



**RADIOACTIVE MATERIAL LICENSE APPLICATION FOR
 PERSONS PROVIDING SERVICES FOR OTHER LICENSEES**

INSTRUCTIONS: Refer to OR-RH-11.3N for a detailed explanation of the requirements for completing this application. This application must be signed and dated. The form should be sent to CDPHE_hmradmat@state.co.us. An application fee in the amount specified in Part 12 of the *Colorado Rules and Regulations Pertaining to Radiation Control* must accompany an application for a new license. Email the completed application and attachments to CDPHE_hmradmat@state.co.us. Mail the fee payment (and the application and attachments, if they cannot be submitted electronically) to the Colorado Department of Public Health and Environment, Radiation Management Program, HMWMD-B2, 4300 Cherry Creek Drive South, Denver, Colorado 80246-1530. All radioactive materials licenses are issued in accordance with the general requirements contained in the State of Colorado *Rules and Regulations Pertaining to Radiation Control* and Title 25, Article 11, CRS.

1. Application for: New License: ____ (fee required) Renewal: ____ Amendment: ____
 Current License No: _____ Expiration Date: _____
2. Applicant Name: _____
3. Mailing Address: _____
 City: _____ State: _____ Zip: _____
4. Management Contact: _____ Phone: _____
 E-mail Address: _____ Fax: _____
5. Facility Address: _____
 City: _____ State: _____ Zip: _____
 Radioactive material stored at this location (yes/no): _____
6. Billing Contact (if different from above): _____
 Phone: _____ Address: _____
 City: _____ State: _____ Zip: _____
 E-mail Address: _____ Fax: _____
7. Radiation Safety Officer: _____ Phone: _____
 E-mail Address: _____ Fax: _____
 Attach documentation of the training and experience for the RSO.
8. Alternate Radiation Safety Officer(s): _____

_____ These individuals are available to assist authorized users in the absence of the designated RSO.
 Attach documentation of the training and experience for the alternate RSO(s).

9. **Authorized Users:** Attached is a list of all persons who will be authorized to provide the services requested in Item 12 below. For each authorized user indicate which services that individual will be performing. Include documentation of the training and experience for each person listed.

10. **Calibration and Reference Sources:** Attached is a list/written description of the radioactive sources to be possessed and used for reference and calibration. Specify the manufacturer, model number, radionuclide, maximum activity of each source and the total number of sources of each type.

11. **Radioactive Materials:** Attached is a list and written description of the radioactive material which may be received, used, handled, packaged, shipped, stored, possessed, transported, or disposed as part of the licensee's activities. This description includes the specific radionuclides, physical forms, and the maximum activity.

12. **Licensed Activities:** Attached are written operating procedures for each activity marked below. These procedures describe in detail how the applicant will perform activities/services for other licensees.
 - A. Radiation surveys using portable radiation detection equipment: _____
 - B. Wipe test for removable contamination: _____
 - C. Sealed source leak testing: _____
 - D. Analysis of wipe test and/or sealed source leak tests: _____
 - E. Technical assistance in the preparation of radioactive material shipping documents: _____
 - F. Technical assistance in the selection of packaging and labeling for radioactive material: _____
 - G. Packaging and labeling of "special form" radioactive material for shipment / disposal: _____
 - H. Packaging and labeling of "normal form" radioactive material for shipment / disposal: _____
 - I. Transporting radioactive material: _____
 - J. Temporary storage of radioactive material: _____
 - K. Facility decommissioning / clean-up: _____
 - L. Accident response / spill clean-up: _____
 - M. Calibration of survey instruments: _____
 - N. Installation, relocation, and removal of gauges/equipment: _____
 - O. Providing radiation safety training involving the use of radioactive materials: _____
 - P. Facility design and/or shielding evaluations: _____
 - Q. Dose evaluations: _____
 - R. Radionuclide / Isotope identification: _____
 - S. Air sampling for radionuclides: _____
 - T. Water / soil sampling for radionuclides: _____
 - U. Sampling bulk liquids or bulk solids for radionuclides: _____
 - V. Obtaining waste disposal permits: _____
 - W. Other (specify): _____
 - X. Other (specify): _____

13. **Public Dose Limits:** Attached are calculations and/or survey results to demonstrate compliance with dose limits for members of the public at all storage and use locations identified in Item 5. Include calculations of average air and water effluent levels for radionuclides, if applicable. Provide written procedures for complying with public dose limits while performing services for other licensees.

