

Building/Room: \_\_\_\_\_ AU: \_\_\_\_\_ Date: \_\_\_\_\_

**Wipe Test Counting Instrument:**

Manufacturer/Model: \_\_\_\_\_ Serial #: \_\_\_\_\_

Background (cpm): \_\_\_\_\_ Detection Efficiency: \_\_\_\_\_

**Contamination Limits:**

Unrestricted Areas 20 dpm/100 cm<sup>2</sup> alpha; 100 dpm/100cm<sup>2</sup> beta/gamma

Restricted Areas 20 dpm/100 cm<sup>2</sup> alpha; 200 dpm/100cm<sup>2</sup> beta/gamma

**Area Survey Instrument:**

Manufacturer/Model: \_\_\_\_\_ Serial #: \_\_\_\_\_

Background (cpm): \_\_\_\_\_

External radiation levels of all areas < 3x background? Yes \_\_\_ No \_\_\_

Place Survey Map Here

Location #	Location Description	Gross cpm	Net cpm	Net dpm

Comments: \_\_\_\_\_

Performed By: \_\_\_\_\_ Date: \_\_\_\_\_