ILLINOIS EMERGENCY MANAGEMENT AGENCY
DIVISION OF NUCLEAR SAFETY
1035 OUTER PARK DRIVE
SPRINGFIELD, ILLINOIS 62704

APPLICATION FOR A RADIOACTIVE MATERIAL LICENSE AUTHORIZING THE USE OF SEALED SOURCES IN FIXED GAUGES

Complete all items if this is an initial application or renewal of a license. Use supplementary sheets where necessary. Retain one copy and submit the original and one copy of the entire application to the Illinois Emergency Management Agency.

This State Agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under 32 Ill. Adm. Code 330. Disclosure of this information is required. Failure to provide any information may result in denial of a radioactive material license. This form has been approved by the State Forms Management Center.

ITEM 1. Type of application (Check one)
☐ NEW LICENSE ☐ RENEWAL ☐ AMENDMENT Radioactive Material License #_____

ITEM 2. Applicant's Name and Mailing Address (Applicant must be the legal entity or individual responsible for the license.)	**ITEM 3. Person to Contact Regarding This Application:**
Phone #:	Phone #:
Fax #:	Fax #:
E-mail:	E-mail:

ITEM 4. Address(es) Where Radioactive Material Will Be Used ☐ **Stored** ☐ **Used and Stored** ☐	
Phone #:	Phone #:

ITEM 5. Individual(s) Who Will Use Radioactive Material (Attach evidence of appropriate training and experience). List names and requested uses of material. (Check all that apply)

☐ All individuals working in the vicinity of the fixed gauge shall complete a 1 to 2-hour orientation course. Training records shall be maintained for Agency inspection.

☐ All authorized users for this license shall complete the manufacturer's 8-hour training course or an equivalent, Agency approved training course prior to unsupervised use of radioactive material. Evidence of training and experience for at least one authorized user is attached. Training records for all authorized users shall be maintained for Agency inspection.
Description of training program covering items requested in Item 11 of Instructional Set 64.0 dated February 1997 is attached. See Attachment _____ of this application.

☐ All authorized users who will perform installation, initial radiation monitoring, relocation, removal, maintenance or repair shall complete the manufacturer's 40-hour training course or an equivalent, Agency approved training course prior to unsupervised use of radioactive material. Evidence of training and experience for at least one authorized user is attached. Training records for all authorized users shall be maintained for Agency inspection. Description of training program covering items requested in Item 11 of Instructional Set 64.0 dated February 1997 is attached. See Attachment _____ of this application.

☐ The authorized users for this license and evidence of their training and experience relative to radioactive material use are specified in an attachment to this application. See Attachment _____ of this application.

ITEM 6. Radiation Safety Officer (RSO) (Attach evidence of training and experience)

Name: _____ Telephone #: _____

☐ Duties are as stated in Appendix C of Instructional Set 64.0 dated February 1997.

☐ Duties and responsibilities are attached. See Attachment _____ of this application

☐ We request authorization for the delegation of duties as stated in Appendix C.1 of Instructional Set 64.0 dated February 1997.

ITEM 7. Radioactive Material

Element and Mass Number		
Chemical and Physical Form	Sealed Source	Sealed Source
Source Manufacturer and Model		
Maximum Activity per Source		
Number of Sources Requested		
Device Manufacturer and Model		
Intended Use		

ITEM 8. Instrumentation (Check one)

☐ Completed Exhibit B from Instructional Set 64.0 dated February 1997 or equivalent is attached. See Attachment _____ of this application.

☐ Not applicable.

ITEM 9. Instrument Calibration and Operability Checks (Check one)

☐ Radiation monitoring instruments will be calibrated by a service company authorized to perform such services. We will maintain a copy of the company's license authorizing such services.

☐ We will calibrate radiation monitoring instruments in accordance with the attached procedures, which contain all of the information requested in Appendix E of Instructional Set 64.0 dated February 1997. See Attachment _____ of this application.

☐ Not applicable.

ITEM 10. Facilities and Equipment (Check all that apply)

☐ Diagrams of radioactive material use and storage area are attached. See Attachment _____ of this application.

☐ Letter from the facility/property owner is attached. See Attachment _____ of this application.

☐ The applicant/licensee owns the property/facility.

ITEM 11. Personnel Training Program

☐ Description of training program, including an outline for each level of training and the frequency, form, duration and the means used to evaluate the training is attached. See Attachment _____ of this application.

ITEM 12. Procedure for Ordering and Receiving Radioactive Material

☐ Procedure for ordering and receiving radioactive material, including a procedure for receipt of radioactive material during off-duty hours is attached. See Attachment _____ of this application.

☐ Procedure for ordering and receiving radioactive material is attached. Packages **will not** be received after normal working hours. See Attachment _____ of this application.

ITEM 13. Procedure for Safely Opening Radioactive Material Packages (Check one)

☐ We will use the procedure identified in Appendix I of Instructional Set 64.0 dated February 1997.

☐ Procedure for safely opening radioactive material packages is attached. Packages **will not** be received after normal working hours. See Attachment _____ of this application.

