

RCB Form 016 (01/2025) 20.3.3 NMAC <p style="text-align: center;">APPLICATION FOR RADIOACTIVE MATERIALS LICENSE</p>	Submittal of the application is required to determine that the applicant is qualified and that adequate facilities and procedures exist to protect the public health and safety and property. Send completed and signed form and attachments to: NMED - Radiation Control Bureau 525 Camino De Los Marquez, Suite 1A P.O. Box 5469 Santa Fe, New Mexico 87502-5469	
INSTRUCTIONS: <i>The appropriate license application guide must be followed when completing this application form. Send two copies of the entire completed application (this form and attachments) to the Department at the address listed above. License application guides can be downloaded from the following website: https://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1556/</i>		
1. APPLICATION This is an application for (<i>Check appropriate item</i>) <input type="checkbox"/> A. NEW LICENSE PRC No. _____ or Tax & Rev. No. _____ <input type="checkbox"/> B. AMENDMENT TO LICENSE NUMBER _____ <input type="checkbox"/> C. RENEWAL OF LICENSE NUMBER _____	2. NAME AND MAILING ADDRESS OF THE APPLICANT FAX NUMBER EMAIL	
3. ADDRESS WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED 	4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION TELEPHONE NUMBER	
<i>Submit Items 5 through 11 as attachments to this application on separate sheets. The type and scope of information to be provided is described in the corresponding license application guide. A web link to the guides is listed above.</i>		
5. RADIOACTIVE MATERIAL REQUESTED a. Element and Mass Number b. Chemical and/or Physical Form c. Maximum Amount to be Possessed at Any One Time	6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED	
7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE	8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS	
9. FACILITIES AND EQUIPMENT	10. RADIATION SAFETY PROGRAM	
11. WASTE MANAGEMENT	12. FEES ENCLOSED <input type="checkbox"/> NEW APPLICATION OR RENEWAL APPLICATION FEE <input type="checkbox"/> AMENDMENT FEE (25% of APPLICATION FEE) Refer to 20.3.16 NMAC for license fee information.	
13. CERTIFICATION The applicant understands that all statements and representations made in this application are binding upon the applicant. The applicant and any official executing this certification on behalf of the applicant, named in Item 2, certify that this application is prepared in conformity with 20.3 NMAC, "Radiation Protection" rules, and that all information contained herein is true and correct to the best of their knowledge and belief.		
PRINTED/TYPED NAME AND TITLE OF CERTIFYING OFFICER	SIGNATURE	DATE
WARNING: FALSE STATEMENTS AND INFORMATION PROVIDED IN THIS APPLICATION MAY SUBJECT THE CERTIFYING OFFICIAL TO CIVIL AND/OR CRIMINAL PENALTIES.		
DEPARTMENT USE ONLY Receipt Date: _____ Adm. Complete on _____ PN: _____ Outstanding Fees _____ Additional Info Required _____ Application Denied on _____ Additional Info Received on _____ Application Approved; License Issued on _____		Comments: