

AP-012-01 - Radiation Work Permit

RADIATION WORK PERMIT			
Job Supervisor: Al Craig/Mike Plonski		Date: 2/23/2017	RWP #: 10-1007.00-4
Location of Work: Former UNC Manufacturing Facility, New Haven, CT			
Description of Work: Asbestos abatement, confined space entry, waste collection, FSS.			
SUMMARY OF RADIOLOGICAL CONDITIONS			
LOCATION	CONTAMINATION LEVELS	RADIATION LEVELS	AIRBORNE CONCENTRATIONS
Containment(s)	$< 1,000 \alpha / 1,000 \beta\text{-}\gamma$ Removable $< 5,000 \alpha / 5,000 \beta\text{-}\gamma$ Total	$< 10 \mu\text{Rem/hr}$ Area above background $< 500 \mu\text{Rem/hr}$ contact	$< 1\text{E-}14 \text{ uCi/ml}$ effluent $< 2\text{E-}11 \text{ uCi/ml}$ breathing zone
REQUIRED RADIOLOGICAL CONTROLS			
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input checked="" type="checkbox"/> Coveralls</div> <div style="width: 33%;"><input type="checkbox"/> Glove Liners</div> <div style="width: 33%;"><input checked="" type="checkbox"/> BZ/Lapel Air Sampler</div> <div style="width: 33%;"><input type="checkbox"/> Hood</div> <div style="width: 33%;"><input type="checkbox"/> Plastic Shoe Covers</div> <div style="width: 33%;"><input type="checkbox"/> Lab Coat</div> <div style="width: 33%;"><input type="checkbox"/> Surgeon's Cap</div> <div style="width: 33%;"><input checked="" type="checkbox"/> Rubber Shoe Covers</div> <div style="width: 33%;"><input checked="" type="checkbox"/> Pre-Job Meeting</div> <div style="width: 33%;"><input type="checkbox"/> Surgeon's Gloves</div> <div style="width: 33%;"><input type="checkbox"/> Tape Gloves to Sleeves</div> <div style="width: 33%;"><input checked="" type="checkbox"/> Continuous HP Coverage</div> <div style="width: 33%;"><input checked="" type="checkbox"/> Rubber Gloves</div> <div style="width: 33%;"><input type="checkbox"/> Plastic Suit</div> <div style="width: 33%;"><input type="checkbox"/> TLD/OSL</div> <div style="width: 33%;"><input checked="" type="checkbox"/> Trained Radiation Worker(s)</div> <div style="width: 33%;"><input type="checkbox"/> Other</div> </div>			
Special Instructions: Level C PPE also includes air-purifying respirator, work boots, hard hats, and safety glasses. Workers must be fit-tested for respirator and have Asbestos Awareness Training.			
YOUR SIGNATURE INDICATES THAT YOU HAVE READ AND UNDERSTAND THE RADIOLOGICAL CONDITIONS AND CONTROLS.			
NAME	SIGNATURE	NAME	SIGNATURE
<div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 30%;"> _____ Approved by (print name) </div> <div style="width: 30%;"> _____ Signature </div> <div style="width: 30%;"> _____ Date </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 30%;"> _____ Re-approved by (print name) </div> <div style="width: 30%;"> _____ Signature </div> <div style="width: 30%;"> _____ Date </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 30%;"> _____ RWP Terminated by (print name) </div> <div style="width: 30%;"> _____ Signature </div> <div style="width: 30%;"> _____ Date </div> </div>			

RADIATION WORK PERMIT ADDITION SHEET

NAME

SIGNATURE

NAME

SIGNATURE

Reviewed by (print name)

Signature

Date _____