Radiation Safety Act 1999

Form 2:

Application for a Licence to Use a Radiation Source

Queensland Government

This application is to be completed by individuals seeking a licence to use a radiation source in Queensland.

Collection Notice:
The Queensland Government is collecting your information for the purposes of the *Radiation Safety Act 1999* so that you may apply for an Act Instrument (refer section 48 of the Act). Personal information collected is handled in accordance with the *Information Privacy Act 2009*. Licence details of successful applicants will be publicly available as required by Part 12 of the *Radiation Safety Act 1999*. Your personal information will not be disclosed to other third parties without consent, unless the disclosure is authorised or required by or under law. If the personal information requested in this form is not provided, your application will not be able to be processed.

For any questions regarding this collection notice, please contact Radiation Health via email RHPrivacy@health.qld.gov.au. For information about how your personal information is protected, how to access or correct your own personal information, or how to make a complaint about a breach of the privacy principles and learn how we deal with such a complaint, please refer to Queensland Health's Privacy Policy.

Client No. *(if known)*:

Application No. *(Qld Health use only)*:

To the Chief Executive:

Part A: Details of applicant

1. Name and contact details

Salutation | Surname

Given Names | Date of Birth (dd/mm/yyyy)

Phone No. | Email Address

2. Proof of identity

Certified copies of proof of identity documents, as described on page 5 of this form, must be provided. Attached?

3. Residential address

Address

Suburb | State | Post Code

Country (if not Australia)

4. Postal address *(address for correspondence - if same as residential address, type 'as above')*

Address

Suburb | State | Post Code

Country (if not Australia)

Part B: Current licence status

Do you hold a use licence in Queensland or in another Australian jurisdiction?

If yes, provide a full copy of your licence

Part C: Term of licence and associated costs

For applicants who currently hold a use licence in Queensland

application fee (non-refundable):

For applicants seeking a new use licence - select the term of licence required

☐ 1 year
application fee (non-refundable) and licence fee:

☐ 2 years
application fee (non-refundable) and licence fee:

☐ 3 years
application fee (non-refundable) and licence fee:

Part D: Details of qualifications, training and experience

1. **What is your profession or occupation?**

2. **If applicable, provide evidence of your professional registration** (e.g. extract from Ahpra) Evidence attached?

3. **What are your formal qualifications?** Copies of your qualifications must accompany your application.

4. **What training have you undertaken?** Copies of your training certificates must accompany your application.

5. **What is your specific experience in using radiation sources for your intended purpose?**
Confirmation of this experience and any other relevant information must accompany your application.

Evidence of your qualifications, training and experience attached?

Part E: What radiation sources are you seeking to use, and why?

☐ **Non-ionising radiation apparatus** (tick all that apply)

Radiation Apparatus	Intended Purpose
☐ Laser apparatus	☐ Skin rejuvenation or superficial capillary reduction
	☐ Hair reduction
	☐ Tattoo removal
	☐ Medical or surgical procedures
	☐ Dental procedures
	☐ Non-cosmetic and non-ablative light therapy treatments
	☐ Pre-operative operational checks
	☐ Maintenance, installation, repair or testing
	☐ Other

If 'other' is selected, please provide a detailed description below.

☐ Ionising radiation apparatus

Radiation Apparatus Category

A. Analytical X-ray unit
B. Analytical X-ray unit (hand-held)
C. Cabinet X-ray unit
D. Enclosed X-ray unit
E. Fixed industrial gauge
F. Industrial radiography X-ray unit
G. Pipeline X-ray crawler equipment
H. Neutron generator
I. Computed tomography X-ray unit
J. Cone beam CT dental X-ray unit
K. Dual energy absoptiometry X-ray unit
L. Extra-oral dental X-ray unit (plain)
M. Fluoroscopic X-ray unit
N. Intra-oral dental X-ray unit
O. Mammography X-ray unit
P. Plain X-ray unit
Q. Linear accelerator
R. Superficial radiation therapy X-ray unit
S. Cyclotron
T. Other

Intended Purpose Category

1. Chemical analysis
2. Physical analysis
3. Non-destructive testing
4. Borehole logging: mineral (hard rock)
5. Borehole logging: oil and gas
6. Diagnostic imaging
7. Veterinary diagnostic imaging
8. Dental diagnostic imaging
9. Mammography screening
10. PET/SPECT computed tomography
11. Angiographic interventional fluoroscopic procedures
12. General fluoroscopic procedures
13. Radiation therapy (including treatment planning)
14. Production of radioisotopes
15. Maintenance, installation, repair or testing
16. Other

Using the above categories, select a radiation apparatus category and the intended purpose category and list below.
For example, if you wish to use an intra-oral dental X-ray unit for dental diagnostic imaging, list 'N8'. If 'other' is selected, please provide a detailed description below.

☐ Unsealed radioactive substances

Attach a list of unsealed radioactive substances that you are seeking to use.

This list should include the following information for each type of unsealed substance:

- radionuclide
- physical form *(e.g. powder, liquid)*
- general chemical form *(e.g. chemical formula of chemical reagent, radiopharmaceutical, mineral)*
- intended purpose *(e.g. diagnostic nuclear medicine, radioisotopic labelling of chemicals for scientific investigations)*

List attached?

