



Medical Imaging & Radiation Therapy Program (MIRTP)  
P.O. Box 5469  
Santa Fe, NM 87502-5469  
Daniel Ortiz Telephone (505) 827-2559  
Stephen Sanchez Telephone (505) 699-2027  
rcb.MIRTP@env.nm.gov

**Additional or replacement of original certificates of licensure application.**

Please type all required fields. This form may be printed and completed manually, by legibly writing in your responses. Your original certificate(s) of licensure will be mailed to the address entered in Section 1. This form may also be submitted to make legal name changes. The MIRTP will use the exact spelling of your name as it appears on the certifying and registering organization used to obtain your NM medical imaging and radiation therapy license, so please make the legal name change with all certifying and registering organizations that pertain to you, prior to submitting this form for a legal name change.

Section 1 - General Information					
Application Date:				Last 4 digits of your SSN	
Name:					
Address:					
City:		State Abbreviation:		Zip Code:	
Home Phone:		Cell Phone:			
Email Address:					
Work Phone:		Birth Date:			

Section 2 - Active Certifying and Registering Credentialing Organizations (Enter all ID numbers that are applicable to you.)			
ARDMS ID#		ARRT ID#	
ARMRIT ID#			
CCI ID#		NMTCB ID#	

Completed application packets may be submitted to the Medical Imaging and Radiation Therapy Program (MIRTP) using 1 of the 3 methods listed below.

1. The preferred method is through email, which requires fees be paid electronically. Send all complete application packets to: rcb.MIRTP@env.nm.gov Additional detailed information for this option appears on pages 4 and 5.
2. Complete application packets may be sent by mail to the following mailing address:  
NMED-RCB-MIRTP, PO Box 5469, Santa Fe, NM 87502-5469. Please do not staple application form and do not tape checks or money orders to this application form. All fees paid by check or by money order must be made payable to "NMED", if not, they will be returned.
3. Complete application packets may be submitted in person by making an appointment. Walk-in applicants may not be processed without an appointment.

THE REMAINDER OF THE PAGE IS FOR MIRTP OFFICE USE ONLY – the MIRTP will complete the remainder of this page.

<b>MIRTP Registration number:</b>	<b>Electronic Payment due:</b>
<b>Additional license(s) issued:</b>	<b>Duplicate certificates requested:</b>
<b>Postmark/Email date:</b>	

### Section 3 - Fee Schedule:

Attention: If you submit your application packet by email, you will NOT be able to make your payment at the time that you email your complete application packet, you must wait until your emailed application packet:

1. Has been emailed to [rcb.MIRTP@env.nm.gov](mailto:rcb.MIRTP@env.nm.gov) and determined to be a complete application packet.
2. The MIRTP has created your invoice.
3. Until you are sent a separate email, which will include a link to make your electronic payment.

Complete the following fee schedule, so that the MIRTP may create the required invoice.

\$15.00 is the minimum fee amount due, which includes a \$10.00 application fee, the \$5.00 duplicate original certificate fee, and 1 original certificate of licensure.		Fee Amounts:
		\$ 15.00
\$5.00 is the fee amount for each additional original certificate of licensure. If more than one original certificate of licensure is being ordered, enter the quantity of additional original certificates that you are requesting in the following box, and then multiply that quantity by \$5.00, and enter the additional fee amount in the next box to the right of the quantity box. If you are ordering only 1 original certificate of licensure do not enter anything in the following two boxes.		\$
Enter the total fee amount due in the following box, which will be the sum of all the required fees you may have entered in the above fee amount fields.		\$

All Fees are non-refundable and non-transferrable.

If you submit your application packet by email, please make sure that you get a reply within 4 business days, excluding weekends and holidays, from the date you sent the email, confirming receipt of your application packet. After your application packet has been reviewed and approved by the MIRTP, a link to the payment portal will be emailed to the email address entered in Section 1, please verify the email address has been entered correctly and monitor your inbox, and junk mail folders.

