



Sri Lanka Atomic Energy Act No. 40 of 2014
SRI LANKA ATOMIC ENERGY REGULATORY COUNCIL



**Application for a Renewal of the Licence for Radiotherapy Facilities Using
Ionizing Radiation**

**Sources covered by this application: Tele-Gamma Facility/Gamma Knife Facility/
Brachytherapy Facility**

Maximum validity period of the licence- One year

This application should be duly filled and submitted to the Sri Lanka Atomic Energy Regulatory Council, 03 months prior to the date of expiry of the licence to get it renewed as described in section 28 (1) of the Sri Lanka Atomic Energy Act No. 40 of 2014.

1. General information: (Provision of all formation requested below is compulsory)

Name of the Applicant (Licencee)	
Designation of the Applicant	
Name and address of the institute	
Name & designation of the Head of the institution (If not the Licencee)	
Existing licence No.	
Date of expiry of the licence	
Name of the Radiation Protection Officer (RPO)	
Contact details of the RPO	
Telephone No./ Fax No.	
E-mail address	
Business registration No. (only for private entities). Please attach a copy of registration	
Address where the sources/equipment are used (if different from the above address)	
Telephone No./ Fax No.	
E-mail	

2. Information of personnel to be authorized:

2.1 Details of personnel to be authorized to operator and use of therapy machines (Medical Specialists, Physicists, Radiographers and Technologists etc.) (if space is not adequate, use additional papers with same format to provide all information)

Name with initials	Date of Birth	National ID Number (Compulsory)	SLMC registration No.	Designation	Qualification & experiences in the relevant field	Details of radiation protection trainings received (title of training, organizer, year, training code etc.)

2.2 Details of personnel to be authorized to work in control areas (if space is not adequate, use additional papers with same format to provide all information)

Name with initials	Date of Birth	National ID Number (Compulsory)	Designation	SLMC registration No. (if applicable)	Qualifications & experience in the relevant field	Details of radiation protection trainings received

3. Sources & equipment:

3.1 For Tele-gamma facility/ Gamma knife facility:

Specifications	Unit 1	Unit 2	Unit 3	Unit 4
Information of the Machine:				
i. Type	-----	-----	-----	-----
ii. Manufacturer	-----	-----	-----	-----
iii. Model No.	-----	-----	-----	-----
iv. Serial No.	-----	-----	-----	-----
v. Type of gantry (stationary or rotary)	-----	-----	-----	-----
vi. Out- put in Gy/min at isocenter	-----	-----	-----	-----
v. Max design Activity in GBq	-----	-----	-----	-----
vi. Type of source carrier or shutter (exposures mechanism)	-----	-----	-----	-----
Information of the sources:				
i. Radionuclide	-----	-----	-----	-----
ii. Serial No.	-----	-----	-----	-----
iii. Initial activity of the source in GBq & date	-----	-----	-----	-----
iv. No. of sources installed	-----	-----	-----	-----
v. Present activity in GBq & date	-----	-----	-----	-----
Information of the facility:				
i. Approved room plan number	-----	-----	-----	-----
ii. AERC import authorization no. of the source	-----	-----	-----	-----

3.2 Details of brachytherapy machines:

3.2.1 Remote after loading systems:

Manufacturer	Model No. of the machine	Serial No. of the machine	Radio nuclide	Physical dimensions & shape of the source	Dose rate: (High, Medium Low) select & write	Number of sources		Current total activity (GBq) with date of each radionuclide	Approved room plan number	SLAERC import authorization No.
						Source serial No.	Activity			

3.2.2 Manual after loading systems:

Radionuclide	Manufacturer of the source	Physical type (Ribbon, Wire, Individual)	Total activity (per cm for wires and ribbons)	Number of sources of radionuclide	Current total activity with date of each radionuclide (GBq)	Approved room plan number (if relevant)	SLAERC import authorization no. of the source

3.3 Details of the other sealed sources used /stored for radiotherapy related activities :(calibration sources etc.) *(if space is not adequate, use additional papers with same format to provide all information)*

Name of associated equipment	Model No.	Serial No.	Radionuclide	Source serial No.	Activity/ date	SLAERC import authorization no. of the source

4. Radiation protection & security programme:

4.1 Radiation monitoring equipment:

Description of radiation monitoring equipment available (survey meters, area monitors etc.)

