Congress:
It’s time to act on radon!
The National Radon Proficiency Program (NRPP) is recognized as the nation’s leading certification program for radon professionals, with over 2,500 certified professionals qualified in measurement, mitigation and as radon laboratories.

Administered by AARST (American Association of Radon Scientists and Technologists), professionals engage in a process of continuing education, professional development and quality assurance protocols. All members are expected to operate in accordance with ethical practices based on national standards as well as adhering to local rules and regulations. Through the work of an advisory board and technical committees, the AARST–NRPP is involved in a process of continued quality and technical improvement and is working on new credentials which reflect state of the art approaches to radon services in the home, large buildings and schools.

NRPP staff and certified professionals are committed to excellence and professional compliance to national standards. This raises the professional profile of all radon professionals and ensures that radon measurement and mitigation in the home and workplace is properly addressed.

www.NRPP.info
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info@nrpp.info

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Fletcher, NC 28732
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AARST, the American Association of Radon Scientists & Technologists, is a nonprofit, professional organization dedicated to the highest standard of excellence and ethical performance of radon measurement, mitigation, and transfer of information for the benefit of members, consumers, and the public at large. AARST’s leadership is democratically elected by the members.

AARST represents your voice as we meet the wide range of challenges facing radon professionals and the community. Your membership and participation provides you a voice in the changes to come, and allows you to gain updated information, discover new techniques, learn about new problems before they occur, and hone your professional skills.

AARST has several local chapters where you can meet other radon professionals and state and federal officials who work with the radon industry.

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I don’t know if I read this article’s title statement somewhere or if it was inspired, but it has become the cornerstone of my advocacy efforts.

I unknowingly became a radon advocate just three months in late 2010, after I had finished with treatment (surgery and chemotherapy) for radon-induced lung cancer. The director of our American Lung Association asked me to share my story with the Board of Directors and staff. What surprised me was that even in such a group, there were those who knew little or nothing about radon and some who had plenty of misinformation. The reception I got was warm and encouraging, and so my role as a radon advocate began.

Anyone can become a radon advocate. The ways are only limited by your imagination.

Over the years, I have developed similar relationships with the Iowa Cancer Consortium, the American Cancer Society Cancer Action Network (ACS CAN), CanSAR, AARST, and Free to Breathe. Although I’ve never considered myself a public speaker, I soon worked up a few short presentations that sometimes include PowerPoint slides—mostly pictures, not charts and words. I never imagined that I would consider radon advocacy a vital part of my cancer treatment, but it is.

One teaching tool I find invaluable is the Radon & You booklet developed by the American Lung Association and Iowa Radon Coalition (as part of the Iowa Cancer Consortium). It’s an excellent resource for sharing facts, busting myths, and moving people to test their homes. None of it is copyrighted, so I would urge you to contact your local organizations to develop a similar booklet. Everyone gets a booklet before I start a presentation. I point out that they can call 800-383-5992 for any radon questions and order all of the free booklets they would like.

Last year, with the help of the Iowa Cancer Consortium and some generous donors, I sent letter sharing a bit of my story, a test kit and a Radon & You booklet to all 150 state legislators. Some kits were used, many were not, and some had to be replaced because of testing errors! I’m lucky to live near the state Capitol, so this year I visited with all the freshman legislators and gave them a test kit as well. One of them is a retired physics teacher. What a joy to visit with someone who totally gets it!

Our ACS CAN supports radon policy, so I’ve learned a lot about lobbying from them. If you haven’t connected with your state ACS CAN, I strongly urge you to do so.

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Anyone can become a radon advocate. The ways are only limited by your imagination.

- Call organizations that might need speakers for their wellness programs.
- Call your ALA or county health department and let them know you would be available to accompany someone who is going out to speak to a group about radon.
- A $10 donation will get you a membership to ACS CAN.
- Join your state Cancer Consortium. Prevention is one of their main goals. Radon needs to be a part of that goal. If it isn’t, there’s your first advocacy job. Once it’s a part of the goal, those in public health should run with it.
- Start a FaceBook page and share radon facts and events with Friends.
- Get to know the elected officials who represent you. Send an email; make a call; attend a forum. Share what you know about radon and how it affects so many in your state. Ask you him/her (or any senator or representative) to become a radon champion by sponsoring a piece of legislation.
- Attend events by organizations such ALA, Free to Breathe, the local PTA, etc. Ask if you can set up a table, sell kits (with some of the proceeds going to the organization), and talk to people about radon.
- Share radon booklets with your physician, dentist, hairdresser or local library.
- Write a short paragraph for your local newspaper – any time of year!
- Network at regional and national meetings. What are others doing to promote radon issues?

