



RADON TEST--IN--PROGRESS NOTICE



Dear Tenant or Homeowner:

A radon test of the interior of your residence has been requested by _____.
In order to obtain the most accurate readings possible, and to avoid the necessity of re--testing, you are requested to adhere to the following guidelines to ensure that: 1) the radon testing kits placed in your home are not disturbed;; and 2) the conditions necessary to obtain accurate radon measurements are strictly followed for the time period requested.

Please be advised that if any of these guidelines are not strictly followed, cannot be confirmed as having been followed, or can be confirmed as not having been followed, the test results, if any, will be null and void, and another test at additional cost will need to be arranged and conducted in order to obtain accurate readings.

Please read through this two--page letter before testing begins so that you understand the conditions required for testing and can prepare your home's conditions prior to beginning the test. You may be provided with additional testing information to supplement this letter by the testing professional.

Please note that the test kits placed in your home include built--in features designed to prevent and/or detect interference with the testing conditions, and with the testing device itself. Signing this form indicates that your answers are truthful for the purposes of the radon testing performed in your home.

The radon test will be conducted for a minimum period of _____ hours / days (circle one).

Please read through the following information and answer the questions that apply.

- 1. Is there an active radon reduction system in this house? # yes # no
- 2. If there is an active radon reduction system in this house, and the test type is a short--term test that will be conducted for less than four days, the radon reduction system must be operating for a period of at least 24 hours prior to beginning the test.

BEFORE THE TEST:

Has the active radon reduction system in this house been operating for at least 24 hours?

yes # no

- 3. The EPA recommends that short--term radon testing which lasts for no longer than a week be conducted under closed--building conditions. Closed--building conditions require: 1) keeping all windows closed;; 2) keeping exterior doors closed (except for normal entry and exit);; and 3) not operating fans or other machines that bring in air from the outside. Note that fans that are part of a radon reduction system, or small exhaust fans operating for only short periods of time, may run normally during the test.

When doing short--term testing lasting less than four days, it is important to maintain closed--building conditions for at least 12 hours prior to beginning the test, as well as for the entire testing period. Do not operate fans or other machines that bring in air from the outside.

BEFORE THE TEST:

If your short--term radon test will last less than four days, have closed--building conditions (as described previously) been maintained in the home for at least 12 hours?

yes # no



DURING THE TEST:

- Maintain closed--building conditions during the entire period of the short--term test, especially for tests lasting less than one week.
- Operate the home's heating and cooling systems normally during the test, excluding window fans. For tests lasting less than one week, you may operate air--conditioning units that re--circulate interior air only.
- Do not disturb the testing device/s in any way at any time during the test.
- If a radon--reduction system exists for the house, make sure the system is working properly and will be in operation during the entire radon testing period. If it ceases regular operation for any reason, notify your landlord and/or testing professional immediately.

AFTER THE TEST:

1. Have closed--building conditions (as described above) been maintained in the home for the entire testing period?

yes # no

Describe any exceptions:

2. Have you moved, disturbed, covered, touched, or in any way tampered with any of the testing devices?

yes # no

Describe any exceptions:

FOR THE TENANT OR HOMEOWNER:

I affirm that neither the prescribed testing conditions nor any testing devices were violated or tampered with during the testing period.

SIGNATURE:

Tenant / Homeowner (circle one)

DATE

FOR QUESTIONS OR CONCERNS ABOUT YOUR RADON TESTING, CONTACT YOUR InterNACHI/IAC2--CERTIFIED RADON TESTING PROFESSIONAL.

NAME:

PHONE:

Empty box for signature and contact information.