

VOID SHEET

TO: License Fee Management Branch

FROM: RIII

SUBJECT: VOIDED APPLICATION

Control Number: 399625
Applicant: City of Owosso
License Number: 21-18888-03
Docket Number: 030-28983
Date Voided: May 15, 1996

Renewal voided due to new extension rule. Voided before review.
Refund due.

[Signature] 5-15-96
Signature Date

Attachment:
Official Record Copy of
Voided Action

FOR LFMB USE ONLY

- ☒ Refund Authorized and processed
☐ No Refund Due
☐ Fee Exempt or Fee Not Required

Comments: _____

Log completed ☒

Processed by: SAC 6/17/96

0/1

ML
30
[Signature]

(FOR LFMS USE)
INFORMATION FROM LTS

BETWEEN:

LICENSE FEE MANAGEMENT BRANCH, ARM
AND
REGIONAL LICENSING SECTIONS

PROGRAM CODE: 03121
STATUS CODE: 2
FEE CATEGORY: 3P
EXP. DATE: 19960228
FEE COMMENTS:
DECOM FIN ASSUR RECDT N

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED
APPLICANT/LICENSEE: DWOSSO, CITY OF
RECEIVED DATE: 951212
DOCKET NO: 3028983
CONTROL NO.: 399625
LICENSE NO.: 21-18888-03
ACTION TYPE: RENEWAL

**REFUND DUE -
ELIGIBLE FOR EXTENSION**

2. FEE ATTACHED
AMOUNT: 0
CHECK NO.: 0

3. COMMENTS

SIGNED
DATE

D. Hersey
12/13/95

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

1. FEE CATEGORY AND AMOUNT: 3P

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

3. OTHER

SIGNED
DATE

SC
1/16/96

Log	Dec 12 III
Remitter	65131
Check No.	720
Amount	3P
Fee Category	Renewal
Type of Fee	
Date Check Rec'd	1/16/96
Date Completed	
By:	SC

Refund #720

RECEIVED

JAN 19 1996

REGION I



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION III
801 WARRENVILLE ROAD
LISLE, ILLINOIS 60532-4351

MAY 15, 1996

NOTE TO LICENSEES WHO SEND IN RENEWAL PACKAGES

On January 16, 1996, the Nuclear Regulatory Commission (NRC) amended its regulations in 10 CFR 30, 40, and 70 to extend the expiration date of qualified byproduct, source and special nuclear material licenses by five years (61 FR 1109). Your license was extended by this rulemaking and you will soon receive a letter notifying you of this. If a refund is due, this will be handled by the License Fee and Accounts Receivable Branch in our headquarters office. Because of this extension, your renewal package is being returned to you.

Please note that if there are elements within your renewal package that need to be incorporated into your license, you must submit a request for an amendment along with the appropriate fee.

If you have any questions please contact the Region III office at (708) 829-9887.

Thank You - Region III

NRC FORM 313

(10-84)

10 CFR 30, 32, 35

34, 35, 36, 39 and 40

U. S. NUCLEAR REGULATORY COMMISSION

APPROVED BY OMB: NO. 3150-0120

EXPIRES 6-30-86

APPLICATION FOR MATERIAL LICENSE

ESTIMATED BURDEN PER RESPONSE TO COMPLY WITH THIS INFORMATION COLLECTION REQUEST: 8 HOURS. SUBMITTAL OF THE APPLICATION IS NECESSARY TO DETERMINE THAT THE APPLICANT IS QUALIFIED AND THAT ADEQUATE PROCEDURES EXIST TO PROTECT THE PUBLIC HEALTH AND SAFETY. FORWARD COMMENTS REGARDING BURDEN ESTIMATE TO THE INFORMATION AND RECORDS MANAGEMENT BRANCH (T-8 F33), U.S. NUCLEAR REGULATORY COMMISSION, WASHINGTON, DC 20555-0001, AND TO THE PAPERWORK REDUCTION PROJECT (3150-0120), OFFICE OF MANAGEMENT AND BUDGET, WASHINGTON, DC 20503.

INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW.

APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH:

DIVISION OF INDUSTRIAL AND MEDICAL NUCLEAR SAFETY
OFFICE OF NUCLEAR MATERIALS SAFETY AND SAFEGUARDS
U.S. NUCLEAR REGULATORY COMMISSION
WASHINGTON, DC 20555-0001

ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:

IF YOU ARE LOCATED IN:

CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, MAINE, MARYLAND,
MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, PENNSYLVANIA,
RHODE ISLAND, OR VERMONT, SEND APPLICATIONS TO:

LICENSING ASSISTANT SECTION
NUCLEAR MATERIALS SAFETY BRANCH
U.S. NUCLEAR REGULATORY COMMISSION, REGION I
475 ALLENDALE ROAD
KING OF PRUSSIA, PA 19406-1415

ALABAMA, FLORIDA, GEORGIA, KENTUCKY, MISSISSIPPI, NORTH CAROLINA, PUERTO
RICO, SOUTH CAROLINA, TENNESSEE, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA,
SEND APPLICATIONS TO:

NUCLEAR MATERIALS LICENSING SECTION
U.S. NUCLEAR REGULATORY COMMISSION, REGION II
101 MARIETTA STREET, NW, SUITE 2900
ATLANTA, GA 30323-0199

IF YOU ARE LOCATED IN:

ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN,
SEND APPLICATIONS TO:

MATERIALS LICENSING SECTION
U.S. NUCLEAR REGULATORY COMMISSION, REGION III
801 WARRENVILLE RD.
Lisle, IL 60532-4351

ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS,
LOUISIANA, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA,
OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH,
WASHINGTON, OR WYOMING, SEND APPLICATIONS TO:

NUCLEAR MATERIALS LICENSING SECTION
U.S. NUCLEAR REGULATORY COMMISSION, REGION IV
811 RYAN PLAZA DRIVE, SUITE 400
ARLINGTON, TX 76011-8064

PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S. NUCLEAR REGULATORY COMMISSION JURISDICTIONS.

1. THIS IS AN APPLICATION FOR (Check appropriate item)

- ☐ A. NEW LICENSE
☐ B. AMENDMENT TO LICENSE NUMBER _____
☒ C. RENEWAL OF LICENSE NUMBER 21-18888-03

2. NAME AND MAILING ADDRESS OF APPLICANT (Include Zip code)

City of Owosso
301 W. Main Street
Owosso, MI 48867

3. ADDRESS(ES) WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED

Same as above

4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION

Ronald Baker

TELEPHONE NUMBER
(517) 723-8844 ext. 370

SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER. THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.

5. RADIOACTIVE MATERIAL

- a. Element and mass number; b. chemical and/or physical form; and c. maximum amount which will be possessed at any one time

6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED

7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE

Ronald Baker

8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS

9. FACILITIES AND EQUIPMENT

10. RADIATION SAFETY PROGRAM

11. WASTE MANAGEMENT

12. LICENSEE FEES (See 10 CFR 170 and Section 170.31)

FEE CATEGORY 170.11 (5) AMOUNT
ENCLOSED \$ 0.00

13. CERTIFICATION. (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT.

THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, 36, 39 AND 40, AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.

WARNING: 18 U.S.C. SECTION 1001 ACT OF JUNE 25, 1948 82 STAT. 749 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.

CERTIFYING OFFICER - TYPED/PRINTED NAME AND TITLE

Ronald Baker, P.E., City Engineer, R.S.O.