Gail Orcutt is a retired special education and reading teacher. She was “happily enjoying my second year of retirement: gardening, golfing, cooking, quilting, and tutoring an adult learner” when she was diagnosed with lung cancer the day before her 57th birthday. She is now a dedicated and tireless champion for radon awareness, education, and legislation.
And We Should Stop Promoting Fictions That Everything Works

After nearly 30 years of operating since the passage of the 1988 Indoor Radon Abatement Act, AARST has routinely notified policy makers that more Americans may be at risk from radon than ever before, despite years of government, non-government and industry effort to address radon risk reduction.

In 2010, nine federal agencies came together to develop the Federal Radon Action Plan and to launch more than 30 new projects that promote radon action through three approaches:

- Testing for and mitigating high radon in buildings using professional radon services.
- Providing financial incentives and direct support where needed for radon risk reduction.
- Demonstrating the importance, feasibility and value of radon risk reduction.

The Federal Radon Action Plan had some limited success but, more importantly, it was the beginning of an inter-agency effort and the Environmental Protection Agency is to be commended on starting this initiative. However, the nation has not achieved the goals of the 1988 law and if the US continues with a solely voluntary approach the number of homes that are built with high radon will continue to grow.

This past January, the American Lung Association President Harold Wimmer and EPA Administrator Gina McCarthy announced work on this new plan. The plan’s near-term goals are to reduce radon risk in 5 million homes and to save 3,200 lives by 2020.

AARST premises our support for this work in stating that new policies and new authorizations from both state legislatures and our U.S. Congress will be necessary to get the job done.

Reduce radon in 5 million homes in 5 years?

This is an aggressive goal. One that will require 20,000 properly trained and certified measurement professionals as well as 5,000 certified mitigators but, in addition, real policies that will provide economic drivers that will sustain the economics of finding and fixing these homes properly. To increase the risk reduction factors by 10, the US needs real policies that drive real economic solutions. A voluntary approach won’t create a work force to scale.

Why should good building contractors spend money to train and certify (and re-certify) as radon mitigation professionals when they can make more money, uncertified, as roofers? Why should this investment be made by the best and the brightest green builders if there is no return on their hard-earned investment?

The success of this new plan will be honesty—a fact-based and logical honesty to admit that everything that has been done to date has NOT been a success.

We have to stop telling and fostering the belief by the unproven dictum that every home that is reported as having radon resistant new construction (RRNC) features is a safe home. This is a lie. It’s not a little kid’s fib. It’s not sleight of hand, it’s simply egregious misinformation that lulls the public into thinking that the risk from radon is not present. Unless a home has been properly tested, RRNC has not guaranteed safe radon levels. It is unprofessional to say or imply that every home with an RRNC system has a system that works properly. It doesn’t. There is no proof to confirm this. Moreover the number of safe homes is way too low. Let’s acknowledge that the current voluntary method implemented by EPA is not working and we need a replacement.

The ultimate goal of the new plan announced by Wimmer and McCarthy is to eliminate avoidable radon-induced lung cancer in the United States by incorporating radon testing, radon mitigation, and radon-resistant...
construction into the systems that govern purchasing, financing, constructing, and renovating homes and other buildings. It’s a worthy goal and AARST hopes to be able to report fully on this plan in public announcements and in the future issues of the Radon Reporter, but you can begin working on this now.

**How?**

By supporting local adoption of building codes that incorporate and confirm RRNC; by advocating and promoting and sponsoring information and disclosure legislation in your state (similar to laws passed by Illinois and Minnesota); and by encouraging state legislation that will require testing and mitigation in existing homes, schools, public buildings, and even in the work place. Get involved, or we will see radon risk reduction slip away. We need state laws and local codes to support our efforts in Congress. We need recognition of certified professionals to do the job well. We need more good building contractors to step up to the plate and become expert in radon resistant new construction. We need every radon professional to become involved.

Eventually, the nation is going to have to replace SIRG, and we will need congressional hearings and new authorizations from Congress. That’s where we are going next with AARST, but we won’t get there without you going to your state leaders and getting action started throughout America.
Jane Malone Named AARST National Policy Director

In January, Jane Malone joined AARST as our National Policy Director. In her career in public health and safety, Jane has implemented federal policy advocacy on housing, directed national coalition and has supported local and state advocates as well as leading federal, state and local policy work and risk data analysis. Her work since the late 1990’s has demonstrated a diverse experience in housing and community development with both National Center for Healthy Housing and the Alliance for Healthy Homes, and has shown proven results in policy change, leadership, system reform, and resource management.

For the last several years, Jane has also worked with AARST, EPA, and other stakeholders leading an effort to enhance and improve code adop-

AARST leaders and in conjunction with our lobbyist, Randy Pence, we believe she will add another strong voice in assisting in research, systems analysis, consensus-building, and right-sizing solutions to problems focusing on AARST’s objective: to make radon policy change a reality.

