IEMA-OHS OFFICE OF NUCLEAR SAFETY
1035 OUTER PARK DRIVE
SPRINGFIELD, ILLINOIS 62704

Application Form for a Portable Gauge Radioactive Material License

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 application to the IEMA-OHS Office of Nuclear Safety.

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. Please be aware, however, that Agency rules require that an application for renewal of a specific license be filed with the Agency at least 30 days prior to the expiration date. This allows for licensed activities lawfully to continue beyond the expiration date pending Agency review of the renewal application, should such review extend beyond the expiration date. Failure to provide all requested information may result in denial of your application for radioactive material license issuance or renewal.

Item 1. This is an application for:

☐ New Portable Gauge License **OR** ☐ Amendment ☐ Renewal of License Number:

Item 2. Applicant's name and mailing address
Applicant must be the legal entity or individual responsible for the license.

Licensee Name:	
Address:	Email:
City, State, Zip:	Phone:

☐ Illinois Secretary of State Registration is attached. *(Or equivalent state business registration)*

Item 3. Address where radioactive material will be either: Used(only), Stored(only), or <u>Both</u>
If additional space is required, submit an attachment with the information required.

Site Address(es):	How will radioactive material be used at this location:	☐ The Applicant owns the property/facility.
City, State, Zip:	☐ Used ☐ Stored ☐ Both Used and Stored	☐ The Applicant **<u>does not</u>** own the property. Attach letter signed by facility/owner acknowledging use/storage of RAM at this location.
Contact Name:	Phone:	Email:

☐ Request TEMPORARY JOBSITES (≤ 180 days during any consecutive twelve-month period)

Item 4. Person(s) authorized to act on behalf of licensee
If additional space is required, submit an attachment with the information required. Indicate if changes to person(s) previously authorized are needed.

Name:	Title:
Address:	Email:
City, State, Zip:	Phone:

☐ Full time employee of licensee **OR** ☐ Position and/or Relationship to the licensee:

If any individual listed above is unknown to the Agency (not listed on any license previously), complete the *Release and Authorization Full Due Diligence Form* to expedite processing of the application.

IEMA Consent for Background Check (illinois.gov)

Items 5.1 And 6: Materials to Be Possessed and Proposed Uses

If additional space is required, submit an attachment with the information required.

Manufacturer or Distributor and Model of the Device	Quantity Requested	Radionuclide(s) and Activity Per Source	Use as Listed on SSD Registration Certificate	Specify Other Uses Not Listed on SSD Registration Certificate
			☐ Yes, Uses are as follows:	☐ Not Applicable **OR** ☐ Uses are as follows: **AND** ☐ Safety analysis is attached
			☐ Yes, Uses are as follows:	☐ Not Applicable **OR** ☐ Uses are as follows: **AND** ☐ Safety analysis is attached
			☐ Yes, Uses are as follows:	☐ Not Applicable **OR** ☐ Uses are as follows: **AND** ☐ Safety analysis is attached
			☐ Yes, Uses are as follows:	☐ Not Applicable **OR** ☐ Uses are as follows: **AND** ☐ Safety analysis is attached

Item 5.2 Financial Assurance

Financial assurance requirements do not typically apply to portable gauge sources. Applicants should refer to 32 Ill. Adm. Code 326.50 to review exempt criteria. If applicable, the applicant must satisfy 32 Ill. Adm. Code 326.

NEW APPLICANT (Check one)

☐ Exempt ☐ $25,000 instrument will be provided prior to issuance of license ☐ 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 7. Individual(s) Responsible for Radiation Safety Program and Their Training and Experience – Radiation Safety Officer (RSO)

Full Name:	Title:
Address:	Email:
City, State, Zip:	Phone:

The proposed RSO is:

☐ A full-time employee of the licensee **OR** Position and/or Relationship is as follows:

☐ Attached is evidence of RSO Training and Experience

IF APPLICABLE:

☐ Evidence of the completion of "non-routine" maintenance training is attached for Agency review.

☐ The RSO will be performing "HAZMAT functions" as described in 49 CFR Part 171. Evidence of training relative to these duties is attached for Agency review.

☐ Duties are stated in Appendix D of IEMA-OHS Instructional Set 65.0, Rev. 4.

OR

☐ Duties and responsibilities of the RSO are attached for Agency review.

