



Application for Notification, Registration or Consent under the Ionising Radiation Application Order 2019 (IRA019)

Are you applying for the first time or to amend a previously submitted application?

Applying for the first time <input type="radio"/>	Applying to amend a previously submitted application <input type="radio"/>
	Certificate number: <input type="text"/>

If you are **applying for the first time or amending a previously submitted application**, please complete all of the following questions (1-10) and then, either part A, B or C dependent upon what tier of application you are submitting. Finally, on the last page of the form, read the GDPR statement and sign the declaration.

1. Your contact details

Title:	<input type="text"/>
Name:	<input type="text"/>
Telephone:	<input type="text"/>
Email:	<input type="text"/>
Job title:	<input type="text"/>

2. The duty holder's details

Business name (employer)

The business's registered address

Address line 1	<input type="text"/>
Address line 2	<input type="text"/>
Town	<input type="text"/>
City	<input type="text"/>
County	<input type="text"/>
Postcode	<input type="text"/>
Telephone (if different to Q1)	<input type="text"/>
Email (if different to Q1)	<input type="text"/>

3. Is the work with ionising radiation carried out / are the sources of ionising radiation kept at the above address?

Yes	<input type="radio"/>	No	<input type="radio"/>
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If you answered “No”, at what address(s) is the work with ionising radiation carried out / are the sources of ionising radiation kept?

Note: If you undertake work on behalf of other duty holders e.g. servicing x-ray equipment please provide brief details of your work below. **You do not need to list your clients address.**

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Address line 1	
Address line 2	
Town	
City	
County	
Postcode	

Address line 1	
Address line 2	
Town	
City	
County	
Postcode	

Address line 1	
Address line 2	
Town	
City	
County	
Postcode	

Address line 1	
Address line 2	
Town	
City	
County	
Postcode	

4. Including X-ray devices, does the duty holder carry out work with portable ionising radiation sources at sites other than the address above?

Yes	<input type="radio"/>	No	<input type="radio"/>
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5. On how many fixed sites in the Isle of Man does the duty holder carry out work with ionising radiation?

<input type="checkbox"/>	0
<input type="checkbox"/>	1-5
<input type="checkbox"/>	6-10
<input type="checkbox"/>	11-25
<input type="checkbox"/>	26+

6. How many employees (in the Isle of Man) does the duty holder have\*?

<input type="checkbox"/>	0-9
<input type="checkbox"/>	10-49
<input type="checkbox"/>	50-249
<input type="checkbox"/>	250+

7. How many of these employees are classified radiation employees? (IRAO19, Regulation 21)

Note: these are higher risk employees who have their doses monitored and who have been certified to be fit for work with ionising radiation by a relevant doctor.

<input type="checkbox"/>	0
<input type="checkbox"/>	1-5
<input type="checkbox"/>	6-10
<input type="checkbox"/>	11-25
<input type="checkbox"/>	26+

8. Not including X-ray devices, does the duty holder transport radioactive substances as part of their work?

Yes	<input type="radio"/>	No	<input type="radio"/>
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\* This number does not include contractors, suppliers or outside workers.

9. If applicable, please complete the following table, using a separate row for each piece of equipment containing a sealed radioactive source (e.g. a gauge incorporating a caesium-137 sealed source) and each piece of equipment that incorporates a radiation generator (e.g. an X-ray postal inspection unit) that the duty holder works with.

Name of manufacturer	Make and model number (equipment) <b>OR</b> Radioisotope and activity (source)	Serial number or unique identifier	Year of manufacture	Year of installation	Location of equipment or source
e.g. Radiosources Ltd	Cs-137, 170 MBq	SN01100	2010	2010	Peel Practice
e.g. X-Security Ltd	X-Security Post Scanner, X3	X80013	1999	2000	Douglas Practice

10. If the duty holder uses unsealed radioactive material<sup>†</sup> (e.g. radioactive isotopes used in medical or research work), please complete the following table, using a separate row for each isotope that the duty holder typically has in stock.

