

**WYOMING DEPARTMENT OF TRANSPORTATION -REGULATORY PROGRAM**

**5300 Bishop Blvd. Cheyenne, WY 82009**

**Radioactive Waste Transportation Permit Application Form**

for a

**PERMANENT PERMIT**

**TEMPORARY PERMIT (only for one trip described below)**

1. \_\_\_\_\_  
Name of Carrier \_\_\_\_\_ Carrier DOT # \_\_\_\_\_

2. \_\_\_\_\_  
Address of Carrier \_\_\_\_\_ Regular Business Phone # \_\_\_\_\_

3. \_\_\_\_\_  
Contact Person and 24 Hour emergency telephone # which will be answered

4. General description of radioactive waste intended for transport, including type of material, estimated number of shipments and packages, description of packages and estimated radioactivity per shipment (precise information not necessary if unavailable):

\_\_\_\_\_

5. Description of mode of transportation, route or routes to be taken and approximate schedule (precise information not necessary if unavailable):

\_\_\_\_\_

6. Describe any violations by applicant of any local, state or federal regulations in the past year relating to radioactive waste transportation (if none, so state) (completion of this section is voluntary except in the case of an accident resulting in the release of radioactivity):

\_\_\_\_\_

7. Other information which would be of assistance in case of an accident involving radioactive waste:

\_\_\_\_\_

**READ CAREFULLY BEFORE SIGNING** - I hereby certify that the information given to obtain the requested permit is true and correct. I hereby further certify that the carrier has a 24-HR telephone number for all of the persons for whom the carrier is transporting radioactive waste under the permit. The carrier agrees to pay all emergency response fees (at the rate of \$200 per package transported) to become due under the permit and to obey all reporting requirements of the Wyoming Department of Transportation, Financial Services – Revenue, 5300 Bishop Blvd., Cheyenne, WY 82009, related to those fees. The carrier agrees to obey all placarding and safety requirements for the transportation of radioactive waste as set forth in Title 49 of the Code of Federal Regulations (CFR). I understand that, if this application is for a permanent permit, I may transport radioactive waste within and through Wyoming for thirty (30) days after the date of the application set forth below without a permit, that I will pay all applicable emergency response fees associated with such transportation and that I will obey all applicable radioactive waste transportation safety regulations during this time. I understand the carrier's duty to provide supplemental information under the rules of the Regulatory Program of the Department. I understand that, if this application is for a temporary permit, I may elect to pay my emergency response fees at the time the permit is granted or to pay quarterly as billed to me by the Wyoming Department of Transportation, Financial Services – Revenue, 5300 Bishop Blvd., Cheyenne, WY 82009. Based on the foregoing, I hereby apply for a *permanent, temporary* (CIRCLE ONE) *permit to transport radioactive waste within and through Wyoming.*

**CARRIER NAME:**

\_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Authorized Representative

Wyoming Docket Number M - \_\_\_\_\_

Permit # \_\_\_\_\_  
To Be Assigned by WYDOT

**PERMIT TO TRANSPORT RADIOACTIVE WASTE**  
(Issued pursuant to W.S. 37-14-103)

**PERMANENT PERMIT**  
 **TEMPORARY PERMIT (only for one trip described above)**

Granted to the above carrier, for radioactive waste transportation as described above on \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_  
am pm (CIRCLE ONE) by \_\_\_\_\_ at \_\_\_\_\_, Wyoming.

Port of Entry and Officer Badge # (for temporary permit) if applicable: \_\_\_\_\_

\_\_\_\_\_  
Signature of Issuing Authority

**CARRIER PLEASE NOTE:** This is one of two documents which must be carried to transport radioactive waste within or through Wyoming. Both the ***Emergency Response Fee Permit*** (both pages) for the load being transported and a copy of the ***Bill of Lading (Hazardous Waste Manifest)*** must be carried with the load being transported.

COPIES: MOTOR CARRIER

REGULATORY PROGRAM

DOT – WHP DISPATCH

QCA – FIELD COPY