MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Boulevard Baltimore Maryland 21230

To:

(410) 537-3000 ● 1-800-633-6101 ● mde.maryland.gov

TRANSFER DECLARATION FORM **FOR**

From:

GENERAL LICENSED RADIATION DEVICES (Please Complete and Return)

Atnatiwos Mesl	Company	Name					
Radiological He	Mailing A						
Maryland Dept.	_	City					
1800 Washingto	State	•					
Baltimore, Mar	Zip Code	Zip Code					
Phone (410) 53		Responsible Person					
` /	,	,	Title				
			Telephon	e Number			
			Storage A				
			County of				
			Address of				
following table. of transfer are a	The name lso provide	of the license d in this table	ee or manufactu e.	rer that rece	eived the de	ce(s) listed in the vice(s) and the da	
☐ NEVER P	OSSESSEI	O GENERAL	LICENSE DEV	/ICES (type	e an X if tru	e)	
☐ UPDATES	S REGISTR	RATION NO.	GL]
	Model			Activity	Date of	Transfer	
Manufacturer	No.	Serial No.	Radioisotope	(mCi)	Transfer	Recipient	
	- 101			(====)			
Use an additional form if greater than 8 devices transferred out.		repared by (type name) itle ate elephone No.					
	I S S	lignature					

