Shipment of Radioactive Substances between the

Member States of the EC

In compliance with Council Regulation (EEC) No. 1493/93

Industrial Pollution and Radiochemical Inspectorate

Klondyke Building, Gasworks Business Park Cromac Avenue Belfast, BT7 2JA

Tel: 02890569296 Fax: 02890569293 File No

Notes for Guidance

- The consignee of sealed sources and other relevant sources must complete boxes 1 to 5 and return this form to the address shown above.
- The Northern Ireland Environment Agency must fill in box 6 and return this form to the consignee.
- The consignee must then send this form to the holder in the forwarding country prior to the shipment of the sources.
- All sections of this form must be completed and boxes ticked where appropriate.

1. This declaration concerns:

- One Shipment (This form is valid until the shipment is completed unless otherwise stated in box 6)
- Several Shipments (This form is valid for three years unless otherwise stated in box 6)

2. D	estination of the Source(s)
	Name
	Person to contact
	Address
	Destination of source(s)(If different from above)
	Tel: Fax:







3. Holder of the Source(s) in the Forwarding Country						
1	Name					
	Person to contact					
,	Address					
-	Tel:					
4. Des	scription of the Source(s) involved	in the Shipm	ent(s)			
(a) Radio	onuclides					
(b) Maxir	mum activity of individual source (MBq)					
` ′	ber of sources	(-) (1	/			
` ′	s (these) sources(s) is (are) mounted in (nort description of the machinery/device/	,	evice/equipme	nt, please		
g						
(e) Indica	ate (if available and requested by the co	mpetent author	ities)			
 national or international technical standard with which the source(s) complies(y) and certificate number: 						
- 1	name of the manufacturer and catalogue	reference				
	Jametian of the Authorized on Deen	anailda Dara				
	claration of the Authorised or Resp			m io correct		
	I, the consignee, hereby certify that I am lice	·				
	I, the consignee, hereby certify that I am licenced, authorised or otherwise permitted to receive the source(s) described in this form.					
	Licence, authorisation or other permission thereof:	on number <i>(if ap</i>	oplicable) and	validity date		
a	I, the consignee, hereby certify that I cor as those relating to safe storage, use or form.					
Name .	Signature		Date			

6. Confirmation by the Competent Authority of the Consignee Country that it has taken note of this Declaration							
Stamp:							
Name of the authority							
Address:							
Tel	Fax	Date					
This declaration is valid until (if applicable):							