Request for Radiological Clearance Form

Α	User/Requestor Name: Email:	Of	Off/Cell:				
В	Provide as much historical information regarding the Material & Equipment or Areas (M&E/A) subject to this clearance, including a physical description, material composition, isotopes used, location(s), DOE Property ID, and a history of use/spills of radioactive material. (Desired info is related to how the item(s) may/may not be impacted radiologically):						
		Yes	No	Unknown			
	1. Has the M&E/A ever been located or used in a Radiologically Controlled Area (RCA)?						
С	2. Radioactive Material Area (RMA)/Radiological Buffer Area (RBA)?						
	3. Radiological Area (e.g. CA, HCA, RA, HRA, or ARA)?						
	4. Has it ever been used in an area that would have caused Induced Activity (e.g. within the						
	posted RCA at an Accelerator Facility or within 30 cm of the electron beam at ALS?)?						
	5. Are the items subject to Export Controls?						
D	1. Where is the item currently located (Bldg., Room, General Location)? 2. Where will the item be cleared to (e.g. Vendor, Landfill, Other Area)? 3. What is the final disposition of the item (e.g. Recycle, Public Use)? 4. Who will be receiving the item (e.g. Name, Organization, Company)?						
	I certify that the above is true and correct to the best of my knowledge:						
Ε							
	Print Name Signature Date						
	Email completed request to rpg-request@lbl.gov						
	Radiation Protection Group Use Only						
	Review: ☐ Previous Surveys ☐ HSA/FRIS ☐ WPC(s) ☐ Other	_					
F	Additional Information/Process Knowledge/Justification for Clearance:						
	Is the item approved for clearance based on process knowledge alone?	Yes□	l N	lo□			
	Does a Scoping Survey need to be performed?	Yes□	N	lo□			
	M&E/A Classification: ☐ Class 1 ☐ Class 2 ☐ Class 3						

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	The M8	kE/A was s	urveyed according to:				S	urvey N	umber:				
	☐ Standard Survey Plan ☐ S			☐ Specific Survey Plan # ☐ Other:									
			the M&E/A approved							lf Ye	es	No□	
			are approved, but no					litional	info."				
G	Is the	M&E/A ap	proved under a highe	r Tier clearance?	Tier 2	Other (Tier 3)					N/A		
	Additional Information/Special Instructions:												
	HP	_	Print Name	//Sig	nature			Date					
	(For Ti	ier 2/3 Cle											
	RCM/Designee/												
			Print Name	Sig	nature			Date	9				
										DD 5	-014	DO4 000	_
										KP-I		R01-006	
											05	/06/202	. 2
		Box A:	The requestor is th	ne person responsi	ble and ca	n make decisio	on regardi	ng the	item(s)	being			
			cleared. If you are	•	alf of the i	esponsible pe	rson, plea	se prov	vide bot	h cont	tact		
			information. Exam	iple:									
			5		405		1212						
			Ernest O. Lawrence	e, <u>eolawrenec@lbl</u>	<u>I.gov</u> , x195	<mark>.2</mark> or (510)555	-1212						
		Box B:	To aid all parties in	the evaluation an	ıd determi	nation regardi	ng the rer	noval c	of contro	l of th	ne		
			items being reques			_	-						
			Equipment or Area	•	s use to as	sist in determ	ining whe	re/hov	v the ite	m nee	eds		
			to be surveyed. Ex				_				_		
				attached to Beam		was used to h	nouse Th-2	232 at a	<mark>a vacuur</mark>	n; DO	E		
	property number is 324034028349," or												
	"This item was used to hold radioactive samples that originated from Oak Ridge National												
	Laboratory. Primary isotopes were U-235, Tc-99 and Ge-68. Item has been in use since 2013," or												
				avy Elements Rese	arch Facili	ty Room used	with a va	riety of	f alnha a	nd he	ta		
				pes, multiple Curie		**					· cu		
			<u> </u>	est floor, under fur									
				exposed to a 16 M					ninutes."				
			5 11 11 11		/ > -1							_	
		Box C:	Describe the condi			ne item has be	een used, i	if it has	been in	any			
			areas controlled fo	ir radiologicai purț	Joses.								
			B75 room 127 ar	nd B75A rooms 10	1 & 102			Yes	No	Unkno	own	1	
				ever been located of		Radiologically		\boxtimes				1	
			Controlled Area (R										
			l	terial Area (RMA)/R			A)?		\boxtimes			1	
				ea (e.g. CA, HCA, RA,					 	\boxtimes		1	
				n used in an area tha				\boxtimes					
				n the posted RCA at ron beam at ALS?)?	an Acceler	ator Facility or v	within						
				ubject to Export Con	trols?							1	
				·					<u>, </u>	-		1	
												_	

