

552.021, 552.023, 559.003 and 559.004).

NOTICE OF INTENT TO WORK IN THE STATE OF TEXAS FOR X-RAY SERVICES

PRIOR TO PERFORMING RADIATION WORK IN TEXAS:

A Notice of work in Texas must be <u>received</u> by the Agency (via mail, email or fax) at least 3 days <u>prior</u> to x-ray services in Texas. Any written notification <u>must</u> include all of the information requested below. You <u>must</u> have a valid Agency certificate of registration.

NOTIFICATON INFORMATIO	N:				
Company Name:					
Mail Address:					
City/State/Zip:					
RSO Phone #:					
RSO Email:					
X-Ray Registration No.:					
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D () W W'II D C W D C '	Т				
Person(s) Who Will Perform X-Ray Services:				`	
Texas Hotel / Motel (<i>Name</i>) and Phone No.:			()	
Date You Were Notified of this Job:	Type of W	Vork:			
Duration of Work: From	(date) to	(date).	Total Work Da	ays:	
Customer Name:			City:		
Customer Registration Number: R			Phone:() -	
				,	
Job Site Address -Include Street or Hwy #					
X-ray Device Information: X-ray Manufacturer:		X-ray Manufacturer:			
X-ray Model No:		X-ray Model No:			
X-ray Serial No:		X-ray Serial No:			
MAIL, EMAIL OR FAX FORM TO: Inspection Unit, X-Ray Group Mail Code 1986 Texas Department of State Health Services PO Box 149347 Austin TX 78714-9347	Signed:	nt all information on this		Dated:).
Fax: (512) 483-3431 Email:	Title:				
radiationxrayinspections@dshs.state.tx.us					
(Fax number is operational 24 hours per day.)					
<u>PRIVACY NOTIFICATION</u> : If you are applying as an in State of Texas collects about you. You are entitled to rece any information that is determined to be incorrect. See					

Not for Industrial Radiography use: Use RC 252-3 for notification of Industrial Radiography work