

BUSINESS CONTINUOUS RADON MONITOR AMENDMENT FORM

New Jersey Department of Environmental Protection Radon Section Mail Code 25-01 PO Box 420 Trenton, New Jersey 08625-0420 Phone: (609) 984-5425 Fax: (609) 984-5595

| NJDEP USE ONLY | |
|--------------------------------------|--|
| Date Received | |
| Database updated by Approval date | |

Business Name:

Business Certification # (for amendments and renewals): ____

- Complete and sign this document (attach a spread sheet as necessary, with the same column headers shown below) and
 - Submit this form and a copy of the current calibration certificate for each monitor in the order listed below.
- The device number must be one that is listed on either the <u>NRPP</u> or <u>NRSB</u> device list.

| Device # | Manufacturer | Model | Serial # | Add CRM | Remove CRM |
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Testing with a device may begin as of the date specified in DEP's written approval confirmation. The business will be held responsible for QA for devices requested for removal until the date specified in DEP's written approval confirmation.

The individual responsible for the business's application agrees to the following and signs the amendment below in accordance with N.J.A.C. 7:28-27.4:

I verify that each affiliate who owns or will use devices listed in this amendment request has passed the required authorized proficiency test. I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attached documents. I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil and criminal penalties for submitting false, inaccurate, or incomplete information, including the possibility of fine and/or imprisonment. I am aware that the certification for which this business is applying requires compliance with N.J.A.C. 7:28-27 at all times when the business and affiliates are providing radon services under that certification.

Print Name

Date

Signature