Vermont Department of Health Radioactive Materials Program

Radioactive Materials Program Procedure 1.1, Revision 0

Review of an Initial Application for License or an Amendment Request

Prepared By: _____ **Date:** _____

Reviewed By: _____ **Date:** _____

Approved By: _____ **Date:** _____

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Revision	Date	Description of Changes
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1.0 PURPOSE

1.1 Applicability

1.1.1 The purpose of this procedure is to define the process for reviewing all types of specific license requests and license amendments (refer to Attachment 1.1-6 for Program Codes for each license type) received by the Vermont Department of Health (Department) and those transferred to the Department from the Nuclear Regulatory Commission (NRC). Applications for license renewal are covered by RMPP 1.2 *Renewal of Licenses* and license termination is covered by RMPP 1.3 *License Termination/Revocation*.

1.1.2 Appropriate NUREG-1556 checklists and procedures that shall be used during the review process will be identified.

1.1.3 The process for issuing a specific license or an amendment to a license and standard license conditions will be provided after a thorough and equitable evaluation of the application.

1.1.4 The process for denying (state's initiative) or abandoning (applicant's or state's initiative) a request for licensing action shall be defined.

1.1.5 This procedure does not address the qualifications required to review a specific license of each type; refer to RMPP 5.1 *Qualifications and Training* for these guidelines. For this procedure, qualification of the license reviewer for a specific license type is verified by the Radiation Control Program Director prior to determining the reviewer.

1.2 References

1.2.1 Vermont Radioactive Materials Rule.

1.2.2 NUREG-1556, "Consolidated Guidance About Materials Licenses".

1.2.3 Title 10 of the Code of Federal Regulations (10 CFR).

1.3 Files

The following records will be maintained by the Radioactive Materials Program, primarily in an electronic format for each licensee:

1.3.1 Specific License.

1.3.2 License Application and/or Amendment Request Submittal.

1.3.3 Any Deficiency Letters.

1.3.4 License Transmittal Letter.

1.3.5 Any Requests for Additional Information (RAI).

1.4 Definitions

1.4.1 Agency: The Radioactive Materials Program (RMP) of the Vermont Department of Health (Department).

1.4.2 Amendment (License Amendment): Any change to any of the content of a radioactive materials license once issued by the Department constitutes an amendment.

1.4.3 Application Request: A request for an application for a license from a prospective applicant.

1.4.4 Denying with Prejudice: Denial on the basis that the applicant for license is not qualified and shall not reapply for a license unless there has been a material change to the circumstances and substance of the license application, e.g., a minor applying for a license to possess and use radioactive material or a non-medical qualified individual applying for a license to use radioactive material in the diagnosis and/or treatment of humans will have their licenses denied with prejudice and may only reapply if and when the applicants meet the age and medical qualifications respectively.

1.4.5 Denying Without Prejudice: Denial on the basis that the application for license was deficient and denied, but that the applicant may reapply after correcting the deficiencies.

1.4.6 License Review: License review is the processing of any licensing action (i.e., new application, amendment, renewal, termination) and serves two capacities – primary review and secondary review.

1.4.7 License Reviewer: A Radiologic Health Specialist or other Radioactive Materials Program staff member qualified to review, process, and document a specific category of licensing action. A license reviewer shall not perform a review for any category of license for which they are not qualified.

1.4.8 Licensing Action: A request or application received from an applicant or a licensee as follows:

An application for a license to receive, possess, and use licensed material;

An application for renewal of a license;

An amendment request to a license, e.g., change in administrations, authorized use, and/or user(s), RSO, quantity of material, isotopes, facilities, etc.; and/or,

A request for termination of a license.

1.4.9 Manufacturing and Development (M&D): Refers to licenses for manufacturing and distribution of byproduct, source, and/or special nuclear material.

1.4.10 Possession Only License: A license issued by the Vermont Department of Health that authorizes the licensee to possess specific radioactive material but does not authorize its use. A possession only license is issued for a licensee that has ceased principal operations which used radioactive material and has begun or is preparing to decommission its storage and usage facilities and dispose of, or transfer remaining radioactive material to an authorized recipient, or as shielding material (depleted uranium) used for medical therapy linear accelerators and technetium-molybdenum generators.

1.4.11 Primary Review: A primary review is that conducted initially for a licensing action by a qualified license reviewer. It is conducted using RMPP 1.1, other relevant RMPPs, and relevant content from NUREG 1556 and is documented on the **License Review Job Aid**.

