GEORGIA AGREEMENT STATE PROGRAM
INTEGRATED MATERIALS PERFORMANCE EVALUATION PROGRAM
QUESTIONNAIRE REPORT
February 11, 2014 to May 13, 2016

A. GENERAL

1. The Georgia Agreement State Program ("the Program") after undergoing a complete programmatic overhaul has during this review period has addressed the previous Integrated Materials Performance Evaluation Program (IMPEP) findings. The Program identified two additional findings throughout the review period that have been addressed and are reviewed on a quarterly basis. The Program Improvement Plan (PIP) summarizes the status of these items in Enclosure (1).

B. COMMON PERFORMANCE INDICATORS

I. Technical Staffing and Training

2. The Program's organizational structure is provided in Enclosure 2(a) & 2(b). This highlights all positions from the associates in the Program up to the Governor.

3. Management oversees both the Radioactive Materials Program (RMP) and the Environmental Radiation Program (ERP). Both Programs have a Team Leader to assist management in ensuring the proper functions of their respective Programs. ERP members assist the RMP with Incidents & Allegations reviews, conducting inspections, providing additional training, calibrations and reciprocity approvals in addition to Emergency Response duties. Dedicated RMP members are responsible for full time licensing and inspection duties. A small percentage of time is allotted for emergency response since they all are required to take part in incident or allegation response. The Program also partakes in nuclear power plant emergency planning drills. Enclosure (3) lists a breakdown of staff members' responsibilities by full-time equivalent percent.

4. The Program hired a number of new staff during the latest review period. One staff member was hired during the previous IMPEP review period and is close to becoming a fully qualified License Reviewer and Inspector. Enclosure (4) lists the requested information on each new staff member.

5. The Program hired a number of new staff during the latest review period. One staff member was hired during the previous IMPEP review period and is close to becoming a fully qualified License Reviewer and Inspector. Enclosure (4) lists those individuals, the courses they still require, and estimated dates for completing the qualification process.

6. The Program implemented a formal training and qualification process in June 2013. Any staff members hired after this date are subject to its requirements. The qualification journal and training manuals were modeled after the Nuclear Regulatory Commission's (NRC) Inspection Manual Chapter (IMC) 1248. The new policy requires extensive training and experience before

an individual becomes fully qualified. This procedure was revised in March 2015. Revisions included methods for Expedited Qualification and Interim Qualification. Clarification was added to address credit for completing certain inspections (i.e., completing a Multi-Use Medical Facility that includes an HDR while giving credit for completing HDR in its own individual modality).

7. The previous Program Manager, David Crowley left the Program on 10-11-2014. The following Specialists and their departure dates are as follows:
   Jenna Odom, 2-16-2015
   Eric Jameson, 7-31-2015
   Kit Ramdeen, 9-1-2015
   Show-Hwa Fong, 2-25-2016

8. As of April 1, 2016, the Program has no vacant positions.

9. No oversight committee or board works in association with the Program.

II. Status of Materials Inspection Program

10. The Program schedules all inspections at the periodicity specified in IMC 2800. Enclosure (5) shows the different inspection codes and frequencies utilized.

11. February 11, 2014 - December 31, 2014 Routine Inspections Completed:

Priority 1	Priority 2	Priority 3	Initial
6	15	24	15

January 1, 2015 - December 31, 2015 Routine Inspections Completed:

Priority 1	Priority 2	Priority 3	Initial
7	21	27	8

2016 Routine Inspections Completed To Date:

Priority 1	Priority 2	Priority 3	Initial
3	6	9	4

12. Enclosure (6) (a)-(c) identifies all the priority 1-3 and initial inspections conducted over the recent review period. Those conducted overdue will have a positive number of days under item "Overdue." If the inspection was conducted beyond acceptable scheduling tolerances (as outlined in IMC 2800), then the section will be highlighted in light red.

13. Currently the Program has no overdue priority 1-3 and initial inspections beyond the acceptable scheduling tolerances.

14. 2014 Reciprocity Inspections Completed:

Reciprocity Candidates	Inspections Completed
48	7

2015 Reciprocity Inspections Completed:

Reciprocity Candidates	Inspections Completed
22	2

For 2016 (as of April 8, 2016):

Reciprocity Candidates	Inspections Completed
20	1

III. Technical Quality of Inspections

15. In August 2015 the Inspection Procedures were revised. A copy of the revised procedures is included in Enclosure (10). Pages 35-36 of the enclosure details the revisions made.

16. Enclosure (7) lists all supervisory accompaniments made during the latest review period.

17. The Program inspectors primarily utilize a Bicron Surveyor 2000E pancake Geiger Muller (PGM). These are calibrated by an approved entity or by the manufacturer at the required calibration frequencies. Other devices include Ludlum NaI detectors, one Eberline RO-28 ion chamber, 16 pocket dosimeters, and 10 alarming rate meters.

    In addition to instruments maintained by the Program, the Environmental Radiation Program maintains additional devices and capabilities. They have a mobile laboratory that contains a liquid scintillator counter, high purity germanium detectors, and gas proportional alpha/beta counters. With these they provide technical and laboratory assistance to the Program's inspectors when samples require further analysis as well as accompany the inspector when needed and provide assistance in decommissioning activities.

    Enclosure (8) provides a list of all instrumentation and calibration dates. There were no issues throughout the review period with maintaining a sufficient amount of calibrated instruments. At this time, instrumentation for both the Environmental Radiation Program and Radioactive Materials Program are scheduled for calibration. Both Programs maintain calibrated instrumentation to fulfill their respective job duties while the instrumentation requiring calibration is being sent for re-calibrations. The Environmental Radiation Program maintains instrument calibrations.

IV. Technical Quality of Licensing Actions

18. The Program currently regulates 445 specific licensees.

19. One complex decommissioning was completed during this review period. This was actually an item that was initiated in 2003, Imerys Kaolin, Inc. (GA 903-1) and was noted on the previous IMPEP Report for Georgia. The licensee is authorized for naturally occurring radioactive material (NORM) that concentrates during the filtration of kaolin on certain devices. During this review period this license action was reviewed, peer reviewed and the decommissioning of the site was approved.

20. No exemptions from policies, procedures or regulations were granted during the review period.

21. Licensing Procedures were revised in September of 2015 and again in October of 2015. These revisions are included in Enclosures (11) & (12). Pages 33-34 of Enclosure (11) details the changes made in September and Pages 32-33 of Enclosure (12) details the changes made in October.

22. There is one renewal that has been in-house for more than one year. Enclosure (9) provides additional details.

V. Technical Quality of Incident and Allegation Activities

23. The Program submitted all reportable events known to the NRC. There are no additional reportable events not previously submitted.

24. The Program revised its incident and allegation procedures in July 2013. The new version parallels the NRC's procedure, SA-300, for reporting material events. The procedure highlights the responsibilities for all staff members from collecting initial details, to responding to incidents, and reporting requirements.

    An event tracking system used within the department was configured in early 2013 to accommodate the Program's needs, and staff members utilize this complaint tracking system (CTS) for recording all details pertaining to incidents and allegations.

    No revision to this Procedure has been made since its implementation. A review and revision is planned for mid-2016 to detail: Team Leader, Management reviews and approvals of investigations of Incidents and Allegations, New NMED Template Form for NMED/HOO submissions, Quality Control process and documentation of the Incident/Allegation in the licensee physical file.

C. NON-COMMON PERFORMANCE INDICATORS

I. Compatibility Requirements

25. Legislation affecting the Program includes the Official Code of Georgia (O.C.G.A) 31 -13 which is the Georgia Radiation Control Act; this has not been amended in reference to the materials program since 1990.

26. The Program regulations are not subject to "Sunset" laws and are not set to expire at any given date.

27. Georgia Board of Natural Resources is scheduled to approve Chapter 391-3-17 for its latest version in April 2016; these were forwarded to the NRC for final compatibility review on July 28, 2015 and again on November 30, 2015. The changes addressed the following regulation amendments (RATS IDs): 2011-1 & 2013-1.

    Regulation changes pertaining to RATS ID: 2013-2 is targeted to be addressed in the next set of rule changes scheduled to be submitted to the NRC for review in June-July 2016. The Program will incorporate newer RATS ID items in subsequent revisions.

    Georgia's State Regulation Status (SRS) spreadsheet appears up to date and in order (copy received, December 15, 2015 and as referenced at: https://scp.nrc.gov/special/regs/ga_srschart.pdf)

28. As stated in question 27 RATS ID: 2013-2 will be sent to the NRC for review in June – July 2016, at the time of this IMPEP, Georgia will have adopted all rule revisions within three years from the date of NRC rule promulgation. The rulemaking process in Georgia requires an allotted time for Board review and public comment. This can delay things, but it usually only adds six to eight months from when the Program staff finish rule preparation. From start to finish, a rule change should take less than a year by current Georgia rulemaking processes.

II. Sealed Source and Device (SS&D) Evaluation Program

29. Not applicable.

30. Not applicable.

III. Low-level Radioactive Waste Disposal Program

31. Not applicable.

IV. Uranium Recovery Program

32. Not applicable.

List of Enclosures (As of 10 January 2014):

Enclosure (1) – Performance Improvement Plan (PIP)
Enclosure (2) (a) – Organizational Chart
Enclosure (2) (b) – Organizational Chart
Enclosure (3) – Staffing Plan
Enclosure (4) – New Hires and Qualification Status
Enclosure (5) – Inspection Priorities
Enclosure (6) (a) – Inspection Statistics
Enclosure (6) (b) – Inspection Statistics
Enclosure (6) (c) – Inspection Statistics
Enclosure (7) – Supervised Inspections
Enclosure (8) – Instrumentation List
Enclosure (9) – Outstanding Renewals
Enclosure (10) – Revised Inspection Procedures 8/2015
Enclosure (11) – Revised Inspection Procedures 9/2015
Enclosure (12) – Revised Inspection Procedures 10/2015

Georgia Radioactive Materials Program

Performance Improvement Plan (PIP) and Progress Report - Response to Final IMPEP Report dated 30 May 2014

IMPEP Recommendations	Task(s)	Milestones	Assignments	Anticipated Completion Date(s)	Status	Actual Completion Date
1. The review team recommends that the State: (1) implement its inspection procedures to ensure that inspectors document the reason for missing temporary job site inspections; document details and circumstances of violations in inspection reports and NOVs; consider a reduction (or increase) in inspection frequency for serious violations and conduct performance based inspections; and (2) complete its enforcement procedure for assigning severity levels of violations. (Section 3.3)	A. Retrain staff and better implement current standards for the documentation of inspections.	A.1. Retrain staff on the appropriate documentation of inspection activities.	A.1. Crowley	A.1. 5 August 2014	A.1. Complete.	A.1. 8-5-14
		A.2. 50% Inspection Reports review by MGMT/Team Leader on a quarterly basis. Emphasis on Priorities 1, 2 & 3 Reports and Reports completed by Specialists in Training	A.2. Bennett	A.2. Complete and ongoing.	A.2. Ongoing.	A.2. 10-7-15
	B. Reinforce inspection procedures on what is meant by performance based inspections.	B.1. Reinforce current procedures through targeted training on performance based inspection techniques by NRC personnel.	B.1. Crowley and NRC Inspection Staff	B.1. 23 September 2014	B.1. Complete.	B.1. 9-23-14
		B.2. Conduct supervisory accompaniments to ensure proper performance based techniques are utilized.	B.2. Cartoski	B.2. Ongoing, at least once per staff per year.	B.2. Complete	B.2. 10-22-14
		B.3. Update inspection report forms to have more performance based characteristics.	B.3. Staff & Cartoski	B.3. February 2015	B.3. Complete.	B.3. 6-10-15
		B.4. Review current inspection procedures for possible improvements that would enhance an inspector's comprehension of performance based inspections. Continue reviews annually for possible improvements.	B.4. Cartoski	B.4. TBD/First Annual Review scheduled for 2015	B.4. Complete.	B.4. 9/2015

IMPEP Recommendations	Task(s)	Milestones	Assignments	Anticipated Completion Date(s)	Status	Actual Completion Date
	C. Complete enforcement procedures and train staff on how to utilize them (to include increasing inspection frequency based on severity levels).	C.1. Prepare a draft enforcement procedure to include assignments of various severity levels and enforcement actions.	C.1. Reese	C.1. 2 June 2014	C.1. Complete	C.1. 1-21-15
		C.2. Finalize enforcement procedure, provide training and begin implementation for all future violations.	C.2. Reese	C.2. 17 December 2014	C.2. Complete	C.2. 1-27-15
		C.3. Analyze efficacy of enforcement procedure on an annual basis.	C.3. Cartoski	C.3. 2/2016	C.3. Complete.	C.3. 2-25-16
2. The review team recommends that the State verify that all previously approved medical authorized users have proper documentation of their qualifications, since the new requirements were initiated in 2008. (Section 3.4, kept open from 2012 IMPEP)	A. Audit all existing medical licenses for users added post 2008 rule change and identify those needing further documentation.	A.1. Perform review of all existing licensees to determine how many users do not have adequate certifying documentation.	A.1. Odom	A.1. 1 April 2013	A.1. Complete.	A.1. 6-7-15
	B. Continuous tertiary checks by a devoted authorized user reviewer to ensure proper and consistent documentation is acquired.	B.1. Check all license actions for appropriate documentation of all authorized users.	B.1. Bennett	B.1. Ongoing	B.1. Complete.	B.1. 1/2016
	C. Actively send requests to users for securing the appropriate documentation.	C.1. Send monthly requests to 10% of the remaining deficient users.	C.1. Odom	C.1. Ongoing, until all known gaps are filled. It could take more than 10 months depending on response cooperation.	C.1. Complete	C.1. 1-21-15

IMPEP Recommendations	Task(s)	Milestones	Assignments	Anticipated Completion Date(s)	Status	Actual Completion Date
	D. Amend Licenses to remove AUs that have deficient credentials.	D.1. Amendments to remove AUs with deficient credentialing from licenses are being assigned to Staff to complete	D.1. Staff with MGMT review.	D.1. 1/2016	D.1. Complete	D.1 3/2016
3. The review team recommends that the State finalize its procedure for pre-licensing requirements and provide training to the staff on the revised procedure. (Section 3.4)	A. Finalize licensing procedures (which includes pre-licensing requirements).	A.1. Incorporate comments from reviews and finalize procedures.	A.1. Cartoski	A.1. 29 April 2014	A.1. Complete.	A.1. 5-20-14
		A.2. Perform annual review and revise as necessary.	A.2. Cartoski	A.2. TBD/First Annual Review scheduled for 2015	A.2. Complete.	A.2. 9/2015.
	B. Provide training and conduct reviews of new license actions to ensure adequacy with requirements.	B.1. Develop and conduct training to inform staff of new licensing procedure requirements.	B.1. Cartoski	B.1. 8 July 2014	B.1. Complete.	B.1. 7-8-14
		B.2. Review pre-licensing activities to ensure adequate basis of confidence is reached.	B.2. Bennett & Staff for CRXNS	B.2. Complete and ongoing.	B.2. Ongoing.	B.2. 10-7-15

GEORGIA AGREEMENT STATE PROGRAM

STAFFING PLAN—ENCLOSURE (3)

RMP: Radioactive Materials Program

ERP: Environmental Radiation Program

Name	Position	Area of Effort	FTE%
Irene Bennett Team Leader, RMP	Environmental Compliance Specialist	Administration Licensing Compliance Emergency Response	28 50 20 2
Barty Simonton Team Leader, ERP	Environmental Compliance Specialist	Administration Licensing Compliance Emergency Response	20 0 10 70
Liz Seale, ERP	Environmental Compliance Specialist	Administration Licensing Compliance Emergency Response	10 0 20 70
Sean Hayes, ERP	Environmental Compliance Specialist	Administration Licensing Compliance Emergency Response	10 0 20 70
Daryl Fahner, ERP/RMP	Environmental Compliance Specialist	Administration Licensing Compliance Emergency Response	10 0 20 70
Joel Mims, RMP	Environmental Compliance Specialist	Administration Licensing Compliance Emergency Response	8 70 20 2
Irvin Gibson, RMP	Environmental Compliance Specialist	Administration Licensing Compliance Emergency Response	8 70 20 2

Name	Position	Area of Effort	FTE%
Shatavia Walker, RMP	**Environmental Compliance Specialist**	**Administration** **Licensing** **Compliance** **Emergency Response**	**8** **70** **20** **2**
Yoshika Eason, RMP	**Environmental Compliance Specialist**	**Administration** **Licensing** **Compliance** **Emergency Response**	**8** **70** **20** **2**
Monica Johnson, RMP	**Environmental Compliance Specialist**	**Administration** **Licensing** **Compliance** **Emergency Response**	**8** **70** **20** **2**
John Hays, RMP	**Environmental Compliance Specialist**	**Administration** **Licensing** **Compliance** **Emergency Response**	**8** **70** **20** **2**
Gregory Reese, RMP	**Environmental Compliance Specialist**	**Administration** **Licensing** **Compliance** **Emergency Response**	**8** **70** **20** **2**

GEORGIA AGREEMENT STATE PROGRAM
NEW HIRES AND QUALIFICATIONS—ENCLOSURE (4)

Name	Date of Hire	Degree(s)	Other Experience	Courses Needed	Experience Needed	Completion Date Estimates
John Hays	6/16/2015	B.S. Geography	Inspections & Compliance experience within EPD	Nuclear Medicine, Brachytherapy & Gamma knife, Health Physics, Industrial Radiography, Materials Control & Security Systems & Principles	More inspection accompaniments, review further licensing actions, and conducting more independently.	8/2017
Shatavia Walker	3/16/2016	B.S. Biology	Lab analysis	Nuclear Medicine, Licensing Procedures, Inspections, Brachytherapy & Gamma knife, Health Physics, Industrial Radiography, Materials Control & Security Systems & Principles	More inspection accompaniments, review further licensing actions, and conducting more independently.	8/2017
Monica Johnson	4/1/2015	B.S. Biology/B.S. Health Physics	N/A	Health Physics, Industrial Radiography, Materials Control & Security Systems & Principles	More inspection accompaniments, review further licensing actions, and conducting more independently.	8/2017
Gregory Reese	8/16/2013	B.A. in Chemistry	RCRA, DOT hazmat, PCB waste management, OSHA HAZWOPER, rad safety for nuke power plant chemistry technicians	Brachytherapy & Gamma Knife	Independent sign off on high end therapy independent inspections & review of licensing actions of the same type.	8/2016

Name	Date of Hire	Degree(s)	Other Experience	Courses Needed	Experience Needed	Completion Date Estimates
Yoshika Eason	4/1/2015	B.S. Biology/Minor Chemistry Mater of Public Health (Environmental Health Concentration)	Environmental Health Specialist, Dekalb & Clayton County Board of Health	Brachytherapy & Gamma knife, Health Physics, Industrial Radiography, Materials Control & Security Systems & Principles	More inspection accompaniments, review further licensing actions, and conducting more independently.	8/2016
Daryl Fahner	3/1/2016	B.S. Physics	U.S. Army: 138th Chemical Company Mass Casualty Decon/Nuke/Bio/ Chemical Defense. Emergency Response.	Nuclear Medicine, Inspections, Brachytherapy & Gamma knife, Health Physics, Industrial Radiography, Materials Control & Security Systems & Principles	More inspection accompaniments, and conducting more independently.	8/2016
Irvin Gibson	4/1/2015	B.S. Chemistry Masters in Environmental Management	Chemical Analysis, Investigations for ALCON Laboratories	Nuclear Medicine, Licensing Procedures, Inspections, Brachytherapy & Gamma knife, Health Physics, Industrial Radiography, Materials Control & Security Systems & Principles	More inspection accompaniments, review further licensing actions, and conducting more independently.	8/2017

GEORGIA AGREEMENT STATE PROGRAM INSPECTION PRIORITIES - ENCLOSURE (5)		
License Category	License Code	Priority
Broad Scope (Medical)	BM	2
Institutional Medical-Mult. Use (Including HDR)	AL	2
Institutional Medical-Mult. Use	NUM, RT	3
Institutional Medical-Single Use (Diagnostic only, no written directives)	NUM	5
Institutional Medical-Single Use (Therapy only)	RT	3
Medical Teletherapy	T	3
Gamma Knife, Emerging Medical Technologies	GK, EMT	2
Eye Applicators	E	3
Private Practice (Therapy-HDR)	AL	2
Private Practice (Limited Therapy)	PNC	3
Private Practice (Diagnostic Only)	PNL, NUC	5
Private Practice (Veterinary)	V	5
Nuclear Pacemakers	NPM	5
Bone Mineral Analyzers	B	5
Mobile Nuclear Medicine (Written directives required)	MRT	2
Mobile Nuclear Medicine (No written directives)	M	3
Broad Scope (Academic) (Type A & B)	BAA, BAB	3, 5
Broad Scope (Academic) (Type C)	BAC	5
Academic (Non-Broad)	A	5
Broad Scope (Industrial R&D) (Type A)	RDA	3

Broad Scope (Industrial R&D) (Type B)	RDB	5
Broad Scope (Industrial R&D) (Type C)	RDC	5
Industrial Research & Development	RD	5
Broad Scope Distribution, Specific (Type A)	DSA	2
Broad Scope Distribution, Specific (Type B)	DSB	5
Broad Scope Distribution, Specific (Type C)	DSC	5
GL Distribution	GLD	5
Possession Incident to NRC Exempt Distribution	ED	5
Broad Scope (Medical Manufacturer for Distribution) (Medical R&D)	BMMD, BMRD	2
Accelerator Production Sites	AP	2
Nuclear Pharmacy	NUP	2
Medical Manufacturer for Distribution	MMDS, MDGL, MDSR	2, 3
Medical Distribution or Redistribution Only (sealed sources)	MDSS	3
Medical Distribution or Redistribution Only (GL)	MDGL	5
Industrial Mfg. for Distribution	DS	3
Radioactive Waste Disposal-Burial	WDB	2
Radioactive Waste Disposal-Incineration	WDI	2
Radioactive Waste, Processing & Repackaging	WDPR	2
Radioactive Waste, Prepackaged	WDP	3
Gamma Irradiators (Self-Shielded)	GI	5
Gamma Irradiators (<10K Ci)	GI	5
Gamma Irradiators (>10K<100K Ci)	GI, GIP	2
Gamma Irradiators (>100K<1M Ci)	GIP	2

Gamma Irradiators (>1M Ci)	GIP	2
Nuclear Laundries	NL	3
Contaminated Equipment	CTE	5
Field Flooding Studies	FF	3
Well Logging /Tracers	WL	3
In-house Industrial Radiography	IRF	2
Multiple Job-Site Industrial Radiography	IRB	1
Industrial (other)(NORM)(Gauge Service)	NOR, GS	5
Installed Gauges	FG	5
Industrial Diagnostic Systems Exceeding IC Values	IDS	2
Gas Chromatograph, Analytical Measuring Systems, etc.	GS, LG, MS	5
Portable Moisture Density Gauges, Lead Analyzers, etc.	PG, LPA	5
Teletherapy Service Co.	TS	5
Consultants(Leak Testing Service)	LT	5
Other Services, Greater (> 100 Ci sources)	OSG	2
Other Services, Limited (< 100 Ci sources)	OSL	5
Calibration Sources	CAL, CAM	5
Radium Calibration Sources and Other Radium-226 Specifically Licensed	R	3
Decontamination Services	DEC	3
Civil Defense (Emergency Management)	EM	5
Civil Defense (Emergency Response)	ER	5
Source Material	SM	5
Depleted Uranium	DU	5

In-Vitro Specific Licenses	IVS	5
In-Vitro General Licenses	GL, IVG	N/A
General Licensed Devices (except tritium safety signs)	GL	N/A

InspectorId	LicenseeNum	LicenseeName	InspectionDate	Previous Insp or Issue Date	Overdue	Findings Issued	InspTypDesc
IB	GA 896-1	APPLIED TECHNICAL SERVICES, INC.	03/12/2014	01/17/2013	419	04/16/2014	Routine
JM	GA 1369-1	JAN X- INTEGRITY GROUP	03/17/2014	01/09/2013	432	04/09/2014	Inc. Controls
EJ	GA 1115-1	ACUREN INSPECTION, INC.	03/26/2014	01/13/2013	437	04/07/2014	Field Insp.
IB	GA 1189-1	ROBERT T. HART, P.C.	04/02/2014	03/04/2013	394	04/29/2014	Routine
EJ	GA 1643-1	Durham Holdings, Inc.	09/04/2014	08/07/2013	393	11/07/2014	Routine
EJ	GA 1661-1	Georgia Proton Treatment Center	10/08/2014	N/A		10/21/2014	Pre-license
TC	GA 1656-1	DIRECT DIAGNOSTIC SERVICES, LLC	12/01/2014	N/A		12/03/2014	Pre-license
EJ	GA 1115-1	ACUREN INSPECTION, INC.	02/27/2015	03/26/2014	338	04/03/2015	Routine
IB	GA 1369-1	JAN X- INTEGRITY GROUP	03/05/2015	03/17/2014	353	03/24/2015	Routine
IB	GA 896-1	APPLIED TECHNICAL SERVICES, INC.	04/16/2015	03/12/2014	400	05/15/2015	Routine
JM	GA 1189-1	ROBERT T. HART, P.C.	04/29/2015	04/02/2014	392	05/19/2015	Routine
KR	GA 1615-1	MISTRAS GROUP, INC.	05/13/2015	04/15/2014	393	05/21/2015	Routine
EJ	GA 923-1	SOWEGA TESTING SERVICES, INC.	06/02/2015	04/21/2014	407	06/18/2015	Routine
GR	GA 1656-1	DIRECT DIAGNOSTIC SERVICES, LLC	11/12/2015	12/04/2014	343	11/13/2015	Initial
JM	GA 896-1	APPLIED TECHNICAL SERVICES, INC.	12/04/2015	04/16/2015	232	01/05/2016	Field Insp.
IB	GA 796-1	CARTERSVILLE MEDICAL CENTER	12/16/2015	12/04/2013	742	01/13/2016	Routine
IB	GA 1369-1	JAN X- INTEGRITY GROUP	02/08/2016	03/05/2015	340	02/23/2016	Field Insp.
GR	GA 923-1	SOWEGA TESTING SERVICES, INC.	03/02/2016	06/02/2015	274	03/04/2016	Inc. Controls
JM	GA 1115-1	ACUREN INSPECTION, INC.	03/03/2016	02/27/2015	370	03/14/2016	Routine
IB	GA 1615-1	MISTRAS GROUP, INC.	03/09/2016	05/13/2015	301	03/29/2016	Routine
IB	GA 1189-1	ROBERT T. HART, P.C.	03/09/2016	04/29/2015	315	04/01/2016	Routine

Overdue in Red
Priority 1 > 90 days past due date
Initial > 180 days following issuance

***See Notes Column

PriorityId	NumberofNonCompliance	UseDesc	NOTES
1	4	Multiple Job-Site Industrial Radiography (Nominal)	
1	0	Multiple Job-Site Industrial Radiography (Nominal)	
1	0	Multiple Job-Site Industrial Radiography (Nominal)	
1	5	Multiple Job-Site Industrial Radiography (Nominal)	
1	1	Multiple Job-Site Industrial Radiography (Nominal)	
1	0	Contaminted Equipment (Nominal)	
1	0	Mobile Nuclear Medicine (Nominal)	
1	0	Multiple Job-Site Industrial Radiography (Nominal)	
1	0	Multiple Job-Site Industrial Radiography (Nominal)	
1	2	Multiple Job-Site Industrial Radiography (Nominal)	
1	0	Multiple Job-Site Industrial Radiography (Nominal)	
1	0	Multiple Job-Site Industrial Radiography (Nominal)	
1	0	Multiple Job-Site Industrial Radiography (Nominal)	
1	0	Mobile Nuclear Medicine (Nominal)	***Pushed to later inspection date due to inactivity. Completed within 1 year of lice
1	1	Multiple Job-Site Industrial Radiography (Nominal)	
1	1	Institutional Medical-Mult. Use (Including HDR) (Nominal)	***Previous Insepection only covered HDR and not Pri. 3. portion. Therefore, reflec
1	0	Multiple Job-Site Industrial Radiography (Nominal)	
1	0	Multiple Job-Site Industrial Radiography (Nominal)	
1	0	Multiple Job-Site Industrial Radiography (Nominal)	
1	0	Multiple Job-Site Industrial Radiography (Nominal)	
1	1	Multiple Job-Site Industrial Radiography (Nominal)	

ense issuance

cts here as a Pri. 1 to cue the next inspection date of 12-16-2016 in database.

