee Transmittal

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: Straub Clinic & Hospital
Received Date: 01/31/2020
Docket Number: 3014529
Mail Control Number: 617840
License Number: 53-18126-01
Action Type: Notifications

2. FEE ATTACHED

Amount: _____

Check No.: _____

3. COMMENTS

Signed: 

Date: 20200206

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered / /)

1. Fee Category and Amount: _____

2. Correct Fee Paid. Application may be processed for:

Amendment: _____

Renewal: _____

License: _____

3. OTHER _____

Signed: _____

Date: _____