1.4.12 Pre-Licensing Checklist: The purpose of this checklist is to provide a basis for confidence that a new applicant (i.e., an entity that has never had a license or is unknown) requesting a specific license, or a licensee requesting transfer of control to a new applicant or unknown entity will store and use radioactive materials at locations as specified and under the authorization of the license.

1.4.13 Pre-Licensing Visit: A site visit and face-to-face meeting with an entity with the purpose of 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. 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.

1.4.14 Regulatory Guide: Guidance published by the NRC or the Department Radioactive Materials Program, in which each guide defines an acceptable program or part of a program, for the possession and specific use of radioactive materials. An applicant is not obligated to follow one of these guidance documents when developing their program and applying for a license or amendment; however, if not followed, the applicant must demonstrate that the proposed program is at least equivalent to the one described in the guidance document.

1.4.15 Risk Significant Radioactive Material (RSRM): RSRM refers to the values in 10 CFR 37 Appendix A.

1.4.16 Secondary Review: A secondary review is conducted by a qualified license reviewer as a quality control activity. It is meant to assure the license review conducted by the primary reviewer is complete and accurate. The secondary reviewer must be a qualified license reviewer other than the person conducting the primary review. It is done using RMPP 1.1, other RMPPs as appropriate, and applicable guidance from NUREG 1556. It is documented using the **License Review Job Aid**.

1.4.17 Supervisory Review: This is the final required review of licensing activity.

1.4.18 Tie-down: A license commitment that is additional to the standard license conditions stated on the license.

1.4.19 Written Directive: An authorized user's written order for the administration of byproduct material or radiation from byproduct material to a specific patient or human research subject, as specified in 10 CFR 35.40.

2.0 RESPONSIBILITIES

2.1 Radiological Health Specialist (RHS)

2.1.1 May serve as primary reviewer of license applications and amendments for licenses for which qualified. Through review, the RHS receives, logs, and saves licensing action information and makes requests for additional information from the applicant/licensee.

2.1.2 May also serve as secondary reviewer, though not for license applications and amendments for which the RHS was primary reviewer.

2.1.3 Maintains the computer-based and other files and tracks the application for a license during processing.

2.1.4 Responds to requests for license applications and amendments by transmitting an application (Department Form 313), internet address of the regulations, and a copy of, or reference to, specific guidance within 30 days of the licensing actions.

2.1.5 Reviews the application or amendment, determines if it is complete, requests additional information as needed, and prepares the license or amendment for secondary review and license or amendment approval by the Radiation Control Program Director (RCPD) or designee.

2.1.6 The suggested time to complete all licensing actions (i.e., new license applications and existing license amendments, renewals, and terminations is):

Priority	**Goal Time Increment**	**Licensing Action**
R - Rush	As Soon As Possible	Assigned by RMPM

		License Termination License Expiration
H - High	90 days	New RSO New Authorized User New Use* Possible Violations
M - Medium	180 days	Initial License Renewal - In Entirety New Equipment New Change Practice
L - Low	180 days	Delete AU or RSO Delete Use, Isotopes, Place of Use*

2.1.5 Recommends whether an application is deficient and should be denied either with or without prejudice.

2.1.6 Provides findings during the primary or secondary review of license applications and amendments to the Radioactive Materials Program Manager or RCPD as appropriate.

2.2 Radioactive Materials Program Manager (RMPM)

2.2.1 Generally manages the Radioactive Materials Program and for license applications and amendments, assigns the licensing actions to a qualified Radiological Health Specialist. This responsibility can be designated if necessary to the RCPD.

2.2.2 May perform primary or secondary reviews of license applications and amendments.

2.2.3 May initiate consultation with and seek concurrence of the Department of Health Legal Division on license application or amendment denials, with or without prejudice.

2.2.4 The responsibilities of the RMPM may be designated to the RCPD in the RMPM's absence.

2.3 Radiation Control Program Director (RCPD)

2.3.1 Approves and signs licenses and license amendments. This responsibility may be designated to the RMPM in the absence of the RCPD.

2.3.2 May perform secondary license reviews if qualified as a license reviewer for the license type.

2.3.3 The responsibilities of the RCPD relative to the Radioactive Materials Program may be designated to the RMPM in the absence of the RCPD.

