

New Jersey Department of Environmental Protection
Radon Section
Mail Code 25-01
P. O. Box 420
Trenton, NJ 08625-0420
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NJDEP USE ONLY	
Date Received	_____
Received By	_____

INITIAL RADON MITIGATION BUSINESS
CERTIFICATION APPLICATION \$400.00

Complete all items in Sections A, B and C, provide attachments in Section D, and sign section E. Mail the original application and NONREFUNDABLE \$400 application fee (payable to Treasurer, State of New Jersey) to the above address. If mailing via FedEx, UPS, or DHL, use 25 Arctic Pkwy, Ewing, NJ 08638.

A. BUSINESS INFORMATION

1. Business Name*:

1. _____
(Business Name)

2. Mailing Address*:

2. _____
(Street)

(City) (State) (Zip)

(County)

3. Physical Address:

3. _____
(Street)

(City) (State) (Zip)

(County)

4. Primary Person in Charge:

4. _____
(Name) Mr. Mrs.
Miss Ms.

(E-mail) (Title)

Secondary Person in Charge:

(Name) Mr. Mrs.
Miss Ms.

(E-mail) (Title)

5. Person in Charge of Tracking Affiliates:

5. _____
(Name) Mr. Mrs.
Miss Ms.

(E-mail) (Title)

6. Business Telephone Numbers*:

6. _____
(Extension)

7. Business Fax Numbers:

7. _____
(Extension)

8. Branch Information*:

8. _____
(Branch Name)

Physical Address (street, city, state & zip code)

(Phone)

(Branch Name)

Physical Address (street, city, state & zip code)

(Phone)

9. Business Status (check one):

Corporation Limited Liability Corporation

Partnership Sole Proprietorship

Municipality, county, state, Federal, or other public agency

10. Each owner, officer, general and limited partner, director, and principal shareholder of the business:

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

11. Corporation Information:

Name of Parent Corporation:

State of Domestic Incorporation:

Principal Places of Business:

B. BUILDING TYPES TO BE MITIGATED* (choose one or more)

- Residential single-family buildings following ANSI/AARST SGM-SF-2017
- Residential multifamily buildings (apartment, townhouse, condominium, other) following ANSI/AARST RMS-MF-2018
- Non-residential large buildings following ANSI/AARST RMS-LB-2018
- Schools following ANSI/AARST RMS-LB-2018

C. EXPOSURE TRACKING METHOD (choose one)

- Passive long-term detector for each affiliate for a minimum of three consecutive months
- Estimate using the highest pre-mitigation radon test results obtained by any affiliate and the maximum total time spent by any affiliate in buildings while conducting mitigations for the past year

D. ATTACHMENTS

Provide all attachments in the following order using documents found at:

https://www.state.nj.us/dep/rpp/radon/rad_cert_req.html

1. Form contract for a fan installation only [N.J.A.C. 7:28-27.13(1)]
2. Form contract for a full mitigation system installation [N.J.A.C. 7:28-27.13(1)]
3. Radiological safety plan (complete the plan found at the link above by filling in minimal business-specific information OR prepare and submit your own plan in accordance with N.J.A.C. 7:28-27.15)

E. CERTIFICATION SIGNATORIES

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.

Signature by individual stated in N.J.A.C. 7:28-27.4(c)

Date

Title

Please go to the following web site for additional certification information.

https://www.state.nj.us/dep/rpp/radon/rad_cert_req.html

* Denotes information that will be provided to the public on

<https://nj.gov/dep/rpp/radon>