

Application form for an

**unique transport authorisation**

of Class 7 dangerous goods.

GENERAL INSTRUCTIONS:

* Fill in the form completely and correctly. The footnotes are important.
* The ‘RD Transport’ means the Royal Decree of 22/10/2017 on the transport of Class 7 dangerous goods.
* Each attachment has to be provided with a reference and date.
* This form needs to be sent to FANC, filled in and signed by the applicant, **and co-signed by the health physics organisation** (see attachment A).
* The application form and attachments need to be sent in a pdf-format, each attachment needs to be a separate pdf-file with the correct reference (starting with Attachment 1, Attachment 4A,…).
* If this document or the attachment(s) contain(s) information or data that is classified according the Royal Decree of 17/10/2011 **regarding the categorisation and the protection of nuclear-related documents**, the rules for the transfer of this kind of documents must be applied.
* Documents are to be sent by e-mail to **transport@fanc.fgov.be**.
* Meaning of the foot notes in the form :

a: Mandatory fields

b: As mentioned in the Banque-Carrefour des Entreprises (BCE)

c: Only to be filled in by Belgian companies if the BCE number is different or by foreign companies

d: When appealing to an external service

**SECTION I: GENERAL INFORMATION**

1. **IDENTIFICATION OF THE APPLICANT**
   1. **Head office**

|  |  |  |
| --- | --- | --- |
| Namea: | |  |
| Company numberab: | |  |
| Addressac: | |  |
|  | |  |
| General phonea: | |  |
| General e-maila: | |  |
| Website: | |  |
|  | | |
| Legally represented by: | Namea: |  |
|  | Functiona: |  |
|  | Phonea: |  |
|  | Mobile: |  |
|  | E-maila: |  |
|  | | |
| Contact: | Name: |  |
| (for content-related questions) | Function: |  |
|  | Phone |  |
|  | Mobile: |  |
|  | E-mail: |  |

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

**Attachment 1:** Statutes of the company

**Attachment 2:** Mandate of the legal representative

**Attachment 3:** Organization chart of the company

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

|  |  |  |
| --- | --- | --- |
| Namea: | |  |
| Addressac: | |  |
|  | |  |
| General phonea: | |  |
| Website: | |  |
|  | | |
| Legally represented by: | Namea: |  |
|  | Functiona: |  |
|  | Phonea: |  |
|  | Mobile: |  |
|  | E-maila: |  |
|  | | |
| Contact: | Name: |  |
| (if different) | Function: |  |
|  | Phone |  |
|  | Mobile: |  |
|  | E-mail: |  |

* 1. **Invoicing details**

|  |  |
| --- | --- |
| Naama: |  |
| Adresa: |  |
|  |  |
| BTW-nummer: |  |
| Referentiea: |  |
| **Language of the recognition** | |
| Authorisation to be delivered in | Dutch |
| French |

|  |  |
| --- | --- |
| * 1. **Person in charge of the supervision of the transport** | |
| Namea: |  |
| Phonea: |  |
| Mobile: |  |
| E-maila: |  |
|  |  |
| Name back-up: |  |
| Phone back-up: |  |
| Mobile back-up: |  |
| E-mail back-up: |  |

|  |  |
| --- | --- |
| * 1. **Health physics organization** | |
| Name recognized experta: |  |
| Name companyad: |  |
| Addressac: |  |
|  |  |
| Phonea: |  |
| Mobile: |  |
| E-maila: |  |

The health physics organizations for the transport of Class 7 dangerous goods can be found in attachment A, this list is kept up-to-date on the website www.fanc.fgov.be.

|  |  |
| --- | --- |
| * 1. **Class 7 safety advisor**(only to be filled in for **road,** **rail and inland waterways)** | |
| Namea: |  |
| Addressa: |  |
|  |  |
| Name companyd: |  |
| Phonea: |  |
| Mobile: |  |
| E-maila: |  |

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

**Attachment 4:** designation of the Class 7 safety advisor

1. **UNIQUE TRANSPORT INFORMATION**
   1. **General information**

|  |  |
| --- | --- |
| Date of transport foreseen: |  |
| Reference: |  |
| Consignor: Name:  Address: |  |
|  |
|  |
| Consignee: Name: |  |
| Address: |  |
|  |  |

If multiple consignors/consignees are involved, please add a list of all consignors/consignees in attachment.