3.0 PROCEDURE

3.1 Receipt of a License Application or Request for a License Amendment

Upon receipt of an application for license or a request for a license amendment the following shall be performed:

3.1.1 Timeliness of review - Within 30 days of receipt of a request for a licensing action, the Department should perform an acceptance review of the licensing request and take the following actions:

3.1.1.1 Issue an acknowledgement of receipt within 30 working days of the receipt and make a License Tracking System (LTS) entry.

3.1.1.2 Confirm that all necessary sections of the application (Department Form 313) are completed and the form has been signed by the applicant's certifying official.

3.1.1.3 Confirm that attachments identified by the applicant are included in the submittal.

3.1.1.4 Identify any requests for expedited review for safety-significant concerns (e.g., change in the Radiation Safety Officer or amendment requests resulting from identification of safety-significant violations) or business reasons (e.g., change of ownership).

3.1.2 After the acceptance review, send the applicant an acknowledgement letter that the license is under review and, if applicable, the current license will remain in effect until the licensing action is complete.

3.1.3 Note any administrative deficiencies or omissions that were identified during the primary review that could delay the technical review of the licensee's action.

3.1.4 Once issues and deficiencies have been identified in an application, the license reviewer should use the most efficient process available to fully communicate issues to the licensee. The reviewer should use the telephone, facsimile, or e-mail to communicate with licensees, thereby reducing reliance on formal letters.

3.1.5 Ensure that each requested item for additional information is clear (i.e., provide a description of the deficiency and a statement of what is needed); is essential to protect safety; and is limited to Department regulatory requirements and NUREG 1556 and other guidance.

3.1.6 Any significant or complex deficiencies in an application for either a new license or license amendment should be described in a deficiency letter to the applicant. Deficiency letters can be sent by regular mail, e-mail, or facsimile. The letter to the applicant should contain a statement that specifies that the Department will assume the applicant does not intend to pursue its application if the Department does not receive a reply within 30 calendar days from the date of the letter.

3.1.7 If a response to the deficiency letter is received within 35 calendar days from the date of the letter, proceed with review of the response.

3.1.8 If a response to the deficiency letter is not received within 35 calendar days from the date of the letter, the application can be considered abandoned for failure to provide the requested information. This abandonment is without prejudice to the resubmission of the application. Prompt action (5 working days) should be taken to void the application. The voiding of this application should be closely coordinated with the Department of Health Legal Division.

3.1.9 Inform the applicant or licensee that the technical review may identify additional omissions in the submittal and technical issues that require additional information.

3.1.10 Provide the applicant or licensee with an estimated time for completion of the licensing action. These are only estimates based on the specific type of licensing action. The estimated time for completion should account for any expedited review.

3.1.11 Inform the applicants that they are subject to Department licensing fees as outlined in **VDH Form 313** (Attachment 1.1-1.7).

3.1.12 Priority: An action priority shall be assigned to the application or request in accordance with the priority schedule here in RMPP 1.1 and with the concurrence of the RMPM.

3.1.13 Assignment of Reviewer: The processing and review of an application or amendment request shall be assigned to a Radiological Health Specialist qualified to conduct such a review.

3.1.14 Follow-Up on Mail Returned from Licensees: Mail that is returned to the Department may indicate several problems, ranging from clerical errors to the loss of control of licensed material. The steps below must be followed in such situations:

- Mail returned to the Department as undeliverable should be checked to ensure that the address is the same as on the application/license.

- Any pending application related to the license should be checked for the correct mailing address.

- For mail returned to the Department for any reason other than a Department clerical error, the procedure will be the same as for an expired license (RMPP 1.3).

- When the licensee cannot be located, send a certified letter to the address in the licensee file requesting clarification.

- Determine if the applicant has made any deliveries or has made any shipments of radioactive materials.

- **Under no circumstance will a license be issued if the location of use and mailing address is incorrect.**

  A**ll applicants requesting quantities of radioactive materials in excess of 10 CFR 37 Appendix A Category 1 and Category 2 quantities, shall have an initial inspection within one year of the application issue date. The first inspection date is entered in WBL and the licensee file as a reminder.**

3.2 Processing an Application for License

3.2.1 The application and all appended and referenced material shall be reviewed. State of Vermont rules, policies, procedures, NUREG-1556 applicable volumes, and applicable parts of 10 CFR shall be used, as appropriate, by the reviewer to evaluate the applicant and the application.

