



**ARKANSAS DEPARTMENT OF HEALTH  
RADIATION CONTROL SECTION  
RADIOACTIVE MATERIALS PROGRAM**

**APPLICATION FOR RADIOACTIVE MATERIAL LICENSE**

INSTRUCTIONS - Complete Items 1 through 26 as applicable. **Submit information on 8-1/2" by 11" paper where necessary.** Item 26 must be completed on all applications. **Mail two copies to:** Arkansas Department of Health, Radioactive Materials Program, 4815 West Markham, Slot 30, Little Rock, AR 72205-3867. Upon approval of this application, a Radioactive Material License will be issued. The License is subject to the Rules and Regulations for Control of Sources of Ionizing Radiation.

<b>1. NAME AND MAILING ADDRESS OF APPLICANT</b> (Institution, firm, company, person, etc.)		<b>2. STREET ADDRESS(ES) AT WHICH RADIOACTIVE MATERIAL WILL BE USED, IF DIFFERENT FROM ITEM 1</b>	
Telephone Number _____ Fax Number _____			
<b>3. PERSON TO CONTACT REGARDING THIS APPLICATION</b>		<b>4. TELEPHONE NUMBER OF CONTACT PERSON</b>	
<b>5. LICENSE FEE ENCLOSED</b>  Yes _____ No _____		<b>6. TYPE APPLICATION</b> ____ New License ____ Renewal-License No. _____	
<b>7. INDIVIDUAL USERS WHO WILL USE OR DIRECTLY SUPERVISE THE USE OF RADIOACTIVE MATERIAL</b> (Attach a list of Users, providing the Name and Title of each individual.)			
<b>8. TRAINING AND EXPERIENCE OF USERS</b> (Refer to the Licensing Guide, Item 8, for additional information.)			
<b>9. RADIATION SAFETY OFFICER</b> (Refer to the Licensing Guide, Item 9, for additional information.)  Name _____			
<b>10. PERSONNEL TRAINING PROGRAM</b> (Refer to the Licensing Guide, Item 10, for additional information.)			
<b>11. RADIOACTIVE MATERIAL</b> (Refer to the Licensing Guide, Item 11, for information.)			
<b>a. Element and Mass Number</b>	<b>b. Chemical and/or Physical Form</b>	<b>c. Maximum Amount to be Possessed at any One Time</b>	
<b>d. Describe Purpose for which Radioactive Materials Listed in Item 11.a. will be Used</b>			
<b>12. LEAK TESTS OF SEALED SOURCES CONTAINING RADIOACTIVE MATERIAL.</b> (Refer to the Licensing Guide, Item 12, for additional information.)			

<b>13. RADIATION DETECTION INSTRUMENTS</b> (Refer to the Licensing Guide, Item 13, for additional information.)				
<b>a. Type of Instruments</b> (Include manufacturer and model number)	<b>b. Number Available</b>	<b>c. Radiation Detected</b>	<b>d. Sensitivity Range</b> (mR/hr)	<b>e. Use</b> (monitoring, surveying, or measuring)
<b>14. RADIATION DETECTION INSTRUMENT CALIBRATION</b> (Refer to the Licensing Guide, Item 14, for additional information.)				
<b>15. PERSONNEL MONITORING PROGRAM</b> (Refer to the Licensing Guide, Item 15, for additional information.)				
<b>16. FACILITIES AND EQUIPMENT</b> (Refer to the Licensing Guide, Item 16, for additional information.)				
<b>17. RADIATION SURVEY PROGRAM</b> (Refer to the Licensing Guide, Item 17, for additional information.)				
<b>18. ORDERING, RECEIVING, AND SHIPPING RADIOACTIVE MATERIAL</b> (Refer to the Licensing Guide, Item 18, for additional information.)				
<b>19. WASTE DISPOSAL</b> (Refer to the Licensing Guide, Item 19, for additional information.)				
<b>20. CONTROL AND SECURITY OF RADIOACTIVE MATERIALS</b> (Refer to the Licensing Guide, Item 20, for additional information.)				
<b>21. TRANSPORTATION OF RADIOACTIVE MATERIALS</b> (Refer to the Licensing Guide, Item 21, for additional information.)				
<b>22. OPERATING PROCEDURES</b> (Refer to the Licensing Guide, Item 22, for additional information.)				
<b>23. EMERGENCY PROCEDURES</b> (Refer to the Licensing Guide, Item 23, for additional information.)				
<b>24. ADMINISTRATIVE PROCEDURES</b> (Refer to the Licensing Guide, Item 24, for additional information.)				
<b>25. MANAGEMENT CONTROL</b> (Refer to the Licensing Guide, Item 25, for additional information.)				
<b>26. CERTIFICATION</b> The applicant and any official executing this certificate on behalf of the applicant named in Item 1, certify that this application has been prepared in accordance with the <u>Rules and Regulation for Control of Sources of Ionizing Radiation</u> , and that all information contained herein, including any supplements attached hereto, is true and correct to the best of our knowledge and belief.				
_____ Signature of Certifying Official		_____ Date		
_____ Typed Name and Title of Certifying Official		_____ Date Received by Radioactive Materials Program		