

# STATE OF MAINE

## APPLICATION FOR A RADIOACTIVE MATERIAL LICENSE FOR PORTABLE GAUGE USE

**INSTRUCTIONS:** *This application complies with the license requirements of Section C of the State of Maine Rules Relating to Radiation Protection (SMRRRP). Complete items 1 through 12. Supplemental sheets may be needed for items 5 through 11. Mail the completed application to: Radiation Control Program, 11 State House Station, Augusta, Maine, 04333. Telephone: (207) 287-5676. Facsimile: (207) 287-3059. E-Mail: radiation.dhhs@maine.gov*

The Department of Health and Human Services (DHHS) does not discriminate on the basis of disability, race, color, creed, gender, age, or national origin, in admission to, access to or operations of its programs, services, or activities or its hiring or employment practices. This notice is provided as required by Title II of the Americans with Disabilities Act of 1990 and in accordance with the Civil Rights Acts of 1964 as amended, Section 504 of the Rehabilitation Act of 1973 as amended, the Age Discrimination Act of 1975, Title IX of the Education Amendments of 1972 and the Maine Human Rights Act. Questions, concerns, complaints, or requests for additional information regarding the ADA may be forwarded to the DHHS' ADA Compliance/EEO Coordinator, State House Station #11, Augusta, Maine 04333, 207-287-4289 (V) or 207-287 3488 (V), TTY: 800-606-0215. Individuals who need auxiliary aids for effective communication in programs and services of DHHS are invited to make their needs and preferences known to the ADA Compliance/EEO Coordinator. This notice is available in alternate formats, upon request.

### 1. THIS IS AN APPLICATION FOR (check one)

<input type="checkbox"/>	NEW LICENSE	Office Use Only
<input type="checkbox"/>	RENEWAL of license number >	
<input type="checkbox"/>	AMENDMENT of license number >	

### 2. NAME AND MAILING ADDRESS OF APPLICANT

### 3. ADDRESS(ES) WHERE MATERIAL BE WILL USED AND/OR STORED.

PHONE:	PHONE

### 4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION

NAME:

PHONE:

ADDRESS: (If different from #2.)

E-Mail:

**For items 5 through 11, the requested information may be submitted on standard size paper. Answer all items. For any that do not apply, answer by giving the item number with "not applicable" after it.**

**5. RADIOACTIVE MATERIAL FOR UNSEALED AND/OR SEALED SOURCES and**

**6. PURPOSE AND USE**

Provide the following information; element and mass number for each, chemical and/or physical form, and maximum amount of possession at any one time. NOTE: for sealed sources include manufacturer, model number, and maximum activity of the source. (include calibration date if applicable). Description for which each source will be used. For sealed source devices and/or storage containers include manufacturer, model number, and distributor for each in possession.

Radionuclide	Form or Manufacturer /Model No.	Maximum Quantity	Purpose of Use
		Ci Bq	
		Ci Bq	
		Ci Bq	
		Ci Bq	
		Ci Bq	

*An **Emergency Plan** must be provided if it is required (C.7.G).*

*If Financial Assurance is required then **Evidence of Financial Assurance must be provided***

**7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM - RADIATION SAFETY OFFICER:** Include training (portable gauge manufacturer's course and/or course that meets the criteria described in NUREG-1556, Vol. 1) and experience. Form HHE851 or equivalent along with copy of certificates included with application.

Name:

Telephone:

Address:

Fax:

E-mail:

We will ensure that the RSO is authorized to stop unsafe operation; and has sufficient time to perform radiation safety duties and responsibilities.
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**8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS:** On a separate sheet, list the names of all individuals who will use or directly supervise use of the radioactive material(s) listed in 5 above. Complete Form HHE851 for each individual and include copies of training certificates

**8.1 Initial Training:** Must be completed before gauge use.

Complete portable gauge manufacturer's course;
<b>OR</b> Submit alternative course that meets the criteria of NUREG-1556, Vol. 1.

**8.2 Refresher Training:**

We will provide annual refresher training.
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**9. FACILITIES AND EQUIPMENT:** Describe your facility where the source will be used and/or stored.

