

Mission:
To protect, promote & improve the health
of all people in Florida through integrated
state, county & community efforts.



Rick Scott
Governor

Celeste Philip, MD, MPH
Surgeon General and Secretary

Vision: To be the Healthiest State in the Nation

Note: To establish reciprocity, submit a complete copy of most recent NRC or Agreement State RAM license, the information requested on this notification guidance form and a check, draft or money order for the applicable fee at least three (3) business/work days before requested entry into the state. The notification form information is required before every entry into the state at least three business days in advance.

<p>COMPANY: _____ Address: _____ _____ _____ Telephone: _____ Email: _____ Source(s): _____ Last Leak/Wipe Test: _____</p> <p><u>FLORIDA CUSTOMER INFORMATION:</u> COMPANY: _____ FLORIDA RADIOACTIVE MATERIALS LICENSE NUMBER: _____ Site Address: _____ _____ _____ Date Work Begins: _____ Date Work Ends: _____</p>	<p><u>OPERATOR(S):</u> _____ _____ _____ License No: _____ RSO: _____ Source Activity: _____ Exposure Device(s): _____ _____</p> <p><u>COMPANY CONTACT:</u> Name: _____ Phone Number: _____</p> <p>If address is unclear, provide directions to job site:</p>
---	---

Name: _____

Title: _____

Signature: _____

Date: _____

Make checks, drafts or money orders payable to "DOH, Bureau of Radiation Control". Refer to the fee schedule at [http://www.floridahealth.gov/environmental-health/radiation-control/radmat/ documents/regguide6-20.pdf](http://www.floridahealth.gov/environmental-health/radiation-control/radmat/documents/regguide6-20.pdf) (Annual fee = Reciprocity fee).

Mailing Address:

4052 Bald Cypress Way, BIN C21
Tallahassee, FL 32399-1741

Phone: (850) 245-4545

Over Night Mailing Address:

4042 Bald Cypress Way, Room 220.05
Tallahassee, FL 32399-1741

FAX: (850) 921-6364