



RHODE ISLAND RADIATION CONTROL AGENCY
REGISTRATION OF DEVICES POSSESSED UNDER THE
GENERAL LICENSE ISSUED IN 216-RICR-40-20-7.7.1

Agency Form GEN-4 Continuation Sheet – Not In Possession of Device

9. DEVICE NO LONGER IN POSSESSION OF GENERAL LICENSEE:

Distributor Name: _____

Distributor License Number (if known): _____

Manufacturer: _____ Device Model Number: _____

Device Serial Number: _____

Location of Device? _____ Transfer Date (MM/DD/YYYY): _____

Whereabouts Unknown Transferred to Another General Licensee [Complete Sections A and B]

Returned to Manufacturer Disposed of/Transferred to a Specific Licensee [Complete Section A]

Section A

License Number of Recipient (if transferred to a specific licensee): _____

Recipient Company Name and Department: _____

Recipient Company Mailing Address: _____

Section B

Name and Title of Individual Responsible For This Device: _____

Business Telephone Number: _____

9. DEVICE NO LONGER IN POSSESSION OF GENERAL LICENSEE:

Distributor Name: _____

Distributor License Number (if known): _____

Manufacturer: _____ Device Model Number: _____

Device Serial Number: _____

Location of Device? _____ Transfer Date (MM/DD/YYYY): _____

Whereabouts Unknown Transferred to Another General Licensee [Complete Sections A and B]

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License Number of Recipient (if transferred to a specific licensee): _____

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Name and Title of Individual Responsible For This Device: _____

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