Radioisotope	Physical form (eg liquid, powder etc)	Typical activity held (Bq)	Location of equipment or source
e.g. Iodine-129	Liquid	200 MBq	Peel Practice
e.g. Thorium oxide	Powder	500 kBq	Douglas Practice

<sup>†</sup> Unsealed radioactive material is material that could be easily dispersed, usually in the form of a powder or liquid.

**Read the following before completing the remaining section of the form.**

### **Notification**

This is the lowest tier of the risk based approach and applies to certain work with low activity/low activity concentration radioactive material and work in an atmosphere containing radon assessed to be above an annual average of 300 Bq per cubic metre. See IRAO19, regulation (5).

If you are applying to notify us of your practice, please complete **section A**.

### **Registration**

This is the intermediate tier of the risk based approach, applying to most work with radioactive sources and work with radiation generators‡. See IRAO19, regulation (6).

If you are applying to register your practice, please complete **section B**.

### **Consent**

Consent is the highest tier of the risk based approach and is for uses of ionising radiation that present the highest level of risk. Consent is only obtainable for the 7 specified practices in regulation 7 and a separate application is required for each practice requiring consent. See IRAO19, regulation (7).

If you are applying to obtain consent for your practice, please complete section C. Each separate practice requiring consent will need separate completion of this **section C**.

If you require assistance and clarification on the grade of application you need to complete, please refer to the guidance sheets, your radiation protection adviser (RPA) or your company's health & safety advisor.

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‡ In IRAO19, a radiation generator is defined as “a device capable of generating ionising radiation such as X-rays, neutrons, electrons or other charged particles”

## A. Application to notify

### i. Select all that apply

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | Notify working with <b>naturally occurring</b> radionuclides which are <b>not</b> used for their radioactive properties                      |
| <input type="checkbox"/> | Notify working with <b>artificial radionuclides and/or naturally occurring</b> radionuclides which are used for their radioactive properties |
| <input type="checkbox"/> | Notify working in an atmosphere containing radon with an annual concentration above 300 Bq per cubic metre ( <i>complete ii</i> )            |

### ii. If you are working in a radon atmosphere above an average annual concentration of 300 Bq per cubic metre, please provide details of the most recent radon concentration assessment.

- |                          |                              |
|--------------------------|------------------------------|
| <input type="checkbox"/> | 300 - 499 Bq per cubic metre |
| <input type="checkbox"/> | 500 - 699 Bq per cubic metre |
| <input type="checkbox"/> | 700 - 999 Bq per cubic metre |
| <input type="checkbox"/> | 1000+ Bq per cubic metre     |

## B. Application to register

### i. Select all that apply

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | Register working with <b>naturally occurring</b> radionuclides which are <b>not</b> used for their radioactive properties                      |
| <input type="checkbox"/> | Register working with <b>artificial radionuclides and/or naturally occurring</b> radionuclides which are used for their radioactive properties |
| <input type="checkbox"/> | Register working with a radiation generator (for example, X-ray devices are radiation generators)  |

### ii. On behalf of the duty holder, can you confirm the following:

- |                          |   |
|--------------------------|---|
| <input type="checkbox"/> | A risk assessment has been completed which identifies the main radiological risks associated with the work with ionising radiation and identifies any reasonably foreseeable radiation accident. (regulation 8, IRAO19)                     |
| <input type="checkbox"/> | Steps have been taken to measure or estimate employees' exposure to ionising radiation and appropriate action taken. (regulation 8, IRAO19)   |
| <input type="checkbox"/> | Actions identified in your radiation risk assessment that will restrict employees' and other persons' exposure to ionising radiation so far as is reasonably practicable have been completed. (regulation 8 & 9, IRAO19)                    |
| <input type="checkbox"/> | Contingency plans have been established for all reasonably foreseeable radiation accidents identified in the radiation risk assessment and where appropriate, rehearsals will be carried out at suitable intervals. (regulation 13, IRAO19) |
| <input type="checkbox"/> | A suitable radiation protection adviser (RPA) has been appointed and consulted. (regulation 14, IRAO19)   |
| <input type="checkbox"/> | Appropriate training, information and instruction is provided to all employees engaged in or affected by work with ionising radiation and will be repeated at appropriate intervals. (regulation 15, IRAO19)                                |
| <input type="checkbox"/> | Following consultation with the RPA and where appropriate, controlled and/or supervised areas have been designated and demarcated. (regulation 17, IRAO19)  |
| <input type="checkbox"/> | Where required, written local rules have been drawn up and radiation protection supervisor(s) are appointed for all work in controlled areas and where considered necessary, supervised areas. (regulation 18, IRAO19)                      |