ITEM 14. General Rules for the Safe Use of Radioactive Material (Check all that apply)

☐ We will use the procedure identified in Appendix J (for items a.- j.) of Item 14 of Instructional Set 64.0 dated February 1997.

☐ General safety instructions are attached. See Attachment _____ of this application.

☐ We request authorization to perform procedures listed in Items k., l. and m. of Item 14 of Instructional Set 64.0 dated February 1997. Procedures, which contain the information listed in Appendix J.1. are attached. See Attachment _____ of this application.

☐ Items k., l., and m. of Item 14 of Instructional Set 64.0 dated February 1997 will be performed by a commercial service company authorized by the Agency, the U.S.N.R.C., an Agreement State or a Licensing State to perform those services. We will maintain a copy of the commercial service company's license authorizing them to perform such services.

☐ We will use the physical inventory, inspection and monitoring form identified in Appendix K of Instructional Set 64.0 dated February 1997 for device accountability and the physical inventory/inspection performed at frequencies not to exceed six months.

☐ Forms for device accountability and the physical inventory/inspection performed at frequencies not to exceed six months are attached. See Attachment _____ of this application.

☐ We will use the physical inventory, inspection and monitoring form identified in Appendix K of Instructional Set 64.0 dated February 1997 for monitoring performed in accordance with procedures described for Items k., l. and m. of this part.

☐ Form(s) for monitoring performed during procedures described for Items k., l. and m. of this part are attached. See Attachment _____ of this application.

ITEM 15. Emergency Procedure

☐ We will use the procedure identified in Appendix L of Instructional Set 64.0 dated February 1997.

☐ Emergency procedure is attached. See Attachment _____ of this application.

ITEM 16. Monitoring Procedure (Check one)

☐ Area/contamination monitoring procedures are attached. See Attachment _____ of this application.

☐ Not applicable.

ITEM 17. Transfer or Waste Disposal (Check all that apply)

☐ Disposal methods are attached. See Attachment _____ of this application.

☐ Fixed gauge and source will be returned to the manufacturer or other specifically licensed firm or low-level radioactive waste disposal company for transfer or disposal.

ITEM 18. Testing Sealed Sources for Leakage and/or Contamination (leak/wipe tests) (Check one)

☐ We will use a commercial service to perform analysis of leakage and/or contamination samples. We will maintain a copy of the commercial service company's license authorizing such services.

☐ We will perform our own sample analysis for source leakage and/or contamination. Procedure is attached. See Attachment _____ of this application.

ITEM 19. Personnel Monitoring (Check all that apply)

TYPE	EXCHANGE FREQUENCY		FILM	TLD	OSL
☐ Whole body	☐ Monthly	☐ Quarterly	☐	☐	☐
☐ Extremity	☐ Monthly	☐ Quarterly		☐	☐

☐ Direct reading dosimeters will be used and calibrated in accordance with Appendix N of Instructional Set 64.0 dated February 1997.

☐ Direct reading dosimeter use and calibration procedures are attached. See Attachment _____ of this application.

☐ We will not perform any fixed gauge/source installation, relocation, removal, repair or maintenance. Personnel monitoring is not applicable.

ITEM 20. License Fees (Refer to 32 Ill. Adm. Code 331)

Please do not submit your fee payment. New applicants will be billed a prorated fee for the portion of the billing year remaining from the date the application is received. Licensees adding sites or changing fee categories will be billed when the license is amended. Existing licensees and applicants are also subject to annual bills as specified in 32 Ill. Adm. Code 331.

Fee Category:_____

ITEM 21. Financial Assurance

The applicant must satisfy applicable financial assurance requirements as described in 32 Ill. Adm. Code 326.

NEW APPLICANT (Check one)

☐ Exempt ☐ $25,000 arrangement will be provided at a later date ☐ Reclamation plan/cost estimate attached

RENEWAL OR AMENDMENT (Check one)

☐ Exempt ☐ Existing document reviewed – no changes necessary ☐ Limiting condition applies

☐ Updated reclamation plan/cost estimate attached

ITEM 22. Certification

EACH APPLICANT MUST COMPLETE SECTION A:

A. I have reviewed the above items and hereby certify that my radiation protection program meets the current 32 Ill. Adm. Code, radioactive materials license with active amendments, operating procedures and ALARA Program, and that all information contained herein, including any supplements attached hereto, is true and correct to the best of my knowledge and belief.

SIGNATURE:_____ DATE:_____

NAME:_____ TITLE:_____

(Print or Type)

COMPLETE THIS SECTION IF THE APPLICANT IS AN INDIVIDUAL:

B. If you are applying as an individual, rather than as a corporation or other legal entity, you must provide the following information in order to process your application:

Have you defaulted on an educational loan guaranteed by the Illinois Student Assistance Commission? Yes ☐ No ☐

I certify, under penalty of perjury, that I am not more than 30 days delinquent in complying with a child support order. Failure to certify may result in a denial of the license and making a false statement may subject you to contempt of court. (5 ILCS 100/10-65)

I declare that all information either included with or appearing on this application is accurate and true to the best of my knowledge.

SIGNATURE:_____ DATE:_____

APPLICANT'S SOCIAL SECURITY NUMBER:_____