

## RADIOLOGICAL SURVEY REPORT

<b>DATE:</b>	<b>INSTRUMENTATION USED</b>		
<b>TIME:</b>	MODEL	SERIAL #	CAL. DUE DATE
<b>SURVEYOR:</b>			
<b>LOCATION:</b>			
<b>REVIEWED BY:</b>			
<b>PURPOSE OF SURVEY:</b>			
Survey map			
<b>Action Levels</b>			
Radiation	Loose Contamination		
Worker > 2.0 mR/hr	Alpha > 20 dpm/100cm <sup>2</sup>		
Community > 20 µR/hr above background	Beta/Gamma > 200 dpm/100cm <sup>2</sup>		