DRAIN DISPOSAL LOG for RADIOACTIVE MATERIAL

DATES OF SUMMARY PERIOD _____ **to** _____

Identify Location of Drain for which this Log Applies

Room #	**Building Name**	**Drain Location within Lab (i.e. NW, S corner, etc.)**
_____	_____	_____

Date	Radionuclide	Estimated Activity (uCi)	Initials of Person Recording Activity	Date	Radionuclide	Estimated Activity (uCi)	Initials of Person Recording Activity

(10/16/02)