

TANZANIA ATOMIC ENERGY COMMISSION

(Official Government body responsible for Atomic Energy Matters)

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P.O. BOX 743
 ARUSHA
 TANZANIA

Form TAEC 8(a)

ATOMIC ENERGY ACT, No. 7 OF 2003 [PART III SECTION 17]

APPLICATION FOR AUTHORIZATION TO IMPORT/EXPORT RADIATION DEVICES

NB: to avoid delays in evaluation, respond to all questions

1. APPLICATION TYPE			
Importation (), Exportation (). Expected date of Importation/Exportation.....			
2. PARTICULARS FOR APPLICANT			
Legal name of Applicant (e.g. institute)			
Registration # or/if Individual NIDA #			
Name of legal Person/head of organization			
Title of the legal Person (e.g. Director, etc.)			
Permanent Postal Address			
Telephone No:	Mobile:	office	Individual
Fax No:		E-mail Address:	
Person to be contacted regarding this application (If different from the above):	Title	Mobile	Email Address

PART II: TECHNICAL DETAILS OF EQUIPMENT/DEVICE

3 Details of the radiation devices/equipment to be imported: (In this item fill only the applicable part between part (a) and (b). The part which is not applicable write N/A)

(a) For X-ray devices/Linear Accelerator:

		Machine ₁	Machine ₂
Device/Equipment Manufacturer			
Device/Equipment Model			
Generator	T/No.		
	S/No.		
Tube head/housing	T/No.		
	S/No.		
Tube Insert	T/No.		
	S/No.		
Maximum operating parameters (kV, MeV, mAs, mA, and time (s))			
Date of Manufacture			
Type of installation (Fixed or mobile)			
Purpose/use (Select among the following: General Radiography, Radiotherapy, Container Scanner, Analysis, fluoroscopy, Others (specify).....)			
Compliance with International standards eg ISO or IEC (Identify the standard and give the classification No.)			
Cost of the equipment			

(If Space is not enough attach a separate sheet), (Attach copy of Manufacture's certificates of the equipment)

N.B Please note that used/old radiation devices are not encouraged and may be subject to rigorous tests at a cost or demand of similare quality control tests.

4 Location where the device(s)/source(s)will be used/installed or stored.

Region:	District:
Street/area:	Building No.
Give details of the preparations made for premises at which the radioactive materials will be stored prior to installation; and used or installed:	

PART III: TRANSPORT DETAILS

3. Mean of Transportation into/out of the Country:

a) Point of entry or exit into/out of the country:
b) Arrangements made for transport from entry point to establishment/establishment to exit:
c) Arrangements made for security during transport from point of entry to establishment or establishment to exit point:
d) Explain the means of transport out/into the country (i.e air, road, rail sea etc):

4. Give details of trained qualified experts who will use the device or radioactive materials.

Full Name	Qualification (e.g. BSc in....)	Trained on Radiation Safety/Protection? (Yes/No)

5. Give relevant details of any contract(s) with supplier particularly with regards to:-

a) Installation and Training of operators:
b) Service and maintenance of the device (Give the organization name and address) including warranty.
c) Return or change of source after useful life

Attach contract from the supplier

6. DECLARATION

LEGAL PERSON/HEAD OF THE CENTER OR REPRESENTATIVE:

I declare that I have read and understood the Atomic Energy (Protection from Ionizing Radiation) Regulations, 2004 and that the information provided is true and correct.

Name:

Signature:

Title:

Date:

OFFICIAL STAMP OR SEAL:

For Official Use Only

- (i) Date at which application form was received:.....
- (ii) Date at which the Application was evaluated:
- (iii) Licence/Registration No:.....
- (iv) General Remarks and/or Comments
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