

From: [Sybil Rajan](#)
To: [Robin Elliott \(She/Her\)](#); [Petrosky, Lindsay D.](#); [Rachel Buck](#)
Cc: [Trish Rasmus](#)
Subject: [External_Sender] RE: Re: Transfer of Control request
Date: Thursday, March 28, 2024 7:42:10 PM
Attachments: [Executed BMC NRC Form 313 3.22.2024 \(4870-7702-5969\).pdf 314.pdf](#)

Hi Robin,

Please find attached form 313 from Berkeley Medical (counsel Lindsay Petrosky copied) and form 314 from GenesisCare incorporating your guidance below. I've also included Rachel Buck, Leandro's successor, for any follow ups.

Rachel thanks for setting up the fee payment, please give finance the go ahead to send that through.

Thank you all!
Sybil

Sybil Rajan
Deputy General Counsel

M: 214 549 8380
sybil.rajan@usa.genescare.com
genescare.com

Central Time Zone

From: Robin Elliott (She/Her) <Robin.Elliott@nrc.gov>
Sent: Thursday, March 7, 2024 2:41 PM
To: Sybil Rajan <Sybil.Rajan@usa.genescare.com>
Subject: RE: Re: Transfer of Control request

You don't often get email from robin.elliott@nrc.gov. [Learn why this is important](#)

*** Attention: This email originated from outside of the GenesisCare email server. Please use caution responding, opening attachments, or clicking on links. ***

Hi Sybil,

I have looked at the forms you attached. Here are my comments:

1. On the 313, of course it needs to be signed by a City Hospital management representative, in box 3 the physical location of licensed activities needs to be entered there (box 2 is the mailing address), lastly, I would attach a document that states that the new license will be the same license that was under Genesis Care (give license number) and was transferred to City

Hospital with the transaction described in the December 21, 2023 letter with attachments.

2. On the 314, again the signature is required and under 2.a. just add something to reference the Dec 21, 2023, letter.

Let me know if you have any questions. I do not work tomorrow but can process this Monday if you send everything into me by then. I do think they will require receipt of the new license fee before they allow me to issue the new license. I think you also have to make electronic payments. Let me know if you need a contact person to assist with this. I don't know that much about how all that works.

Thanks,
Robin

From: Sybil Rajan <Sybil.Rajan@usa.genesiscare.com>
Sent: Friday, March 1, 2024 4:56 PM
To: Robin Elliott (She/Her) <Robin.Elliott@nrc.gov>; Leandro J. Barreca <Leandro.Barreca@usa.genesiscare.com>; Petrosky, Lindsay D. <ldpetrosky@jacksonkelly.com>
Cc: Brett Klukan (He/Him) <Brett.Klukan@nrc.gov>; Jacob Zimmerman <Jacob.Zimmerman@nrc.gov>; Paul Krohn <Paul.Krohn@nrc.gov>; Anne DeFrancisco <Anne.DeFrancisco@nrc.gov>
Subject: [External_Sender] Re: Transfer of Control request

Thank you, Robin! We appreciate the assurance that there will be no gap in coverage between termination and application approval (if/when approved).

I've added Berkely Medical Center counsel, Lindsay Petrosky, so that we can coordinate. Can you confirm that we will only need to submit the attached (with points 5-11 of form 313 left blank since there are no changes to the operation of the center) with signatures (form 314 signed by GenesisCare and form 313 signed by Berkeley Medical Center)? Plus the license fee, of course, which we will provide.

Thanks,
Sybil

Sybil Rajan
Deputy General Counsel

M: 214 549 8380
sybil.rajan@usa.genesiscare.com
genesiscare.com

Central Time Zone

Image



From: Robin Elliott (She/Her) <Robin.Elliott@nrc.gov>

Sent: Friday, March 1, 2024 11:54 AM

To: Leandro J. Barreca <Leandro.Barreca@usa.genescare.com>; Sybil Rajan
<Sybil.Rajan@usa.genescare.com>

Cc: Brett Klukan (He/Him) <Brett.Klukan@nrc.gov>; Jacob Zimmerman
<Jacob.Zimmerman@nrc.gov>; Paul Krohn <Paul.Krohn@nrc.gov>; Anne DeFrancisco
<Anne.DeFrancisco@nrc.gov>

