	VOID SHEET
	(2)
TO: License	Fee Management Branch
FROM: RI	
SUBJECT: VOIDED	APPLICATION M
	She in
Control Number:	125925
Applicant:	Richard F. Pierson Construction
Date Voided:	9-10-98
Reason for Void:	Licensee does not need to amend licensee
	to name an authorized user. Refore remew.
	29-30279-01
	Rebecca J. Biown 9-10-98 Signature Date
	Signature
Attachment: Official Record C Voided Action	opy of
FOR LFMB USE ONLY	
Final Review of V	OID Completed:
Refund Aut	horized and processed
──No Refund	Due
Fee Exempt	or Fee Not Required
Comments: Alt	a Review Log completed
-, 7	Processed by: B
981005001 PDR ADOO C	16 980910 CK 03034072 PDR

OFFICIAL RECORD COPY MIL 10

TELEPHONE CONVERSATION RECORD	Date: 9/10/98	Time: 08:00
Mail Control No.: 125925	License No.: 29-30279-01	Docket No.: 030-34072
Person Called: Sheila Gattone, RSO and Corp. Sec.	Licensee: Richard E. Pierson Construction	Telephone No.: (609) 728-2703
	The state of the s	THE RESERVE AND ASSESSMENT OF THE PARTY OF T
Person Calling: Steven Courtemanche/(61	10) 337-5075	
Person Calling: Steven Courtemanche/(61 Subject: Confirmation that amendment no		

Date: 9/10/98

Signature: Steven Continuale

7/24/98	and to inform your that the information dated
includes an administrative	, and to inform you that the initial processing which review has been performed.
_/	Amend 29 2220
There were no administ technical reviewer. Plea omissions or require add	rative omissions. Your application was assigned to a
Please provide to this of	ffice within 20 days
	ffice within 30 days of your receipt of this card
A copy of your action has t Receivable Branch, who will Your action has been assign	been forwarded to our License Fee & Accounts Il contact you separately if there is a fee issue involved the Mail Control Number 1 2 5 9 2 5
A copy of your action has t Receivable Branch, who will Your action has been assign	been forwarded to our License Fee & Accounts Il contact you separately if there is a fee issue involved the Mail Control Number 1 2 5 9 2 5
A copy of your action has to Receivable Branch, who will Your action has been assign When calling to inquire about	been forwarded to our License Fee & Accounts Il contact you separately if there is a fee issue involved the Mail Control Number 1 2 5 9 2 5



030-3402

July 24, 1998

U. S. Nuclear Regulatory Commission Region 1 475 Allendale Road King of Prussia, PA 19406

Attention: Nuclear Materials Safety Branch

Reference: License No. 29-30279-01

Dear Sir/Madam:

Please add John Field as an authorized user under our above referenced license.

