

NRC FORM 7  
(8-2011)  
10 CFR 110

U.S. NUCLEAR REGULATORY COMMISSION

APPROVED BY OMB: NO. 3150-0027

EXPIRES: 08/31/2012

**APPLICATION FOR NRC EXPORT OR IMPORT LICENSE, AMENDMENT, RENEWAL, OR CONSENT REQUEST(S)**  
(See Instructions on Pages 4 and 5)

Estimated burden per response to comply with this mandatory collection request: 2.4 hours. This submittal is reviewed to ensure that the applicable statutory, regulatory, and policy considerations are satisfied. Send comments regarding burden estimate to the Information Services Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0027), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

**PART A. FOR NRC USE ONLY**

PUBLIC OR  NON-PUBLIC

DATE RECEIVED FEB 15 2012

LICENSE NUMBER

RYB154.00

DOCKET NUMBER

ADAMS ACCESSION NUMBER

ML20520148

**PART B. TO BE COMPLETED FOR ALL LICENSES, AMENDMENTS, RENEWALS, OR CONSENT REQUESTS**

(If more space is needed to complete any of the items, use Pages 3-4 first, and then attach additional sheets, if necessary.)

1. NAME AND ADDRESS OF APPLICANT/LICENSEE

Overlook Medical Center  
99 Beauvoir Avenue  
Summit, NJ 07901

1a. NAME OF APPLICANT'S CONTACT

Michael Mink

1b. APPLICANT'S REFERENCE NUMBER

RAD090003-457899

1c. PHONE NUMBER

(201) 669-0255

1d. FAX NUMBER

(908) 522-5884

1e. E-MAIL ADDRESS

michael.mink@atlantichhealth.org

2. TYPE OF ACTION REQUESTED (Check One)



EXPORT  
(Parts B, C, E)



IMPORT  
(Parts B, D, E)



AMENDMENT/RENEWAL  
Current License Number:



CONSENT REQUEST  
(Parts B, C)  
Current License Number:

3. CONTRACT NUMBER(S)

RAD090003-457899

4. FIRST SHIPMENT DATE

02/01/2012

5. LAST SHIPMENT DATE

05/30/2012

6. PROPOSED EXPIRATION DATE

01/31/2013

**PART C. TO BE COMPLETED FOR EXPORT LICENSES, AMENDMENTS, RENEWALS OR CONSENTS**

(If more space is needed to complete any of the items, use Pages 3-4 first, and then attach additional sheets, if necessary.)

7. NAME(S) / ADDRESS(ES) OF SUPPLIERS AND/OR OTHER PARTIES TO THE EXPORT

Best Theratronics, Ltd  
7643 Fullerton Road  
Springfield, VA 22153  
USA

8. NAME(S) / ADDRESS(ES) OF INTERMEDIATE FOREIGN CONSIGNEE(S)

None

9. NAME(S) / ADDRESS(ES) OF ULTIMATE FOREIGN CONSIGNEE(S)

Best Theratronics, Ltd  
413 March Road  
Ottawa, ON  
K2K 0E4

7a. FUNCTION(S) PERFORMED/SERVICE(S) PROVIDED

see attached

8a. INTERMEDIATE USE(S)

N/A

9a. ULTIMATE END USE(S)

Diaposal

10. DESCRIPTION OF RADIOACTIVE MATERIALS, SEALED SOURCES, NUCLEAR FACILITIES, EQUIPMENT, OR COMPONENTS; FOR NUCLEAR EQUIPMENT INCLUDE TOTAL DOLLAR VALUE OF EQUIPMENT FOR EXPORT

Cs-137 sealed source # 82-Cs-44 in GammaCell 1000 SN 1314 irradiator.

Estimated value is \_\_\_\_\_

10a. MAX TOTAL VOLUME / ELEMENT WGT (KG), OR TOTAL ACTIVITY (TBq)

12.3 TBq

10b. MAX ENRICHMENT OR WGT %

N/A

10c. MAX ISOTOPE WGT (KG)

N/A

11. FOREIGN OBLIGATIONS (BY COUNTRY AND BY PERCENTAGE OF MAXIMUM TOTAL VOLUME)

None

FEB 15 2012

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**APPLICATION FOR NRC EXPORT OR IMPORT  
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LICENSE NUMBER <b>PXB 151.00</b>	DOCKET NUMBER	ADAMS ACCESSION NUMBER	<input checked="" type="checkbox"/> PUBLIC OR <input type="checkbox"/> NON-PUBLIC
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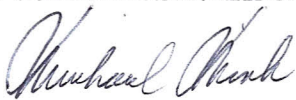
**PART D. TO BE COMPLETED FOR IMPORT LICENSES, AMENDMENTS, OR RENEWALS**  
(If more space is needed to complete any of the items, use Pages 3-4 first, and then attach additional sheets, if necessary.)