3.2.1.1 The **Pre-Licensing Checklist** (Attachment 1.1-1) shall be used on all new license applications as well as transfer of control (change of ownership) applications. *Note that change of ownership or transfer of control is generally considered a new application unless the entities are well known as would be the case if one medical licensee assumes ownership of or merges with another medical licensee.* Once completed, the checklist must be placed in the licensing folder with the license.

3.2.1.2 A checklist to address requests for **Risk-Significant Radioactive Material** (Attachment 1.1-2) must also be completed and placed in the licensing folder.

3.2.2 If additional information is needed, a Request for Additional Information (RAI) should be used. If the RAI is not addressed as necessary, a meeting with the applicant and/or a visit to the proposed facility(s) must be completed by the reviewer.

3.2.3 The reviewer shall use the **Licensing Job Aid** (Attachment 1.1-4) to verify all aspects of the licensing review have been completed and ensure that the review of the application includes the following commonly missed items:

- Application signed by upper management;

- Facility diagrams or sketches, including but not limited to, hoods, shielding, ventilation, work areas, storage areas, location of nearest occupied area, and physical security of radioactive material;

- Number, type, and range of survey instruments including procedures for calibration, checks for operability, and maintenance;

- Training and experience records for all Authorized Users (AUs);

- Preceptor and attestation statements for all new AUs, RSOs, and Authorized Medical Physicists (AMPs);

- Training and experience records, duties, responsibilities, and the availability of the RSO;

- Training and experience records for the Radiation Safety Committee Chair, if appropriate;

- Records to be retained and responsibility for records retention assigned;

- Frequently missed records include training for new employees, annual refresher training, survey instrument calibrations and source checks, and dose calibrator constancy, accuracy, linearity, and geometric variation checks for medical licenses;

- Procedures for receipt of radioactive material, especially to include off-hours and weekends.

3.2.4 Following this primary review, a secondary review will be conducted for quality assurance purposes by a qualified license reviewer other than the person doing the primary review.

3.2.5 The secondary review must also be conducted using the Licensing Job Aid and include a thorough evaluation of the completeness and accuracy of the licensing action file contents including the Pre-licensing Checklist and the Risk-Significant Radioactive Materials Checklist.

3.2.6 Upon completion of the primary and secondary review of the application and any supplemental material requested by the reviewer, a recommendation to issue a license or deny the application shall be made to the RCPD who will conduct the Administrative Qualitative Checklist and approve or deny the license application or amendment.

3.2.7 If the RCPD approves issuance of the license or license amendment, the prepared license will be signed by the RCPD or designee.

3.2.8 All submitted and referenced information shall be tied-down. A tie-down license condition is used for procedures, radiation detection equipment, use locations, etc., that are not already specifically identified on the license.

3.2.9 If the recommendation is to deny the application and the Department of Health Legal Division concurs, the primary reviewer, RMPM or RCPD, in concert with the Department of Health Legal Division shall prepare a notification to the applicant. The notification shall state the reason for denial and if a new application would be accepted from the applicant.

3.3 Pre-licensing Visit

3.3.1 The purpose of a Pre-licensing visit is to establish a basis for confidence that radioactive materials will be used as specified.

3.3.2 Pre-licensing visits are conducted for new entities that do not have an existing NRC or Agreement State license, licensees changing ownership to an unknown entity, or licensees that are significantly expanding the size or scope of their existing license. They are also used 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** (Attachment 1.1-1).

3.3.3 By the end of the visit, the reviewer should have observed, collected, and documented sufficient information to provide a basis for confidence that the applicant will use the radioactive materials as specified in its license application.

3.4 Processing a Request for License Amendment

3.4.1 A request for an amendment to a specific license must be submitted using Department Form 313. The request should be accompanied with a letter on company letterhead plus attachments. The request shall be signed by the individual in the position, or higher, that signed the application for license or the request shall be returned for proper signature. Alternatively, the licensing action request may be signed by an individual delegated by the person who signed the application or higher.

3.4.2 The primary review of the request for amendment shall determine if the request is so broad that it should be processed as a rewrite of the current license or as a new license. If it is determined that either a rewrite or a new license is appropriate and the RMPM concurs, the request shall be returned to the licensee and an appropriate application shall be requested.

3.4.3 A request from a medical licensee to add a qualified Authorized User to their license shall be accompanied by records of the individual's training and qualifications. Records of training shall be signed by the preceptor and shall not be just a letter stating that these procedures had been performed at another licensed facility.

