

RADIOLOGICAL MONITORING, MEASUREMENT, AND CONTROL FORMS

Figure 3. FRMAC Form 3: Team, Instrument, and Equipment Information Log

| TEAM, INSTRUMENT, & EQUIPMENT INFORMATION LOG | | | |
|--|-------------------------------------|-------------------------------|-----------------------------|
| Field Team Supervisor Initials _____ | | | |
| Team Number | | | |
| Today's Date | | Start Time | |
| Team Leader (Last, First, M.I.) | | | |
| Team Leader Organization | | | |
| TEAM MEMBERS | | | |
| | Name (Last, First, Middle Initials) | Organization | |
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| INSTRUMENT AND EQUIPMENT INFORMATION | | | |
| Instrument / Equipment Number | Instrument / Equipment Type | Instrument / Equipment Number | Instrument / Equipment Type |
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| | | | |
| | | | |
| Cellular Phone | | Radio Number | |
| Serial Number | Phone Number | | |
| | | | |
| VEHICLE INFORMATION | | | |
| License Plate Number | State | License Plate Number | State |
| | | | |

This form must be completed and turned in to the Field Team Supervisor prior to field deployment
 Original to Date Center Yellow copy to Field Monitoring Division September 2002