

HOWIE MORALES Lieutenant Governor

NEW MEXICO ENVIRONMENT DEPARTMENT

525 Camino de los Marquez, Suite 1B
Post Office Box 5469
Santa Fe, NM 87505-5469
Phone (505) 476-8600 Fax (505) 476-4375
https://www.env.nm.gov/rcb/radiation-machines/



JAMES KENNEY Cabinet Secretary Designate JENNIFER J. PRUETT 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). Please indicate items not applicable.

- 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 whom 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.
B. [] 140 changes in personner 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 procedures that relate to the licensed pro	e organization, location, facilities, equipment or gram.
[] Organization:	[] Equipment:
[] Location:	[] Procedures:
[] Facility:	[] Not applicable:
will be transferred to transferee or, as apparent surveys of ambient radiation levels and formethods and sensitivity.	ne safe and effective decommissioning of the facility propriate. These records include documentation of fixed and/or removable contamination, including
Records transferred to:	
[] New Registrant [] Bureau for Reg	sistrant termination [] Not applicable
	by all constraints, conditions, requirements, and e transferee will submit a complete description of the
	will abide by all constraints, conditions,
(transferee company)	
Signature/Title Transferee Official	Signature/Title Transferor Official
date	date