

New Mexico ENVIRONMENT DEPARTMENT



1100 St. Francis Drive Suite 2022 Post Office Box 5469 Santa Fe, NM 87502-5469 Fax (505) 476-8654 Telephone (505) 476-8600

JAMES KENNEY
Cabinet Secretary

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			Manufact	turer	
lodel No.			Serial No.		
Date Received	Has the device been leak tested?	<u>.</u>	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).					
Device Type	Туре		Manufact	turer	
Model No.			Serial No.		
Date Received	Has the device been leak tested?	֧֧֧֝֟֟֝֟֟֝֟֟֝֟֟֝ <u>֚</u>	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).					
Device Type			Manufacturer		
Model No.	del 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).					