



NATIONAL RADIATION PROTECTION AUTHORITY

Established pursuant to Section 33(1) of the Atomic Energy & Radiation Protection Act, Act No 5 of 2005

P/ B 13198
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APPLICATION FORM - NRPA_AG-01

Pursuant to Sections 17(1), 19(1), 21(1) of the Atomic Energy & Radiation Protection Act this form is submitted in support of an application for:

Initial Licensing

License Renewal

Purpose of Application

- Construction of premises
- Registration of radiation sources
- Processing of Radioactive Material
- Handling of Radiation Sources
- Radioactive Waste Management

- Registration of premises
- Possession and Use
- Transport of Radiation Sources
- Storage of Radiation Sources

Nature of Practice / Class of License

- Diagnostic Radiology
- Interventional Radiology
- Nuclear Medicine Diagnostic
- Radiation Therapy
- Well Logging
- Transportation
- Mining & Milling
- Analytical laboratory
- Other: Specify: _____

- Dental Radiography
- Veterinary Radiography
- Nuclear Medicine Therapy
- Industrial Radiography
- Nuclear Gauging
- Storage facility
- Exploration
- Research

Facility Details

Name of Facility	
Postal Address	
Physical Address	
Telephone Number	
Fax Number	
e-mail	

Particulars of Legal Person

Name	
ID/Passport Number	
Nationality	
Position	

Mission

to provide for the adequate protection of the environment and of people in current and future generations against the harmful effects of radiation

Particulars of Designated Radiation Safety Officer

Name	
ID/Passport Number	
Nationality	
Qualifications	
Experience	
Postal Address	
Telephone Number	
Fax Number	
e-mail	

Particulars of Premises Where Radiation Source(s) Will Be Used

City	Physical Address

Note: For use at more than one location, please include details of all locations

Particulars of Radiation Source (*Radioactive Material*)

Name and Address of Manufacturer	Name and Address of Supplier	Description of Radiation Source (e.g. ^{137}Cs)	Model	Serial Number	Activity (Bq)	Date of Activity

Note: For source inventories that are comprised of more sources, please copy and attach this column as an annexure to the application form

Particulars of Radiation Source (*Electronic Devices*)

Name and Address of Manufacturer	Name and Address of Supplier	Description of Radiation Source (mobile, mammography)	Maximum Power (kV)	Model	Serial Number

Note: For source inventories that are comprised of more sources, please copy and attach this column as an annexure to the application form

Particulars of Radiation Source (Source Material)

Description of Ore/Ore Concentrate or Source Material (e.g U ³ O ⁸ , sodium diurinate, etc)	Packaging (e.g sealed drums, etc)	Quantity	Maximum Activity (Bq)	Activity Concentration (Bq/g)	Dose rate at 1m (mSv/h)

Note: For inventories that are comprised of more sources, please copy and attach this column as an annexure to the application form

Name of Applicant	Designation (legal person / RSO)	Date	Signature

NB: This application must be accompanied by the documents listed in the document submission checklist and the attached documents must be indicated on the checkboxes.

Official Use Only

Received by	
Date	
Signature	
Action	
Outcome of Application	