The information in this report is required by 14 CRF 108.17 & 129.26. Failure to report may result in a civil penalty not to exceed $1000.00 for each such violation. (Federal Aviation Act of 1958, Section 901)

Department of Transportation Federal Aviation Administration	X-RAY SYSTEM RADIATION LEAKAGE REPORT (BAGGAGE INSPECTION) (Require by 14 CRF 108.17, 14 CRF 129.26)	FIELD TEST SERIAL NO. 11-7 T	Form Approved OMB No. 2120-0098

AA	1.1 Name and	Name of Facility (10.60): GOWEN FIELD	FDA Region: IDAHO	BB St. No. R.R. or Airline/Airport (10.80): 3201 AIRPORT WAY	
CC	Address of Facility	City (10.73): BOISE		State Code: ID	Zip Code: 83705
DD	and Specific Location of X-ray System	Room No. or Other Location of System (10.32): TERMINAL 1 LN 3	Person Interview (33-54): [redacted]	Telephone No.: [redacted]	
		Certification Label Present: Yes	Instrument: (type and serial number) INOVISION Model: 451P	Serial No. 424	
01	1.2 Manufacture And Product ID	A. Manufacture (Responsible Firm): RAPISCAN	B. OHU46	C. System Model No. and/or Name: TRX 520B	
		D. 115VAC Unique I.D. 60Hz	E. System Serial No. 7024510		
		F. Date of Manufacture Mo. illegible Yr.	1.4 Operator Instructions Available: Yes	1.5 Maintenance Schedule Available: N/A	
	2.0 Warning Labels	2.1 Warning Label Present at Controls Stating: "Caution: X-Rays Produced When Energized" Yes	2.2 Warning Labels Present at Ports Stating: "Caution: Do Not Insert Any Part of the Body When System Is Energized, X-Ray Hazard"	2.3 Two Indicators Labeled "X-Ray On" Present at Controls (One May Be Labeled "mA Meter") Yes	
02	Indicators	2.4 At Least One Indicator, X-Ray Marked "X-Ray On", Visible from Each Port, Door, And Access Panel Yes	3.0 Interlocks	3.1 "Captured Key" Control Yes	
	3.2 Door Safety Inter-Locks	A. Minimum Number of Interlocks Visible At Any One Door N/A	3.3 Prevention of X-Radiation By Interlocks	A. All Doors and Access Panels That Were Tested Prevent Generation of X-Radiation N/A	
		B. At Least One Interlock Dependent on No Moving Part Except Door N/A		B. Use of X-Ray Control Necessary to Resume Operation Following Interruption N/A	
	4.0 Ports and/or Apertures	4.1 Some Part of the Body Can Be Inserted Through a Port Into The Primary Beam NO		4.2 Some Part of the Body Can Be Inserted Into the Aperture NO	
	6.0 Baggage Inspection Systems	6.1 Means Provided to Ensure Operator Presence at the Control Area Yes		6.2 Means Provided to Operator for Terminating Exposures of Greater than One-Half Second and Preventing Yes	
03	7.0 Leakage Radiation	Specific Test Procedure Used 96	7.1 Scatter Block Description: Pelican CASE FOR INOVISION 451P		
	7.2 Technical Factures	140 kVp	.700 mA		

	7.3 Location	Exposure Levels	Non-Continuously Activated Systems Only Number of Exposures Initiated		Location	Exposure Levels	Non-Continuously Activated Systems Only Number of Exposures Initiated
05		.071 mR/hr	ENT LOW RT Exp	06		.035 mR/hr	ENT LOW LFT exp
		.048 mR/hr	ENT TOP RT Exp			.028 mR/hr	ENT CNTR exp
		.043 mR/hr	ENT TOP LFT exp			.024 mR/hr	EXIT LOW RT exp
		.041 mR/hr	EXIT CNTR exp			.022 mR/hr	EXIT LOW LFT exp

07	Reasonable Number of Exposures That May Be Initiated In One Hour	OR	Duty Cycle of System Indicated As a Percentage of One Hour 100%
08	8.0 Additional Information		
	8.1 .150 μR/inspection		
09	8.2		
10	8.3		
11	8.4		
12	8.5		
13	Surveyor Information [redacted]	Surveyor Name (10-72) (Print: L, F, MI) [redacted]	Surveyor Signature [redacted]	Date of Survey 7-30-09	Surveying Agency Code SCS

Remarks: [redacted]

FAA Form 165-17 (6-81)

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