## C. Application for consent

**i. Which of the following are you applying for? (A separate application is required for each practice requiring consent)**

<input type="checkbox"/>	The deliberate administration of radioactive substances to people or animals for medical or veterinary diagnosis, treatment or research.
<input type="checkbox"/>	The deliberate addition of radioactive substances in the production or manufacture of consumer products or other products, including medicinal products.
<input type="checkbox"/>	Industrial irradiation.
<input type="checkbox"/>	Industrial radiography.
<input type="checkbox"/>	Working with a high-activity sealed source (HASS <sup>§</sup> ) (except for industrial radiography or industrial irradiation purposes).
<input type="checkbox"/>	Discharging significant amounts of radioactive material with airborne or liquid effluent into the environment.
<input type="checkbox"/>	Operation of an accelerator (except when operated for industrial radiography or industrial irradiation purposes and except an electron microscope).

**ii. On behalf of the duty holder, can you confirm the following:**

<input type="checkbox"/>	An appropriate programme of monitoring or auditing of arrangements will be in place to check compliance with IRAO19 (regulation 8, IRAO19)
<input type="checkbox"/>	A person(s) with appropriate authority has been identified and named as having responsibility for radiological protection for this practice (regulation 18, IRAO19)
<input type="checkbox"/>	<p>A radiation risk assessment has been completed that has identified, where relevant (regulation 8, IRAO19):</p> <ul style="list-style-type: none"> <li>• ways in which reasonably foreseeable radiation accidents could occur and the likelihood and potential severity of them</li> <li>• engineering control measures and design features in place, or planned;</li> <li>• planned systems of work</li> <li>• estimated radiation doses to which anyone (including the public) can be exposed and the action needed to keep doses as low as reasonably practicable</li> </ul>
<input type="checkbox"/>	Where appropriate, the management of any radiation source no longer used and/or radioactive waste will ensure that exposures to employees will be restricted so far as is reasonably practicable (regulations 8 & 9, IRAO19)
<input type="checkbox"/>	The engineering controls, design features and safety features of the facility and/or radiation sources will restrict exposures to ionising radiation so far as is reasonably practicable (regulation 9, IRAO19)
<input type="checkbox"/>	The engineering controls, design features and safety features of the facility and/or radiation sources will be properly maintained and where appropriate, thorough examinations and tests of these will be carried out at suitable intervals (regulation 11, IRAO19)

<sup>§</sup> In IRAO19, a high activity sealed source is defined as “a sealed source for which the quantity of radionuclide is equal to or exceeds the relevant quantity set out in Part 4 of Schedule 7”