Note: To assist with this process, a template excel spreadsheet is available at: unsealed radioactive substance listing

☐ Sealed radioactive substance

Sealed Source Apparatus Category

A. Portable density/moisture gauge containing Am241/Be & Cs137
B. Portable moisture gauge containing Am241/Be
C. Portable density gauge containing Cs137
D. Fixed industrial gauge containing Cs137
E. Fixed industrial gauge containing Co60
F. Borehole logging tool containing Am241/Be
G. Borehole logging tool containing Cs137
H. Neutron generator containing H3
I. Industrial radiography device containing Ir192
J. Industrial radiography device containing Se75
K. Pipeline crawler control device containing Cs137
L. HDR brachytherapy device containing Ir192
M. LDR brachytherapy device containing Ir192
N. LDR brachytherapy device containing Cs137
O. Other sealed source apparatus
P. Sealed radioactive substance not in a sealed source apparatus

Intended Purpose Category

1. Geotechnical measurements
2. Borehole logging: mineral (hard rock)
3. Borehole logging: oil and gas
4. Non-destructive testing
5. Tracking/control of X-ray pipeline crawlers
6. Radiation therapy
7. Calibration/reference
8. Patient dose calibration
9. Maintenance, installation, repair or testing
10. Other

Using the above categories, select a sealed source apparatus category and the intended purpose category and list below.
For example, if you wish to use an industrial radiography device containing Se75 for non-destructive testing, list 'J4'.
If the sealed radioactive substance is not in a sealed source apparatus, list the radionuclide and the intended purpose. If other is selected, or your option is not available, please provide a detailed description below.

Part F: Security enhanced sources

Are you proposing to use a portable security enhanced source?

Note: A portable security enhanced source is a dangerous sealed radioactive substance typically used for purposes such as industrial radiography or borehole logging. You will be contacted for further information if you are identified as a person who is likely to use a portable security enhanced source.

Part G: Declaration

1. Have you been convicted of an indictable offence? ☐ Yes ☐ No
2. Have you been convicted of an offence against this Act or a corresponding law? ☐ Yes ☐ No
3. Have you held a licence under this Act, or a similar instrument under a corresponding law, that was suspended or cancelled? ☐ Yes ☐ No

If the answer is 'yes' to any of the above, please provide details of the offence, the nature of the offence and the circumstances of its commission. Applicants are advised that in order to ensure the requirements of the *Radiation Safety Act 1999* are met, the information contained in this application may be provided to relevant external agencies in certain circumstances.

Attach additional information, if required.

Part H: Completion of Application

I hereby apply for a licence to use a radiation source, as detailed in this application.

Signature of applicant: Date:

Proof of Identity Documents

If the licence is to be in the name of an individual, proof of identity documents must be submitted with the application. The application will not be accepted if this requirement is not met.

Please note that at least one document must contain a photograph of the applicant.

Certification of Proof of Identity Documents

The copies of the identity documents must be certified by either:

- a commissioner for declarations
- justice of the peace
- notary public
- Police officer (certifying officer to include name, rank and name of their police station)
- Teacher (certifying individual to include name and teacher registration number)
- Ahpra registered health practitioner (certifying individual to include name and professional registration number)

The application will not be accepted if copies of your identity documents are not correctly certified.

Submit a certified copy of one primary identity document and a certified copy of one secondary identity document from the lists below.

Primary identity documents

- [ ] 1. Australian birth certificate
- [ ] 2. Overseas birth certificate accompanied by a passport or Australian visa document issued by the Commonwealth department in which the Migration Act 1958 (Cwlth) is administered
- [ ] 3. A travel-related document under the Australian Passports Act 2005 (Cwlth)
- [ ] 4. Australian passport that is current or has not been expired for more than 2 years
- [ ] 5. Current foreign passport
- [ ] 6. Document evidencing Australian citizenship issued by the Commonwealth department in which the Migration Act 1958 (Cwlth) is administered
- [ ] 7. Australian driver licence that is current or has not been expired for more than 2 years

Secondary identity documents

- [ ] 1. Current identification card issued by the Commonwealth or a State as evidence of the person's entitlement to a financial benefit
- [ ] 2. Account statement issued by a financial institution within the previous year
- [ ] 3. Document evidencing discharge from military service within the previous 2 years
- [ ] 4. Student identification card containing the person's photograph and signature that is current or has not been expired for more than 2 years
- [ ] 5. Document evidencing enrolment in a school, university, training institution or professional college within the previous 2 years
- [ ] 6. Document evidencing electoral enrolment within the previous 2 years
- [ ] 7. Utilities account statement issued by a utilities provider within the previous year
- [ ] 8. Notice of land valuation, water rates or council rates issued within the previous year

How to Submit the Application

Please post your signed and completed application form, associated documentation and payment information to:

The Chief Executive
c/- Public Health Licensing
Health Protection and Regulation Branch
Queensland Department of Health
PO Box 2368
FORTITUDE VALLEY BC QLD 4006

Your application will not be accepted unless the applicable payment is provided.

For further information about the submission of applications, please type 'Queensland radiation licensing' into your favourite browser and follow the prompts.

Note:
The application fee is not refundable if this application is not successful or if you decide to withdraw your application.

Fee Exemptions

New applicants who are required to use a radiation source during their study or training at an educational institution are not required to pay application or licence fees for the licence. To claim this exemption from the requirement to pay fees, the student must provide evidence of enrolment in the course citing the full name of the course and the full name of the educational institution.

Fee to be Paid

Fees payable increase on 1 October each year. On 1 October 2026, the fees quoted in this application form were increased by 3.4% in line with Government's indexation policy.

Payment Options

(Note: This is a GST free item. Queensland Health ABN: 66 329 169 412)

Payment of your application must be made via credit card. Complete payment details below and submit with your completed application.

DO NOT EMAIL THIS PAYMENT PAGE AS SECURITY OF YOUR CREDIT CARD INFORMATION CANNOT BE ASSURED

Name of Applicant: _____

Charge fee payable: _____ to my: ☐ MasterCard ☐ Visa Card

Name on card: _____

Cardholder's signature: _____

Card number: _____ Expiry date: _____