

GUIDE FOR THE COMPLETION OF A IRRADIATOR PERMIT APPLICATION

When completing the enclosed Irradiator Permit Application, please use this guide when providing the information requested. The application is provided below and should be completed accurately to facilitate the review of the application for approval. Incomplete application(s) will result in unnecessary delays. The information provided will enable the University of Toronto Radiation Protection Authority (UTRPA) to provide a thorough Radiation Protection program for users of these equipments.

The following information is required in the appropriation section of the application.

ELIGIBILITY

In order to hold a UTRPA Permit, the applicant must be one of the following:

1. Assistant Professor
2. Associate Professor
3. Full Professor

In addition, two years of relevant experience (industrial or academic) is required and should be detailed as outlined below.

If these conditions cannot be satisfied, then alternate arrangements can be made through the UTRPA. Contact the Radiation Protection Service (416-978-2028/6846) for further information.

EXPERIENCE

1. Work experience with radioactive material?
i.e. when and where was work experience gained and the duration of the work?
2. Formal radiation protection training. Please provide brief details.

EXPERIMENTAL PROCEDURES

Irradiator must NOT be used in humans under the UTRPA permit.

1. Nature of work to be performed.
2. If animals are to be used for in vivo radioisotope work, provide as a minimum.
 - a) What type of animals will be used?
 - b) The maximum dose which will be used for each animal?
 - c) How long is the animal to be kept?

PERMIT APPLICATION BELOW

RADIOISOTOPE PERMIT APPLICATION

UNIVERSITY OF TORONTO RADIATION PROTECTION AUTHORITY

1. **Name:**
2. **Department:**
3. **E-mail address:**
4. **Building:**
5. **Office room number:**
6. **Office telephone number:**
7. **Home telephone number:**
8. **University position:**
9. **Radiation work experience:** (In detail)

10. **Experimental procedures:** In Vitro In Vivo (**Non-Human**)

11. **Which irradiator you intend to use:**

MSB

CCBR

12. **Additional information:**

a) Can aerosols or gases be produced? No Yes (specify)

b) Are biological material used in the same experiment? No Yes (specify)

c) Are dangerous chemicals used in the same experiment? No Yes (specify)

Applicant's Signature: _____

Date:

Department Signature: _____
(Chair/Head of Department)

(Print Name of Chair/Head)

Please return completed application to:
*Radiation Protection Service
Office of Environmental Health & Safety
Room 702, 215 Huron Street
University of Toronto
Toronto, Ontario, M5S 1A2*