InspectorId	LicenseeNum	LicenseeName	InspectionDate	Previous Insp or Issue Date	Overdue	Findings Issued	InspTypDesc
KR	GA 1119-1	SAVANNAH ONCOLOGY CENTER	03/07/2014	01/14/2011	1148	03/11/2014	Routine
IB	GA 45-1	HAMILTON MEDICAL CENTER, INC.	03/19/2014	03/02/2011	1113	04/09/2014	Routine
TC	GA 39-1	NORTHSIDE HOSPITAL	05/20/2014	05/20/2010	1461	05/30/2014	Routine
TC	GA 1452-1	RADIATION ONCOLOGY SERVICES, INC.	05/28/2014	06/28/2012	699	05/30/2014	Routine
IB	GA 153-1	EMORY UNIVERSITY	06/12/2014	06/14/2012	728	07/29/2014	Routine
TC	GA 239-2	MIDTOWN MEDICAL CENTER	06/19/2014	06/22/2012	727	06/24/2014	Routine
TC	GA 292-1	PIEDMONT HOSPITAL	07/17/2014	07/27/2012	720	07/22/2014	Routine
IB	GA 1166-1	GE HEALTHCARE	08/06/2014	09/12/2012	693	08/29/2014	Routine
TC	GA 206-1	DEKALB MEDICAL	08/21/2014	08/10/2011	1107	08/28/2014	Routine
IB	GA 615-1	DOCTORS HOSPITAL	08/27/2014	09/12/2012	714	09/12/2014	Routine
TC	GA 199-1	NORTHEAST GEORGIA MEDICAL CENTER	09/17/2014	09/25/2012	722	09/18/2014	Routine
JM	GA 467-2	CARDINAL HEALTH	10/07/2014	05/07/2012	883	11/07/2014	Routine
JM	GA 823-2	CARDINAL HEALTH	12/10/2014	12/19/2012	721	01/05/2015	Routine
IB	GA 1468-1	TRIAD ISOTOPES, INC.	02/04/2015	02/20/2013	714	03/11/2015	Routine
EJ	GA 292-3	PIEDMONT ATLANTA HOSPITAL	02/19/2015	07/17/2014	217	03/16/2015	Follow-up
JM	GA 984-1	TRIAD ISOTOPES, INC	03/06/2015	01/29/2013	766	03/12/2015	Routine
JM	GA 467-1	CARDINAL HEALTH	03/11/2015	03/14/2013	727	04/03/2015	Routine
KR	GA 1227-1	Cure Point, LLC d/b/a	04/13/2015	02/14/2013	788	04/16/2015	Routine
EJ	GA 1178-1	American Professional Associates, LLC	04/16/2015	12/05/2012	862	05/04/2015	Routine
EJ	GA 918-1	HURST BOILER & WELDING CO., INC.	04/27/2015	03/11/2013	777	06/17/2015	Routine
IB	GA 1582-1	TRIAD ISOTOPES, INC.	05/06/2015	05/29/2013	707	05/12/2015	Routine
EJ	GA 78-1	JOHN D. ARCHBOLD MEM. HOSPITAL	05/14/2015	02/01/2013	832	06/18/2015	Routine
GR	GA 120-2	TANNER MEDICAL CENTER	05/21/2015	05/30/2012	1086	05/26/2015	Routine
JM	GA 84-1	MEMORIAL HEALTH UNIVERSITY MEDICAL CTR	05/28/2015	05/15/2013	743	06/16/2015	Routine
EJ	GA 7-1	Augusta University	06/01/2015	06/26/2012	1070	06/18/2015	Routine
EJ	GA 1110-1	GEORGIA REGENTS HEALTH SYSTEM	06/01/2015	03/14/2013	809	06/18/2015	Routine
EJ	GA 1259-1	TRIAD ISOTOPES, INC.	06/02/2015	04/02/2013	791	06/18/2015	Routine
SF	GA 328-1	WELLSTAR KENNESTONE HOSPITAL	06/12/2015	06/19/2013	723	08/07/2015	Routine
KR	GA 891-1	TRIAD ISOTOPES, INC	06/22/2015	04/05/2013	808	06/25/2015	Routine
JM	GA 162-1	TIFT REGIONAL MEDICAL CENTER	07/01/2015	06/13/2013	748	07/10/2015	Routine
KR	GA 1386-1	TRIAD ISOTOPES, INC	07/13/2015	06/25/2013	748	07/21/2015	Routine
IB	GA 1669-1	VANTAGE ONCOLOGY CANCER CENTER, LLC	11/03/2015	06/09/2015	147	11/25/2015	Initial
JM	GA 1411-1	HARBIN CLINIC RADIATION ONCOLOGY	11/04/2015	11/06/2013	728	11/20/2015	Routine
IB	GA 1475-1	PETNET SOLUTIONS, INC	11/18/2015	12/18/2013	700	12/02/2015	Routine
JM	GA 1609-1	CARDINAL HEALTH NUCLEAR PHARMACY SERVICES	12/02/2015	11/14/2013	748	12/14/2015	Routine
JM	GA 1632-1	CANCER TREATMENT CENTERS OF AMERICA	12/21/2015	12/13/2012	1103	01/06/2016	Routine
JM	GA 1119-1	SAVANNAH ONCOLOGY CENTER	02/10/2016	03/07/2014	705	03/11/2016	Routine
GR	GA 881-5	THERAGENICS CORPORATION	03/16/2016	06/26/2014	629	03/17/2016	Inc. Controls
JM	GA 296-6	ST. JOSEPH'S HOSPITAL	03/17/2016	07/10/2013	981	03/28/2016	Routine
JM	GA 45-1	HAMILTON MEDICAL CENTER, INC.	03/23/2016	03/19/2014	735	Not issued at time of report	Routine

JH	GA 848-5	RADIOTHERAPY CLINICS OF GEORGIA	04/06/2016	01/23/2014	804	Not issued at time of report	Routine
JM	GA 258-2	GRADY MEMORIAL HOSPITAL CORP.	04/13/2016	04/07/2014	737	Not issued at time of report	Routine

Overdue in Red
Pri. 2 > 180 days past inspection due date
Initial > 180 days following issuance

***See notes column

PriorityId	NumberofNonCompliance	UseDesc	NOTES
2	0	Private Practice (Therapy-HDR) (Nominal)	***Discovered following database implementation
2	3	Institutional Medical-Mult. Use (Nominal)	***Discovered following database implementation
2	0	Institutional Medical-Mult. Use (Including HDR) (Nominal)	***Discovered following database implementation
2	0	Private Practice (Therapy-HDR) (Nominal)	
2	2	Broad Scope (Academic) (Type A & B) (Nominal)	
2	0	Institutional Medical-Mult. Use (Including HDR) (Nominal)	
2	0	Institutional Medical-Mult. Use (Nominal)	
2	0	Nuclear Pharmacy (Nominal)	
2	0	Institutional Medical-Mult. Use (Including HDR) (Nominal)	***Discovered following database implementation
2	0	Institutional Medical-Mult. Use (Including HDR) (Nominal)	
2	0	Institutional Medical-Mult. Use (Including HDR) (Nominal)	
2	0	Nuclear Pharmacy (Nominal)	
2	0	Nuclear Pharmacy (Nominal)	
2	1	Nuclear Pharmacy (Nominal)	
2	0	Stereotactic Radiosurgery (i.e., Gamma Knife) (Nominal)	
2	0	Nuclear Pharmacy (Nominal)	
2	0	Nuclear Pharmacy (Nominal)	
2	0	Institutional Medical-Mult. Use (Including HDR) (Nominal)	
2	0	Private Practice (Therapy-HDR) (Nominal)	
2	2	In-house Industrial Radiography (Nominal)	
2	0	Nuclear Pharmacy (Nominal)	
2	0	Institutional Medical-Mult. Use (Including HDR) (Nominal)	
2	0	Institutional Medical-Mult. Use (Nominal)	***Previous Inspection conducted (Full, Including Pri. 3 & 2). Next inspection c
2	0	Institutional Medical-Mult. Use (Including HDR) (Nominal)	
2	0	Broad Scope (Academic) (Type A & B) (Nominal)	***Previous Inspection conducted (Full, Including Pri. 3 & 2). Next inspection c
2	0	Broad Medical (Nominal)	
2	0	Nuclear Pharmacy (Nominal)	
2	4	Institutional Medical-Mult. Use (Including HDR) (Nominal)	
2	0	Nuclear Pharmacy (Nominal)	
2	0	Institutional Medical-Mult. Use (diagnostic only) (Nominal)	
2	0	Nuclear Pharmacy (Nominal)	
2	2	Private Practice (Therapy-HDR) (Nominal)	
2	0	Private Practice (Therapy-HDR) (Nominal)	
2	0	Nuclear Pharmacy (Nominal)	
2	0	Medical Manufacturer for Distribution (Nominal)	
2	0	Institutional Medical-Mult. Use (Including HDR) (Nominal)	***Incorrectly labeled in database as a Pri. 3 corrected to Pri. 2
2	3	Private Practice (Therapy-HDR) (Nominal)	
2	0	Broad Scope (Medical Manufacturer for Distribution) (R&D) (Nominal)	
2	0	Stereotactic Radiosurgery (i.e., Gamma Knife) (Nominal)	***Inspection did not come due as indicated in the database. Assuming Progr
2	0	Institutional Medical-Mult. Use (Nominal)	

2	0	Institutional Medical-Mult. Use (Including HDR) (Nominal)
2	0	Institutional Medical-Mult. Use (Including HDR) (Nominal)

cued as a Pri. 2 due to HDR coming due only.

cued as a Pri. 2 due to HDR coming due only.

am error as no prior licensing history would inidicate a change in Priority.

InspectorId	LicenseeNum	LicenseeName	InspectionDate	Previous Insp or Issue Date	Overdue	Findings Issued
TC	GA 1429-1	PET IMAGING, LLC	02/20/2014	04/09/2012	682	03/04/2014
QT	GA 1634-1	ATHENS REGIONAL SPECIALTY SERVICES d/b/a ATHE	02/26/2014	07/27/2012	579	03/19/2014
TC	GA 1278-1	HARBIN CLINIC, L.L.C.	02/27/2014	12/09/2010	1176	03/04/2014
EJ	GA 1630-1	CARDIOVASCULAR MEDICINE	03/04/2014	05/23/2012	650	04/03/2014
EJ	GA 1153-1	ELEKTA, INC.	03/12/2014	12/15/2010	1183	04/07/2014
JM	GA 1597-1	BACON COUNTY HOSPITAL AND HEALTH SYSTEMS	03/19/2014	12/21/2010	1184	04/03/2014
JM	GA 5-1	PHOEBE SUMTER MEDICAL CENTER	03/27/2014	02/09/2011	1142	04/09/2014
JM	GA 853-1	ST. MARY'S HEALTHCARE SYSTEM, INC.	04/02/2014	03/17/2011	1112	04/09/2014
TC	GA 710-1	PIEDMONT HENRY HOSPITAL	04/04/2014	02/02/2011	1157	04/10/2014
KR	GA 1594-1	INSIGHT HEALTH CORPORATION	04/04/2014	11/04/2010	1247	04/25/2014
KR	GA 728-1	EASTSIDE MEDICAL CENTER	05/12/2014	05/17/2011	1091	06/02/2014
EJ	GA 941-1	LANDIS INTERNATIONAL, INC.	05/15/2014	05/19/2011	1092	06/13/2014
JM	GA 165-1	REDMOND REGIONAL MEDICAL CENTER	05/22/2014	05/26/2011	1092	07/15/2014
IB	GA 1508-1	ONSITE MEDICAL IMAGING	05/29/2014	03/16/2011	1170	07/15/2014
JM	GA 509-1	COLQUITT REGIONAL MEDICAL CENTER	06/04/2014	06/13/2011	1087	06/24/2014
EJ	GA 1350-1	BEST VASCULAR, INC	07/02/2014	11/24/2008	2046	07/15/2014
JM	GA 1093-1	Navicent Health	07/16/2014	07/21/2011	1091	07/25/2014
JM	GA 170-1	OCONEE REGIONAL MEDICAL CENTER, INC.	07/23/2014	07/28/2011	1091	07/28/2014
KR	GA 1510-1	GEORGIA UROLOGY AMBULATORY SURGERY CENTER	07/31/2014	07/26/2011	1101	09/08/2014
KR	GA 48-1	ST. JOSEPH'S HOSPITAL, INC.	08/05/2014	07/20/2011	1112	08/18/2014
IB	GA 1598-1	HEALTHSCAN IMAGING, LLC	09/09/2014	09/07/2011	1098	10/29/2014
JM	GA 632-1	PIEDMONT NEWTON HOSPITAL	09/24/2014	09/28/2011	1092	10/15/2014
EJ	GA 103-1	UNIVERSITY OF GEORGIA	10/02/2014	09/01/2011	1127	11/05/2014
KR	GA 555-1	TAYLOR REGIONAL HOSPITAL	10/06/2014	10/06/2011	1096	10/20/2014
IB	GA 975-1	PENNTECK DIAGNOSTICS, INC.	10/22/2014	10/26/2011	1092	10/23/2014
JM	GA 1413-1	ROME IMAGING CENTER	11/13/2014	11/17/2011	1092	11/24/2014
IB	GA 1551-1	RIVERSTONE MD, P.C.	11/19/2014	12/14/2011	1071	11/21/2014
KR	GA 1270-1	MIRION TECHNOLOGIES (MGPI) INC.	01/15/2015	11/10/2011	1162	01/22/2015
IB	GA 4-1	ATHENS REGIONAL MEDICAL CENTER	01/21/2015	02/14/2013	706	02/10/2015
KR	GA 218-1	MAYO CLINIC HEALTH SYSTEM OF WAYCROSS	03/11/2015	01/13/2012	1153	03/16/2015
GR	GA 631-2	ST. FRANCIS Health, LLC	03/18/2015	03/15/2012	1098	03/25/2015
EJ	GA 1222-1	DALTON IMAGING CENTER	03/24/2015	12/07/2011	1203	04/06/2015
KR	GA 1495-1	NORTHEAST GA. DIAGNOSTIC CLINIC	03/25/2015	02/29/2012	1120	04/02/2015
IB	GA 1218-2	MEDCROSS IMAGING P.C	04/01/2015	02/09/2012	1147	04/21/2015
EJ	GA 203-1	EMORY JOHNS CREEK HOSPITAL	04/03/2015	01/26/2012	1163	05/04/2015
KR	GA 1603-1	D. CONRAD HARPER, M.D.	04/07/2015	03/14/2012	1119	04/14/2015
IB	GA 1529-3	DIGIRAD IMAGING SOLUTIONS	04/22/2015	03/07/2012	1141	05/01/2015
JM	GA 1602-1	PET SERVICES OF NORTH FLORIDA, LLC	05/29/2015	05/18/2012	1106	06/18/2015
GR	GA 881-6	THERAGENICS CORPORATION	06/17/2015	06/27/2012	1085	06/18/2015
KR	GA 306-1	FLOYD Medical Center	06/29/2015	05/12/2013	778	07/07/2015
EJ	GA 993-1	SOUTH EAST GEORGIA HEALTH SYSTEM INC D/B/A	06/29/2015	01/31/2008	2706	07/29/2015
JM	GA 1380-1	TRIAD ISOTOPES, INC	07/02/2015	06/13/2013	749	07/10/2015
EJ	GA 1319-1	RADIOLOGY ASSOCIATES OF MACON	07/02/2015	06/26/2013	736	07/22/2015
KR	GA 369-1	WELLSTAR COBB HOSPITAL, COBB MEDICAL IMAGING	07/27/2015	07/18/2012	1104	08/10/2015

JM	GA 1490-1	ALLIANCE HEALTH CARE SERVICES, INC	08/11/2015	08/27/2012	1079	09/14/2015
IB	GA 1434-1	HOPEWELL DESIGNS, INC.	08/19/2015	09/13/2012	1070	09/01/2015
JM	GA 244-1	GEORGIA STATE UNIVERSITY	08/20/2015	08/09/2012	1106	08/31/2015
IB	GA 658-1	WELLSTAR DOUGLAS HOSPITAL	08/26/2015	09/05/2012	1085	09/15/2015
JM	GA 820-1	GORDON HOSPITAL	09/09/2015	09/06/2012	1098	09/25/2015
GR	GA 1340-1	PIEDMONT FAYETTE HOSPITAL	09/23/2015	09/06/2012	1112	09/25/2015
JM	GA 296-4	ST. JOSEPH'S HOSPITAL	10/01/2015	08/09/2013	783	10/23/2015
GR	GA 1574-1	OUTPATIENT IMAGING CENTER, LLC	11/18/2015	11/27/2012	1086	11/19/2015
GR	GA 742-1	ECKERT & ZIEGLER ANALYTICS, INC	12/09/2015	12/06/2012	1098	12/16/2015
SF	GA 677-1	GWINNETT MEDICAL CENTER	12/16/2015	11/28/2012	1113	01/12/2016
GR	GA 241-1	CLARK EYE CLINIC, P. C.	01/13/2016	01/21/2013	1087	01/21/2016
GR	GA 832-1	HONEYWELL INTERNATIONAL INC.	02/04/2016	02/15/2013	1084	02/09/2016
GR	GA 1635-1	YOKOGAWA CORPORATION OF AMERICA	02/09/2016	04/11/2013	1034	02/16/2016
GR	GA 78-2	LEWIS HALL SINGLETARY ONCOLOGY CENTER, JOHN D	03/03/2016	05/31/2013	1007	03/04/2016
LS	GA 1596-1	BATTLEFIELD IMAGING	03/23/2016	06/03/2010	2120	03/24/2016
GR	GA 1039-1	SOUTHERN REGIONAL MEDICAL CENTER	03/31/2016	03/21/2013	1106	04/01/2016
GR	GA 1623-1	PANALYTICAL	04/06/2016	04/10/2013	1092	04/07/2016
JM	GA 74-1	CRISP REGIONAL HOSPITAL	04/11/2016	04/08/2013	1099	Not issued at time of report
GR	GA 1352-1	WELLSTAR ATLANTA MEDICAL CENTER	04/14/2016	04/17/2013	1093	04/15/2016
GR	GA 633-1	Rockdale Hospital, LLC	04/19/2016	04/25/2013	1090	Not issued at time of report

Overdue highlighted in red
Pri. 3 > 270 days
Initial > 180 days following issuance

***See notes column

InspTypDesc	PriorityId	NumberofNonCompliance	UseDesc	NOTES
Routine	3	0	Mobile Nuclear Medicine (Nominal)	
Initial	3	0	Private Practice (Diagnostic Only) (Nominal)	***Discovered following database implementation
Routine	3	0	Private Practice (Limited Therapy) (Nominal)	
Initial	3	0	Mobile Nuclear Medicine (Nominal)	***Discovered following database implementation
Routine	3	0	Medical Manufacturer for Distribution (Nominal)	
Routine	3	3	Institutional Medical-Mult. Use (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (diagnostic only) (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Nominal)	
Routine	3	0	Mobile Nuclear Medicine (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (diagnostic only) (Nominal)	
Routine	3	0	Industrial Research & Development (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Nominal)	
Routine	3	7	Mobile Nuclear Medicine (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (diagnostic only) (Nominal)	
Routine	3	0	Broad Scope (Industrial R&D) (Type A) (Nominal)	***Discovered following database implementation
Routine	3	0	Private Practice (Limited Therapy) (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Nominal)	
Routine	3	7	Private Practice (Limited Therapy) (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Nominal)	
Routine	3	5	Mobile Nuclear Medicine (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Nominal)	
Inc. Controls	3	0	Broad Scope (Academic) (Type A & B) (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (diagnostic only) (Nominal)	
Routine	3	7	Mobile Nuclear Medicine (Nominal)	
Routine	3	0	Private Practice (Limited Therapy) (Nominal)	
Routine	3	0	Private Practice (Diagnostic Only) (Nominal)	
Routine	3	0	Industrial Mfg. for Distribution (Nominal)	
Routine	3	1	Institutional Medical-Mult. Use (Including HDR) (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Nominal)	
Routine	3	0	Private Practice (Limited Therapy) (Nominal)	
Routine	3	0	Private Practice (Limited Therapy) (Nominal)	
Routine	3	2	Mobile Nuclear Medicine (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Nominal)	
Routine	3	1	Private Practice (Diagnostic Only) (Nominal)	
Routine	3	0	Mobile Nuclear Medicine (Nominal)	
Routine	3	0	Mobile Nuclear Medicine (Nominal)	
Routine	3	0	Medical Distribution or Redistribution Only (sealed sources) (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (diagnostic only) (Nominal)	***Incorrectly labeled in database as a 5, corrected to P
Routine	3	0	Nuclear Pharmacy (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Including HDR) (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Nominal)	

Routine	3	0	Mobile Nuclear Medicine (Nominal)	
Routine	3	0	Industrial Mfg. for Distribution (Nominal)	
Routine	3	0	Broad Scope (Academic) (Type A & B) (Nominal)	
Routine	3	2	Institutional Medical-Mult. Use (diagnostic only) (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Including HDR) (Nominal)	
Routine	3	0	Private Practice (Limited Therapy) (Nominal)	
Routine	3	1	Industrial Mfg. for Distribution (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (diagnostic only) (Nominal)	
Routine	3	3	Eye Applicators (Nominal)	
Routine	3	1	Industrial Mfg. for Distribution (Nominal)	
Routine	3	0	GL Distribution (source and / or device evaluation) (Nominal)	
Inc. Controls	3	1	Stereotactic Radiosurgery (i.e., Gamma Knife) (Nominal)	
Routine	3	0	Private Practice (Diagnostic Only) (Nominal)	***Incorrectly labeled in database as a 5, corrected to P
Routine	3	1	Institutional Medical-Mult. Use (Nominal)	
Routine	3	1	Industrial Mfg. for Distribution (Nominal)	
Routine	3	0	Institutional Medical-Mult. Use (Nominal)	
Routine	3	2	Institutional Medical-Mult. Use (Nominal)	
Routine	3	1	Institutional Medical-Mult. Use (diagnostic only) (Nominal)	

GEORGIA AGREEMENT STATE PROGRAM
SUPERVISED INSPECTIONS - ENCLOSURE (7)

Inspector	Accompanied By	Licensee Name	Licensee Number	Priority	License Category	Date
Liz Seale	Travis Cartoski	Contour Engineering	GA 1398-1	5	Portable Gauge	01/21/2016
Gegory Reese	Travis Cartoski	GA Dept. of Transportation	GA 50-1	5	Portable Gauge	07/14/2015
Joel Mims	Travis Cartoski	St. Josephs	GA 296-4	2	Medical w/ Irriadiator	09/30/2015
Show-Hwa Fong	Travis Cartoski	Willmer Engineering	GA 1248-1	5	Portable Gauge	08/19/2015
Irene Bennett	Travis Cartoski	Petne Solutions, Inc.	GA 1475-1	2	Nuclear Pharmacy	11/18/2015

Georgia Department of Natural Resources

Environmental Radiation Program Handheld Radiation Detection Equipment Inventory

Manufacturer	Model	Serial Number	Calibration Date	Type	Location	Property Control	Comments
Canberra	UDR-13B	30175R	NA	Alarming Dose/Rate	Tradeport		NA
Canberra	UDR-13B	30177R	NA	Alarming Dose/Rate	Tradeport		NA
Canberra	UDR-13B	30179R	NA	Alarming Dose/Rate	Tradeport		NA
Canberra	UDR-13B	30204R	NA	Alarming Dose/Rate	Tradeport		NA
Canberra	UDR-13B	30205R	NA	Alarming Dose/Rate	Augusta		NA
Canberra/NRC	ADM-300A	ADM-100524002	02/19/16	GM	Tradeport		BP-100, AP-100 Kit #100524002
Canberra/NRC	ADM-300A	ADM-100524003	12/14/15	GM	Tradeport		BP-100, AP-100 Kit #100524001
Canberra/NRC	ADM-300A	ADM-100821001	12/14/15	GM	Augusta		BP-100, AP-100, Kit #100821001
Canberra/NRC	ADM-300A	ADM-691131	02/19/16	GM	Tradeport		BP-100, AP-100 Kit # ADM892001
Canberra/NRC	ADM-300A	ADM-892093	12/14/15	GM	Tradeport		BP-100, AP-100 Kit # ADM99001
Canberra/NRC	XP-110	992901	12/14/15	X-Ray Detector	Tradeport		NA
Eberline	ESP-2	1115	06/02/09	GM	Tradeport		**LEG-1, SPA-8, HP-290**, HP-270, HP-260, AC-3-8,
Eberline	ESP-2	1116	05/23/11	GM	Tradeport		**HP-210L, HP-270, AC-3-8,** SPA-8, HP-290, Ludlum 44-9
Eberline	ESP-2	1117	05/20/11	GM	Tradeport		**HP-270, HP-260, AC-3-8,** HP-290, LEG-1, Ludlum 44-40
							ESP probes that are in boldface are calibrated.
Eberline	ESP-2	1527	06/02/09	GM	Tradeport		**AC-3-8, HP-260, HP-270**, Ludlum 133-6, Ludlum 44-2, LEG-1,
Eberline	ESP-2	1529	05/26/11	GM	Ga Tech		**HP-270, AC-3-8, HP-260**, HP-290,LEG-1, SPA-8
Eberline	RO-2	5113	05/11/15	Ion Chamber	Tradeport		NA
Eberline	RO-2	6064	05/11/15	Ion Chamber	Tradeport		NA
Eberline	RO-2	6072	03/27/15	Ion Chamber	Augusta		NA
Eberline	RO-2A	4165	05/11/15	Ion Chamber	Tradeport		NA
Eberline	RO-2A	4285	05/11/15	Ion Chamber	Tradeport		NA
Eberline	RO-2A	4404	03/27/15	Ion Chamber	Tradeport		NA
Eberline	SRM-200	495	12/14/15	GM	Tradeport		NA
Exploranium	GR-135	2816N	01/16/09	Survey/MCA	Tradeport		Not calibrated due to cost
Exploranium	GR-135	2827N	02/16/07	Survey/MCA	Rad Matl		NA
Ludlum	9	69090	03/27/15	Ion Chamber	Tradeport		NA
Ludlum	9	69092	03/27/15	Ion Chamber	Tradeport		NA
Ludlum	9	79440	03/27/15	Ion Chamber	Tradeport		NA
Ludlum	9	114437	05/11/15	Ion Chamber	Tradeport		NA
Ludlum	9	114453	05/11/15	Ion Chamber	Tradeport		NA
Ludlum	17	74507	03/27/15	Ion Chamber	Tradeport		NA
Ludlum	19	15599	05/11/15	Micro-R	Tradeport		NA
Ludlum	19	16925	05/11/15	Micro-R	Tradeport		NA
Ludlum	19	95484	03/27/15	Micro-R	Tradeport		NA
Ludlum	19	95525	05/11/15	Micro-R	Tradeport		NA
Ludlum	19	104566	05/11/15	Micro-R	Tradeport		NA
Ludlum	19	104575	05/11/15	Micro-R	Tradeport		NA
Ludlum	19	104623	03/30/15	Micro-R	Augusta		N/A
Ludlum	12-S	10047	03/27/15	Micro-R	Tradeport		NA
Ludlum	12-S	15478	05/11/15	Micro-R	Tradeport		NA
Thermo	Rad Eye G	481	05/06/15	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	482	03/22/16	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	483	03/29/06	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	484	03/23/16	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	485	03/22/16	Alarming Dose/Rate	Tradeport	None	N/A
Thermo	Rad Eye G	486		Alarming Dose/Rate	Tradeport	None	N/A
Thermo	Rad Eye G	487	04/11/12	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	488	03/21/16	Alarming Dose/Rate	Tradeport	None	N/A