Subject: Transfer of Control request

You don't often get email from robin.elliott@nrc.gov. [Learn why this is important](#)

Dear Leandro/Sybil,

GenesisCare currently possesses NRC License No. 09-31177-01; that license will remain in effect—and its attendant obligations the responsibility of GenesisCare—until action is taken by the NRC. Region I is currently reviewing GenesisCare's Application for Consent to Transfer Control of NRC License No 09-31177-01 in accordance with the guidance set out in NUREG 1556, "Consolidated Guidance About Material Licenses," Volume 15, Rev. 1 – "Guidance About Changes of Control and About Bankruptcy Involving Byproduct, Source, or Special Nuclear Materials Licenses. As it is still reviewing GenesisCare's Application, the NRC is not in a position to speak to whether it will approve or deny the Application. However, were the NRC to approve the Application, the transfer of the license would be sequenced by the NRC in such a way that, from the NRC's perspective, there would be no gap in coverage (i.e., that there wouldn't be a period of time in which either GenesisCare's current license or the transferred license (if approved) would apply). Please let us know if you have any additional questions.

Best Regards,

Robin L. Elliott

(Pronouns: she/her/hers)

Senior Health Physicist

Medical & Licensing Assistance Branch

Division of Radiological Safety and Security

U.S. NRC, Region I

475 Allendale Road, Suite 102

King of Prussia, PA 19406-1415

(610) 337-5076 voice

(610) 337-5349 fax

Robin.Elliott@nrc.gov

Training is useful, but there is no substitute for experience!
(From John Angle, M.D., ACMUI April 5, 2022 meeting)