12. NAME(S) / ADDRESS(ES) OF FOREIGN SUPPLIERS AND/OR OTHER PARTIES TO IMPORT	13. NAME(S) / ADDRESS(ES) OF INTERMEDIATE CONSIGNEE(S)	14. NAME(S) / ADDRESS(ES) OF ULTIMATE U. S. CONSIGNEE(S)	
12a. NRC EXPORT LICENSE NUMBER(S) (if applicable)	13a. LICENSE NUMBER(S) / EXPIRATION DATE(S)	14a. LICENSE NUMBER(S) / EXPIRATION DATE(S)	
	13b. INTERMEDIATE USE(S)	14b. ULTIMATE END USE(S)	
15. DESCRIPTION OF RADIOACTIVE MATERIALS, SEALED SOURCES, NUCLEAR FACILITIES	15a. MAX TOTAL VOLUME / ELEMENT WGT (KG), OR TOTAL ACTIVITY (TBq)	15b. MAX ENRICHMENT OR WGT %	15c. MAX ISOTOPE WGT (KG)
16. FOREIGN OBLIGATIONS (BY COUNTRY AND BY PERCENTAGE OF MAXIMUM TOTAL VOLUME)			

**PART E. TO BE COMPLETED FOR ALL LICENSES, AMENDMENTS, RENEWALS OR CONSENT REQUEST(S)**

17. ADDITIONAL INFORMATION PROVIDED ON PAGES 3, 4, AND/OR ON SEPARATE SHEETS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	17a. COPIES OF RECIPIENTS' AUTHORIZATIONS PROVIDED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
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**18. CERTIFICATION:** I, the applicant's authorized official, hereby certify that this application is prepared in conformity with Title 10, Code of Federal Regulations, and that all information provided is correct to the best of my knowledge.

18a. PRINT NAME AND TITLE OF AUTHORIZED OFFICIAL Michael Mink, M.S., DABR Radiation Safety Officer	18b. SIGNATURE -- AUTHORIZED OFFICIAL 	18c. DATE 2/14/12
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*Red*  
*Jim*  
FEB 15 2012

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**APPLICATION FOR NRC EXPORT OR IMPORT  
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LICENSE NUMBER <b>YXB151.00</b>	DOCKET NUMBER	ADAMS ACCESSION NUMBER	<input checked="" type="checkbox"/> PUBLIC OR <input type="checkbox"/> NON-PUBLIC
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ADDITIONAL INFORMATION (Reference applicable block numbers from page 1 and/or page 2 for each entry)

For Item 7a

The source and device will be removed from Overlook Medical Center sometime in February of 2012. The source and device will be removed by a shipper contracted with Best Theratronics, Ltd. The source and device will be transported to Best Theratronics, Ltd. 413 March Road Ottawa, ON K@K 0E4 Canada.

*Kevin*  
*DM*  
FEB 15 2012



# Overlook Medical Center

ATLANTIC HEALTH SYSTEM

February 12, 2012

Mr. Scott Moore  
Deputy Director  
Office of International Programs  
U.S. Nuclear Regulatory Commission  
Washington, DC 20555-0001

## RE: Application for NRC Export License

Dear Mr. Moore:

We are replacing our GammaCell 1000 self-contained irradiator containing 332 Ci of Cs-137 with an x-ray based system. Best Theratronics has agreed to transfer the device and source to their facility in Ottawa, CA. Please review the enclosed license request. I have enclosed Form 7 and a check for \$5,500.00. I'm looking forward to working with your office to accomplish this task.

If you have any additional questions regarding our license renewal application, please contact me at [Michael.mink@atlantichhealth.com](mailto:Michael.mink@atlantichhealth.com) or by phone at 201.669.0255.

Michael Mink, M.S., DABR

Radiation Safety Officer

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Department of Radiology  
99 Beauvoir Ave.  
Summit, NJ 07902

T 908.522.2066 F 908.522.5763

*Lee*  
FEB 15 2012  
*JMS*