

Form RPD-34 (Rev 7/03)

NORM DISPOSAL IN A WELL TO BE P&A

Department of Environmental Quality
Emergency & Radiological Services Division
Licensing & Registrations Section
Post Office Box 4312

Baton Rouge, Louisiana 70821-4312 Phone: (225) 219-3041 Fax: (225) 219-3154 FOR OFFICE USE ONLY

GENERAL LICENSE #

GENERAL LICENSEE AI#

SPECIFIC LICENSE #

SPECIFIC LICENSEE AI#

OPERATOR INFORMATION					
NORM General License Number:				Agency Interest (AI) Number:	
Name of Operator/General Licensee:				ı	
Physical Address: No. & Street City & State		Zip Code Parish			
Mailing Address: No. & Street	eet City & State		Zip Code		
Primary Contact:		Job Title:		Telephone Number:	
DISPOSAL MATERIAL/WASTE INFORMATION					
Contaminated Tubing (feet/diameter):			Average Exposure Rate (microR/hr):		
NORM Solids (total grams):			Total Radium Activity of Solids (pCi): (volume (grams) x average activity (pCi/grams) = pCi)		
Generating Field(s) and/or Location(s)	:				
P&A WELL INFORMATION					
Well Name:			Well Serial Number:		
Field Name:		Field ID Number:		Parish:	
Describe Site Specific Activities:					
Directions to Job Site:					
Local Ordinances/Permits Required?	If Yes, Have They Been Obtained?		List:		
Landowner Notified?	Projected Date Work Begins:		Contractor and/or Operator NORM Site Supervisor:		
NORM Specific Licensed Contractor (as required by t		e Department):	tment): License Number:		Agency Interest (AI) Number:
		CERTIF	ICATION		
Signature (Responsible Party/Company Representative)			Name (Print)		
Job Title Phone		one Number	Date		