

UNIVERSITY OF OTTAWA
RADIATION DECOMMISSIONING FORM (Permit, Room(s), Equipment)

Name of Permit Holder: _____ Permit/s #: _____

PART A SCOPE OF DECOMMISSIONING

Table I - DECOMMISSIONING OR TRANSFERRING A PERMIT

Type of Radioisotope (unsealed or sealed within a device):	
Radioisotopes on permit:	
Use & Storage Locations:	
Permit being:	Transferred <input type="checkbox"/> or Decommissioned <input type="checkbox"/>
If transferred, list name & Permit #	

Table II - DECOMMISSIONING A LOCATION (ROOM)

Location (room) to decommission	Radioisotopes	
For shared facilities:		
Will room be decommissioned as an authorized radioactive material use/storage area?	Yes _____	No _____
Name other permit holders or researchers who will continue to use the room:		

Table III - DECOMMISSIONING or TRANSFERRING EQUIPMENT

Equipment /Instrument Type:	
Manufacturer:	
Model Number:	
Serial Number:	
Radioisotope:	
If being transferred, list name and permit #	

PART B INVENTORY and WASTE:

Table IV - Inventory & Waste

Radioactive material is being kept (and agrees with information in ORM database)	Yes	No	N/A
Radioactive material disposed of (and agrees with information in ORM Database)	Yes	No	N/A
If Radioactive Material is to be transferred, list name & Permit #:			
Use and disposition forms have been filed with ORM	Yes	No	N/A
Waste held for storage has been transferred to:			
Waste held for storage is labelled with radioisotope, activity, disposal date, disposal limit	Yes	No	N/A
Waste logs (LSW, Solid...) are retained and affixed to the waste pails	Yes	No	N/A
Does waste remain?	Yes	No	N/A

PART C CONTAMINATION MONITORING

Table V – Contamination Monitoring

Contamination Monitoring Information					
By:			Date:		
Type of Monitor (eg. Liquid scintillation, Gamma cell, Handheld meter):					
Make:		Model:		Serial No.	
Last Calibration Date:			Company who performed calibration:		
Liquid Scintillation Counter (LSC) or Gamma Cell Information					
Energy Range Monitored:			Radioisotopes monitored with detector efficiencies:		
If LSC or gamma cell was not calibrated in the last month, complete the Operational Check (or prove instrument working properly):					
Operational Check					
Calibration std.	Activity of Std. (dpm)	Activity Measured (cpm)	Detector Efficiency for specific radioisotope	Calculated Efficiency (measured cpm / Std. dpm * 100)	In Agreement Yes/No

Summary of Contamination Monitoring Results		
Radioisotope monitored	Radioisotope Class	Maximum non-fixed contamination results - averaged over an area not exceeding 100cm ² (Bq/cm ²)*
Was fixed contamination found?		Yes <input type="checkbox"/> No <input type="checkbox"/>
If found, list locations:		
Action taken:		

***Requirements:**

- Non-fixed contamination shall not exceed the following limits for the radioisotopes listed above: Class A (0.3 Bq/cm²), Class B (3 Bq/cm²), and Class C (30 Bq/cm²)
- Results must be demonstrated meet Bq/cm²; CPM counts alone will not be accepted!
- Map and monitoring results are to be attached. Also, include all original instrument print outs such LSC print outs. All areas monitored must be identified. Surfaces to be monitored (where applicable) are: bench tops, sinks, sink drains, fumehoods, fumehood ducts, floors near waste and use areas, refrigerators or any other surfaces that may have become contaminated.
- Contamination monitoring records for last 3 years.
CNSC has stipulated in the regulations that the last 3 years of records must be available. You can either submit the originals or send us scan records. If you are decommissioning your permit the Radiation specialist will retain the records. If you are decommissioning a room or location, you are responsible for keeping your last 3 years of records.
- If Instrument was calibrated within the past year, include calibration certificate

PART D PERSONNEL

Table VI - Status of Authorized Users

Persons listed on Permit	Will they remain as Users? Yes/No	If Yes, list Permit # they will work under

PART E SIGNAGE

All radioactive wording, signage, permits, posters have been removed ? Yes No.
 For common rooms, your permit has been removed ? Yes No.

	<i>Signature</i>	<i>Date</i>
Decommissioning Activities Undertaken by:		
Reviewed and Accepted by Permit Holder:		
Approved by (Risk Management Specialist – Radiation):		