* 1. **Mode of transport**

|  |
| --- |
| Road  Air  Rail  Sea  Roll-on/Roll-off  Inland water ways |

* 1. **Multimodal transport**

|  |  |
| --- | --- |
| Recognition number(s) or authorisation number(s) of the organizations(s) involved in the multimodal transport, especially with the change of transport mode on Belgian soil |  |

The applicant states to supervise that the imported Class 7 dangerous goods on Belgian soil can be further transported.

1. **Interruption of transport**

|  |  |
| --- | --- |
| The applicant states that transports can be interrupted according to the stipulations of chapter 5 of the RD transport. | |
| Maximum period of interruption | < 72h  > 72h and <15 days |
| Place of interruption – address: |  |
| Description of the transports that can be interrupted |  |
| No interruption of transport foreseen. | |

1. **Description of the Class 7 dangerous goods**
2. Description of the packagesi

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **UN number** | **Isotope** | **Physical condition** | **Chemical condition** | **Form** | **Special form certificate**^ | **Max. activity per package** | **Package type** | **Package approval certificate** c | **Number of packages** |
|  |  | Solid  Liquid  Gaz |  | Special form  Other form |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **UN number** | **Isotope** | **Physical condition** | **Chemical condition** | **Form** | **Special form certificate**^ | **Max. activity per package** | **Package type** | **Package approval certificate** c | **Number of packages** |
|  |  | Solid  Liquid  Gaz |  | Special form  Other form |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **UN number** | **Isotope** | **Physical condition** | **Chemical condition** | **Form** | **Special form certificate**^ | **Max. activity per package** | **Package type** | **Package approval certificate** c | **Number of packages** |
|  |  | Solid  Liquid  Gaz |  | Special form  Other form |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **UN number** | **Isotope** | **Physical condition** | **Chemical condition** | **Form** | **Special form certificate**^ | **Max. activity per package** | **Package type** | **Package approval certificate** c | **Number of packages** |
|  |  | Solid  Liquid  Gaz |  | Special form  Other form |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **UN number** | **Isotope** | **Physical condition** | **Chemical condition** | **Form** | **Special form certificate**^ | **Max. activity per package** | **Package type** | **Package approval certificate** c | **Number of packages** |
|  |  | Solid  Liquid  Gaz |  | Special form  Other form |  |  |  |  |  |

1. Description of the cargo

|  |  |
| --- | --- |
| Maximum activity per transport |  |
| Maximum transport index (TI) per transport: |  |
| Maximum number of packages per shipment: |  |
| Maximum number 20’ or 40’ containers per shipmentb: |  |

|  |  |
| --- | --- |
| **Fissile materialb** | |
| Enrichment Uranium (%)b |  |
| Composition Plutoniumb: |  |
| Massa fissile material per packageb: |  |
| Total fissile material per packageb: |  |

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

The applicant states to dispose of a management system as mentioned in

chapter 1.7.3 of the ADR

chapter 1.6.3 of the ICAO technical instructions and 10.0.3 of the IATA regulations

chapter 1.5.3 of the IMDG code

chapter 1.7.3 of the RID or ADN

international, national or other standards for the transport of dangerous goods.

Reference:       - date:

The management system has been certified according:

1. **Radiation protection programme**

The applicant states that the health physics organization

shall make a preliminary dose evaluation to ensure the safety and radiation protection.

shall be present at the transport to be able to take the required actions, if necessary, to ensure the safety and radiation protection, and shall transfer his report to FANC within 10 days after the transport.

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

**Attachment 5:** A copy of the dose evaluationapproved by the health physics organization

1. **Security**

The applicant states to fulfil the requirements of the security conditions regarding the Class 7 dangerous goods as indicated in

chapter 1.10 of the ADR

chapter 1.5.1 of the ICAO technical instructions and 1.6 of the IATA regulations

chapter 1.4 of the IMDG code

chapter 1.10 of the RID

not applicable

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

**Attachment 6:** A copy of the security plan (if applicable and not yet available at the FANC Nuclear Security office)

1. **Emergency plan**

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

**Attachment 7:** A copy of the completed warning diagram ‘driver’ and ‘person in charge of the supervision of the transport’

1. **Insurance**

The applicant states to dispose of a third party liability insurance covering the transport of Class 7 dangerous goods.

