

Application form to obtain a **licence for sporadic handling operations**

of Class 7 dangerous goods

Additional information to complete the form

* Please complete the form correctly and in full. The footnotes are important.
* The “RD on Transport” refers to the Royal Decree of 22/10/2017 on the transport of Class 7 dangerous goods, amended on 03/07/2019.
* Each attachment is referenced and dated.
* If this document or the attachments contain data that is classified according to the Royal Decree of 17 October 2011 on **the classification and protection of nuclear documents**, the rules for using this type of documents shall be observed.
* If any attachments are not written in Dutch, French, German or English, a translation of these documents into one of these languages shall be included.
* Meaning of the footnotes in the form:

a: Mandatory fields

b: As used in the Crossroads Bank for Enterprises (BCE/KBO) for Belgian companies. For European companies, please supply the registration Number in the national register as defined in European Directive 2017/1132/EU.

c: Should only be completed by:

* Belgian companies if the information differs from the information shown in the BCE/KBO;
* foreign companies.
* The application reference, revision number and date shall be included in the footer.

**SECTION I: GENERAL INFORMATION**

|  |  |
| --- | --- |
| Application reference: | Enter the application reference |
| Application revision: | Enter the application revision No. |
| Application date: | Select the application date |

1. **IDENTIFICATION OF THE COMPANY AND REPRESENTATIVES**
   1. **Head office**

|  |  |  |
| --- | --- | --- |
| Namea: | |  |
| Company numberab-: | |  |
| Addressac: | |  |
|  | |  |
| Phone (general)a: | |  |
| E-mail (general)a: | |  |
| Website: | |  |
|  | | |
| Legal representative: | Namea: |  |
|  | Functiona: |  |
|  | Phonea: |  |
|  | Mobile: |  |
|  | E-maila: |  |
|  | | |
| Contact person: | Name: |  |
| (for questions | Function: |  |
| relating to the content of this application) | Phone: |  |
|  | Mobile: |  |
|  | E-mail: |  |

A **copy** of the following documents is attached:

**Attachment 1:** Founding Statutes of the company

**Attachment 2:** Legal representative’s mandate.

**Attachment 3:** Company organisation chart.

* 1. **Operational office (if different from the head office)**

|  |  |
| --- | --- |
| Namea: |  |
| Addressac: |  |
|  |  |
| Phone (general)a: |  |
| Website: |  |

|  |  |  |
| --- | --- | --- |
| Contac tperson: | Name: |  |
| (if different) | Function: |  |
|  | Phone: |  |
|  | Mobile: |  |
|  | E-mail: |  |

* 1. **Invoicing information**

|  |  |
| --- | --- |
| Namea: |  |
| Addressa: |  |
|  |  |
| VAT Number: |  |
| Reference to be quoted on the invoice (if necessary): |  |

* 1. **Health Physics Department (HPD)**

|  |  |
| --- | --- |
| Name of the Head of the Health Physics Departmenta: |  |
| Name of the radiation protection officer (RPO) (if someone other than the above): |  |
| Name of the recognised health physics expert or name of the recognised health physics organisationa: |  |
| Addressac: |  |
|  |  |
| Phonea: |  |
| Mobile: |  |
| E-maila: |  |

All recognised health physics organisations for the transport of Class 7 dangerous goods are listed on the [www.fanc.fgov.be](http://www.fanc.fgov.be) website.

A **copy** of the following document is attached:

**Attachment 4:** Organisation chart showing the position of the Head of the Health Physics Department (HPD) in the organisation structure.

|  |  |
| --- | --- |
| * 1. **Class 7 safety advisor**(only to be completed for the parties involved (carriers, loading and unloading sites) for the following modes of transport: **road,** **rail** and **inland waterways**) | |
| Namea: |  |
| Addressa: |  |
|  |  |
| Name of external organisation (if applicable): |  |
| Phonea: |  |
| Mobile: |  |
| E-maila: |  |

A **copy** of the following document is attached:

**Attachment 5:** Designation of the Class 7 safety advisor.

**Attachment 5A:** Training certificate for the Class 7 safety advisor, if issued by another EU Member State or another state that has ratified the ADR, RID or ADN regulation.

1. **DESCRIPTION OF HANDLING OPERATION(S)**
   1. **Frequency and duration of the handling operation(s)**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Single handling operation | foreseen date: |  |
|  | Multiple handling operations | Duration (MM/YYYY – MM/YYYY): | - |
|  |  | Foreseen date of first handling operation: |  |
|  |  | Number of foreseen handling operations: |  |

* 1. **Type of handling operation**

Airport handler

Port handler

* 1. **Recognised or authorised carrier(s) on whose behalf the handling operation(s) is/will be carried out**

|  |  |
| --- | --- |
| Namea: |  |
| Recognition or licence numbera: |  |
| Namea: |  |
| Recognition or licence number: |  |

* 1. **Type of Class 7 dangerous goods to be handled**
  2. **UN group(s)**

Please state for which UN group(s) or number(s) your organisation is applying for authorisation.

