

Ionising Radiations Regulations 2017 reg 17 designates controlled and supervised areas; reg 18 requires local rules and a radiation protection supervisor (RPS); reg 19 sets additional requirements for designated areas; the radiation protection adviser (RPA) is consulted on any change. Building work in or next to these areas — shielding, services through lead-lined walls, ceiling voids over an imaging room — needs the RPS's permission and the RPA's hold where shielding is disturbed. This permit is issued by the employer's RPS, not by the contractor.

1 PERMIT IDENTIFICATION

PERMIT NUMBER	PROJECT / SITE REF	SITE NAME AND ADDRESS	DATE OF ISSUE
VALID FROM (DATE & TIME)	VALID TO (DATE & TIME)	CROSS-REFERENCED PERMITS / CERTIFICATES	

2 LOCATION AND DESCRIPTION OF WORK

EXACT LOCATION	CONTRACTOR / TRADE		
DESCRIPTION OF THE WORK, AND ITS LIMITATIONS			
RAMS REFERENCE	PERSON IN CHARGE ON SITE	OPERATIVES	SUPERVISOR

3 THE AREA AND THE SOURCE

CONTROLLED / SUPERVISED AREA	RADIATION SOURCE(S)	RPS	RPA CONSULTED (NAME / DATE)

4 BEFORE ENTRY — EVERY BOX TICKED

☐

Source isolated / equipment switched off and secured by the RPS, or the work is scheduled outside exposure times and controlled by the RPS

☐

Local rules read and understood; contractor personnel briefed; dose monitoring arranged where the RPA requires

☐

Shielding (lead, barium plaster, lead glass) not disturbed — or, where it must be, the RPA's written method and the RPA hold before reinstatement is covered up

☐

Unsealed sources / contamination areas: contamination monitoring before and after; PPE and waste per local rules

☐

Warning signs and lights respected; door interlocks not defeated; area returned to the RPS at the end of each period

SHIELDING AFFECTED? — RPA METHOD REF

REINSTATEMENT INSPECTED BY (RPA / RPS) / DATE

DOSE MONITORING REF

CONTROLLED AREA PERMIT — IONISING RADIATION**COPY 2 OF 2 — RETAIN AT PERMIT CONTROL POINT**

Authorisation · acceptance · handover · hand-back · cancellation

KD-PTW-RA-030 Rev A0

5 ISSUE — ISSUING AUTHORITY

I certify that the hazards of this work have been identified and assessed, that the work site has been examined, and that all precautions specified in this permit — including all isolations — have in fact been taken.

The issuing authority is the radiation protection supervisor for the area; where shielding is affected the RPA's hold in section 4 is a condition of cancellation.

I confirm the validity period is specific to this work period and is not open-ended.

PRINTED NAME	APPOINTED ROLE	COMPANY	SIGNATURE	DATE	TIME

6 AUTHORISATION — SECOND PERSON CHECK BEFORE ISSUE

HSE requires the permit to be seen by a second person before it is issued. I have reviewed this permit and am satisfied it is complete, the scope is properly limited, and it does not conflict with any other permit live in this area.

PRINTED NAME	APPOINTED ROLE	COMPANY	SIGNATURE	DATE	TIME

7 ACCEPTANCE — PERFORMING AUTHORITY

I have read and understood this permit. I understand the hazards and the precautions, I have briefed everyone working under it, and those precautions will be observed for the duration of the work. I will not exceed the scope or the validity period stated.

PRINTED NAME	ROLE	COMPANY	SIGNATURE	DATE	TIME

8 EXTENSION / SHIFT HANDOVER

Complete only where the work continues into a further period. Confirm the plant remains safe and the incoming acceptor is aware of the hazards.

EXTENDED TO (DATE & TIME)	ISSUING AUTHORITY SIG	INCOMING ACCEPTOR SIG	RE-CHECKED (Y/N)
EXTENDED TO (DATE & TIME)	ISSUING AUTHORITY SIG	INCOMING ACCEPTOR SIG	RE-CHECKED (Y/N)

9 SUSPENSION

HSE requires suspended permits to be retained on the permit system, with the condition the plant has been left in and the consequences for other activities recorded.

DATE & TIME SUSPENDED	REASON, AND CONDITION PLANT LEFT IN	SIGNED

10 HAND-BACK — PERFORMING AUTHORITY

I certify that the work described in this permit is complete or has been stopped, that all persons and equipment under my control have been withdrawn, and that the area has been left in a safe and clean condition.

☐ Work COMPLETED ☐ Work PARTIALLY completed ☐ Work STOPPED and not completed

PRINTED NAME	SIGNATURE	DATE	TIME	OUTSTANDING ITEMS

11 CANCELLATION — ISSUING AUTHORITY

I certify that the area is returned to the RPS, shielding (where affected) has been reinstated and inspected, contamination monitoring is complete where required, and this permit is cancelled.

PRINTED NAME	SIGNATURE	DATE	TIME	REGISTER (INITIALS)

On cancellation, flatten this PDF before archiving so the record cannot be silently edited. Retain for a minimum of 30 days on site (HSG250), then archive in line with your retention schedule.

R REVISION HISTORY

Every revision of this document, and every review that found nothing to change. The revision on the front of this sheet is the one you are holding — check kubitdocs.com for the current one before use.

Rev	Date	Class	What changed	Authorised by
D0	2026-08-28	first-issue	First issue.	— not yet approved —
A0	2026-08-29	review	Approved for issue by the author. Content unchanged from the draft; the draft status strip is removed. No independent third-party review has been carried out.	Author — director, UK principal contractor, SMSTS. Not an independent review.

Class: first-issue · material (the law, a control, a field or the scope changed — past buyers are notified) · editorial (wording or layout only) · review (checked, nothing changed) · withdrawal. Revision prefix D = draft, not approved and not for sale; A = approved for issue by the person named, on the date shown.