Manufacturer	Model	Serial Number	Calibration Date	Type	Location	Property Control	Comments
Thermo	Rad Eye G	489	03/22/16	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	490	03/29/06	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	491	05/06/15	Alarming Dose/Rate	Tradeport	None	Assigned to Sean Hayes
Thermo	Rad Eye G	492	04/11/12	Alarming Dose/Rate	Towers	None	
Thermo	Rad Eye G	493	03/22/16	Alarming Dose/Rate	Tradeport	None	
Thermo	Rad Eye G	494	03/30/15	Alarming Dose/Rate	Tradeport	None	Assigned to Jim Hardeman
Thermo	Rad Eye G	495	05/06/15	Alarming Dose/Rate	Tradeport	None	Assigned to Irene Bennett
Thermo	Rad Eye G	496	03/29/06	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	531	03/21/16	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	532	03/23/16	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	533	03/29/06	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	534	03/29/06	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	535	03/23/16	Alarming Dose/Rate	Tradeport	None	Returned from ERT
Thermo	Rad Eye G	536	03/29/06	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	544	03/22/16	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	545	03/29/06	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	546	03/29/06	Alarming Dose/Rate	Tradeport	None	NA
Thermo	Rad Eye G	894	06/02/15	Alarming Dose/Rate	Tradeport	None	
Thermo	Rad Eye G	895	03/22/16	Alarming Dose/Rate	Tradeport	None	Assigned to Barty Simonton
Thermo	Rad Eye G	896	05/06/15	Alarming Dose/Rate	Tradeport	None	Assigned to Liz Seale
Thermo	B-20	227	03/24/16	Pancake GM	Tradeport	134673	Assigned to Barty Simonton
Thermo	B-20	223	04/01/15	Pancake GM	Tradeport	None	
Thermo	B-20	224	03/31/15	Pancake GM	Tradeport	134670	Assigned to Jim Hardeman
Thermo	B-20	226	05/07/15	Pancake GM	Tradeport	134672	Assigned to Liz Seale
Thermo	B-20	229	05/07/15	Pancake GM	Augusta	134671	Assigned to Sean Hayes
Thermo	N	115	03/31/15	Neutron	Tradeport	None	Assigned to Barty Simonton
Thermo	N	116	03/31/15	Neutron	Tradeport	134675	Assigned to Jim Hardeman
Thermo	N	118	05/08/15	Neutron	Augusta	134676	Assigned to Sean Hayes
Thermo	N	119	05/08/15	Neutron	Tradeport	134677	Assigned to Liz Seale
Thermo	N	120		Neutron	Tradeport	134678	bad tube
Thermo	PRD-ER	343	03/22/16	NaI	Tradeport		Assigned to Barty Simonton
Thermo	PRD-ER	344		NaI		134665	
Thermo	PRD-ER	345	04/11/12	NaI	Tradeport	134666	
Thermo	PRD-ER	346	06/03/15	NaI	Tradeport	134667	Assigned to Liz Seale
Thermo	PRD-ER	347	05/07/15	NaI	Augusta	134668	Assigned to Sean Hayes
Thermo	PRD-ER	900	needs repair	NaI	Tradeport	135363	Assigned to Jim Hardeman
Eberline	ASP-1	2867	05/11/15	GM	Tradeport		
Eberline	ASP-1	2835	05/11/15	GM	4th CST		
Ludlum	14C	15636	05/11/15	GM	Tradeport		
Ludlum	16	15524	05/11/15	GM	Tradeport		
Ludlum	16	15510	03/27/15	GM	Tradeport		
Eberline	ASP-1	1827	05/11/15	GM	4th CST		
Ludlum	3000	25010302	05/08/15	GM	Tradeport		
Ludlum	26-1	PF006630	05/07/15	GM	Tradeport		
Ludlum	26-1	PF007062	05/07/15	GM	Augusta		
Ludlum	26-1	PF006784	05/07/15	GM	Tradeport		
Red Face G's							
Thermo	Rad Eye G	445		Alarming Dose/Rate			
Thermo	Rad Eye G	454		Alarming Dose/Rate			
Thermo	Rad Eye G	511	03/21/16	Alarming Dose/Rate	Tradeport	none	
Thermo	Rad Eye G	620	03/22/16	Alarming Dose/Rate	Tradeport	none	
Thermo	Rad Eye G	653	03/23/16	Alarming Dose/Rate	Tradeport	none	
Thermo	Rad Eye G	677	03/23/16	Alarming Dose/Rate	Tradeport	none	
Thermo	Rad Eye G	678	03/21/16	Alarming Dose/Rate	Tradeport	none	
Thermo	Rad Eye G	682	03/23/16	Alarming Dose/Rate	Tradeport	none	

Manufacturer	Model No.	Serial No.	State Decal	Last Calibration
BICRON	2000-E	I-497A	NO DECAL	09/04/2015
BICRON	2000-E	I-510A	NO DECAL	03/22/2016
BICRON	2000-E	I-521B	NO DECAL	09/04/2015
BICRON	2000-E	I-525B	NO DECAL	03/22/2016
BICRON	2000-E	I-527B	NO DECAL	01/13/2016
BICRON	2000-E	I-576A	NO DECAL	03/22/2016
EBERLINE	RO-20	3774	NO DECAL	03/22/2016
LUDLUM	2241-2	168439	NO DECAL	01/13/2016
LUDLUM	2241-3	142296	NO DECAL	03/22/2016
LUDLUM	2241-3	142300	NO DECAL	03/22/2016
EBERLINE	RO 2A	4260	106565	01/14/2016

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Georgia Department of Natural Resources

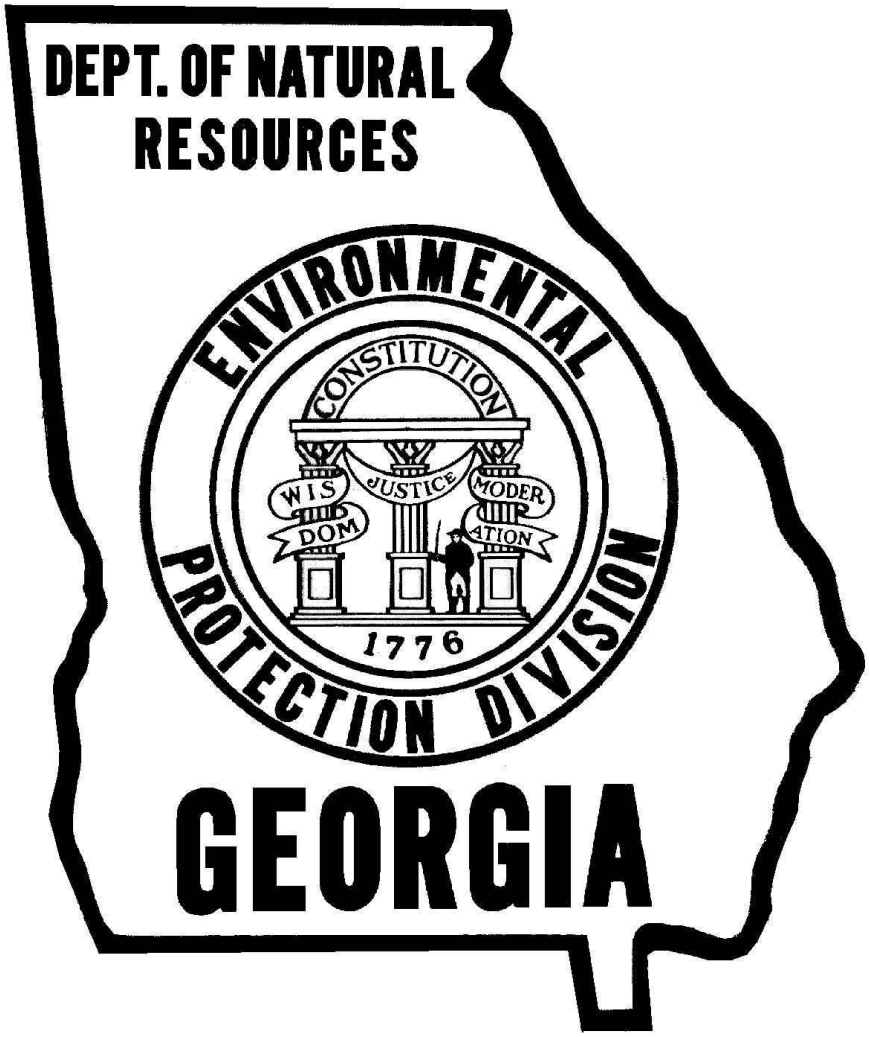
Environmental Radiation Program Handheld Radiation Detection Equipment Inventory

Manufacturer	Model	Serial Number	Calibration Date	Type	Location	Comments	
Canberra/NRC	ADM-300X	SM392701	NA	Teletector	Tradeport	**Not Calibrated due to Cost Considerations**	
Canberra/NRC	ADM-300X	SM392703	NA	Teletector	Tradeport	**Not Calibrated due to Cost Considerations**	
Canberra/NRC	ADM-300X	SM392704	NA	Teletector	Tradeport	**Not Calibrated due to Cost Considerations**	
Eberline	PIC-6A	2323	NA	Ion Chamber	Ga Tech	**Un-Repairable According to Vendor (Out of Service)**	
Ludlum	9	79435	NA	Ion Chamber	Tradeport	**Un-Repairable According to Vendor (Out of Service)**	
Eberline	ESP-2	1523	N/A	GM	Tradeport	Un-Repairable According to Vendor (Out of Service)	
Eberline	RO-2A	4379	N/A	Ion Chamber	Tradeport	Un-Repairable According to Vendor (Out of Service)	
Ludlum	19	42968	N/A	Micro-R	Tradeport	Out of service	NA
Ludlum	9	95291	N/A	Ion Chamber	Tradeport	Out of service	NA
Canberra/NRC	XP-110	79079	04/16/12	X-Ray Detector	Tradeport	not cal'ed crystal broken	
Thermo	N	120		Neutron	Tradeport	134678,unable to repair	
Ludlum	9	88817	04/10/14	Ion Chamber	Tradeport	needs repair	NA
Eberline	PRM-7	667	06/11/14	Micro-R	Ga Tech	no longer calibrate	

GEORGIA AGREEMENT STATE PROGRAM
OUTSTANDING RENEWALS - ENCLOSURE (9)

Licensee Name	Lic No	Assigned Primary Review	Reassigned Primary Review	Comments
Water Remediation Technology, LLC	GA 1569-1	03/30/2015	07/22/2015	This was assigned to an associate who subsequently left the Program and thus the need for it to be reassigned. Unfortunately, this licensing action was not properly reviewed under the original primary reviewer. Following a proper review of the licensing action it underwent a peer review where further information was needed to complete the Renewal. It was determined that a further analysis of the the financial assurance mechanism was required. After much extensive back and forth regarding current rules regarding financial assurance with the licensee, the Program made the determination that the licensee was not meeting it's financial assurance requirements as proposed in it's Renewal application. The licensee is now conforming to the Programs stated requirements and is in the process of resbmitting a revised financial assurance mechanism.

GEORGIA DEPARTMENT OF NATURAL RESOURCES
AIR PROTECTION BRANCH
RADIOACTIVE MATERIALS PROGRAM



INSPECTION PROCEDURES, Revision 2

August 2015

INSPECTION PROCEDURES (IP)

IP-01 PURPOSE

To establish the inspection program for licensees authorized to possess, use, transfer, and dispose of radioactive material associated with various types of use (i.e., industrial, academic, research and development, manufacturing, distribution, irradiators, industrial radiography, medical programs) and various types of service (i.e., leak testing of sealed sources, calibration of instructions, serving of devices, and transportation related thereto).

IP-02 OBJECTIVES

02.01 To establish general policy for the radioactive materials inspection programs, including the timely completions of inspections as dictated by the assigned priority.

02.02 To describe a performance-based inspection approach and to identify specific conditions of poor performance which require the licensee to be inspected more frequently.

02.03 To place major emphasis of the materials inspection program on timely and thorough follow-up of incidents and events.

02.04 To provide risk-informed priorities for routine inspections of all licensees and establish non-routine inspection activities.

02.05 To aid in the achievement of a consistent process of inspection for radioactive materials licensees.

IP-03 DEFINITIONS

03.01 Increased Control (IC) Quantities. An aggregated quantity of radioactive material at or above the category 2 threshold as specified in Enclosure 3 of these procedures.

03.02 Initial Inspection. An inspection conducted within six months after a new license is issued, an existing license is significantly amended, or after change in ownership causes substantial variation to the license or program.

03.03 Initial IC Security Inspection. An inspection to verify that an applicant implements required security measures before the licensing action is issued allowing the applicant to possess IC quantities. Staff should use the Pre-Licensing Checklist to determine which applicants require inspections.

03.04 Inspection. The act of assessing licensee performance to determine whether the licensee is using radioactive material safely and whether an individual or organization is in compliance with regulations, license conditions, and the license commitments submitted in support of a license (and incorporated by ”tie-down” conditions). Inspections involve a visit to a licensee’s facility and/or temporary jobsite by Georgia Department Natural Resources (DNR), Radioactive Materials Program inspector(s), observations of licensed activities, interaction with licensee personnel, and transmission of the inspection findings.

03.05 Inspection Plan. An inspection plan is a written outline listing the licensee’s activities and programs covered during the inspection.

03.06 Inspection Priorities. An inspection priority code is assigned to each radioactive material license. The priority code (i.e., 1, 2, 3, or 5) is the interval between routine inspections, expressed in years. The same priority code is assigned to all licenses that authorize a particular use. Enclosure 1 lists the program codes (types of use) along with the assigned priority codes. The priority represents the relative risk of radiation hazard. Priority Code 1 represents the greatest risk to the health and safety of workers, members of the public, and the environment; Priority Code 5 represents the lowest risk. Because a license may authorize multiple types of use (i.e., multiple program codes), the inspection priority code for the license is the code with the shortest routine inspection interval.

03.07 Pre-licensing Visit. A site visit and face-to-face meeting with an entity for providing a basis for confidence that radioactive material will be used as specified. Staff should use the Pre-licensing checklist to determine which applicants require visits.

03.08 Management Accompaniment. The act of assessing each associate on an annual basis to determine if the associate (inspector) is conducting performance-based inspections in accordance with the rules and regulations.

03.09 Management Review of A Licensee’s Inspection Citation. Management will review licensee citations discovered by inspectors prior to sending a Notice of Violation (NOV) to the licensee. This will ensure the proper violation is cited and will ensure proper follow-up of the licensee’s NOV response letter.

03.10 Reactive Inspection. A Reactive Inspection is a special inspection in response to an incident, allegation, or special information obtained by the Radioactive Materials Program (i.e., report of a medical event, other interests). Reactive Inspections may focus on one or several issues, and need not examine the rest of a licensee's program. If the Reactive Inspection does not cover the activities normally reviewed on a routine

inspection, then it does not satisfy the requirement to inspect the licensee at the routine, established interval. The RMP manager may allow the Reactive Inspection to count towards a Routine Inspection if normally reviewed activities are sufficiently covered.

03.11 Security Requirements. Requirements mandated by regulation, order, license condition, or other legally binding requirements for licensees possessing or shipping IC quantities.

03.12 Routine Inspection. Periodic, comprehensive inspection performed at a specified interval, as defined in Enclosure 1.

03.13 Special Inspections Activities. Inspection activities that require special guidance. Those activities cover: 1) inspections of expired licenses, terminated licenses, and licensees undergoing decommissioning; 2) inspections of significantly expanded licensee programs; 3) reciprocity inspections; 4) temporary job-site or field site inspections; and 5) inspections of abandoned licenses.

03.14 Telephonic Inquiries. These are inquiries done by telephone to determine: 1) some facts about the licensed program, such as reminding the licensee that its license is near expiration; 2) if there is sufficient activity to conduct an inspection (radioactive material may be in storage); 3) if the license has more than one location; or 4) if the licensee actively possesses radioactive material under its license. These are only examples; there may be other reasons to make telephonic inquiries of licenses (i.e., license expiration, decommissioning, and so forth).

IP-04 BASIC REQUIREMENTS

The Radioactive Materials Program (RMP) designates reactive inspections [See Section 04.02] as the highest priority, followed by initial inspections [See Section 04.03] and routine inspections [See Section 04.04] for the Priority Codes listed in Enclosure 1.

Most routine materials inspections should be performed on an unannounced basis.

Since coordination with pertinent licensee personnel is required as part of an initial security inspection, these security inspections may be announced to ensure that the appropriate personnel will be in attendance. Coordination with the local law enforcement agency is encouraged, but is not required as part of an initial security inspection.

The license reviewer shall assign primary and secondary program codes, with the most restrictive program code setting the inspection priority for each new or amended license. In other words, some licenses authorize activities that can be classified under more than one program code. If a license involves more than one type of use, each part

of the program shall be inspected in accordance with its assigned priority. For example, a license for a medical institution (Priority Code 3) may be amended to authorize use of a high dose rate remote afterloader unit (Priority Code 2). In this case, the RMP would inspect activities related to the high dose rate unit during two years while it would inspect the other portions of the licensee's program every three years.

Security requirements are inspected at the same frequency as the routine inspection for that category. For example, a radiographer has a routine inspection every year, with a security inspection at the same time. A gamma knife user has routine and security inspections every 2 years.

Inspection plans should be developed for complex, non-routine inspections

04.01 General Inspection Process. The purpose of this procedure is to describe the types of materials inspections and the general inspection program. For each inspection, the inspector should implement the process described below for pre-inspection activities, onsite inspection activities, and post-inspection activities. The IPs listed in this section provides guidance for onsite inspection activities. Documentation guidance for inspection results can be found by license type at: (S:Drive)> Datadire> Inspform> Current.

a. Pre-inspection activities. The goal of inspection preparation is to ensure that the inspector is sufficiently familiar with the types of uses and the generic requirements applicable to the licensed program. The effort expended on inspection preparation should be based upon the complexity and scope of licensed activities and on the experience level of the individual inspector. The extent to which an inspector prepares for routine inspections should be based on discussions with the program manager. A pre-inspection checklist (Enclosure 2) must be completed and approved by the program manager for all priority 1, 2, and 3 inspections.

To adequately prepare, an inspector shall review:

1. The license to determine if any unusual conditions would affect conducting the inspection (i.e., authorization for use of material at temporary job sites, significant changes in operations, or security requirements).

2. The licensee's recent inspection and enforcement history (i.e., results of previous inspections, any outstanding open items and any events reported by the licensee during the current inspection cycle).

3. Any commitments made by the licensee or restrictions imposed by the RMP as a result of a corrective action plan in response to a NOV or consent order.

4. Any notes in the file regarding special inspection emphasis (i.e., license reviewer's note to request a near term inspection regarding a significant licensing action). For example, an amendment for a new medical therapy modality under Chapter 391-3-17-.05(85) shall be inspected within 6 months of the date of the amendment.

5. Any security requirements, guidance, questions and answers, and supplemental correspondence (e.g., licensee responses, license tie-downs, corrective actions, etc.).

6. Any allegation trends involving the licensee, follow-up of the licensee's evaluation and any response to the allegation. [See Section 07.02]

7. If the licensee is authorized to possess IC quantities, request the National Source Tracking System (NSTS) inventory record at least two days in advance.

If the inspector is unfamiliar with the important focus areas for the licensee, then they should review the applicable NRC Inspection Manuals (Enclosure 4) in addition to other preparations.

Prior to the inspection, the inspector should review all the current licensing documents and procedures from the Licensee file. For problems identified during the course of the routine inspection, the inspector should ask the licensee for pertinent procedures and supporting licensing documents maintained onsite by the licensee. This practice applies to routine inspections only.

To prepare for a reactive inspection, the inspector will review specific information for reactive inspections as determined by the inspector and his or her supervisor on a case-by-case basis [See Section 04.02].

The inspector should identify the location of the licensee, make travel arrangements, and discuss special aspects of the inspection with his or her supervisor (i.e., inspection of temporary job sites).

Finally, the inspector should select appropriate and calibrated radiation detection instrumentation for the inspection and obtain the necessary inspection forms.

b. Onsite Inspection Activities. Based on the pre-inspection activities, the inspector should be prepared to evaluate a licensee's performance of the licensee's radiation safety and/or security programs. The inspector should be prepared to determine if the licensee possesses IC quantities and is subject to NRC security requirements. Inspection activities described below include: focus areas, performance-based approach, necessary review and retention of copies of a licensee's records, communication of findings during an inspection,

awareness of a licensee's safety culture, and common elements to every inspection.

1. The inspector should conduct the inspection in a manner that will develop conclusions about licensee performance relative to the following focus areas:

(a) security and control of licensed material;

(b) shielding of licensed material;

(c) comprehensive safety measures;

(d) radiation dosimetry program;

(e) radiation instrumentation and surveys;

(f) radiation safety training and practices;

(g) management oversight; and

(h) licensed activities performed by contracted personnel.

These focus areas are structured as a performance expectation and address the activities or program areas most commonly associated with measures that prevent overexposures, medical events, or release, loss, or unauthorized use of radioactive material. Focus areas are detailed in inspection specific guidance by License Type Inspection Forms.

Review of a particular focus area is complete when the inspector determines satisfactory performance of selected aspects for that focus area. If unsatisfactory performance is determined, then the inspector should conduct a more thorough review of that focus area beyond the selected aspects (i.e., additional sampling, determining appropriateness of the licensee's procedures, and further review of records maintained by the licensee documenting activities and outcomes).

2. The inspector should use a performance-based approach to evaluate the focus areas. A determination regarding safety and compliance with EPD requirements should be based on direct observation of work activities, interviews with licensee workers and contracted personnel performing licensed activities, demonstrations by appropriate workers performing tasks regulated by EPD independent measurements of radiological conditions at the licensee's facility, and where appropriate, a review of select records. Direct examination of these licensed activities and discussions with workers should provide an inspector with reasonable

assurance of a licensee's ability to safely use radioactive materials and is preferable to a review of select records alone.

In reviewing Priority 1, 2 or 3 licensee's performance, the inspector should cover the period since the last inspection. However, issues preceding the last inspection should be reviewed, if warranted by circumstances, such as incidents, noncompliance, high radiation exposures, or allegations. In reviewing Priority 5 licensee's performance, the inspector should cover the previous three years.

The inspector must be prepared to meet all entry requirements established by the licensee (i.e., view the licensee's safety video, use personal protective equipment, or meet any special requirements for entering sterile environments). They should conduct observations of licensee operations, interviews with staff, review of licensee documents to augment inspector observations, and obtain independent and confirmatory measurements. Emphasis should be placed on observing licensee performance regarding staff training, adequate equipment operation, licensed work by contracted personnel, safety culture and overall management of the program.

The inspector shall not under any circumstances knowingly allow an unsafe work practice or a violation that could lead to an unsafe situation to occur or continue in his or her presence in order to provide a basis for enforcement action.

Unless an inspector needs to intervene to prevent an unsafe situation, direct observation of work activities should be conducted such that the inspector's presence does not interfere with licensed activities. For example, an inspector should not insist on interviews when:

(a) a worker is delayed in performing scheduled work activities (i.e., delayed departure to a temporary job site)

(b) a worker is preparing or administering dosages or doses,

(c) a worker is providing patient care, or

(d) a licensee is dealing with customers or members of the public.

3. Review of licensee records and other documents should be directed toward verifying that current operations are in compliance and further review of "historical" records should only occur if the current records are out of compliance and the inspector believes it necessary to determine the persistence of a problem. If an apparent violation is identified then the inspector may find it appropriate to gather copies of all supporting records.

The inspector should know if the licensee declares information reviewed or gathered as proprietary.

In general, inspectors should use caution before retaining copies of licensee documents, unless they are needed to support apparent violations, expedite the inspection (i.e., licensee materials inventories), or make the licensing file more complete.

4. The inspector should advise the licensee of the inspection findings throughout the course of the onsite inspection and not wait until the exit meeting to inform senior management. The inspector should allow ample time during the inspection for a licensee to correlate information about root cause, consequence, and corrective action for an apparent violation. The inspector shall clearly present apparent violations and confirm the licensees understanding and agreement that a violation occurred, preferably before leaving the site.

The inspector should keep management informed of significant safety and security findings (i.e., safety hazards, personnel overexposures, failure or inability to control access, failure or inability to monitor, detect, and respond to unauthorized access, willful violations, and other potential escalated enforcement issues) identified during the course of the inspection. This ensures the inspector is following appropriate RMP guidance under such circumstances.

