UNIVERSITY OF WATERLOO APPLICATION FOR X-RAY SOURCE

# Applicant

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of Applicant: | | | |  | |
| Department: |  | | | | |
| Phone No. (Ext.): | |  | | | |
| Home Phone No.: | | |  | | |
| Do you have an existing permit number?  Yes  No, If Yes, write here: | | | | |  |

# Source

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Source Type: Portable Cabinet Cabinet (Walk-in) Fixed | | | | | | |
| Manufacturer: |  | | | | | |
| Model Name and Number: | | |  | | | |
| Serial Number: | |  | | | | |
| Maximum Rated Tube Volteage (kVp): | | | | |  | |
| Maximum Rated Current (mA): | | | |  | | |
| Anticipated Maximum Workload (mA-min/week): | | | | | |  |

Provide a copy (or link) of the operator’s manual.

# Location

X-Rays Storage Location (Room and Location within the Room):

|  |
| --- |
|  |

X-Rays Use Location (Room and Location within the Room):

|  |
| --- |
|  |

# Permit Holder’s Responsibilities

The x-ray permit holder shall provide facilities, equipment and supervision according to x-ray safety regulations and UW x-ray safety program. The X-Ray Safety Officer (Katelyn Versteeg [kaverste@uwaterloo.ca](mailto:kaverste@uwaterloo.ca) or ext 37900) should be contacted prior to purchasing any x-ray equipment so that it can be properly registered with the Ministry of Labor and an internal (UW) permit issued.

The x-ray permit holder shall ensure workers and students working under their supervision:

* Complete x-ray safety training and are authorized to work with x-ray emitting devices.
* Comply with x-ray safety regulations and UW x-ray safety program.
* Report immediately incidents of exposure or malfunction to the X-ray Safety Officer (ext. 37900).
* Notify the X-ray Safety Officer of any change in location or modification to any x-ray emitting device under their supervision.
* Wear the appropriate radiation dosimeter.

# Sign Off

|  |  |  |
| --- | --- | --- |
| Permit Holder Signature: | |  |
| Date: |  | |