

STATE OF NORTH CAROLINA

Mammography Screening Certification

Initial/Renewal Application

NC GS130A-148; 15A NCAC 20D and GS143B-165



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 (FOR OFFICE USE ONLY) DATE CERTIFICATE MAILED: _____

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
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AUTHORIZED SIGNATURE	TITLE	DATE
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Please return to:
Division of Health Service Regulations
Acute Care/CLIA
2713 Mail Service Center
Raleigh NC 27699-2713
Fax - 919-733-0176

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 along with appropriate letter.
- 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 also be faxed to 919-733-0176; it is not necessary to send them in the mail.