**RADIOACTIVE MATERIALS PERMIT AMENDMENT**

**POSSESSION LIMIT CHANGE**

|  |  |
| --- | --- |
| **Name of Authorized User**  | **Permit (License) Number** |
|  |  |

**Quantity Change Request**

|  |  |  |  |
| --- | --- | --- | --- |
| **Isotope** | **Chemical/Physical Form** | **Current Possession Limit (mCi)** | **Requested Possession Limit (mCi)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Request for Addition or Deletion of Radioactive Material from Permit**

|  |  |  |  |
| --- | --- | --- | --- |
| **Isotope** | **Quantity (mCi)** | **Chemical/Physical Form** | **Check Either Box Below** |
| **Add**  | **Delete**  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

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| --- |
| *For an addition/increase request, please attach a description of the reason for the change and any new protocols for use, if applicable.* |

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| --- |
| **Authorized User****Signature: Date:**   |
| ***↓ Radiation Safety Use Only Below This Line ↓*** |

**Permit Number: Date Received:**

|  |  |  |
| --- | --- | --- |
| **RSO Recommendation** |  | Approve Amendment  |
|  | Approve Amendment pending resolution of conditions noted on attachment |
|  | Evaluation by Radiation Safety Committee |
|  | Do not approve due to conditions noted on attachment |
| **Radiation Safety Officer** **Signature: Date:**   |
| **Radiation Safety Committee Chairman Approval****Signature: Date:**   |