

# UNCLASSIFIED

DATE	AUTHORIZATION NO. <b>PRL -</b>
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**PRODUCT RETURN LIAISON  
CONSOLIDATED NUCLEAR SECURITY, LLC (CNS)  
P.O. BOX 2009  
OAK RIDGE, TENNESSEE 37831**

**Email** [pri@y12.doe.gov](mailto:pri@y12.doe.gov)  
**Phone** 865-576-5002  
**Fax** 865-241-4719

## REQUEST FOR AUTHORIZATION TO SHIP SNM OR NON-SNM MATERIAL (U)

SHIPPER FACILITY (Contact Name/Phone Number)		RIS	
ADDRESS		741 NUMBER (IF REQUIRED)	TRIP NUMBER (IF REQUIRED)
		GROSS WEIGHT	NET WEIGHT
REQUESTED SHIP DATE	MODE OF TRANSPORTATION	<b>THE FOLLOWING QUESTION SHOULD BE ANSWERED BY YOUR RADCON ORGANIZATION PRIOR TO SHIPMENT: DOES THIS PROPOSED SHIPMENT MEET Y-12 CNS ACCEPTANCE CRITERIA?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	
SIGNATURE OF AUTHORIZED SHIPPER REPRESENTATIVE		CONTACT AT SHIPPER'S LOCATION RE: CONTAMINANT OR RADIATION LEVELS Name: _____ Phone: _____	
PERSON DESIGNATED AS CONTACT OF MATERIAL Name: _____ Phone: _____ Transfer To: Name _____ Building: _____ MBA: _____		REASON FOR MATERIAL BEING SHIPPED (Recovery, Retirement, Evaluation, etc.) (State part disposition on packing list.)	
IF MATERIAL WAS SHIPPED TO YOU, REFERENCE THE DOE/NRC 741 NUMBER		P.O. NUMBER	SCRAP DECLARATION NUMBER

### RECEIVING FACILITIES AUTHORIZATION

SIGNATURE OF PRODUCT RETURN LIAISON	DATE	PHONE NUMBER
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### GENERAL MATERIAL DESCRIPTION

MATERIAL (CHEMICAL ELEMENT)	QUANTITY
PHYSICAL DESCRIPTION	
PHYSICAL IMPURITIES	
PROGRAM (If Applicable)	VOUCHER/SHIPPING ORDER NUMBER (If Applicable)
ACCOUNTABLE MATERIAL Yes <input type="checkbox"/> No <input type="checkbox"/>	
HAZARDOUS MATERIAL Yes <input type="checkbox"/> No <input type="checkbox"/>	
Y-12 CNS CHARGE NUMBER TO PROCESS PRL FORM	

<b>DERIVATIVE CLASSIFIER</b>	NAME
	TITLE
	DATE

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## MATERIAL HISTORY

KNOWN HAZARDS CONNECTED WITH THE HANDLING OF MATERIAL

RADIONUCLIDES, SUCH AS FISSION PRODUCTS, OTHER ACTINIDES, TRITIUM, ETC. IN WHICH MATERIAL HAS BEEN EXPOSED (Include concentrations of contaminants and methods of analysis.)

HAZARDOUS MATERIAL OR UNUSUAL PROCESSING OR TESTS IN WHICH THE MATERIAL HAS UNDERGONE (Detail radiation or contaminant levels.)

"We hereby certify according to process knowledge or thorough analytical determination that the contents of the container(s) do not contain RCRA Hazardous waste as identified in 40 CFR 261.3"

SIGNATURE OF SHIPPER

COMPANY NAME

DATE

## METHOD OF PACKING

OUTSIDE CONTAINER TYPE

APPROXIMATE NUMBER (OC)

INSIDE CONTAINER TYPE

APPROXIMATE NUMBER (IC)

OTHER CONTAINER INFORMATION

SEAL/TID NO.

SPECIAL PRECAUTIONS TO BE OBSERVED WHEN OPENING THE CONTAINER(S)

**1. ENSURE ALL RADIOACTIVE CONTAMINATION SURVEY DATA IS INCLUDED WITH THIS FORM.**

2.\* A detailed packing list must be attached to this authorization providing the following information:

- **Six-digit Drawing Number**
- **Serial Number**
- **Part Name**
- **Program**
- **Consignor ID**
- **Part Classification**
- **Identify part as accountable or non-accountable**
- **Container identification and seal number**
- **Disposition of item to be returned**

3.\* Attach unclassified packing information to OUTSIDE of container

4. Authorization must be submitted to Y-12 CNS for approval PRIOR to the shipping of material.

5. Notification of shipment and DOE/NRC 741 MUST include the Y-12 CNS Authorization number.

6. Provide approved Authorization number, ID, gross weights and tare weights on outside of a container in the shipment for all containers (Outside and Inside).

\*These items not necessary for university returns.

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