



REQUEST TO RELEASE MATERIAL/EQUIPMENT FROM DEPARTMENT OF ENERGY CONTROL

PART 1 - REQUEST INITIATION (COMPLETED BY REQUESTOR)

LOG #: FBP-UE5-

PROPERTY DESCRIPTION	PROJECT:	WAD:	<input type="checkbox"/> General Work JHA <input type="checkbox"/> See job-specific JHA <input type="checkbox"/> Other:
HISTORICAL AND PROCESS-RELATED INFORMATION			DISPOSITION OF PROPERTY
M&E packaging history is known? <input type="checkbox"/> N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK			<input type="checkbox"/> Return to vendor <input type="checkbox"/> Re-use
Inspection verified the absence of prohibited items (tools, PPE, posting, mud, etc.)? <input type="checkbox"/>			<input type="checkbox"/> Recycle <input type="checkbox"/> Disposal
Has the property handled or contained radioactive materials? <input type="checkbox"/>			<input type="checkbox"/> Calibration / repair (& return)
Has the property been located in a radiological area or radioactive material area? <input type="checkbox"/>			<input type="checkbox"/> Other:
Was the property decontaminated to support the release? <input type="checkbox"/>			
Is the M&E no longer in use and staged for evaluation / surveys? <input type="checkbox"/>			
SPECIFIC USE HISTORY INFORMATION / REMARKS			RECIPIENT(S) (NAME & ADDRESS)
WHERE IS THE M&E CURRENTLY LOCATED?			
Method of Control:			
<input type="checkbox"/> See attached additional information <input type="checkbox"/> Blanket release authorization requested (signed by supervision or management)			
Signature indicates that requestor is familiar with the use history of the M&E while at PORTS. The information provided is accurate and I have positive control of this M&E.			
PRINTED NAME SIGNATURE DATE PHONE #			

PART 2 - INITIAL ASSESSMENT & CATEGORIZATION (COMPLETED BY COORDINATOR AND RADIATION PROTECTION)

Date Requestor Training Verified <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	Sentinel Survey Information <input type="checkbox"/> N/A <input type="checkbox"/> No positive results <input type="checkbox"/> Positive result(s) <input type="checkbox"/> Activity not attributed to contamination from DOE operations/activities Sentinel Survey Number(s) if performed:	The property is: <input type="checkbox"/> NON- IMPACTED <input type="checkbox"/> IMPACTED Moratorium applies <input type="checkbox"/> YES <input type="checkbox"/> NO PPPO concurrence req'd <input type="checkbox"/> YES <input type="checkbox"/> NO
Inspection results were satisfactory? <input type="checkbox"/>	<input type="checkbox"/>		
Does the M&E contain a source? <input type="checkbox"/>	<input type="checkbox"/>		
Is material dispersible or volumetric? <input type="checkbox"/>	<input type="checkbox"/>		
Sentinel Surveys performed? <input type="checkbox"/>	<input type="checkbox"/>		
For non-impacted M&E, does the documented evaluation provide clear evidence indicating the M&E has NO potential for residual radioactive material above background? <input type="checkbox"/>	N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>		
Is a Survey Release Plan (SRP) applicable? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> SRP #: <input type="text"/>			
EVALUATION REMARKS / RATIONALE <input type="checkbox"/> FBP-RP-PRO-00004-F03 attached <input type="checkbox"/> See attached evaluation remarks (other than F03)			
NON-IMPACTED M&E REMARKS:			

PART 3 - APPROVAL STATUS (COMPLETED BY RADIATION PROTECTION)

<input type="checkbox"/> The property may be dispositioned for unrestricted release as requested.	<input type="checkbox"/> Unrestricted release of subject property is rejected.
<input type="checkbox"/> The property may be released with the following restriction(s):	Basis for rejection: <input type="checkbox"/> The property must be disposed as radioactive waste.
RP EVALUATOR: <input type="text"/>	
PRINTED NAME SIGNATURE DATE PHONE #	
RP PEER REVIEWER: <input type="text"/>	
PRINTED NAME SIGNATURE DATE PHONE #	
RPM: <input type="text"/>	
REJECT <input type="checkbox"/> APPROVED <input type="checkbox"/> N/A <input type="checkbox"/> PRINTED NAME SIGNATURE DATE PHONE #	
PPPO CONCURRENCE ATTACHED <input type="checkbox"/>	
PPPO CONCURRENCE N/A <input type="checkbox"/> PRINTED NAME SIGNATURE DATE PHONE #	

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