Very truly yours,

Sheila Gattone

Radiation Safety Officer

SMG/sg

125925

JUL 28 1998

PHYSICAL ADDRESS MONROE INDUSTRIAL PARK 151 INDUSTRIAL DRIVE WILLIAMSTOWN, NJ 08094

NRC F	ORM 577	COMMUNICACIONE PER CAPACIONA ACCUSACIONA	NUCLEAR REGULAT	ORY COMMISSION	VI (1)	BURCUSHA-UNICOPIS REPROVINGENDA	
LICENSE FEE REQUIREMENTS				ATTN: BRENDA BROWN (125925) U.S. Nuclear Regulatory Commission License Fee and Accounts Receivable Branch P. O. Box 954574 St. Louis, MO 63195-4514			
						TYPE OF ACT	TION
					NEW LICE	NSE	
					RENEWA	OF LICENS	SE
	ATTN: SHEILA	GATTONE RSO					
		RSON CONSTRU			(V)	ENT TO LICI	ENSE
	P.O. BOX 388				REQUESTED DA		
SICKLERVILLE, NJ 08081					07/24/199	8	
					LICENSE NUMBI		
						29-30379-	01
					CONTROL NUME		
	LAF	PPLICATION FEE DU	P.		I FEE NOT	125925	
Your n	equest for a licensing	action is subject to the	e fee(s) in the		II. FEE NOT I		your shook which
Catego Part 1	ory(les) noted below in 70. Payment of the fea, renewal, or amendm	accordance with Sec e is required prior to t	tion 170.31 of 10 CFR		Number	accompanie	your check which ed your request. The equired because:
FEE	APPLICATION	RENEWAL	AMENDMENT	П	Check Number	We receive payment of	d your check listed in
3P	\$	\$	\$ 350.00	h			
	\$	5	\$		Date of Request	The Licensi	ng staff has informed request is to be
	S	5	\$		Control	considered the request	as a continuation of
	8	\$	5		Number	the request	notes.
	\$	s	\$				
	S	\$	\$	П	Date of Request		at was combined, prior ith the request listed.
	\$	\$	\$		Control		
	\$	\$	\$		Number		
		17	-1-	***************************************	III. CHECK R	ETURNED	THE PROOF SHALLOW, SHALLOW, SHALLOW, S. LOW, THE SHALLOW SHALL
	FEE(s)	DUE	\$ 350.00		Check		your check which was
		ENT RECEIVED	\$ 0.00 \$ 350.00	<u> </u>	Number	returned to t	is by the bank for:
	AMOU	NT DUE	\$ 350.00	INSU	FFICIENT FUNDS		
V	Your request was rece	eived without the pres	cribed application	ACC	OUNT CLOSED		
V	fee			ОТН	ER		
TIV	We received your chec		ment of the additional				
	0.00	ck Hullibel	noted above is required.	TOP OF THIS FOR	CEMENT CHECK TO RM AND REFERENCE	O THE ADDRE	ESS LISTED AT THE
-	Allo			NUMBER.	NOT LOCALIED MARY	OUT THE DE	SILIPPA PPP
	Your request will incre Therefore, your reque	st is subject to the ap	plication fee(s) noted	IV. LICE	NSE ISSUED WITH		
	above. Refer to Secti	on 170.31 and Footno	ote 1(d)(2).		License Number	WILLIOUT	ed license was issued the required fee being
	Your license expired p	prior to the receipt of	receipt of your application for Amendment collected. The fe			d. The fee required is Section I of this form.	
	noted above. Refer to		to the application fee(s) Footnote 1(a).	Date Issued			
					100000		
MAKE	PAYMENT OF THE PLATORY COMMISSION	PEE(S) TO THE U.S.	NUCLEAR AYMENT TO THE	The scope of	f your licensed progra bject to the application	am was increa	sed. Therefore, your
ADDR	ESS LISTED AT THE	TOP OF THIS FORM		form. Refer	to Section 170.31 an	d Footnote 1(	d)(2).
THE D		. WE SHALL ASSUM	E THAT YOU DO NOT	Because of t	he urgency of your re	equest, the line	ense was issued
ACTIC		TEIOATION AND V	TILL VOID ITIIS	without remit	ttance of the prescrib	ed fee noted i	n Section 1 of this
SIGNA	TURE - LICENSE FEE A	NALYST	DCB LFDCB	Distribution: OC/DAF/LFARB SA	- 0	dina Cu	DATE
		Left 1	BBBA	OC/DAF/LFARB S/ (LF-3.2.7) OC/DAF/LFARB R	/F Pen	ding Cy	
BRE	NDA BROWN 301	-415-6055 7/3	0/98	OC/DAF/LFARB R	r RE	GI	07/30/1998

BETWEEN:	9		N FROM LTS
de l'orderina		:	8 000 000 NO. 3 N. AND AND AND AND AND
License Fee Management Bra and Regional Licensing Section		: Program Code: 031 : Status Code: 0 : Fee Category: 3F : Exp. Date: 200104 : Fee Comments: : Decom Fin Assur F	430 Reqd: N
LICENSE FEE TRANSMITTAL			
A. REGION I			
Docket No: Control No.: License No.:	RICHARD E. PIE 980728 3034072 125925 29-30279-01 Amendment	RSON CONSTRUCTION	
Amount: Check No.:			
3. COMMENTS			
3. LICENSE FEE MANAGEMENT 1. Fee Category and Amoun	BRANCH (Check		V
2. Correct Fee Paid. App Amendment Renewal License	Mication may	be processed for:	Pil 2: 02
3. OTHER	Signed Date	MET CASE AND THE C	ne den men der ser det men den den den sen den den den den den den den den den d
		Log Hardy 12  Phereither Check No. 2/606  Amount 4350  Fee Catagory 3P  Type of Fee Am  Deale Check Revid 9/24  Date Cemplated 89	<b>D</b>

ENVELOPE POSTMANKED 1/4