Type of equipment	Brand name	Measuring energy range	Model No.	Serial No.	Date of last calibration	Calibration report No.	Status of the equipment

4.2 Emergency equipment: List personnel protective /emergency equipment available

(L-shields, lead bricks, fume hoods, syringe shields, vial shields, remote handling tools, forceps emergency container to store the source etc.) *(if space is not adequate, use additional papers with same format to provide all information)*

Equipment / Tool	Type / Model	No. of units available	Purpose of use

4.3 Servicing of equipment:

List persons and institutes responsible for servicing and maintenance of the equipment.

4.4 Implementation of administrative rules and QA programme:

In an attachment to the application, provide information for followings;

4.4.1 Details of the QA programme conducted by the institute
(If not implemented, provide an action plan for implementation)

4.4.2 Details of local rules implemented by the institute
(If not implemented, provide an action plan for implementation)

4.4.3 Details of personal monitoring service implemented by the institute
Provided details of personal monitoring of workers including details of maintenance of dose reports.

4.4.4 Details source security programme implemented by the institute-attach site security plan.(If not implemented, provide an action plan for implementation)

5. Management of radioactive waste:

Describe procedure for management of radioactive sources when sources become unusable and arrangement made for repartition to the supplier/manufacture.

6. Implementation of Council’s recommendations:

Provide the status of implementation of recommendations given by the SLAERC within last 03 years.

7. Declaration:

I hereby declare that the all the information submitted is correct to the best of my knowledge and belief. In case, it is found, at any stage, that the information provided by me is false and/or not authentic, then I hereby accept that appropriate regulatory actions may be initiated against me and my institution, in accordance with the provisions of the Sri Lanka Atomic Energy Act No. 40 of 2014 and rules and regulations made there under..

Signature of the applicant
(if not the Head)

Signature of Head of the institution and seal

Date:_____

Date:_____

This Page may be retained for your information.

Instructions for applicants

1. The duly filled application form should be submitted to the Council along with the application processing fee of Rs 2000.00.
2. Processing fees should be made by cheque /MO/PO in favor of the Sri Lanka Atomic Energy Regulatory Council or by cash.
3. Application/s should be submitted to the Council before 30th September of each year along with the **application processing fee of Rs. 2000/=**. If application is not be submitted for renewal before 30th September, the applicant/institute **liable to pay Rs.100.00 as a surcharge for each day** until the date of submission of the renewal application, as per the Rule No. 1924/27 gazetted on 21-07-2015 on this behalf.
4. For any inquiries: Contact : Mr. T.H.S. Shantha, Director, (Authorization) of the Council
Tel: **011 2987860 / 011 3054805** E-mail: officialmail@aerc.gov.lk
5. For details of information and to down load the licence application, visit: www.aerc.gov.lk
6. Please forward your applications to:
**Director General,
Sri Lanka Atomic Energy Regulatory Council,
No. 977/18,
Kandy Road,
Bulugaha Junction,
Kelaniya.
Fax: 011 2987857**

Licence renewal fees

The licence renewal fee given below is applicable for each machine and shall be paid upon receipt of an invoice/ proforma invoice.

Source type	Fully Govt. owned Institutions such as Govt. Hospitals and Govt. Universities etc..	Semi Govt. and Private institutions
Tele-Gamma Facility	Rs.21,500.00	Rs.43,000.00
Gamma- Knife Facility	Rs.21,500.00	Rs.43,000.00
Brachy Therapy Facility	Rs.21,500.00	Rs.43,000.00

Important: Incomplete applications and/or applications with insufficient information are liable to be returned to the applicant or rejected