

SHIELDING DECLARATION

(Section 34)

Radiation Protection and Control Act 1982



OWNER DETAILS

Please provide the details of the legal owner of the apparatus. Note: the legal owner can be a business or an individual but it cannot be both.

Name				
Address				
	State/territory		Postcode	
Tel number(s)	Fixed line		Mobile	

APPARATUS DETAILS

Please provide the details of the apparatus for which the declaration is being made. If the serial numbers are not indicated on the apparatus, simply write as 'unknown'.

Make & model				
Serial numbers	Generator/controller			
	Tube housing		X-ray tube	
Room location		Type	<input type="checkbox"/> Mobile	<input type="checkbox"/> Portable
Address (if different from above)				
	State/territory		Postcode	
Tel number(s) (if different from above)	Fixed line		Mobile	

DECLARATION BY OWNER

I hereby declare that the apparatus detailed above is **NOT** a fixed unit. The apparatus detailed above is mobile or portable and is **NOT** used primarily in a single room or area, and therefore a shielding verification assessment is not required.

Signature		Date	
Name (please print)		Phone No.	
Email			

This form can be lodged by post to: Environment Protection Authority
Radiation Protection Branch
GPO Box 2607, ADELAIDE SA 5001

Or lodged via Fax: (08) 8124 4671

Email: mailto:radiationprotection@sa.gov.au

OFFICE
USE ONLY

Owner No.

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Reg. No.

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