

0441

# ROUTING AND TRANSMITTAL SLIP

MCBL 5210/3 (Rev. 1-95)

1. Date  
19 Jan 95

- 2. Operation Code
- x - Originator or Office
- Affixing Routing Sheet
- A - Appropriate Action
- B - Guidance
- C - Signature
- D - Comment
- E - Recommendation
- F - Concurrence
- G - Information

- H - Return To : STAFF SEC
- I - Initial
- J - Disposition
- K - Decision
- L - Retention
- O - Other : \_\_\_\_\_

3. Subject

Public Health Service  
Assessment

4. RGT	5. Opr Code	6. Addresses	7. Date		8. Initials			9. Nature of Action Requested	Originator's Initial	Due Date
			In	Out	Concur	NonConcur	Noted			
	X	COS						Routine		7 FEB
1	D	EMD	1/23	(1)	(D)			Urgent		
2	D	NAUHO SP	2/2	2/3	(A)			10. Reference Held by (Name, Grade, Section Ext.)		
3	D	ISS	950203	03 02	(K)			11. Remarks and Signature		
4		CG						<p>TO ALCON:</p> <p>Please review assessment package and provide comments for CG. Each addr is request to complete a burned copy of questionnaire.</p> <p>v/r AMS</p> <p>(1) EMD Comments are attached. We are still developing a response regarding additional fish sampling as indicated in comment 18. Recommend this document be staffed to Facilities Dept and EACO for comment. DW</p> <p>CLW</p> <p>0000002539</p>		