

UNITED STATES MARINE CORPS
RADIOACTIVE MATERIAL (RAM) MOVEMENT FORM

1. MOVEMENT TYPE (CHECK ONE): <input type="checkbox"/> SHIPMENT/ TRANSFER <input type="checkbox"/> RECEIPT				2. DOCUMENT NUMBER: USMC- _____			
3. CONSIGNOR (Originating Unit):			4. CONSIGNEE (Intended Recipient):				
5. COMMODITY DESCRIPTION (Continue on back if necessary)							
Qty	NSN	Nomenclature	Serial No.	Isotope	Activity	Total Activity	
6. MODE OF SHIPMENT		7. PHYSICAL CHARACTERISTICS		8. RADIATION SURVEY RESULTS (If required)			
<input type="checkbox"/> Air <input type="checkbox"/> Truck <input type="checkbox"/> Rail <input type="checkbox"/> Water <input type="checkbox"/> Parcel Post <input type="checkbox"/> Other		<input type="checkbox"/> Special Form <input type="checkbox"/> Solid <input type="checkbox"/> Normal Form <input type="checkbox"/> Liquid <input type="checkbox"/> Gas		Instrument Used: _____ Calibration Due: _____ SN: _____ Transport Index: _____ Surface: _____ mrad/hr _____ µGy/hr One Meter: _____ mrad/hr _____ µGy/hr Background: _____ mrad/hr _____ µGy/hr			
9. PRE-SHIPMENT WIPE TEST/ILLUMINATION TEST RESULTS							
Wipe/Inspection Performed by: _____ Date: _____		Wipe Counted by: _____ Date: _____		Result: _____ SAT _____ UNSAT Removable: _____ dpm/100 cm ² MDA: _____ µCi _____ Bq			
10. RECEIPT INSPECTION RESULTS							
Inspection Results: _____ SAT _____ UNSAT NOTE: If UNSAT, Wipe test shall be performed and results entered in Block 9 above.				Receipt Inspection: Performed by: _____ Date: _____			
11. BASIC DESCRIPTION							
<input type="checkbox"/> Radioactive Material, Excepted Package: Instruments & Articles, 7, UN 2911			<input type="checkbox"/> Radioactive Material, Excepted Package: Articles Manufactured from Natural or Depleted Uranium or Thorium, 7, UN 2909				
<input type="checkbox"/> Radioactive Material, Excepted Package: Limited Quantity of Material, 7, UN2910			<input type="checkbox"/> Radioactive Material, Excepted Package: Empty Packaging, 7, UN 2908				
12. Labeling		13. Marking		14. Shipping Papers			
<input type="checkbox"/> White I <input type="checkbox"/> Yellow II <input type="checkbox"/> Yellow III <input type="checkbox"/> Exempt		<input type="checkbox"/> Radioactive <input type="checkbox"/> Exempt <input type="checkbox"/> Radioactive LSA <input type="checkbox"/> Waste Class A, B, C <input type="checkbox"/> Other (_____)		<input type="checkbox"/> Included & Complete <input type="checkbox"/> Exempt			
15. CERTIFICATION: "THIS PACKAGE CONFORMS TO THE CONDITIONS AND LIMITATIONS SPECIFIED IN 49 CFR 173.424 FOR RADIOACTIVE MATERIALS, EXCEPTED PACKAGE - INSTRUMENTS OR ARTICLES, UN2911".							
16. INCIDENT/ACCIDENT NOTIFICATION: 24 HOUR EMERGENCY RESPONSE PHONE NUMBER: POC: COMMENTS:							
17. Printed Name of Certifying Official:		18. Signature:		19. Date:			

Instructions for completing the USMC RAM Movement Form (Form is completed by the originating unit):

- Block 1. This is the evolution for which the form is being generated. Only one of these options should be selected.
- Block 2. This is a unique tracking number and is locally generated by the command initiating the movement.
Suggested format: USMC-M67004-01-001
This format identifies the agency, the Unit AAC, the year, and the movement number. The year rolls forward on January 1st, the movement number resets to 001.
- Block 3. This block contains the name and address and of the unit that is offering the item for shipment or transfer. (This unit will show a decrease in their RAM inventory as a result of the transaction.)
- Block 4. This block contains the name and address of the location intended to be the final destination of the item being shipped or transferred. (This unit will show an increase in their RAM inventory as a result of the transaction.)
- Block 5. This is specific information related to the device being shipped or transferred. All blocks are to be completed as accurately as possible.
- Block 6. The specific mode of transport should be checked.
- Block 7. This information can typically be found in equipment technical manuals. **To determine specific characteristics, a good rule of thumb is that devices containing H-3 will usually be Normal Form, Gas; devices containing Ni-63 are Normal Form, Solid; and devices containing Am-241 are Special Form, Solid.**
- Block 8. Radiation surveys generally do not apply for USMC devices. For guidance concerning the necessity of acquiring radiation survey data, contact the USMC Radiological Controls Office at DSN 567-5511.
- Block 9/10. Completion of these blocks is mandatory. See guidance for conducting pre-shipment and receipt inspections as provided on the Radiological Controls website at <http://www.ala.usmc.mil/radcon/>. Complete only the blocks for the type inspection performed, blocks not used should be left blank.
- Block 11. This is a general description of the device and is the basis for claiming applicable exemptions from marking and labeling of the shipping package. Almost all USMC packages fall into the first category, **Radioactive Material, Excepted Package – Instruments and Articles, 7, UN 2911**.
- Block 12. Marked as “Exempt” unless otherwise directed by the local Transportation Officer or the RCO.
- Block 13. Marked as “Exempt” unless otherwise directed by the local Transportation Officer or the RCO.
- Block 14. Marked as “Exempt” for on-site transfers. For off-site transfers requiring a shipping manifest and bill of lading, contact the local Transportation Officer for guidance and ensure the “Included & Complete” option is checked.
- Block 15. If package certification is based on selecting “Instruments and Articles” as described in the Block 11 instructions above, this statement should read: **“THIS PACKAGE CONFORMS TO THE CONDITIONS AND LIMITATIONS SPECIFIED IN 49 CFR 173.424 FOR RADIOACTIVE MATERIALS, EXCEPTED PACKAGE - INSTRUMENTS OR ARTICLES, UN2911”**. If a package is shipped under a different basic description, the certifying statement must be changed in accordance with 49 CFR 173.422(a).
- Block 16. This information must be provided. It should include a local POC and contact phone number as a minimum. The RCO should be identified in the comments section as an alternative POC in the event the originating CRSO/IRSO cannot be reached.
- Block 17. The printed name of the individual certifying the information on the form is correct and appropriate disposition/authorization to ship or transfer the device has been obtained.
- Block 18. The signature of the individual certifying the information on the form is correct and appropriate disposition/authorization to ship or transfer the device has been obtained.
- Block 19. The date Block 18 is signed.