SIGNATURE

Ronald Baker

DATE

12-7-95

FOR NRC USE ONLY

TYPE OF FEE	FEE LOG	FEE CATEGORY	AMOUNT RECEIVED	CHECK NUMBER	COMMENTS
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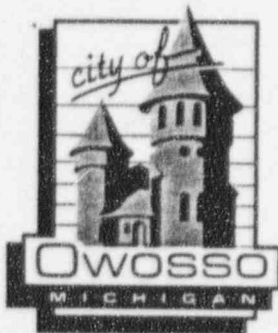
\$

APPROVED BY

DATE

REGION III

399625



301 W. MAIN • OWOSSO, MICHIGAN 48867-2958 • (517) 723-8844

December 7, 1995

U.S. Nuclear Regulatory Commission
801 Warrenville Rd.
Lisle, IL 60532

RE: Renewal of License No. 21-18888-03

Dear Ladies and Gentlemen:

Please accept this application for renewal of Material License No. 21-18888-03 for the City of Owosso, Michigan. I have submitted a copy of the documents submitted on October 15, 1990 for our previous license renewal. These documents accurately reflect our current program. I have updated these documents to add how we have provided to have a radiation detection instrument on-site if the moisture/density gage is damaged.

I have reviewed our current license and the conditions set forth in that license as well as the management procedures outlined in the application which are copies of the latest procedures submitted previously. We plan no management changes to these procedures.

We request you fully review this application and if we comply to your requirements, grant the renewal of this license.

Thank you for your cooperation.

Sincerely,

THE CITY OF OWOSSO

Ronald Baker

Ronald Baker, P.E.
City Engineer
R.S.O.

RB/mmj

Enclosure

DEC 12 1995

December 18, 1995

City of Owosso
ATTN: Ronald Baker
Radiation Safety Officer
301 W. Main Street
Owosso, MI 48867

SUBJECT: LICENSE RENEWAL APPLICATION

Dear Mr. Baker:

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.

Any correspondence regarding the renewal application should reference the control number specified and your license number.

Sincerely,

Original Signed By
Marianne Meenan, Chief
Nuclear Materials Support Branch

License No. 21-18888-03
Control No. 399525

DOCUMENT NAME: M:\03028983.DT5

To receive a copy of this document, indicate in the box: "C" = Copy without attachment/enclosure "E" = Copy with attachment/enclosure "N" = No copy

OFFICE	DNMS/RIII	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME	MMEENAN:jaw	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DATE	12/18/95	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OFFICIAL RECORD COPY

LICENSE FEE REQUIREMENTS

LICENSE FEE AND DEBT COLLECTION BRANCH
DIVISION OF ACCOUNTING AND FINANCE
OFFICE OF THE CONTROLLER
U.S. NUCLEAR REGULATORY COMMISSION
WASHINGTON, DC 20555-0001City of Owosso
ATTN: Mr. Ronald Baker, P.E.
Radiation Safety Officer
301 West Main Street
Owosso, Wisconsin 48867

TYPE OF ACTION

NEW LICENSE

XX RENEWAL OF LICENSE

AMENDMENT TO LICENSE

REQUESTED DATE

December 7, 1995

LICENSE NUMBER

48-18888-03

CONTROL NUMBER

399625

I. APPLICATION FEE DUE

Your request for a licensing action is subject to the fee(s) in the category(ies) noted below in accordance with Section 170.31 of the enclosed Federal Register notice. Payment of the fee is required prior to the issuance of the license, renewal, or amendment.

FEE CATEGORY	APPLICATION	RENEWAL	AMENDMENT
3P	\$	\$720	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$

FEE(s) DUE \$720
PAYMENT RECEIVED \$-0-
AMOUNT DUE \$720☒ Your request was received without the prescribed application fee.☐ We received your Check No. _____ in the amount of \$ _____. Payment of the additional fee noted above is required.☐ Your request will increase the scope of your license program. Therefore, your request is subject to the application fee(s) noted above. Refer to Section 170.31 and Footnote 1(d)(2).☐ Your license expired prior to the receipt of your application for renewal. Therefore, your request is subject to the application fee(s) noted above. Refer to Section 170.31 and Footnote 1(a).

