



# **New York State Department of Health**

## **Clinical Laboratory Permit**

is hereby authorized to perform laboratory procedures at the above location in the following categories in accordance with Article 5, Title V, Section 575 of the Public Health Law. This permit shall become void upon a change in the director, owner or location of the laboratory, and an application for a new permit shall be made to the Department.

**Subject to Revocation**  
**Permit Not Transferable**

**POST CONSPICUOUSLY**