



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH ENVIRONMENTAL HEALTH SECTION RADON PROGRAM

EHS Circular Letter #2006-48

DATE: November 1, 2006

TO: DPH-Listed Radon Mitigation Professionals

FROM: Francesca Provenzano, Health Program Supervisor
Radon Program
CT Department of Public Health

RE: Required reporting of radon mitigation work performed in CT

The CT Department of Public Health (DPH) Radon Program will be implementing a new policy requiring all DPH-listed radon mitigation contractors to submit quarterly reports to the Radon Program on their *residential* work activities. You will have a grace period to comply with this request. After December 31, 2006 any company that performs radon mitigation services in CT that does not report data to this program will be removed from the list maintained by the CT DPH.

The following table defines the quarterly reporting periods, and deadlines for receipt of reports (postmark date). Do not send the Radon Program data on a rolling basis.

	Quarterly Reporting Periods	Deadline For Mailing Report
Q1	June 1 through August 31	September 30
Q2	September 1 through November 30	December 31
Q3	December 1 through February 28	March 30
Q4	March 1 through May 31	June 30

The data collected by the DPH Radon Program will be used to measure radon risk reduction and evaluate program effectiveness. The data will be reported to the Environmental Protection Agency. It will only be released as aggregate data. Personal identifiers (e.g., street address, or company name) will not be released.

All reports must be submitted in an electronic format that can be imported into an Excel spreadsheet. Specific formatting information, a sample report and an electronic version (in Excel) are included with this memorandum. Please mail quarterly report data sets (on CD or floppy disk) to the DPH Radon Program at the following address:

Confidential Health Data
Attn: Francesca Provenzano, Health Program Supervisor
CT Department of Public Health
Radon Program
410 Capitol Avenue, MS # 51RAD
Hartford, CT 06134-0308

If you are unable to supply the data to the DPH in an electronic format, as requested, please contact me via e-mail at: francesca.provenzano@po.state.ct.us or by telephone at (860) 509-7390 in order to resolve the issue.

Thank you for your continued cooperation.

Company name: _____
 Contact person: _____
 Company address: _____

							FOR AIR	FOR AIR	FOR AIR	FOR AIR OR WATER:	FOR AIR OR WATER:	FOR WATER:
Date work was Performed	Street Address	Town	Zip Code	Basement?	Basement Type	Work was Performed to Reduce Rn in:	Pre-Mitigation Radon Test Location	Post-Mitigation Radon Test Location	Type of Work Performed	PRE-Mitigation Rn Level	POST-Mitigation Rn Level	Type of System installed:
mm/dd/yyyy	# and NAME OF STREET	TOWN NAME	5 digit zip code	Y = YES N = NO	(0) = Finished or partially finished (1) = Unfinished, but usable (bare concrete floor and walls) (2) = Not suitable for routine use (dirt floor / low ceiling / wet)	AIR or WATER	(0)=Basement (1) =1 st floor (2)= 2 nd floor	(0)=Basement (1)=1 st floor (2)=2 nd floor	(1)=Installed active SSD (2)=Install air-to-air heat exchanger (3)=Sealing / caulking ONLY (4)=Replace existing fan (5)=Add fan to existing passive vent (6) = Install RRNC features in new construction	___pCi/L	___pCi/L	(1)=GAC or (2)=Aeration

Directions on formatting:

- 1) Fill in data fields using the format described above.
- 2) If work performed on a property includes the treatment of both radon in air and water, two separate records (i.e., two separate lines) should be reported using the same property address.
- 3) If the radon-in-water or radon-in-air data fields are not applicable, please leave the field BLANK. That is, the report should always contain 13 columns of data.

Company name: ABC Radon Reduction
Contact person: Joe Smith
Company address: 123 Main Street, Harford, CT 06134

SAMPLE REPORT

							FOR AIR	FOR AIR	FOR AIR	FOR AIR OR WATER:	FOR AIR OR WATER:	FOR WATER:
Date work was Performed	Street Address	Town	Zip Code	Basement?	Basement Type	Work was Performed to Reduce	Pre-Mitigation Radon Test Location	Post-Mitigation Radon Test Location	Type of Work Performed	PRE-Mitigation Rn Level	POST-Mitigation Rn Level	Type of System installed:
08/30/2006	100 ELM RD.	HARTFORD	06134	Y	0	AIR	0	0	1	12.0	1.5	
08/30/2006	100 ELM RD.	HARTFORD	06138	Y	0	WATER				12,0000	2,500	2
06/01/06	2 MAIN ST.	HARTFORD	06134	N		AIR	1	1	4	6.0	2.0	
07/22/06	25 MAPLE AVE.	BLOOMFLIED	06075	Y	2	AIR	1	1	4	6.0	1.0	