

Radioactive Shipment Receipt Survey

Survey Date/time: _____		Location: _____		Survey #:	
Shipped from: _____		Receipt date/time: _____			
Shipping method: _____		Contents: _____			
Package condition: OK Punctured Wet Crushed Other _____					
DOT radiation label affixed and transport index indicated: None (limited quantity) WI YII YIII TI					
Maximum measured direct radiation levels: Survey instrument used: _____ Serial #: _____ Background reading: _____ mR/hr Max at package surface _____ Max at 1 meter from package surface: _____					
Maximum wipe results: Survey instrument used: _____ Serial #: _____ Background count rate: _____ cpm=- _____ dpm Maximum package outer surface: _____ net cpm/100cm ² = - _____ dmp/100cm ² Maximum final container: _____ net cpm/100cm ² = - _____ dmp/100cm ² All Some smears of the container surface did didn't show removable radioactivity above background. Exceptions: _____					
Did shipping papers and radioactive contents agree? Radionuclide(s): Yes No Amount (uCi, ect.): Yes No Phys/chem form: Yes No List any differences: _____					
Packing materials: Survey of packing material and cartons: _____ net cpm = net dpm _____ Survey of instruments used: _____ Serial number: _____ Disposition of packing materials and cartons: Radioactive waste Conventional waste (labels destroyed) Stored for reuse					
Regulatory agency & carrier notification required? Yes No (If yes, fill in below)					
Agency: _____	Date: _____	Time: _____	Individual notified: _____	Remarks: _____	
Shipment was received in order. There was no indication of leakage or significant contamination, and no unexpected or abnormal radiation levels. Yes No Remarks: _____ Signature of Surveyor: _____					
Disposition of radioactive materials after inspection survey: Material released to: _____ Location: _____ Date and time: _____					
I certify that I am authorized to receive the above listed radioactive material in accordance with the Montana Tech NRC license # _____ Date/time: _____					
Reviewed by Radiation Safety Officer: _____				Date: _____	