1. *UN-Group 1: excepted packagesa*

|  |  |
| --- | --- |
| Not applicable |  |
| All UN numbers for this group |  |
|  |  |
| UN numbers selected: |  |
| UN 2908 | RADIOACTIVE MATERIAL, EXCEPTED PACKAGE, EMPTY PACKAGING |
| UN 2909 | RADIOACTIVE MATERIAL, EXCEPTED PACKAGE, ARTICLES MANUFACTURED FROM NATURAL URANIUM or DEPLETED URANIUM or NATURAL THORIUM |
| UN 2910 | RADIOACTIVE MATERIAL, EXCEPTED PACKAGE, LIMITED QUANTITIES |
| UN 2911 | RADIOACTIVE MATERIAL, EXCEPTED PACKAGE INSTRUMENTS or ARTICLES |
| UN 3507 | URANIUM HEXAFLUORIDE, RADIOACTIVE MATERIAL, EXCEPTED PACKAGE, less than 0.1 kg per package, non-fissile or fissile excepted |

1. *UN-Group 2: non-fissile and fissile excepted material* a

|  |  |
| --- | --- |
| Not applicable |  |
| All UN numbers for this group |  |
|  |  |
| UN numbers selected: |  |
| UN 2912 | RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY  (LSA-1), non-fissile or fissile excepted |
| UN 2913 | RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I, SCO-II or SCO-III), non-fissile or fissile excepted |
| UN 2915 | RADIOACTIVE MATERIAL, TYPE A PACKAGE, non- special form, non-fissile or fissile excepted |
| UN 2916 | RADIOACTIVE MATERIAL, TYPE B(U) PACKAGE, non-fissile or fissile excepted |
| UN 2917 | RADIOACTIVE MATERIAL, TYPE B(M) PACKAGE, non-fissile or fissile excepted |
| UN 2919 | RADIOACTIVE MATERIAL, TRANSPORTED UNDER SPECIAL ARRANGEMENT, non-fissile or fissile excepted |
| UN 3321 | RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY  (LSA-II), non-fissile or fissile excepted |
| UN 3322 | RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY  (LSA-III), non-fissile or fissile excepted |
| UN 3323 | RADIOACTIVE MATERIAL, TYPE C PACKAGE, non-fissile or fissile excepted |
| UN 3332 | RADIOACTIVE MATERIAL, TYPE A PACKAGE, SPECIAL FORM, non-fissile or fissile excepted |

1. *UN-Group 3: fissile material* a

|  |  |
| --- | --- |
| Not applicable |  |
| All UN numbers for this group |  |
|  |  |
| UN numbers selected: |  |
| UN 3324 | RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY  (LSA-II), FISSILE |
| UN 3325 | RADIOACTIVE MATERIAL, LOW SPECIFIC ACTIVITY  (LSA-III), FISSILE |
| UN 3326 | RADIOACTIVE MATERIAL, SURFACE CONTAMINATED OBJECTS (SCO-I or SCO-II), FISSILE |
| UN 3327 | RADIOACTIVE MATERIAL, TYPE A PACKAGE, FISSILE, non-special form |
| UN 3328 | RADIOACTIVE MATERIAL, TYPE B(U) PACKAGE, FISSILE |
| UN 3329 | RADIOACTIVE MATERIAL, TYPE B(M) PACKAGE, FISSILE |
| UN 3330 | RADIOACTIVE MATERIAL, TYPE C PACKAGE, FISSILE |
| UN 3331 | RADIOACTIVE MATERIAL TRANSPORTED UNDER SPECIAL ARRANGEMENT, FISSILE |
| UN 3333 | RADIOACTIVE MATERIAL, TYPE A PACKAGE, SPECIAL FORM, FISSILE |

1. *UN-Group 4: UF6* a

|  |  |
| --- | --- |
| Not applicable |  |
| All UN numbers for this group |  |
|  |  |
| UN numbers selected: |  |
| UN 2977 | RADIOACTIVE MATERIAL, URANIUM HEXAFLUORIDE, FISSILE |
| UN 2978 | RADIOACTIVE MATERIAL, URANIUM HEXAFLUORIDE, non-fissile or fissile-excepted |

