



Australian Government

Australian Radiation Protection and Nuclear Safety Agency

## FACILITY LICENCE APPLICATION

# PRESCRIBED RADIATION FACILITY

Use this form to apply for a facility licence for a prescribed radiation facility under section 32 of the *Australian Radiation Protection and Nuclear Safety Act 1998*. Applicant should refer to [Regulatory Guide: Applying for a Facility Licence for a Prescribed Radiation Facility](#) when completing this form.

REGULATORY SERVICES

REG-LA-FORM-240B v10

May 2016

## SECTION A – APPLICANT INFORMATION

<b>DEPARTMENT OR COMMONWEALTH BODY:</b>	
<b>PORTFOLIO:</b>	
<b>PERSON MAKING THE APPLICATION: (Department Secretary, CEO or other authorised delegate<sup>1</sup>)</b> NAME: POSITION: BUSINESS ADDRESS: PH: FAX: EMAIL:	
<b>NOMINEE (where applicable):</b> NAME: POSITION: BUSINESS ADDRESS: PH: FAX: EMAIL:	
<b>RADIATION SAFETY OFFICER (or contact person)</b> NAME: POSITION: BUSINESS ADDRESS: PH: FAX: EMAIL:	

### DECLARATION (To be signed by the person making the application)

I hereby declare that the information provided on this form and in support of this application is, to the best of my knowledge, complete and true in every particular.

Signed:

Date:

\_\_\_\_\_

<sup>1</sup>A copy of the instrument of authorisation must accompany the application if it has been signed by an authorised delegate.

## SECTION B – KIND OF PRESCRIBED RADIATION FACILITY

Indicate the kind of prescribed radiation facility for which a licence is sought<sup>2</sup>

ITEM	KIND OF PRESCRIBED RADIATION FACILITY	CHECK
1	Particle accelerator with a beam energy of more than 1 MeV	<input type="checkbox"/>
2	Particle accelerator capable of producing neutrons	<input type="checkbox"/>
3	Irradiator containing more than $10^{15}$ Bq of a controlled material	<input type="checkbox"/>
4	Irradiator containing more than $10^{13}$ Bq of a controlled material but not including shielding as an integral part of its construction	<input type="checkbox"/>
5	Irradiator containing more than $10^{13}$ Bq of a controlled material and including shielding as an integral part of its construction, but the shielding does not prevent a person from being exposed to the source	<input type="checkbox"/>
6	Irradiator containing more than $10^{13}$ Bq of a controlled material and including shielding as an integral part of its construction, and with a source that is not inside the shielding during the operation of the irradiator	<input type="checkbox"/>
7	Facility for the production, processing, use, storage, management or disposal of: (a) unsealed sources, for which the result worked out using the steps mentioned in subregulation 6 (2) is greater than $10^6$ ; (b) sealed sources, for which the result worked out using the steps mentioned in subregulation 6 (2) is greater than $10^9$	<input type="checkbox"/>

## SECTION C – TYPE OF AUTHORISATION

Indicate the type of authorisation sought

TYPE OF AUTHORISATION SOUGHT	CHECK
Prepare a site for a Prescribed Radiation Facility	<input type="checkbox"/>
Construct a Prescribed Radiation Facility	<input type="checkbox"/>
Possess or control a Prescribed Radiation Facility	<input type="checkbox"/>
Operate a Prescribed Radiation Facility	<input type="checkbox"/>
Decommission a Prescribed Radiation Facility	<input type="checkbox"/>
Abandon a Prescribed Radiation Facility	<input type="checkbox"/>

<sup>2</sup> Source: Table in clause 1 of Schedule 3B to the Australian Radiation Protection and Nuclear Safety Regulations 1999 (the Regulations)

## SECTION D – FACILITY DETAILS

### ADDRESS OF THE PRESCRIBED RADIATION FACILITY

### DETAILED DESCRIPTION OF THE PURPOSE OF THE PRESCRIBED RADIATION FACILITY

### DETAILED DESCRIPTION OF THE PRESCRIBED RADIATION FACILITY AND ITS SITE

### TYPE OF AUTHORISATION (*complete relevant section*)

#### PREPARE A SITE FOR A PRESCRIBED RADIATION FACILITY

1. *Provide a detailed site evaluation establishing the suitability of the site*

2. *Describe the characteristics of the site, including the extent to which the site may be affected by natural and man-made events*

3. *Provide information about any environmental impact statement requested or required by a government agency, and the outcome of the environmental assessment*

#### CONSTRUCT A PRESCRIBED RADIATION FACILITY

1. *Describe the design of the controlled facility, including ways in which the design deals with the physical and environmental characteristics of the site*

2. *Describe any fundamental difficulties that will need to be resolved before any future authorisation is given*

3. *Describe the construction plan and schedule*

4. *Provide information about a preliminary safety analysis report that demonstrates the adequacy of the design of the facility and identifies structure, components and systems that are safety related items (include copy of PSAR)*

5. *Describe the arrangements for testing and commissioning safety related items*

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**POSSESS OR CONTROL A PRESCRIBED RADIATION FACILITY**

1. *Describe the arrangements for maintaining criticality safety during loading, moving or storing nuclear fuel and other fissile materials at the controlled facility*

2. *Describe the arrangements for safe storage of controlled material and maintaining the controlled facility*

