

SURVEY METER REGISTRATION
Department of Environmental Health and Safety
Kansas State University

All portable radiation survey meters must be calibrated annually. To facilitate calibration, please complete (1) form for each meter and mail or fax (2-1891) to Radiation Safety Officer.

CONTACT INFORMATION

Authorized Principal Investigator _____ Phone _____

Title _____ Email _____

Department _____

Building and Room # where meter is located _____

SURVEY METER IDENTIFICATION INFORMATION

Meter Manufacturer _____

Model Number _____ Serial Number _____

Date of last calibration or purchase date _____

Scale (include multiplier, if any) _____

Signature: _____ Date _____