

IOWA DEPARTMENT OF PUBLIC HEALTH
BUREAU OF RADIOLOGICAL HEALTH
LUCAS STATE OFFICE BUILDING, 5TH FLOOR
321 EAST 12TH STREET
DES MOINES, IOWA 50319-0075

PHONE: (515) 281-0403

FAX: (515) 281-4529

RECIPROCITY NOTIFICATION

Dear RSO:

This is at a minimum, the information we need in order to allow you reciprocity in Iowa. This information must be submitted at least 3 working days in advance of your beginning work date.

COMPANY: _____

OPERATOR(S):

Address: _____

Telephone: _____

License No: _____

RSO: _____

Source(s): _____

Source Activity: _____

Last Leak/Wipe Test: _____

Exposure Device(s): _____

IOWA CUSTOMER INFO:

COMPANY: _____

COMPANY CONTACT:

Site Address: _____

Name: _____

Phone Number: _____

Work Begins: _____

Work Ends: _____

Directions to job site:

Signature: _____

Title: _____