### Section 4 - Applicant attestation of compliance to each of the following 6 items.

**Enter your initials in each of the following 6 boxes after reading and understanding each item:**

1. By entering my initials in the following box, I attest that I have read and understood the current version of 20.3.20 NMAC, the rules that pertain NM medical imaging or radiation therapy licensure. These rules are located on the New Mexico Environment Department web site or may be emailed to the applicant if requested by email.

<p>2. By entering my initials in the following box, I attest that I will send a scan or a picture of the front side of my current ARDMS, ARMRT, CCI and/or my current NMTCB wallet card. The MIRTP is aware that the ARRT no longer issues wallet cards, but verification of your ARRT credentials are available on the ARRT web site and must be submitted with the application form by attaching a PDF or image to the email that includes your application packets; or, included with application packets that are mailed. I will submit current verification of credentials from all certifying and registering organizations used to acquire my current medical imaging or radiation therapy license(s).</p>	
<p>3. By entering my initials in the following box, I attest that I am aware that I may be issued a new license type if I have become certified and registered in a modality that meets the requirements of one of the medical imaging or radiation therapy license types in New Mexico. This will be determined by reviewing the required supporting document(s) listed above. I am aware that any additional medical imaging or radiation therapy license(s) that are issued will be included in the duplicate certificate fee.</p>	
<p>4. By entering my initials in the following box, I attest that I am solely responsible for ensuring that I maintain a current NM medical imaging or radiation therapy license. I am aware that I must have an active and original certificate of licensure at each place of employment in NM, prior to performing any medical imaging or radiation therapy procedures. Photocopying or other reproduction of a certificate of licensure is prohibited. I am aware that I must remain active and in good standing with all registering and certifying credentialing organizations that were used to obtain my NM medical imaging or radiation therapy license(s), which meets your CEU renewal requirements, which are required to renew your NM license(s).</p>	
<p>5. By entering my initials in the following box, I agree to notify the MIRTP with any changes to my active status, which may include, but is not limited to any disciplinary actions or probationary status, in any of the certifying and credentialing organizations used to renew my NM medical imaging or radiation therapy license(s).</p>	
<p>6. By entering my initials in the following box, I hereby certify that I am following all applicable judgments and orders for child support and am following all applicable subpoenas or warrants related to paternity or child support proceedings and all other 20.3.20 NMAC rules, and that all information provided is true to the best of my knowledge.</p>	

The MIRTP will not process your request if any of the 6 boxes, located above, do not have your initials entered in each of the above boxes, because the above attestations take the place of a signature.

The MIRTP requests that you wait until 4 business days have passed, from the date you emailed your application packet, before emailing or calling the MIRTP to inquire if your emailed application packets has been received or processed.

Please do not include the remaining application pages (pages 4 – 5), if you submit your application packet by mail.

Process to submit complete application packets by email and paying fees electronically.

To clarify, submitting applications electronically, means that the completed application form and required supporting document(s) are sent by email, to [rcb.MIRTP@env.nm.gov](mailto:rcb.MIRTP@env.nm.gov)

It does not mean the applicant will be able to submit the application form and supporting document(s) directly from the MIRTP web page. Nor does it mean that you will be able to make your electronic payment from the MIRTP web page at the time your application is emailed.

Application forms available on the MIRTP web page are fillable and savable PDF application forms; however, they may not be submitted directly from the MIRTP web page, they must be attached to an email sent to [rcb.MIRTP@env.nm.gov](mailto:rcb.MIRTP@env.nm.gov)

Emails sent to the MIRTP that contain links or other file types that require registration or passwords to view the completed application packet will not be accepted or opened by the MIRTP.

