Rapiscan Systems

X-RAY SYSTEM RADIATION LEAKAGE SURVEY AND COMPLIANCE REPORT

FIELD TEST
Baggage Partial Inspection Systems

Form R-0588-1 10/2/08

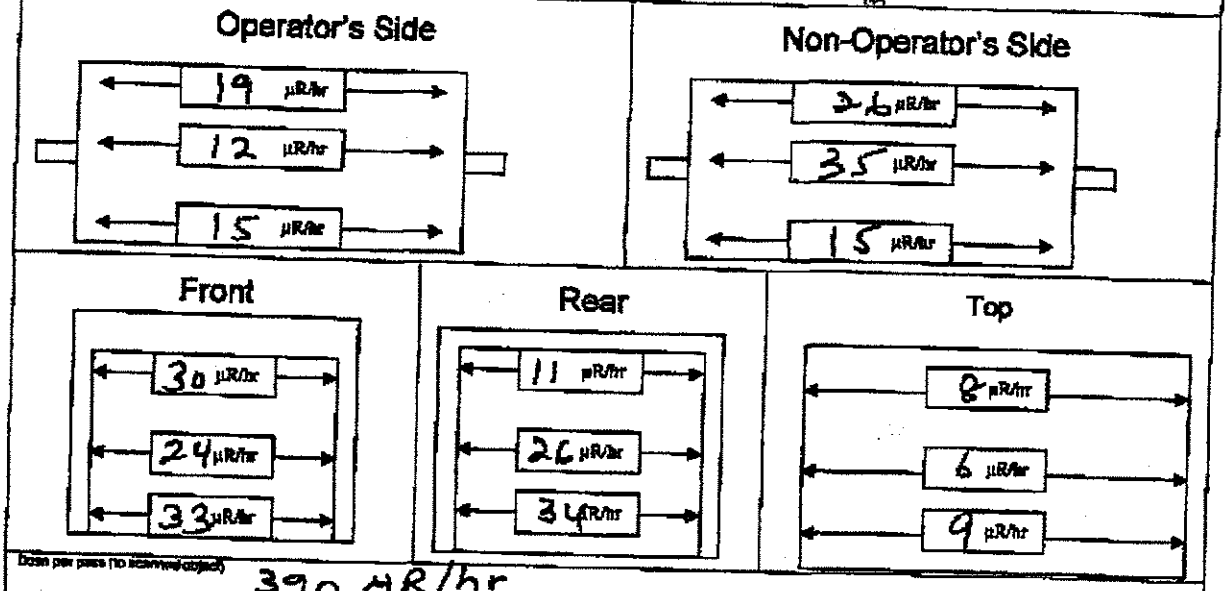
AA 1.1 Name and Address of Facility and Specific Location of X-ray System
Name of Facility: Atlanta International — Region: ATL — BB Street Address: 6000 North Terminal Pkwy
CC City: Atlanta — State Code: GA — Zip Code: 30320
DD Room No. or Other Location of System: Main # 4 — Person Interviewed: [redacted] — Telephone No.: [redacted]
Certification Label Present: Y — Measuring Instruments: Innovision Model: 457P-RH Serial No. 472

01 1.2 Manufacturer and Product ID
A. Manufacturer: Rapiscan Systems, Inc. — B. OHU46 Mfr. Code — C. System Model No.: 620DV AT
D. X-ray Tube Serial Number (s): 5R98-01123 T0831127 — E. System Serial No.: 7083505
F. Date of Manufacture: Mo. 08 Yr. 2008
1.4 Operator Instructions Available: Y — 1.5 Maintenance Schedule Available: Y

02 2.0 Warning Labels Indicators
2.1 Warning Label Present at Controls Stating "Caution: X-Rays Produced When Energized": Y
2.2 Warning Labels Present at Ports Stating: "Caution: Do Not Insert Any Part of the Body When System is Energized, X-Ray Hazard": Y
2.3 Two Indicators Labeled "X-Ray On" Present at Controls: Y
2.4 At Least One Indicator "X-Ray Marked "X-Ray On", Visible from Each Port: Y
3.0 Interlocks
3.1 "Captured Key" Control: Y
3.2 Prevention of X-Radiation By Interlocks
3.3 All Doors and Access Panels To the X-ray Beam Prevent Generation of X-Radiation: Y
4.0 Ports
4.1 Some Part of the Body Can Be Inserted Through a Port Into The Primary Beam: NO
3.4 Use of X-Ray Control Necessary to Resume Operation Following Interruption: Y

03 5.0 Baggage Inspection Systems
5.1 Means Provided to Ensure Operator Presence at the Control Area: Y
5.2 Means Provided to Operator for Terminating Exposures of Greater than One-Half Second and Preventing X-rays (E-Stop Test): Y
6.0 Leakage Radiation
Replicate Systems Test Procedure Used — Rapiscan Systems WI-0031
6.1 Scatter Block Description: Pelican Case (2)

04 6.2 Technical Factors: 160.8 kVp — 1.00 mA



05 Dose per pass (to scanned object): 390 µR/hr

06 Surveyor Information: Surveyor Name (Print) L.E. [redacted] — Surveyor Signature [redacted] — Date of Survey: 04/24/09

I have received a copy of this Radiation Survey Form. Customer Signature [redacted] Date 4/27/09

X-ray System Radiation Leakage Survey and Compliance Report, Form R-0588-1 (10/02/08)

ENTERED APR 29 2009

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