* 1. **Description of the load**

|  |  |
| --- | --- |
| Maximum number of packages to be handled: |  |
| Maximum TI per container or vehicle: |  |
| Maximum CSI per container or vehicle: |  |
| Maximum number of 20’ or 40’ containers to be handled: |  |
| Maximum number of packages in a 20’ or 40’ container: |  |

* 1. **Description of packages**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **UN Number** | **Isotope** | **Physical form** | **Chemical form** | **Form** | **Max TI/package**  **Max CSI/package** | **Max activity/ per package** | **Package type** | **Package approval certificate**  **Certificate for special form** | **Number of packages/ vehicle** |
|  |  | Solid  Liquid  Gas |  | Other form  Special form |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **UN Number** | **Isotope** | **Physical form** | **Chemical form** | **Form** | **Max TI/package**  **Max CSI/package** | **Max activity/ per package** | **Package type** | **Package approval certificate**  **Certificate for special form** | **Number of packages/ vehicle** |
|  |  | Solid  Liquid  Gas |  | Other form  Special form |  |  |  |  |  |

A **copy** of the following document is attached:

**Attachment 6:** Approval certificate for a radioactive substance in special form or for a package design, if applicable, and if the Agency did not issue the certificate.

1. **DESCRIPTION OF DOCUMENTS**
2. **Management system**

The applicant hereby declares that they have a management system as required in the applicable international regulations.

The applicant hereby declares that they have a management system in accordance with the modal regulations for transport of dangerous goods.

Reference:       - date:

The management system is certified under:

1. **Radiation protection programme**

The applicant hereby declares that:

a preliminary dose assessment is (or will be) carried out to guarantee safety and radiation protection. This dose assessment is (or will be) approved by the recognised health physics expert.

the recognised health physics expert will, be present during the handling operation to take appropriate measures to ensure that safety and radiation protection are guaranteed, and that the recognised health physics expert will submit his/her report to the Agency within 10 days after the handling operation.

A **copy** of the following document is attached:

**Attachment 7:** Preliminary dose assessment approved by the recognised health physics expert.

1. **Security**

The applicant hereby declares that they comply with the security conditions relating to handling Class 7 dangerous goods as required in the regulations for the transport of Class 7 dangerous goods.

The applicant hereby declares that **no** handling operations involving Class 7 high consequence dangerous goods will take place.

The applicant hereby declares that Class 7 high consequence dangerous goods may be handled and that they have a security plan for these handling operations.

The applicant hereby declares that they comply with the requirements the security of nuclear material.

A **copy** of the following document is attached:

**Attachment 8:** Security plan for the handling of Class 7 high consequence dangerous goods (if applicable and if not already submitted to the Agency).

1. **Emergency plan**

The applicant hereby declares that they are in possession of an emergency plan relating to the handling of Class 7 dangerous goods.

The applicant hereby declares that they are acquainted with the Agency’s recommendations regarding incidents and accidents during the handling and transport of Class 7 dangerous goods.

The applicant hereby declares that they have taken these recommendations into account when drawing up the emergency plan.

A **copy** of the following document is attached:

**Attachment 9:** Emergency plan for the handling of Class 7 dangerous goods.

1. **Subcontracting**

The applicant hereby declares that they intend to use subcontractors and provides as Attachment 10 a duly completed and signed form for each subcontractor.

Number of subcontractors:

Not applicable.

A **copy** of the following documents shall be attached **for each subcontractor**:

**Attachment 10A:** Founding Statutes of the company.

**Attachment 10B:** Mandate for each subcontractor’s legal representative.

1. **Insurance**

The applicant hereby declares that they have civil liability insurance to cover the handling of Class 7 dangerous goods (do not attach a copy).

**SECTION II: SPECIFIC INFORMATION**

[SECTION II – 1: Airport handler](#Weg)

[SECTION II – 2: Port handler](#haven)

1. **AIRPORT HANDLER**
2. **Activities**

The application relates to the following activities:

Warehousing.

Physical transport between the aircraft and the terminal warehouse.

Aircraft loading and unloading.

1. **Airport**

The application relates to the following airport:

Brussels Airport

Liège Airport

Other; please specify:

1. **Storage in transit**

The applicant hereby declares that storage in transit is foreseen for Class 7 dangerous goods.

The applicant hereby confirms that the Class 7 dangerous goods will remain in storage in transit for a maximum duration of 24 hours.

Not applicable.

A **copy** of the following document is attached:

**Attachment 11:** Plan showing the location of storage in transit in the terminal warehouse.

1. **PORT HANDLER**
2. **Type of activities**

The application relates to the following activities:

Ship loading.

