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REQUEST FOR PUBLIC DOCUMENTS

(Commercial Purpose)

I request the documents described herein from the Arizona Radiation Regulatory Agency. Make your information request selection from the drop down menu below the specific agency program. Please use the space on the right to provide any additional information or to describe a selection of *other*.

X-Ray Radiation	(Use this space to describe a menu selection of <i>other</i> or for providing additional information.)
Radioactive Materials	
Nonionizing Radiation	
Medical Radiological Board of Examiners	
Radiation Measurements Lab	

Pursuant to Arizona Revised Statutes § 39-121.03 (A), describe the purpose of this request at right and provide requestor information below.		
Requestor's Name	Title	Requestor's Email Address
Street Address or POB	City	FOR NOTARY USE ONLY: Subscribed and Sworn to before me on this ____ day of _____ 20____ . Notary Public: _____ My commission expires: _____ Affix seal:
State	Zip Code	
By signing below, I affirm that the above described purpose is an accurate description of the purposed use of these requested public records.		
Signature		

There is a \$30.00 charge per list in excel format e-mailed as an attachment; \$35.00 on disc and mailed via US Mail. For hard copy request call 602-255-4845.