

VOID SHEET

May 14/90  
112491

TO: License Fee Management Branch  
FROM: Region F  
SUBJECT: VOIDED APPLICATION

Control Number: 112491

Applicant: Newcomb Medical Center

Date Voided: 6/1/90

Reason for Void: General license

Cheryl Buracka 6/1/90  
Signature Date

Attachment:  
Official Record Copy of  
Voided Action

FOR LFMB USE ONLY

Final Review of VOID Completed:  
Refund Authorized and processed  
No Refund Due  
 Fee Exempt or Fee Not Required

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Log completed: \_\_\_\_\_  
Processed by: M

5/21/90

Note for RI & HQs:

The last action, 112000  
was voided because this  
lab closing down was for  
a general license.

I am returning the copy  
back to RI for voiding,  
and the original to HQs  
for processing.

S. Kimberly  
6/21/90

BETWEEN:

LICENSE FEE MANAGEMENT BRANCH, ARM  
AND  
REGIONAL LICENSING SECTIONS

(FOR LFMS USE)  
INFORMATION FROM LTS

PROGRAM CODE: 02120  
STATUS CODE: 0  
FEE CATEGORY: 7C  
EXP. DATE: 19900630  
FEE COMMENTS: .....

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED  
APPLICANT/LICENSEE: NEWCOMB MEDICAL CENTER  
RECEIVED DATE: 900510  
DOCKET NO: 3002473  
CONTROL NO.: 112491  
LICENSE NO.: 29-D3438-01  
ACTION TYPE: AMENDMENT

2. FEE ATTACHED  
AMOUNT: \$4000  
CHECK NO.: 0

3. COMMENTS

To RI for Voiding.  
See note that  
this is a general  
license - a  
continuation of  
voided 112000.  
Original forwarded to HQ.

SIGNED R. J. Brown  
DATE 5-19-90

3. LICENSE FEE MANAGEMENT BRANCH (CHECK WHEN MILESTONE 03 IS ENTERED )

1. FEE CATEGORY AND AMOUNT: 7C

2. CORRECT FEE PAID. APPLICATION MAY BE PROCESSED FOR:  
AMENDMENT   
RENEWAL   
LICENSE

3. OTHER \_\_\_\_\_

SIGNED \_\_\_\_\_  
DATE 5/19/90

030-02473



29-03438-01

Newcomb Medical Center

A Newcomb  
Health Services  
Corporation

65 South State Street  
Vineland, New Jersey 08360  
(609) 691-9000  
FAX (609) 692-2308

May 2, 1990

U.S. Nuclear Regulatory Commission  
Region II  
101 Marietta Street  
Suite 2900  
Atlanta, Georgia 30323

RE: Radioactive Material License No. 3249

Gentlemen:

Please release the RIA laboratory at Newcomb Medical Center, Vineland, New Jersey, as we are no longer using nor maintaining radioactive materials in this area.

In accordance with the guidelines established by the NRC, dated December, 1975, "Guidelines for Decontamination of Facilities and Equipment Prior to Release for Unrestricted Use", we submit herein our final survey of the vacated area for your approval (refer to enclosures).

Following a thorough cleaning of the area, wipe testing and survey meter monitorings were performed, as indicated on the enclosed diagrams. Wipe tests were conducted on 100 cm<sup>2</sup> areas. Counting of the wipes was conducted using a Beckman 5500 with a 39% confidence level. All radiation labels, symbols, etc., have been removed.

Any questions regarding this close out survey should be directed to the undersigned.

Sincerely,

Joseph A. Ierardi  
President and CEO

RECEIVED BY LFMS	
Date	5/21/90
Log	May 14 I
By	SK
Date Completed	5/21/90

JAI:pr

RECEIVED  
RECEIVED  
90 MAY 12 12:33  
90 JAN 17 12:33  
U.S. NUCLEAR REGULATORY COMMISSION  
REGION II  
101 MARIETTA STREET  
ATLANTA, GEORGIA 30323

FEE EXEMPT  
Cont of \$2000  
which was voided.

OFFICIAL RECORD COPY ML 10

MAY 10 1990

CLOSE OUT SURVEY RESULTS  
SURVEY METER MONITORINGS

Survey meter: Eberline E-520  
Last Calibrated: December 14, 1989  
Background: 0.03 mR/hr

Locations of survey meter monitorings on diagram are indicated by stars. All readings were found to be less than 0.03 mR/hr.