Ship unloading.

Keeping on board.

Roll-on/roll-off.

Other; please specify:

1. **Port**

|  |  |
| --- | --- |
| The activities will be carried out in the following port: | Antwerp  Zeebrugge  Ghent  Other, please specify: |
| The activities will be carried out at the following terminal/quay: | Terminal:  Quay:  -> ISPS certified?  Yes/ No |
|  |  |

1. **Storage in transit**

The applicant hereby declares that storage in transit is foreseen for Class 7 dangerous goods.

The applicant hereby confirms that the Class 7 dangerous goods will remain in transit for a maximum duration of 8 hours.

The applicant hereby confirms that an “prolonged stay on quay” will be requested if storage in transit is likely to exceed 8 hours.

The applicant confirms that storage in transit will not exceed 48 hours.

Not applicable.

A **copy** of the following document is attached:

**Attachment 12:** Description of the location where Class 7 dangerous goods will be placed for storage in transit at the port terminal including a plan showing this location.

**SECTION III: ATTACHMENTS**

**THE FOLLOWING DOCUMENTS SHALL FORM PART OF THE RECOGNITION APPLICATION:**

**Please tick the attachments enclosed:**

**General:**

**Attachment 1:** Founding Statutes of the company.

**Attachment 2:** Legal representative’s mandate.

**Attachment 3:** Company organisation chart.

**Attachment 4:** Organisation chart showing the position of the Head of the Health Physics Department (HPD) in the organisation structure.

**Attachment 5:** Designation of the Class 7 safety advisor.

**Attachment 5A:** Training certificate for the Class 7 safety advisor, if issued by another EU Member State or another state that has ratified the ADR, RID or ADN regulation.

**Attachment 6:** Approval certificate for a radioactive substance in special form or for a package design, if applicable, and if the Agency did not issue the certificate.

**Attachment 7:** Preliminary dose assessment approved by the recognised health physics expert.

**Attachment 8:** Security plan for the handling Class 7 high consequence dangerous goods (if applicable and if not already submitted to the Agency).

**Attachment 9:** Emergency plan for the handling of Class 7 dangerous goods.

**Attachment 10A:** Founding Statutes of the company of each Subcontractor.

**Attachment 10B:** Mandate for the subcontractor’s legal representative.

**Attachment 10C:** Radiation protection programme approved by the subcontractor’s recognised health physics expert.

**Attachment 10D:** Designation of the subcontractor’s Class 7 safety advisor.

**Attachment 10E:** Training certificate for the subcontractor’s Class 7 safety advisor, if issued by another EU Member State or another state that has ratified the ADR, RID or ADN Regulations.

**Attachment 11:** Plan showing the location of storage in transit in the airport warehouse.

**Attachment 12:** Description of the location where Class 7 dangerous goods will be placed in storage in transit at the port terminal including a plan showing this location.

**Additional documents:**

**Attachment 13:**

**Attachment 14:**

**Attachment 15:**

**Attachment 16:**

**Attachment 17:**

If necessary, the Agency may request documents that do not form part of the recognition application.

**SECTION IV: SIGNATURES**

1. **LEGAL REPRESENTATIVE**

|  |  |
| --- | --- |
| The legal representative hereby declares that he/she has :   * completed the application form truthfully, to the best of his/her knowledge, and that he/she is aware that filling in the form incorrectly or incompletely may result in this application being declared incomplete and/or cancelled; * organised a health physics department. | Name, date and signature, preceded by the handwritten statement “Read and approved”  …………………………………………………………….……….  **Date:**  **Name:**  **Signature:** |

1. **HEAD OF THE HEALTH PHYSICS DEPARTMENT**

|  |  |
| --- | --- |
| The Health Physics Department Manager hereby declares that he/she:   * has checked the application form to ensure that it is accurate and complete; * manages the health physics department as specified in Art. 23.2.2 of the General Regulation. | Name, date and signature, preceded by the handwritten statement “Read and approved”  ……………………………………………………….…………….  **Date:**  **Name:**  **Signature:** |

1. **RECOGNISED HEALTH PHYSICS EXPERT**

|  |  |
| --- | --- |
| The recognised health physics expert hereby declares that he/she:   * has checked the application form to ensure that it is accurate and complete; * ensures the health physics controls specified in Art. 23.2.6.b) of the General Regulation for the applicant. | Name, date and signature, preceded by the handwritten statement “Read and approved”  ………………………………………………………….………….  **Date:**  **Name:**  **Signature:** |

**ATTACHMENT 10: SUBCONTRACTING** (if applicable)

If these handling operations are subcontracted, please add a copy of this attachment to your application **for each subcontractor**.

