

VOID SHEET

*Out of 32
3M
113457*

TO: License Fee Management Branch

FROM: Region I

SUBJECT: VOIDED APPLICATION

Control Number: 113434

Applicant: Biology Lab for Ocean Sciences

Date Voided: 10/22/90

Reason for Void: Duplicate of 113464

Julia M. Koverkamp 10/22/90
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: JK

OFFICIAL RECORD COPY ML 10

030-10658



Bigelow Laboratory for Ocean Sciences

McKown Point, West Boothbay Harbor, Maine 04575 207-633-2173
Telex 333024 (Bigelow) Fax 207-633-6581

September 9, 1990

Mr. Eric Reber
United States Nuclear Regulatory Commission
Region 1
631 Park Avenue
King of Prussia
Pennsylvania 19406

Dear Mr. Reber:

This will confirm that we will be making a decision pursuant to Title 10, Code of Federal Regulations, 30.35 within the next 30 days. If you have any further questions, please feel free to call me.

Sincerely,

Christine Voight
Assistant Director of
Sponsored Programs and
Finance

RECEIVED
OCT 12 P2:15
U.S. NUCLEAR REGULATORY COMMISSION

CV/mmc

cc: Hilary Glover

Log	09.13
Remitter	
Check No.	Dup of 113464
Amount	
Fee Category	3M
Type of Fee	AMB
Date	10/17/90
By	JK

113454

OFFICIAL RECORD COPY ML 10

SEP 24 1990

BETWEEN:

LICENSE FEE MANAGEMENT BRANCH, ARM
AND
REGIONAL LICENSING SECTIONS

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

APPLICANT/LICENSEE: BIGELOW LAB. FOR OCEAN SCIENCES
RECEIVED DATE: 900924
DOCKET NO: 3010658
CONTROL NO.: 113454
LICENSE NO.: 18-16246-01
ACTION TYPE: AMENDMENT

*To RI for Vanding
Dup of 113464*

2. FEE ATTACHED

AMOUNT: -----
CHECK NO.: -----

3. COMMENTS

SIGNED *Judith M. Haverkamp*
DATE *10/24/90*

B. LICENSE FEE MANAGEMENT BRANCH (CHECK WHEN MILESTONE 03 IS ENTERED *12/1*)

1. FEE CATEGORY AND AMOUNT: *3M* -----

2. CORRECT FEE PAID. APPLICATION MAY BE PROCESSED FOR:

AMENDMENT -----
RENEWAL -----
LICENSE -----

3. OTHER -----

SIGNED *sk*
DATE *10/27/90*

(FOR LFMS USE)
INFORMATION FROM LTS

PROGRAM CODE: 03620
STATUS CODE: 0
FEE CATEGORY: 3M
EXP. DATE: 19910630
FEE COMMENTS: -----

*OK to void
duplicate
Johann
10/24/90*