



APPLICATION FOR A NEW RADIOACTIVE MATERIAL LICENSE AUTHORIZING THE USE OF PORTABLE GAUGES

The Virginia Department of Health (VDH) is requesting disclosure of information. Completion of this form is required to obtain a Radioactive Material License. Failure to provide all requested information may result in denial or delay of a Radioactive Material License.

Instructions – Complete all items. Refer to VAREG ‘Guidance for Portable Gauges’ for additional information. Use supplementary sheets if necessary. Retain a copy and submit the original of the entire application to: Virginia Department of Health, Radioactive Materials Program, 109 Governor Street, Room 730, Richmond, VA 23219.

APPLICATION TYPE

Item 1 Type of Application (Check box)

☐ New License

CONTACT INFORMATION

Item 2 Applicant - Name and Mailing Address

Item 3 Contact Person

Name:

E-mail:

Applicant - Telephone Number (Include area code)

() - x

Telephone Number (Include area code)

() - x

LOCATION OF RADIOACTIVE MATERIAL

Item 4 List all address(es) where radioactive material(s) will be used or possessed. Attach additional pages if necessary.

	Address (Do not use Post Office box)	Telephone Number (Include area code)
<input type="checkbox"/> Used <input type="checkbox"/> Stored <input type="checkbox"/> Used/Stored	, -	() - x
<input type="checkbox"/> Used <input type="checkbox"/> Stored <input type="checkbox"/> Used/Stored	, -	() - x
<input type="checkbox"/> Used <input type="checkbox"/> Stored <input type="checkbox"/> Used/Stored	, -	() - x

Are portable gauge devices used at temporary jobsites?: ☐ Yes ☐ No

Are portable gauge devices stored at temporary jobsites?: ☐ Yes ☐ No

If yes, check the following boxes:

- ☐ We will perform and maintain documentation of radiation surveys to ensure that dose levels are less than 2 mrem in any one hour and 100 mrem/yr at all temporary job site storage locations.
- ☐ We will store the device at the temporary job site in a locked room, trailer or other secure location to prevent unauthorized removal of the device.
- ☐ We will minimize exposures for occupational and non-occupational workers when selecting storage location.

RADIATION SAFETY OFFICER

Item 5 Radiation Safety Officer (RSO) (check one box)

RSO Name:

Tel (Include area code): () - x

E-mail:

- ☐ Before obtaining radioactive material, the proposed RSO will have successfully completed one of the training courses described in the Criteria section titled "Radiation Safety Officer" in VAREG 'Guidance for Portable Gauges'.

OR

- ☐ Alternative information demonstrating that the proposed RSO is qualified by training and experience is attached.

AUTHORIZED USERS

Item 6 Training for Authorized Users (check one box)

- ☐ Before using radioactive material, authorized users will have successfully completed one of the training courses described in the Criteria section titled "Training for Individuals Working In or Frequenting Restricted Areas" in VAREG 'Guidance for Portable Gauges.'

NOTE: If using an in-house training program, submit copy of course content, sample course examination and course instructor qualifications.

OR

- ☐ Documentation of the training and experience for the proposed authorized user(s) is attached.

NOTE: These individuals will be listed on the license as authorized users. An amendment request is required to add new authorized users.

RADIOACTIVE MATERIAL

Item 7 Radioactive Material (Attach additional pages if necessary)

Element and mass number	Maximum activity requested
Device manufacturer and model number	Intended Use

FACILITIES AND EQUIPMENT

Item 8 Facilities And Equipment (Check box and attach diagram.)

- ☐ Diagrams of radioactive material storage area(s) are attached.

RADIATION SAFETY PROGRAM

Item 9 Radiation Safety Program

Item 9.1 Audit Program

The applicant is not required to submit its audit program to the agency for review during the licensing phase. This matter will be examined during an inspection.

Item 9.2 Termination Of Activities (Check box)

- ☐ We will notify VDH, in writing, within 60 days of the decision to permanently cease radioactive material use. (12VAC5-481-510)

Item 9.3 Instruments (Check one box)

- ☐ We will possess and use a radiation survey meter that meets the Criteria in the section titled "Instruments" in VAREG 'Guidance for Portable Gauges.'

