FORM 5

Regulation 50

Application for Authorisation for Decommissioning/Remediation of Naturally Occurring Radioactive Material Facilities/Sites

GENERAL INFORMATION

1. Name of applicant (facility): _____

Physical address	Postal Address	Email Address

2. (a) Name and address of Radiation Safety Officer

_____

(b) Telephone Number: _____ E-mail address: _____

(c) Qualification: _____

(c) Experience: _____

3. The representative of the applicant:

Name: _____Telephone number: _____

Title: _____ e-mail address: _____

4. Type of facility for which the NORM activity is involved (i.e. Practice: offshore oil and gas, and rare earth element mining and processing facilities etc.)

_____

5. The qualified expert(s) responsible for the decommissioning process

Name: _____Telephone number: _____

E-mail address: _____Qualification *(Attach evidence)* _____ Experience _____

6. Other classified workers that will be responsible for decommissioning the facility

Name	Title	Qualification	Experience	Reg. No	Tel No.	Email

7. State the reason for decommissioning the facility

_____

8. Proposed start and end date of decommissioning

Starting _____Ending _____

9. Waste management

(a) Details of the facility responsible for management of the waste after decommissioning *(Attach authorisation license).*

_____

_____

_____

(b) Type of waste likely to be generated

_____

(c) Environmental biota (e.g. marine biota) that are likely to be affected by the decommissioning activities

_____

_____

_____

(d) Estimated amount of waste in tonnes with activity concentrations of 10 Bq/g or more per installation to be generated during decommissioning

_____

_____

(e) Purpose of the waste to be generated (e.g. for recycling/ re-use, etc)

_____

_____

(Attach a copy of the detailed site characterisation plan)

10. Decommissioning and remediation

(a) Describe the procedures for decommissioning of the facility

(Attach a copy of decommissioning plan)

_____

_____

_____

(b) Remediation plan *(Attach a copy of the plan)*

_____

_____

(c) Possible circular economy opportunities that may exist for the nature of the remediation waste stream

_____

_____

11. On submission for your application, please provide the following;

(a) Final radiation survey report

(b) Safety assessment and supporting documentation

(c) Procedures for dealing with and reporting abnormal events, incidents and emergencies

(d) A work breakdown structure and implementation plan

(e) Administrative control procedures for individual tasks

(f) Procedures for the collection and maintenance of records during and after completion of decommissioning

(g) Any other information that may be required by the Atomic Energy Council.

12. You must provide a final decommissioning report on completion of the decommissioning

DECLARATION

I, _____ *(name)* Certify that all the information given herein is true and correct to the best of my knowledge.

Date: _____ *Signature of applicant:* _____

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Notification No:			
	By	Date	Signature
Received:			
Evaluated:			
General Remarks and/ or Comments:			