

MAR 30 1994

Gerhenson Radiation Oncology Center
Harper Hospital Division
ATTN: Ms. Shirley L. Green
3990 John R. Street
Detroit, MI 48201-22197

Gentlemen:

Enclosed is a copy of Invoice AM00677-93 (\$4,320) dated March 30, 1994. The invoice is for the FY 1993 annual fee for Registration Certificate No. NR0687D107S, for a custom modified Theratron 780-19 total body irradiator.

Because of our delay in notifying you of the fee due, interest will not begin to accrue until 30 days from the date of the invoice (revised) in accordance with the Terms and Conditions.

Also enclosed is NRC Form 526. If you determine the Center qualifies for a reduced annual fee, please complete the form and return it with your reduced payment.

We apologize for not notifying you sooner of the annual fee requirement for FY 1993. If you have any questions, please contact Sandy Kimberley on (301) 492-8743.

Sincerely,
Signed by:

J. D. Weiss

Douglas Weiss, Chief
Materials License Fee Section
License Fee and Debt Collection Branch
Division of Accounting and Finance
Office of the Controller

Enclosures:

1. Terms and Conditions
2. NRC Form 526 (1993)

DISTRIBUTION:

Materials Annual Fee Correspondence File (w/orig. inc.)

Invoice File AM00677-93 w/cy of back-up

NUDOCS (ML61) w/copy inc.

PDR

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U. S. NUCLEAR REGULATORY COMMISSION
 FY 93 Annual Materials Fee Invoice
 10 CFR 171.16

Invoice Date
 =====
~~03/21/1993~~
 03/30/94

Invoice Number
 =====
 AM00677-93

NR0687D107S
 ATTENTION: RADIATION SAFETY OFFICER
 Gerhenson Radiation Oncology Center
 Harper Hospital Division
 3990 John R. Street
 Detroit, MI 48201-22197

***** Mark PAYMENT COPY with any billing address changes *****

License/Approval/ Registration/ Certificate Number	Code AA905	Annual Fee Category(s)	Fee Amount	Surcharge Amount
NR0687D107S	ANN	9B	\$ 4,200.00	\$ 120.00
TOTAL:			\$ 4,200.00	\$ 120.00
TOTAL INVOICE:			\$ 4,320.00	

Make Checks Payable To:
 =====

U.S. Nuclear Regulatory Commission
 License Fee & Debt Collection Branch
 PO Box 954514
 St. Louis, MO 63195-4514

<== This PO Box address is
 <== for receipt of payments
 <== only.

Terms and conditions are attached. Nonpayment of your annual fee may result in the revocation of your license(s) in accordance with the enforcement provisions of 10 CFR 171.23 of the Commission's regulations.

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