RADON INSPECTION REPORT



House Detectives, Inc. PO Box 357 Kalispell, MT 59903 Office 406-756-3636 info@housedetectivesinc.com

Client(s):	Client
Property Address:	_164 Sample Lane Kalispell, MT 59901
Certified Radon Measure	ment Specialist:Jay W. Gorder
Attendance: [] Buyer [] Buyers Agent [] Seller [] Listing Agent [] Tenant [] Inspector
Other:Owner	n

INSPECTION TYPE: [X] Screening [] Follow-up/Confirmation [] Post-Mitigation Analysis [] Simultaneous Multiple Monitors [] Single Monitor

INSPECTION FEE: \$ ____99.00____

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REPORT CONFIDENTIALITY

This report is solely for the benefit of the Client. Any person or party designated by the Client to receive information in this report shall be subject to the TERMS AND CONDITIONS contained herein. Such designation shall be provided in writing to House Detectives, Inc.

LIMITATIONS OF LIABILITY REGARDING RADON TESTING

House Detectives, Inc. cannot guarantee the necessary conditions were maintained during the test period. There can be uncertainty with any radon measurement due to statistical variations and other factors such as changes in the weather and operation of the dwelling. While House Detectives, Inc. and our agents make every effort to maintain the highest possible quality control and include verification in our procedures, we make NO WARRANTY OF ANY KIND, EXPRESSED OR IMPLIED, for the consequences of erroneous test results. House Detectives, Inc. nor its employees or agents shall be liable under any claim, charge or demand, whether in contract, or otherwise, for any and all loss, cost, charge, claim, demand, fee, or expense of any nature or kind arising out of, connected with, resulting from, or sustained as a result of any radon test.

RADON INSPECTION DECLARATION OF VOLUNTARY COMPLIANCE

As the responsible party for the test location listed below, I hereby acknowledge receipt of the EPA's *Home Buyer's and Seller's Guide to Radon*. I further understand that potential purchasers and/or lenders will be making important decisions pending the outcome of this test. Given this information I hereby certify that:

(1) I agree to keep this house closed (except for normal entry and exit) for a minimum of 12 hours prior to the start of the test. If this condition is not met, the test shall be extended a minimum of 12 hours under closed house conditions.

(2) I agree to keep all doors and windows closed during the entire test period except for normal entry and exit.

(3) I will not knowingly alter the test environment in any way including, but not limited to, raising or lowering the thermostat(s) or changing HVAC fan controls.

(4) I will not tamper with, remove, or change the location of the test device(s).

(5) I will report any circumstances that occur during the test that may influence the final results.

(6) If I have any questions about the test I will contact the testing firm immediately.

(7) I have read, understand, and agree to the "Limits of Liability Regarding Radon Testing", and the "Radon Inspection Declaration of Voluntary Compliance".

Occupant or Responsible Party Signature:___Client_____

Address: ______164 Sample Lane_____

City ______Kalispell _____State ____MT___ Zip ___59901__ Date ___11/8/14 - 11/10/14___ Radon Measurement Professional: __Jay W. Gorder___AARST-NRPP Member 107635 RT_ Expires 6/30/2016_

> Testing Firm: House Detectives, Inc. PO Box 357 Kalispell, MT 59903 406-756-3636 info@housedetectivesinc.com



Radon Inspection Report: Inspection Conditions

 Start Date: ___11/8/14____ End Date: __11/11/14____

 Start Time: ___4:42 pm___ End Time: __9:42 am____

 Season:

 ____Winter

 ____Spring

 ____Summer

 __X_Fall

 Weather Conditions: (Start of Test)

 ____Sunny _X_Cloudy ____Rain ___Snow ____High Winds ____Thunderstorms

 Temperature: __42F_____

 Weather Conditions: (End of Test)

 _____Sunny ____Cloudy ____Rain _X_Snow _X_High Winds _____Thunderstorms

Temperature: ___14F_____

Comments:_____Blowing & drifting snow for about 24 hours from the night of 11/9 through night of 11/10_____

