



**GRANDIN TESTING LAB, INC.**

*QUALITY MATERIALS TESTING*

11 Roberts Circle • Los Lunas, NM 87031 • (505) 865-7949 Fax (505) 865-6239

*Time Faxed 8:05 AM*

DATE: JAN 5, 2000

United States Nuclear Regulatory Commission Region IV  
11 Ryan Plaza Drive, Suite 400  
Arlington, Texas 76011-8064  
Attn: Christi Hernandez, Radiation Specialist

JAN - 5 2000

Re: **Clarification**

NRC Form 241 Field: January 01, 2000  
NM License Number: DM 257-03 Exp: August 31, 2001

*RTS Ref # 000140*

LOCATION OF ACTIVITIES: Isleta Pueblo

JOB NAME: Isleta Casino Phase II JOB # 699-7161

DATE FIELD DENSITY TESTS ARE TO BE CONDUCTED: 1-5-00

LOCATION OF ACTIVITIES: \_\_\_\_\_

JOB NAME: \_\_\_\_\_ JOB # \_\_\_\_\_

DATE FIELD DENSITY TESTS ARE TO BE CONDUCTED: \_\_\_\_\_

LOCATION OF ACTIVITIES: \_\_\_\_\_

JOB NAME: \_\_\_\_\_ JOB # \_\_\_\_\_

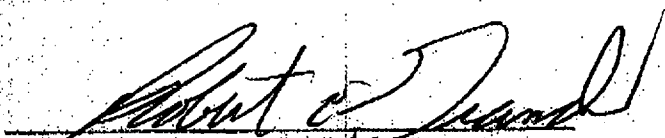
DATE FIELD DENSITY TESTS ARE TO BE CONDUCTED: \_\_\_\_\_

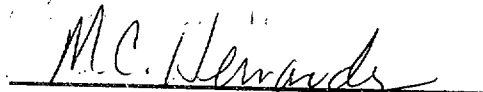
LOCATION OF ACTIVITIES: \_\_\_\_\_

JOB NAME: \_\_\_\_\_ JOB # \_\_\_\_\_

DATE FIELD DENSITY TESTS ARE TO BE CONDUCTED: 1-5-00

**GRANDIN TESTING LAB, INC.**

  
Robert E. Grandin, R.S.O.

  
Signature M. C. Hernandez  
Radiation Specialist  
Title: \_\_\_\_\_

*1/6/00*



UNITED STATES  
NUCLEAR REGULATORY COMMISSION

REGION IV

611 RYAN PLAZA DRIVE, SUITE 400  
ARLINGTON, TEXAS 76011-8064

JAN - 6 2000

MEMORANDUM      Shirley Crutchfield  
TO:                      License Fee & Accounts Receivable Branch (T9 E10)  
FROM:                  Christi Hernandez  
                                Nuclear Materials Licensing Branch, Region IV *MCH.*  
SUBJECT:              FEE TRANSMITTAL

A.      Region IV

1. NRC FORM 241 ATTACHED

Applicant/Licensee:  
NRC Form 241 Dated:  
Agreement State License:  
Program Code(s):

2. REVISION ATTACHED

Licensee:  
Agreement State License:

3. CLARIFICATION ATTACHED

Licensee: *Grandin Testing Lab, Inc.*  
Agreement State License: *NM DM 257-03*

4. FEE ATTACHED

Amount:      \$                                      Check:      #

5. COMMENTS

B.      LICENSE FEE & ACCOUNTS RECEIVABLE BRANCH

1. Fee Category and Amount: \_\_\_\_\_
2. Correct Fee Paid. Submittal may be processed for:  
General License \_\_\_\_\_  
Revision \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_