



New Mexico
ENVIRONMENT DEPARTMENT



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Governor

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Cabinet Secretary

GENERAL LICENSE REGISTRATION FORM

INSTRUCTIONS: This application form applies to persons or organizations licensed to acquire, receive, possess, use, or transfer radioactive material contained in a sealed device as specified under 20.3.3 NMAC *Licensing of Radioactive Materials*. Please print or type all information. Keep a copy for your records, and submit a copy to: General License Coordinator at the above address.

FACILITY INFORMATION

Applicant Name			
Facility Address			
City	State	Zip Code	
Country	E-Mail Address and/or cellphone no.		
Telephone No			
Contact Person			
Telephone No	E-Mail Address and/or cellphone no.		
Radiation Contact Individual			
Telephone No	E-Mail Address and/or cellphone no.		

DEVICE INFORMATION

Number of Devices and/or Sources	<input type="text"/>	<i>If there are multiple devices, please attach additional sheets as necessary.</i>	Date Received	<input type="text"/>
Device Type	<input type="text"/>	Manufacturer	<input type="text"/>	
Model No.	<input type="text"/>	Serial No.	<input type="text"/>	
Has the device been leak tested?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	What is the frequency of testing?	<input type="text"/>
Who performs the leak tests?	<input type="text"/>			
Describe the method used for disposing of the device(s) (i.e., return to manufacturer).	<input type="text"/>			

I hereby certify that the registration information above is prepared in conformity with the New Mexico Environment Department, Radiation Control Bureau Regulations, and that all information is correct to my knowledge. The device information has been verified through physical inventory and review of the device label.

Applicant Name [Print]	<input type="text"/>	Date	<input type="text"/>
Applicant Name [Signature]	<input type="text"/>	Date	<input type="text"/>