



APPLICATION FOR USE OF RADIOACTIVE MATERIALS

Information on Individual User

Name: _____ Group: _____

Group Leader: _____ Program: _____

Ames Lab Address: _____ Telephone: _____

Other personnel working on this Activity: _____

Information on Proposed Activity

Provide a brief description of the proposed activity including the purpose, procedures, list of equipment, activities of sources, safety precautions, etc. Also provide diagrams as necessary.

Radioactive Source Information

Item #	Radioisotope	Total Quantity	Quantity Per Experiment	Chemical Form

Period of Usage of Above Isotopes

Facility Information

Attach plans of the laboratory, giving the name of the building and room number. Show the locations of fume hoods, sinks, lab benches, etc. If necessary for the proposed usage, describe special features, such as thickness of walls and ceilings, occupancy of adjacent areas, contamination control procedures, etc:

Approval

We certify that we have reviewed the Ames Laboratory Radiation Safety Manual, 10 CFR 835, and the [Ames Laboratory Radiological Protection Program](#) and that this application is in accordance with those documents.

Applicant: _____ Group Leader: _____

Send one copy to Environment, Safety & Health, G40 TASF. Retain one copy for your files.

Approved by:

Radiation Safety Officer

Date

Chair, ALARA Committee

Date