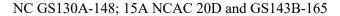
STATE OF NORTH CAROLINA

2019 Mammography Screening Certification

Initial/Renewal Application





Complete form to APPLY for or to RENEW Certification for Mammography Screening. Complete one application form for each mammography screening site location.

CERTIFICATION FOR MAMMOGRAPHY SCREENING [] RENEW NEW DATE MAILED [STATE GOVERNMENT USE ONLY]: Name CERTIFICATE # DBA (if different from above) Site LOCATION _____ CITY State ZIP MAILING ADDRESS (if different from site) PHONE () EIN# Medicare # OWNED by_____ FDA MQSA#______ #Units: FIXED MOBILE Name/Title of Director COMPLETE AS APPLICABLE JCAHO ID# Expires American College of Radiology/Radiologist ID# Expires CONTACT PERSON TITLE PHONE TITLE DATE **AUTHORIZED SIGNATURE**

Please return to: Division of Health Service Regulations Acute Care/CLIA Certification Section 2713 Mail Service Center Raleigh NC 27699-2713

Registration and Renewal Process for Providers of HIV Testing, PAP Smear Screening & Mammography Screening

This is a registration process for identification of facilities in NC providing these services.

- A certificate is issued every two years.
- Certificates expire on December 31st.
- Certificates are printed and mailed to facilities.
- There is no fee at this time for this certificate.
- All are renewed at the same time regardless of application date.
- Initial applications received during the year will have the same expiration date for that certification period.
- Completed applications can be emailed to DHSR.CLIA@dhhs.nc.gov for your convenience. It is not necessary to send them in the mail.