**SECTION II: ATTACHMENTS**

**FOLLOWING DOCUMENTS ARE PART OF THE APPLICATION FOR A UNIQUE TRANSPORT AUTHORISATION OF THE CLASS 7 DANGEROUS GOODS:**

**General:**

**Attachment 1:** Statutes of the company

**Attachment 2:** Mandate of the legal representative

**Attachment 3:** Organization chart of the company

**Attachment 4:** Designation of the Class 7 safety advisor

**Attachment 4A:** Certificate of the Class 7 safety advisor if delivered by another EU member state or another ADR, RID or ADN treaty state.

**Attachment 5:** A copy of the dose evaluation approved by the health physics organization

**Attachment 6:** A copy of the security plan (if applicable and not yet available at the FANC Nuclear Security office)

**Attachment 7:** A copy of the completed warning diagram ‘driver’ and ‘person in charge of the supervision of the transport’

**Additional documents**

**Attachment 8:**

**Attachment 9:**

**Attachment 10:**

**Attachment 11:**

The documents that are not part of the application for recognition can, if necessary, been requested by FANC.

**SECTION III: SIGNATURE**

1. **LEGAL REPRESENTATIVE**

Undersigned states to have completed this application form true and correct, and notes that an incorrect or incomplete application form can result in an annulment of the application.

|  |
| --- |
| Name, date and signature of the legal representative, preceded by the handwritten statement “read and approved”a. |
|  |

1. **HEALTH PHYSICS ORGANIZATION**

Undersigned states :

* to have checked this application form to be complete and correct.
* to ensure the health physics for the applicant.

|  |
| --- |
| Name, date and signature of the recognized expert for the health physics, preceded by the handwritten statement “read and approved” a. |
|  |

**ATTACHMENT A: Health physics organizations for the transport of Class 7 dangerous goods \***

Vinçotte Controlatom

Business Class Kantorenpark

Jan Olieslagerslaan 35

1800 Vilvoorde

Tel. : 02/674.51.20

Fax : 02/674.51.40

E-mail: controlatom@vincotte.be

Web : www.controlatom.be

\* See FANC website for the complete list : https://fanc.fgov.be/nl/professionelen/vervoer-van-radioactieve-stoffen

**ATTACHMENT 4: FORM FOR THE DESIGNATION OF THE CLASS 7 SAFETY ADVISOR**

|  |  |
| --- | --- |
| Company for which the Class 7 safety advisor is appointed (name, legal form, address, phone, fax, e-mail, company number) |  |
| Name, first name, nationality, address and date of birth of the Class 7 safety advisor active in your company |  |
| Place or places where the Class 7 safety advisor performs his activities for the company |  |
| Nature of the contract between the Class 7 safety advisor and the company. |  |

|  |  |  |
| --- | --- | --- |
| Name, function: | Date: | Signature: |
| Phone:  E-mail: | | |

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

**Attachment 4A:** Certificate of the Class 7 safety advisor if delivered by another EU member state or another ADR, RID or ADN treaty state.

**ATTACHMENT 7: copy of the completed warning diagram ‘person in charge of the supervision of the transport’**

person in charge of the supervision of the transport \*:

|  |  |  |
| --- | --- | --- |
| Health physics organisation :  Namea:  Phonea: |  | Federal Agency for Nuclear Control |

|  |  |  |
| --- | --- | --- |
|  |  | 1. **During office hours:**   +32(0)2/289.21.11 and ask for the import & transport office   1. **After office hours:**   Call the on-call number of the Federal Agency for Nuclear Control (FANC), which will only be communicated upon request. |

Information to be communicated to everyone notified:

* Are there injured;
* Is there a fire hazard;
* Are there traffic problems;
* Exact location of the place of accident (name of the city, name of road, number of the road, direction of traffic, mileage marker, …);
* Are there radioactive materials aboard.

**ATTACHMENT 7: copy of the completed warning diagram ‘driver’**

ONLY FOR ROAD AND RAIL

Driver:

|  |  |  |
| --- | --- | --- |
| person in charge of the supervision of the transport    Namea:  Phonea: |  | Service 100 or 112 |

In case of injured or fire hazard

Service 101

In case of traffic problems

.

Information to be communicated to everyone notified:

* Are there injured;
* Is there a fire hazard;
* Are there traffic problems;
* Exact location of the place of accident (name of the city, name of road, number of the road, direction of traffic, mileage marker, …);
* Are there radioactive materials aboard.