RADIATION (SAFETY CONTROL) REGULATIONS

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- Application for licence
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SCHEDULE 1

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REGULATIONS 1980, No. 3*

Regulations under the Radiation (Safety Control) Act

I, JOHN ARMSTRONG ENGLAND, the Administrator of the Northern Territory of Australia, acting with the advice of the Executive Council, hereby make the following Regulations under the Radiation (Safety Control) Act.

Dated this eleventh day of January, 1980.

J. A. ENGLAND Administrator

RADIATION (SAFETY CONTROL) REGULATIONS

1. These Regulations may be cited as the Radiation (Safety Control) Regulations. Short title 2. A reference in these Regulations to a form by number is a reference to the form Reference to so numbered in Schedule 1.

Form in Schedule

3. For the purposes of sections 11(2) and 12(3)(b) of the Act an application for a Application for licence licence or for the renewal of a licence shall

(a) be in accordance with Form 1; and

(b) subject to regulation 8, be accompanied by a fee of \$50.

4. For the purposes of section 11(2) of the Act, a licence granted by the Chief Form of Medical Officer shall be in accordance with Form 2.

5. For the purposes of section 15(1) of the Act, a notice of an appointment of a Notice of Radiation Safety Officer and notice of employment of a radiation worker shall be in appointment accordance with Form 3.

6. For the purposes of section 30(1) of the Act, an application for registration of an Application irradiating apparatus shall ---registration

(a) be in accordance with Form 4; and

(b) subject to regulation 8, be accompanied by a fee of \$20.

7. For the purposes of section 31(1) of the Act a certificate of registration of an Certificate irradiating apparatus shall be in accordance with Form 5. registration

8. No fee shall be payable on an application for a licence or certificate of No fee registration by a person in the service of the Territory or an authority of the Territory $T_{\text{Territory}}^{\text{payable by}}$ where the application is made in the course of the person's service to the Territory or the authority.

9. If the Chief Medical Officer does not grant a licence or certificate of registration Refund to an applicant the Chief Medical Officer shall refund to the applicant any fee accompanying the application.

10. The Chief Medical Officer may, for the purpose of imposing conditions on a Conditions in licence licence granted under section 11(2) of the Act or a certificate of registration issued under section 31(1) of the Act, refer in the licence or certificate to a sign in Schedule 2 by the use of the number of the sign in the Schedule.

*Notified in the Northern Territory Government Gazette on 18 January, 1980.

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SCHEDULE 1

FORM 1

Regulation 3

NORTHERN TERRITORY OF AUSTRALIA

Radiation (Safety Control) Act

APPLICATION FOR LICENCE

TO: CHIEF MEDICAL OFFICER, DEPARTMENT OF HEALTH

NAME OF APPLICANT:

DATE OF BIRTH

TELEPHONE No.

TELEPHONE No.

TELEX No.

ADDRESS OF APPLICANT:

NAME OF EMPLOYER:

POSTAL ADDRESS:

POSITION HELD BY APPLICANT:

RELEVANT EXPERIENCE AND QUALIFICATIONS OF APPLICANT:

SECTION 1. APPLICATION FOR A LICENCE/RENEWAL* OF LICENCE to:— (Please tick $[\checkmark]$ as applicable)

1.1 POSSESS SELL	MANUFACTURE HANDLE	PURCHASEDISPOSE OF	[]	USE [] RADIOACTIVE SUBSTANCE(S).
1.2 POSSESS SELL	[] MANUFACTURE [] HANDLE] PURCHASE] DISPOSE OF	[]	USE[] IRRADIATING APPARATUS.

1.3 CARRY OUT MAINTENANCE ON IRRADIATING APPARATUS []

1.4 General nature of business requiring radioactive substances and/or irradiating apparatus:

1.5 Principal premises where radioactive substances/and irradiating apparatus* are to be used:

1.6 Location within premises (1.5) of radioactive substances storage rooms:

1.7 Location within premises (1.5) of other radioactive substances handling facilities:

1.8 Rough plans of facilities 1.7 & 1.8 accompany this application as ATTACHMENT A. YES [| NO]]

SECTION 2. PARTICULARS OF RADIOACTIVE SUBSTANCES:--

RADIOACTIVE MAXIMUM SUBSTANCE RADIOACTIVITY	PHYSICAL FORM	PRINCIPAL PURPOSE	PROPOSED DELIVERY DATE or FREQUENCY
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Particulars of further radioactive substances accompany this application as ATTACHMENT B. YES []NO []

DETAILS OF PROPOSED DISPOSAL PROCEDURES FOR ABOVE MENTIONED RADIOACTIVE SUBSTANCES

SECTION 3. PARTICULARS OF ALL IRRADIATING APPARATUS

MANUFACTURER & MODEL/TYPE NUMBER HELD PRINCIPAL PURPOSE

Particulars of further irradiating apparatus accompany this application as ATTACHMENT C. YES [] NO []

SECTION 4. PARTICULARS OF RADIATION MEASURING INSTRUMENTS & EQUIPMENT

DETAILS OF PERSONNEL MONITORING ARRANGEMENTS:

DETAILS OF RADIATION MEASURING INSTRUMENTS:

& MODEL/TYPE* PURPOSE	MANUFACTURER & MODEL/TYPE*	NUMBER HELD	DETECTOR TYPE	PRINCIPAL PURPOSE
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*Delete if inapplicable.

The prescribed fee of \$50.00 must accompany this application.

