APPLICATION FOR RADON TESTER / MITIGATOR CERTIFICATION

State Form 45703 (R4 / 4-11)
Approved by State Board of Accounts, 2011
INDIANA STATE DEPARTMENT OF HEALTH

INSTRUCTIONS:

1. *This is the radon certification application necessary to satisfy the requirements of 410 IAC 5.1-1-22. You must be certified before you test, analyze or mitigate for radon-222 in Indiana. Submit the complete and accurate application, the appropriate fee(s) and proof of successful completion and current listing on the Environmental Protection Agency's National Radon Measurement Proficiency Program (RPP), to be considered for Indiana certification. See the Indiana Radon Rule 410 IAC 5.1 for additional information.*
2. *Type or clearly print all information.*
3. *Make personal check or money order payable to: Indiana State Department of Health.*
4. *Corporations MUST submit separate checks for each applicant.*
5. *Send the completed form to:*
   Indiana State Department of Health
   ATTN: Cashier's Office
   2 N Meridian St
   Indianapolis, Indiana 46204
6. *Allow two (2) to three (3) weeks for processing. If you have any questions, please call 317-233-1250 and ask for the Radon Coordinator.*

TYPE OF CERTIFICATION DESIRED:

Check all that apply:

☐ Radon Laboratory Tester – Fee: $ 100.00 ☐ Secondary Radon Tester – Fee: $ 100.00

☐ Primary Radon Tester – Fee: $ 100.00 ☐ Radon Mitigator – Fee: $ 100.00

INDIVIDUAL INFORMATION:

1. Last Name:	2. First Name:	3. M. I.:
4. Home Telephone Number: (_____) _____ - _____	5. E-mail Address:	
6. Address where license should be mailed *(number and street)*:	7. City:	8. State: / 9. ZIP Code:
10. Company Name: *(if applicable):*	11. Company Telephone Number: (_____) _____ - _____	

12. Date of Birth: Month Day Year _____/_____/_____	13. Sex: ☐ Male ☐ Female	14. Height: _____ feet _____ inches	15. Weight: _____ pounds	16. Eye Color: _____	17. Hair Color: _____

If this individual is applying for Radon Laboratory Tester and/or Radon Mitigator certification, the individual must be a full-time employee or employer who shall be responsible for all laboratory and/or mitigation activities (as outlined in 410 IAC 5.1-1-24 and 5.1-1-26).

RADON PROFICIENCY PROGRAM (RPP) INFORMATION *(COMPLETE ALL THAT APPLY)*:

RPP Identification Number for Residential Measurement:	RPP Identification Number for Analytical Measurement:	RPP Identification Number for Residential Mitigator:

Enclose a copy of your RPP Photo ID Card. Also, if applying for Primary Radon Tester or Radon Laboratory Tester, enclose a copy of your Device Performance Test Report (Listing Letter).

RADON MEASUREMENT SERVICES:

If you are applying for Primary Radon Tester, Secondary Radon Tester or Radon Laboratory Tester, list the specific type of detector(s) you're using and list the name of the state-certified lab analyzing the detector(s) (i.e. "femto-TECH 510 – self analyzed, charcoal canisters and electric ion chamber detectors – analyzed by X Laboratories").

Type of Service Provided:

PROVIDE PROOF:

A. Provide a photocopy of your RPP Photo ID card. Also, if you are applying for Radon Laboratory Tester or Primary Tester, enclose your RPP Listing Letter.

B. If the Radon Laboratory Tester and/or Primary Radon Tester is using a radioactive source for calibration, list the Indiana State Department of Health Radioactive Materials Registration Number.

Radioactive Materials Registration Number:

C. If you are applying for Radon Laboratory Tester Certification, you must:

i. Provide proof of a Bachelor's degree from an accredited university or college in the physical sciences or engineering or a related field.

OR

ii. Provide proof of a minimum of two (2) years of full-time experience in radiation measurement.

FOR RE-CERTIFICATION:

Follow the instructions in this section only if the individual has been certified before with the Indiana State Department of Health in any category. Provide proof of continuing education that was completed within the prior two (2) years and was obtained as follows:

At least six (6) contact hours of continuing education from a radon course. Provide written confirmation of attendance, signed by the course instructor or the designee. ***OR*** *Full-time employment for the prior two (2) years in any category of certification. Provide written confirmation of full-time employment signed by the business owner or chief executive officer of the business which employed the individual.*

AND Provide proof of current listing with the RPP.

☐ Check here if applying for re-certification.

Previous Indiana Certification Number(s):

CERTIFICATION & SIGNATURE:

I have also read and agree to adhere to the *[check the appropriate category(s)]*:

☐ EPA's "Indoor Radon and Radon Decay Product Measurement Device Protocols"

☐ EPA's "Radon Mitigation Standards"

► **IMPORTANT**

- Allow two (2) to three (3) weeks for processing of a **complete application package** and receipt of your license(s).
- Make sure you have completed all appropriate sections of this application and have included all required addenda. Sign and date the application and return it to the **Cashier** address shown on page one (1) of this application. Applications will be returned which are incomplete or contain errors in response to any questions on the form and will result in a delay in processing and issuance of your license(s).
- All information requested on this application is mandatory for the administration and processing of your license application pursuant to 410 IAC 5.1.

I hereby certify that there are no misrepresentations in or falsifications of information submitted in this application. I understand that should investigations disclose any falsification of information submitted in this application, my certification(s) may be revoked. I understand that failure to comply with requirements as outlined within federal or state radon-related regulations may result in civil and/or criminal penalties.

SIGNATURE OF APPLICANT: _____ **DATE SIGNED:** _____ / _____ / _____

If you move, you must notify the Indiana Lead and Healthy Homes Program of your new address. Failure to do so will result in a delay in certification. Omission of any of the required documents or incomplete or erroneous information will result in your application being returned to you and a delay in certification.