Prompt corrective action must be initiated by the licensee for safety and security concerns or violations of requirements that affect safe control of radioactive materials and safe operation of a licensee facility. The inspector should not leave the site until the concern is fully understood by the licensee and corrective action has been initiated. If the inspector and licensee disagree on the magnitude of concern regarding the safe control of radioactive materials and safe operation of the facility, the inspector should notify RMP management immediately.

5. To have a positive impact on maintaining safety, security, and effectiveness, the inspector should develop a general sense of the licensee's safety culture for licensed activities (i.e., workers have a "questioning attitude" and adhere to procedures, workers are duly cautious when engaged in licensed activities, worker relationships with supervisors are conducive to raising safety concerns) and that the licensee is reviewing work done by contracted personnel in licensed activities. The inspector's conclusions about safety culture may be useful when violations are identified and linked to significant risk (i.e., there are an unacceptable number of occurrences with unacceptable health and safety consequences).

6. Common elements to every inspection are discussed below.

(a) Entrance Meeting. After arriving on site, the inspector should inform the licensee's management representative of the purpose and scope of the inspection to be performed. This notification should be made as soon as practical after arriving on site. However, in certain instances, the inspector may choose to inform the licensee of his or her presence on site after initial observations of licensed activities currently in progress.

The purpose of the entrance briefing is to inform licensee management that an inspection is being conducted and to indicate the tentative schedule for discussing or reviewing selected inspection items with various licensee staff personnel. However, in some instances, the inspector may only need to inform management of EPD's presence on site, and apprize management that an exit meeting will be conducted at the end of the inspection to detail the inspection findings.

This is often an opportune time for the inspector to identify personnel to be interviewed. Scheduling interviews will enhance inspector efficiency and give the licensee the opportunity to have the most knowledgeable individuals present to respond in the areas being inspected.

The inspector should ask the licensee representative to identify any recent problems related to the licensed program, such as equipment failures and unusual radiological problems (e.g., excessive personnel exposures, unexpected releases to the environment, quality assurance problems, loss of material). The representative's responses may help the inspector assess management's awareness of the radiation protection program.

Inspectors should discuss with licensee management during the entrance meeting about how any proprietary information will be handled during the inspection.

(b) Follow up on Previous Items. Determine whether the licensee followed up on cited violations identified during the previous inspection. Determine whether the licensee took the corrective actions as described in its response to the Notice of Violation (NOV) and followed-up on safety concerns and unresolved issues identified during the previous inspection, including allegations.

(c) General Overview. The inspector should understand the current organization for radiation safety at the facility and the size of the current and anticipated radiation use program.

(1) Organization. Interview cognizant licensee representatives about the current organization of the program. Examine the licensee's organization with respect to changes that have occurred in personnel, functions, responsibilities, and authorities since the previous inspection. Identify the reporting relationship and management structure between the licensee's executive management, the Radiation Safety Officer (RSO), and, if applicable, the Chairperson and other members of the Radiation Safety Committee (RSC).

(2) Scope of Program. Interview cognizant personnel to determine the types, quantities, and use of byproduct material, frequency of use, staff size, etc., and anticipated changes in the range of the radiation use program. Determine if the licensee possesses material in accordance with its license type.

(d) Observation of Actual Facilities and Licensed Activities. Ideally, the inspector should observe work in progress that involves EPD-regulated activities. If there is no opportunity, then the inspector should ask the workers to demonstrate and explain selected licensed activities. Note that workers should be asked to perform demonstrations that do not unnecessarily expose themselves to radiation. It is of utmost importance to inspect licensed activities at temporary job sites or activities performed by contracted personnel when possible. [See Section 06.04]

(1) Perform a walk-through of the licensed facility to make general observations of the condition of the facility and the licensed activities being performed.

(2) Conduct inspections of licensed operations that are a potentially significant contributor to dose, regardless of shift.

(3) Perform routine inspections, when applicable, during first run operations.

(4) Make direct observations of radiation safety systems and practices in use.

(5) The walk-through may be performed at any time during the inspection. Ideally, a walk-through should occur upon arrival to the Licensee's facility/job site or directly after the Entrance Meeting. The inspector may need to return to some portions of the facility at a later time to observe specific activities.

(6) Make direct observations of physical security systems and storage locations, if possessing IC quantities.

(e) Independent and Confirmatory Measurements. Independent measurements are those performed by the inspector without comparison to the licensee's measurements. Confirmatory measurements are those whereby the inspector compares his or her measurements with those of the licensee's.

(1) The inspector should perform independent and confirmatory measurements in restricted, controlled, and unrestricted areas of the licensee's facility. Independent measurements should be performed on all inspections, unless exceptional circumstances make it impossible to perform the measurements (e.g., the inspector's detection equipment malfunctions during an inspection trip). Measurements of dose rates at the boundaries of restricted areas should be performed at the surfaces of the most accessible planes.

(2) Examples of measurements that may be performed include area radiation surveys, wipe samples, soil samples, leak tests, and air flow measurements. These measurements should be taken in licensed material use areas, storage areas, effluent release points, and other locations.

(3) The inspector may ask the licensee to spot-check radiation levels in selected areas, using the licensee's own instrumentation, if the licensee possesses survey instrumentation, to observe survey procedures and the appropriateness of instrumentation for the types of material used. However, the inspector must use EPD's instruments for independent verification of the licensee's measurements. The inspector's instruments must be in current calibration and source checked before they leave the office.

(f) Special License Conditions. If applicable, verify the licensee's compliance with any special license conditions that are unique to a

particular practice, procedure, or piece of equipment used by the licensee. In these instances, the inspector should verify that the licensee understands the additional requirements, and maintains compliance with the special license conditions.

(g) Exit Meeting. At the conclusion of the inspection the inspector should conduct an exit meeting with the most senior licensee representative present and available at the facility. The purpose of the exit meeting is to discuss preliminary inspection results. The inspector should inform the licensee that inspection results, including the characterization of proposed enforcement actions, could change based on RMP management review.

If a senior management representative is unavailable for the exit meeting, the inspector should hold a preliminary exit meeting with appropriate staff onsite. As soon as practical after the inspection, the inspector shall hold an exit meeting directly with a senior management representative (and the licensee's RSO, if not present at the preliminary exit meeting). This meeting involving the licensee's management and RSO will usually take place by telephone conference call.

(1) For initial and routine inspections, the inspector should request the meeting and control the meeting for purposes of the inspection. During the meeting, the inspector shall explain any cited violation of EPD requirements and the inspectors understanding of the licensee's requirement to submit a corrective action plan for each violation within 30 days.

The inspector should explain safety/security-related concerns or unresolved items identified during the inspection, and the status of any previously identified violations.

Prompt corrective actions must be initiated by the licensee for violations of regulatory requirements that affect safe and secure operations of a licensed facility. The inspector should not leave the site until the concern is fully understood by the licensee and corrective action has been initiated. If the inspector and the licensee disagree on the magnitude of the concern regarding public health and safety and/or security of the facility, RMP management shall be notified immediately.

Although deficiencies identified in some areas are not always violations, the inspector shall bring such deficiencies

to the attention of licensee management at the exit meeting and document them in the inspection narrative.

At the exit meeting, the inspector should verify whether the licensee considers any materials provided to or reviewed by the inspector to be proprietary in nature. If so, the inspector should ensure proper handling of the information.

(2) For a reactive inspection, the inspector should refer to the RMP procedures for addressing incidents for specific instructions about the exit meeting. It is particularly important that the inspector keep licensee management informed of the inspection details and explain the exit meeting strategy with his or her supervisor before the meeting. During the exit meeting, the inspector should explain the preliminary inspection findings including any apparent violations of regulatory requirements. The inspector should ask the licensee to confirm their understanding of the findings. If the licensee does not provide additional information and disagrees with the preliminary findings and apparent violation(s), the inspector should assure the licensee that they will convey the licensee's disagreement to RMP management. The inspector should close the meeting and promptly leave the site without lingering for any further discussion before presenting these issues to management. The licensee's next opportunity to discuss the findings will be after the management has reviewed these matters.

c. Post-inspection Activities. After returning from an inspection trip, the inspector shall inform the RMP manager of the findings. This discussion should be sufficient to alert management to significant enforcement, safety, security, or regulatory issues. This meeting does not need to be documented. If there were no significant issues this report can be saved until staff meetings. To complete the inspection, the inspector shall document the inspection results in accordance with this guidance.

04.02 Reactive Inspections. Inspections performed to follow up on incidents (e.g., medical event, overexposure, perceived concerns arising from a licensee's response to a generic letter or bulletin, loss or release of radioactive materials) or allegations take precedence over the routine inspection program. Management shall promptly assess the preliminary information received concerning the incident or allegation and will determine if a reactive inspection is necessary, in accordance with the Incident Response & Allegation procedure. The reactive inspection will emphasize the analysis of the sequence of events and the conditions that existed at the time these events occurred. The analysis should lead to the determination of contributing factors and root causes, and to the formulation of corrective actions to prevent recurrence. Generally,

issues of compliance will be addressed after all safety issues and program weaknesses are identified and clearly understood.

Reactive inspections will be documented in accordance with S:\Rad&Policy\Datadire\PROCEDURES\Incidents and Allegations

04.03 Initial Inspections. Approximately, six months past license issuance, the associate (inspector) shall inquire by telephone to determine if the licensee does not have radioactive material onsite or has not performed licensed activities and if the licensee has no plans for future possession of radioactive material. (If the licensee does not have plans to possess radioactive material or conduct licensed activities, they should be encouraged to terminate their license.)

An initial inspection of any new licensee should not be attempted during the first 6 months of license issuance if it is determined, that the licensee does not possess radioactive material.

If determined that the licensee does not possess radioactive material, but plans future usage then the associate shall revise the next onsite inspection date in the database for when the licensee will possess radioactive materials. **The initial inspection must be performed and shall not exceed 12 months from license issuance.**

Initial inspections of a new licensee or an amendment for an existing licensee that has radioactive material onsite, has performed licensed activities or has a significant expansion of its program shall be announced and completed within 6 months of the date the new license or amendment was issued. To schedule the initial inspection, the date in the “next inspection date” field in the database shall be 6 months from the date the new license or amendment was issued.

Initial security inspections verify that an applicant has implemented security requirements before the licensing action is issued allowing the applicant to take possession of risk significant radioactive material. Staff should use the Pre-Licensing Guide and Checklist for Risk Significant Radioactive Materials to determine which applicants require inspections. In addition to the initial security inspection, an initial inspection for licensees possessing IC quantities must also be completed within 6 months of license issuance.

Once on site, the inspector should interview licensee staff (management and technical) to determine if licensed material has been possessed or licensed operations have been performed. Methods for determining if licensed activities have been performed include, but are not limited to the following: performing a site tour, performing confirmatory measurements, and/or contacting distributors of radioactive material, such as local radiopharmacies, to see if they have distributed material to the licensee. If the licensee has possessed licensed materials or performed licensed operations, then the inspector should conduct an inspection in accordance with applicable guidance.

If it is determined that the licensee has not possessed licensed material or performed licensed operations, the inspector should:

a. Determine the licensee's plans for future possession of licensed material or plans to perform licensed operations. In assessing the licensee's future plans, the inspector should determine if adequate facilities and equipment are in place to safely handle licensed material, as described in the license application.

b. Use this opportunity to discuss the license and applicable regulations with the licensee. The inspector should discuss unique license conditions.

c. Request that the licensee notify the RMP before the receipt of licensed material or initiation of licensed operations.

d. Document the onsite inspection by completing an Inspection Form. The "program scope" description on the front page of the Inspection Form should include the licensee's plans for future possession of material or plans to perform licensed operations.

e. Ensure that the date in the "next inspection date" field in the data base is 6 months from the date the inspector determined the licensee does not have radioactive material onsite or has not performed licensed activities.

04.04 Routine Inspections. Routine inspection of licensees shall be conducted at intervals in years corresponding to the inspection priority listed in Enclosure 1.

Security inspections for licensees possessing IC quantities are to be conducted at the same frequency corresponding to the routine inspection priority listed in Enclosure 1. The security inspection shall be conducted at the same time as the routine inspection, unless management approves otherwise. If the licensee has possessed material or performed licensed operations since the last inspection, the inspector should perform a routine inspection. If the licensee has not possessed material or performed licensed operations since the last inspection, the inspector should follow the instructions in Section 04.03 a. through (e).

04.05 Pre-licensing Visit. Pre-licensing visits shall be conducted for new entities that do not have an existing Agreement State or NRC license, licensees changing ownership to an unknown entity, or licensees that are significantly expanding the size or scope of their existing license. Reviewers should use the Pre-licensing Guide and Checklists to determine if pre-licensing visits are needed. The purpose of the pre-licensing visit is to evaluate the applicant's intentions regarding the use of radioactive materials and to forward suspicious applications to the appropriate authority for follow-up, per the guidance in the Pre-licensing Checklist. At a minimum, all storage and use locations must be visited. By the end of the visit, the reviewer should have observed, collected, and documented sufficient information to provide a basis of confidence that

the applicant will use the radioactive materials as specified in its license application. Pre-licensing visits must be completed before the issuance of a license to verify that the applicant has implemented the needed requirements for expanded licensed uses or Increased Controls before the licensing action is issued.

04.06 Change In Priority Based On Change In Type Of Program. A change to a lower or higher inspection priority can be made when it is determined that the licensed activity being carried out is of a priority different from that initially assigned and is one which warrants a lower or higher inspection priority under the system in Enclosure 1. Priority Change must be completed in the Inspections portion of the data base.

IP-05 INSPECTION INTERVALS

05.01 Scheduling Inspections. To achieve an efficient use of staff time and travel, inspections (other than initial inspections) may be scheduled within a one month window around their inspection due dates. With program manager approval the inspection of licensees in Priority Codes 1, 2, and 3 may vary around their due date by +/- 25 percent. Inspection of Priority Code 5 licensees may vary around their due dates by +/- 1 year. Inspections will not be considered "overdue" until they exceed the scheduling window. Inspections may be scheduled before their window if the inspector receives information that warrants earlier inspection.

05.02 Combining Inspections. If a licensee holds a license with multiple uses that are assigned different Priority Codes in Enclosure 1, a single inspection may be scheduled whenever practicable to more effectively use the inspector's travel time. Inspections for determining compliance with security requirements will be conducted at the same time as the health and safety inspections, unless management approval is obtained first. In determining whether to combine inspections on a continuing basis, consideration should be given to not "over-inspect" a lower-priority license versus the need and desirability to inspect a licensee's total activities for a more complete assessment of its safety and compliance performance. Inspectors should take care when scheduling the next routine inspection in the data base. Licensees can have multiple Priorities assigned to them such as a large Medical Institution with an HDR (Pri. 2) and Diagnostic Limited Therapy (Pri. 3). Inspectors should be aware that when an Inspection is conducted for the HDR only that the next inspection date is entered into the data base one year out to accommodate the Diagnostic Limited Therapy Inspection frequency, if not conducted in conjunction with the HDR.

05.03 Multiple Use Locations. If a licensee has more than one location, the inspector may inspect only one location of the license if: the one facility maintains all records for all locations, that location conducts the majority of the licensee’s work load, and the licensee has a good inspection history. A telephonic contact would be required to determine the status of the other license locations. At least 20% of the locations must be inspected on a rotational basis during the routine inspection interval.

05.04 Inspection before License Renewal. Before renewing a Priority 1, 2, or 3 license, the compliance/inspection history of the licensee should be checked to determine whether additional requirements should be made a part of the license, particularly for those licensees where there has been escalated enforcement since the last license renewal. In some cases, it may require an onsite inspection to determine if the license should be renewed, based on prior performance and up-to-date information on the licensee. RMP management should be consulted in making this determination.

05.05 Inspections After Escalated Enforcement. If escalated enforcement action (Consent Order) has taken place for a particular licensee, a special inspection that focuses on Severity Level III or above violation(s) shall be scheduled and conducted within 6 months of the issuance of the escalated enforcement action (Severity Level III or above). This inspection should be in accordance with the guidance in Section 05.06 for reducing the inspection interval, after completion of the escalated enforcement action, to assess the licensee's follow-up actions in response to the previous violations.

05.06 Reduction of Inspection Interval.

a. The inspection interval shall not be extended beyond that specified by the priority system indicated in Enclosure 1. The interval between inspections may be reduced (shortened) and inspections conducted more frequently than specified in the priority system on the basis of poor licensee performance. The main consideration in reducing the inspection interval should be evidence of moderate to severe problems in the licensee's radiation safety program. Poor compliance history is one indicator of such problems. Lack of management involvement or control over the radiation safety program is another indicator. Specifically, licensees that meet one or more of the following conditions should be considered for reduction in inspection interval if:

1. A Severity Level I, II, or III violation results from the most recent inspection; or

2. Issuance of an Consent Order as a result of the most recent inspection; or

3. A "management paragraph" appears in the cover letter transmitting the notice of violation on the most recent inspection (i.e., a paragraph that requires the licensee to address adequate management control over the licensed program); or

4. An event requires a reactive inspection; or

5. Repetitive violations occur.

The above list is not exhaustive; the inspection interval can and should be reduced for any other reason deemed pertinent by management. An example

would be an enforcement conference where the outcome did not include escalated enforcement action, but did indicate the need for the licensee to improve some aspect(s) of its compliance program.

Another example would be an industrial radiography licensee or a well logging licensee which is authorized to use byproduct material at temporary job sites and the current inspection was limited to an office inspection and no temporary job site inspection was completed during the current inspection. [See Section 06.04]

A licensee that meets the above criteria may have its inspection interval reduced by any length. For example, a priority 5 licensee with a poor performance record could be rescheduled for its next inspection in 2 or 3 years, rather than 5 years, depending on the scope of licensed activities. Or a priority 2 licensee with a Severity Level III or above violation could be rescheduled for its next inspection in 1 year, although a follow up inspection to focus on the Severity Level III or above violation may have already been completed within 6 months. [See Section 05.05] The reduction shall be valid only until the next inspection, but management shall consider the results of the next inspection when determining whether the reduced interval should be continued, changed, or returned to normal.

b. The reduced inspection date should be indicated in the inspections portion of the data base with reasons for reduced frequency.

05.07 Other Changes in Inspection Interval. At the discretion of management, other changes in inspection interval may be made to achieve efficiencies in the use of inspection resources and to reduce regulatory impact on the licensee. This may include more frequent inspections to ensure that inspectors have the opportunity to sufficiently observe licensee operations and increase public confidence by increasing the inspection focus on higher risk activities, without significantly increasing the regulatory burden on licensees. For example, rather than perform a single, large team, high impact inspection of the license at the normal interval, more frequent inspections may be performed by individuals or smaller teams that specifically focus on higher risk licensee activities.

IP 06 SPECIAL INSPECTION ACTIVITIES

06.01 Expired and Terminated Licenses. Inspectors should be aware of the need for security and control of radioactive materials at these types of facilities. This may be done by reviewing the licensee's transfer, disposal, and closeout survey data; confirming that an authorized recipient has received the material; and/or by performance of an inspection that may include independent or confirmatory measurements. The inspector should also review records of disposals, burials, and public dose that may be required to be submitted to the RMP on termination of the

license. Such actions would be conducted as soon as appropriate after notification is received.

06.02 Decommissioning Activities. If an inspection is performed at a licensee which is in the process of decommissioning activities, the inspector should also verify that the licensee is complying with regulations for timely decontamination and decommissioning, and meeting the required schedules for licensee action.

Specific guidance for decommissioning requirements and performing closeout inspections is outlined in NUREG-1757.

Final action, including inspection and confirmatory survey, if necessary, should be conducted as soon as possible, but no later than six months after decommissioning activities have been completed by the licensee.

06.03 Significantly Expanded Programs. During routine inspections of licensed facilities, inspectors should evaluate if licensed activities have significantly increased or decreased since the last inspection. The RMP supervisor should be made aware of the following changes in a licensee's scope of use.

a. Through interviews of licensee staff or observations of licensed activities, the inspector shall determine if:

1. the licensee has recently increased the types, quantities, and uses of radioactive material and if these actions have resulted in the possession of IC quantities;

2. the license authorizes a physical move of a facility or a new use at a temporary jobsite;

3. the license authorizes new (i.e., since the previous inspection) satellite facilities where materials will be used or stored;

4. the licensee has increased the types of uses or disposal of radioactive material;

5. the number of authorized users has significantly increased or decreased; and

6. the licensee has ceased activities at the entire site or in any building or area.

If any of the above items demonstrates a possibility that the licensed activities have significantly changed, then the inspector should document the changes to the licensee's program in the inspection records and notify the RMP supervisor.

b. A license reviewer may request a special inspection, if, during the licensing review process, it is determined that the licensee's program has significantly expanded or activities have ceased. [See the six points in the preceding paragraph] In that case, the license reviewer, in consultation with management will insure that the proper priority change is indicated in the inspections portion of the data base.

06.04 Reciprocity Inspections. The Georgia Rules for Radioactive Materials, 391-3-17-.08(20)(b), requires anyone operating under reciprocity to notify the RMP 3 days prior to engaging in that activity. Currently these notifications are by fax or e-mail.

RMP staff will attempt to inspect a minimum of 20% of the reciprocity work conducted in Georgia annually. Candidates for Inspection are determined by Management using established NRC Criteria and are distributed on a bi-weekly basis. These inspections should focus on priorities 1 and 2.

06.05 Temporary Job Site Inspections.

For a licensee authorized to work at a temporary job site, inspectors shall make every reasonable attempt to include an unannounced inspection of licensed activities at such location(s). An inspection at these sites should be attempted on every other routine inspection conducted at the licensee's principal place of business.

1. During the inspection of a licensee's principal place of business, the inspector should, through discussions with the licensee and review of licensed material utilization records, ascertain if the licensee is working at the temporary job site location(s).

2. The inspector may contact the licensee's customer to schedule the temporary job site inspection. The licensee's customer should be requested not to notify the licensee of the inspection.

3. If an unannounced inspection of the location(s) is not possible, then the inspector should attempt to arrange an announced inspection at the temporary job site(s) when possible.

4. If a temporary job site inspection is not performed, the inspector will write a brief note in the inspection records explaining the missed temporary job site inspection. In certain cases, the "next inspection date" field in the database may indicate a reduced inspection interval. [See Section 05.06]

06.06 Abandonment of Licensed Activities. Returned, undeliverable mail to licensees shall trigger an immediate follow-up. The follow-up should include a telephone call to the licensee to establish the licensee's physical address. If telephone contact is not

established, then an inspector should be sent to the licensee's site. The decision of when to send an inspector to a licensee's site should be based on the complexity of the licensed activities, and the types and quantities of licensed material.

IP 07 DOCUMENTATION OF INSPECTION RESULTS

07.01 What Constitutes an Inspection. The following guidance is provided to assist in determining when activities constitute an inspection.

a. An inspection will be considered to have been performed if:

1. the inspection involves a licensee that possesses or has possessed licensed material since the last inspection, including material possessed under a "possession-only license" or that is performing or has performed licensed activities since the last inspection; or

2. the inspection is an initial inspection that has been performed in accordance with Section 04.03.

If it is possible to inspect records or other items according to license conditions or RMP regulations, such activities should be inspected and be recorded as an inspection, whether the radiation safety officer (RSO) is present or not, including those licenses that have expired or are being processed for termination.

If the RSO is not onsite, the inspector shall make a telephone call to contact the RSO about the inspection. At the conclusion of the inspection, the inspector shall re-contact the RSO to explain the inspection results. If the inspector is unsuccessful in announcing the inspection to the RSO, the inspector shall make a follow-up telephone call to the RSO as soon as possible after the onsite inspection.

b. An inspection will not be considered to have been performed if the licensee or licensee's representatives are not available to assist with the inspection, and the inspector is unable to perform inspection activities. The inspector will document the on-site activities by placing a note in the licensee file, signed by the inspector; that briefly summarizes the attempted inspection. Together, the inspector and his or her supervisor should determine when another attempt will be made to inspect the licensee and the "next inspection date" field in the data base should be changed to reflect the new date.

c. A reactive inspection will not substitute for a routine inspection unless the scope of the inspection is comprehensive.

07.02 Allegations. Allegations will be followed up and the results documented and transmitted in accordance with the RMP Incident and Allegation procedures. No reference to follow-up of an allegation or employee concern will be entered in the inspection records, inspection reports, or other documents that will be filed in the licensee file. Following is further guidance about “chilling” effect.

a. In conducting interviews or other activities with licensee personnel, inspectors should be sensitive to areas where employees may be reluctant to raise concerns about the licensee's program. Even if the licensee addresses an employee's concern regarding safety issues, there could be underlying factors that could produce a "chilling" effect or reluctance for employees to report such issues. For example, the following questions will help an inspector determine if problems exist in the licensee's safety program:

1. Has there been an unexplained change in the number or nature of valid concerns that employees have raised with the licensee or the RMP?

2. Have there been interactions with RMP personnel that suggest that some employees may be hesitant to raise concerns or present information to RMP?

3. Are employee concerns addressed by licensee management in a timely manner?

4. Is the licensee's corrective action successful in addressing employees' concerns?

b. If any indication of a "chilling" effect is found, the inspector shall inform management for further review and follow-up.

07.03 Documenting Inspection Results.

a. Types of documentation. The inspector shall complete the appropriate inspection report form. The inspector must ensure that each cited and non-cited violation (NCV) in Inspection Report includes: a brief statement of the circumstances, including the date(s) of the violation or NCV and the facts necessary to demonstrate that a requirement was not met; reference to the regulation or license condition that was violated; and a description of the licensee’s corrective actions.

The licensee will be issued a cover letter, with or without a Notice of Violation. The cover letter should not contain any security-related information.

b. Required Information to Document Inspections. All documented inspection results shall be typed on the License Type Specific Inspection Report, either in the summary/ findings section or the appropriate section of the inspection report, shall be a detailed narrative of the inspection from the entrance interview through the exit interview and must contain the following minimum information:

1. the procedure(s) used;

2. the focus areas examined and narrative of observations as it pertains to the Performance Based Inspection Criteria;

3. the status of follow-up items involving prior enforcement or reported licensee events;

4. sufficient information to support cited violations, NCVs, and closed violations identified during a previous inspection;

5. description of completed and anticipated corrective actions, if discussed during the exit meeting, for any identified violations;

6. a succinct description of the scope of the licensee's program;

7. for security inspections with no violations, the inspector should add a statement in the inspection record that the licensee's implementation of security requirements was reviewed and deemed to be adequate.

The inspector must document findings with enough detail to make it clear what requirement was violated, how it was violated, who violated the requirement (use titles only, names should be avoided, if possible), and when it was violated (including dates, or period of time of non-compliance, if known). If the licensee provides immediate or long term corrective action for the violation, this information should also be included as part of the inspection record.

Any subsequent inspector should be able to refer to the inspection record to prepare for an inspection to easily determine what corrective actions were taken, and why a violation was not cited.

