Susan Gouveia

From: Lashway, Lisa
Sent: Friday, May 16, 2014 9:08 AM
To: Canning, Sean; Susan Gouveia; Wilpert, Frank
Subject: FW: Radon Awareness Program
Attachments: RAP Packet 2014.doc; RAP Municipal Offical 2014.pdf

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From: Randazzo, Cindy [mailto:Cindy.Randazzo@dep.state.nj.us]
Sent: Thursday, May 15, 2014 3:13 PM
To: Randazzo, Cindy
Cc: Rogers, Joseph; Renaud, Charles
Subject: Radon Awareness Program

Dear Municipal Official:

Please see the attached letter and program description regarding the Department's Radon Awareness Program.

If you have any questions regarding the program please contact Charles Renaud at 609-984-5423.

Sincerely,

Cindy W. Randazzo
Director
Office of Local Government Assistance
New Jersey Department of Environmental Protection
401 E. State Street
P.O. Box 402
Trenton, NJ 08625-0402

Office: 609-633-7700
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www.nj.gov/dep/

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2014
Radon Awareness Program
(RAP)

REDUCE
RADON

Division of Environmental Safety and Health
Bureau of Environmental Radiation
Radon Section
Mail Code 25-01
PO Box 420
Trenton, New Jersey 08625-0420
Phone: (609) 984-5425
Fax: (609) 984-5595

Radon Awareness Program Requirements (RAP)

1. A **Participation Form** (attached) must be submitted to the Radon Section prior to purchasing test devices. Participants will be selected on a **first come first serve** basis based on available funding. Test devices shall be purchased only after receipt of an approval letter issued by Radon Section.

2. A **Press Release** announcing the availability of test kits must be released to at least one local and one regional newspaper. (see attached sample). Copies of both press release are required for reimbursement.

3. Test kits must be purchased from a certified measurement company which can be found at www.njradon.org using a standard competitive quotation process (written or telephone quotations from three vendors must be documented prior to purchase) and provided to the Radon Section at the time of reimbursement.

4. Participants must ensure that the business from which the devices are purchased includes the range of reference numbers that correspond to all of the testing devices purchased. This range must be written on the invoice when it is submitted for reimbursement to the Radon Section. This information is used by the Radon Section for tracking purposes.

5. Test kits must be distributed to homeowners only who reside in the participant's municipality or county either free of charge or for a fee not to exceed the purchase price (per the discretion of the municipality/county). Coupons only (not test kits) should be distributed at planned events such as health fairs, etc., with arrangements made to pick up the test kit at a specific location (health department, etc.).

6. Records must be maintained which clearly identify the name, address, telephone number, and e-mail address (if available), of all individuals who receive a test kit, along with the test kit number and the date that the test kit was received (coupons/forms with required information are usually pre-printed by the RAP participant and test kit recipients are asked to fill them out prior to receiving a test kit). The participant shall submit this information to the Radon Section on a monthly basis via an Excel spread-sheet. In addition, a list must also be obtained from the laboratory identifying all test kits returned to them for analysis. This information is used by the Radon Section for tracking purposes.

7. A **Reimbursement Form** (attached) must be filled out and submitted to the Radon Section along with all with all required records.

8. Reimbursement shall not exceed $1000 per municipality/county (including shipping costs).

New Jersey Department of Environmental Protection
Radon Awareness Program
Participation Form

_____ We wish to participate in the Radon Awareness Program (RAP). We are requesting (specify amount; can not exceed $1000 including shipping) _____ for test kits.

Contact Person for Radon Awareness Program:

Name: _____ Phone: _____

Title: _____

Address: _____

_____
Health Official / County Cancer Coalition Official (Signature)

_____
Health Official/ County Cancer Coalition Official (print)

_____
Date

This form must be returned to RAP, NJDEP Radon Section, Mail Code-25-01, PO Box 420, Trenton, New Jersey 08625-0420, fax: (609) 984-5595.
Participants will be selected on a **first come first serve basis** based on available funding.

Coupons only (not test kits) should be distributed at planned events such as health fairs, etc., with arrangements made to pick up the test kit at a specific location such as a health department, etc.

Please describe how you plan to distribute the test kits and informational brochures:

_____
_____
_____
_____

***Do Not Purchase Test Kits Until Written Approval Is Received**

Once written approval is received, test kits must be purchased from a certified measurement business which can be found at www.njradon.org. Test kit recipient information along with associated test kit number and date received (identified on coupons/forms) shall be submitted to the Radon Section on a monthly basis via an Excel spread-sheet. Should there be any remaining test kits at the time of the reimbursement request, the participant agrees to continue to submit required monthly updates until the test kit supply is depleted.

-Certified measurement businesses are not allowed to provide results to RAP Participants-

Questions? Contact Charles Renaud of the Radon Section, (800) 648-0394 or (609) 984-5423

SAMPLE PRESS RELEASE

FOR IMMEDATE RELEASE

CONTACT: Name & Phone

[County Name] Initiates Radon Awareness Program

County Official _____ announced today that [County Name] will cooperate with the New Jersey Department of Environmental Protection (DEP) Radon Section in a special radon awareness program to promote testing for radon in homes.

