

Bureau of Air Management
Intradepartmental Referral Form

To: Jake Felton, Director
Enforcement Division

From: Jeffrey Semancik, Director
Radiation Division

Date:

Site Name:

Site Address:

License No.:

Applicable Regulation:

*****Please acknowledge, via email, the receipt of this referral: Within 14 calendar days.**

(Administrative Enforcement will need the following) Please provide:

- Responsible Party name, address, email, phone #?
- Date of inspection and/or Date of discovery of the violation(s)?
- How was the violation(s) discovered: (i.e. was it self-reported; citizen complaint; routine inspection, etc.)?
- Describe the violation(s) in detail.
- Classify the severity level of the violation(s)
- Past compliance history (if any). What previous enforcement actions have been taken in the last 5 years?
- How long has the violation been occurring?
- Corrective action(s) needed or taken.
- Was an NOV issued? Please attach a copy
- Any other pertinent information?
- Please contact _____ in the Radiation Division for further information.

*Attach relevant documents and correspondence.