

APA-2  
11/96

**Board of Dental Examiners of Alabama**

NOTICE OF INTENDED ACTION

AGENCY NAME: Board of Dental Examiners of Alabama

RULE NO. & TITLE: 270-X-4.09 Criteria and Fees for Mobile Dental Facilities  
or Portable Dental Operations

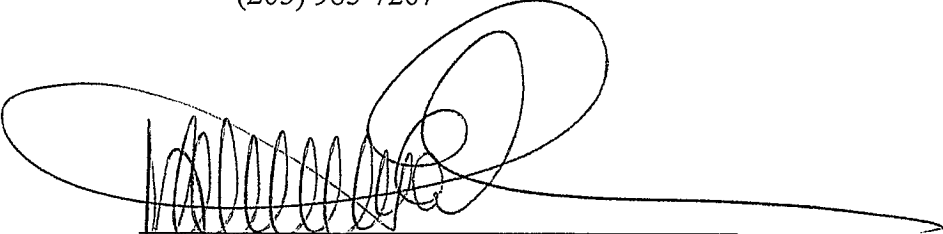
INTENDED ACTION: Amended

SUBSTANCE OF PROPOSED ACTION: The Board proposes to change ~. Seven  
Hundred Fifty and NO/100 Dollars (\$750.00). " to read ~. an amount to be determined  
by the Board." The Board also proposes to change ~. an additional Seven Hundred Fifty  
and NO/100 Dollars (\$750.00). " to read ~. an additional amount to be determined by  
the Board. ."

TIME, PLACE, MANNER OF PRESENTING VIEWS: Written comments will be  
received by the Board until 4:30 p.m. on Thursday, July 3, 2010. Comments should be  
directed to Dr. Donna Dixon, General Counsel, at 5346 Stadium Trace Parkway, Suite  
112, Hoover, AL 35244, or via electronic mail at [Dennis@dentalboard.org](mailto:Dennis@dentalboard.org) or via  
telephone at 205-985-7267.

FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE:  
Thursday, July 5, 2010

CONTACT PERSON AT AGENCY: Dr. Donna Dixon, Esq.  
*General Counsel*  
5346 Stadium Trace Pky Ste 112  
Hoover, AL 35244  
(205) 985-7267



Keith E. Warren, *Executive Director*  
Board of Dental Examiners of Alabama