In its "Radon Awareness Program" (RAP), the DEP Radon Section provides outreach assistance to promote radon testing in homes.

County Official _____ explained that "We are pleased to cooperate with the DEP in this program to ensure that all residents are aware of the need to test homes and reduce radon levels where necessary. Testing is the only way to know if you and your family are at risk from radon. Radon testing is easy and problems can be fixed (mitigated)."

For communities participating in the RAP, the DEP Radon Section provides the county health department with radon informational materials including brochures, videotapes, posters, and give-aways, to support local outreach initiatives.

Health Officer _____ described outreach efforts that will be undertaken in [County Name]. [Describe what will be done, including availability of a limited number of free test kits on a first-come, first-served basis.]

Radon is a radioactive gas that occurs naturally when uranium breaks down in the soil and in rock formations. Small amounts of uranium are found in nearly all soils and rocks. Radon gas moves up through the soil and finds its way into homes through cracks in the foundation and openings around sump pumps, pipes and drains.

High radon levels are associated with a greater risk of lung cancer. Radon is the leading cause of lung cancer for non-smokers. Overall, radon is the second leading cause of lung cancer resulting in approximately 21,000 deaths in the United States per year. It is recommended that homes be mitigated if they have radon concentrations of 4 pCi/L or more.

There is no truly "safe" level of radon since lung cancer can result from very low exposures to radon; however, the risk decreases as the radon concentration decreases. If your test result is less than 4.0 pCi/L, you may want to discuss with mitigation companies whether the radon level can be brought down still further. In about half of the homes that have been mitigated in New Jersey, radon levels have been brought to less than 1 pCi/L.

Homeowners who tested in the past and found low levels of radon may wish to retest to determine if radon concentrations may have changed, due to changes in air flow within the house

from new additions or other renovations, or due to new construction nearby that may have caused changes in the local geology.

In addition to test kits provided by [County Name], the DEP's Radon Section at (800) 648-0394 or www.njradon.org can provide a list of state-certified companies that provide testing services or do-it-yourself test kits, as well as companies that provide radon remediation services.

For more information on radon, contact [county contact and phone number] or the DEP Radon Section at (800) 648-0394 or www.njradon.org.

New Jersey Department of Environmental Protection
Radon Awareness Program (RAP)
REIMBURSEMENT FORM

To obtain reimbursement for test kits you must:

1. Be a participant in the Radon Awareness Program.
2. Have purchased up to $1000 of test kits (including shipping costs) from a certified radon measurement business for distribution to municipality/county homeowners only either free of charge or for a fee not to exceed the purchase price.
3. Submit a copy of written or telephone quotations from three vendors.
4. Submit legible records of all test kit recipients and associated test kit numbers and date received (identified on coupons/forms) to the Radon Section on a monthly basis via an Excel spreadsheet. In addition, a list must be obtained from the laboratory identifying all test kits returned to them for analysis. Should there be any remaining test kits at the time of the reimbursement request, the participant agrees to continue to submit required monthly updates until the test kit supply is depleted.
5. Submit a copy of the invoice from the certified radon measurement business with the device reference number range clearly displayed.
6. Submit copies of press releases from at least one local and one regional newspaper.
7. Submit a State of New Jersey Payment Voucher (Vendor Invoice) with the following completed: sections A, D, E, and F, along with a description of the test device, unit price and total amount. Please contact the Radon Section to obtain a voucher if necessary.
8. Complete and sign the form below and return to: RAP, NJDEP Radon Section, Mail Code 25-01, PO Box 420, Trenton, NJ 08625-0420.
9. Adhere to all Radon Awareness Program Requirements

-Items 1-9 must be completed to qualify for reimbursement-
*** Reimbursement will not be issued if all requirements are not met.**

Questions can be directed to Charles Renaud of the Radon Section at (800) 648-0394 or (609) 984-5423.

Name of Participant: _____

Please attach a description of your radon awareness program, and method of publicizing the test kits (copies of any flyers, posters created, etc., in addition to press releases).

Payee for Check:

_____ PAYEE NAME

_____ PAYEE FEDERAL ID NUMBER

Check should be mailed to:

Contact Person for Radon Awareness Program:

Contact Name: _____ Phone Number: _____

Address: _____

_____
Signature of Contact Person

State of New Jersey
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Division of Environmental Safety and Health
Bureau of Environmental Radiation
Radon Section
Mail Code 25-01
P.O. Box 420
Trenton, NJ 08625-0420
Phone: (609) 984-5425
Fax: (609) 984-5595

CHRIS CHRISTIE
Governor

KIM GUADAGNO
Lt. Governor

BOB MARTIN
Commissioner

May 12, 2014

Dear Municipal Official:

The New Jersey Department of Environmental Protection will reimburse up to $1,000 to a municipality toward their purchase of radon test devices. The attached Radon Awareness Program packet provides all of the participation details.

Funds are limited and applications will be processed on a first come, first served basis. Therefore, test devices should be purchased only after receipt of an approval letter issued by the Radon Section.

If you have any questions about the program, please call me at (609) 984-5423.

Sincerely yours,

Charles Renaud
Radiation Physicist

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