

The seal of the State of Arizona is faintly visible in the background. It is a circular emblem with the text 'SEAL OF THE STATE OF ARIZONA' around the perimeter. Inside the circle, there is a shield with a figure holding a torch and a plow, and the Latin motto 'DITAT DEUS' above it. The year '1912' is at the bottom, flanked by two stars.

**ARIZONA RADIATION REGULATORY
AGENCY REGULATORY GUIDE**

**GENERAL FORM
INDUSTRIAL/MEDICAL**

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ARRA 1-G April 2008	ARIZONA RADIATION REGULATORY AGENCY APPLICATION FOR RADIOACTIVE MATERIALS LICENSE General Form – INDUSTRIAL/MEDICAL
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INSTRUCTIONS: Complete all items in this application for new license or the renewal of an existing license. Use supplemental sheets where necessary. Item 29 must be completed on all applications. **Mail the original to:** Arizona Radiation Regulatory Agency, 4814 South 40th Street, Phoenix, AZ 85040. Upon approval of this application the applicant will receive an Arizona Radioactive Material License.

1a. NAME AND MAILING ADDRESS OF APPLICANT (Institution, Firm, Individual Owner, etc.) Include Zip Code	1b. STREET ADDRESS(ES) AT WHICH RADIOACTIVE MATERIAL WILL BE USED (If different than 1a.) Include Zip Code
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2. PERSON TO CONTACT REGARDING THIS APPLICATION:	TELEPHONE NO:
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3. THIS IS AN APPLICATION FOR: (Check appropriate item)

A. NEW LICENSE* B. AMENDMENT TO LICENSE NO. _____ C. RENEWAL OF LICENSE NO. _____

4a. INDIVIDUAL USERS (Name and individuals who will use or directly supervise use of Radioactive Material). 4b. A copy of a driver's license and social security card is required for all persons listed by name on the license.	4c. TRAINING AND EXPERIENCE (Check one or more) <input type="checkbox"/> Training and experience attached for RSO and each User <input type="checkbox"/> Training previously filed under License No. _____
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6. RADIOACTIVE MATERIAL (Elements and mass number of each) A. _____ B. _____ C. _____	7. CHEMICAL AND/OR PHYSICAL FORM OR SEALED SOURCE MANUFACTURER AND MODEL NUMBER A. _____ B. _____ C. _____	8. MAXIMUM QUANTITY OF EACH CHEMICAL OR ACTIVITY OF EACH SOURCE A. _____ B. _____ C. _____
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9. DEVICE AND USE DESCRIPTION (Make lettering correspond to lettering in items 6, 7, 8 above)

A. _____

B. _____

C. _____

***FEE REQUIRED FOR NEW LICENSE ONLY (COMPLETE ITEM NO. 24)**

10. RADIATION DETECTION INSTRUMENTS (List radiation detection instruments used in your radiation safety program)

MANUFACTURER	MODEL NO.	DETECTS WINDOW THICKNESS		TYPE OF USE
		RANGE	(CTS/min or mR/hr)	
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

11. CALIBRATION OF DETECTION INSTRUMENTS

(Mandatory for all instruments possessed) (Check one)

- No survey instruments possessed
- Calibration will be done at intervals not to exceed 12 months and after each repair
- Calibration will be done at intervals not to exceed 6 months and after each repair
- Applicant to do instrument calibration or service by outside firm

Name: _____

Address: _____

License No.: _____

Other instrument calibrations.

- Calibration procedures for other than dose rate instruments attached.

12. PERSONNEL MONITORING (Check as appropriate)

- No personnel monitoring necessary, justification attached.
- Personnel monitoring required.

Whole body Extremity

TLD TLD

Film Film

(RADIATION DETECTED)

Beta-Gamma Beta-Gamma-Neutron

(FREQUENCY OF EXCHANGE)

Monthly Quarterly

Name: _____

Address: _____

- Direct Reading Pocket Dosimeters used:

MANUFACTURER	MODEL NO.	RANGE
_____	_____	_____
_____	_____	_____

The following pocket dosimeter requirements will be met:

- Checked annually
- Zeroed/charged at beginning of each shift
(Check one below)
- Applicant will do pocket dosimeter checks (attach methods or procedures); or
- Checks will be done by approved service agency

13. APPROVED POCKET DOSIMETRY SERVICE AGENCY

Name: _____

Address: _____

License No.: _____

14. FACILITIES

- Facilities and storage diagram attached.

15. SURVEY PROGRAM

- Survey criteria and programs attached.

16. LEAK TEST PROGRAM (Check one)

- Applicant will contract with approved outside consultant to do leak tests

Name: _____

Address: _____

- Applicant will do leak tests using approved leak test kit, mailing kit to manufacturer for counting

Name: _____

Address: _____

Kit No.: _____

- Applicant will do own leak tests including counting. Detailed procedures attached.

