NRC FORM 509		U.S. NUCLEAR REGULATORY COMMISSION	REQUEST NUMBER		
(M-YYYY)		APPROVED BY OMB: 3150-0043	FOIA/PA		
		EXPIRES: MM/DD/YYYY	DATE		
D STA		ESTIMATED FEES FOR			
FREEDOM OF INFORMATION ACT (FOIA) REQUEST					
REQUESTER		NRC CONTACT	TELEPHONE		
Pursuant to the NRC	's regulations 10 CER 9.40 52 E	R 49350, the NRC notifies a requester when	estimated applicable fees exceed		
\$25.00 or a limit stat	Pursuant to the NRC's regulations, 10 CFR 9.40, 52 FR 49350, the NRC notifies a requester when estimated applicable fees exceed \$25.00 or a limit stated in an FOIA request. The estimated fees for processing your FOIA request are noted below. If you wish to re-				
	scope your request to reduce fees, you may telephone the NRC contact identified above to discuss re-scoping the request. Otherwise,				
	please provide a written response on required action noted below. If the NRC does not receive notice from you on re-scoping your request or the required written response within 10 working days from the date of this notice, the NRC will presume that you have no				
	C processing your request and w				
	ESTIMATED FEES				
SEARCH					
REVIEW					
DUPLICATION *					
TOTAL					
		that you want copies of disclosed record			
		choose a CD-Rom, the cost will be the c			
		ds available, if appropriate, at the NRC E			
section below.	RCS web site at http://www.hi	c.gov/reading-rm.html. Please note your	preference in the Response		
Please note the comments provided on the attached NRC Form 509A.					
	Your request for a waiver or reduction of fees does not provide sufficient information under 10 CFR 9.41 for theNRC				
	to make a determination to waive or reduce fees. If you want the NRC to consider this matter further, please submit a written request pursuant to 10 CFR 9.41 within 10 working days from the receipt of this notice.				
· · · ·					
Please agree	by signing below to pay fees a		g the Response section of this		
Please agree by signing below to pay fees as high as estimated by signing and dating the Response section of this form and returning the form to the NRC contact identified above at the U.S. Nuclear Regulatory Commission,					
Washington, DC, 20555-0001, or by fax to (301) 415-5130, within 10 working days from the date of this notice.					
Please provide an advance payment of the estimated fees by one of the methods described on the attached NRC					
		date of this notice. Any overpayment of	signature date		
SIGNATURE - FOIA/PA SP	EUIALIƏI				
		DESDONSE			
As required abov	re I agree to pay fees as high	RESPONSE as estimated. I agree to pay estimated s	earch fees even if the NRC		
		e records or determines records located			
I prefer that copies of disclosed records be provided as stated below.					
Mailed directly to me. Placed in the NRC Electronic Reading Room.					
Paper copy					
	CD-Rom				
SIGNATURE - FOIA/PA RE	QUESTER		DATE		
NRC FORM 509 (M-YYYY)		with this mandatory collection request: 6 minutes. This form is used to notify a req			
requester's agreement to pay the fees. 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, Officer of Information and Regulatory Affairs, NEOB-10202, (3150-0043), 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 in		we control number, the NRC may not conduct of sponsor, and a		

NRC FORM 509A (M-YYYY)	U.S. NUCLEAR REGULATORY COMMISSION	REQUEST NUMBER		
	EMENT OF ESTIMATED FEES FOR OF INFORMATION ACT (FOIA) REQUEST COMMENTS	FOIA/PA		
Payment may be made to the USNRC by check or credit card. If paying via credit card, the enclosed NRC Form 629 must be completed and forwarded to the address listed below. Please be sure to reference the number assigned to your request (i.e., FOIA/PA-2003-0120) on your check or in the box marked "Invoice Number or Description" on the enclosed NRC Form 629 if you are paying by credit card.				
Your check or NRC Form 629 should be mailed to the attention of the NRC Contact identified on the previous page at the following address:				
	Mail Stop T-5 F09 USNRC 11555 Rockville Pike Rockville, MD 20852-2738			
Payments sent via an over previous page to the same COMMENTS	ernight delivery method should be sent to the NRC Con ne address.	tact identified on the		

NRC FORM 509A (M-YYYY)

STATEMENT OF ESTIMATED FEES FOR

FREEDOM OF INFORMATION ACT (FOIA) REQUEST COMMENTS

REQUEST NUMBER

FOIA/PA -

COMMENTS