Visual Inspection Checklist

Basement /Crawlspace

Type:Full Partial _X_ Crawl Space Slab None
Floor:Concrete _X_ Dirt Wood Other
Access:
Stairs
X Interior Opening
Exterior Opening
Access Blocked
Not Applicable
Comments:

Possible radon entry points:	Yes No N/A
- Are there cracks in the concrete slab?	X_
 Are there cracks in the foundation walls? 	X
 Are there floor drains with dry p-traps? 	X
 Are there sump pumps without sealed covers? 	X
- Are there unsealed joints?	X
- Are there areas of exposed earth in the basement?	X
 Are there any gaps around service pipes? 	X
- Is there insufficient ventilation?	X_

Water Service

Type: _X_Public ____ Private ____ Shared Well ____ Combination

Radon Water Sample: ____Yes _X_ No

Radon Inspection Report: Mitigation System Checklist

Mitigation System:	
Type:Active Passive Inactive _X_ Nor	ne
Engaged during testing:Yes No	
Comments:	
Active Mitigation System Checklist	(If Applicable)
Electric Vent Fan:	Vent Pipe (sub-slab to roof):
Present	Satisfactory Not Satisfactory
Not Present	
Not Functioning	Comments:
Comments:	
	Cracks and Joints:
System Failure Warning Device:	Sealed
Present	Not Sealed
Not Present	Some areas are unsealed
Not Functioning	
Comments:	Comments:
<u>Passive Mitigation System Checklist</u>	t (If Applicable)
Vent Pipe (sub-slab to roof):	Vapor Barrier between soil and house:
Satisfactory	Present, not completely sealed Present &
Not Satisfactory	sealed Partially present or not present
Comments:	
	Comments:
Cracks and Joints:	Does the mitigation system appear to
Sealed	meet current EPA protocols?
Not Sealed	Yes No N/A
Some areas are unsealed	Comments:
Comments:	

Radon Inspection Report: Mitigation System

Vent pipe size/type and labeling	<u>Yes</u>	No	<u>N.A.</u>
Are the vent pipe/fittings something other than PVC, ABS (or equivalent).			_X_
Is the vent pipe diameter less than 3" or greater than 4"?			_X_
Are there sections of vent pipe that are not properly labeled as mitigation system where			v
pipe is visible?			_X_
Vent pipe location and installation	<u>Yes</u>	<u>No</u>	<u>N.A.</u>
Does the vent pipe terminate within 10-feet of the ground, or have an exhaust point less			_x_
than 12" above the eave/roof?			_^_
Does the vent pipe terminate within 10-feet of any doors or windows or less than 2-feet			х
above any doors or windows? (also applies to nearby buildings)			
Does the pipe penetrate the firewall without a fire collar/damper present?			_X_
Vent pipe system integrity	<u>Yes</u>	No	<u>N.A.</u>
Are there any pipe fittings/connections that appear to be improperly sealed?			_X_
Are there visible openings or breaks in the vent pipe system?			_X_
Is the pressure monitor missing, not operating properly, or inaccessible? (Active systems only)			_x_
Vertical vent pipe penetrations	<u>Yes</u>	<u>No</u>	<u>N.A.</u>
Is the caulking/sealing around the vent pipe in the basement floor peeling or coming loose?			_X_
Does the vapor barrier stop short of covering the entire surface or have seams that do not overlap by at least 12"?			_x_
Electrical (Active systems only)	Yes	No	<u>N.A.</u>
Does the vent fan cord appear to be more than 6-feet long?			_x_
If the vent fan is hard wired outside the building, is it properly connected to a disconnect switch?			_x_
Is the vent fan wired through a switched circuit?			_x_
Is the circuit breaker that controls the vent fan improperly labeled or not labeled "Radon System"?			_x_
Vent of Mitigation fans	Yes	<u>No</u>	<u>N.A.</u>
Is the vent fan mounted on a horizontal section of pipe?			×
Is the vent fan located in conditioned space (i.e. not in the attic)?			_x_
(A fan located in the basement does not meet post-1991 EPA recommendations or standards)			
Sump	Yes	No	<u>N.A.</u>
Is the sump pump open or not properly sealed?			_x_
If the sump is sealed, is it missing a trapped drain or equivalent?			_x_

