



Republic of Mauritius

RADIATION SAFETY AND NUCLEAR SECURITY AUTHORITY

APPLICATION FOR LICENCE

Note: Please read the associated **Guide for Applicant** for instructions to complete this application form.

1. APPLICANT

Name of Applicant <i>(Please use BLOCK letters)</i>	
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2. CONTACT PERSON

Name					
Designation					
Address					
Tel.		Mobile		Email	

3. DETAILS OF FACILITY

Name of Facility					
Address of Facility					

For office use only:

Application Number:	AL	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>
Facility Number:	RF	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>					

4. DETAILS OF RADIATION GENERATOR¹

A.	A.1 Type of equipment	
	A.2 Maximum kV	A.3 Maximum mA
	A.4 Utilisation Mode <i>(Please tick as appropriate)</i> <input type="checkbox"/> Fixed <input type="checkbox"/> Mobile <input type="checkbox"/> Portable	
B.	Purpose of Use	

¹ Use additional sheet for more than one Radiation Generator.

5. DETAILS OF SEALED SOURCE²

A.	A.1 Type of Associated Equipment	
	A.2 Radionuclide(s)	A.3 Maximum Activity
	A.4 Utilisation Mode <i>(Please tick as appropriate)</i> <input type="checkbox"/> Fixed <input type="checkbox"/> Mobile <input type="checkbox"/> Portable	
B.	Purpose of Use	

² Use additional sheet for more than one Sealed Source.

