

# **Annual Compliance Reporting Form**

Licensed Activity: Service (by independant provider) Class II prescribed equipment

Usetype (565)

**Revision Date: September 2016** 

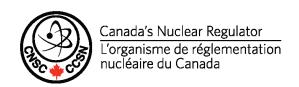




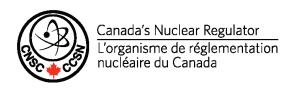
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Declaration of Licensee Representative					
Mojgan Soleimani	having the authority to act for the licensee pursuant to Section 15 of the General Nuclear Safety and Control				
Regulations, certify that all statements and representations made in this Annual Compliance Report and any supp	olementary pages appended to this report are true and correct to the best of my knowledge.				
Title	Date (YYYY-MM-DD)				
Radiation Safety Officer	2020-02-25				
It is an offence under the Nuclear Safety and Control Act to knowingly make a false report.  For more information, or for questions on the content and/or filling of ACR forms, please contact the CNSC Direct	orate of Nuclear Substance Regulation at 1-888-229-2672				
When complete, please submit this form via email to <a href="mailto:cnsc.acr-rac.ccsn@canada.ca">cnsc.acr-rac.ccsn@canada.ca</a> or by fax to 613-995-5086.	orace of Nacical Substance negatiation at 1 000 225 2072.				
Print Form	Reset Form				



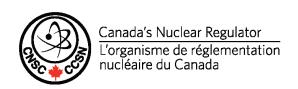
Licensee Organization Information						
Licensee Name			Licensee Corporation Number (if applicable)			
Best Theratronics Ltd.			6883508			
Licensee Business Number (if applicable)		Licence Number	1			
83028 3554		14127-3-28.0				
Reporting Period						
This Annual Compliance Report covers the 12 month pe	eriod.					
From		То				
2019-01-01		2019-12-31				
Head Office Legal Address						
Street Address						
413 March Road						
City	Country		Postal/Zip Code			
Ottawa	Canada		K2K 0E4			



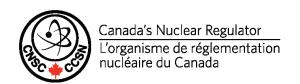
Radiation Safety Officer (RSO)							
Name		Title					
Mojgan Soleimani		Radiation Safety Officer					
Mailing Address							
Street Address		City					
413 March Road		Ottawa					
Province/State	Country	Postal/Zip Code	Telephone Number				
ON	Canada	K2K 0E4	613 591 2100 x2766				
Alternate Telephone Number	Facsimile	Email Address					
613 355 7771	613 591 5680	mojgan.soleimani@theratronics.ca					
Alternate Radiation Safety Officer (if a	pplicable)						
Check here if no alternate RSO							
Name		Title					
Edna Sacay		Radiation Safety Specialist					
Mailing Address							
Check here if same as "Radiation Safety Officer"							
Street Address		City					
413 March Road		Ottawa					
Province/State	Country	Postal/Zip Code	Telephone Number				
ON	Canada	K2K 0E4	613 591 2100 x2029				
Alternate Telephone Number	Facsimile	Email Address					
		edna.sacay@theratronics.ca					



Financial Contact (if applicable)							
Name		Title					
Bisher Khirbik		Finance Manager					
Mailing Address							
Check here if same as "Radiation Safety Officer"							
Street Address		City					
413 March Road		Ottawa					
Province/State	Country	Postal/Zip Code	Telephone Number				
ON	Canada	K2K 0E4	613 591 2100				
Alternate Telephone Number	Facsimile	Email Address					
	613 591 6627	bisher.khirbik@therartonics.ca					
Signing Authority							
✓ Check here if same as "Radiation Safety Officer"							
Name		Title					
Mojgan Soleimani		Radiation Safety Officer					
Mailing Address							
Check here if same as "Radiation Safety Officer"							
Street Address		City					
413 March Road		Ottawa					
Province/State	Country	Postal/Zip Code	Telephone Number				
ON	ON Canada		613 591 2100 x2766				
Alternate Telephone Number	Facsimile	Email Address					
613 355 7771	613 591 5680	mojgan.soleimani@theratronics.ca					



Applicant Authority								
Check here if same as "Radiation Safety Officer"								
Name		Title						
Krishnan Suthanthiran		President						
Mailing Address								
✓ Check here if same as "Radiation Safety Officer"								
Street Address								
413 March Road								
City	Province/State	Country	Postal/Zip Code					
Ottawa	ON	Canada	K2K 0E4					
Telephone Number	Alternate Telephone Number	Facsimile						
703 451 2378 x104								
Email Address								
krish@teambest.com								



# **Ascertainment of Doses: Whole Body**

Provide a summary of the annual effective whole body radiation doses received by Nuclear Energy Workers (NEWs) and non-NEWs during the year ending December 31st. Provide the information in detail, as shown below.

