

APPROVAL FOR RADIATION GENERATING DEVICE PROCUREMENT

This form is completed by the Custodian of the Radiation Generating Device and is submitted to Radiation Protection for review and approval.

RGD ID		Machine No.:	
RGD Type			
<i>(Check RGD type in accordance with the RGD terminology)</i>			
<input type="checkbox"/> Sealed Gamma Ray	<input type="checkbox"/> Sealed Neutron Source	<input type="checkbox"/> Small Accelerator	<input type="checkbox"/> Research and Analytical X-Ray
<input type="checkbox"/> Electron Generating Device	<input type="checkbox"/> X-Ray for Radiography	<input type="checkbox"/> Particle Accelerator	<input type="checkbox"/> Neutron Generator
<input type="checkbox"/> Cabinet X-Ray	<input type="checkbox"/> Medical X-Ray		
RGD Information			
Manufacturer:		Requisition No.:	
Location of Use:		Requested Delivery Date:	
Source Information			
<i>The required radioactive source encapsulation integrity is determined based upon the classification number. Documentation confirming this integrity MUST BE provided upon delivery of the source. Refer any questions to Radiation Protection.</i>			
Radionuclide:		Activity in Ci:	
		Dimensions of Source:	
Source Description:			
Description of RGD Use and Additional Description of the Unit if required			
<i>(If use is for replacement of an existing RGD please state. If this is a new type or use for an RGD then briefly outline the plans for use and any radiation safety considerations involved)</i>			
Requestor:		Badge No.:	
		Date:	
THIS SECTION TO BE COMPLETED BY RADATION PROTECTION			
Conditions of use:			
Other Comments:			
RPM Approval Signature:			