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\[\bigcup \text{PORTABLE GAUGES} \leftarrow \text{OTHER (Specify)} \infty \]							
REGISTERED AS USER OF PACKAGING (CERTIFICATES OF COMPLIANCE NUMBERS)							
8. CLIENT NAME, ADDRESS, CITY/COUNT	IY, STATE, ZIP CODE	9. ACTUAL F	PHYSICAL ADDRESS OF	WORK LOCATION	e n address o	r directions as possible.)	
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LIST ADDITIONAL WORK SITES ON SEPARATE SHEET(S) TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 9-16 ABOVE. 17. LIST RADIOACTIVE MATERIAL, WHICH WILL BE POSSESSED, USED, INSTALLED, SERVICED, OR TESTED							
(include description of type and quanti	ty of radioactive material, sealed s	ources, or devices to be u	sed.)			·	
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