

Joe Lombardo
Governor

Laura Rich,
Director



DEPARTMENT OF HUMAN SERVICES



NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH



Andrea R. Rivers,
MS
Administrator

Ihsan Azzam,
Ph.D., M.D.,
Chief Medical
Officer

Change of Address Form

Per NRS Chapter 653 and Adopted Regulation R079-19, a license holder shall notify the Division (Radiation Control Program) of any change in the mailing address of the license holder within 10 business days after such a change.

Name (as printed on license):		
Date of Birth (MM/DD/YYYY):	Last Four Digits of SSN or APIN:	
NEW Mailing Address:		
City:	State:	ZIP:
OLD Mailing Address:		
City:	State:	ZIP:
Personal Phone Number:	Work Phone Number:	
Personal Email Address:		
Signature:	Date (MM/DD/YYYY)	

You may either submit this notice either in writing, through the website, or via email.

Mail: Radiation Control Program
Division of Public and Behavioral Health
675 Fairview Dr. Suite 218
Carson City, NV 89701

Email: radiationcontrolprogram@health.nv.gov

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