

# Form 27B – NOTIFICATION SALE DISPOSAL/DECOMMISSION OF AN X-RAY APPARATUS



Regulation 41, Radiation Protection & Control Regulations 2022

To be completed by the owner and emailed to: [rpb.compliance@sa.gov.au](mailto:rpb.compliance@sa.gov.au)

Radiation Protection Branch  
Environment Protection Authority  
GPO Box 2607, Adelaide SA 5001

Enquiries: phone: (08) 8463 7826 fax: (08) 8124 4671 email: [EPAradiationprotectionbranch@sa.gov.au](mailto:EPAradiationprotectionbranch@sa.gov.au)

A separate notification is to be submitted for each apparatus

Sale disposal  Decommission disposal

Name of X-ray apparatus owner \_\_\_\_\_

Business address \_\_\_\_\_

### Contact person

Name \_\_\_\_\_ Signature \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

EPA apparatus registration no \_\_\_\_\_ Licence to Possess no \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Portable \_\_\_\_\_ Mobile \_\_\_\_\_ Fixed \_\_\_\_\_

Location of apparatus \_\_\_\_\_

Serial numbers: Generator \_\_\_\_\_

X-ray tube \_\_\_\_\_ X-ray tube housing \_\_\_\_\_

### Sale disposal

Date of sale / disposal \_\_\_\_\_

Name of new owner \_\_\_\_\_

Email of new owner \_\_\_\_\_

Address of new owner \_\_\_\_\_

Telephone of new owner \_\_\_\_\_

### Decommission disposal

Reason for decommission \_\_\_\_\_

Decommission method \_\_\_\_\_

Date of decommission \_\_\_\_\_

Decommissioned By (name of qualified technician) \_\_\_\_\_

Qualified technician signature \_\_\_\_\_

Telephone \_\_\_\_\_

### OFFICE USE ONLY

Owner no \_\_\_\_\_

Registration no \_\_\_\_\_

L2P no \_\_\_\_\_