

# Form 41 – APPLICATION SURRENDER OF AN AUTHORISATION

Section 41, Radiation Protection and Control Act 2021



This form is to be completed when applying to surrender either a *Radiation Management Licence* or a *Registration of a Premise where radioactive material is handled or kept*.

**NOTE:** Forms for the following can be found on the EPA website (under *Radiation*): [Payment & forms | EPA](#)

- *Form 27B: Notification by owner of disposal/decommission of an X-ray apparatus*
- *Form 26B: Application to dispose of sealed radioactive source*

### Licence/registration details

Indicate below the type of licence or registration, and provide the licence or registration number, to be surrendered

#### Radiation management licence

- |  |                      |
|--|----------------------|
| <input type="checkbox"/> Licence to possess                                | Licence number _____ |
| <input type="checkbox"/> Licence to test for developmental purposes        | Licence number _____ |
| <input type="checkbox"/> Licence to carry out mining or mineral processing | Licence number _____ |
| <input type="checkbox"/> Radiation facilities licence                      | Licence number _____ |
| <input type="checkbox"/> Transport to radioactive material licence         | Licence number _____ |

#### Registration

- |  |                           |
|--|---------------------------|
| <input type="checkbox"/> Premise where radioactive material is handled or kept | Registration number _____ |
|--|---------------------------|

Surrender date \_\_\_\_\_

Reason for surrender

\_\_\_\_\_  
\_\_\_\_\_

### Licence/registration holder details

Company legal name \_\_\_\_\_

Correspondence address \_\_\_\_\_

Suburb \_\_\_\_\_ Post code \_\_\_\_\_

### Authorised Person details (owner/person with authority to act on behalf of owner)

Surname \_\_\_\_\_ Given name/s \_\_\_\_\_

Occupation \_\_\_\_\_ Email address (work) \_\_\_\_\_

Phone (work) \_\_\_\_\_ Mobile (work) \_\_\_\_\_

#### OFFICE USE ONLY

Amount \$ \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Receipt no \_\_\_\_\_

HUB \_\_\_\_/\_\_\_\_/\_\_\_\_

Owner no \_\_\_\_\_

Licence no \_\_\_\_\_

Reg no \_\_\_\_\_

## Declaration

- I hereby declare that the information provided on this form and in support of this application is to the best of my knowledge complete and true in every particular.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

## **PENALTY FOR PROVIDING FALSE INFORMATION: UP TO \$20,000**

NOTE: This form does not constitute a legal application unless it has been properly completed and signed, and is accompanied by the appropriate fee.

## Lodgement of form

This form can be lodged by post to: Environment Protection Authority  
Radiation Protection Branch  
GPO Box 2607, ADELAIDE SA 5001

Or email: [EPARadiationProtectionBranch@sa.gov.au](mailto:EPARadiationProtectionBranch@sa.gov.au)

## Enquiries

Radiation Licensing Officer  
Tel: (08) 8463 7826  
Email: [EPARadiationProtectionBranch@sa.gov.au](mailto:EPARadiationProtectionBranch@sa.gov.au)

*Environment Protection Authority  
ABN 85 393 411 003  
This application is GST exempt*