| | | | | | | | |
|--|---|---|----------------------------|--|---|--|-----------|
| <div style="display: flex; justify-content: space-between;"><div>NRC FORM 313 (10-13-2023) 10 CFR 30, 32, 33, 34, 35, 36, 37, 39, and 40</div><div style="text-align: center;"><div>U.S. NUCLEAR REGULATORY COMMISSION APPLICATION FOR MATERIALS LICENSE</div></div></div> | | <div style="display: flex; justify-content: space-between;"><div>APPROVED BY OMB: NO. 3150-0120 <small>Estimated burden per response to comply with this mandatory collection request: 4.3 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. Send comments regarding burden estimate to the FOIA, Library, and Information Collections Branch (T-6 A10M), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by email to Infocollections.Resource@nrc.gov, and the OMB Reviewer at: OMB Office of Information and Regulatory Affairs, (3150-0120), Attn: Desk Officer for the Nuclear Regulatory Commission, 725 17th Street NW, Washington, DC 20503; email: oir_submission@omb.eop.gov. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the document requesting or requiring the collection displays a currently valid OMB control number.</small></div><div>EXPIRES: 07/31/2026</div></div> | | | | | |
| INSTRUCTIONS: SEE THE CURRENT VOLUMES OF THE NUREG-1556 TECHNICAL REPORT SERIES ("CONSOLIDATED GUIDANCE ABOUT MATERIALS LICENSES") FOR DETAILED INSTRUCTIONS FOR COMPLETING THIS FORM: http://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1556/. SEND ONE COPY OF THE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW. | | | | | | | |
| APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH: MATERIALS SAFETY AND TRIBAL LIAISON BRANCH DIVISION OF MATERIALS SAFETY, SECURITY, STATE AND TRIBAL PROGRAMS 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: ALABAMA, CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, FLORIDA, GEORGIA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, NORTH CAROLINA, PENNSYLVANIA, PUERTO RICO, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, VERMONT, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND APPLICATIONS TO: LICENSING ASSISTANCE TEAM DIVISION OF RADIOLOGICAL SAFETY AND SECURITY U.S. NUCLEAR REGULATORY COMMISSION, REGION I 475 ALLENDALE ROAD, SUITE 102 KING OF PRUSSIA, PA 19406-1415 R1DRSSMail.Resource@nrc.gov <small>*Note: The preferred method to submit NRC Form 313 is email. Any other document (e.g., financial assurance documents) should be sent via mail.</small> | | IF YOU ARE LOCATED IN: ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO: MATERIALS LICENSING BRANCH DIVISION OF RADIOLOGICAL SAFETY AND SECURITY U.S. NUCLEAR REGULATORY COMMISSION, REGION III 2443 WARRENVILLE ROAD, SUITE 210 LISLE, IL 60532-4352 R3-DRSSMAIL.Resource@nrc.gov <small>*Note: The preferred method to submit NRC Form 313 is email. Any other document (e.g., financial assurance documents) should be sent via mail.</small> IF YOU ARE LOCATED IN: ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MISSISSIPPI, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND APPLICATIONS TO: MATERIALS LICENSING BRANCH DIVISION OF RADIOLOGICAL SAFETY AND SECURITY U.S. NUCLEAR REGULATORY COMMISSION, REGION IV 1600 E. LAMAR BOULEVARD ARLINGTON, TX 76011-4511 R4licensing@nrc.gov <small>*Note: The preferred method to submit NRC Form 313 is email. Any other document (e.g., financial assurance documents) should be sent via mail.</small> | | | | | |
| 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) <input checked="" type="checkbox"/> A. NEW LICENSE <input type="checkbox"/> B. AMENDMENT TO LICENSE NUMBER _____ <input type="checkbox"/> C. RENEWAL OF LICENSE NUMBER _____ | | 2. NAME AND MAILING ADDRESS OF APPLICANT (Include zip code) City Hospital, Inc. d/b/a Berkeley Medical Center Radiation Oncology 121 Administration Drive Martinsburg, WV 25304 | | | | | |
| 3. LIST ADDRESS AND/OR TEMPORARY JOB SITE (TJS) ADDRESS, WHERE LICENSED MATERIALS WILL BE USED OR POSSESSED 2000 Foundation Way, Suite 1100 Martinsburg, WV 25401-9003 | | 4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION Edward Kiggundu, MD, RSO <table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:50%;">BUSINESS TELEPHONE NUMBER (304) 262-8800</td><td style="width:50%;">BUSINESS CELLULAR TELEPHONE NUMBER (202) 893-4012</td></tr><tr><td colspan="2">BUSINESS E-MAIL ADDRESS edward.kiggundu@usa.genesiscare.com</td></tr></table> | | BUSINESS TELEPHONE NUMBER (304) 262-8800 | BUSINESS CELLULAR TELEPHONE NUMBER (202) 893-4012 | BUSINESS E-MAIL ADDRESS edward.kiggundu@usa.genesiscare.com | |
| BUSINESS TELEPHONE NUMBER (304) 262-8800 | BUSINESS CELLULAR TELEPHONE NUMBER (202) 893-4012 | | | | | | |
| BUSINESS E-MAIL ADDRESS edward.kiggundu@usa.genesiscare.com | | | | | | | |
| 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 APPLICABLE LICENSING GUIDANCE. | | | | | | | |
| 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. | | | | | |
| 8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS. | | 7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING AND EXPERIENCE. | | | | | |
| 10. RADIATION SAFETY PROGRAM. | | 9. FACILITIES AND EQUIPMENT. | | | | | |
| 12. LICENSE FEES (Fees required only for new applications, with few exceptions*) (See 10 CFR 170 and Section 170.31) *Amendments/Renewals that increase the scope of the existing license to a new or higher fee category will require a fee. | | <table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:30%;">FEE CATEGORY</td><td style="width:30%; text-align: center; font-size: 1.2em;">7C</td><td style="width:20%;">AMOUNT ENCLOSED \$</td><td style="width:20%; text-align: center; font-size: 1.2em;">18,000.00</td></tr></table> | | FEE CATEGORY | 7C | AMOUNT ENCLOSED \$ | 18,000.00 |
| FEE CATEGORY | 7C | AMOUNT ENCLOSED \$ | 18,000.00 | | | | |
| PER THE DEBT COLLECTION IMPROVEMENT ACT OF 1996 (PUBLIC LAW 104-134), YOU ARE REQUIRED TO PROVIDE YOUR TAXPAYER IDENTIFICATION NUMBER. PROVIDE THIS INFORMATION BY COMPLETING NRC FORM 531: https://www.nrc.gov/reading-rm/doc-collections/forms/nrc531info.html. FAX THE COMPLETED NRC FORM 531 TO (301) 415-6725. | | | | | | | |
| 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, 37, 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 62 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 Dean Thomas, Chief Executive Officer | | SIGNATURE  | DATE 3/22/24 | | | | |
| FOR NRC USE ONLY | | | | | | | |
| TYPE OF FEE | FEE LOG | FEE CATEGORY | \$ AMOUNT RECEIVED | CHECK NUMBER | COMMENTS | | |
| APPROVED BY | | | | DATE | | | |

March 21, 2024
Supplemental Information for Items 5 through 11
NRC Form 313 Application for Materials License

This document is intended to supplement the NRC Form 313 Application for Materials License submitted on behalf of City Hospital, Inc. d/b/a Berkeley Medical Center Radiation Oncology. For the information requested in Form 313 items 5 through 11, the information applicable to the new license will be the same as the information on file for License No. 09-31177-01 (GenesisCare USA, Inc.), which is the subject of the correspondence and Transfer of Control Application (with attachments) dated December 21, 2023, and currently under review by the NRC as Mail Control No. 638470.



Dean Thomas
President and CEO

(07-31-2023)
10 CFR 30.36(j)(1);
40.42(j)(1); 70.38(j)(1);
and 72.54(k)(5)(1)(i)



CERTIFICATE OF DISPOSITION
OF MATERIALS

Estimated burden per response to comply with this mandatory collection request: 30 minutes. This submittal is used by NRC as part of the basis for its determination that the facility is released for unrestricted use. Send comments regarding burden estimate to the FOIA, Library, and Information Collections Branch (T-6 A10M), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by email to Infocollections.Resource@nrc.gov, and the OMB reviewer at: OMB Office of Information and Regulatory Affairs, (3150-0028), Attn: Desk Officer for the Nuclear Regulatory Commission, 725 17th Street NW, Washington, DC 20503; email: oir_submission@omb.eop.gov. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the document requesting or requiring the collection displays a currently valid OMB control number.

| | | |
|---|-----------------------------------|-----------------------------------|
| Licensee Name and Address GENESIS CARE USA, INC. 2000 Foundation Way, Suite 1100 Martinsburg, WV 25401 | License Number 09-31177-01 | Expiration Date 02/28/2027 |
| | Docket Number 030-37316 | |

A. LICENSE STATUS (Check the appropriate box)

☐ This license has expired. ☒ This license has not yet expired; please terminate it.

B. DISPOSAL OF RADIOACTIVE MATERIAL
(Check the appropriate boxes and complete as necessary. If additional space is needed, provide attachments)

The licensee, or any individual executing this certificate on behalf of the licensee, certifies that:

☐ 1. No radioactive materials have ever been procured or possessed by the licensee.

☒ 2. All activities authorized by this license have ceased, and all radioactive materials procured and/or possessed by the licensee under this license number cited above have been disposed of in the following manner.

☒ a. Transfer of radioactive materials to the licensee listed below:

 New license due to change of ownership per the letter dated December 21, 2023 requesting transfer control of NRC License No. 09-31177-01

☐ b. Disposal of radioactive materials:

☐ 1. Directly by the licensee:

☐ 2. By licensed disposal site:

☐ 3. By waste contractor:

☐ c. All radioactive materials have been removed, any remaining residual radioactivity is within the limits of 10 CFR Part 20, Subpart E, and is ALARA.

☐ d. Acknowledgment of receipt of the material by transfer or by disposal site is attached:

C. SURVEYS PERFORMED AND REPORTED

☐ 1. A radiation survey was conducted by the licensee. The survey confirms:

☐ a. the absence of licensed radioactive materials

☐ b. that any remaining residual radioactivity is within the limits of 10 CFR 20, Subpart E, and is ALARA.

☐ 2. A copy of the radiation survey results:

☐ a. is attached; or ☐ b. is not attached (Provide explanation); or

☐ c. was forwarded to the NRC

 Email Address: _____ on: _____ Date: _____

☒ 3. A radiation survey is not required as only sealed sources were ever possessed under this license, and

☐ a. The results of the latest leak test are attached; and/or ☐ b. No leaking sources have ever been identified.

