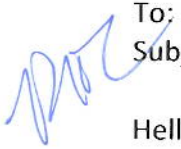


From: Irene Sakimoto [mailto:isakimot@hawaii.edu]
Sent: Friday, September 07, 2012 7:36 PM
To: Cook, Jackie
Subject: NRC License amendment



SEP 10 2012

Hello Ms. Cook,

Docket No.: 030-07571
License No.: 53-00017-23
Control: 575912

The University of Hawaii would like to amend our NRC license to remove line item 6. Z. Americium-241, Foil source (Nuclear Radiation Development, LLC Model A-001, 1 millicurie. The source was disposed by sending it back to NRC, LLC. The Return Authorization Form and the Proof of Compliance papers are attached as requested.

Please let me know if you need additional information.

Thank you very much for your attention to this matter.

Sincerely,
Irene Sakimoto
Radiation Safety Officer
University of Hawaii
Environmental Health and Safety Office
2040 East-West Road
Honolulu, HI 96822
Phone: 808-956-6475
Fax: 808-956-3205
email: isakimot@hawaii.edu

PUBLIC
 Immediate Release
 Normal Release

NON-PUBLIC
 A.3 Sensitive-Security Related
 A.7 Sensitive Internal
 Other: _____

Reviewer: ISC Date: 9-19-12



NRD, LLC
 2937 ALT BOULEVARD
 PO BOX 310
 GRAND ISLAND, NY
 14072-0310

800-525-8076
 716-773-7634
 716-773-7744 FAX
 service@nrdinc.com

Friday, September 07, 2012

UNIV. OF HAWAII
 BYRON BLOMQUIST
 2040 EAST-WEST ROAD
 HONOLULU, HI 96822

ATTN: SAFETY MANAGER

We are in receipt of the item(s) returned to NRD, LLC for waste disposal.

This letter serves as Proof of Compliance that the device(s) listed below have been disposed, and the service performed under New York State License 1391-1811.

<u>Device/Model</u>	<u>Qty</u>	<u>Serial #</u>	<u>To Serial#</u>	<u>Manufactured</u>	<u>NRD's Sales Order#</u>	<u>Millieuries</u>
A001	1	n/a	n/a	N/A		1
					<u>Total Millieuries</u>	1

Isotope: Americium 241

Your Original Po #

NRD's Original Sales Order #

Very truly yours,

Douglas Davis

Safety Officer



NRD, LLC
2937 ALT BOULEVARD
PO BOX 310
GRAND ISLAND, NY
14072-0310

800-525-8076
716-773-7634
716-773-7744 FAX
service@nrdinc.com

Return Authorization Form

RA No. 2365 Issued By SA Date Issued 8/22/2012 Return Date
Customer PO Sales Order# Order Date 8/22/2012
Company Name UNIVERSITY OF HAWAII
Contact Name BYRON BLOMQUIST
Street Address 2040 EAST WEST RD
City HONOLULU State HI Zip 96822
Phone 808-956-6475

Return Packaging: Packaging Labels Both None Required
Date Pack/Labels Shipped: AM-241 NI-63 PO-210 TRITIUM OTHER
Reason for Return
 Disposal 12mos or more Less than 12mos Other 0 Disposal Fee %
 Credit Full Credit Partial Less 0 % Restocking Fee 30day Performance
 Other Service Repair Evaluation
 Credit Shipping Charge Shipping
Comments AM-241 DISPOSAL

Qty	Model	Device Description	Mfg Date	Serial Nos
1	AM-241	stock code: BX0001 Model: A-001	receipt date: 9/2007	037980 1.0mCi (37MBq)



DATE
09/17/2012

NAME AND ADDRESS OF APPLICANT AND/OR LICENSEE

University of Hawaii
Office of the President
ATTN: Irene K. Sakimoto
Radiation Safety Officer
2444 Dole Street
Honolulu, HI 96822

LICENSE NUMBER

53-00017-23

MAIL CONTROL NUMBER

579107

LICENSING AND/OR TECHNICAL REVIEWER

ch

This is to acknowledge the receipt of your:

LETTER and/or APPLICATION DATED: 09/10/2012

The initial processing, which included an administrative review, has been performed.

AMENDMENT TERMINATION NEW LICENSE RENEWAL

- There were no administrative omissions identified during our initial review.
- This is to acknowledge receipt of your application for renewal of the material(s) license identified above. Your application is deemed timely filed, and accordingly, the license will not expire until final action has been taken by this office.
- Your application for a new NRC license did not include your taxpayer identification number. Please fill out NRC Form 531, located at the following link:

<http://www.nrc.gov/reading-rm/doc-collections/forms/nrc531.pdf>

Send the completed NRC Form 531, by facsimile, to the following number: (301) 415-5387

A copy of your action has been emailed to our License Fee and Accounts Receivable Branch, in our Headquarters office in Rockville, MD. You will be contacted separately if there is a fee issue involved.

Your application has been assigned the above listed **MAIL CONTROL NUMBER**. When calling to inquire about this action, please refer to this control number. Your application has been forwarded to a technical reviewer. Please note that the technical review, which is normally completed within 180 days for a renewal application (90 days for all other requests), may identify additional omissions or require additional information. If you have any questions concerning the processing of your application, our contact information is listed below:

Region IV
U. S. Nuclear Regulatory Commission
DNMS/NMSB - B
1600 E. Lamar Boulevard
Arlington, TX 76011-4511
(817) 200-1103 or (817) 200-1140

9/17/12

BETWEEN:

[FOR ARPB USE]
INFORMATION FROM WBL

Accounts Receivable/Payable
and
Regional Licensing Branches

Program Code: 01100
Status Code: Pending Amendment
Fee Category: 3L 3P
Exp. Date:
Fee Comments: 170.11(A)(4)
Decom Fin Assur Reqd: Y

License Fee Worksheet - License Fee Transmittal

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: HAWAII, UNIVERSITY OF
Received Date: 09/10/2012
Docket Number: 3007517
Mail Control Number: 579107
License Number: 53-00017-23
Action Type: Amendment

2. FEE ATTACHED

Amount: _____

Check No.: _____

3. COMMENTS

Signed: _____

Date: _____

Carl L. Hill
9/17/12

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered / /)

1. Fee Category and Amount: _____

2. Correct Fee Paid. Application may be processed for:

Amendment: _____

Renewal: _____

License: _____

3. OTHER _____

Signed: _____

Date: _____