Inspection Reports must be completed no later than 30 Days following a completed Inspection. All inspection documentation shall be filed in the licensee's file and saved in the WP File in the appropriate Licensee electronic folder: S:\Rad&Policy\Wpfile

07.04 Methods of Transmitting Inspection Results. Results of inspections may be reported to the licensee by either issuing a Compliance Letter or Notice of Violation (NOV) to the licensee and should be completed no later than two weeks following the inspection.

a. Letter to licensee, with or without NOV. When findings are documented in an Inspection Record, a letter shall be used to inform the licensee of the results of the inspection. The letter will be a publicly available document.

b. Marking of Inspection Documentation. Information relative to the licensee's physical protection measures (security-related information) is sensitive information and needs to be protected. These will be kept in a separate locked file cabinet. The files and the inspection forms will be marked "Withhold from Public Disclosure".

IP-08 Construction and Preoperational Inspections Of Irradiators

Construction and preoperational inspections of new walk-in or pool-type irradiator facilities shall be a regular part of the inspection program. The inspections will involve the use of engineering inspectors and will require that the materials staff identify the parts of the facility that are especially important to safe operations of irradiators.

IP-09 Input into the Database and Assignment of Inspection Priorities

a. Enclosure 1 provides a listing of license program codes with the associated inspection priorities. In the case of problems with the assigned codes, the associate should discuss with the RMP manager to determine the proper inspection priority for the license, and should be changed in the database.

b. Data should be entered in the database at the time a new license is issued or an inspection has been performed, including the dates for initial inspections of new licensees, the last inspection date, and the next inspection date for licensees already inspected.

IP-10 Increased Controls (IC) Inspection Procedures

The RMP will follow the interim guidance for continued inspections of licensees implementing Increased Controls (IC) requirements in accordance with the US Nuclear Regulatory Commission RCPD-07-006 letter dated September 21, 2007. The continued verification of compliance with the IC requirements is important to protect the public health, safety and environment. Until the NRC develops and issues a final procedure for future IC inspections, the RMP will follow the interim IC inspection guidance. This NRC interim inspection guidance document and the RMP's increased control inspection form can be found on the Radioactive Materials Program electronic files at s:datadire/INSPFORM/CURRENT/INCREASED CONTROLS INSP REPORT. IC inspections shall be combined with routine health and safety inspections to maximize inspection resources, unless previously approved by the RMP manager. If any new licensees or existing licensees become subject to the IC requirement, the Program will follow the same procedures as above and the NRC IC Pre-licensing Guidance document. IC Inspection Reports are to be maintained in the Licensee File.

IP-11 Inspection Guidance For Materials Programs

Inspection Forms are tailored to the Type of Licensee being inspected and can be found at: (S:Drive)>Datadire>Inspform>Current. These documents are to be used as guidelines for inspectors in determining the inspection requirements for operational and radiological safety aspects of various types of licensee activities. In performing an inspection utilizing the appropriate Inspection Form(s), observations made by the inspector in addition to any Licensee commitments, will be needed to adequately evaluate the licensee's program.

List of Enclosures:

Enclosure 1 – Inspection Priority Codes Assigned To Program Codes
Enclosure 2 – Pre-Inspection Checklist
Enclosure 3 – Quantities of Concern Threshold Limits
Enclosure 4 – NRC Inspection Procedure Manuals

Enclosure 1
Inspection Priority Codes Assigned To Program Codes

License Category	License Code	Priority
Broad Scope (Medical)	BM	2
Institutional Medical-Mult. Use (Including HDR)	AL	2
Institutional Medical-Mult. Use	NUM, RT	3
Institutional Medical-Single Use (Diagnostic only, no written directives)	NUM	5
Institutional Medical-Single Use (Therapy only)	RT	3
Medical Teletherapy	T	3
Gamma Knife, Emerging Medical Technologies	GK, EMT	2
Eye Applicators	E	3
Private Practice (Therapy-HDR)	AL	2
Private Practice (Limited Therapy)	PNC	3
Private Practice (Diagnostic Only)	PNL, NUC	5
Private Practice (Veterinary)	V	5
Nuclear Pacemakers	NPM	5
Bone Mineral Analyzers	B	5
Mobile Nuclear Medicine (Written directives required)	MRT	2
Mobile Nuclear Medicine (No written directives)	M	3
Broad Scope (Academic) (Type A & B)	BAA, BAB	3, 5
Broad Scope (Academic) (Type C)	BAC	5

Academic (Non-Broad)	A	5
Broad Scope (Industrial R&D) (Type A)	RDA	3
Broad Scope (Industrial R&D) (Type B)	RDB	5
Broad Scope (Industrial R&D) (Type C)	RDC	5
Industrial Research & Development	RD	5
Broad Scope Distribution, Specific (Type A)	DSA	2
Broad Scope Distribution, Specific (Type B)	DSB	5
Broad Scope Distribution, Specific (Type C)	DSC	5
GL Distribution	GLD	5
Possession Incident to NRC Exempt Distribution	ED	5
Broad Scope (Medical Manufacturer for Distribution) (Medical R&D)	BMMD, BMRD	2
Accelerator Production Sites	AP	2
Nuclear Pharmacy	NUP	2
Medical Manufacturer for Distribution	MMDS, MDGL, MDSR	2, 3
Medical Distribution or Redistribution Only (sealed sources)	MDSS	3
Medical Distribution or Redistribution Only (GL)	MDGL	5
Industrial Mfg. for Distribution	DS	3
Radioactive Waste Disposal-Burial	WDB	2
Radioactive Waste Disposal-Incineration	WDI	2
Radioactive Waste, Processing & Repackaging	WDPR	2

Radioactive Waste, Prepackaged	WDP	3
Gamma Irradiators (Self-Shielded)	GI	5
Gamma Irradiators (<10K Ci)	GI	5
Gamma Irradiators (>10K<100K Ci)	GI, GIP	2
Gamma Irradiators (>100K<1M Ci)	GIP	2
Gamma Irradiators (>1M Ci)	GIP	2
Nuclear Laundries	NL	3
Contaminated Equipment	CTE	5
Field Flooding Studies	FF	3
Well Logging /Tracers	WL	3
In-house Industrial Radiography	IRF	2
Multiple Job-Site Industrial Radiography	IRB	1
Industrial (other)(NORM)(Gauge Service)	NOR, GS	5
Installed Gauges	FG	5
Industrial Diagnostic Systems Exceeding IC Values	IDS	2
Gas Chromatograph, Analytical Measuring Systems, etc.	GS, LG, MS	5
Portable Moisture Density Gauges, Lead Analyzers, etc.	PG, LPA	5
Teletherapy Service Co.	TS	5
Consultants(Leak Testing Service)	LT	5
Other Services, Greater (> 100 Ci sources)	OSG	2

Other Services, Limited (< 100 Ci sources)	OSL	5
Calibration Sources	CAL, CAM	5
Radium Calibration Sources and Other Radium-226 Specifically Licensed	R	3
Decontamination Services	DEC	3
Civil Defense (Emergency Management)	EM	5
Civil Defense (Emergency Response)	ER	5
Source Material	SM	5
Depleted Uranium	DU	5
In-Vitro Specific Licenses	IVS	5
In-Vitro General Licenses	GL, IVG	N/A
General Licensed Devices (except tritium safety signs)	GL	N/A

Enclosure 2
Pre-Inspection Checklist

Inspector Initial	Pre-Inspection Review
	Review the license to determine if any unusual conditions would affect conducting the inspection (i.e., authorization for use of material at temporary job sites, significant changes in operations).
	Review the license to determine if it has any security requirements.
	Review the licensee's recent inspection and enforcement history (i.e., results of previous inspections, any outstanding open items and any events reported by the licensee during the current inspection cycle).
	Review any commitments made by the licensee or restrictions imposed by the as a result of a corrective action plan or a consent order.
	Review any notes in the file regarding special inspection emphasis (i.e., license reviewer's note to request a near term inspection regarding a significant licensing action).
	Review any security requirements, guidance, questions and answers, and supplemental correspondence.
	Review any allegation trends and a follow-up of the licensee's evaluation and response to the allegation.
	Review if the licensee is authorized to possess increased control quantities, request the National Source Tracking System (NSTS) inventory record at least two days in advance.
	Ensure functionality and appropriateness of inspection equipment (namely, that the correct detector types and resources are brought with the inspector to perform necessary measurements/counts/ surveys/swipes according to the radioactive materials possessed by the licensee).

_____
Signature of Inspector

_____
Signature of Program Manager

Enclosure 3
Quantities of Concern Threshold Limits

Radionuclides	Category 1		Category 2	
	Terabecquerels (TBq)	Curies (Ci)[1]	Terabecquerels (TBq)	Curies (Ci)[1]
Americium-241	60	1600	0.60	16
Americium-241/Be	60	1600	0.60	16
Californium-252	20	540	0.20	5.4
Curium-244	50	1400	0.50	14
Cobalt-60	30	810	0.30	8.1
Cesium-137	100	2700	1.0	27
Gadolinium-153	1000	27,000	10	270
Iridium-192	80	2200	0.80	22
Promethium-147	40,000	1,100,000	400	11,000
Plutonium-238	60	1600	0.60	16
Plutonium-239/Be	60	1600	0.60	16
Radium-226	40	1100	0.40	11
Selenium-75	200	5400	2.0	54
Strontium-90 (Y-90)	1000	27,000	10	270
Thulium-170	20,000	540,000	200	5400
Ytterbium-169	300	8100	3.0	81

[1] The regulatory standard values are given in TBq, and shall be used for compliance. Curie (Ci) values are provided for practical usefulness only and are rounded after conversion. Note: Values are read to two significant digits.

Use the following method to determine which sources of radioactive material require increased controls (ICs):

Include any single source larger than the quantity of concern

Include multiple co-located sources of the same radionuclide when the combined quantity exceeds the quantity of concern

For combinations of radionuclides, include multiple co-located sources of different radionuclides when the aggregate quantities satisfy the following unity rule: [(amount of radionuclide A) ÷ (quantity of concern of radionuclide A)] + [(amount of radionuclide B) ÷ (quantity of concern of radionuclide B)] + etc.....$\geq$ 1

Enclosure 4
NRC Inspection Procedure Manuals

These documents are to be used as guidelines for inspectors in determining the inspection requirements for operational and radiological safety aspects of various types of licensee activities. In performing an inspection, these procedures may be needed to adequately evaluate the licensee's program.

IPs in this section are classified into two categories: Routine (R) and As-Needed (N). "Routine" (R) means those IPs that are generally used to evaluate licensee performance. "As-Needed" (N) means those IPs that are specifically used for a certain situation.

IP No.	Inspection Manual Chapter/Inspection Procedure Title	Routine (R) or As Needed (N)
IMC 2800	Materials Inspection Program (NRC equivalent to this procedure)	R
IMC 2602	Decommissioning Oversight and Inspection Program	N
IP 87121	Industrial Radiography Programs	R
IP 87122	Irradiator Programs	R
IP 87123	Well Logging Programs	R
IP 87124	Fixed and Portable Gauge Programs	R
IP 87125	Materials Processor/Manufacturer Programs	R
IP 87126	Industrial/Academic/Research Programs	R
IP 87127	Radiopharmacy Programs	R
IP 87129	Master Materials Program	N
IP 87130	Nuclear Medicine Programs & Written Directive Not Required	R
IP 87131	Nuclear Medicine Programs & Written Directive Required	R
IP 87132	Brachytherapy Programs	R
IP 87133	Medical Gamma Stereotactic Radiosurgery and Teletherapy Programs	R
IP 87134	Medical Broad-Scope Programs	R
IP 87135	Panoramic and Underwater Irradiator Security Program (Non-Public)	N
IP 87136	Manufacturer and Distribution (M&D) Security Program (Non-Public)	N
IP 87103	Inspection of Materials Licensees Involved in an Incident or Bankruptcy	N
IP 84750	Radioactive Waste Treatment and Effluent and Environmental Monitoring	R
IP 87104	Decommissioning Inspection Procedure for Materials Licensees	N
IP 87102	Maintaining Effluents from Materials Facilities As Low As Is Reasonably Achievable (ALARA)	R
TI 2800/038	IC Inspections (RCPD-06-012 Found in IC Toolbox)	N

http://www.nrc.gov/reading-rm/doc-collections/insp-manual/inspection-procedure/

Revisions to this document indicated in bold and underlined:

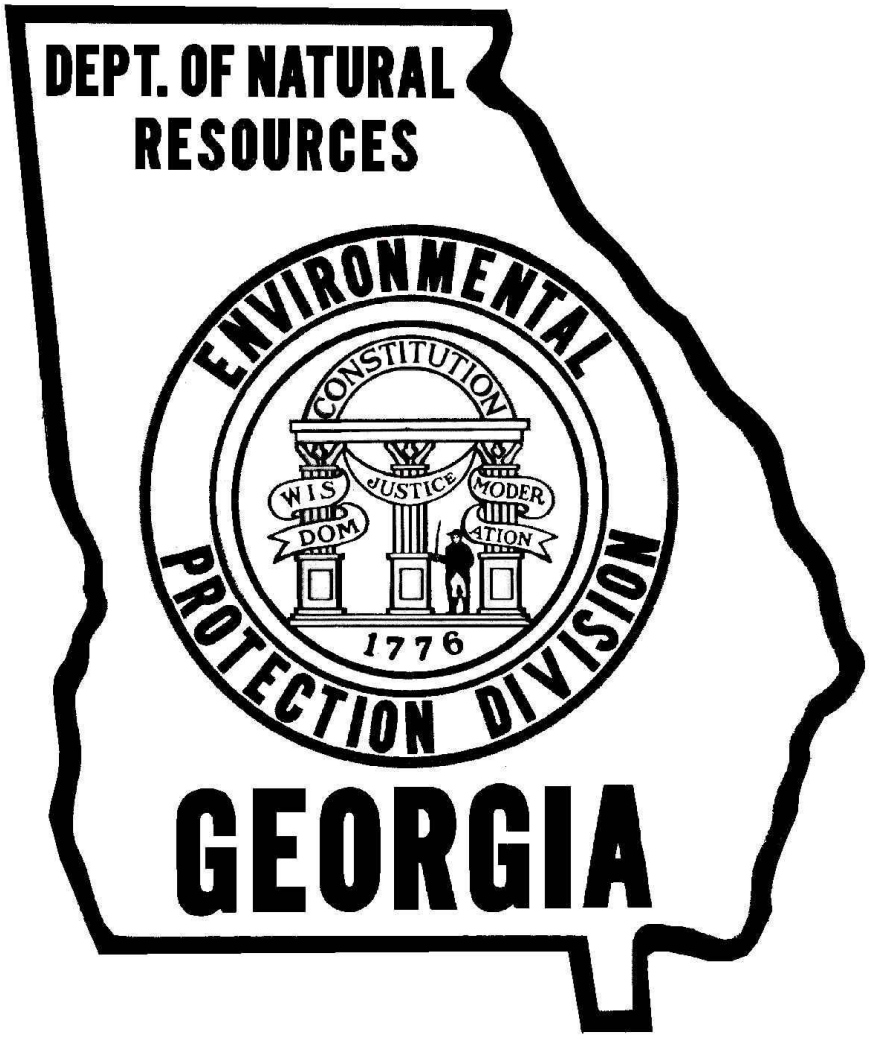
- Minor corrections: formatting, grammar, correct references, etc.
- 2 Person Rule for Inspections REMOVED for qualified inspectors
- **Inspection Reports are to be typed and completed within 30 Days of completing an inspection**
- Results of inspections may be reported to the licensee by either issuing a Compliance Letter or Notice of Violation (NOV) to the licensee **and should be completed no later than two weeks following the inspection.**
- Licensees that significantly expanded its program (i.e. adding an HDR) shall be inspected within **6 months** of the date of the amendment.
- It is of utmost importance to inspect licensed activities at temporary job sites or activities performed by contracted personnel **when possible**.
- **Ideally, a walk-through should occur upon arrival to the Licensee's facility/job site or directly after the Entrance Meeting.**
- **If determined that the licensee does not possess radioactive material, but plans future usage then the associate shall revise the next onsite inspection date in the database for when the licensee will possess radioactive materials. The initial inspection must be performed and shall not exceed 12 months from license issuance.**
- Reviewers should use the **Pre-licensing Guide and Checklists** to determine if pre-licensing visits are needed.
- Pre-licensing visits must be completed before the issuance of a license to verify that the applicant has implemented the **needed** requirements for **expanded licensed uses** or Increased Controls before the licensing action is issued.
- A change to a lower or higher inspection priority can be made when it is determined that the licensed activity being carried out is of a priority different from that initially assigned and is one which warrants a lower or higher inspection priority under the system in Enclosure 1. **Priority Change must be completed in the Inspections portion of the data base.**
- **Inspectors should take care when scheduling the next routine inspection in the data base. Licensees can have multiple Priorities assigned to them such as a large Medical Institution with an HDR (Pri. 2) and Diagnostic Limited Therapy (Pri. 3). Inspectors should be aware that when an Inspection is conducted for the HDR only that the next inspection date is entered into the data base one year out to accommodate the Diagnostic Limited Therapy Inspection frequency, if not conducted in conjunction with the HDR.**
- At least 20% of the locations must be inspected on a rotational basis during the routine **inspection** interval.
- If escalated enforcement action **(Consent Order)** has taken place for a particular licensee, a special inspection that focuses on Severity Level III or above violation(s) shall be scheduled and conducted within 6 months of the issuance of the escalated enforcement action (Severity Level III or above).

- The reduced inspection date should be **indicated in the inspections portion of the data base with reasons for reduced frequency**.
- A license reviewer may request a special inspection, if, during the licensing review process, it is determined that the licensee's program has significantly expanded or activities have ceased. [See the six points in the preceding paragraph] In that case, the license reviewer, in consultation with management **will insure that the proper priority change is indicated in the inspections portion of the data base**.
  - For a licensee authorized to work at a temporary job site, inspectors shall make every reasonable attempt to include an unannounced inspection of licensed activities at such location(s). An inspection at these sites should be attempted on every other routine inspection **conducted at the licensee's principal place of business**.
  - If an unannounced inspection of the location(s) is not possible, then the inspector should attempt to arrange an announced inspection at the temporary job site(s) **when possible**.
  - All documented inspection results **shall be typed** on the License Type Specific Inspection Report, either in the summary/ findings section or the appropriate section of the inspection report, shall be a detailed narrative of the inspection from the entrance interview through the exit interview and must contain the following minimum information:

    1. the procedure(s) used;

    2. the focus areas examined **and narrative of observations as it pertains to the Performance Based Inspection Criteria**;
- IC inspections shall be combined with routine health and safety inspections to maximize inspection resources, unless previously approved by the RMP manager. If any new licensees or existing licensees become subject to the IC requirement, the Program will follow the same procedures as above and the NRC IC Pre-licensing Guidance document. **IC Inspection Reports are to be maintained in the Licensee File.**
- RMP staff will **attempt to** inspect a minimum of 20% of the reciprocity work conducted in Georgia annually. **Candidates for Inspection are determined by Management using established NRC Criteria and are distributed on a bi-weekly basis.** These inspections should focus on priorities 1 and 2.

GEORGIA DEPARTMENT OF NATURAL RESOURCES
AIR PROTECTION BRANCH
RADIOACTIVE MATERIALS PROGRAM



LICENSING PROCEDURES

September 2015

Enclosures

Changes to this document, September 2015

LICENSING PROCEDURES (LP)

LP-01 Purpose.

To establish policy with regards to licensing procedures for Georgia Radioactive Materials Licensees authorized to possess, use, transfer, and dispose of radioactive material (RAM) associated with various types of use and services (i.e., industrial, academic, research and development, manufacturing, distribution, irradiators, industrial radiography, medical programs, leak testing of sealed sources, calibration services, servicing of devices, and transportation related thereto).

LP-02 Objectives.

02.01 To establish licensing procedures for the Radioactive Materials Program (RMP).

02.02 To ensure that all licensing actions will be completed in accordance with the Georgia Department of Natural Resources, Georgia Rules and Regulations for Radioactive Materials, Chapter 391-3-17, applicable RMP guidance and all applicable guidance set forth by the Nuclear Regulatory Commission (NRC).

02.03 To establish a consistent process for completion of licensing actions for prospective licensees and existing radioactive materials licensees, including methodology to insure timely completion of licensing actions assigned to RMP Specialists.

02.04 To establish a cradle to grave accountability process, including all documentation and database entry involved to track licensing actions from receipt of a licensing action request to a final license action approval.

02.05 To establish a consistent policy with regards to proper licensing documentation and handling to include what documentation is acceptable by the RMP to complete licensing actions, handling of licensee propriety information and the proper marking and securing of Increased Controls (IC) licensee documentation.

LP-03 Definitions.

03.01 Abandonment. A license action taken by the RMP to dismiss a licensee's request to alter any portion of its RAM license or commitments made to its RAM license. This action is authorized if the licensee has exceeded the time limits to respond to the RMP's request for additional information to complete a licensing action. This action can also be requested by the licensee to the RMP to abandon a license action request.

03.02 Additional Information Request. Any request made by the RMP to the licensee or applicant to complete any licensing action.

03.03 Amendment Number. Unique identification number assigned to each individual license revision and shall be documented on the routing form and any related correspondence.

03.04 Corrective Copy. A licensing action taken by the RMP to correct a RAM license. A corrective copy may also be requested in writing by the licensee for the RMP's approval.

03.05 Decommissioning. Processes taken on by the licensee that is monitored, reviewed and approved by the RMP in order to free release portion(s) of land, site(s), building(s), etc. where RAM was stored or used.

03.06 Increased Control (IC) Quantities. An aggregated quantity of radioactive material at or above the category 1 & 2 thresholds as specified in Enclosure 2 of these procedures.

03.07 Licensing Action. Any action taken by the RMP to service an existing or prospective license (i.e., new licenses, renewals, amendments, notifications, abandonments/, terminations, corrected copies, etc).

03.08 License Amendment. A written request by an existing licensee to alter or modify any portion of their previously approved RAM license or commitments made to a RAM license.

03.09 License Denial. Licensing action that denies issuance of a RAM license due to an application that was deemed deficient, an applicant who has been deemed unqualified or any evidence that the RMP finds that would indicate a prospective or existing applicant for renewal would be operating in willful

noncompliance.

03.10 License Renewal. An application submitted by an existing licensee for renewal of their existing RAM license.

03.11 License Termination. An application or a written request by an existing licensee to terminate their existing RAM license.

03.12 New License Request. An application submitted by a prospective applicant for issuance of a RAM license.

03.13 Notification. Changes provided by the licensee to the RMP in writing that indicates a change or alterations made on behalf of the licensee to it's existing RAM program operations per Rule 391-3-17-.05(11).

03.14 Pre-Licensing Visit An in person visit to the facility and review of various factual evidence that supports the licensee is who they say they are and that the material licensed will be used as intended.

03.15 Radioactive Materials Quantities of Concern Checklist. A checklist that ensures that RAM will be used as intended and to identify licensees that may be subject to Increased Controls. Utilized when major changes are made to a RAM license through a renewal, amendment, and prior to a new license issuance.

03.16 Routing Form. This form contains all the pertinent information to adequately track the licensing action from receipt of license action request to final license action approval and can be found at: S:\Rad&Policy\Datadire\FORMS\LICENSING

03.17 Signature Authority. Only RMP Specialists who have completed the required training are allowed to independently sign for completed licensing actions. This will be determined through Qualification Journals.

03.18 Specific License Conditions. Certain license conditions that apply only to specific licenses according to type.

03.19 Standard License Conditions. Certain license conditions apply to all licenses regardless of type.

03.20 Specific License Guidance. Licensing actions will be completed utilizing a specific guide designated for a particular RAM license type (i.e., Medical License Guide will be referenced for all Medical Licenses). Appropriate

guides can be found at: S:\Rad&Policy\Datadire\Guides\Current, http://nrc-stp.ornl.gov/ & http://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1556/

03.21 Termination Form. A form utilized by the licensee to officially request termination of its existing RAM license. Enclosure 6.

03.22 Tie Down. Any commitment/statement made on behalf of the licensee to the RMP to conduct its program in any stated manner. Tie downs are listed in the final condition of the licensee's RAM license and are considered binding to the RAM license. Each tie down whether submitted as an e-mail, written correspondence, etc. and all attachments/enclosures are considered an individual tie down and are listed as such in the final condition of the RAM license.

03.23 Timely Filed Letter. A letter issued to the licensee that acknowledges receipt by the RMP of a license renewal request prior to the expiration date of the licensees existing RAM license. The timely filed letter also insures operations authorized by the licensees existing RAM license are able to continue uninterrupted while the RMP reviews the licensee's RAM license renewal request.

LP-04 Receipt of Licensing Actions & Additional Information.

All licensing action requests from licensees or prospective applicants are submitted via mail with original signatures to:

Radioactive Materials Program
4244 International Parkway, Suite 120
Atlanta, GA 30354

Payments shall be mailed to:

Radioactive Materials Fees
P.O. Box 101161
Atlanta, GA 30392

Once a request is received the administrative assistant is responsible for:

- Marking of the request “Received”, with the date of receipt.
- Assigning an amendment number to the licensing action and entering the information for the action into the database.
- Filling out the routing form indicating:

    i. The RMP Specialist/Mentor (if applicable).
    ii. Date assigned.
    iii. Type of licensing action.
    iv. Filling in the date in which the Licensee was informed that their Licensing Action Request has been received by the RMP. Contacting the Licensee can be in the form of email, phone call, etc.
    v. Name of the licensee, license number and amendment number.

- Delivering all of the above to the RMP Specialist to whom the action is assigned.

When additional information is received, a query of the database should be made by the administrative assistant to identify which original licensing action it specifically addresses. The amendment number for the original licensing action should be noted on the correspondence accompanying the additional information, indicating to the administrative assistant which licensing action it addresses and to which RMP Specialist it was assigned. Additional information received via mail is also marked “Received”, with the date of receipt and delivered to the appropriate RMP specialist.

LP-05 Licensing Action Review.

Once a licensing action is assigned to a RMP Specialist, the proper license guidance must be utilized to assess whether or not the licensing action is approved. The RMP Specialist should ensure that the licensee addresses all pertinent requirements as stated in the appropriate guide to include any requirements to insure compliance with Rule 391-3-17 and any Nuclear Regulatory Commission guidance to provide a thorough review. Additional information requests are to be made by the RMP Specialists to the licensee or applicant in order to meet the above requirements to approve a licensing action. RMP License Guidance can be found at: S:\Rad&Policy\Datadire\Guides\Current. NRC License Guidance can be found at: http://nrc-stp.ornl.gov/ & http://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1556/

RMP Specialists will need to verify that a Licensee or Licensee Applicant is current and up to date with Annual Fees and Application Fees. Any License Action can be held for approval by the RMP until fees are paid. Proper communication must be made by the RMP Specialist to inform the Licensee or Licensee Applicant that fees are due and are necessary to complete a New Application or Licensing Action.