Comments:

Radon Inspection Report: Testing

Duration: _X_ Short-Term ____ Long-Term Length of test: ___65 Hours

Testing Device:

- _X_ Active
- ____ Passive
- ____ Combination
- ____ None

Closed House Conditions:

X Yes

____ No

Anti-Tampering Mechanisms:

____ Yes _X_ No

List:_____

Location of testing	g device	1:	NW	bedroom_	
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Type of device:

- _X_ Continuous radon monitor (CRM) Sun Nuclear Model 1028
- ____ Charcoal canister
- ____ Alpha-track detector
- ____ Charcoal liquid scintillation
- ____ Electret ion chamber
- ____ Continuous working level monitor

Location of testing device 2:

____N/A___

Type of device:

- ____ Continuous radon monitor (CRM) Sun Nuclear Model 1028
- ____ Charcoal canister
- ____ Alpha-track detector
- ____ Charcoal liquid scintillation
- ____ Electret ion chamber
- ____ Continuous working level monitor

Comments:

<u>Radon results:</u>	Yes	No
 Is a retest needed for verification of test results? 		_X_
- Were there signs of disturbance/tampering?		_X_

Testing Device 1: pCi/L: <u>1.4</u>

Testing Device 2: pCi/L: __N/A____

Average Radon Level pCi/L (testing in lowest level):

<u>1.4</u>

Suggested Course of Action:

____ Retest immediately

____ Contact mitigation professional

X No action necessary

Comments:___Re-test every two (2) years or if living conditions change, or a remodel takes place that would change the airflow inside the house.

Report delivered to client via:

[X] Email to client

- [] Email to Client Realtor
- [] Hand delivered to Realtor office
- [] UPS, Fed Ex, USPS

Report delivered by House Detectives, Inc. Representative: Jay W. Gorder

Radon Measurement Specialist Signature: _____

Time: __3:00___ [] am [X] pm Date: __11/11/14__

Radon Inspection Report: Informational Notes

This report includes test results from a radon-testing device that records the levels of radon in an air sample. The actual radon levels in the home may vary depending on many factors including, time, temperature, season, barometric pressure, ventilation, and other factors.

If the level of radon in the home is **greater than 4.0 pCi/L**, you should perform a short-term follow-up test to confirm the first test results. If the average of the two tests is still **greater than 4.0 pCi/L**, consult a professional radon mitigation specialist to discuss your options for reducing the level of radon in the home.

If the level of radon in the home is **equal to or near 4.0 pCi/L**, it may be necessary to perform further radon testing in order to determine the actual level of radon in the home.

If the level of radon in the home is <4.0 pCi/L, a follow-up test is not necessary now. Consider testing again in the future. If use of a lower level increases, a new owner occupies the home, or a remodel takes place and changes the interior flow of air, a follow-up test should be completed.

The following websites should be reviewed by the client. These resources can answer any questions about radon, and how to proceed after you have a radon test. Cut and paste the address into your browser, or simply perform a search on the internet of "EPA Radon Guidelines", and these documents will be there.

- 1. www.epa.gov/radon/pubs/citguide.html (Citizens Guide to Radon)
- 2. www.epa.gov/radon/pubs/hmbyguid.html (Home Buyer/Seller Guide to Radon)
- 3. www.**epa**.gov/**radon**/pdfs/homes_protocols.pdf (Protocols for Radon and Radon Decay Products Measurements in Homes)
- 4. www.radon.com/radon/radon_levels.html (Acceptable Radon Levels vs Safe Radon Levels)