RADON TEST INSTRUCTIONS

Please read these instructions carefully BEFORE proceeding with the radon test.

TEST KITS SHOULD BE EXPOSED FOR A PERIOD OF 2 - 6 DAYS (48 - 144 HOURS)

NOTE: The MINIMUM EXPOSURE IS 48 HOURS (2 days in hours) and the MAXIMUM EXPOSURE IS 144 HOURS (6 days in hours).

PERFORMING THE TEST:

1. Place the canister in an appropriate test location as listed below based on the blank type. **TEST DEVICE MUST BE USED AS LABELED.**

- <u>Field Blank</u>-Leave canister at test address in addition to standard test being performed at property. Use the same test address, test start/stop dates, test start/stop times as the test being conducted at the property.
- <u>Travel Blank</u>-Leave canister in travel vehicle for the entire duration that a test is being performed at property. Use the same test address, test start/stop dates, test start/stop times as the test being conducted at the property.
- <u>Inventory Blank</u>-Leave canister in office canister storage location for the duration of the test. Use address of inventory location for the test address and test dates/times that represent the appropriate exposure period of the test.
- 2. Please remember to choose the correct blank type on the opposite side of this form. The device is labeled as to the type of blank test that is to be performed!
- 3. <u>DO NOT OPEN THE BLANK CANISTER!</u> This <u>BLANK</u> canister remains sealed throughout the entire testing period.
- **4.** RECORD THE START DATE AND START TIME ON THE REVERSE SIDE OF THIS SHEET. (Remember to circle AM or PM on your stop time because the correct time will factor into the final radon calculation)
- **5.** Leave the test canister undisturbed during the testing period.
- **6.** After the test canister has been exposed for the proper amount of time (48-144 hours), RECORD THE STOP DATE AND STOP TIME ON THE REVERSE SIDE OF THIS SHEET. (Remember to circle AM or PM on your stop time because the correct time will factor into the final radon calculation)
- 7. COMPLETELY fill out all other information (except optional file #) on the reverse side of this sheet. FAILURE TO DO SO MAY PROHIBIT ANALYSIS!
- **8.** Place test canister along with this data form inside your mailing envelope and MAIL WITHIN ONE DAY to the laboratory for analysis. We must receive your test canister within 6 days after the stop of your test, no later than 12 noon, for the test to be valid. Remember to keep a copy of your test canister ID number for future reference.

THE LABORATORY IS NOT RESPONSIBLE FOR DEVICES RECIEVED LATE OR DAMAGED IN SHIPMENT!



The shelf life of the test canister expires one year after shipment date.