

Registering a sealed radiation source in New Zealand

Office of Radiation Safety, Ministry of Health

Under Section 31 of the Radiation Safety Act 2016, anyone who manages or controls a radiation source in New Zealand must register the source with the Office of Radiation Safety. Please complete all fields in the applicable sections and email to: orsenquiries@health.govt.nz

SECTION 1.

Source Licence Holder

Source Licence Number

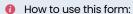
Name of Source Licence Holder (eg, a registered body corporate or sole trader)

Physical address where the source(s) are used/installed

Contact person's name

Contact person's phone number

Contact person's email address



- Save this form to the computer and open in Adobe Acrobat.
- All the fillable form fields will be highlighted.
- · Fill each field by selecting it and typing.
- Save the form to the computer and email it to orsenquiries@health.govt.nz

All sections must be filled in unless not applicable.

Please email completed form at orsenquiries@health.govt.nz or mail to Office of Radiation Safety, Ministry of Health PO Box 5013, Wellington 6140



SECTION 2.

Radionuclide

Source Information

Please select the radiation source type to be registered

Sealed radiation source

Device incorporating a sealed radiation source

- 2.1 Sealed radiation source
- 6 Complete these details only if you selected 'Sealed radiation source'

Current activity (Bq)
or the level of activity
on a specified date of
Serial number

Current activity (Bq)
or the level of activity
on a specified date of
Date of measurement (if known)

I have attached an additional table with further source details (if required).

I have attached a copy of manufacturer's product brochure that include information required in this section.

- 2.2 Device incorporating a sealed radiation source
- 6 Complete these details only if you selected 'Device incorporating a sealed radiation source'

						Current activity (Bq) or the level		lua va a vat
						of activity on		Import
						a specified		consent
		Device serial			Radionuclide	date of	Date of	number (if
Device make	Device model	number	Intended use	Radionuclide	serial number	measurement	measurement	known)

I have attached an additional table with further source details (if required).

I have attached a copy of manufacturer's product brochure that include information required in this section.

SECTION 3.

Declaration

I declare that the information on this form is true and correct.

All sections must be filled in unless not applicable.