

**Permit No.:** 

## FSU Dept. of Environmental Health & Safety • Radiation Safety Office

1021 Atomic Way • 1200 Carothers Hall • Tallahassee, FL 32306-4481 (850) 644-8802 • www.safety.fsu.edu



## FORM EHS 10-17 RADIATION LAB SURVEY REPORT

**Survey Date:** 

Lead PI:	Surveyor Name:
Radioisotopes, Forms & Quantities:	
Area Survey Instrument	© Contamination Survey Instrument
Manufacturer:	Meter Mfr.:
Model:	Meter Model:
Serial No.:	Meter Serial No.:
Calibration Date:	Probe Mfr.:
Background:	Probe Model:
Check source:	Probe SN:
<u>Notes</u>	Calibration Date:
	Background:
Area Surveys (unit: mrem/hr): Measure ambient beta/gamma radiation dose rates at 1 foot from all work and storage areas, noting locations and readings on the sketch below. Note any known sources of external radiation on the sketch.  Contamination Surveys (unit: cpm): Wipe test working surfaces and floors for removable	
	n fashion. Each smear should cover an area of about ackground corrected) counts per minute on the sketch nded to this report.