

MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Boulevard • Baltimore Maryland 21230 (410) 537-3193 • 1-800-633-6101 • www.mde.maryland.gov

MDE RX3

Facility Registration Number \_\_\_\_\_ - \_\_\_\_

Date \_\_\_\_\_

## APPLICATION FOR CERTIFIED REGISTRATION OF PARTICLE ACCELERATOR PURSUANT TO REGULATIONS GOVERNING RADIATION PROTECTION 26.12.01

1.(a)		2.	a. Initial						
	Registrant Name				b. Renew				
					c. Amend				
	Address	Pr	none No.		Give curre	e current registration number			
1.(b)	City     State     Zip Code       Registrant is:     An individual			3.	Location of the unit (or where stored if a mobile unit):				
1.(0)		hership A corporation							
	An unincorporated associa				Address				
	Other				<u></u>		<u> </u>		
	Federal Tax I.D. No				City		State	Zip Code	
Feder which	acy Act Notice: This Notice is pro ral Tax Identification on this form i h requires MDE to verify that an ap ral Tax Identification Nos. will not	is mandatory pupplicant for a pe	rsuant to the provi rmit or license has	sions of § 1- paid all und	-203 (2003) of I lisputed taxes an	Environment Arti nd unemploymen	cle, Annota	ted Code of Maryland,	
4.	Particle Accelerator Informat	tion							
	A. Type of Accelerator B. Pe and Manufacturer or	eak kV C. Y MeV	Year and Model	D. Туре о	f Radiation	E. Maximum Intensity	F. Purpo	se or use	
	The following information is attached and is part of this application: Not								
5.	The following information	1 is attached	and is part of the	his applic	ation:	Not			
5.	-		-	his applic	ation: Attached		ble* Dat	e Submitted	
5.	a. Overall description of r		-	his applic			ble* Dat	e Submitted	
5.	<ul><li>a. Overall description of r</li><li>b. Description of facility:</li></ul>		-	his applic			ble* Dat	e Submitted	
5.	<ul><li>a. Overall description of r</li><li>b. Description of facility:</li><li>1) Architectural plans</li></ul>	adiation safe	ty program	his applica			ble* Dat	e Submitted	
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5.	<ul> <li>a. Overall description of r.</li> <li>b. Description of facility:</li> <li>1) Architectural plans</li> <li>2) Circuit diagram of sa</li> </ul>	radiation safe afety systems n detection in	ty program	his applic			ble* Dat	e Submitted	
5.	<ul> <li>a. Overall description of r</li> <li>b. Description of facility: <ol> <li>Architectural plans</li> <li>Circuit diagram of sa</li> </ol> </li> <li>c. Description of radiation</li> <li>d. Instrument calibration p</li> <li>e. Personnel monitoring e</li> </ul>	adiation safe afety systems n detection in procedure ar equipment an	aty program s nstruments ad frequency ad frequency	his applic			ble* Dat	e Submitted	
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5.	<ul> <li>a. Overall description of r.</li> <li>b. Description of facility: <ol> <li>Architectural plans</li> <li>Circuit diagram of sa</li> <li>Description of radiation</li> <li>Instrument calibration</li> <li>Personnel monitoring e</li> <li>Operating and emergen</li> <li>Training program</li> <li>Internal inspection system</li> </ol> </li> </ul>	adiation safe afety systems n detection in procedure ar equipment an acy procedure tem or other nittee and rac	aty program sonstruments ad frequency ad frequency es management co liation safety of	ontrol			ble* Dat	e Submitted	
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MDE RX 3

6.	Are rac	yes	no						
7.	Signat								
	a. Chief Executive Officer (CEO) for registrant named in 1.(a)								
Name			Title	Signature		Date			
	b.	l radiation sa	afety						
Name	Signature					Date			
1						1			