|  |  |
| --- | --- |
| **DATE:** | **INSTRUMENTATION USED** |

|  |  |  |  |
| --- | --- | --- | --- |
| TIME: | MODEL | SERIAL # | CAL. DUE DATE |
| SURVEYOR: |  |  |  |
| LOCATION: |  |  |  |
| REVIEWED BY: |  |  |  |

|  |
| --- |
| PURPOSE OF SURVEY: |

|  |
| --- |
| Survey map |

|  |
| --- |
| **Action Levels** |

|  |  |
| --- | --- |
| Radiation | Loose Contamination |
| Worker > 2.0 mR/hr | Alpha > 20 dpm/100cm2 |
| Community > 20 µR/hr above background | Beta/Gamma > 200 dpm/100cm2 |