☐ Delegation of Authority Statement signed by both management and the RSO is attached
(A template is available in Appendix D of IEMA-OHS Instructional Set 65.0, Rev. 4)

☐ We request authorization for the RSO to delegate duties

If the proposed RSO is unknown to the Agency (not listed on any license previously), complete the *Release and Authorization Full Due Diligence Form* to expedite processing of the application.

IEMA Consent for Background Check (illinois.gov)

Item 8. Training for Individuals Working in or Frequenting Restricted Areas

☐ The full name of at least one individual who will use or directly supervise the use of radioactive material in portable gauges is attached with evidence of their training and experience.

IF APPLICABLE:

☐ Evidence of completion of "non-routine" maintenance training is attached for Agency review.

☐ The AU will be performing "HAZMAT functions" as described in 49 CFR Part 171. Evidence of training relative to these duties is attached for Agency review.

AND

☐ Before using licensed materials, authorized users will have successfully completed one of the training courses described in the 'Criteria' part of the section titled, 'Training for Individuals Working In or Frequenting Restricted Areas' in NUREG–1556, Volume 1, Revision 2, and be provided hands-on training and experience under the supervision of the manufacturer/distributor, the RSO or an AU.

OR

☐ We have attached a description and evidence of training and experience for each proposed authorized user.

ADDITIONALLY, CHECK ALL THAT APPLY:

☐ Authorized Users will perform "non-routine" maintenance as described in Chapter 8.10.8 of NUREG 1556, Vol. 1, Rev. 2. A description of the additional training to be provided relative to these duties, which addresses the provisions in Appendix F of NUREG 1556, Vol. 1 Rev. 2, is attached for Agency review.

☐ Authorized Users will be performing "HAZMAT functions" as described in 49 CFR Part 171. Both initial and refresher DOT HAZMAT training will be provided to applicable personnel as required in 32 Ill. Adm. Code 341.10(b)(7).

☐ The applicant is subject to 32 Ill. Adm. Code Part 337. Both initial and annual refresher training will be provided to applicable personnel as required in 32 Ill. Adm. Code 337.2020(c).

If the proposed RSO or AU is unknown to the Agency (not listed on any license previously), complete the *Release and Authorization Full Due Diligence Form* to expedite processing of the application.

IEMA Consent for Background Check (illinois.gov)

Item 8. Instructions to Workers

No response is required from the applicant as part of the license application. All individuals working with or around licensed materials must be informed and instructed as required by 32 Ill. Adm. Code 400.120. Records of worker training will be reviewed during inspections.

Item 9. Facilities and Equipment

☐ Diagrams of radioactive material use and storage areas, as described in Chapter 8.9 of IEMA-OHS Instructional Set 65.0, Rev. 2 are attached.

Item 10. Radiation Safety Program

Item 10.1 Audit Program

☐ We will use Appendix E of IEMA-OHS Instructional Set 65.0, Rev. 4.

OR

☐ We will use an alternative audit program.

Item 10.2 Radiation Monitoring Instruments

☐ We will possess and use or have preplanned access to radiation survey/monitoring instruments that meet the criteria in Section 8.10.2, 'Radiation Monitoring Instruments,' in NUREG–1556, Volume 1, Revision 2,

AND, ONE OF THE FOLLOWING THREE CHOICES:

☐ Each radiation survey meter will be calibrated by the manufacturer or other person authorized by IEMA-OHS, the U.S. NRC, or an Agreement State to perform radiation survey meter calibrations.

OR

☐ We will implement the model radiation survey instrument calibration program in Appendix M, 'Model Radiation Survey Instrument Calibration Program,' in Instructional Set 65.0, Revision 4, 'Consolidated Guidance About Materials Licenses: Program-Specific Guidance About Portable Gauge Licenses.

OR

☐ Alternative calibration procedures are attached for IEMA-OHS review.

NON-ROUTINE MAINTENANCE (if applicable):

☐ We will perform non-routine maintenance or repair and have attached evidence verifying we possess appropriate instrumentation.

Item 10.3 Material Receipt and Accountability

☐ We will develop, implement, and maintain procedures for ensuring accountability of licensed materials at all times.

AND

☐ Physical inventories will be conducted every 6 months in accordance with 32 Ill. Adm. Code 340.810.

Item 10.4 Occupational Dose

☐ We have attached documentation demonstrating that unmonitored individuals are not likely to receive a radiation dose in excess of the limits in 32 Ill. Adm. Code 340.520(a). *(A sample calculation is available in Part 1 of Appendix H of NUREG–1556, Volume 1, Revision 2.)*

OR

☐ We will provide and require the use of individual monitoring devices (dosimetry) of the type and frequency specified in the table below. All personnel dosimeters that require processing to determine the radiation dose will be processed and evaluated by a NVLAP-approved processor.

