

Client Authorizations & Communications

Client and Facilitating Staff Member Contact Information

Client/Authorized Agent _____ phone _____

Onsite Supervisor _____ phone _____

Building/Dwelling Access _____ phone _____

HVAC Operations _____ phone _____

Other Contact/Title _____ phone _____

Radon Testing Professional Contact Information

Scheduling/Logistics _____ phone _____

Onsite Supervisor _____ phone _____

Field Technician _____ phone _____

Field Technician _____ phone _____

Staff authorized for responding to occupant and public inquiries:

Name/Title _____ phone _____

Name/Title _____ phone _____

Person(s) authorized to receive report data and incremental reports:

Name/Title _____ phone _____

Name/Title _____ phone _____

Frequency of Reports

prior to testing after each phase of testing when testing is complete