OR

- ☐ We will submit an alternative procedure for determining source integrity after an incident involving the portable gauge(s). (Procedures are attached)

Item 9.4 Material Receipt And Accountability (Check one box)

- ☐ We will conduct physical inventories, at intervals not to exceed 6 months, to account for all portable gauges received and possessed under the license.

OR

- ☐ We will submit a description of the frequency and procedures for ensuring that no gauge has been lost, stolen or misplaced. (Procedures are attached)

Item 9.5 Occupational Dosimetry (Check one box)

- ☐ We will provide dosimetry processed and evaluated by a NVLAP-approved processor that is exchanged at a frequency recommended by the processor.

OR

- ☐ We will maintain, for inspection by VDH, documentation demonstrating that unmonitored individuals are not likely to receive, in one year, a radiation dose in excess of 10 percent of the allowable limits in 12VAC5-481-640. (See Appendix I in VAREG 'Guidance for Portable Gauges.')

Item 9.6 Public Dose

No response is required in this license application; however, the licensee's evaluation of public dose will be examined during an inspection.

Item 9.7 Operating And Emergency Procedures (Check one box)

- ☐ We will implement and maintain the operating and emergency procedures in Appendix H of VAREG 'Guidance for Portable Gauges' and provide copies of these procedures to all gauge users and at each job site.

OR

- ☐ Operating and emergency procedures will be implemented, maintained and provided to all gauge users at each job site and will meet criteria in the section titled "Radiation Safety Program – Operating and Emergency Procedures" in VAREG 'Guidance for Portable Gauges.' (Procedures are attached)

Item 9.8 Leak Tests (Check one box)

- ☐ Leak tests analysis will be performed by an organization authorized by VDH, the NRC or another Agreement State to provide leak testing services to other licensees; or by using a leak test kit supplied by an organization licensed by VDH, the NRC or another Agreement State to provide leak test kits to other licensees according to kit supplier's instructions.

List Name and License number of organization authorized to perform or analyze leak test. (Specify whether VDH, NRC, or another Agreement State)

Organization Name _____

License Number _____

Issuing Agency _____

NOTE: An alternate organization may be used to perform or analyze leak test, without amending the license, provided the organization is specifically authorized by VDH, the NRC, or another Agreement State.

OR

- ☐ We will perform leak testing and sample analysis and will follow the model procedures in Appendix J of VAREG 'Guidance for Portable Gauges.'

OR

- ☐ We will submit alternative procedures. (Procedures are attached)
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Item 9.9 Maintenance (Check one box for routine cleaning and lubrication and one for non-routine maintenance)

Routine cleaning and lubrication:

- ☐ We will implement and maintain procedures for routine maintenance of our gauge(s) according to each manufacturer's recommendations and instructions.

OR

- ☐ Alternative procedures are attached.

Non-routine maintenance:

- ☐ We will send the gauge(s) to the manufacturer or other person authorized by VDH, the NRC or another Agreement State to perform non-routine maintenance or repair operations that require the removal of the source or source rod from the gauge(s).

OR

- ☐ We will provide the information listed in Appendix G of VAREG 'Guidance for Portable Gauges' to support a request to perform this work "in house."

Item 9.10 Transportation

No response is needed during the license process; this issue will be reviewed during inspection.

Item 9.11 Waste Management - Gauge Disposal And Transfer (Check box)

- ☐ We will transfer the gauge to the manufacturer for disposal or transfer the device to a specific licensee, authorized to receive radioactive material.

LICENSE FEE

Item 10 License Fees (Refer to 12VAC5-490.)

Application Fee Enclosed:

- ☐ Yes Amount Enclosed \$

CERTIFICATION (To be signed by an individual authorized to make binding commitments on behalf of the applicant.)

Item 11

I hereby certify that this application was prepared in conformance with 12VAC5-481 'Virginia Radiation Protection Regulations' and that all information contained herein, including any supplements attached hereto, is true and correct to the best of my knowledge and belief.

SIGNATURE - Applicant Or Authorized Individual

Date signed

Print Name and Title of above signatory