

Certificate of Transfer or Destruction of X-ray Equipment

Authorized User: _____ X-ray Location: _____

Equipment Model Number: _____ Serial Number: _____

Final Survey Meter Reading of Equipment _____ mrem/hr
Survey Meter Used:

Manufacturer: _____ Model Number: _____

Serial Number: _____

Final Disposition of X-ray Destroyed Transferred to another Facility
for further use

Name and address of facility where X-ray transferred to or destroyed (Please attach a receipt from this facility)
