



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

APPLICATION FORM FOR NON-MEDICAL RADIOACTIVE MATERIAL LICENSE

Complete all items if this is an initial application 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 #:

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

ITEM 5. Individual(s) Who Will Use Radioactive Material

List names and requested uses of material. (Attach evidence of appropriate Training and Experience).

Name: _____	Subparts: _____
Name: _____	Subparts: _____
Name: _____	Subparts: _____
Name: _____	Subparts: _____
Name: _____	Subparts: _____
Name: _____	Subparts: _____
Name: _____	Subparts: _____

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

Name: _____

Phone #: _____

- Duties are as stated in Appendix C of Instructional Set 48.6 dated October 1994.
- Duties and responsibilities are attached.

ITEM 7. Radioactive Material for Non-Medical Use

RADIONUCLIDE	CHEMICAL and/or PHYSICAL FORM	MAXIMUM ACTIVITY PER SOURCE	MAXIMUM POSSESSION LIMIT
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			

Authorized Use: _____

ITEM 8. Instrumentation

- Complete Exhibit B from Instructional Set 48.6 dated October 1994 or equivalent is attached.

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

- Radiation survey 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 survey instruments in accordance with the attached procedures, which contain all information requested in Appendix E of Instructional Set 48.6 dated October 1994.

ITEM 10. Facilities and Equipment

- Diagrams of radioactive material use and storage areas are attached.
- Letter from the facility/property owner is attached.
- The applicant/licensee owns the property/facility.

ITEM 11. Personnel Training Program

- Description of training program, including frequency, form, and duration is attached.

ITEM 12. Procedure for Ordering and Receiving Radioactive Material

- Description for ordering and receiving radioactive material is attached.

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

- We will use the procedure identified in Appendix I of Instructional Set 48.6 dated October 1994.
- Procedure is attached.

ITEM 14. General Rules for the Safe Use of Radioactive Material (Check one)

- We will use the procedure identified in Appendix J of Instructional Set 48.6 dated October 1994.
- Procedure is attached.

ITEM 15. Emergency Procedure (Check one)

- We will use the procedure identified in Appendix K of Instructional Set 48.6 dated October 1994.
- Procedure is attached.

ITEM 16. Area Survey Procedure (Check one)

- We will use the procedure identified in Appendix L of Instructional Set 48.6 dated October 1994.
- Procedure is attached.

ITEM 17. Waste Disposal (Check one)

- We do not wish authorization for alternate disposal methods.
- Alternate disposal methods are detailed in an Attachment to this application. (This includes Decay-in-Storage procedures for isotopes with $T_{1/2} < 90$ days.)

ITEM 18. 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. Procedure is attached.

ITEM 19. Bioassays (Check one)

- Not applicable.
- We will use the procedure for radioactive bioassays identified in Appendix N of Instructional Set 48.6 dated October 1994.
- Procedure is attached.

ITEM 20. Procedure for Use of Radioactive Gases/Volatile Material (Check one)

- Not applicable.
- Occupational dose limit/ventilation calculations are attached.

ITEM 21. Procedure for Use of Radioactive in Animals (Check one)

- Not applicable.
- Procedure is attached.

ITEM 22. 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"/> |
- Direct reading dosimeters will be used and calibrated in accordance with Appendix P of Instructional Set 48.6 dated October 1994.
 - Direct reading dosimeter use and calibration procedures are attached.

ITEM 23. 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 24. 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 25. 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: _____