Provide a description and diagram of facility and storage locations for each address listed in item 3.
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**10. RADIATION SAFETY PROGRAM:** Describe your Radiation Safety Program.

**10.1 Audit Program:**

Management will conduct an annual audit of the Radiation Safety Program meeting the criteria of NUREG-1556, Vol. 1 and maintain the records for three years.
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**10.2 Termination of Activities:**

We will notify, in writing, within 60 days, when principal activities have not been conducted for a period of 24 months or a decision is made to permanently cease licensed activities.
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**10.3 Instruments:**

We will either possess and use, or have access to and use, a radiation survey meter at each job site that meets the criteria of NUREG-1556, Vol. 1, in the event of an incident;
<b>OR</b> Submit a description of an alternate procedure for determining source integrity after an incident involving the gauge.

**10.4 Material Receipt and Accountability:**

Physical inventories will be conducted at intervals not to exceed 6 months, to account for all sealed sources and devices received and possessed under the license;
<b>OR</b> Submit a description of the frequency and procedures for ensuring that no gauge has been lost, stolen, or misplaced and that, if the licensee possesses gauges exceeding threshold amounts the licensee complies with financial assurance requirements in C.8.F.

**10.5 Occupational Dosimetry:**

We will maintain documentation demonstrating that unmonitored individuals are unlikely to receive >10% of the allowable limits of Part D;
<b>OR</b> We will provide dosimetry processed and evaluated by a NVLAP-approved processor that is exchanged at a frequency recommended by the processor.

### 10.6 Public Dose:

We will ensure that licensed gauges will be used, transported, and stored in such a way that members of the public will not receive more than 1 millisievert (1mSv)[100 millirem (100 mrem)] in one year, and the dose in any unrestricted area will not exceed 0.02 millisievert (mSv) [2 mrem (millirem)] in any one hour, from licensed operations.
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Submit a description of procedures for securing gauge(s) in storage locations and at temporary job sites.
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Submit a description of procedures for maintaining constant surveillance when gauges are not in storage.
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### 10.7 Operating/Emergency Procedures:

We will implement and maintain the operating and emergency procedures in Appendix H to NUREG-1556, Vol. 1 .
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<b>OR</b> Operating and emergency procedures will be developed, implemented, maintained, and will meet the criteria of NUREG- 1556, Vol. 1.
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<b>OR</b> Submit alternate procedures.
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We will provide copies of these procedures to all gauge users and at each job site.
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### 10.8 Leak Tests:

Leak tests will be performed at six month intervals or consistent with the SSD registration sheet and leak tests will be performed by an organization authorized by NRC/AS to provide leak testing services to other licensees or using a leak test kit supplied by an organization authorized by NRC/AS to provide leak test kits to other licensees and according to the kit supplier's instructions;
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<b>OR</b> Provide the information in Appendix J to NUREG-1556, Vol. 1 supporting a request to perform leak testing and sample analysis.
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### 10.9 Routine Maintenance:

We will implement and maintain procedures for routine maintenance of our gauges according to manufacturer's recommendations and instructions;
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<b>OR</b> Submit alternative procedures.
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#### Non-routine Maintenance:

We will send the gauge to the manufacturer or other person authorized by NRC/AS to perform non-routine maintenance or repair operations that require detaching the source or source rod from the gauge;
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<b>OR</b> Submit the information listed in Appendix G to NUREG-1556, Vol. 1.
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### 10.10 Transportation:

We will develop, implement, and maintain safety programs for transport of radioactive material to ensure compliance with Agency/NRC/AS and DOT regulations
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Submit a description of procedures for securing gauge(s) in vehicles.
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**11. WASTE MANAGEMENT:**

We will dispose of radioactive material by transfer to manufacturer or other licensee authorized to possess material.
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**12. CERTIFICATION:** The applicant and any official executing this certificate on behalf of the applicant named in item 2, certify that this application is prepared in conformity with the State of Maine Rules Relating to Radiation Protection and that all information contained herein, including any supplements attached hereto, is true and correct to the best of our knowledge and belief.

DATE:

SIGNATURE OF APPLICANT:

TITLE:

TYPED/PRINTED NAME: