



NATIONAL RADIATION PROTECTION AUTHORITY

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

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APPLICATION FORM - NRPA_AG - 02

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

Purpose of Application

☐ Export

☐ Import

☐ Convey

☐ Transit

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	

Particulars of Designated Radiation Safety Officer

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

Additional Particulars of i.r.o Application for Transport

Conveyor	
Origin of Package	
Destination of package	
Mode of transport	
Expected date of transportation	
Port of entry	
Port of exit	

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 than five sources, please copy and attach this column as an annexure to the application form

Particulars of Radiation Source (*Electronic Devices*)

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

Note: For inventories that are comprised of more than seven 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 $U^{235}O_8$, sodium diuronate, etc)	Packaging (e.g sealed drums, etc)	Quantity	Maximum Activity (Bq)	Activity Concentration (Bq/g)	Dose rate at 1m (mSv/h)

Note: For source inventories that are comprised of more than five 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	