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MULTIPLE DEVICE ATTACHMENT FORM [GENERAL LICENSE REGISTRATION]

INSTRUCTIONS: This form is for use as an attachment to the General License Registration Form when additional devices are applicable. Please print or type all information. Keep a copy for your records, and attach this form to the application.

Applicant Name

Device Type | Manufacturer

Model No. | Serial No.

Date Received | Has the device been leak tested? ☐ Yes ☐ No | What is the frequency of testing?

Who performs the leak tests?

Describe the method used for disposing of the device(s) (i.e., return to manufacturer).

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Print Form