

## RADIATION DOSIMETRY SERVICE REQUEST SERVICE TERMINATION FORM

## Instructions for completing the form:

- 1. The termination form is required if the company intends to continue subscribing to the service but no longer needs certain users or areas to be monitored.
- 2. This form can also **replace an existing user/area with a new user/area for an active subscription**. In this case, a **new User** and/or **Area Registration Form** must be submitted with justification alongside the termination form at least **30 days** prior to the end of the current wearing period to ensure seamless transition.
- 3. Complete all sections of the form above. Additional forms may be used for additional users/areas.
- 4. Please submit the termination form in PDF format to <a href="mailto:radtechservices@shena.gov.bn">radtechservices@shena.gov.bn</a>.
- All issued dosimeters must be returned within 30 days after the end of the last monitoring period.
  Any unreturned dosimeters will be considered lost, and the company will be charged the full replacement cost.
- 6. A final dose report will be prepared for terminated users once all dosimeters have been returned and processed.
- 7. If no replacement is provided, no refunds will be issued for terminated users or areas for any remaining subscription period.

Company ID	
Company Name	

NO	FULL NAME (USER/AREA)	PID/AID NO.	EFFECTIVE DATE
1			
2			
3			
4			
5			

WWW.SHENA.GOV.BN



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NO	FULL NAME (USER/AREA)	PID/AID NO.	EFFECTIVE DATE
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

DECLARATION					
☐ I confirm that the information provided in this form is true, complete and accurate. On behalf of the Company, I have read and understood all the <b>Terms &amp; Conditions</b> of Personal Dosimetry Service and agree to pay any outstanding fees.					
Name					
Designation					
Signature & Com	pany Stamp Date				

Service Termination Form - SHENA/RDSL/FRM/5-405 Rev.1.3



## RADIATION DOSIMETRY SERVICE REQUEST **SERVICE TERMINATION FORM**

FOR OFFICIAL USE ONLY						
Date Received						
Processed by		Approved by				
Signature & Date		Signature & Date				
Remarks						