For any Licensing Action where an entity (i.e. Law Firm, Consultant, etc.) is operating on behalf of a Licensee or Licensee Applicant, a letter must be signed by the Licensee or Applicant and submitted to the RMP indicating that the entity has been granted the authority to submit Licensing Actions on behalf of the Licensee or Applicant. Letters granting this authority will be submitted for every License Renewal and at any time that an entity begins to act on behalf of the Licensee. For any Licensing Action submitted by an entity working on behalf of the Licensee the RMP Specialist will provide communication to the Licensee and the entity in order to complete any Licensing Action. Entity contact information will be entered in the Individual Info portion of the Database.

LP-05-1 Timely Filed Letters.

For renewals, once an application is received (no later than 30 days prior to the expiration date of the licensee's existing RAM license) and verified to have been signed by the proper authority (licensee's member of management/ or person designated by management such as the Radiation Safety Officer) a timely filed letter is issued by the RMP Specialist to the licensee. Extenuating circumstances (within 30 days of expiration or past expiration, open violations, vastly incomplete packages, etc.) shall be discussed with the Program Manager prior to issuance of a timely filed letter. Timely filed letters will not be left open indefinitely and will be assigned an expiration date 90 days beyond the expiration date of the license. This shall be communicated to the licensee in their timely filed letters along with the notice that if all necessary documents are not received prior to the 90-day cutoff period then their RAM license will expire, Enclosure 3.

Extension of expiration dates in Timely Filed Letters are to be made on a case by case basis.

LP-05-2 Additional Information Requests.

Often, the RMP Specialist will have to request additional information from the licensee to ensure that all the requirements of the guide, Rule 391-3-17 and any applicable NRC requirements are addressed. RMP Specialists shall provide a full review of all submitted materials and create a detailed list of anything missing to complete the license action. This list will be supplied to the licensee via mail, electronic mail, or fax. It is important that the RMP Specialist do everything possible to ensure the initial list is as comprehensive as possible to minimize multiple requests for additional information during the review period. Any other additional items outside of the Regulations or Guide must be discussed with Management prior to requesting the items of the Licensee or Applicant.

It shall be communicated to the licensee that they have 45 days from the date of notice to respond with all deficient items and that failure to do so will result in the abandonment of that license action, Enclosure 10. **Verbal communication must be backed up by written correspondence for record retention and maintained in the licensee's file.** If an e-mail is sent to the licensee requesting additional information, the final paragraph of Enclosure 4 should be inserted into the e-mail or any other correspondence requesting additional information to conform to the 45-day time frame allowed for the licensee's response. Receipt of additional information by the RMP Specialist received thru e-mail, fax, etc. must have a receipt date and name of the sender. Dates for requests for additional information and receipt of additional information are to be entered into the database by the RMP Specialist. An example letter for requesting additional information is provided, Enclosure 4. Additional information logs are entered by clicking the Amendment Number in the Database.

LP-05-3 Acceptable Documentation for Licensing Actions.

Documentation provided by the licensee to the RMP that is not necessary to complete a license action is to be removed and destroyed (shredded). For Sealed Source & Device Registries, only the pages containing the type of device and acceptable source and activity are to be maintained. When approving authorized users, the RMP will not accept curriculum vitaes or college transcripts and these documents should be disposed of. RMP Specialists should take care to remove, black out and shred any documentation that could lead to potential identity theft (social security numbers, home addresses, etc.). When agreement state licenses or NRC licenses are submitted for approval of authorized users, the RMP specialist will maintain the pages of applicable RAM authorized on the license and the page that lists the authorized user. All other pages are to be destroyed. Any other documentation supplied by the licensee that

contains information such as patient names from medical facilities, etc. is to be removed and destroyed in the same manner. All supporting documentation to justify a licensing action approval will be maintained in the licensee's file. See LP-05-6.

For renewals, the licensee must submit all information in its entirety. Prior documentation previously approved by the RMP (i.e. shielding diagrams, facility layouts, etc.) cannot be referenced by the licensee for consideration by the RMP for renewals. The licensee must resubmit this type of documentation in its entirety even if no changes have occurred. Subsequently, the RMP Specialist cannot use previously submitted information to apply to renewals regardless if no changes have occurred to these specific items.

For any License Action that involves the Release of an Area where RAM was used or stored the RMP Specialist will handle the Licensing Action in accordance with Rule 391-3-17.03(16). For any License Action that involves the Transfer of RAM from one entity to another the RMP Specialist will handle the Licensing Action in accordance with Rule 391-2-17.02(19).

Handling of proprietary information and increased controls (IC) documentation will be done in accordance with, LP-14.

LP-05-4 License Conditions.

When preparing a new RAM license, renewal or amendment for approval the RMP Specialist must ensure that all standard licensing conditions and licensing conditions specific to the type of license are properly entered into the body of the license. RMP Specialists should take care to make any appropriate corrections that may have been overlooked in the prior licensing action (i.e., missing conditions, misspellings, incorrect fee, etc.).

LP-05-5 Tie Downs.

Enclosures which accompany an application for a new license, a license renewal, or an amendment request are recorded as a tie down in the final condition of a RAM license. Any response from the licensee addressing additional information requests (including attachments, e-mail, fax, written correspondence or otherwise) are recorded as an individual tie down and are also listed in the final condition of a RAM license. Tie downs are listed top to bottom and represent a historical account of the licensee's commitments for licensing actions. For completed renewal licenses, all previous tie downs are superseded.

LP-05-6 Building a License File.

For new licenses, renewals, amendments and notifications, all documentation must be maintained in the file in a manner that represents a historical account of the licensing action. Any finalized licensing action will have the following information from top to bottom in the first portion of the licensee's file:

- the completed license (on top),
- approval letter provided to licensee (if e-mail is utilized in lieu of an approval letter it must be noted as such in the RAM Database),
- filled out radioactive materials quantities of concern checklist & basis for confidence/pre licensing visit forms as appropriate (See LP-06 & LP-07),
- application or initial request
- any additional correspondence (request for additional information, responses from the licensee, documentation of recorded telephone correspondence, etc.),
- and completed Routing Form.

Notifications that do not require a license to be amended are maintained in the center of a licensee's file and follow the historical context outlined above (notification followed by additional supporting documentation). See LP-08.

LP-05-7 Expiration Date & Initial Inspection Date.

For new license issuance and renewals the RMP Specialist shall enter the new date of expiration into the database. For a new license issuance, the RMP Specialist must also enter the next inspection date into the database as six months from the date of issuance to prompt an initial inspection (the first record will most likely be for a pre-licensing visit, if not, then a record shall be created as a starting point regardless, and notes to summarize why a pre-license visit was not required must be made).

LP-05-8 Superseded Documentation.

Once a renewal is issued, all prior licensing documentation (does not include incident/allegation reports or inspection/compliance history) pertaining to that licensee is considered Superseded. The RMP Specialist will produce a cover sheet that will be inserted over superseded documents with "Superseded" in bold type with the date the documents were superseded and initials of the RMP Specialist. Superseded dates correspond to the date of license renewal.

LP-05-9 Financial Assurance, Acquisitions and Mergers.

Any time a RMP Specialist is reviewing a request that involves two licensees (i.e., mergers, one licensee purchasing facilities/assets held under another licensee which results in a termination of one license and an amendment to another license); the RMP

Specialist will issue final signature authority on the same date for both licensing actions. If more than one RMP Specialist is performing dual license reviews, they will coordinate with each other to ensure that final signature authority is issued for both licensing actions on the same date due to licensing liability issues. Financial Assurance shall be handled in accordance with 391-3-17-.02(8)(g).

LP-05-10 Expedited License Reviews.

For urgent licensing actions (usually requested by a licensee) in which the administrative assistant is not present to assign the licensing action, the RMP specialist may perform their initial review of the licensee's request. The RMP specialist must then inform the RMP Manager of the need to assign an expedited peer review. Once a peer review is completed and approved the RMP specialist can then sign and mail out the completed licensing action. The RMP Specialist must enter all pertinent information into the RAM database to ensure the licensing action is captured.

All licensing actions are to be peer reviewed prior to approval. See LP-15.

LP-05-11 Payment of Fees.

Prior to completing a License Action the RMP Specialist must ensure that the Licensee has paid all required fees. License Actions are to be held until all payments are received by the RMP.

LP-06 Pre-licensing Guidance and Site Visits.

Pre-licensing visits may need to be performed prior to new RAM license issuance, renewals, change of ownership to an entity that is unknown or has never had a license or amendment requests that significantly alters an existing licensee's program (i.e., a licensee requesting to add a gamma knife with no prior approval, a licensee requesting to add fixed gauges with no prior approval, etc.) the RMP Specialist will fill out and follow the PreLicensing - RSRM - Basis for Confidence Form: S:\Rad&Policy\Datadire\FORMS\LICENSNG

This is necessary to confirm that the potential or existing Licensee does have an existing location of RAM use, proper facilities and equipment to maintain compliance for the uses applied for in their application, etc. RMP Specialists can hand deliver the approved License or Amendment to the Licensee once the Specialist is satisfied with the Pre-Licensing visit and that the Licensee has the proper means to operate in compliance. After the RMP Specialist has completed the Pre-Licensing Visit they must enter into the RMP Database the next inspection frequency to be 6 months following License issuance.

LP-07 Increased Controls (IC) Licenses.

Any time the radioactive quantity allowed on a license is changed or initialized with a new license; the RMP Specialist must ascertain whether or not the applicant or existing licensee will be subject to increased controls. The RMP Specialist will fill out the Radioactive Materials Quantities of Concern to determine whether a licensee or applicant will be subject to increased controls. If the RMP Specialist determines that an applicant for a new RAM license or an existing licensee's amendment or renewal request will be subject to increased controls, then all pertinent NRC guidance will be utilized to implement increased controls on the applicant or existing licensee. Increased controls guidance can be found at: http://nrc-stp.ornl.gov/controls.html RMP Specialists shall maintain login access to this increased controls toolbox so it may be used regularly.

Any time a licensee goes from not having increased controls to requiring them, it is necessary to perform a pre-licensing inspection prior to issuing the new license or amendment. This is meant to ensure the proper implementation of all required security measures. Discussion should take place with the RMP manager to determine the entire scope of the inspection (in case they are due for pre-licensing visits, routine health and safety inspections, or some other type of follow up inspection).

Any changes made to an IC license must be reported by the RMP Specialist to the Nuclear Regulatory Commission's Web Based Licensing and License Verification System via e-mail to the following address:
license.submission@nrc.gov

An email sent to the License Verification System with an attachment of the most recent Amendment/New License is acceptable.

For increased control licensees the following must be adhered to in order to decrease the odds of an inadvertent or unauthorized release of security related information which may be used in a malevolent manner:

Any document pertaining to an IC licensee must be clearly marked if it includes any of the following items:

- locations of materials;
- possession limits or actual quantities (therefore any IC license);
- inspection reports (to include reciprocities);
- notices of IC violations and response letters;
- equipment designs;
- facility layouts (to include nearby structures);

- emergency planning documentation (fire, response to attacks, local law enforcement agency agreements, etc.);
- security program details; or
- vulnerability assessments.

All documents, physical, electronic, internally and externally produced must be marked with “Official Use Only – Security Related Information” (OUO-SRI) once identified as sensitive. Headers for electronically generated files with sensitive information shall contain OUO-SRI for each page of that document, and it should be above the header used otherwise as seen in Enclosure 7.

Hand written reports or letters that contain sensitive items must also be marked, and it is sufficient to stamp or hand write the marking with ink on the top of the page. Incoming documents not properly identified by a sender which includes sensitive information must have a stamp or hand written label placed on them when received by the Program.

Sensitive electronic mail must be identified in the subject line by “Sensitive Information”; additionally, no sensitive information should ever be included in the subject line itself. If there is a group of documents with mixed sensitive and non-sensitive information then a cover sheet shall be used to mark the collective as “Sensitive Information.” Electronic mail and cover sheets need to only be marked as OUO-SRI if they have sensitive information within them and not just their attached documents. Samples of these scenarios are included as Enclosures 8 and 9.

Electronic mail should be sent only to individuals with authorization and a need to know for the information being sent and must be marked in accordance with this instruction. Transfer of information via telephone is also acceptable once the individual’s verification is made same as for electronic mail; however, a declaration to the individual about the sensitive nature of information must also be made.

Mailing may be done within a single opaque envelope that has no exterior markings suggesting it is OUO-SRI, and again the recipient must be vetted. Documents may also be faxed, but only after verifying the individual and that they are physically present at the fax to receive the transmission. All documents included within faxes or mailings must be properly marked according to this instruction.

When receiving items, staff should be directly present to take possession. These shall be properly marked upon receipt if the sender did not do so.

Any and all documentation with respect to IC licensees shall be locked within the proper filing cabinet when not actively working on it, even if it is not marked as OUO-SRI it still must be locked with the rest of its license. The file cabinet itself shall have no external

marking to indicate that it contains “Sensitive Information.” Only program staff shall have knowledge of the key to access this cabinet.

LP-08 Notifications.

Changes provided by the licensee to the RMP in writing that indicates a change or alterations made on behalf of the licensee to its existing RAM program operations per Rule 391-3-17-.05(11) are handled as Notification licensing action. Notifications are handled in the same manner as other licensing actions. Initial reviews and peer reviews apply to notifications like any licensing action and involve the same tracking methods as any other licensing action. Notification that require license actions are recognized as Amendments in the RMP database. Notifications that do not require an Amendment to the License shall be maintained in the Licensee File.

LP-09 Denial of License Application & License Renewals.

In the event that a RMP Specialist has determined that an applicant’s license application is deficient, has made every reasonable attempt to obtain the necessary information to issue/renew such a license and has afforded the applicant the approved time frame to respond to requests for additional information then the Director can deny issuance/renewal of the RAM license. Prior to allowing a RAM license to officially expire, a discussion must take place with the RAM Program Manager informing the Manager of the situation and **sufficient notification must be made to the licensee’s member(s) of management** of the RMP’s intent to allow their RAM license to expire. This action must be fully documented by the RMP Specialist. This also applies if it is discovered by the RMP Specialist that an applicant will be operating in willful noncompliance if issued a RAM license and the RMP Specialist has compiled sufficient evidence to support a denial of issuance or renewal. Signature authority for this action is reserved only for the Director. (Enclosure 5)

Reasons for this action include but are not limited to:

1. Items not addressed or met as stated in license guidance and regulations.
2. Statements or written correspondence found to be in noncompliance with Rule 391-3-17 or Nuclear Regulatory Commission Rules and Laws.
3. Significant licensee history of noncompliance as demonstrated in its past inspection history and current standing.
4. Documented evidence by the RMP Specialist that proves a licensee is or will be operating in **noncompliance in a manner that threatens health and safety**.
5. Not providing the requested information in a timely matter.

LP-10 Abandonment of a Licensing Action other than License Issuance & Renewals.

If the RMP Specialist has been unable to acquire the additional information requested to complete a licensing action, has made every reasonable attempt to obtain the information required to complete the licensing action and has afforded the licensee the approved time frame to respond to requests for additional information the licensing action can be abandoned by the RMP Specialist. Sufficient notification must be made to the licensee's member(s) of management of the RMP's intent to abandon a requested license action. Abandonment of a licensing action can also be made by the licensee if they are unable to present the proper documentation necessary for the RMP's approval of a requested licensing action. Abandonment of a License Action should be completed by the RMP Specialist following 90 days of the License Action being in house and incomplete. A formal letter notifying the licensee of the decision to terminate work on their licensing action can be found in Enclosure 10. Documentation should be kept, Abandonment letter, files leading up to action or an official request by the Licensee to Abandon a License Action are kept in middle of file.

LP-11 License Termination.

A licensee may request termination of their existing RAM license in writing and submit it to the RMP. The transferor and transferee must sign a documented accountability of the transfer of any RAM sources possessed by the licensee and a proper close out survey must be conducted and documented for all areas where RAM was used and/or stored at the licensee's facility(s). These documents and all other pertinent information on the termination form must be completed in its entirety by the licensee and submitted to the RMP. (Enclosure 6).

LP-12 Transfer of Ownership.

Licensees planning to transfer ownership, to change the corporate status, or to change control of licensed activities are required to provide full information about the change to the RMP 90 days prior to the proposed action. All points in Attachment 1 of the transfer of ownership of control of licensed activities guide must be addressed in writing and submitted to the RMP. This guide can be found at:
http://www.georgiaepd.com/Files_PDF/techguide/pcb/xferownr1.pdf

LP-13 Decommissioning.

Decommissioning activities proposed by the licensee to the RMP shall be submitted in writing. Guidance for decommissioning can be found at:
http://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1757

LP-14 Handling of Proprietary Information and Increased Controls (IC) Documentation.

Certain licensees will have to submit proprietary information to the RMP in order to complete a licensing action. Often, this type of documentation is commonly labeled as: “Proprietary Information”, “Withhold from Public Disclosure”, “Trade Secret”, etc. Proprietary information may not be marked in this manner but may be requested by the licensee or applicant that it be handled as such. Every reasonable precaution must be taken on behalf of the RMP Specialist to protect this information. See **Georgia Open Records Act (GORA)**. RMP Specialists can advise the Licensee with regards to GORA issues. If such material is submitted for a License Action the RMP Specialist must discuss the proper handling of the materials with Management.

LP-15 Peer Reviews of Licensing Actions.

It is the policy of the RMP that all licensing actions are to be peer reviewed prior to any licensing action approval. Once a RMP Specialist has completed their initial review of a licensing action, the initial licensing action request, all supporting documentation with the completed portion of the routing form for “license reviewer”, along with any applicable pre licensing forms are submitted as an entire package to the Team Leader to be assigned to a second reviewer.

RMP Specialists who have not completed the required training to be granted signature authority may be assigned a licensing action and a mentor who has been granted signature authority. The mentor is responsible for working with the RMP Specialist in training on their assigned licensing action and to provide all the proper guidance to ensure that a quality licensing action product is achieved. Once the mentor has approved of a RMP Specialists licensing action the entire package is submitted to the Team Leader to be assigned to a second reviewer.

Once a second review of a licensing action is approved it is then transferred back to the RMP Specialist whom it was originally assigned to with the “second reviewer”/”feedback discussion dates” portion of the routing form filled out. The RMP Specialist will then make any necessary corrections provided by the second reviewer and corrections will be signed off by the second reviewer on the routing form before any final signature authority is issued by the RMP Specialist whom has signature authority to approve an applicant or existing licensee’s license action request.

All licensing actions are to be completed within the timeframes provided by the License Action Timeliness Table:

Action	Primary Review (Days)	Secondary Review (Days)
Notification	14	7
Amendments	28	14
Terminations	28	14
New/Renewals	42	21

LP-16 Completion of Licensing Action Requests.

When a RMP specialist approves a licensing action the following is to be completed:

- Entering any license changes into the database.
- Complete the Pre-Licensing Checklist if applicable.
- Verify copy of the license, cover letter and routing form is in the licensee's file.
- Initial where appropriate as indicated on the routing form.
- Mail out original cover letter and license. Email with attached license is acceptable and must be indicated in the data base.
- Return the licensee's file to the file room.

Enclosures

Enclosure 1 – Priority Codes
Enclosure 2 – Quantities of Concern Threshold Limits
Enclosure 3 – Licensee Timely Filed Letter
Enclosure 4 – Request for Additional Information Letter
Enclosure 5 – Declined License Issuance Letter
Enclosure 6 – Termination Form
Enclosure 7 – OUO-SRI Headers
Enclosure 8 – OUO-SRI Sample E-mail
Enclosure 9 – OUO-SRI Cover Sheet
Enclosure 10 – Abandon Letter

Enclosure 1
Priority Codes

License Category	License Code	Insp Priority
Medical Teletherapy	T	3
Gamma Knife	T	2
Broad Medical	BM	2
Eye Applicators	E	3
Source Material	SM	5
Depleted Uranium	DU	5
Institutional Medical-Mult. Use	AL	2
Institutional Medical-Mult. Use	NUM, RT	3
Institutional Medical-Mult. Use	NUM	5
Institutional Medical-Single Use	RT, NUM	3
Private Practice (Therapy-HDR)	AL	2
Private Practice (Limited	PNC	3
Private Practice (Diagnostic	PNL, NUC	5
Private Practice (Veterinary)	V	5
In-Vitro Specific Licenses	IVS	5
In-Vitro General Licenses	GL,IVG	N/A
Bone Mineral Analyzers	B	5
Nuclear Pharmacy	NUP	2
Medical Manufacturer for	MMDS, MDGL,	2, 3
Medical Distribution or	MDSS	3
Medical Distribution or	MDGL	5

Mobile Nuclear Medicine	M	3
Industrial Mfg. for Distribution	DS	3
Field Flooding Studies	FF	3
Installed Gauges	FG	5
Gas Chromatograph, etc.	GS, LG, MS	5
Portable Moisture Density	PG, LPA	5
Calibration Sources	CAL, CAM	5
Calibration Sources (Radium)	R	5
Decontamination Services	DEC	3
Industrial (other) (NORM)(Gauge	NOR, GS	5
Contaminated Equipment	CTE	5
In-house Industrial Radiography	IRF	2
Multiple Job-Site Industrial	IRB	1
Gamma Irradiators	GI	5
Gamma Irradiators (<10K Ci)	GI	5
Gamma Irradiators (>10K<100K	GI, GIP	2
Gamma Irradiators (>100K<1M	GIP	2
Gamma Irradiators (>1M Ci)	GIP	2
Broad Scope Distribution,	DSA	2
Broad Scope Distribution,	DSB	5
Broad Scope Distribution,	DSC	5
GL Distribution (source and / or		N/A
GL Distribution (no source and		N/A
NARM Exempt Distribution		N/A
NARM Exempt Distribution (no		N/A
Well Logging /Tracers	WL	3
Nuclear Laundries	NL	3
Industrial Research &	RD	5
Broad Scope (Academic) (Type	BAA, BAB	3, 5
Broad Scope (Academic) (Type	BAC	5
Broad Scope (Industrial R&D)	RDA	3
Broad Scope (Industrial R&D)	RDB	5
Broad Scope (Industrial R&D)	RDC	5
Broad Scope (Medical	MMDS, MDGL,	2
Civil Defense (Emergency	EM	5
Civil Defense (Emergency	ER	5

Teletherapy Service Co.	TS	5
Consultants(Leak Testing	LT	5
G L Devices (except tritium	GL	N/A
Academic (Non-Broad)	A	5
Device Evaluation	DE	N/A
Source Evaluation	SE	N/A
Radioactive Waste	WDB	2
Radioactive Waste	WDI	2
Radioactive Waste, Processing	WDPR	2
Radioactive Waste,	WDP	3

Enclosure 2
Quantities of Concern Threshold Limits

Radionuclides	Category 1		Category 2	
	Terabecquerels (TBq)	Curies (Ci)[1]	Terabecquerels (TBq)	Curies (Ci)[1]
Americium-241	60	1600	0.60	16
Americium-241/Be	60	1600	0.60	16
Californium-252	20	540	0.20	5.4
Curium-244	50	1400	0.50	14
Cobalt-60	30	810	0.30	8.1
Cesium-137	100	2700	1.0	27
Gadolinium-153	1000	27,000	10	270
Iridium-192	80	2200	0.80	22
Promethium-147	40,000	1,100,000	400	11,000
Plutonium-238	60	1600	0.60	16
Plutonium-239/Be	60	1600	0.60	16
Radium-226	40	1100	0.40	11
Selenium-75	200	5400	2.0	54
Strontium-90 (Y-90)	1000	27,000	10	270
Thulium-170	20,000	540,000	200	5400
Ytterbium-169	300	8100	3.0	81

[1] The regulatory standard values are given in TBq, and shall be used for compliance. Curie (Ci) values are provided for practical usefulness only and are rounded after conversion. Note: Values are read to two significant digits.

Use the following method to determine which sources of radioactive material require increased controls (ICs):

Include any single source larger than the quantity of concern

Include multiple co-located sources of the same radionuclide when the combined quantity exceeds the quantity of concern

For combinations of radionuclides, include multiple co-located sources of different radionuclides when the aggregate quantities satisfy the following unity rule: [(amount of radionuclide A) ÷ (quantity of concern of radionuclide A)] + [(amount of radionuclide B) ÷ (quantity of concern of radionuclide B)] + etc.....≥ 1

Enclosure 3

Georgia Department of Natural Resources
Environmental Protection Division, Air Protection Branch
4244 International Parkway, Suite 120, Atlanta, Georgia 30354
Judson H. Turner, Director
404-363-7000

[Date]
Amendment Number:

[Name, Title]
[Licensee]
[Address]

[Mr., Mrs., Dr., etc]:

This is to acknowledge receipt of your application for renewal dated [ ], of Georgia Radioactive Materials License Number **GA [ ]**. Your application is deemed to be a timely filed application for renewal.

This letter expires on [mm/dd/yr]. If the Radioactive Materials Program determines additional information is required, then you will be required to address these deficiencies in a timely manner. Failure to do so may result in expiration of your Georgia Radioactive Material License and you will no longer be authorized to possess, store or use radioactive materials in the State of Georgia.

Please list the assigned amendment number in future correspondences relating to this renewal to avoid delays. If you have any questions, please do not hesitate to contact me at: [Your desk phone number] and [Your e-mail].

Sincerely,

[Reviewer Name]
Environmental Compliance Specialist
Radioactive Materials Program

Enclosure 4

Georgia Department of Natural Resources
Environmental Protection Division, Air Protection Branch
4244 International Parkway, Suite 120, Atlanta, Georgia 30354
Judson H. Turner, Director
404-363-7000

Date
Amendment #:

[Name, Title]
[Licensee]
[Address]

[Mr., Mrs., Dr., etc]:

In order to complete your [Amendment, Renewal, etc.] request for Georgia Radioactive Materials License Number **GA [ ]**, the Radioactive Materials Program will require the following additional information be submitted:

1.

Please respond in writing while listing the assigned amendment number to avoid delays. If the above additional information is not submitted to our office within 45 days of this notification, your [Amendment, Renewal, etc.] request will be dismissed, your timely filed letter will expire and you will be required to resubmit your request in its entirety for reconsideration.

If you have any questions, please do not hesitate to contact me at: [Your desk phone number] and [Your e-mail].

Sincerely,

[Reviewer Name]
Reviewer's Title
Radioactive Materials Program

Enclosure 5

Georgia Department of Natural Resources
Environmental Protection Division, Air Protection Branch
4244 International Parkway, Suite 120, Atlanta, Georgia 30354
Judson H. Turner, Director
404-363-7000

[DATE]
[Amendment #]

[Mr., Ms., etc.]
[Address]

Dear [Mr., Ms., etc.]:

The Radioactive Materials Program has declined your request for [a Radioactive Materials License/License Renewal] due to the following reasons: [Pick one or more of the following and discuss alternative choices with manager]

1. Your Application was deemed deficient and the Radioactive Materials Program is unable to issue you a Georgia Radioactive Materials License.

2. The Radioactive Materials Program was unable to obtain the required additional information, request(s) dated [Date(s)] to issue you a License Renewal. Your existing Georgia Radioactive Materials License is now considered to be expired.

