

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) <i>(See Instructions on Pages 4 and 5)</i>				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		<input checked="" type="checkbox"/> PUBLIC OR <input type="checkbox"/> NON-PUBLIC		DATE RECEIVED FEB 22 2012	
LICENSE NUMBER PXB153.00		DOCKET NUMBER		ADAMS ACCESSION NUMBER	
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 Loyola University Medical Center 2160 S. First Ave Maywood, IL 60153		1a. NAME OF APPLICANT'S CONTACT Todd Senglaub		1b. APPLICANT'S REFERENCE NUMBER Gammacell 1000	
		1c. PHONE NUMBER (708) 216-3239		1d. FAX NUMBER (708) 216-0455	
		1e. E-MAIL ADDRESS tsengla@lumc.edu			
2. TYPE OF ACTION REQUESTED (Check One)					
<input checked="" type="checkbox"/> EXPORT (Parts B, C, E)		<input type="checkbox"/> IMPORT (Parts B, D, E)		<input type="checkbox"/> AMENDMENT/RENEWAL Current License Number: _____	
<input type="checkbox"/> CONSENT REQUEST (Parts B, C) Current License Number: _____					
3. CONTRACT NUMBER(S)		4. FIRST SHIPMENT DATE 05/01/2012		5. LAST SHIPMENT DATE 05/01/2013	
6. PROPOSED EXPIRATION DATE 06/30/2013					
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 Customer name and address 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 Canada	
7a. FUNCTION(S) PERFORMED/SERVICE(S) PROVIDED See Attached		8a. INTERMEDIATE USE(S) N/A		9a. ULTIMATE END USE(S) Disposal	
10. DESCRIPTION OF RADIOACTIVE MATERIALS, SEALED SOURCES, NUCLEAR FACILITIES, EQUIPMENT, OR COMPONENTS; FOR NUCLEAR EQUIPMENT INCLUDE TOTAL DOLLAR VALUE OF EQUIPMENT FOR EXPORT Cesium 137 sealed sources (x2) (model number 1SO-1000) in Gammacell 1000 (serial number 1309) irradiator		10a. MAX TOTAL VOLUME / ELEMENT WGT (KG), OR TOTAL ACTIVITY (TBq) 21.34 TBq or 576.18 curies		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					

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U.S. NUCLEAR REGULATORY COMMISSION

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LICENSE NUMBER <i>PXB153.00</i>	DOCKET NUMBER	ADAMS ACCESSION NUMBER	<input checked="" type="checkbox"/> PUBLIC OR <input type="checkbox"/> NON-PUBLIC
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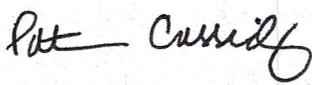
PART D. TO BE COMPLETED FOR IMPORT LICENSES, AMENDMENTS, OR RENEWALS
(If more space is needed to complete any of the items, use Pages 3-4 first, and then attach additional sheets, if necessary.)

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) <i>(if applicable)</i>	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 <i>Patricia Cassidy Interim President, LUMC</i>	18b. SIGNATURE -- AUTHORIZED OFFICIAL 	18c. DATE <i>2/8/12</i>
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rec'd
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FEB 22 2012

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ADDITIONAL INFORMATION (Reference applicable block numbers from page 1 and/or page 2 for each entry)

7a. Here is a brief summary of what Best Theratronics will do in removing the Gammacell 1000 #1309 from its current location and returning the sources to Canada for disposal:

- Hire an approved transport company to ship the empty overpack and new Raycell to Loyola University Medical Center
- Hire local riggers to assist the Best Theratronics technician to move the Gammacell 1000 from the current location to the loading dock where it is packed in the overpack for transport back to Canada
- Use the same transport company to return the Gammacell 1000 back to Canada

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LOYOLA
UNIVERSITY
HEALTH SYSTEM

February 10, 2012

Deputy Director
Office of International Programs
U.S. Nuclear Regulatory Commission
Washington, DC 2055-0001

RE: Export License Application

Deputy Director:

Enclosed (in duplicate) is an application for a radioactive materials export license for Loyola University Medical Center (LUMC) in Maywood, Illinois. We currently have radioactive material that we would like to return to a vendor that is located in Canada.

We have enclosed a check for \$5500 made out to the Nuclear Regulatory Commission for the applicable licensing fee. Also enclosed is a copy of LUMC's tax exemption identification number issued by the Illinois Department of Revenue in the event we are eligible for a fee exemption.

If there are any questions, please do not hesitate to contact me at (708) 216-3239. Thank you in advance for your help and consideration of our application.

Todd M. Senglaub
Todd Senglaub
Radiation Safety Officer
Loyola University Medical Center
Maywood, Illinois 60153

Ken
FEB 22 2012
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We also treat the human spirit.®



Illinois Department of Revenue

Office of Local Government Services
Sales Tax Exemption Section, 3-520
101 W. Jefferson Street
Springfield, Illinois 62702
217 782-8881

February 5, 2010

LOYOLA UNIVERSITY MEDICAL CENTER
JOHN D KIRSITS DIR OF FINANCE
2160 SOUTH FIRST AVENUE
MAYWOOD IL 60153

We have received your recent letter; and based on the information you furnished, we believe

LOYOLA UNIVERSITY MEDICAL CENTER
of
MAYWOOD, IL

is organized and operated exclusively for charitable purposes.

Consequently, sales of any kind to this organization are exempt from the Retailers' Occupation Tax, the Service Occupation Tax (both state and local), the Use Tax, and the Service Service Use Tax in Illinois.

We have issued your organization the following tax exemption identification number: E9955-6286-04. To claim the exemption, you must provide this number to your suppliers when purchasing tangible personal property for organizational use. This exemption may not be used by individual members of the organization to make purchases for their individual use.

This exemption will expire on March 1, 2015, unless you apply to the Illinois Department of Revenue for renewal at least three months prior to the expiration date.

Office of Local Government Services
Illinois Department of Revenue

STS-49 (R-2/98)
IL-492-3456
11-0000036

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FEB 22 2012