Type	Exchange Frequency	OSL	TLD	Self-reading or electronic personal dosimeters
Whole body		☐	☐	☐ Manufacturer/Model:
Extremity		☐	☐	

Item 10.5 Public Dose

☐ Public dose calculations demonstrating members of the public will not receive more than 1 millisievert (1 mSv) [100 millirem (100 mrem)] in one year, and the dose in any unrestricted area will not exceed 0.02 mSv (2 mrem) in any one hour, from licensed operations are attached. *(A sample calculation is available in Part 2 of Appendix H of NUREG–1556, Volume 1, Revision 2.)*

Item 10.6 Operating, Emergency, and Security Procedures

☐ Operating, emergency, and security procedures will be developed, implemented, and maintained, and will meet the criteria in Section 8.10.6, 'Operating, Emergency, and Security Procedures' in NUREG–1556, Volume 1, Revision 2. Copies of these procedures will be provided to all gauge users and will be available at each jobsite. Procedures will be evaluated during Agency inspections.

OR

☐ Alternative procedures have been attached for Agency review. Copies of these procedures will be provided to all gauge users and will be available at each jobsite.

Item 10.7 Leak Tests (Mark one)

☐ Leak tests will be performed at intervals approved by IEMA-OHS, the NRC, or an Agreement State and as specified in the Sealed Source and Device registration certificate. Leak tests will be performed by an organization licensed by IEMA-OHS, the U.S. NRC, or an Agreement State to provide leak testing services to other licensees; or by using a leak test sample collection kit supplied by an organization licensed by IEMA-OHS, the U.S. NRC, or an Agreement State to provide leak test kits and/or sample analysis services to other licensees and according to the kit supplier's instructions. Records of leak test results will be maintained in accordance with 32 Ill. Adm. Code 340.1135.

OR

☐ We will implement the model leak test program in Appendix I of NUREG–1556, Volume 1, Revision 2, 'Consolidated Guidance About Materials Licenses: Program-Specific Guidance About Fixed Gauge Licenses.' Records of leak tests will be maintained in accordance with 32 Ill. Adm. Code 340.1135.

OR

☐ A description of alternative equipment and/or procedures for determining whether there is any radioactive leakage from sources contained in gauges are attached. Records of leak tests will be maintained in accordance with 32 Ill. Adm. Code 340.1135.

Item 10.8 Maintenance

For routine maintenance:

☐ We will implement and maintain procedures for routine maintenance of our gauges according to each manufacturer or distributor's written recommendations and instructions.

OR

☐ Alternative procedures are attached for IEMA-OHS review.

For nonroutine operations:

☐ The gauge manufacturer, distributor, or other person licensed by IEMA-OHS, the U.S. NRC, or an Agreement State will perform nonroutine operations such as detaching the source or source rod from the device or replacing radiological safety components.

OR

☐ We have attached a request to perform this work "in-house," which includes the information specified in Appendix F of NUREG–1556, Volume 1, Revision 2. Procedures consistent with the manufacturer or distributor's instructions and recommendations, which address the provisions in Appendix F of NUREG 1556, Vol. 1 Rev. 2, are attached for Agency review.

Item 10.9 Transportation

No response is required from the applicant as part of the license application. When applicable, HAZMAT training required by 49 CFR 172, Subpart H must be completed by all employees performing HAZMAT functions within 90 days after employment or change in job duties, prior to performing HAZMAT functions and every three years thereafter.

Item 11. Waste Management - Gauge Disposal and Transfer

☐ 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 and verify their authorization to possess prior to transfer.

Item 12. License Fees (Refer to 32 Ill. Adm. Code 331)

☐ Not Applicable (Agency of a State, County or Municipality Government or an Educational Institution as defined in 32 Ill. Adm. Code 331.110)

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: _____ *(See Appendix E of 32 Ill. Adm. Code Part 331 for fee categories)*

ITEM 13. Certification:
Every 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:

Title: Applicant's FEIN:

Complete Section B *only* 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: _____ Social Security Number:

Title: Date:

If the applicant is an individual and is unknown to the Agency (not listed on any license previously), complete the *Release and Authorization Full Due Diligence Form* to expedite processing of the application.
IEMA Consent for Background Check (illinois.gov)