

**Void Sheet**

TO: License Fee Management Branch  
FROM: Region 3  
SUBJECT: VOIDED APPLICATION

Control Number: 576490

Applicant: Northern Michigan Regional Hospital

License Number: 21-16732-01

Docket Number: 030-11715

Date Voided: February 21, 2012

Reason for Void: During a discussion with the Radiation Safety Officer (RSO), Daniel A. Dryden, M.S., on February 21, 2012, it was agreed that we should void the amendment at this time to allow the licensee time to gather information for the "Request for Additional Information". The RSO stated that there could be a delay in their response so voiding their request at this time was OK. The licensee may submit their additional information under voided control 576490.

*W.P. REICHHOLD*  
W.P. Reichhold February 21, 2012  
Signature Date

Attachment:  
Official Record Copy of  
Voided Action

**FOR LFMB USE ONLY**

Refund Authorized and processed

No Refund Due

Fee Exempt or Fee Not Required

Comments \_\_\_\_\_ Log Completed \_\_\_\_\_

Processed by: \_\_\_\_\_