Dated this	day of	—OF	FFICE U	SE ONLY-	
		Date received	Value	Receipt No	o. R.T.M.
(Signature of Appli	icant)	Licence No.	Dat	e Issued	Officer

FORM 2

Regulation 5 Licence No.

NORTHERN TERRITORY OF AUSTRALIA

Radiation (Safety Control) Act

LICENCE

This licence authorises

of

to

the radioactive substances and the irradiating apparatus described hereunder or on attachments hereto, subject to the provisions of the *Radiation (Safety Control) Act* and any conditions endorsed hereon or attached hereto.

PARTICULARS OF RADIOACTIVE SUBSTANCES

RADIOACTIVE SUBSTANCE	MAXIMUM ACTIVITY	PHYSICAL FORM (if applicable)	PRINCIPAL PURPOSE	

NUMBER HELD

PARTICULARS OF IRRADIATING APPARATUS

MANUFACTURER & MODEL TYPE PRINCIPAL PURPOSE

PREMISES TO WHICH LICENCE APPLIES

CONDITIONS

This licence remains in force until

Dated this

, 19 .

(CHIEF MEDICAL OFFICER)

day of

FORM 3

Regulation 6

NORTHERN TERRITORY OF AUSTRALIA

Radiation (Safety Control) Act

LICENCE No. (if known)

TO: CHIEF MEDICAL OFFICER DEPARTMENT OF HEALTH

NOTIFICATION OF EMPLOYMENT OF RADIATION WORKER or RADIATION SAFETY OFFICER

NAME OF LICENSEE:

ADDRESS OF LICENSEE:

NAME OF RADIATION WORKER [] RADIATION SAFETY OFFICER []

RELEVANT QUALIFICATIONS (IF ANY):

DETAILS OF RELEVANT EXPERIENCE:

PROPOSED COMMENCEMENT DATE:

for NOTIFICATION REGARDING RADIATION SAFETY OFFICERS ONLY:

PRIVATE ADDRESS OF RADIATION SAFETY OFFICER:

TELEPHONE No.

TELEPHONE No.

PRIVATE ADDRESS OF LICENSEE:

Dated this

day of , 19 .

(Signature of Licensee)

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FORM 4

Regulation 8

1

NORTHERN TERRITORY OF AUSTRALIA

Radiation (Safety Control) Act

APPLICATION FOR REGISTRATION OF IRRADIATING APPARATUS TO: CHIEF MEDICAL OFFICER DEPARTMENT OF HEALTH

NAME:

ADDRESS:

TELEPHONE No. TELEX No.

MAXIMUM TUBE CURRENT:

CURRENT LICENCE NUMBER:

DATE OF ISSUE: /

(If licence number not known) DATE OF LODGEMENT OF APPLICATION FOR LICENCE / /

PARTICULARS OF IRRADIATING APPARATUS

MANUFACTURER:

MODEL:

TYPE:

MAXIMUM TUBE VOLTAGE:

MINIMUM PERMANENT TOTAL FILTRATION:

DATE OF MOST RECENT CALIBRATION:

NAME OF PERSON PERFORMING CALIBRATION:

DEPARTMENT or COMPANY (of person performing calibration):

LICENCE NUMBER OF DEPARTMENT or COMPANY PERFORMING CALIBRATION (if known):

LOCATION OF IRRADIATING APPARATUS ON PREMISES NOMINATED IN LICENCE APPLICATION:

Rough plans of location orientation & shielding details accompany this application as ATTACHMENT A. YES [] NO []

PRINCIPAL PURPOSE or USES OF THE IRRADIATING APPARATUS:

The prescribed fee of \$20.00 must accompany this application.

(Cheques/Money Orders to be made payable to "The Receiver of Territory Moneys".) EMPLOYEES OF N.T. GOVERNMENT DEPARTMENTS AND AUTHORITIES EXEMPTED FROM PAYING FEE.

		-OFFICE USE ONLY-
		Date received Value Receipt No. R.T.M.
Dated this	day of	, 19 .
		Certificate No. Date issued Officer

(Signature of Applicant)

FORM 5

Regulation 9 Certificate No.

NORTHERN TERRITORY OF AUSTRALIA

Radiation (Safety Control) Act

CERTIFICATE OF REGISTRATION

This certificate certifies that the irradiating apparatus described hereunder is hereby duly registered, subject to the provisions of the *Radiation (Safety Control) Act* and any conditions endorsed hereon or attached hereto, in the name of

PARTICULARS OF IRRADIATING APPARATUS:

|--|

MODEL:

TYPE:

MAXIMUM TUBE CURRENT:

MAXIMUM TUBE VOLTAGE:

MINIMUM PERMANENT FILTRATION:

PRINCIPAL PURPOSE OR USE OF IRRADIATING APPARATUS:

CONDITIONS:

Dated this

day of

, 19 .

(CHIEF MEDICAL OFFICER)

SCHEDULE 2

Regulation 10

Radiation (Safety Control) Act

RADIATION WARNING SIGNS

SIGN 1(a)

CAUTION



THIS APPARATUS EMITS RADIATION WHEN ENERGISED

SIGN 2(a)

이 아이는 것 같아요. 영화 물란지 않는 것이

CAUTION



RADIOACTIVE SUBSTANCE(S)

SIGN 3(a)

CAUTION



RADIATION

Note:

(a) Radiation warning signs shall be printed in black letters on a yellow background. The trefoil shall be shown in black.