Request for Radiological Clearance Form Box D: Describe what the end use of the item will be, who will be receiving it, or if it will be disposed

	of. This information is critical in determining the clearance criteria for the item and in determining how it must be handled. Be a detailed as possible.						
	1. Where is the item currently located (Bldg., Room, General Location)?	Need details so RPG persons can go locate and survey the item(s) without aid of the requester					
	2. Where will the item be cleared to (e.g. Vendor, Landfill, Other Area)?	RPG needs to know exactly where the item(s) will reside if cleared; the clearance decision structure is based on an item's end state, due to the differing regulatory requirements and guidance.					
	3. What is the final disposition of the item (e.g. Recycle, Public Use)?	RPG needs to know exactly how the item(s) will be used if cleared; the clearance decision structure is based on an item's use, due to the differing regulatory requirements and guidance.					
	4. Who will be receiving the item (e.g. Name, Organization, Company)?	RPG needs to know specifically who will be receiving the item(s) to determine an additional rule or expectation related to the clearance, e.g., state licensing requirement, end state company/university policies for receipt, DOT, etc.					
Box E:	Requestor certification - Once all of the pertinent info the form must be signed and dated by the requestor, completed form is then emailed to rpg-request@lbl.g	with the name also printed. The					
Box F:	Depending on the radiological history of items, both current and past, including use and condition, an item may be cleared without survey. Regardless of the answer, yes or no, provide information and justification below in the next section of Box F "Additional Information/Process Knowledge/Justification for Clearance:" "Review: Previous Surveys HSA/FRIS WPC(s) Other" This section provides an indication of what, if any, records were evaluated regarding the clearance decision. As needed provide a brief discussion in the next line/section.						
"Additional Information/Process Knowledge/Justification for Clearance:" This section is a the HP provide a brief concise statement of key factors in the decision for or against clear of the requested item(s). These statements should be relatable to the requirements of program and not include superfluous narrative, just key facts that provide evidence related decision and any specific instruction that are related to this particular clearance and the surveyor or review with all of the above requirements and decision							
	"Does a Scoping Survey need to be performed?" If ye item(s) will likely fit. "M&E/A Classification: □ Class 1 □ Class 2 □ Clast definition of classification.						
Box G: "The M&E/A was surveyed according to: Survey Number:" Obtain survey number for							
	or survey log. "□ Standard Survey Plan": A generic survey plan develop shield blocks	elop for many like items, e.g., clearance					

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"	\square Specific Survey Plan #": The number for the survey plan developed specifically for the
it	ems being cleared according to this clearance request.
"	\square Other:" Other may be related to specific survey instruction that are provided below. These
r	nstruction are simple enough that they do not justify a complete survey plan for the
c	learance; or may be pointing the surveyor to more than one survey plan
ls	the M&E/A approved for unrestricted clearance based on survey results (IFB)? Tier 1 Clearance: If the
re	esults of the survey indicate that the M/E&A is IFB, then select "Yes" and select "N/A" in the following
Se	<mark>ection. If No", proceed below.</mark>
	the M&E/A approved for controlled clearance based on survey results? Based on which criteria?: <mark>If</mark>
ł	ne M/E&A is approved for clearance based on alternative criteria (Tier 2/Tier 3), check the appropriate
b	ox and provide justification in the following section.
Α	dditional Information/Special Instructions: If the M&E/A cannot be cleared (found to be
C	ontaminated/activated), if special instructions for handling the material are necessary or if
a	dditional approvals are needed (such as Tier 2/3, enter the information here. This section is
	or documenting justifications and actions taken as a result of the survey performed.
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