1. **Description of equipment**, *including operating parameters (energy, amperage, etc.)*

|  |  |
| --- | --- |
| **Accelerator Description** | |
| Description: | Manufacturer |
| Equipment Name | Date of Manufacture |
| Model Number | Date of Installation |
| Serial Number | MIT Property Tag Number |

|  |  |
| --- | --- |
| **Accelerator Properties** | |
| Accelerator Type and mode of acceleration |  |
| Particle accelerated |  |
| Particle (Beam) Energy (MeV) | Maximum  Nominal |
| Continuous or Pulsed |  |
| Beam Current/pulse (mA) | Maximum  Nominal |
| Pulse Rate (Hz) |  |
| Beam Pulse width (usec) |  |
| Target Material |  |
| Radiations produced  (Type and Energies) |  |
| Target Yield |  |
| Duty Cycle (maximum) |  |
| Use Factor (maximum) |  |
| Dose Rate | Unshielded  Shielded |
| Other |  |

Include a copy of the specifications (if available)

1. **Description of intended use of equipment:**

*Describe in sufficient detail how the instrument will be utilized. Indicate power output for common experiments and how safety features apply to usage (Attach protocol sheet if needed).*

1. **Description of Engineering Controls:**

*Describe shielding, accelerator controls, interlocks, warning devices, High Radiation Area Controls, and beam containment systems.* **(Attach documentation or SAD as appropriate)**

1. **Description of administrative controls**

*Describe operating procedures, posting and labeling, operator training, configuration changes, radiation monitoring, and access control.* **(Attach documentation or SAD as appropriate)**

1. **Ancillary Hazards**

*If applicable, provide information related to Airborne Hazards and controls, briefly other hazards such as RF, and Lasers that may be present.* **(Attach documentation or SAD as appropriate)**

1. **List radiological monitoring equipment and survey meter(s) available**; *include quantity, model, type and serial number*
2. **Location of Use**

*Please include a figure showing location of intended use. Will this be restricted access? Show room safety features (use below or attach as appropriate and indicate)*

Diagram of Accelerator location and set-up.

1. **General conditions relating to the application:**
2. The proposed work shall be performed in the manner specified above, on RP-81.0, and RP-81.4. There shall be no changes in the approved procedures without the prior approval of Radiation Protection and/or the Radiation Protection Committee as appropriate. RP shall be notified prior to a change in place of use of the equipment.
3. The use of equipment shall be in conformity with the provisions of “M.I.T. Accelerator Radiation safety program”.
4. Routine operating of this equipment may not begin until RP has been notified and has conducted a thorough survey and given approval for operation. Additional surveys will be made by RP annually, at which time adherence to the provisions of this registration and supporting documents will be determined.
5. RP shall be notified of any changes in personnel with this equipment. All personnel shall be appropriately trained by RP and the supervisor before working with the equipment.

**13. Project Supervisor’s** Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Project Supervisor’s** Name (print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_