

NEW MEXICO ENVIRONMENT DEPARTMENT

1100 St. Francis Drive, Suite 2022 Post Office Box 5469 Santa Fe, NM 87502-5469 Telephone (505) 476-8611 Fax (505) 476-8654 https://www.env.nm.gov/nmrcb/radserv.html



JAMES KENNEY Cabinet Secretary Designate JENNIFER PRUETT Deputy Secretary

APPLICATION FOR REGISTERING TO PROVIDE RADIOLOGICAL SERVICES

Dear Applicant:

The New Mexico Environment Department's *Vendor Registration of Servicing and Services* procedures are in accordance with Part 2, Section 204, of the New Mexico Radiation Protection Regulations. *Certificates of Registration* are issued to qualifying applicants http://164.64.110.134/nmac/T20C003. Persons and organizations registered with this State are required to possess adequate credentials for their particular disciplines, and must submit this application form.

| Name to appear on registration | |
|--|------------|
| Organization (If applicable) | |
| Address | |
| City State Zip | p Code |
| Country (if other than U.S.) Phone No. FAX No. | |
| E-mail Address | |
| Check the box for registration type (if renewal or amendment, enter the current registration No.) New Renewal Amendment | |
| Current Registration No.(s) | |
| REQUIRED INFORMATION [check the following boxes indicating the information is attached to this application] | |
| Scope of work activities Biographical information or résumé Current certificates [COPIES ONLY] | |
| CATEGORIES OF SERVICES [check the box for all categories and subcategories of services that will be provided] | |
| Personnel Dosimetry | |
| External Monitoring | |
| Radiological [Radiation Producing Equipment] | |
| ☐ Installation and Servicing ☐ Calibration | ☐ Training |
| Qualified Expert | |
| ☐ Medical Physics ☐ Health Physics | Both |
| Applicant Name [Print] | Date |
| Applicant Name [Signature] | Date |