**Subcontractor information:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
| Namea: |  | | | | |
| Company numberab: |  | | | | |
| Addressac: |  | | | | |
| Phone (general)a: |  | | | | |
| E-mail (general)a: |  | | | | |
| Website: |  | | | | |
|  | | | | | |
| Legal representative: | Namea: |  | | | |
|  | Functiona: |  | | | |
|  | Phonea: |  | | | |
|  | Mobile: |  | | | |
|  | E-maila: |  | | | |
|  | | | | | |
| Contact person (if different): | Name: |  | | | |
|  | Function: |  | | | |
|  | Phone: |  | | | |
|  | Mobile: |  | | | |
|  | E-mail: |  | | | |

A **copy** of the following document is attached:

**Attachment 10A:** Founding Statutes of the company for the subcontractor.

**Attachment 10B:** Mandate for the subcontractor’s legal representative.

**Attachment 10C:** Radiation protection programme approved by the subcontractor’s recognised health physics expert.

**Attachment 10D:** Designation of the subcontractor’s Class 7 safety advisor.

**Attachment 10E:** Training certificate for the subcontractor’s Class 7 safety advisor, if issued by another EU Member State or another state that has ratified the ADR, RID or ADN Regulations.

**Type of operations that the subcontractor may perform:**

Airport

Warehousing.

Physical transport between the aircraft and the terminal warehouse.

Aircraft loading and unloading.

Other, please specify:

Port

Terminal operator.

Other, please specify:

**ATTACHMENT 10: SUBCONTRACTING (cont.)**

**The applicant and the subcontractora**

hereby confirm that a contract has been signed between both parties in relation to subcontracting the above mentioned handling operations;

hereby confirm that they will notify the Agency if their subcontracting contract is cancelled.

**The applicanta**

hereby declares that they will ensure that the subcontractor observes the legal requirements;

hereby confirms that they have notified the recognised health physics expert that this subcontractor is carrying out handling operations.

**The subcontractor**

*Management system – radiation protection programme (please tick one of the options below):*

hereby confirms that they are acquainted with the applicant’s radiation protection programme and management system for the sporadic handling operations involving Class 7 dangerous goods and will apply them accordingly;

hereby confirms that they will use their own radiation protection programme and management system to carry out Class 7 dangerous goods handling operations and provides as an attachment the radiation protection programme approved by their own recognised health physics expert (if not already submitted to the Agency beforehand).

*Emergency procedure – warning system:*

hereby confirms that they are acquainted with the applicant’s emergency procedure and warning system for the sporadic handling operations involving Class 7 dangerous goods and will apply them accordingly.

*Generala*

hereby confirms that they have a Class 7 safety advisor and will attaches the designation of this safety advisor and his/her training certificate (if not yet submitted to the Agency);

hereby confirms that they will not subcontract the handling operations subcontracted to them by the applicant;

hereby confirms that the personnel in question will be made acquainted with of the contents of the radiation protection programme, management system and emergency procedure insofar as they relate to their responsibilities.

**SIGNATURE OF THE APPLICANT’S LEGAL REPRESENTATIVE**

|  |  |
| --- | --- |
| The legal representative hereby declares that he/she has completed this attachment truthfully, to the best of his/her knowledge, and that he/she is aware that filling in the form incorrectly or incompletely may result in the application for this licence being declared incomplete and/or cancelled. | Name, date and signature, preceded by the handwritten statement “Read and approved”  ………………………………………………….………………….  **Date:**  **Name:**  **Signature:** |

**SIGNATURE OF THE SUBCONTRACTOR’S LEGAL REPRESENTATIVE**

|  |  |
| --- | --- |
| The legal representative hereby declares that he/she has completed this attachment truthfully, to the best of his/her knowledge, and that he/she is aware that filling in the form incorrectly or incompletely may result in the application for this licence being declared incomplete and/or cancelled. | Name, date and signature, preceded by the handwritten statement “Read and approved”  ……………………………………………………….…………….  **Date:**  **Name:**  **Signature:** |

**SIGNATURE OF THE RECOGNISED HEALTH PHYSICS EXPERT**

|  |  |
| --- | --- |
| The recognised health physics expert hereby declares that he/she:   * has checked the application form to ensure that it is accurate and complete; * ensures the health physics tasks specified in Art. 23.2.6.b) of the General Regulation for the handling operations carried out by this subcontractor. | Name, date and signature, preceded by the handwritten statement “Read and approved”  ……………………………………………………….…………….  **Date:**  **Name:**  **Signature:** |