ATOMIC ENERGY COUNCIL

GUIDE TO THE APPLICATION TO POSSESS AND USE A SOURCE(S) FOR INDUSTRIAL APPLICATIONS

	Item	Guiding Notes
	Type of Application	1. The applicant is required to; mark the relevant section if application is to obtain, either New application or renewal of application number; 2. For renewals, indicate the current license number e.g AEC/PU/0000. (attach a copy if the license to be renewed)
1	Name and address of applicant	 Indicate the name as it appears on the proof of legal status documentation, such as the proof of incorporation or sole proprietorship e.g Atomic Energy Council. (Attach certificate of registration where possible) Provide the mailing address, if it is different than the head office address, including the complete street name and number, and rural route number if appropriate, city, province or territory, and postal code e.g Name of the facility applying for possess and use of radioactive materials e.g. Atomic Energy Council Location of the facility applying for possess and use of radioactive materials e.g. Plot 001, Kampala Road City e.g Kampala Postal code e.g P.O.Box 000, Kampala, Uganda Email address of the facility applying for possess and use of radioactive materials e.g. mm@ysi.com Telephone details of the facility applying for possess and use of radioactive materials e.g. +256-414 000 000
2	Radiation safety Officer (RSO)	 The RSO is one responsible for the radiation protection and safety in the operation of the practice and any source of ionizing radiation in the practice. Provide the name, qualification, telephone number, experience and email address of the RSO. e.g; Name: John Paul Qualifications: Radiation physics Telephone: +256 712 000 000 Email: johnpaul@yy.com Experience: 10yrs The RSO must be at the site of the licensed activity or reasonably be able to attend to the site of licensed activity as required. Alternate RSOs may be utilized where a licensee has multiple locations of licensed activity

		(attach copy of the formal appointment of the RSO)
3.	Name and information about Qualified experts (QE)	 Provide the name, qualification, address, telephone number, experience and email address of the Qualified Expert. E.g. Name: Wawu Titi Qualifications: Medical Physics Telephone: +256 700 000 000 Email: wawutiti@cc.com Experience: 15yrs A QE is an individual who by virtue of certification by appropriate boards or societies, professional license or academic qualification and experience, is duly recognized by the Council as having expertise in a relevant field of specialization e.g. medical physics, radiation protection, occupational health, quality assurance or any relevant engineering or safety specialty (Attach qualification documents of the QE or certificate of approval from the Council)
4	Other classified workers that will be responsible for the equipment	Provide personnel(s) who my use the source(s) or who work in controlled areas in the vicinity of source(s) with appropriate training and experience for the range of radiation sources to be used. E.g. Name: John Patrick Title: Source In-charge Qualifications: Physics Telephone: +256 700 000 000 Email: johnpatrick@ee.com (Attach list of workers and their qualification documents)
5	Proposed date of Installation and/ or Commissioning	Provide the proposed date of Installation and/ or Commissioning of Facilities and Equipment. E.g January 01, 2000.
	T I: WELL LOGGIN ICES	IG, PORTABLE GAUGES, DETECTION AND ANALYTICAL
6	Purpose of the device or what the radioactive material will be used for	State the purpose of the device (e.g well logging, portable gauges, detection and analytical devices, fixed or installed gauging detection and other similar devices etc.)
7	Describe the details of the radiation devices or	Provide Details of the sources as per the table including: Manufacturer e.g Uganda radiation engineering Co. Ltd Type of radiation e.g (alpha, beta, gamma & neutron), Model e.g UG00/12/90

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	radioactive	Serial number e.g 354EUI78
	sources	Maximum kV e.g 120
		Maximum mA e.g 300
		Neutron energy (for b)
		Target Nuclide
		(Attach source certificate from manufacturer)
8	Details of	Provide details as per the appropriate table for:
0	equipment	a) Sealed source radiographic devices
	equipment	b) X-ray generators
		c) accelerator
		C) accelerator
PAR	T III: AN IRRADIA	
9	Type Sources	Check the appropriate box for the type of irradiator
	and Irradiator	
10	For Gamma	a) Give the irradiator details as per the table including:
	irradiator	Manufacturer e.g Uganda radiation engineering Co. Ltd
	facility	Model No. of irradiator e.g UG00/13/90
		Supplier of irradiator e.g All Uganda Services
		b) Provide details of radioactive source as per the table
11	For accelerator	Fill accelerator details and specifications as per the table
PAR	T IV: FACILITIES	
12	Location of	Provide details of the location of equipment/sources including:
	Equipment/So	Name of unit/department e.g Safety
	urces	Building No. e.g Amber House
		Floor and Room No. e.g Room 1
		Plot No. Town/Street/ward. E.g Plot XX
		District and City. E.g Kampala
13	Layout of the	Describe the layout and safety systems of the facility including:
	Installation	Building materials,
		Alarms,
		Shielding,
		Engineering controls (e.g.
		Interlocks,
		Warning safety devices/systems,
		Emergency stop button,
		Prevention of unauthorized access,
		Means of escape or Communication from within
		enclosure etc.)
14	Standards	Indicate to which IEC or ISO standards does the equipment and
		sources used for radiation exposure conform;
		If "Yes",
		(Attach certificate if available)
		Tribution of this date is a raisable