3.4.4 A request to add an Authorized User to a license shall be accompanied by records of the individual's training and qualifications, especially as related to the AU's uses of radioactive materials.

3.4.5 A request to delete an Authorized User must require an evaluation to determine that the authorized material and uses are approved for other Authorized Users on the license.

3.4.6 A request to add or replace a Radiation Safety Officer (RSO) or Chair of the Radiation Safety Committee (RSC) shall include training and experience records and duties, responsibilities, and if appropriate, availability and delegation of authority.

3.4.7 A request to add isotopes, quantities, physical form, use, facilities, instrumentation, or the authorized place of use shall be reviewed in the same way as a request for a partial specific license for that activity.

3.4.8 A checklist to address requests for **Risk-Significant Radioactive Material**, (Attachment 1.1-2), must also be completed when the amendment includes any radioisotope listed in the Risk-Significant Radioactive Material Table in Attachment 1.1-2 and the checklist must be placed in the licensing folder.

3.4.9 As with new license applications, license renewals, and license terminations, a secondary review must be conducted and documented using the **Licensing Job Aid** (Attachment 1.1-4).

3.4.10 A license is normally amended in its entirety and includes new tie-down license conditions as appropriate. The RCPD shall sign to approve the amendment.

3.5 Processing a Request for Possession Only License (License Termination)

3.5.1 A Possession Only License is a license issued that authorizes the licensee to possess specific radioactive material but does not authorize its use. A Possession Only License is issued for a licensee that has ceased principal operations using radioactive material and has begun or is preparing to decommission its storage and usage facilities and dispose of or transfer the remaining radioactive material to an authorized recipient. It may also be issued for shielding material (depleted uranium) used for medical therapy linear accelerators and technetium-molybdenum generators.

3.5.2 If a licensee requests that its license be converted to possession-only status, determine whether the licensee has permanently ceased operations. If the licensee has permanently ceased operations, the licensee is required to begin decommissioning pursuant to 10 CFR 30.36(d), 40.42(d), and 70.38(d). Determine whether the licensee can proceed with decommissioning.

3.5.2 If the licensee can proceed with decommissioning, instruct the licensee to proceed with decommissioning and license termination. Do not amend the license to authorize

possession only. If the expiration date has not passed, the license should be amended to limit activities to decommissioning only. (Expired licenses do not need to be amended because by rule, decommissioning is the only activity authorized.) If decommissioning is the only activity authorized, change the program code to DECOMMISSIONING.

> NOTE: Reviewers should coordinate with inspection and decommissioning staff concerning site reviews and inspection activities before the program code is changed.

3.5.3 If the licensee cannot proceed with decommissioning (e.g., demonstrates that all reasonable options for radioactive waste disposal have been exhausted), review the licensee's application using the checklist in Enclosure (1) from NRC'S Policy and Guidance Directive PG 1-27 "Reviewing Requests to Convert Active Licenses to Possession-Only Licenses." When each item on the checklist has been adequately addressed, issue a possession-only license and change the program code to POSSESSION-ONLY: PERMANENT. Change the authorized use condition in the license to read, "Possession and storage only until termination of the license." The license should have a two-year expiration date and may be renewed if the licensee continues to demonstrate that it cannot divest itself of the radioactive material, although it has taken all reasonable actions within its ability to dispose of the material.

3.6 Handling of Information

3.6.1 A reviewer may receive information from an applicant or licensee that is marked as "proprietary," "confidential," "restricted," or "is the express property of Company X." The reviewer will need to determine whether the information is necessary to the licensing action. If the information is not necessary, it should be returned to the applicant. If the information is necessary, the reviewer needs to ensure that the applicant has submitted a formal request for withholding the information (Attachment 1.1-3 **Checklist for Requests to Withhold Information from Public Disclosure**). The reviewer evaluates the applicant's request for withholding the information. If the request is denied, in whole or in part, the applicant is given the option of withdrawing the information or application. If the applicant decides not to withdraw the information or application, the reviewer notifies the applicant in writing that the request for withholding information from the public has been denied and that the reviewer will disregard any references concerning the proprietary status of the information.