<input type="checkbox"/>	Contingency plans for all reasonably foreseeable radiation accidents identified in the radiation risk assessment have been established and where appropriate, rehearsals of these plans will be at suitable intervals (regulation 13, IRAO19)
<input type="checkbox"/>	A suitable radiation protection adviser (RPA) has been appointed and consulted (regulation 14, IRAO19)
<input type="checkbox"/>	Employees engaged in this practice: (regulation 15, IRAO19): <ul style="list-style-type: none"> <li>• have received appropriate training in radiological protection</li> <li>• have been informed and instructed regarding the radiological risks to their health from the practice and the precautions that should be taken</li> <li>• will receive updates/refresher training in radiological protection at appropriate intervals</li> </ul>
<input type="checkbox"/>	Employees not engaged in this practice, but who are likely to be affected by it, have received appropriate training, information and instruction in radiological protection and this will be repeated at appropriate intervals (regulation 15, IRAO19)
<input type="checkbox"/>	Following consultation with the RPA and where appropriate, controlled and/or supervised areas have been designated and demarcated (regulation 17, IRAO19)
<input type="checkbox"/>	Where required, written local rules have been drawn up and radiation protection supervisor(s) are appointed for all work in controlled areas and where considered necessary, supervised areas (regulation 18, IRAO19)
<input type="checkbox"/>	Where appropriate, suitable and sufficient quality assurance programmes will be in place for equipment used for medical exposure (regulation 16, IR[ME]R19)

**iii. What is the maximum expected total annual effective (whole body) dose to an employee engaged in this practice?**

<input type="checkbox"/>	0 - 1 mSv
<input type="checkbox"/>	1.1 - 5.9 mSv
<input type="checkbox"/>	6 - 9.9 mSv
<input type="checkbox"/>	10 - 14.9 mSv
<input type="checkbox"/>	15 - 20 mSv

**iv. What is the maximum expected total annual dose equivalent to the lens of the eye for an employee engaged in this practice?**

<input type="checkbox"/>	0 - 1 mSv
<input type="checkbox"/>	1.1 - 5.9 mSv
<input type="checkbox"/>	6 - 9.9 mSv
<input type="checkbox"/>	10 - 14.9 mSv
<input type="checkbox"/>	15 - 20 mSv

v. **What is the maximum expected total annual dose equivalent to the extremities (hands, forearms, feet, ankles) for an employee engaged in this practice?**

<input type="checkbox"/>	0 - 49.9 mSv
<input type="checkbox"/>	50 - 149.9 mSv
<input type="checkbox"/>	150 - 249.9 mSv
<input type="checkbox"/>	250 - 349.9 mSv
<input type="checkbox"/>	350 - 500 mSv

vi. **What is the maximum expected total annual dose equivalent to the skin for an employee engaged in this practice?**

<input type="checkbox"/>	0 - 49.9 mSv
<input type="checkbox"/>	50 - 149.9 mSv
<input type="checkbox"/>	150 - 249.9 mSv
<input type="checkbox"/>	250 - 349.9 mSv
<input type="checkbox"/>	350 - 500 mSv

vii. **What is the maximum expected total annual effective (whole body) dose to a member of the public?**

<input type="checkbox"/>	0 - 0.3 mSv
<input type="checkbox"/>	0.31 - 0.49 mSv
<input type="checkbox"/>	0.5 - 1 mSv

## Declaration

### Personal Information

- The Department of Environment, Food & Agriculture is a data controller for the purposes of the 2018 Data Protection legislation and requires the information on this form to comply with its legal obligations under the Health and Safety at Work etc. Act 1974 (as applied to the Island). Your personal information will be held by DEFA for the purposes of processing this report. The Inspectorate may share some of the information within this application form with any other Department, or any enforcing authority if required. As per the retention schedule for the Inspectorate, your personal data will be held on record for 10 years.
- The Department's Privacy Notice may be viewed on the website here <https://www.gov.im/about-the-government/departments/environment-food-and-agriculture/privacy-notice/> or a hard copy can be provided if you wish.
- The Department's Data Protection Officer can be contacted by email at [DPO\\_DEFA@gov.im](mailto:DPO_DEFA@gov.im) or by telephone on 686781.

**I hereby certify that the information I have supplied within this form is true and accurate.**

**Signature:**

**Name:**

**Date:**

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**Forms can be returned:**

**BY EMAIL** to: [worksafe@gov.im](mailto:worksafe@gov.im)

**or**

**BY POST** to:

The Health and Safety at Work Inspectorate  
Regulation Directorate  
Department of Environment, Food and Agriculture  
Thie Slieau Whallian  
Foxdale Road  
St Johns  
Isle of Man  
IM4 3AS