17. RECORDS MANAGEMENT PROGRAM

- Sample of each record form attached

18. INSTRUCTIONS TO PERSONNEL

- Training program attached; and
- Safety rules attached

19. WASTE DISPOSAL

- Procedures attached

20. EMERGENCY PROCEDURES

- Procedures attached

21. ORDERING AND RECEIVING PACKAGES

- Procedures attached

22. OPENING PACKAGES

Procedures attached

23. ANIMAL USE

Not applicable

Detailed radiation safety procedures attached
(including waste disposal)

24. LICENSE FEE REQUIRED

(See AAC Title 12, Chapter 1, Article 13)

25. LETTER TO GOVERNING AUTHORITY

(See AAC R12-1-309.5)

26. ALARA PROGRAM

ALARA program will be initiated in accordance
with R12-1-407

27. TRANSPORTATION

Not applicable

Procedures Attached

28. LEGAL STRUCTURE

Attached form must be filled out

ITEM 29 – CERTIFICATION

(This item must be completed by applicant)

THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT NAMED IN ITEM 1, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH ARIZONA ADMINISTRATIVE CODE, TITLE 12, CHAPTER 1, AND THAT ALL INFORMATION CONTAINED HEREIN, INCLUDING ANY SUPPLEMENTS, OR ATTACHMENTS, ARE TRUE AND CORRECT TO THE BEST OF THE APPLICANT’S KNOWLEDGE AND BELIEF.

(Type or Print Name of Certifying Official)

By: _____
(Signature)

(Title of Certifying Official)

Date: _____

ARIZONA RADIATION REGULATORY AGENCY**GUIDE FOR THE PREPARATION OF THE APPLICATION FOR A
RADIOACTIVE MATERIALS LICENSE****I. PURPOSE OF GUIDE**

This guide describes the type of information needed by the Agency staff to evaluate an application for a specific license for possessing and using radioactive material. Each applicant should carefully read the applicable rules, model duties and procedures and then decide if the models are appropriate for its specific radiation safety needs. With this application, an applicant must provide model procedures and enclose them for Agency review.

II. FILING AN APPLICATION

An application for a license is made by completing form ARRA-1G. Some items may be completed on the form itself; however, if additional room is required, an additional sheet may be added. For any supplementary pages, identify and key each separate sheet or document submitted with the application to the item number on the application to which it refers.

All items should be completed in enough detail to allow the Agency to determine that the equipment facilities, training and experience, and radiation safety program are adequate for a good radiation safety program.

As most license applications are open to the general public, you may request certain information be protected while it is on file with the Agency. Personal information such as social security numbers and driver license copies may be of concern to you and your employees. Other information that you may want to protect includes: home addresses, home telephone numbers, dates of birth, and radiation dose information. Additionally, if submittal of proprietary information is necessary, the applicant may request that such information be handled as such and kept from public dissemination.

The application should be filed to the address shown in Section III of this guide. The applicant should retain a copy as the applicant will be required to possess and use licensed material according to the statements and representations made in the application and any supplements to it.

III. CONTENTS OF AN APPLICATION

This portion of the guide explains some of the items on Form ARRA-1G.

Any questions concerning the new attachment can be answered by calling the licensing person at the Agency. If after careful review of this guide, applicants have specific questions, they should contact the Radioactive Materials Program staff at:

Arizona Radiation Regulatory Agency
Radioactive Materials Program
4814 South 40th Street
Phoenix, AZ 85040
(602) 255-4845
Fax: (602) 437-0705
<http://www.azrra.gov>

Item 1a: Name and Mailing Address of Applicant

Enter the name, mailing address and telephone number of the applicant. Specify the applicant, corporation or other legal entity by name. Individuals should be identified as the applicant only, if acting in a private capacity and the use of radioactive material is not connected with their employment for a corporation or other legal entity.

Item 1b: Street Address(es) for Use of Radioactive Material

List the addresses and locations where radioactive material will be used. If multiple addresses are to be used, explain the extent of use at each address and the facilities and equipment located at each place of use. The actual locations of use should be listed, whether or not they are at the same as the mailing address in item 1.A; e.g., a P.O. Box may be most suitable for item 1.A. in some cases, but a P.O. Box does not adequately describe the location of use. Item 1.B. must be an in-state address.

Item 2: Person to Contact

Enter the name and telephone number (including area code) of the individual to be contacted. This individual should be familiar with the proposed radioactive materials program and be able to answer questions about the application. This individual will serve as the point of contact during the review of the application and during the period of the license, and is able to act on behalf of the license.