14. **Radiation Detection/Measurement Equipment:** Attached is a listing of the survey instruments and other radiation detection/measurement equipment which are possessed and operated by the applicant. All instruments and equipment used for quantitative radiation measurements shall be calibrated prior to first use and at intervals not to exceed 12 months. Calibrations of survey instruments will be performed by:

Name: _____

Address: _____

Radioactive materials License Number: _____ Phone: _____

or by other persons specifically licensed to perform survey instrument calibrations.

15. **Radiation Protection Program:** Attached is a written description of the applicant's radiation protection program, including provisions for conducting an annual ALARA review in accordance with the requirements of RH 4.5 of the Regulations.

16. **Personnel Dose Monitoring:** Attached are written procedures for monitoring the occupational doses of workers. Dose monitoring for workers shall include a bioassay program as needed to demonstrate compliance with RH 4.7 of the Regulations. Each occupationally exposed person shall be supplied with and required to use personnel dosimeters which are capable of detecting beta, gamma, and neutron radiation. Personnel dosimeters shall be obtained only from suppliers who are NVLAP approved. The dosimeters shall be exchanged no less frequently than is recommended by the supplier for the specific type of dosimeter. The following identifies our current NVLAP approved dosimetry supplier and our account number.

Name: _____

Address: _____ Phone: _____

Applicant's Account Number: _____

17. **Radioactive Waste Disposal:** Attached are written procedures for the disposal of radioactive waste. All radioactive waste shall be disposed of by transfer to an authorized recipient in accordance with the requirements of RH 4.38 of the Regulations. Copies of radioactive waste / shipment manifests shall be maintained for inspection by the Department. The following licensees have been contacted and their radioactive waste disposal services reviewed. These companies can provide the needed waste disposal services for the activities currently proposed in this application.

Name: _____ License No. _____

Address: _____ Phone Number: _____

Name: _____ License No. _____

Address: _____ Phone Number: _____

Name: _____ License No. _____

Address: _____ Phone Number: _____

18. **Financial Warranty:** The financial assurance requirements in RH 3.9.5 of the Regulations have been reviewed and are addressed as follows:

- _____ Attached is a detailed decommissioning cost estimate. An acceptable warranty will be established upon Department approval of a value for the financial warranty.
- _____ The applicant believes that no financial warranty is required because the total quantity and form of radioactive materials to be authorized is below the limits specified in RH 3.9.5.3.5.

COMMITMENTS:

- C.1 All uses of radioactive materials will be in accordance with the provisions of the State of Colorado *Rules and Regulations Pertaining to Radiation Control*, Part 4, “Standards for Protection Against Radiation”, Part 10, “Notices, Instructions and Reports to Workers: Inspections”, and Part 17, “Transportation of Radioactive Material”.
- C.2 A copy of all applicable written operating procedures shall be available at each temporary job site.
- C.3 All occupationally exposed persons shall be familiar with and instructed to observe all applicable requirements of the State of Colorado *Rules and Regulations Pertaining to Radiation Control*, the Radioactive Materials License, and the licensee's operating procedures.
- C.4 Radioactive material shall only be used or handled by individuals who are designated as users on the radioactive materials license.
- C.5 Radioactive material will be handled, stored, and used in a manner that will preclude access to and/or use by unauthorized personnel.
- C.6 Documentation and records required by the State of Colorado *Rules and Regulations Pertaining to Radiation Control* will be maintained for inspection by the Department. This will include copies of written procedures, personnel dose records, leak test results, the results of annual ALARA program reviews, documentation of user training, and the results of surveys and/or calculations to demonstrate compliance with public dose limits.
- C.7 The applicant named in Item 2 acknowledges its responsibility for control and disposal of all radioactive materials possessed under a radioactive materials license issued by the Department. The applicant further acknowledges that the requirements of the license and the Regulations will remain in effect until termination of the license by the Department, even if the license has expired.

CERTIFICATE

The applicant and each official executing this certificate on behalf of the applicant named in Item 2, certify that all information contained herein, including any supplements attached hereto, is true and correct to the best of our knowledge and belief. The applicant agrees to abide by all commitments herein, and the requirements of the radioactive materials license and the State of Colorado *Rules and Regulations Pertaining to Radiation Control*.

Management Signature: _____ Date: _____

Typed or Printed Name: _____

Title of Official: _____

Radiation Safety Officer Signature: _____ Date: _____

Typed or Printed Name: _____