The person to be contacted regarding the information provided on this form:

| | | | |
|-------------|-------------------|--------------------------------------|----------------------------------|
| Name | Title | Telephone Number (Include area code) | E-mail Address |
| Rachel Buck | Director, Quality | 872-213-6115 | rachel.buck2@usa.genesiscare.com |

Mail all future correspondence regarding this license to:

1419 SE 8th Terrace, Cape Coral, FL 33990

C. CERTIFYING OFFICIAL
I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT

| | | |
|-------------------------|----------------------------------|------------------|
| Printed Name and Title | Signature of Certifying Official | Date |
| Shaden Marzouk, MD, CEO | <div>DocuSigned by: </div> | 3/27/2024 6:23 |

CERTIFICATE OF DISPOSITION OF MATERIALS

PLEASE READ THESE INSTRUCTIONS BEFORE COMPLETING NRC FORM 314.

Subpart E of 10 CFR Part 20 establishes the radiological criteria for license terminations/decommissioning of facilities licensed under 10 CFR Parts 30, 40, 50, 60, 61, 70, and 72, as well as other facilities subject to the Commission's jurisdiction under the Atomic Energy Act of 1954, as amended, and the Energy Reorganization Act of 1974, as amended.

INSTRUCTIONSSection B, Item 2.

Licensees should describe the specific radioactive material transfer actions. If radioactive wastes were generated in terminating this license, the licensee should describe the disposal actions taken, including the disposition of low-level radioactive waste, mixed waste, greater-than-Class-C waste, and sealed sources.

Section B, Item 2.a.

The information provided concerning the transfer of radioactive material to another licensee should specify the date of the transfer, the name of the licensee recipient, an individual contact name and telephone number for the licensee recipient, and the recipient's NRC or Agreement State license number.

Section B, Item 2.b.

For disposal of radioactive materials, licensees should describe the specific disposal method or procedure (e.g., decay-in-storage). For those cases when radioactive materials are disposed of by a licensed disposal site or by a waste contractor, the licensee should specify the name, address, and telephone number of the licensed disposal site operator or waste contractor.

Section B, Item 2.c.

"Residual radioactivity," as defined in 10 CFR 20.1003, means radioactivity in 'areas' (structures, materials, soils, etc.) remaining as a result of activities (licensed and unlicensed) under the licensee's control from sources used by the licensee, excluding background radiation. ALARA is defined in 10 CFR 20.1003.

Section B, Item 2.d.

For transfer of radioactive materials licensees should attach a record of receipt from the recipient that contains information regarding what was received (e.g., radioactive materials for disposal or transfer.)

FILE CERTIFICATES AS FOLLOWS:**IF YOU ARE LOCATED IN:**

ALABAMA, CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, FLORIDA, GEORGIA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, NORTH CAROLINA, PENNSYLVANIA, PUERTO RICO, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, VERMONT, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND CERTIFICATES TO:

LICENSING ASSISTANCE TEAM
DIVISION OF RADIOLOGICAL SAFETY AND SECURITY
U.S. NUCLEAR REGULATORY COMMISSION, REGION I
475 ALLENDALE ROAD, SUITE 102
KING OF PRUSSIA, PA 19406-1415
R1DRSSMail.Resource@nrc.gov

*Note: The preferred method to submit NRC Form 314 is email.

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

MATERIALS LICENSING SECTION
DIVISION OF RADIOLOGICAL SAFETY AND SECURITY
U.S. NUCLEAR REGULATORY COMMISSION, REGION III
2443 WARRENVILLE ROAD, SUITE 210
LISLE, IL 60532-4352
R3-DRSSMAIL.Resource@nrc.gov

*Note: The preferred method to submit NRC Form 314 is email.

IF YOU ARE LOCATED IN:

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

MATERIALS LICENSING BRANCH
DIVISION OF RADIOLOGICAL SAFETY AND SECURITY
U.S. NUCLEAR REGULATORY COMMISSION, REGION IV
1600 E. LAMAR BOULEVARD
ARLINGTON, TX 76011-4511
R4licensing@nrc.gov

*Note: The preferred method to submit NRC Form 314 is email.