

INVENTORY (RADIOACTIVE ISOTOPES)

Permit Holder: _____	Isotope: _____	Material: _____
Permit #: _____	Activity: _____	Lot #: _____
Location: _____	Vial Size: _____	Vial ID: _____
Date Received (D/M/Y): _____	Class: _____	PO: _____
Package Contamination: _____	Contamination Tested By: _____	

DISPOSAL (Disposal drum number refers to the solid waste container where the empty source vial was placed.)

Date Vial Received by ESF (D/M/Y): _____ Disposal Drum Number: _____

All waste is to be segregated appropriately and brought to ESF for disposal.

This form must accompany the original vial to the waste area.

Date Used	User Initials	Amount Used	Unit	Contamination Monitoring Date