3. The Radioactive Materials Program has determined that you will be operating in noncompliance if issued a Georgia Radioactive Materials License.

Please feel free to reapply for a Georgia Radioactive Materials License and your request will be considered. If you have any questions, please do not hesitate to contact me at: [RMP manager phone number] and [RMP manager e-mail].

Sincerely,
[Name]
Manager/Director
Radioactive Materials Program

Enclosure 6

GEORGIA DEPARTMENT OF NATURAL RESOURCES
RADIOACTIVE MATERIALS PROGRAM
REQUEST TO TERMINATE RADIOACTIVE MATERIAL LICENSE

1. Licensee Name_____
2. License Number_____

3. Address _____
No. Street/ P. O. Box No. City, State Zip code

4. Contact Person_____ 5. Telephone Number

6. Request is hereby made that the Radioactive Material License described above be terminated for the following reason:
_____
_____

7. Radioactive Material possessed under this license has been disposed of as indicated below:

- Í No materials have been possessed or procured by the licensee under this licensee.
- Í All material was used for the licensed purposes; none remains.
- Í All material was leased, and has been returned to lessor.

  Name of lessor: _____
  License No._____
- Í Lessor acknowledgement of receipt attached.
- Í Material has been transferred to the following licensee:

  Licensee Name _____
  License No.
  Address _____
  No. Street/ P. O. Box No. City, State Zip code

  Date of transfer: _____
- Í Transferee acknowledgement of receipt attached.
- Í Material has been disposed of in the following manner:
  _____
  _____
- Í A radiation survey was conducted to confirm the absence of radioactive material and to determine whether any contamination remains at the facility covered by the license.
- Í Copy of survey results attached.

8. Management Official or Radiation Safety Officer

_____ _____
Signature of certifying officer Date

_____ _____
Print name Title

Keep one copy for your records and send original to:

GEORGIA DEPARTMENT OF NATURAL RESOURCES
RADIOACTIVE MATERIALS PROGRAM
4244 INTERNATIONAL PARKWAY, SUITE 120
ATLANTA, GEORGIA, 30354

Enclosure 7

OFFICIAL USE ONLY – SECURITY RELATED INFORMATION

Georgia Department of Natural Resources
Environmental Protection Division, Air Protection Branch
4244 International Parkway, Suite 120, Atlanta, Georgia 30354
Judson H. Turner, Director
404-363-7000

RADIOACTIVE MATERIALS PROGRAM
GEORGIA RADIOACTIVE MATERIALS LICENSE

Pursuant to the Georgia Radiation Control Act O.C.G.A. 31-13 (H.B. 947) 1990 and the Georgia Department of Natural Resources Rules and Regulations, designated Chapter 391-3-17, and in reliance on statements and representations heretofore made by the licensee designated below, a license is hereby issued authorizing such licensee to transfer, receive, possess, and use the radioactive material(s) designated below; and to use such radioactive materials for the purpose(s) and at the place(s) designated below. This license is subject to all applicable rules and regulations of the Georgia Department of Natural Resources and orders issued by the Department, now or hereafter in effect, and to any condition specified below.

(Remainder of license body and footers are unchanged, but headers still need OUO-SRI)

Enclosure 7

OFFICIAL USE ONLY – SECURITY RELATED INFORMATION

Georgia Department of Natural Resources
Radioactive Materials License
Supplementary Sheet

(Remainder of license body and footers are unchanged, but headers still need OUO-SRI)

Enclosure 8

Sample Electronic Mail

To: <Authorized recipient with need to know>
Subject: <Your subject> - Sensitive Information
Attachments: <None>
Body:

OFFICIAL USE ONLY – SECURITY RELATED INFORMATION
<Include whatever corresponding information may be sensitive>

Or

To: <Authorized recipient with need to know>
Subject: <Your subject> - Sensitive Information
Attachments: <Attachments containing OUO-SRI marked items>
Body:

<If the corresponding information in the body does not include sensitive information itself, then it is not a requirement to place the OUO-SRI test at the top of the body. The OUO-SRI shall be marked on headers of all pertinent attachments though.>

Enclosure 9

THIS IS A COVER SHEET

SENSITIVE INFORMATION ENCLOSED

TOTAL PAGES INCLUDED

THIS COVER SHEET IS UNCONTROLLED ONCE SEPARATED FROM THE FOLLOWING MATERIALS.

Enclosure 10

Georgia Department of Natural Resources
Environmental Protection Division, Air Protection Branch
4244 International Parkway, Suite 120, Atlanta, Georgia 30354
Judson H. Turner, Director
404-363-7000

[DATE]
[Amendment #]

[Mr., Ms., etc.]
[Address]

Dear [Mr., Ms., etc.]:

The Radioactive Materials Program did not receive the additional information required to complete your [notification, amendment] request dated [Date] for Radioactive Materials License Number GA [ ]. The Radioactive Materials Program now considers this request to be abandoned.

You may resubmit your request in its entirety once all required items are included. At that time, a new [notification, amendment] will be assigned and your request will be reconsidered. If you have any questions, please do not hesitate to contact me at: [RMP Manager phone number] or [RMP Manager e-mail].

Sincerely,

[Name]
Environmental Compliance Specialist
Radioactive Materials Program

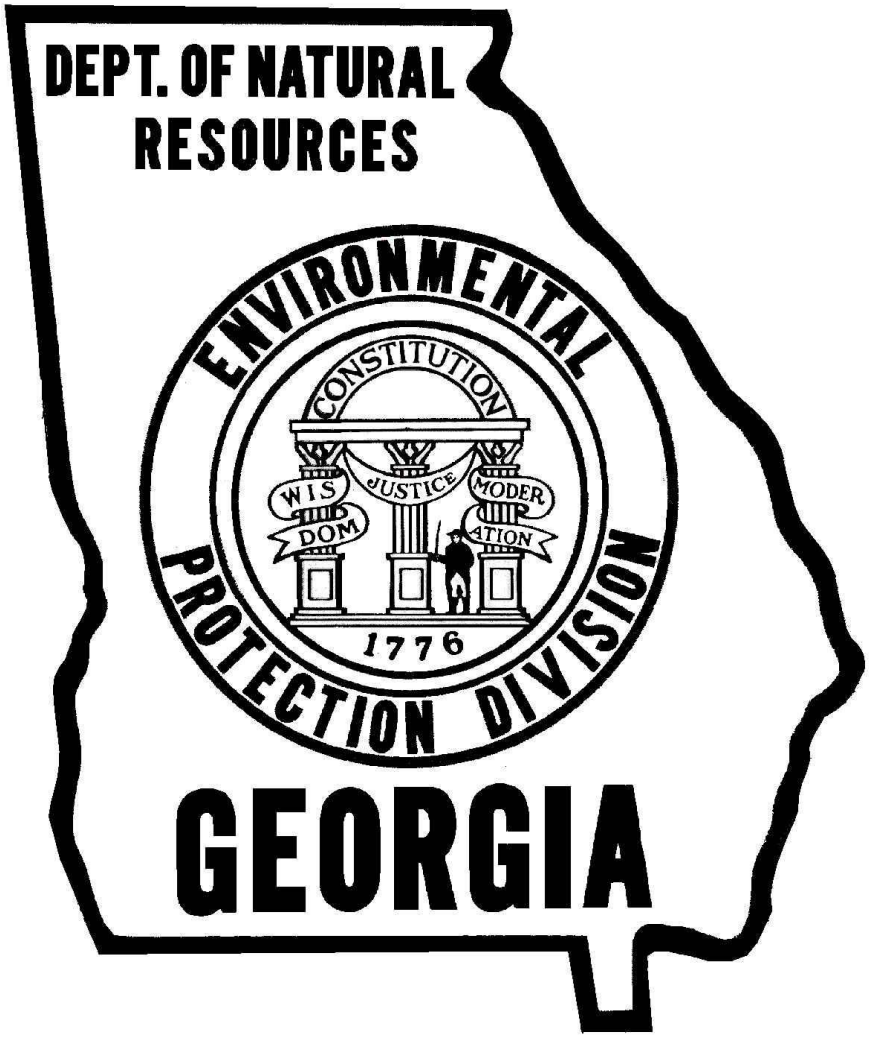
Changes to this document, September 2015.

- Minor corrections to grammar, spelling, etc.
- Licensing Action Change Form REMOVED.
- Signature Authority. Only RMP Specialists who have completed the required training are allowed to independently sign for completed licensing actions. This will be **determined through Qualification Journals.**
- Timely filed letters will not be left open indefinitely and will be assigned an expiration date 90 days beyond the expiration **date** of the license. This shall be communicated to the licensee in their timely filed letters along with the notice that if all necessary documents are not received prior to the 90-day cutoff period then their RAM license will expire, Enclosure 3. **Extension of expiration dates in Timely Filed Letters are to be made on a case by case basis.**
- Notifications **that do not require a license to be amended** are maintained in the center of a licensee's file and follow the historical context outlined above (notification followed by additional supporting documentation). See LP-08.
- LP-05-9 **Financial Assurance**, Acquisitions and Mergers. Any time a RMP Specialist is reviewing a request that involves two licensees (i.e., mergers, one licensee purchasing facilities/assets held under another licensee which results in a termination of one license and an amendment to another license); the RMP Specialist will issue final signature authority on the same date for both licensing actions. If more than one RMP Specialist is performing dual license reviews, they will coordinate with each other to ensure that final signature authority is issued for both licensing actions on the same date due to licensing liability issues. **Financial Assurance shall be handled in accordance with 391-3-17-.02(8)(g).**
- **LP-05-11 Payment of Fees. Prior to completing a License Action the RMP Specialist must ensure that the Licensee has paid all required fees. License Actions are to be held until all payments are received by the RMP.**
- LP-06 Pre-licensing **Guidance** and Site Visits. Pre-licensing visits may need to be performed prior to new RAM license issuance, renewals or amendment requests that significantly alters an existing licensee's program (i.e., a licensee requesting to add a gamma knife with no prior approval, a licensee requesting to add fixed gauges with no prior approval, etc.) the RMP Specialist will fill out and follow the **PreLicensing - RSRM - Basis for Confidence Form: S:\Rad&Policy\Datadire\FORMS\LICENSNG**
- Notification **that require** license actions are recognized as Amendments in the RMP database.
- In the event that a RMP Specialist has determined that an applicant's license application is deficient, has made every reasonable attempt to obtain the necessary information to issue/renew such a license and has afforded the applicant the approved time frame to respond to requests for additional information then the **Director** can deny issuance/renewal of the RAM license. Prior to allowing a RAM license to officially expire, a discussion must take place with the RAM Program Manager informing the Manager of the situation and sufficient notification must

be made to the licensee's member(s) of management of the RMP's intent to allow their RAM license to expire. This action must be fully documented by the RMP Specialist. This also applies if it is discovered by the RMP Specialist that an applicant will be operating in willful noncompliance if issued a RAM license and the RMP Specialist has compiled sufficient evidence to support a denial of issuance or renewal. Signature authority for this action is reserved only for the **Director**. (Enclosure 5)

- If the RMP Specialist has been unable to acquire the additional information requested to complete a licensing action, has made every reasonable attempt to obtain the information required to complete the licensing action and has afforded the licensee the approved time frame to respond to requests for additional information the licensing action can be abandoned by the RMP Specialist. Sufficient notification must be made to the licensee's member(s) of management of the RMP's intent to abandon a requested license action. Abandonment of a licensing action can also be made by the licensee if they are unable to present the proper documentation necessary for the RMP's approval of a requested licensing action. **Abandonment of a License Action should be completed by the RMP Specialist following 90 days of the License Action being in house and incomplete.**
- Once the mentor has approved of a RMP Specialists licensing action the entire package is submitted to the **Team Leader** to be assigned to a second reviewer.
- Mail out original cover letter and license. **Email with attached license is acceptable and must be indicated in the data base.**

GEORGIA DEPARTMENT OF NATURAL RESOURCES
AIR PROTECTION BRANCH
RADIOACTIVE MATERIALS PROGRAM



LICENSING PROCEDURES

October 2015

Enclosures

Changes to this document, October 2015

LICENSING PROCEDURES (LP)

LP-01 Purpose.

To establish policy with regards to licensing procedures for Georgia Radioactive Materials Licensees authorized to possess, use, transfer, and dispose of radioactive material (RAM) associated with various types of use and services (i.e., industrial, academic, research and development, manufacturing, distribution, irradiators, industrial radiography, medical programs, leak testing of sealed sources, calibration services, servicing of devices, and transportation related thereto).

LP-02 Objectives.

02.01 To establish licensing procedures for the Radioactive Materials Program (RMP).

02.02 To ensure that all licensing actions will be completed in accordance with the Georgia Department of Natural Resources, Georgia Rules and Regulations for Radioactive Materials, Chapter 391-3-17, applicable RMP guidance and all applicable guidance set forth by the Nuclear Regulatory Commission (NRC).

02.03 To establish a consistent process for completion of licensing actions for prospective licensees and existing radioactive materials licensees, including methodology to insure timely completion of licensing actions assigned to RMP Specialists.

02.04 To establish a cradle to grave accountability process, including all documentation and database entry involved to track licensing actions from receipt of a licensing action request to a final license action approval.

02.05 To establish a consistent policy with regards to proper licensing documentation and handling to include what documentation is acceptable by the RMP to complete licensing actions, handling of licensee propriety information and the proper marking and securing of Increased Controls (IC) licensee documentation.

LP-03 Definitions.

03.01 Abandonment. A license action taken by the RMP to dismiss a licensee's request to alter any portion of its RAM license or commitments made to its RAM license. This action is authorized if the licensee has exceeded the time limits to respond to the RMP's request for additional information to complete a licensing action. This action can also be requested by the licensee to the RMP to abandon a license action request.

03.02 Additional Information Request. Any request made by the RMP to the licensee or applicant to complete any licensing action.

03.03 Amendment Number. Unique identification number assigned to each individual license revision and shall be documented on the routing form and any related correspondence.

03.04 Corrective Copy. A licensing action taken by the RMP to correct a RAM license. A corrective copy may also be requested in writing by the licensee for the RMP's approval.

03.05 Decommissioning. Processes taken on by the licensee that is monitored, reviewed and approved by the RMP in order to free release portion(s) of land, site(s), building(s), etc. where RAM was stored or used.

03.06 Increased Control (IC) Quantities. An aggregated quantity of radioactive material at or above the category 1 & 2 thresholds as specified in Enclosure 2 of these procedures.

03.07 Licensing Action. Any action taken by the RMP to service an existing or prospective license (i.e., new licenses, renewals, amendments, notifications, abandonments/, terminations, corrected copies, etc).

03.08 License Amendment. A written request by an existing licensee to alter or modify any portion of their previously approved RAM license or commitments made to a RAM license.

03.09 License Denial. Licensing action that denies issuance of a RAM license due to an application that was deemed deficient, an applicant who has been deemed unqualified or any evidence that the RMP finds that would indicate a prospective or existing applicant for renewal would be operating in willful

noncompliance.

03.10 License Renewal. An application submitted by an existing licensee for renewal of their existing RAM license.

03.11 License Termination. An application or a written request by an existing licensee to terminate their existing RAM license.

03.12 New License Request. An application submitted by a prospective applicant for issuance of a RAM license.

03.13 Notification. Changes provided by the licensee to the RMP in writing that indicates a change or alterations made on behalf of the licensee to it's existing RAM program operations per Rule 391-3-17-.05(11).

03.14 Pre-Licensing Visit An in person visit to the facility and review of various factual evidence that supports the licensee is who they say they are and that the material licensed will be used as intended.

03.15 Radioactive Materials Quantities of Concern Checklist. A checklist that ensures that RAM will be used as intended and to identify licensees that may be subject to Increased Controls. Utilized when major changes are made to a RAM license through a renewal, amendment, and prior to a new license issuance.

03.16 Routing Form. This form contains all the pertinent information to adequately track the licensing action from receipt of license action request to final license action approval and can be found at: S:\Rad&Policy\Datadire\FORMS\LICENSING

03.17 Signature Authority. Only RMP Specialists who have completed the required training are allowed to independently sign for completed licensing actions. This will be determined through Qualification Journals.

03.18 Specific License Conditions. Certain license conditions that apply only to specific licenses according to type.

03.19 Standard License Conditions. Certain license conditions apply to all licenses regardless of type.

03.20 Specific License Guidance. Licensing actions will be completed utilizing a specific guide designated for a particular RAM license type (i.e., Medical License Guide will be referenced for all Medical Licenses). Appropriate

guides can be found at: S:\Rad&Policy\Datadire\Guides\Current, http://nrc-stp.ornl.gov/ & http://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1556/

03.21 Termination Form. A form utilized by the licensee to officially request termination of its existing RAM license. Enclosure 6.

03.22 Tie Down. Any commitment/statement made on behalf of the licensee to the RMP to conduct its program in any stated manner. Tie downs are listed in the final condition of the licensee's RAM license and are considered binding to the RAM license. Each tie down whether submitted as an e-mail, written correspondence, etc. and all attachments/enclosures are considered an individual tie down and are listed as such in the final condition of the RAM license.

03.23 Timely Filed Letter. A letter issued to the licensee that acknowledges receipt by the RMP of a license renewal request prior to the expiration date of the licensees existing RAM license. The timely filed letter also insures operations authorized by the licensees existing RAM license are able to continue uninterrupted while the RMP reviews the licensee's RAM license renewal request.

LP-04 Receipt of Licensing Actions & Additional Information.

All licensing action requests from licensees or prospective applicants are submitted with signatures to:

Radioactive Materials Program
4244 International Parkway, Suite 120
Atlanta, GA 30354

Receipt of licensing requests through electronic means is acceptable and will be delivered to the administrative assistant for logging in and assignment.

Payments shall be mailed to:

Radioactive Materials Fees
P.O. Box 101161
Atlanta, GA 30392

Once a request is received the administrative assistant is responsible for:

- Marking of the request “Received”, with the date of receipt.
- Assigning an amendment number to the licensing action and entering the information for the action into the database.
- Filling out the routing form indicating:

    i. The RMP Specialist/Mentor (if applicable).
    ii. Date assigned.
    iii. Type of licensing action.
    iv. Filling in the date in which the Licensee was informed that their Licensing Action Request has been received by the RMP. Contacting the Licensee can be in the form of email, phone call, etc.
    v. Name of the licensee, license number and amendment number.

- Delivering all of the above to the RMP Specialist to whom the action is assigned.

When additional information is received, a query of the database should be made by the administrative assistant to identify which original licensing action it specifically addresses. The amendment number for the original licensing action should be noted on the correspondence accompanying the additional information, indicating to the administrative assistant which licensing action it addresses and to which RMP Specialist it was assigned. Additional information received via mail is also marked “Received”, with the date of receipt and delivered to the appropriate RMP specialist.

LP-05 Licensing Action Review.

Once a licensing action is assigned to a RMP Specialist, the proper license guidance must be utilized to assess whether or not the licensing action is approved. The RMP Specialist should ensure that the licensee addresses all pertinent requirements as stated in the appropriate guide to include any requirements to insure compliance with Rule 391-3-17 and any Nuclear Regulatory Commission guidance to provide a thorough review. Additional information requests are to be made by the RMP Specialists to the licensee or applicant in order to meet the above requirements to approve a licensing action. RMP License Guidance can be found at: S:\Rad&Policy\Datadire\Guides\Current. NRC License Guidance can be found at: http://nrc-stp.ornl.gov/ & http://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1556/

RMP Specialists will need to verify that a Licensee or Licensee Applicant is current and up to date with Annual Fees and Application Fees. Any License Action can be held for approval by the RMP until fees are paid. Proper communication must be made by the RMP Specialist to inform the Licensee or Licensee Applicant that fees are due and are necessary to complete a New Application or Licensing Action.

For any Licensing Action where an entity (i.e. Law Firm, Consultant, etc.) is operating on behalf of a Licensee or Licensee Applicant, a letter must be signed by the Licensee or Applicant and submitted to the RMP indicating that the entity has been granted the authority to submit Licensing Actions on behalf of the Licensee or Applicant. Letters granting this authority will be submitted for every License Renewal and at any time that an entity begins to act on behalf of the Licensee. For any Licensing Action submitted by an entity working on behalf of the Licensee the RMP Specialist will provide communication to the Licensee and the entity in order to complete any Licensing Action. Entity contact information will be entered in the Individual Info portion of the Database.

LP-05-1 Timely Filed Letters.

For renewals, once an application is received (no later than 30 days prior to the expiration date of the licensee's existing RAM license) and verified to have been signed by the proper authority (licensee's member of management/ or person designated by management such as the Radiation Safety Officer) a timely filed letter is issued by the RMP Specialist to the licensee. Extenuating circumstances (within 30 days of expiration or past expiration, open violations, vastly incomplete packages, etc.) shall be discussed with the Program Manager prior to issuance of a timely filed letter. Timely filed letters will not be left open indefinitely and will be assigned an expiration date 90 days beyond the expiration date of the license. This shall be communicated to the licensee in their timely filed letters along with the notice that if all necessary documents are not received prior to the 90-day cutoff period then their RAM license will expire, Enclosure 3.

Extension of expiration dates in Timely Filed Letters are to be made on a case by case basis.

LP-05-2 Additional Information Requests.

Often, the RMP Specialist will have to request additional information from the licensee to ensure that all the requirements of the guide, Rule 391-3-17 and any applicable NRC requirements are addressed. RMP Specialists shall provide a full review of all submitted materials and create a detailed list of anything missing to complete the license action. This list will be supplied to the licensee via mail, electronic mail, or fax. It is important that the RMP Specialist do everything possible to ensure the initial list is as comprehensive as possible to minimize multiple requests for additional information during the review period. Any other additional items outside of the Regulations or Guide must be discussed with Management prior to requesting the items of the Licensee or Applicant.

It shall be communicated to the licensee that they have 45 days from the date of notice to respond with all deficient items and that failure to do so will result in the abandonment of that license action, Enclosure 10. **Verbal communication must be backed up by written correspondence for record retention and maintained in the licensee's file.** If an e-mail is sent to the licensee requesting additional information, the final paragraph of Enclosure 4 should be inserted into the e-mail or any other correspondence requesting additional information to conform to the 45-day time frame allowed for the licensee's response. Receipt of additional information by the RMP Specialist received thru e-mail, fax, etc. must have a receipt date and name of the sender. Dates for requests for additional information and receipt of additional information are to be entered into the database by the RMP Specialist. An example letter for requesting additional information is provided, Enclosure 4. Additional information logs are entered by clicking the Amendment Number in the Database.

LP-05-3 Acceptable Documentation for Licensing Actions.

Documentation provided by the licensee to the RMP that is not necessary to complete a license action is to be removed and destroyed (shredded). For Sealed Source & Device Registries, only the pages containing the type of device and acceptable source and activity are to be maintained. When approving authorized users, the RMP will not accept curriculum vitaes or college transcripts and these documents should be disposed of. RMP Specialists should take care to remove, black out and shred any documentation that could lead to potential identity theft (social security numbers, home addresses, etc.). When agreement state licenses or NRC licenses are submitted for approval of authorized users, the RMP specialist will maintain the pages of applicable RAM authorized on the license and the page that lists the authorized user. All other pages are to be destroyed. Any other documentation supplied by the licensee that

contains information such as patient names from medical facilities, etc. is to be removed and destroyed in the same manner. All supporting documentation to justify a licensing action approval will be maintained in the licensee's file. See LP-05-6.

For renewals, the licensee must submit all information in its entirety. Prior documentation previously approved by the RMP (i.e. shielding diagrams, facility layouts, etc.) cannot be referenced by the licensee for consideration by the RMP for renewals. The licensee must resubmit this type of documentation in its entirety even if no changes have occurred. Subsequently, the RMP Specialist cannot use previously submitted information to apply to renewals regardless if no changes have occurred to these specific items.

For any License Action that involves the Release of an Area where RAM was used or stored the RMP Specialist will handle the Licensing Action in accordance with Rule 391-3-17.03(16). For any License Action that involves the Transfer of RAM from one entity to another the RMP Specialist will handle the Licensing Action in accordance with Rule 391-2-17.02(19).

Handling of proprietary information and increased controls (IC) documentation will be done in accordance with, LP-14.

LP-05-4 License Conditions.

When preparing a new RAM license, renewal or amendment for approval the RMP Specialist must ensure that all standard licensing conditions and licensing conditions specific to the type of license are properly entered into the body of the license. RMP Specialists should take care to make any appropriate corrections that may have been overlooked in the prior licensing action (i.e., missing conditions, misspellings, incorrect fee, etc.).

LP-05-5 Tie Downs.

Enclosures which accompany an application for a new license, a license renewal, or an amendment request are recorded as a tie down in the final condition of a RAM license. Any response from the licensee addressing additional information requests (including attachments, e-mail, fax, written correspondence or otherwise) are recorded as an individual tie down and are also listed in the final condition of a RAM license. Tie downs are listed top to bottom and represent a historical account of the licensee's commitments for licensing actions. For completed renewal licenses, all previous tie downs are superseded.

LP-05-6 Building a License File.

For new licenses, renewals, amendments and notifications, all documentation must be maintained in the file in a manner that represents a historical account of the licensing action. Any finalized licensing action will have the following information from top to bottom in the first portion of the licensee's file:

- the completed license (on top),
- approval letter provided to licensee (if e-mail is utilized in lieu of an approval letter it must be noted as such in the RAM Database),
- filled out radioactive materials quantities of concern checklist & basis for confidence/pre licensing visit forms as appropriate (See LP-06 & LP-07),
- application or initial request
- any additional correspondence (request for additional information, responses from the licensee, documentation of recorded telephone correspondence, etc.),
- and completed Routing Form.

Notifications that do not require a license to be amended are maintained in the center of a licensee's file and follow the historical context outlined above (notification followed by additional supporting documentation). See LP-08.

LP-05-7 Expiration Date & Initial Inspection Date.

For new license issuance and renewals the RMP Specialist shall enter the new date of expiration into the database. For a new license issuance, the RMP Specialist must also enter the next inspection date into the database as six months from the date of issuance to prompt an initial inspection (the first record will most likely be for a pre-licensing visit, if not, then a record shall be created as a starting point regardless, and notes to summarize why a pre-license visit was not required must be made).

LP-05-8 Superseded Documentation.

Once a renewal is issued, all prior licensing documentation (does not include incident/allegation reports or inspection/compliance history) pertaining to that licensee is considered Superseded. The RMP Specialist will produce a cover sheet that will be inserted over superseded documents with "Superseded" in bold type with the date the documents were superseded and initials of the RMP Specialist. Superseded dates correspond to the date of license renewal.

LP-05-9 Financial Assurance, Acquisitions and Mergers.

Any time a RMP Specialist is reviewing a request that involves two licensees (i.e., mergers, one licensee purchasing facilities/assets held under another licensee which results in a termination of one license and an amendment to another license); the RMP

Specialist will issue final signature authority on the same date for both licensing actions. If more than one RMP Specialist is performing dual license reviews, they will coordinate with each other to ensure that final signature authority is issued for both licensing actions on the same date due to licensing liability issues. Financial Assurance shall be handled in accordance with 391-3-17-.02(8)(g).

