

## ANNEX I

## SHIPMENT OF SEALED SOURCES BETWEEN THE MEMBER STATES OF THE EUROPEAN COMMUNITY

Standard document to be used pursuant to Council Regulation (EEC) no1493/93

**Notice:**

- The consignee of sealed sources must complete boxes 1 to 5 and send this form to the relevant competent authority in his country.
- The competent authority of the consignee Member State must fill in box 6 and return this form to the consignee.
- The consignee must then send this form to the holder in the forwarding country prior to the shipment of the sealed sources.
- All sections of this form must be completed and boxes ticked, where appropriate.

**1. THIS DECLARATION CONCERNS**

ONE SHIPMENT

 (This form is valid until the shipment is completed unless otherwise stated in box 6)

 expected date of shipment (if available):
 

<i>Day</i>	<i>Month</i>	<i>Year</i>					
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SEVERAL SHIPMENTS

 (This form is valid for three years unless otherwise stated in box 6)
**2. DESTINATION OF THE SOURCE(S)**

Name of consignee:

Person to contact:

Address:

Tel: 00      00

E-mail:

**3. HOLDER OF THE SOURCE(S) IN THE FORWARDING COUNTRY**

Name of holder:

Person to contact:

Address:

Tel: 00      00

E-mail:

**4. DESCRIPTION OF THE SOURCE(S) INVOLVED IN THE SHIPMENT(S)**

a) Radionuclide(s):

b) Maximum activity of individual source:

c) Number of sources:


d) If this (these) sealed source(s) is (are) mounted in (a) machinery/device/equipment, short description of the machinery/device/equipment:

e) Indicate (if available and requested by the competent authorities):

- National or international technical standard with which the sealed source(s) complies(y) and certificate number:

- Date of expiry of certification:
 

<i>Day</i>	<i>Month</i>	<i>Year</i>					
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- Name of the manufacturer and catalogue reference:

**5. DECLARATION OF THE AUTHORIZED OR RESPONSIBLE PERSON**

- I, the consignee, hereby certify that the information provided in this form is correct.
- I, the consignee, hereby certify that I am licensed, authorized or otherwise permitted to receive the source(s) described in this form.
- Licence, authorization or other permission number (if applicable) and validity date thereof:

Valid until: 

<small>Day</small>	<small>Month</small>	<small>Year</small>							
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- I, the consignee, hereby certify that I comply with all the relevant national requirements, such as those relating to the safe storage, use or disposal of the source(s) described in this form.

Name:

Signature:

Date: 

<small>Day</small>	<small>Month</small>	<small>Year</small>							
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**6. CONFIRMATION BY THE COMPETENT AUTHORITY OF THE CONSIGNEE COUNTRY THAT IT HAS TAKEN NOTE OF THIS DECLARATION**

Stamp:

**Name of the authority:****Address :**

Tel :

Date:

This declaration is valid until (if applicable):

*Please see box 1, page 1, for guidance on the length of time this form is valid.*