SHEPHERD & ASSOCIATES

1010 Arroyo ave., San Fernando, California 91340-1822

818-898-2361 FAX 818-361-8095

March 6, 2000

Ms. Christie Hernandez/
Ms. Billie Gruszynski
U.S. N.R.C.-Region IV
DNMS/NMLB-ATTN:RECIPROCITY
611 Ryan Plaza Drive, Ste 400
Arlington, TX 76011-8064

MAR - 6 2000

Fax No.(817)860-8263 Page 1 of 1

Ref.: Notification of Proposed Activities in Non-Agreement State, State of California Lic. No.1777-19, Amendment #78/Timely Renewal

Dear Ms. Hernandez or Ms. Gruszynski,

Please be advised that we shall be conducting an emergency service call at the following facility March 8, 2000, technician Thomas Madden.

Location: University of Pennsylvania, dept. of Radiation Oncology, 180A John Morgan Bldg., 3620 Hamilton Walk, Philadelphia, PA 19104-6072. We have been contacted to perform an emergency service call to perform preventative maintenance service and repair source rod operation for the Mark I-68A Irradiator, S/N 1082, w/(RQ) 3,000Ci Cs-137, consisting of S/N's JLS-PX34, JLS-PX61, and JLSBRD-1742-5 as of August 25, 1992.

This facility is on our list.

If you require additional information, please do not hesitate to contact us.

Very truly yours.

J. L. SHEPHERD & ASSOCIATES

Paul Shepherd

Technical Specialist

Signature

M. C. Hernandez

Title:

Radiation Specialist

Jotas J/

1/00

NEOS Copy to RIV

RTS RY 19



UNITED STATES

NUCLEAR REGULATORY COMMISSION

REGION IV

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

MAR - 7 2000

MEMORANDUM TO:		Shirley Crutchfield License Fee & Accounts Receivable Branch (T9 E10)	
FROM:		Christi Hernandez Nuclear Materials Licensing Branch, Region IV MCW ·	
SUBJECT:		FEE TRANSMITTAL	
A.	Region IV		
	NRC FORM 241 ATTACHED Applicant/Licensee:		
		NRC Form 241 Dated:	
	_	Agreement State License:	
		n Code(s):	
	2. REVISION ATTACHED Licensee:		
	Agreem	Agreement State License:	
	3. CLARIFICATION ATTACHED Licensee: J. L. Shepherd & Ossociates Agreement State License: CA 1777-19		
	4. <u>FEE ATT</u> Amount:	· ·	
	5. <u>COMMEN</u>	·	
В.	LICENSE FEE & ACCOUNTS RECEIVABLE BRANCH		
	Fee Category and Amount:		
	2. Correct F	ee Paid. Submittal may be processed for: License	
	9.	·	
	Signed	Date	