

FACILITY REGISTRATION

NOTE: Facility Registration is required for ALL Authorized Users, regardless of registration of the facility by another Authorized User.

<input type="checkbox"/> New Facility	<input type="checkbox"/> Re-Registration	<input type="checkbox"/> Change in Facility or Use
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Authorized User: _____ Date: _____
 Room #/Bldg.: _____ Phone: _____
 Use (lab, counting room, storage, cold room, etc.): _____
 Nuclides (list): _____

FACILITY FLOOR PLAN	SAMPLE LOCATIONS	EQUIPMENT
.....	1.	1.
.....	2.	2.
.....	3.	3.
.....	4.	4.
.....	5.	5.
.....	6.	6.
.....	7.	7.
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.....	19.	19.
.....	20.	20.

NOTE: Contamination surveys must be performed and recorded at least once each month when radioactive material is present, in use, or in storage. Identify the locations and items that will be routinely wipe tested as part of the required contamination surveys for this facility. Include locations where radioactive materials are routinely used or stored such as: hoods and refrigerators as well as floors and benches, approved disposal sinks, passageways and other high traffic areas, including door handles. Also list all equipment in which radioactive material will be used or stored.

- Yes No Is radiochemical hood present? If yes, record measured face velocity (in linear feet per minute): _____
 Yes No Is this facility shared with other Authorized Users? If yes, please list: _____
 Yes No Is this facility shared with individuals who do not use radioactive material?

Posting and Labelling: the following signs and notices must be posted prior to use of radioactive material. Please note which postings are present:

- "Caution Radioactive Material" "Notice to Employees," State Form 491
 "No Smoking, Eating or Drinking Permitted in this Facility" "Radiation Emergency Procedures"

Conditions of Use: The Applicant shall notify Radiation Safety, in writing, of the following: (1) any substantial physical changes to the facility; (2) changes in the activities conducted in the facility; (3) at least two weeks prior to discontinuing work with radioactive material in this facility.

Signature/Date: _____