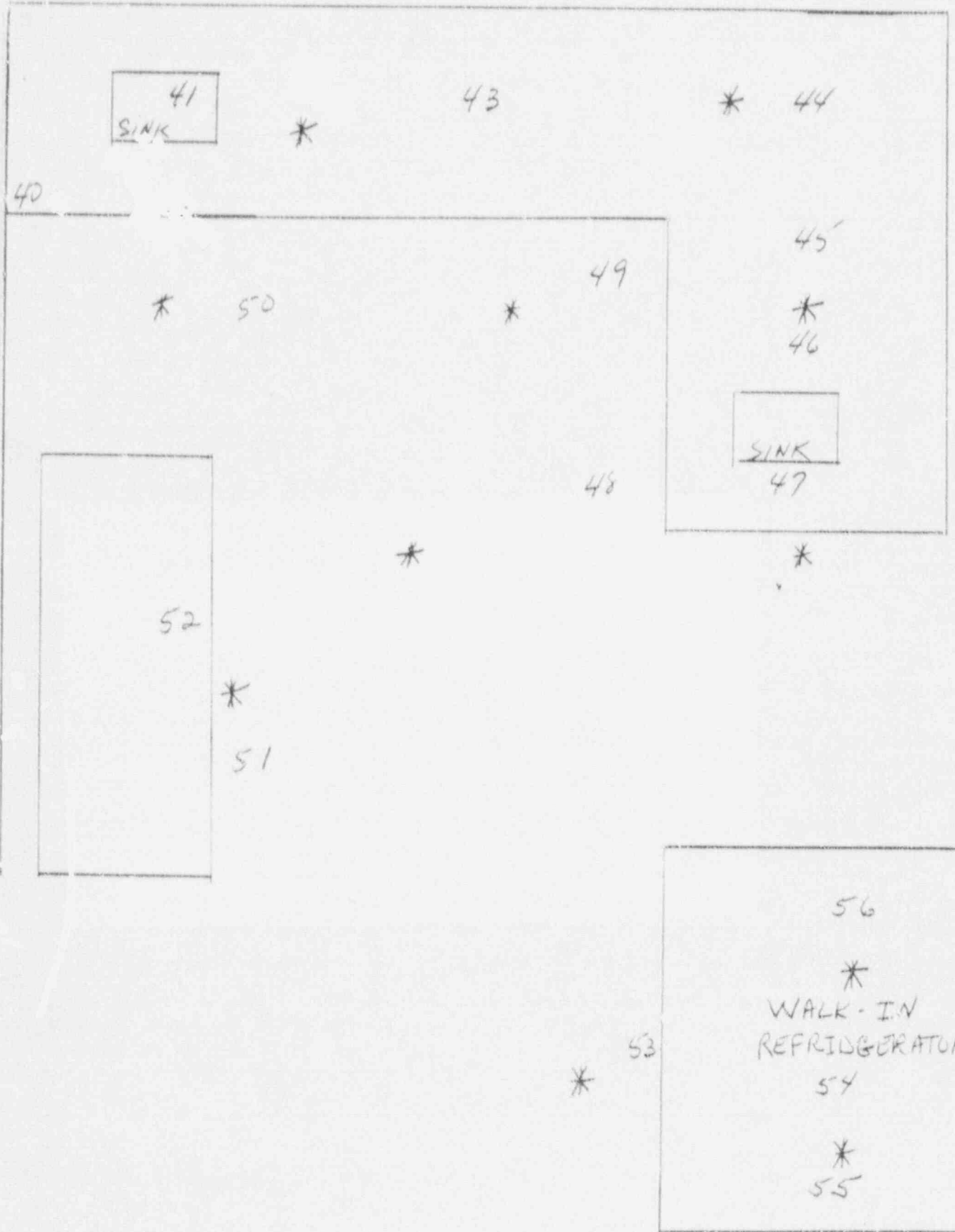
CLOSE OUT SURVEY RESULTS

WIPE TESTING

Well Counter: Beckman 5500, SN 804-9530  
Background: 159 CPM/407DPM

<u>Location</u>	<u>Results (DPM Above Background)</u>
40	0
41	0
42	0
43	0
44	0
45	0
46	0
47	0
48	0
49	0
50	0
51	0
52	0
53	0
54	0
55	0
56	0

RIA LABORATORY



needs  
to  
be  
provided