

RECIPROCAL RECOGNITION LOCATION REPORT (3-DAY NOTIFICATION FORM)

INSTRUCTIONS: Complete this form completely prior to entering the State of New Mexico to perform work. Completed forms MUST be received at least 72 hours **PRIOR** to initiating work. Submit completed forms via e-mail to RCB.reciprocity@env.nm.gov.

SCHEDULED DATES OF WORK

Start Date End Date No. Days Worked Add Delete

LICENSEE INFORMATION

Notification Date
 Licensee Name
 NM RAM License No. (if applicable)
 Radioactive Materials License No.
 Issuing Agency
 Contact Name
 Telephone No. Fax No.
 E-mail address

PREVIOUS NOTIFICATION

Yes No Is this a revision of a previous notification?
 Provide the reason for late notification, if applicable

CURRENT LICENSE TYPES

TYPE
 TYPE
 TYPE
 TYPE

ATTACHMENTS REQUIRED

Licensure Fee \$1,200
 A copy of your current license and/or summary, including all amendments.

TYPE OF WORK TO BE PERFORMED

Pipeline Concrete / Foundation Lead Paint Analysis
 Fabrication Service and/or Repair Road Construction
 Medical Equipment or Source Install Tank
 Landfill

If other, please list

PERSONNEL/AUTHORIZED USERS

NAME	TELEPHONE

EQUIPMENT

MAKE	MODEL	SERIAL NO.

WORK LOCATION INFORMATION

Company Name
 Contact Name
 Telephone No. Mobile No.
 E-mail Address

ISOTOPES (use chemical abbreviation)

ISOTOPE	ACTIVITY	SPECIFY UNITS
		<input type="checkbox"/> Ci <input type="checkbox"/> mCi
		<input type="checkbox"/> Ci <input type="checkbox"/> mCi
		<input type="checkbox"/> Ci <input type="checkbox"/> mCi

Enter the physical address, UTM coordinates and/or description of the work location

I, THE UNDERSIGNED, CERTIFY THAT:
 a. All information in this report is true and complete.
 b. I have read and understand the New Mexico Radiation Protection Regulations and that I am required to comply with these regulations under the reciprocal recognition for which this report has been filed with the New Mexico Environment Department.
 c. I understand that activities, conducted under this recognition, including storage, are limited to a total of 180 days in a calendar year.

Signature Required **Date**