The NMED electronic payment process may be a challenging and frustrating process, so please read the following summary of the New Mexico Environment Department electronic payment process. The electronic payment process may not be completed on the same day that the applicant has emailed their complete application packet, because of all the steps involved in the process. The following is a summary of the required steps involved in the electronic payment process:

1. Email complete application packets to [rcb.MIRTP@env.nm.gov](mailto:rcb.MIRTP@env.nm.gov) . Please make sure that you get an email reply within 4 business/weekdays, excluding weekends and holidays, from the date that email was sent.
2. If there is a problem with your emailed application packet, you should be sent an email within 4 business/weekday, excluding weekends and holidays, from the date that the MIRPT sent emailed confirmation of your received application packet. That email will mention what the problem is, and what action must be taken on your part to correct the problem, so that the process may continue.
3. If the emailed application packet is complete, an invoice will be created, and you will be sent a separate email letting you know that an invoice has been created. That email should be sent within 4 business/weekday, excluding weekends and holidays, from the date that the MIRTP sent emailed confirmation of your received application packet.
4. Before you can make your electronic payment, you must wait until you receive a separate email that contains a link to the NMED payment portal, where you may make your electronic payment. That separate email should be sent on the day your invoice was created, or the next business/weekday, excluding weekends and holidays, if the invoice was created after 4:00PM MST.
5. After you enter your payment information, and after it has been accepted by Wells Fargo, you should be sent a separate email which will contain your payment confirmation number. The MIRTP requests that you forward that email to the individual who is processing your application, please do not send images or screenshots of the payment confirmation, please only forward that email. This request is not a requirement, but it may help in the processing time that your original certificate(s) are processed, because the MIRTP will not have to wait until an internal payment report has been received by the MIRTP.

6. After your payment confirmation has been received by the MIRTP, your payment confirmation information should be recorded within 4 business/weekday, excluding weekends and holiday, from the date the MIRTP has received the internal payment confirmation report, which is sent from the Environment Department's Administrative Services Division.
7. After your payment has been recorded by the MIRTP, your original certificate(s) of licensure should be printed and prepared for mailing within 4 business/weekday, excluding weekends and holiday, from the date that the MIRTP recorded your payment confirmation information in the MIRTP database application. You should then be sent a separate email informing you of the date that your original certificate(s) were placed in the NMED internal mail room and when they may be taken to the post office.

Instructions to complete the Fee Schedule located in Section 3 of this form.

The minimum fee amount due with this application is \$15.00, which includes the \$5.00 duplicate original certificate of licensure fee and the \$10.00 application fee. The minimum payment amount due is \$15.00. The \$15.00 fee amount includes 1 original certificate of licensure.

NM rules state that original certificates of licensure must be displayed at each place of employment in NM prior to performing medical imaging or radiation therapy procedures. Copies from your original certificate of licensure do not meet this rule requirement. Having your name appear on the list of active NM medical imaging and radiation therapy professionals does not substitute or eliminate the requirement of having an original medical imaging or radiation therapy certificate of licensure at each place of NM employment prior to performing any medical imaging or radiation therapy procedures. Original certificates of licensure must be ordered from the MIRTP. The cost for each additional original certificate of licensure is \$5.00.

The following table is an example of a Fee Schedule that was created for an applicant who is ordering a total of 3 original certificates of licensure.

***Example***		Fee Schedule:	***Example***
			Fee Amounts:
\$15.00 is the minimum fee amount due, which includes a \$10.00 application fee, the \$5.00 duplicate original certificate fee, and 1 original certificate of licensure.			\$ 15.00
\$5.00 is the fee amount for each additional original certificate of licensure. If more than one original certificate of licensure is being ordered, enter the quantity of additional original certificates that you are requesting in the following box, and then multiply that quantity by \$5.00, and enter the additional fee amount in the next box to the right of the quantity box. If you are ordering only 1 original certificate of licensure do not enter anything in the following two boxes.	2		\$ 10.00
Enter the total fee amount due in the following box, which will be the sum of all the required fees you may have entered in the above Fee Amount fields.			\$ 25.00