



Moisture Gauge (Neutron Probe)
Usage Log Record

This log record is to be kept with similar records and retained near the stored moisture gauge.

SCHOOL / CENTRE _____

LOG DATE: _____

Details of Moisture Gauge:

Serial Number: _____ Storage Location: _____

Details of users:

Name: _____ Monitor Badge No. _____

In the company of:

Name: _____ Monitor Badge No. _____

Name: _____ Monitor Badge No. _____

Usage Details:

Name

Time

Moisture Gauge key issued to: _____ at: _____

Location of Usage: _____

Purpose of Measurements: _____

Condition of Equipment Upon Return: (Tick as appropriate)

- | | | | |
|----------------------------|--------------------------|---------------------------------|--------------------------|
| Cables not frayed | <input type="checkbox"/> | Equipment performed normally | <input type="checkbox"/> |
| Cables correctly attached | <input type="checkbox"/> | Locking ring effective | <input type="checkbox"/> |
| No sign of damage to gauge | <input type="checkbox"/> | All locks effective | <input type="checkbox"/> |
| Leak test not due | <input type="checkbox"/> | All radiation signs in position | <input type="checkbox"/> |

Safe Storage details:

Gauge and keys returned and secured safely by:

Name: _____ Date/ Time: _____

Signed: _____