15	Services and Maintenance	Provide details person/organization authorized to perform the service and maintenance of the equipment: Name: e.g peter wanu Authorization reference No: Organization: Uganda Technical Services Itd Address: P.O.Box 000, Kampala Telephone number: e-mail: peterwanu@utsl.com
16	Safety Assessments:	 (i) Taking into account of shielding, provide calculation of maximum dose rates in all adjacent areas outside the installation: e.g 0.521μSv/hr (ii) Provide estimates of the magnitude of the expected doses to persons during normal operations; 5.12mSv/yr (iii) Identify the probability and magnitude of potential exposures arising from accidents or incidents: (Attach a layout drawing of the installation showing)
		adjacent surroundings with controlled and supervised areas clearly identified).
	Safety assessment report	Safety assessment report should include provisions for; Persons at risk, existing measures to control exposures, possible accident scenarios and mitigation measures, designation of controlled & supervised areas, provisions for restricting exposures, arrangements for female employees, individual dose assessments, health surveillance, dose investigation levels, training and qualifications of employees, work place monitoring, a system of accounting for of radiation sources, safety system evaluations. (Attach a safety assessment report)
17	Safety System (For irradiators)	Describe the over roll safety system which will be used to ensure the safe operation of the irradiator (e.g.) design features, defence in depth, layout). Further describe in detail the safety systems for preventing access to the irradiation room whilst the source is exposed and for the warning of unsafe conditions (e.g. interlocks, installed monitors). (ii)Attach the manufacturer's specifications of the system.
18	Personal Protective Equipment	Name any Personal Protective Equipment (PPE) e.g lead aprons, that will be provided including number, type and specifications e.g 0.5mmPb
DVD.	T V. DANIATION D	PROTECTION AND SAFETY PROGRAMME
19	Organizational s	

i.	Staffing level	Number of radiation workers at the facility e.g 02
ii.	Equipment	List of protective gears to be employed at the facility e.g
	selection	
iii.	Other	Indicate other assignments of the RPO
	assignments of	
	Radiation	
	Protection officer	
iv.	(RPO)	Authority should be indicated in the appointment letter
IV.	Authority of the RPO to stop	Authority should be indicated in the appointment letter
	unsafe operation	
٧.	Personal Training	Indicate the training programs attended or at the facility related to
٧.	Tersonal Training	radiation protection
vi.	Maintenance of	Detail how records are maintained at the facility such as inventory
	records	of sources, source movement log book including disposal,
		occupational dose records, audits, etc.
vii	How problems	Indicate the regular audits performed at the facility for radiation
	affecting safety	safety practices of its personnel
	are identified to	
	stop unsafe	
	operations	
20.	Security and	Describe the security and safety plan for the source to be
	safety of	possessed/used
	radiation	(Attach a security and safety plan)
	sources during;	
i.	Use	Detailing the suitability of the bunker including meeting external
		dose rate limits and potential public exposure, stating the means of
		contacting the operator and / or RPO in case of emergency,
ii.	Transport	Detailing arrangement plans for the transport of radioactive sources,
		Source containers and Procedures for monitoring incoming and
		outgoing packages satisfactory
iii.	Storage	Detailing arrangements for the storage of radioactive source(s)
21	Radioactive	Detail the mode of managing the radioactive material at the end of
	waste	the source life time e.g suitable arrangements for disposal of
	management	unwanted sources and clearly identified how this will be achieved
		(Attach a detailed waste management plan)
22	Emergency	Indicate a detailed emergency response plan and this should contain

	procedures	a List of possible radiological emergencies, Allocation of responsibilities, Procedures for assessing the seriousness of the situation, Procedures for communicating and cooperating with other relevant stakeholders, Arrangements for worker to deal with induced injuries, The immediate mitigating actions, Means of preventing access to the affected area.
		Arrangements for informing the public, The nature and location of the PPE required e.g remote handling tools, lead pots, etc, The procedures to be adopted in using the equipment, The number and type of radiation detection equipment that will be required.
		Arrangements for maintaining, reviewing and updating of the emergency plan and appropriate training in relation to handling emergencies
		(Attach an emergency plan)
23	Occupational	Provide detailed procedures to ensure that occupational and public
	and public	radiation protection is optimized, work areas are appropriately classified, and doses will comply with the prescribed limits, protocols
	exposures	to ensure dose rates at boundaries around logging operations
	control	comply with prescribed limits
Part	VI: Declaration	Here the applicant/ representative of the applicant e.g CEO, Managing Director, etc, is required to fill in his/her name, and indicate the date of submission of the application
		The application must be signed and stamped by the applicant/ legal person thus making the information authentic