



Nevada Radiation Control Program

License Application for Transfer of Control of Radioactive Materials



TRANSFEROR (SELLER) LICENSEE INFORMATION

RADIOACTIVE MATERIALS (RAM) LICENSE NO.

NAME OF COMPANY OR BUSINESS

STREET ADDRESS

CITY

STATE

ZIP CODE

TRANSFeree (BUYER) INFORMATION

NAME OF REQUESTOR

NAME OF COMPANY OR BUSINESS

STREET ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE NUMBER

CELL NUMBER

FAX NUMBER

E-MAIL ADDRESS

DISCLOSE ANY ADDITIONAL RAM LICENSES POSSESSED

LICENSING AGENCY (NRC OR AGREEMENT STATE)

Information to be submitted on additional sheets

ATTACHMENT CHECKLIST

- ☐ Signed *RSO Delegation of Authority* form — http://health.nv.gov/HCQC_Radiological_Forms.htm
- ☐ Submit an organizational chart of the company illustrating the Radiation Safety Officer's (RSO) position.
- ☐ A commitment of understanding whereby the company principal(s) are ultimately responsible for the materials.
- ☐ A commitment to abide by current license conditions and commitments.
- ☐ Submit a copy of the contract, signed by both parties, demonstrating the transfer of all radioactive materials.
- ☐ Submit a copy of a State or County business license with new business name and location if changed.
- ☐ Submit a property owner letter permitting the storage and use of radioactive materials on the premises.

ATTESTATION

As the applicant and transferor, I am a company officer executing this attestation, and certify that this application is prepared in conformity with Nevada Administrative Code (NAC) 459 and that all information contained herein, including any supplements attached hereto, are true and correct to the best of my knowledge.

I understand the transfer of Radioactive Materials listed on the license will not be complete until the Nevada Radiation Control Program issues an amended license approving the changes.

PRINTED NAME OF APPLICANT

TITLE OF ATTESTING OFFICIAL

SIGNATURE

DATE

Division of Public and Behavioral Health • Nevada Radiation Control Program

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