



REPUBLIC OF KENYA

MINISTRY OF HEALTH

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Ref:.....
Reg. No.
Licence No.
Receipt No.....

RADIATION PROTECTION BOARD
P. O. BOX 19841 – 00202, NAIROBI
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Email: rpbkenya@nbnet.co.ke

RADIATION PROTECTION ACT, CAP. 243 LAWS OF KENYA
SECTION 11 (1)

**APPLICATION FOR DISPOSAL OF AN IRRADIATING DEVICE/
RADIOACTIVE MATERIAL/WASTE**

1. Name of applicant
- Postal Address
- Physical Address
- Tel.
- Fax.....
- E-mail
2. (i) Type of Radiation facility (e.g. medical, scientific, industrial, e.t.c)
- (ii) Radiation Protection Board Registration No.....
- (iii) Radiation Protection Board License No.....
3. Specify irradiating device, radioactive material or radioactive waste to be disposed of
- Also indicate;
- (i) sealed or unsealed.....
- (ii) source strength rating (KV/mA/MeV/Bq/Ci, e.t.c.)(as appropriate)
- (iii) Physical/chemical form.....

4. Give name(s) and contact(s) of Radiation Protection Board certified service provider(s).....

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Preferred method of disposal*

Intended start date of disposal process.....

5. (i) If part 4. above is not applicable, describe alternative method of disposing exempt level radionuclides and electrical radiation generators (e.g. through sewerage, solid waste tipping, burial, incineration, restricted storage, e.t.c.)

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(ii) Describe measures to ensure radiation safety standards are maintained during the disposal exercise.....

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(iii) Estimate the expected radionuclide concentration levels in the environment (disposal route sediments) after disposal.

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6. ***Declaration by Applicant:***

Ihereby declare and certify that the information given in this application including attachments thereto is true and correct to the best of my knowledge and belief.

Date: ***Signature:***

Official Stamp:

Notes:

1. Radioactive materials shall not be mixed for purposes of disposal as radioactive waste.

* Attach a detailed proposal for the disposal by the service provider.