LP-05-10 Expedited License Reviews.

For urgent licensing actions (usually requested by a licensee) in which the administrative assistant is not present to assign the licensing action, the RMP specialist may perform their initial review of the licensee's request. The RMP specialist must then inform the RMP Manager of the need to assign an expedited peer review. Once a peer review is completed and approved the RMP specialist can then sign and mail out the completed licensing action. The RMP Specialist must enter all pertinent information into the RAM database to ensure the licensing action is captured.

All licensing actions are to be peer reviewed prior to approval. See LP-15.

LP-05-11 Payment of Fees.

Prior to completing a License Action the RMP Specialist must ensure that the Licensee has paid all required fees. License Actions are to be held until all payments are received by the RMP.

LP-06 Pre-licensing Guidance and Site Visits.

Pre-licensing visits need to be performed prior to new RAM license issuance, renewals with expanded uses, change of ownership to an entity that is unknown or has never had a license or amendment requests that significantly alters an existing licensee's program (i.e., a licensee requesting to add a gamma knife with no prior approval, a licensee requesting to add fixed gauges with no prior approval, etc.) the RMP Specialist will fill out and follow the PreLicensing - RSRM - Basis for Confidence Form: S:\Rad&Policy\Datadire\FORMS\LICENSNG

This is necessary to confirm that the potential or existing Licensee does have an existing location of RAM use, proper facilities and equipment to maintain compliance for the uses applied for in their application, will be using the materials as described, etc. RMP Specialists can hand deliver the approved License or Amendment to the Licensee once the Specialist is satisfied with the Pre-Licensing visit and that the Licensee has the proper means to operate in compliance. After the RMP Specialist has completed the Pre-Licensing Visit they must enter into the RMP Database the next inspection frequency to be 6 months following License issuance.

LP-07 Increased Controls (IC) Licenses.

Any time the radioactive quantity allowed on a license is changed or initialized with a new license; the RMP Specialist must ascertain whether or not the applicant or existing licensee will be subject to increased controls. The RMP Specialist will fill out the Radioactive Materials Quantities of Concern to determine whether a licensee or applicant will be subject to increased controls. If the RMP Specialist determines that an applicant for a new RAM license or an existing licensee's amendment or renewal request will be subject to increased controls, then all pertinent NRC guidance will be utilized to implement increased controls on the applicant or existing licensee. Increased controls guidance can be found at: http://nrc-stp.ornl.gov/controls.html RMP Specialists shall maintain login access to this increased controls toolbox so it may be used regularly.

Any time a licensee goes from not having increased controls to requiring them, it is necessary to perform a pre-licensing inspection prior to issuing the new license or amendment. This is meant to ensure the proper implementation of all required security measures. Discussion should take place with the RMP manager to determine the entire scope of the inspection (in case they are due for pre-licensing visits, routine health and safety inspections, or some other type of follow up inspection).

Any changes made to an IC license must be reported by the RMP Specialist to the Nuclear Regulatory Commission's Web Based Licensing and License Verification System via e-mail to the following address:
license.submission@nrc.gov

An email sent to the License Verification System with an attachment of the most recent Amendment/New License is acceptable.

For increased control licensees the following must be adhered to in order to decrease the odds of an inadvertent or unauthorized release of security related information which may be used in a malevolent manner:

Any document pertaining to an IC licensee must be clearly marked if it includes any of the following items:

- locations of materials;
- possession limits or actual quantities (therefore any IC license);
- inspection reports (to include reciprocities);
- notices of IC violations and response letters;
- equipment designs;
- facility layouts (to include nearby structures);

- emergency planning documentation (fire, response to attacks, local law enforcement agency agreements, etc.);
- security program details; or
- vulnerability assessments.

All documents, physical, electronic, internally and externally produced must be marked with “Official Use Only – Security Related Information” (OUO-SRI) once identified as sensitive. Headers for electronically generated files with sensitive information shall contain OUO-SRI for each page of that document, and it should be above the header used otherwise as seen in Enclosure 7.

Hand written reports or letters that contain sensitive items must also be marked, and it is sufficient to stamp or hand write the marking with ink on the top of the page. Incoming documents not properly identified by a sender which includes sensitive information must have a stamp or hand written label placed on them when received by the Program.

Sensitive electronic mail must be identified in the subject line by “Sensitive Information”; additionally, no sensitive information should ever be included in the subject line itself. If there is a group of documents with mixed sensitive and non-sensitive information then a cover sheet shall be used to mark the collective as “Sensitive Information.” Electronic mail and cover sheets need to only be marked as OUO-SRI if they have sensitive information within them and not just their attached documents. Samples of these scenarios are included as Enclosures 8 and 9.

Electronic mail should be sent only to individuals with authorization and a need to know for the information being sent and must be marked in accordance with this instruction. Transfer of information via telephone is also acceptable once the individual’s verification is made same as for electronic mail; however, a declaration to the individual about the sensitive nature of information must also be made.

Mailing may be done within a single opaque envelope that has no exterior markings suggesting it is OUO-SRI, and again the recipient must be vetted. Documents may also be faxed, but only after verifying the individual and that they are physically present at the fax to receive the transmission. All documents included within faxes or mailings must be properly marked according to this instruction.

When receiving items, staff should be directly present to take possession. These shall be properly marked upon receipt if the sender did not do so.

Any and all documentation with respect to IC licensees shall be locked within the proper filing cabinet when not actively working on it, even if it is not marked as OUO-SRI it still must be locked with the rest of its license. The file cabinet itself shall have no external

marking to indicate that it contains “Sensitive Information.” Only program staff shall have knowledge of the key to access this cabinet.

LP-08 Notifications.

Changes provided by the licensee to the RMP in writing that indicates a change or alterations made on behalf of the licensee to its existing RAM program operations per Rule 391-3-17-.05(11) are handled as Notification licensing action. Notifications are handled in the same manner as other licensing actions. Initial reviews and peer reviews apply to notifications like any licensing action and involve the same tracking methods as any other licensing action. Notification that require license actions are recognized as Amendments in the RMP database. Notifications that do not require an Amendment to the License shall be maintained in the Licensee File.

LP-09 Denial of License Application & License Renewals.

In the event that a RMP Specialist has determined that an applicant’s license application is deficient, has made every reasonable attempt to obtain the necessary information to issue/renew such a license and has afforded the applicant the approved time frame to respond to requests for additional information then the Director can deny issuance/renewal of the RAM license. Prior to allowing a RAM license to officially expire, a discussion must take place with the RAM Program Manager informing the Manager of the situation and **sufficient notification must be made to the licensee’s member(s) of management** of the RMP’s intent to allow their RAM license to expire. This action must be fully documented by the RMP Specialist. This also applies if it is discovered by the RMP Specialist that an applicant will be operating in willful noncompliance if issued a RAM license and the RMP Specialist has compiled sufficient evidence to support a denial of issuance or renewal. Signature authority for this action is reserved only for the Director. (Enclosure 5)

Reasons for this action include but are not limited to:

1. Items not addressed or met as stated in license guidance and regulations.
2. Statements or written correspondence found to be in noncompliance with Rule 391-3-17 or Nuclear Regulatory Commission Rules and Laws.
3. Significant licensee history of noncompliance as demonstrated in its past inspection history and current standing.
4. Documented evidence by the RMP Specialist that proves a licensee is or will be operating in **noncompliance in a manner that threatens health and safety**.
5. Not providing the requested information in a timely matter.

LP-10 Abandonment of a Licensing Action other than License Issuance & Renewals.

If the RMP Specialist has been unable to acquire the additional information requested to complete a licensing action, has made every reasonable attempt to obtain the information required to complete the licensing action and has afforded the licensee the approved time frame to respond to requests for additional information the licensing action can be abandoned by the RMP Specialist. Sufficient notification must be made to the licensee's member(s) of management of the RMP's intent to abandon a requested license action. Abandonment of a licensing action can also be made by the licensee if they are unable to present the proper documentation necessary for the RMP's approval of a requested licensing action. Abandonment of a License Action should be completed by the RMP Specialist following 90 days of the License Action being in house and incomplete. A formal letter notifying the licensee of the decision to terminate work on their licensing action can be found in Enclosure 10. Documentation should be kept, Abandonment letter, files leading up to action or an official request by the Licensee to Abandon a License Action are kept in middle of file.

LP-11 License Termination.

A licensee may request termination of their existing RAM license in writing and submit it to the RMP. The transferor and transferee must sign a documented accountability of the transfer of any RAM sources possessed by the licensee and a proper close out survey must be conducted and documented for all areas where RAM was used and/or stored at the licensee's facility(s). These documents and all other pertinent information on the termination form must be completed in its entirety by the licensee and submitted to the RMP. (Enclosure 6).

LP-12 Transfer of Ownership.

Licensees planning to transfer ownership, to change the corporate status, or to change control of licensed activities are required to provide full information about the change to the RMP 90 days prior to the proposed action. All points in Attachment 1 of the transfer of ownership of control of licensed activities guide must be addressed in writing and submitted to the RMP. This guide can be found at:
http://www.georgiaepd.com/Files_PDF/techguide/pcb/xferownr1.pdf

LP-13 Decommissioning.

Decommissioning activities proposed by the licensee to the RMP shall be submitted in writing. Guidance for decommissioning can be found at:
http://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1757

LP-14 Handling of Proprietary Information and Increased Controls (IC) Documentation.

Certain licensees will have to submit proprietary information to the RMP in order to complete a licensing action. Often, this type of documentation is commonly labeled as: “Proprietary Information”, “Withhold from Public Disclosure”, “Trade Secret”, etc. Proprietary information may not be marked in this manner but may be requested by the licensee or applicant that it be handled as such. Every reasonable precaution must be taken on behalf of the RMP Specialist to protect this information. See **Georgia Open Records Act (GORA)**. RMP Specialists can advise the Licensee with regards to GORA issues. If such material is submitted for a License Action the RMP Specialist must discuss the proper handling of the materials with Management.

LP-15 Peer Reviews of Licensing Actions.

It is the policy of the RMP that all licensing actions are to be peer reviewed prior to any licensing action approval. Once a RMP Specialist has completed their initial review of a licensing action, the initial licensing action request, all supporting documentation with the completed portion of the routing form for “license reviewer”, along with any applicable pre licensing forms are submitted as an entire package to the Team Leader to be assigned to a second reviewer.

RMP Specialists who have not completed the required training to be granted signature authority may be assigned a licensing action and a mentor. The mentor is responsible for working with the RMP Specialist in training on their assigned licensing action and to provide all the proper guidance to ensure that a quality licensing action product is achieved. Once the mentor has approved of a RMP Specialists licensing action the entire package is submitted to the Team Leader to be assigned to a second reviewer.

Once a second review of a licensing action is approved it is then transferred back to the RMP Specialist whom it was originally assigned to with the “second reviewer”/”feedback discussion dates” portion of the routing form filled out. The RMP Specialist will then make any necessary corrections provided by the second reviewer and corrections will be signed off by the second reviewer on the routing form before the second reviewer signs a licensing action for those in training.

All licensing actions are to be completed within the timeframes provided by the License Action Timeliness Table:

Action	Primary Review (Days)	Secondary Review (Days)
Notification	14	7
Amendments	28	14
Terminations	28	14
New/Renewals	42	21

LP-16 Completion of Licensing Action Requests.

When a RMP specialist approves a licensing action the following is to be completed:

- Entering any license changes into the database.
- Complete the Pre-Licensing Checklist if applicable.
- Verify copy of the license, cover letter and routing form is in the licensee's file.
- Initial where appropriate as indicated on the routing form.
- Mail out original cover letter and license. Email with attached license is acceptable and must be indicated in the data base.
- Return the licensee's file to the file room.

Enclosures

Enclosure 1 – Priority Codes
Enclosure 2 – Quantities of Concern Threshold Limits
Enclosure 3 – Licensee Timely Filed Letter
Enclosure 4 – Request for Additional Information Letter
Enclosure 5 – Declined License Issuance Letter
Enclosure 6 – Termination Form
Enclosure 7 – OUO-SRI Headers
Enclosure 8 – OUO-SRI Sample E-mail
Enclosure 9 – OUO-SRI Cover Sheet
Enclosure 10 – Abandon Letter

Enclosure 1
Priority Codes

License Category	License Code	Insp Priority
Medical Teletherapy	T	3
Gamma Knife	T	2
Broad Medical	BM	2
Eye Applicators	E	3
Source Material	SM	5
Depleted Uranium	DU	5
Institutional Medical-Mult. Use	AL	2
Institutional Medical-Mult. Use	NUM, RT	3
Institutional Medical-Mult. Use	NUM	5
Institutional Medical-Single Use	RT, NUM	3
Private Practice (Therapy-HDR)	AL	2
Private Practice (Limited	PNC	3
Private Practice (Diagnostic	PNL, NUC	5
Private Practice (Veterinary)	V	5
In-Vitro Specific Licenses	IVS	5
In-Vitro General Licenses	GL,IVG	N/A
Bone Mineral Analyzers	B	5
Nuclear Pharmacy	NUP	2
Medical Manufacturer for	MMDS, MDGL,	2, 3
Medical Distribution or	MDSS	3
Medical Distribution or	MDGL	5
Mobile Nuclear Medicine	M	3
Industrial Mfg. for Distribution	DS	3
Field Flooding Studies	FF	3
Installed Gauges	FG	5
Gas Chromatograph, etc.	GS, LG, MS	5
Portable Moisture Density	PG, LPA	5
Calibration Sources	CAL, CAM	5
Calibration Sources (Radium)	R	5
Decontamination Services	DEC	3
Industrial (other) (NORM)(Gauge	NOR, GS	5
Contaminated Equipment	CTE	5
In-house Industrial Radiography	IRF	2

Multiple Job-Site Industrial	IRB	1
Gamma Irradiators	GI	5
Gamma Irradiators (<10K Ci)	GI	5
Gamma Irradiators (>10K<100K	GI, GIP	2
Gamma Irradiators (>100K<1M	GIP	2
Gamma Irradiators (>1M Ci)	GIP	2
Broad Scope Distribution,	DSA	2
Broad Scope Distribution,	DSB	5
Broad Scope Distribution,	DSC	5
GL Distribution (source and / or		N/A
GL Distribution (no source and		N/A
NARM Exempt Distribution		N/A
NARM Exempt Distribution (no		N/A
Well Logging /Tracers	WL	3
Nuclear Laundries	NL	3
Industrial Research &	RD	5
Broad Scope (Academic) (Type	BAA, BAB	3, 5
Broad Scope (Academic) (Type	BAC	5
Broad Scope (Industrial R&D)	RDA	3
Broad Scope (Industrial R&D)	RDB	5
Broad Scope (Industrial R&D)	RDC	5
Broad Scope (Medical	MMDS, MDGL,	2
Civil Defense (Emergency	EM	5
Civil Defense (Emergency	ER	5
Teletherapy Service Co.	TS	5
Consultants(Leak Testing	LT	5
G L Devices (except tritium	GL	N/A
Academic (Non-Broad)	A	5
Device Evaluation	DE	N/A
Source Evaluation	SE	N/A
Radioactive Waste	WDB	2
Radioactive Waste	WDI	2
Radioactive Waste, Processing	WDPR	2
Radioactive Waste,	WDP	3

Enclosure 2
Quantities of Concern Threshold Limits

Radionuclides	Category 1		Category 2	
	Terabecquerels (TBq)	Curies (Ci)[1]	Terabecquerels (TBq)	Curies (Ci)[1]
Americium-241	60	1600	0.60	16
Americium-241/Be	60	1600	0.60	16
Californium-252	20	540	0.20	5.4
Curium-244	50	1400	0.50	14
Cobalt-60	30	810	0.30	8.1
Cesium-137	100	2700	1.0	27
Gadolinium-153	1000	27,000	10	270
Iridium-192	80	2200	0.80	22
Promethium-147	40,000	1,100,000	400	11,000
Plutonium-238	60	1600	0.60	16
Plutonium-239/Be	60	1600	0.60	16
Radium-226	40	1100	0.40	11
Selenium-75	200	5400	2.0	54
Strontium-90 (Y-90)	1000	27,000	10	270
Thulium-170	20,000	540,000	200	5400
Ytterbium-169	300	8100	3.0	81

[1] The regulatory standard values are given in TBq, and shall be used for compliance. Curie (Ci) values are provided for practical usefulness only and are rounded after conversion. Note: Values are read to two significant digits.

Use the following method to determine which sources of radioactive material require increased controls (ICs):

Include any single source larger than the quantity of concern

Include multiple co-located sources of the same radionuclide when the combined quantity exceeds the quantity of concern

For combinations of radionuclides, include multiple co-located sources of different radionuclides when the aggregate quantities satisfy the following unity rule: [(amount of radionuclide A) ÷ (quantity of concern of radionuclide A)] + [(amount of radionuclide B) ÷ (quantity of concern of radionuclide B)] + etc.....≥ 1

Enclosure 3

Georgia Department of Natural Resources
Environmental Protection Division, Air Protection Branch
4244 International Parkway, Suite 120, Atlanta, Georgia 30354
Judson H. Turner, Director
404-363-7000

[Date]
Amendment Number:

[Name, Title]
[Licensee]
[Address]

[Mr., Mrs., Dr., etc]:

This is to acknowledge receipt of your application for renewal dated [ ], of Georgia Radioactive Materials License Number **GA [ ]**. Your application is deemed to be a timely filed application for renewal.

This letter expires on [mm/dd/yr]. If the Radioactive Materials Program determines additional information is required, then you will be required to address these deficiencies in a timely manner. Failure to do so may result in expiration of your Georgia Radioactive Material License and you will no longer be authorized to possess, store or use radioactive materials in the State of Georgia.

Please list the assigned amendment number in future correspondences relating to this renewal to avoid delays. If you have any questions, please do not hesitate to contact me at: [Your desk phone number] and [Your e-mail].

Sincerely,

[Reviewer Name]
Environmental Compliance Specialist
Radioactive Materials Program

Enclosure 4

Georgia Department of Natural Resources
Environmental Protection Division, Air Protection Branch
4244 International Parkway, Suite 120, Atlanta, Georgia 30354
Judson H. Turner, Director
404-363-7000

Date
Amendment #:

[Name, Title]
[Licensee]
[Address]

[Mr., Mrs., Dr., etc]:

In order to complete your [Amendment, Renewal, etc.] request for Georgia Radioactive Materials License Number **GA [ ]**, the Radioactive Materials Program will require the following additional information be submitted:

1.

Please respond in writing while listing the assigned amendment number to avoid delays. If the above additional information is not submitted to our office within 45 days of this notification, your [Amendment, Renewal, etc.] request will be dismissed, your timely filed letter will expire and you will be required to resubmit your request in its entirety for reconsideration.

If you have any questions, please do not hesitate to contact me at: [Your desk phone number] and [Your e-mail].

Sincerely,

[Reviewer Name]
Reviewer's Title
Radioactive Materials Program

Enclosure 5

Georgia Department of Natural Resources
Environmental Protection Division, Air Protection Branch
4244 International Parkway, Suite 120, Atlanta, Georgia 30354
Judson H. Turner, Director
404-363-7000

[DATE]
[Amendment #]

[Mr., Ms., etc.]
[Address]

Dear [Mr., Ms., etc.]:

The Radioactive Materials Program has declined your request for [a Radioactive Materials License/License Renewal] due to the following reasons: [Pick one or more of the following and discuss alternative choices with manager]

1. Your Application was deemed deficient and the Radioactive Materials Program is unable to issue you a Georgia Radioactive Materials License.

2. The Radioactive Materials Program was unable to obtain the required additional information, request(s) dated [Date(s)] to issue you a License Renewal. Your existing Georgia Radioactive Materials License is now considered to be expired.

3. The Radioactive Materials Program has determined that you will be operating in noncompliance if issued a Georgia Radioactive Materials License.

Please feel free to reapply for a Georgia Radioactive Materials License and your request will be considered. If you have any questions, please do not hesitate to contact me at: [RMP manager phone number] and [RMP manager e-mail].

Sincerely,
[Name]
Manager/Director
Radioactive Materials Program

Enclosure 6

GEORGIA DEPARTMENT OF NATURAL RESOURCES
RADIOACTIVE MATERIALS PROGRAM
REQUEST TO TERMINATE RADIOACTIVE MATERIAL LICENSE

1. Licensee Name_____
2. License Number_____

3. Address _____
No. Street/ P. O. Box No. City, State Zip code

4. Contact Person_____ 5. Telephone Number

6. Request is hereby made that the Radioactive Material License described above be terminated for the following reason:
_____
_____

7. Radioactive Material possessed under this license has been disposed of as indicated below:

- Í No materials have been possessed or procured by the licensee under this licensee.
- Í All material was used for the licensed purposes; none remains.
- Í All material was leased, and has been returned to lessor.

  Name of lessor: _____
  License No._____
- Í Lessor acknowledgement of receipt attached.
- Í Material has been transferred to the following licensee:

  Licensee Name _____
  License No.
  Address _____
  No. Street/ P. O. Box No. City, State Zip code

  Date of transfer: _____
- Í Transferee acknowledgement of receipt attached.
- Í Material has been disposed of in the following manner:
  _____
  _____
- Í A radiation survey was conducted to confirm the absence of radioactive material and to determine whether any contamination remains at the facility covered by the license.
- Í Copy of survey results attached.

8. Management Official or Radiation Safety Officer

_____ _____
Signature of certifying officer Date

_____ _____
Print name Title

Keep one copy for your records and send original to:

GEORGIA DEPARTMENT OF NATURAL RESOURCES
RADIOACTIVE MATERIALS PROGRAM
4244 INTERNATIONAL PARKWAY, SUITE 120
ATLANTA, GEORGIA, 30354

Enclosure 7

OFFICIAL USE ONLY – SECURITY RELATED INFORMATION

Georgia Department of Natural Resources
Environmental Protection Division, Air Protection Branch
4244 International Parkway, Suite 120, Atlanta, Georgia 30354
Judson H. Turner, Director
404-363-7000

RADIOACTIVE MATERIALS PROGRAM
GEORGIA RADIOACTIVE MATERIALS LICENSE

Pursuant to the Georgia Radiation Control Act O.C.G.A. 31-13 (H.B. 947) 1990 and the Georgia Department of Natural Resources Rules and Regulations, designated Chapter 391-3-17, and in reliance on statements and representations heretofore made by the licensee designated below, a license is hereby issued authorizing such licensee to transfer, receive, possess, and use the radioactive material(s) designated below; and to use such radioactive materials for the purpose(s) and at the place(s) designated below. This license is subject to all applicable rules and regulations of the Georgia Department of Natural Resources and orders issued by the Department, now or hereafter in effect, and to any condition specified below.

(Remainder of license body and footers are unchanged, but headers still need OUO-SRI)

Enclosure 7

OFFICIAL USE ONLY – SECURITY RELATED INFORMATION

Georgia Department of Natural Resources
Radioactive Materials License
Supplementary Sheet

(Remainder of license body and footers are unchanged, but headers still need OUO-SRI)

Enclosure 8

Sample Electronic Mail

To: <Authorized recipient with need to know>
Subject: <Your subject> - Sensitive Information
Attachments: <None>
Body:

OFFICIAL USE ONLY – SECURITY RELATED INFORMATION
<Include whatever corresponding information may be sensitive>

Or

To: <Authorized recipient with need to know>
Subject: <Your subject> - Sensitive Information
Attachments: <Attachments containing OUO-SRI marked items>
Body:

<If the corresponding information in the body does not include sensitive information itself, then it is not a requirement to place the OUO-SRI test at the top of the body. The OUO-SRI shall be marked on headers of all pertinent attachments though.>

Enclosure 9

THIS IS A COVER SHEET

SENSITIVE INFORMATION ENCLOSED

TOTAL PAGES INCLUDED

THIS COVER SHEET IS UNCONTROLLED ONCE SEPARATED FROM THE FOLLOWING MATERIALS.

Enclosure 10

Georgia Department of Natural Resources
Environmental Protection Division, Air Protection Branch
4244 International Parkway, Suite 120, Atlanta, Georgia 30354
Judson H. Turner, Director
404-363-7000

[DATE]
[Amendment #]

[Mr., Ms., etc.]
[Address]

Dear [Mr., Ms., etc.]:

The Radioactive Materials Program did not receive the additional information required to complete your [notification, amendment] request dated [Date] for Radioactive Materials License Number GA [ ]. The Radioactive Materials Program now considers this request to be abandoned.

You may resubmit your request in its entirety once all required items are included. At that time, a new [notification, amendment] will be assigned and your request will be reconsidered. If you have any questions, please do not hesitate to contact me at: [RMP Manager phone number] or [RMP Manager e-mail].

Sincerely,

[Name]
Environmental Compliance Specialist
Radioactive Materials Program

Changes to this document, October 2015. Bold and strike through indicate changes.

- Pre-licensing visits ~~**may**~~ need to be performed prior to new RAM license issuance, renewals **with expanded uses**, change of ownership to an entity that is unknown or has never had a license or amendment requests that significantly alters an existing licensee's program (i.e., a licensee requesting to add a gamma knife with no prior approval, a licensee requesting to add fixed gauges with no prior approval, etc.) the RMP Specialist will fill out and follow the PreLicensing - RSRM - Basis for Confidence Form: S:\Rad&Policy\Datadire\FORMS\LICENSNG

- **This is necessary to confirm that the potential or existing Licensee does have an existing location of RAM use, proper facilities and equipment to maintain compliance for the uses applied for in their application, will be using the materials as described,** etc. RMP Specialists can hand deliver the approved License or Amendment to the Licensee once the Specialist is satisfied with the Pre-Licensing visit and that the Licensee has the proper means to operate in compliance. After the RMP Specialist has completed the Pre-Licensing Visit they must enter into the RMP Database the next inspection frequency to be 6 months following License issuance.

- RMP Specialists who have not completed the required training to be granted signature authority may be assigned a licensing action and a mentor ~~**who has been granted signature authority**~~. The mentor is responsible for working with the RMP Specialist in training on their assigned licensing action and to provide all the proper guidance to ensure that a quality licensing action product is achieved. Once the mentor has approved of a RMP Specialists licensing action the entire package is submitted to the Team Leader to be assigned to a second reviewer.

- Once a second review of a licensing action is approved it is then transferred back to the RMP Specialist whom it was originally assigned to with the "second reviewer"/"feedback discussion dates" portion of the routing form filled out. The RMP Specialist will then make any necessary corrections provided by the second reviewer and corrections will be signed off by the second reviewer on the routing form before ~~**any final signature authority is issued by the RMP Specialist whom has signature authority to approve an applicant or existing licensee's license action request**~~ **the second reviewer signs a licensing action for those in training.**

- **All licensing action requests from licensees or prospective applicants are submitted with signatures to:**

- **Receipt of licensing requests through electronic means is acceptable and will be delivered to the administrative assistant for logging in and assignment.**