## RADIATION CONTROL PROGRAM

## **APPLICATION FOR REGISTRATION OF X-RAY SERVICES**

1.	APPLICANT INFORMATION  NAME OF COMPANY OR INDIVIDUA	A1 ·		
	MAILING ADDRESS:			
	CITY:	STATE: Z	IP CODE:	
	TELEPHONE:	FAX:		
	E-MAIL:			
	2. GENERAL INFORMATION FOR	GENERAL INFORMATION FOR SERVICES OR SERVICING PROVIDED (Check all appropriate boxes)		
	☐ Machine assembly, Removal, Lease	☐ Sales or Demonstration	on	
	$\square$ Film Processing/Supplies	<ul><li>Personnel Dosimetry Services</li></ul>	☐ Survey Instrument Calibration	
	☐ Radioactive Source Services	<ul><li>Radiation Machine Evaluation (&lt;1 MeV) Diagnostic Energies</li></ul>	☐ Therapy Machine Evaluation (Orthovoltage and ≥ 1 MeV)	
	☐ Other (List)			
_	APPLICANT OFFICIOATION			
<ul> <li>3. APPLICANT CERTIFICATION By signing this application, I affirm that I have read and understand the requirements of MRRP, Part F. I understand that, among other applicable provisions of these regulations, a. The filing of a radiation machine assembly report with the Maine Radiation Control Program is not a substitute for federal (FDA 2579) form or in lieu of other notifications for the location of the installation or removal of a machine; b. Notification is required in writing within 10 days after any change which renders the information on this application graccurate, except upon application for renewal which must be made two weeks prior to expiration three year the date of registration; and</li> </ul>				
			on of the installation or removal of a machine; which renders the information on this application no	
<ul> <li>c. No individual will perform services or servicing which are not specifically stated above on the notification of reand</li> <li>d. No person shall make, sell, lease, transfer, lend or install x-ray equipment or radioactive material sources or auxi supplies necessary for the safe operation of such equipment unless such supplies and equipment, when operation and use, will meet the requirements of the State of Maine Rules Relating to Radiation Protection. Pen be assessed for failure to comply with the above regulations may result in modification, suspension or cance registration and/or the imposition of substantial fines.</li> </ul>		sifically stated above on the notification of registration;		
		nless such supplies and equipment, when placed in Rules Relating to Radiation Protection. Penalties may		
	AUTHORIZED SIGNATURE:		DATE:	
M 11		-Ray / Mammography Section laine Radiation Control Program 1 State House Station 86 Water Street – 4 <sup>th</sup> Floor		

Augusta, Maine 04333-0011

Fax: 207 287-3059

Questions ? Call 207-287-5676 or email radiation.dhhs@maine.gov