

APPLICATION FOR REGISTRATION OF X-RAY DEVICES

FOR OFFICE USE ONLY	County _____ Registration No. _____
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Completion of this form is required. Failure to do so may result in a forfeiture of not less than \$10.00 or more than \$500.00.
 Registration does not imply approval of installation.

Name of Business _____

Business Address-Street, City, State, Zip _____

Mailing Address If Different than Business Address _____

Telephone No. (include extension if any) _____

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Name and Title of Person Responsible for Radiation Safety _____

Application

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|------------------------------------|-------------------------------------|-------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Medical | <input type="checkbox"/> Dental | <input type="checkbox"/> Hospital | <input type="checkbox"/> Chiropractor | <input type="checkbox"/> Veterinary |
| <input type="checkbox"/> Osteopath | <input type="checkbox"/> Podiatrist | <input type="checkbox"/> Industrial | <input type="checkbox"/> Other (Explain) | |

List number of X-Ray units. In "Use" column show "R" for radiographic, "F" for fluoroscopic; "T" for therapeutic and "O" for other. If "Other, please explain. If more space is needed, please attach a separate sheet.

Max kVp	Max. mA	Model Name	Serial No.	Manufacturer's Name	Year Installed	Use

If you are responsible for x-ray units at locations other than listed above, please list the locations.

SIGNATURE – Person Responsible for radiation safety _____ Title _____ Date signed (mm/dd/yy) _____

<p>The registration fee is based on the facility type and the number of x-ray tubes. Make check payable to the Department of Health Services and submit with this application. Contact the Radiation Protection Section at (608) 267-4782 for the correct fee or link to the web site at http://dhs.wisconsin.gov/dph_beh/BEH/Xray/index.htm</p>	<p>Mail completed original form to: Department of Health Services Division of Public Health Radiation Protection Section, RM B157 P.O. Box 2659 Madison, WI 53701-2659</p>
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Note: Multiple x-ray devices at a single location and under the control of one person may be considered a single registration and only one registration fee is required. If, however, the devices are located at separate addresses, it will be necessary to consider each location as a separate registration and an additional fee is required for each location. **All permits expire on December 31 regardless of issue date.**