

ARIZONA RADIATION REGULATORY AGENCY

4814 South 40th Street, Phoenix AZ 85040
Phone (602) 255-4845 Fax (602) 437-0705
<https://arra.az.gov>

ATTACHMENT TO ARRA-NIR FOR THE REGISTRATION OF NONIONIZING RADIATION DEVICES (Complete 1 ARRA-NIMI form for EACH unit you are applying to register)

1. **Facility Name:**
Street Address:
City and Zip:
2. **Registration Number for current registrants** - **or** **NEW Registrant**
3. **Date:**
4. **Your Name and Title:**
5. **Machine Type:**

Cosmetic Laser	Medical Laser	Industrial Laser
Cosmetic RF	Medical RF	Industrial RF
Cosmetic IPL	Medical IPL	Light Show Laser
Diathermy	Electrocautery	Dental Laser
Other – <input type="text"/>		Tanning
6. **Machine Subtype:**

Stationary	Mobile	Portable	Transportable
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7. **Equipment Information:**

Manufacturer name: Number of heads:

Model Name:

Are you removing this unit from your registration? YES NO

Does this unit replace a previously registered unit in your facility? YES NO

If YES, which one?

If YES, what happened to old unit?
8. **SIGNATURE**