Radiation Board Initial Assessment Form for approving Irradiating Apparatus to be possessed / sold / used in Hong Kong

Radiation Board Reference:

To Radiation Board (Fax : 2834 1224 / Email: enquiry@erls.gov.hk)

Name of Licence Applicant:		ABC Company	
Authorized Person:	ON, Ting Wing		
(If different from Licence Ap	pplicant)		
Contact Person:	<u>CHAN, Tai Man</u>		
(If different from Authorized	Person)		
Contact Telephone: <u>Infor</u>	mation		<u>Information</u> Contact Telephone)
Fax: <u>Information</u>		Email Address:	Information
Mailing Address: <u>Info</u>	ormation		
Model(s) of Irradiating Appa (Please complete one questic licence) <u>1) <i>RadDiag</i></u>	onnaire for each of	the model(s) to be c	
<u>2) CT-ABC 900</u>			

Name : <u>ON, Ting Wing</u>

Signature:

Company Chop:

Date: <u>1 / 7 / 2012</u>





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	ase complete a separate questionnaire for each model to be assessed) e of apparatus: <u>XXX Medical Systems</u>
Mod	lel of apparatus: <u>RF 1011</u>
1.	Is the apparatus designed to produce ionizing radiation (If no, go to item 7)
2.	What is the maximum voltage of the irradiating apparatus? 80 1 kV MV (Please supply documentary proof and specify where the data can be found)
3.	Is the apparatus intended to be used on human / animal? Yes No (If yes, go to item 6)
4.	What is the maximum doserate (with unit) at a distance of 5 cm from any accessible point of the surface of the apparatus?
5.	Is there any safety device associated with the safe operation of the apparatus?
	(Go to item 7)
6.	What are the total filtration and tube head leakage of the irradiating apparatus? Filtration: 2.5 mm ✓ Al (eq.) Be Tube Head Leakage: 0.2 (mGy in one hour) (Please supply documentary proof and specify where the data can be found) Section 3.5 of Test Report No. 888888
7.	Does the apparatus contain radioactive substance(s)? Yes No (If yes, please supply documentary proof and specify where the data can be found)

8. This concludes our questionnaire for initial assessment of your application. Thank you.