MAKE PAYMENT OF THE FEE(S) TO THE U.S. NUCLEAR REGULATORY COMMISSION AND MAIL THE PAYMENT TO THE ADDRESS LISTED AT THE TOP OF THIS FORM. IF WE DO NOT RECEIVE A REPLY FROM YOU WITHIN 30 CALENDAR DAYS FROM THE DATE LISTED BELOW, WE SHALL ASSUME THAT YOU DO NOT WISH TO PURSUE YOUR APPLICATION AND WILL VOID THIS ACTION.

SIGNATURE - LICENSE FEE ANALYST

LFDCB

LFDCB

DISTRIBUTION
OC/DAF/R/F
LFDCB R/F (2)Pending Fee File
Region 3

DATE

Dec. 14 / 1995

II. FEE NOT REQUIRED

☐ Enclosed is Check No. _____ which accompanied your request. The fee is not required because:☐ We received your Check No. _____ in payment of the fee.☐ The Licensing staff has informed us that your request is to be considered as a continuation of your request dated _____, Control No. _____.☐ Your request was combined, prior to review, with your _____ request, Control No. _____.

III. CHECK RETURNED

☐ Enclosed is Check No. _____ which was returned to us by the bank for:☐ INSUFFICIENT FUNDS☐ ACCOUNT CLOSED☐ OTHER

MAIL THE REPLACEMENT CHECK TO THE ADDRESS LISTED AT THE TOP OF THIS FORM AND REFERENCE THE ABOVE CONTROL NUMBER.

IV. LICENSE ISSUED WITHOUT THE REQUIRED FEE

☐ License No. _____, Amendment No. _____, issued on _____ was issued without the required fee being collected. The fee required is noted in Section I of this form.☐ The scope of your licensed program was increased. Therefore, your request is subject to the application fee(s) noted in Section I of this form. Refer to Section 170.31 and Footnote 1(d)(2).☐ Because of the urgency of your request, the license was issued without remittance of the prescribed fee noted in Section I of this form.

**DIVISION OF ACCOUNTING AND FINANCE
REQUEST FOR REFUND TO EMPLOYEE/VENDOR**

THE EMPLOYEE/VENDOR IDENTIFIED BELOW HAS OVERPAID THE NUCLEAR REGULATORY COMMISSION FOR GOODS AND/OR SERVICES PROVIDED AND IS DUE A REFUND

EMPLOYEE/VENDOR/PAYEE CODE: 211888803 L

NAME: _____

ADDRESS: _____ CITY OF OWOSSO
ATTN: RONALD BAKER, P.E.
301 W. MAIN STREET

ADDRESS: _____ OWOSSO, MICHIGAN 48867

CITY: _____ STATE: _____ ZIP: _____

TRANS CODE: PX

TRANS TYPE: FE FUND: X5280 JOB CODE: NATA AMOUNT: \$720

TRANS TYPE: IR FUND: R1435 JOB CODE: INTR AMOUNT: _____

TRANS TYPE: IR FUND: R1099 JOB CODE: ADCH AMOUNT: _____

TRANS TYPE: IR FUND: R1099 JOB CODE: FINE AMOUNT: _____

TOTAL REFUND AMOUNT: \$720

COMMENTS: LIC 21-18888-03 XTND PER RLMKNG

CK 65131
(Limit comments to 40 characters, including spaces)

PREPARED BY: Shirley Cretchfield DATE: June 17, 1996

AUTHORIZED BY: Andrea Kimberly DATE: 7/10/96

ORIGINAL INV. NO: _____ DATE PAID: _____ AMOUNT: _____

REFUND ENTERED INTO COLLECT BY: _____

REFUND DETERMINED BY: _____ DATE: _____

Dec 12 III
31 REN #720
65131 std 1/4/96
399625

PLEASE ATTACH APPROPRIATE SUPPORTING DOCUMENTATION