



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

(217) 785-9947 telephone
(217) 782-1328 telefacsimile

AUTHORIZING THE USE OF SEALED SOURCES IN PORTABLE DEVICES

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 all that apply) NEW LICENSE

RENEWAL of License Number _____ AMENDMENT to License Number _____

Portable Gauge Portable X-Ray Fluorescence Analyzer (XRF) Portable Gauge and Portable XRF

ITEM 2. Applicant's Name and Mailing Address
(Applicant must be the legal entity or individual responsible for the license.)

Phone #: _____

Fax #: _____

E-mail: _____

ITEM 3. Person to Contact Regarding This Application:

Phone #: _____

Fax #: _____

E-mail: _____

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

Telephone #: _____

Request for TEMPORARY JOB SITES (≤ 180 days during any consecutive twelve-month period): Yes No

The applicant owns the facility/property where radioactive material is stored/used. Yes No

The applicant does not own the property/facility where radioactive material is stored/used, but the owner has been notified in writing. A copy of the notice is attached. Yes No

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 authorized users for this license shall complete the manufacturer's training course or an equivalent, Agency-accepted 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 described in Item 5 of Instruction Set 65.0, Revision 2, dated December 2010 is attached.

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.

ITEM 6. Radiation Safety Officer (RSO) (Attach evidence of Training and Experience)

Name: _____

Phone #: _____

- Duties are stated in Appendix F of Instructional Set 65.0, Revision 2, dated December 2010.
- Duties and responsibilities are attached.
- We request authorization for the delegation of duties as stated in Appendix F.1 of Instructional Set 65.0, Revision 2, dated December 2010.

ITEM 7. Radioactive Material, Device and Use

Radionuclide/Device	Manufacturer and Model	Maximum Activity per Source	Number Requested	Use

ITEM 8. Instrumentation and Monitoring Procedures (Check one)

- Completed Exhibit B from Instructional Set 65.0, Revision 2, dated December 2010 or equivalent is attached.
- 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 information requested in Appendix H, Items 1.a. - i., of Instructional Set 65.0, dated December 2010.
- Not applicable.

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

- Diagrams of radioactive material use and storage areas are attached.

ITEM 11. Public Dose

- Public dose calculations are attached if > 2 gauges or > 10 XRF devices are requested to be possessed within the same storage/use location.
- Not applicable.

ITEM 12. Procedures for Ordering and Receiving Radioactive Material and Opening Radioactive Material Packages (Check one)

- We will use the procedure identified in Appendix K of Instructional Set 65.0, Revision 2, dated December 2010.
- Procedure for ordering, receiving and safely opening packages containing radioactive material is attached. Packages will not be received after normal working hours.

ITEM 13. General Rules for the Safe Use of Radioactive Material and Security Requirements (Check all that apply)

- We will use the procedure identified in Appendix L of Instructional Set 65.0, Revision 2, dated December 2010, not including

maintenance/repair involving dismantling of shielding or shutter device or removal of sources or source holders.

- General safety instructions are attached.
- We request authorization to perform maintenance/repair involving dismantling of shielding or shutter device or removal of sources or source holders. Procedures are attached.
- We request authorization to perform maintenance procedures, which are attached.
- We will use the utilization log for device accountability and the six-month physical inventory identified in Appendix M of Instructional Set 65.0, Revision 2, dated December 2010.
- A utilization log for device accountability and the six-month physical inventory is attached.

ITEM 14. Emergency Procedures (Check all that apply)

- Emergency contact information is provided, including for other than normal working hours.
- We will use the procedure identified in Appendix N (for Items a-e of Item 14) of Instructional Set 65.0, dated December 2010.
- Emergency Procedure for Items a-e of Item 14 is attached.
- We request authorization for use of portable gauging devices requiring lowering of the sealed source into the ground more than three feet. Emergency procedure for stuck source recovery is attached.
- Emergency Procedure for stuck source recovery is not applicable.

ITEM 15. Portable Device Transfer and Waste Disposal (Check all that apply)

- Portable device and source transfer/waste disposal will be in accordance with 32 Ill. Adm. Code 340.1010. The licensee will obtain a copy of the transferee's license prior to transfer of the device.

ITEM 16. Testing Sealed Sources for Leakage and/or Contamination (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's license authorizing such services.
- We will perform our own sample analysis for source leakage and/or contamination using the procedures identified in Appendix O of Instructional Set 65.0 dated December 2010.
- We will perform our own sample analysis for source leakage and/or contamination. Procedure is attached.

ITEM 17. Personnel Monitoring (Check all that apply)

TYPE	EXCHANGE FREQUENCY	FILM	TLD	OSL
<input type="checkbox"/> Whole body	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Extremity	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Not applicable. Dose calculation is attached.				

ITEM 18. 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 19. 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 20. 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)

APPLICANT'S Federal Employer Identification Number (FEIN): _____

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: _____