

**STATE OF ALABAMA
DEPARTMENT OF PUBLIC HEALTH**

Registration Number _____

Date Registered _____

**APPLICATION FOR
REGISTRATION OF SOURCES OF RADIATION
(see reverse for instruction)**

Under the provisions of Title 22, Chapter 14 of Alabama, the State Board of Health is designated as the State Radiation Control Agency and authorized to maintain a file of registrants possessing x-ray machines or other machines and devices producing ionizing radiation. The applicant applies for registration pursuant to 420-3-26-.05(a) or (b).

I. Applicant: _____
Person, Corporation, Agency, etc. County

Address: _____
Street City Zip Phone

II. Location of unit (if different from above address): _____

III. Person responsible for radiation control: _____

IV. X-ray equipment and fluoroscopes:

1. Room #	2. Manufacturer (control panel)	3. Model #	4. Serial #	5. Machine Type	6. Number of Tubes	7. Max. kVp	8. Max. mA	9. Fixed Mobile Portable	10. Use

Column 5 Machine Type	Column 10 Use
Bone Densitometer (BD)	Cardiac Cath./Interventional (CC)
Computed Tomography (CT)	Dental (DT)
Mammography (Mam)	Podiatry (PD)
Therapy (Ther)	Veterinary (VT)
Combination (Comb)	Chiropractic (CH)
Fluoroscopic (Fluor)	
Radiographic (Rad)	

Date

Signature of User

REGISTRATION DOES NOT IMPLY APPROVAL OF THE INSTALLATION BY THE ALABAMA STATE BOARD OF HEALTH

(See reverse for instructions)

