



SUSANA MARTINEZ
Governor
JOHN A. SANCHEZ
Lieutenant Governor

**NEW MEXICO
ENVIRONMENT DEPARTMENT**

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RYAN FLYNN
Cabinet Secretary
BUTCH TONGATE
Deputy Secretary

Information Required for Change of Control or Change of Ownership or both (to include a name change).

Please provide the following information concerning changes of control (transferor and transferee). If any items are not applicable, so state.

1. Provide a complete description of the transaction (i.e. transfer of stocks or assets, or merger). Indicate whether the name has changed and include the new name. Include the name and telephone number of a registrant contact who the bureau may contact if more information is needed.

A. Description of the transaction:

B. No name change
 New name of registrant organization _____

C. No change in contact
 New contact: _____
 New telephone number: _____

2. Describe any changes in personnel or duties that relate to the registrant program. Include training and experience for new personnel.

A. No changes in personnel having control over registrant activities.
 Changes in personnel having control over registrant activities (e.g. officers of a Corporation):

B. No changes in personnel named in the registrant.
 Changes in personnel named in the registrant (e.g. RSO, AUs) – include training, experience and responsibilities:

3. Describe, in detail, any changes in the organization, location, facilities, equipment or procedures that relate to the licensed program.

Organization:

Equipment:

Location:

Procedures:

Facility:

Not applicable:

4. Confirm that all records concerning the safe and effective decommissioning of the facility will be transferred to transferee or, as appropriate. These records include documentation of surveys of ambient radiation levels and fixed and/or removable contamination, including methods and sensitivity.

Records transferred to:

New licensee

Bureau for license termination

Not applicable

5. Confirm that the transferee will abide by all constraints, conditions, requirements and commitments of the transferor or that the transferee will submit a complete description of the proposed registrant program.

_____ will abide by all constraints, conditions,
(transferee company)

Signature/Title Transferee Official

Signature/Title Transferor Official

date

date