Item 3: Type of Application

Indicate whether this is an application for a new license, an amendment, or a renewal. If this application is for a new license, the appropriate license fee must accompany the application in order for the application review to begin (complete Item 24)

Item 4: Individual Users

List the names of all persons who will be listed on the license as users and will supervise, or direct the use of radioactive material. This list should include the individuals who supervise other individuals in training.

Item 4b: Identification

The applicant must provide with the license application a copy of the social security card and driver's license for each person who will be listed on the license. It is not acceptable to only provide a listing of the applicable numbers.

Item 4c: Training and Experience

The qualifications, training, and experience of each person should be commensurate with the material and its use as proposed in the application. The amount and type of training and experience with radiation and radioactive materials required to support a determination of adequacy by the Agency will vary with the types of authorizations requested.

Item 4c: Training and Experience (continued)

If other persons will use radioactive materials in the absence of persons specified above, the specification of the training of such personnel should include (a.) instruction in radiation safety including topics covered and by whom taught, (b.) on-the-job training in use of radioactive materials, and (c.) determination of competency to work in the absence of supervisory personnel.

The use of radioactive materials by a person with a minimum of training and experience under controlled conditions may be justified provided it is done under the surveillance of a Radiation Safety Officer. Such minimum training and experience may consist of a few hours of training and experience in the use of one or more radioactive materials similar to the use proposed in the application under the supervision and tutorship of a licensed user.

Item 5a: Radiation Safety Officer (RSO)

Specify the name of the person who will be designated as the Radiation Safety Officer (RSO). This person will be responsible for implementing the radiation safety program and must therefore be readily available to the users in case of difficulty. He must be trained and experienced in radiation protection and in the use and handling of radioactive materials. In a small program not requiring a full-time RSO, the duties of the RSO may be assigned to one of the persons named under Item 4.A. above. Note, however, that it must be established that the person acting as RSO will have the opportunity to devote sufficient time to the radiation safety aspects of the program for the use of radioactive materials.

Item 5b: Duties of the RSO

Attachment B lists model duties for the RSO. If the model duties listed will be used, sign, date and include Attachment B with the application. If the equivalent duties will be established, include them with the application. In either case, mark the appropriate box in Item 5.B.

**Items 6, 7
and 8: Radioactive Material Description**

Describe the radioactive sealed sources used by isotope, manufacturer and model number, and activity in millicuries. A separate possession limit for each nuclide must be specified. Limits requested must cover the total anticipated inventory, including stored materials and waste, and should commensurate with the applicant's needs and facilities for safe handling.

**ARIZONA RADIATION REGULATORY AGENCY
LEGAL STRUCTURE FORM FOR THE RADIOACTIVE MATERIALS PROGRAM**

Check appropriate selection and provide registration number if currently registered.

New License	Registration Renewal	Registration Amendment (name, address, and/or ownership changes)
	For renewals and amendments, provide registration number here. -	

Business Name	Street Address		DBA if different	Suite Number
Physical Address: location where devices or RAM is utilized	City		State	Zip Code
			Arizona	
Mailing Address: Or check box if same as: Physical Address	Street Address			Suite Number
	City		State	Zip Code

Contact Name	Contact's Title	
Phone No.	Fax No.	Email

Check Type of License

Medical	Distribution	Fixed Gauge	Portable Gauge	Particle Accelerator

Legal Structure of Licensee – Check one and provide the required information

Individual or Sole Proprietorship	ARS § 1-502 requires applicants in this classification to submit a legible copy of their driver's license and social security card for verification of U.S. citizenship.		
Any Corporation (e.g. LLC, Non-profit, S-Corp., P.C.)	Provide your incorporation state and file number.	State	File Number
Partnership	You are required to submit an attachment to this application listing the name and address of each individual or legal entity owning a partnership interest and the percent ownership held by each.		
City, County, or State Government	Business name of applicant above must clearly identify the government entity.		

If you completed this form using Adobe Reader, please sign electronically. If you do not have an electronic signature, Adobe will assist you in creating your electronic signature once you place the cursor in the signature field below. Forms completed using Adobe Reader, then printed and signed by hand will also be accepted. Submit with supplemental forms via mail, fax, or email. Forms received without either an electronic or hand signature will not be processed. Mail: AZRRA, 4814 South 40th Street, Phoenix, AZ 85040. Fax 602-437-0705. Email: pkern@azrra.gov or bgoretzki@azrra.gov. For questions regarding Radioactive Material or Particle Accelerator license, please visit the Radioactive Materials section of www.azrra.gov. New Licensees will also find there a downloadable fee schedule. Please make check or money order payable to Arizona Radiation Regulatory Agency or AZRRA.

Date	The applicant or any official executing this application on behalf of the applicant certifies that this application has been prepared in accordance with Arizona Administrative Code, Title 12, Chapter 1, and all information contained on this application, including any supplements and attachments, is true and correct to the best of his or her knowledge and belief.		
Name	Title	Signature	