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**OPERATE A PRESCRIBED RADIATION FACILITY**

1. *Describe the structures, components, systems and equipment of the controlled facility as they have been constructed*

2. *Provide information about a final safety analysis report that demonstrates the adequacy of the design of the controlled facility, and includes the results of commissioning tests (include copy of FSAR)*

3. *Describe the operational limits and conditions of the controlled facility*

4. *Describe the arrangements for commissioning the controlled facility*

5. *Describe the arrangements for operating the controlled facility*

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## DECOMMISSION A PRESCRIBED RADIATION FACILITY

1. *Describe the decommissioning plan for the controlled facility*

2. *Describe the schedule for decommissioning the controlled facility*

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## ABANDON A PRESCRIBED RADIATION FACILITY

1. *Describe the results of decommissioning activities at the controlled facility*

2. *Provide details of any environmental monitoring program proposed for the site*

## SECTION E – PLANS & ARRANGEMENTS

*Describe the plans and arrangements for managing the facility and any associated sources in the space provided AND/OR provide clear references to where this information may be found within accompanying documentation.*

*Identify trusted international standards relevant to the proposed facility and describe how these will be applied or taken into account.*

### EFFECTIVE CONTROL ARRANGEMENTS

### SAFETY MANAGEMENT PLAN

### RADIATION PROTECTION PLAN

### RADIOACTIVE WASTE MANAGEMENT PLAN

### SECURITY PLAN

## EMERGENCY PLAN

## ENVIRONMENT PROTECTION PLAN

## SECTION F – ASSOCIATED SOURCES

*Is there controlled material and/or controlled apparatus used in connection with the facility?*

*NO - proceed to Section H*

*YES – describe in the space below*

*If Yes: identify the codes and standards relevant to the source(s) and describe how compliance will be achieved.*

## SECTION G – SOURCE DETAILS

*Complete the Excel Spreadsheet known as the Source Inventory Workbook (SIW) for any sources used in connection with the facility. [Click here for template](#)*

Note: For sealed sources, a copy of any source certificate or special form certificate should accompany the application as per item 5(d) of Part 2 of the Regulations.

## SECTION H – MATTERS TO BE TAKEN INTO ACCOUNT BY THE CEO

### INTERNATIONAL BEST PRACTICE IN RADIATION PROTECTION AND NUCLEAR SAFETY

*Describe how international best practice in radiation protection and nuclear safety will be considered with respect to the facility*

### INFORMATION ASKED FOR BY THE CEO

*Confirm that all information asked for by the CEO has been provided*

### UNDUE RISK

*Provide information to show that there is no undue risk from radiation associated with the facility*

### NET BENEFIT

*Provide information that demonstrates a net benefit from the proposed conduct*

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**ALARA**

*Provide information in relation to the proposed conduct to show that the magnitude of individual doses, the number of people exposed, and the likelihood that exposure will happen, are as low as reasonably achievable, having regard to economic and social factors*

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**CAPACITY TO COMPLY**

*Provide information to show that the applicant has the capacity to comply with the Regulations and any licence conditions that may be imposed*

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**AUTHORISED SIGNATORY**

*Confirm that the application has been signed by an office holder of the applicant or a person authorised by an office holder of the applicant*



## CHECKLIST

ITEM	Check	N/A
1. Completed and signed Section A – Applicant Information	<input type="checkbox"/>	<input type="checkbox"/>
2. Instrument of authorisation for authorised person	<input type="checkbox"/>	<input type="checkbox"/>
3. Organisational chart showing nominee	<input type="checkbox"/>	<input type="checkbox"/>
4. Completed Section B – Kind of PRF	<input type="checkbox"/>	<input type="checkbox"/>
5. Completed Section C – Type of Authorisation	<input type="checkbox"/>	<input type="checkbox"/>
6. Completed Section D – Facility Details	<input type="checkbox"/>	<input type="checkbox"/>
7. Documents to support Section D	<input type="checkbox"/>	<input type="checkbox"/>
8. Completed Section E – Plans and Arrangements (including relevant TIS)	<input type="checkbox"/>	<input type="checkbox"/>
9. Documents to support Section E	<input type="checkbox"/>	<input type="checkbox"/>
10. Completed Section F – Associated Sources (including relevant codes and standards)	<input type="checkbox"/>	<input type="checkbox"/>
11. Completed Section G – SIW (CD-ROM or as email attachment)	<input type="checkbox"/>	<input type="checkbox"/>
12. Copy of any Sealed Source or Special Form Certificates	<input type="checkbox"/>	<input type="checkbox"/>
13. Completed Section H – Other Matters	<input type="checkbox"/>	<input type="checkbox"/>
14. Documents to support Section H	<input type="checkbox"/>	<input type="checkbox"/>
15. Appropriate application fee	<input type="checkbox"/>	<input type="checkbox"/>

## SUBMITTING THE APPLICATION

This application form, all accompanying documentation, any CDs, and the appropriate application fee should be sent to:

The CEO of ARPANSA  
PO Box 655  
MIRANDA NSW 1490

OR

[licenceadmin@arpansa.gov.au](mailto:licenceadmin@arpansa.gov.au)

Note: If the email option is chosen, prior arrangements must be made for payment of the application fee either by cheque or electronic funds transfer before the application can be accepted. Arrangements should also be made for delivery of CDs.