

**STATE OF WISCONSIN
DEPARTMENT OF HEALTH SERVICES
Division of Public Health**

License, Permit or Registration

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Wisconsin Statutes and is hereby authorized to engage in the activity as indicated below.

YULIYA HENES

ACTIVITY X-RAY DEVICE REGISTRATION	EXPIRATION DATE 31-Dec-2014	I.D. NUMBER UW 111820
REGISTRANT MAILING ADDRESS UW-ENG PHYSICS/MECH ENG 30 E CAMPUS MALL MADISON WI 53715	NOT TRANSFERABLE	BUSINESS / ESTABLISHMENT ADDRESS UW-ENG PHYSICS/MECH ENG 1513 UNIVERSITY AVE MADISON WI 53706

DO NOT DISCARD

THIS IS YOUR X-RAY DEVICE REGISTRATION PERMIT

- All sites having ionizing radiation devices must register with the department as required under Wisconsin Administrative Rule DHS 157.86. The department will issue a registration permit that must be posted onsite in ordinance with DHS 157.88 (1)(a)5. When displaying, this document may be folded into thirds (8-1/2 x 3-1/4).
- Any change in registration information shall be submitted to the department in writing within 30 days after the change takes place. The department's mailing address is provided below. No fee is required for recording changes in registration information.
- Upon a change of ownership the new owner must submit a new application for registration of x-ray devices and the required fee.
- An annual registration fee shall be levied for each site registration under DHS 157.86. All registrations expire annually on December 31st. The department will provide an annual renewal application form however if you do not receive a renewal application form by December 15th send payment based on fees established under DHS 157.86 to the address provided below. Include the name of your facility and the program assigned ID NUMBER listed on this permit (see above).

DEPARTMENT OF HEALTH SERVICES
RADIATION PROTECTION SECTION
1 W WILSON ST - RM. B157
PO BOX 2659
MADISON WI 53701-2659