X-Ray Permit Renewal Form

Principal Investigator: ___________________________________________________

Permit #: ____________________________________________________________

Expiration Date: ______________________________________________________

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Approval is requested for the renewal of the above x-ray permit (check one):

Under the same conditions specified on the original Dalhousie X-Ray Permit Registration Form

With changes as requested on the attached Dalhousie X-Ray Permit Amendment Form

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Submitted by:

Principal Investigator: __________________________________ Date: ______________

Approved by:

X-Ray Safety Officer: __________________________ Date: ______________