NOTE: Please do NOT send personal information, such as social insurance numbers, etc. to CNSC.

	Number of Workers in each effective dose category								
(mSv)							Dosimetry Service Provider	Maximum individual dose	
	BDL†	> BDL † and ≤ 0.5	> 0.5 and ≤ 1	> 1 and ≤ 5	> 5 and ≤ 20	> 20 and ≤ 50	> 50	††	(mSv)
Number of NEWs	1	8	2	1	1			Landauer Inc	5.33
Number of Non-NEWs								N/A	

<sup>†</sup> BDL = Below Detectable Limits for the dosimeter being used.

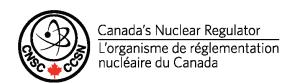
tt Enter the name of the dosimetry service provider. If a dosimetry service provider is not used, enter "ESTIMATED" and provide brief details on how dose estimates were derived in the comments area below.

### Comments

All monitored under this licence are NEW Service technicians. Doses also include service work conducted outside of Canada and under two other licenses (NSPFL-14.00/2029 & 14127-8-24.0).

NOTE (ver1): Doses distribution and maximum individual dose are based on the current doses in the NDR. A request has been submitted to the CNSC to correct two personnel doses in 2019. Please see next page (ver 2).





# **Ascertainment of Doses: Whole Body**

Provide a summary of the annual effective whole body radiation doses received by Nuclear Energy Workers (NEWs) and non-NEWs during the year ending December 31st. Provide the information in detail, as shown below.

NOTE: Please do NOT send personal information, such as social insurance numbers, etc. to CNSC.

	Number of Workers in each effective dose category								
(mSv)							Dosimetry Service Provider	Maximum individual dose	
	BDL†	> BDL † and ≤ 0.5	> 0.5 and ≤ 1	> 1 and ≤ 5	> 5 and ≤ 20	> 20 and ≤ 50	> 50	††	(mSv)
Number of NEWs	1	9	3					Landauer Inc	1
Number of Non-NEWs								N/A	

<sup>†</sup> BDL = Below Detectable Limits for the dosimeter being used.

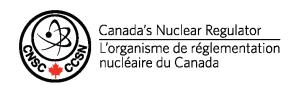
tt Enter the name of the dosimetry service provider. If a dosimetry service provider is not used, enter "ESTIMATED" and provide brief details on how dose estimates were derived in the comments area below.

### Comments

All monitored under this licence are NEW Service technicians. Doses also include service work conducted outside of Canada and under two other licenses (NSPFL-14.00/2029 & 14127-8-24.0).

NOTE (ver2): Doses distribution and maximum individual dose are based on the revised personnel doses awaiting CNSC approval to be updated in the NDR for exposures in 2019.





Ascertainment of Doses – Extremity D	oses
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If your organization monitors workers for extremity exposures, provide a summary of the extremity doses received by NEWs and non-NEWs during the year ending December 31 st. Provide the information in detail, as shown below.

NOTE: Please do NOT send personal information, such as social insurance numbers, etc. to CNSC.

Check here if your organization has no extremity dose information to submit for the reporting period.

	Number of Workers in each effective dose category								
	(mSv)							Dosimetry	Maximum individual dose
	<10	>10 and ≤ 50	> 50 and ≤ 100	> 100 and ≤ 200	> 200 and ≤ 350	> 350 and ≤ 500	> 500	Service Provider †	(mSv)
Number of NEWs	10	1						Landauer Inc.	10
Number of Non-NEWs								N/A	0

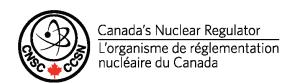
† Enter the name of the dosimetry service provider. If a dosimetry service provider is not used, enter "ESTIMATED" and provide brief details on how dose estimates were derived in the comments area below.

Comments

All monitored under this licence are NEW Service technicians. Doses also include service work conducted outside of Canada and under two other licenses (NSPFL-14.00/2029 & 14127-8-24.0).







List all carriers employed to transport radioactive materials for the purposes of this licence during the reporting period:

Carrier Name	Contact Telephone (ex. 123-456-7890)	Full name of Contact (if available)	Location of Carrier (City, Province)

NOTE: do not list all shipments, list only carriers used to transport packages during the reporting period. If using the same carrier, there should be only one entry in the table.

