

Ohio Department of Health Radon Mitigation Contractor License Application

Read the instructions carefully and answer all questions as completely as possible. Applications with incorrect or missing information will be returned to you for correction which will delay the application approval process.

Mail **(do not FAX)** the completed application and any supporting documentation to:
Ohio Department of Health, Revenue Processing, P.O. Box 15278, Columbus, Ohio 43215

Make check or money order payable to: **Treasurer, State of Ohio**, in the amount indicated below.

Sole proprietor—No charge All others—\$800.00

Only check the sole proprietor box if you meet the requirements defined in rule 3701-69-05(E). If you are submitting this application as a sole proprietor, you must also submit a radon mitigation specialist application or proof of current radon mitigation specialist licensure.

Completion of this form is required by rule 3701-69-05 of the Ohio Administrative Code

Check One <input type="checkbox"/> New <input type="checkbox"/> Renewal – License # _____		Check One <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Other		Federal tax ID #	
Business/Company name			Business/Company website		
Company address		City		State	Zip
Name(s) of chief executive officer partners, or sole proprietor		Business phone		Business Fax	
Business contact person				Contact person last 4 digits of SS#	
Contact person address				Contact person phone	
City		State	Zip	Email address	

- ✓ Attach proof that business name is registered with the Ohio Secretary of State.
- ✓ Attach a list of names of all licensed (include license #) and unlicensed employees directly involved in radon mitigation system installation.
- ✓ Attach names and credentials of persons conducting worker training.
- ✓ Attach quality assurance and quality control procedures to be utilized in radon testing and radon mitigation.
- ✓ Attach radiological safety plan. This should include both administrative and operational aspects of the safety program and a listing of safety-related equipment to be provided to workers.
- ✓ Attach an explanation of the method used to calibrate radon measurement instruments.
- ✓ Attach a copy of the most recent calibration certificate for each of your radon measurement instrument(s).

- ✓ Has the applicant or an affiliated, associated, related person ever been a party to any radon mitigation or testing projects which were terminated prior to completion?
 Yes No If Yes, submit detailed explanation.
- ✓ Has the applicant or an affiliated, associated, related person ever been a party to any penalties, citations, or administrative orders or actions pertaining to radon mitigation or radon testing?
 Yes No If Yes, submit detailed explanation.
- ✓ Has the applicant or an affiliated, associated, related person ever been a party to any lawsuits pertaining to radon mitigation or radon testing?
 Yes No If Yes, copies of initial pleadings and final orders shall be attached to the application.

List instrumentation to be used for radon and/or radon progeny measurement. Attach additional sheets if necessary.

Type	Manufacturer	Model #	Serial #	Cal. frequency	Calibration provider

If you use a passive radon monitor (e.g. charcoal canister or alpha track) but do not analyze them, list the name and Ohio approval number the laboratory providing analysis. Attach additional sheets if necessary.

Laboratory name	Laboratory address	ODH approval (RL#)

This application will not be accepted if signature is omitted

I certify that all information contained herein this application, including any supplements attached hereto, is true and correct.

Signature of applicant	Date
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Keep a copy of your application and supporting documentation for your files!