

# New Installation of Radiation Emitting Equipment

Please verify the accuracy of the enclosed information. Make any necessary changes, additions or deletions; sign and date the bill and return ALL pages in the enclosed envelope.

County No **55** Licensee/Registration Number **5555** Registration No **5555**

1. Name of Facility:	<b>John Doe Chiropractic</b>	Facility/Licensee/Registration Name
2. Location of Radiation Source(s)	<b>P.O. BOX 555 LINCOLN, NE 68508-6214</b>	
3. Billing Information	<b>P.O. Box 555 Lincoln, NE 68508-6214</b>	
4. Phone Number	<b>(555) 555-5555</b>	
5. E-Mail	<b>johndoe@johndoe.com</b>	
6. Owner(s)/User/ Possessor of Radiation Source (s)	<b>John Doe</b>	
7. Person Responsible for Radiation Protection:	<b>John Doe</b>	

1. If the information is accurate or the changes are minor (name, address, etc.), please pay the fee listed. Upon receipt of the payment, a Revised Certificate of Registration will be mailed to you.

**2. Make all changes on the form in RED. Changes to equipment may necessitate recalculation of fees or a cancellation of the bill.**

**3. Please remit by check or money order, payable to 'Nebr. Department of Health & Human Services', and INCLUDE THIS DOCUMENT WITH YOUR PAYMENT to assure proper credit to your account.**

4. If you no longer own or possess any radiation generating equipment listed on this form, please indicate the disposition of the equipment (i.e., trade-in, dismantled, sold to \_\_\_\_\_).

*NOTE - 180 NAC 1 002.09 Report of Changes. The registrant shall notify the Agency in writing within thirty (30) days of any change which would render the information contained in the application no longer accurate.*

Title 180, Control of Radiation Regulations, Regulatory Guides, X-ray Checklists, Radiation Control Act, etc may be obtained thru the Radiation Control Web Site at: [www.dhhs.ne.gov/rad](http://www.dhhs.ne.gov/rad)

Please direct all correspondence regarding this billing to:

DHHS, Division of Public Health  
X-Ray Registration Program  
PO Box 95026  
Lincoln, NE 68509-5026  
(402) 471-0563

This Space for Dept. Use Only

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