Documents that contain personally identifiable information, security-related sensitive information, and/or proprietary information should be protected from public disclosure. Licensees and other entities should have sufficient internal controls to prevent release of information to limit the risk that personal, sensitive, and proprietary information could be released to someone with malevolent intent. Methods to prevent the inadvertent release of sensitive information include (1) restricting access to electronic recordkeeping systems that contain such information, (2) controlling the reproduction, distribution, and destruction of potentially sensitive records, and (3) releasing sensitive information only to those individuals who have a need to know the information to perform their jobs and who are made aware of the security-related nature of the information.

3.6.2 If the information is necessary, the reviewer needs to ensure that the applicant has submitted a formal request for withholding the information in accordance with 1 V.S.A. § 317 that includes the following guidance:

3.6.2.1 The applicant shall request withholding at the time the document is submitted and shall comply with the document marking and affidavit requirements set forth below. The Department has no obligation to review documents not so marked to determine whether they contain information eligible for withholding.

3.6.2.2 The applicant shall ensure that the document containing information sought to be withheld is marked as follows:

- The first page of the document, and each successive page containing such information, must be marked to be readily visible, at the top, or by electronic watermark or other suitable marking on the body of the page, with language substantially similar to: "confidential information submitted under 1 V.S.A. § 317", "withhold from public disclosure under 1 V.S.A. § 317", or "proprietary", to indicate that it contains information the applicant seeks to have withheld.

- Each document or page, as appropriate, containing information sought to be withheld from public disclosure must indicate, adjacent to the information, the basis (*i.e.,* trade secret, personal privacy, etc.) for proposing that the information be withheld from public disclosure under paragraph 3.6.2 of this section.

3.6.2.3 The Department may waive the affidavit requirements on request, or on its own initiative, or in circumstances when the Department, in its discretion, deems it appropriate. Otherwise, except for personal privacy information, which is not subject to the affidavit requirement, the request for withholding must be accompanied by an affidavit that:

- Identifies the document or part sought to be withheld;

- Identifies the official position of the person making the affidavit;

- Declares the basis for proposing the information withheld, encompassing considerations set forth in 1 V.S.A. § 317;

- Includes a specific statement of the harm that would result if the information sought to be withheld is disclosed to the public; and

- Indicates the location(s) in the document of all information sought to be withheld.

3.6.2.4 Any part of the application that the reviewer has determined should be withheld from public disclosure should be handled in accordance with 3 V.S.A. § (c) (25) and the applicant should be notified in writing that the Department plans to honor the request; however, the notification needs to inform the applicant that the Department may have cause to review the determination in the future, for example, if the scope of a records request is in accordance with Vermont's Access to Public Records and Documents law 3 V.S.A. §§ 315-317.

3.7 Assuring the Technical Quality of Licensing Actions

3.7.1 All license applications, license amendments, license renewals, and license terminations shall be provided a primary, secondary, and supervisory review prior to the licensing action being signed and approved utilizing the **Licensing Job Aid** for the primary and secondary review and the **Administrative Qualitative Checklist** for supervisory review (Attachments 1.1-4 and 1.1-5).

3.7.2 Upon completion of the primary review, the primary license reviewer will notify the Radioactive Materials Program Manager for secondary review assignment. This may be assigned to any qualified radioactive materials program license reviewer. The secondary review will utilize Attachment 1.1-4 **License Review Job Aid**.

3.7.3 License reviewers should compare similar Vermont radioactive materials licenses as a means to provide an additional quality check to ensure completeness.

3.7.4 The final review to assure the technical quality of licensing actions is the supervisory review. It is conducted by the Radiation Control Program Director before signing and approving the licensing action.

4.0 RECORDS

4.1 Records to be Maintained

4.1.1 Applications for license plus attachments are kept in the license file and are maintained by the Radioactive Materials Program Staff in a secure electronic environment accessible to Vermont Department of Health Radioactive Materials Program personnel only.

4.1.2 Requests for amendments are maintained in the appropriate specific license file.

4.2 Records Retention

4.2.1 Web Based Licensing is the primary electronic file repository.

4.2.2 Records may also be kept in other secure electronic forms with access only to RMP staff.

5.0 ATTACHMENTS TO RMPP 1.1

1.1-1 Pre-Licensing Checklist

1.1-2 Risk-Significant Radioactive Material Checklist

1.1-3 Checklist for Requests to Withhold Information from Public Disclosure

1.1-4 Licensing Job Aids

1.1-5 Administrative Qualitative Checklist

1.1-6 Program Codes

1.1-7 Department Form 313 Application for Radioactive Materials License