2015 AARST Real Estate Leadership Healthy Housing Award

At the end of last year, AARST introduced a new Leadership Award for professionals in the real estate field who demonstrate, inform, and educate their clients and their staff on radon awareness and reducing radon exposure in the home. AARST polled its membership asking for nominations, and received the names of four exceptional nominees.

The nominating process is made through the recognition efforts of our members and our Chapter leaders. Nominations are sent in to the AARST Leadership Award Committee, and, based on merit and activity, the nominations are accepted. Chapters are then invited to recognize these nominees throughout the year.

AARST also posts press releases regionally on behalf of the recipient and the Chapter. Chapters do a lot of work with their regional real estate agencies to build partnerships in spreading the Radon Risk Reduction message. Once a year, AARST National will consider one Real Estate Professional from the groups of those awarded regionally, to recognize nationally.

The following real estate professionals have shown exemplary connection to the Radon Awareness message, participating locally in...
outreach projects and educational opportunities. Congratulations to the four 2015 Real Estate Leadership Healthy Housing Award recipients:

- Kerry Kidwell, nominated by RuthAnn Lipic, Midwest AARST Chapter
- Candi Troia, a Realtor in Omaha, NE, nominated by Kate Spielman, Accurate Radon Testing Services, LLC; Heartland Chapter
- Rip Phillips, a real estate professional in Louisville, KY, nominated by Kyle Hoylman, Protect, LLC; KARP Chapter
- Steve Brown, nominated by Brendan Getizinger, OH

**Advanced Certifications Update**

Three Advanced Certifications are available: one, Multi-Family Measurement (MFM), for certified measurement professionals; and two, Multi-family Mitigation (MFMT) and Radon Resistant New Construction (RRNC), for the certified mitigation professionals. To date, twenty five professionals have received Advanced Certifications.

Certified professionals interested in attaining any of the Advanced Certifications may contact Johnna McNamara for listings of Trainers who teach this course work, and for information regarding the course certification exam. Applications may be obtained by contacting Janna Sinclair, who will email applications directly to you. Full instructions and prerequisites are spelled out in the application, which must be complete (and accompanied by required support certificates and paperwork) before any certification is processed.

Once processed, professionals receive their documentation of certification, which indicates the expiration date for that certification cycle. Professionals who receive Advanced Certifications will also have this certification indicated in the DETAIL screen of the NRPP.info search database. Once a state search is populated, and a name clicked on, that detail page comes up indicating the total certifications under Measurement (MFM) or Mitigation (MFMT &/or RRNC).

More information will be available on the website in the next few months, but meanwhile, please feel free to contact the office with questions.

**ANSI Accreditation for NRPP**

AARST is an ANSI accredited standards developer, and now, with the approval and encouragement of the board, we are exploring the possibility of our organization seeking accreditation for NRPP as a credentialing organization. This is a separate accreditation from our standards developer status and is recognized internationally. Our goal is to raise the bar on the level of professionalism for all NRPP-credentialed professionals.

The yardstick by which consensus standards are developed, ANSI is the caretaker of consensus standards in the US and is part of the International Organization for Standardization (ISO). The AARST Consortium on National Radon Standards’ bylaws and standard process are already accredited by ANSI. ANSI doesn’t approve the content; it recognizes the process by which we ensure the consensus is administered through our Consortium.

This past January, AARST officially released four new Radon Standards which have been accepted by ANSI as accredited Radon Standards. "These new standards," said Mike Flynn, EPA Director of the Office of Air and Radiation, “will help ensure the American public is protected from radon exposure using the most up-to-date techniques, technology and practices. EPA is proud to invest in and participate in the development of these AARST/ANSI radon standards.” EPA, the Department of Housing and Urban Development (HUD), the USDA, and many states have strong radon policies that include recognition of, and sometimes a requirement to use, consensus standards and protocols.

AARST Executive Director, Peter Hendrick, will be attending a two-day workshop in May to receive training on the accreditation meetings an internal standard (ISO-17024.)

**SAVE THE DATE!**

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SEE YOU THERE!
Act Now on Radon
We Need to Continue Funding as Exposure to Radon Continues to Grow

By Matt Koch

March 18, 2015
Excerpt: Testimony of Kyle Hoylman, CanSAR, before the House Committee on Appropriations Interior and Environment Subcommittee

In December of 2008, I received a call from my father that changed my life. He had been diagnosed with lung cancer. He didn’t understand. Lung cancer was something that attacked people who smoked. He was a non-smoker. How could this be happening to him? Six months later, Dad was no longer with us. He fought for his life, but cancer ultimately won the battle and Dad left this world much too soon.

Our home tested at 30 picoCuries per liter of air, more than seven times the EPA action level for radon exposure. To put this into perspective, I grew up living in a home that was exposing me and my family to the radiation dose that would be equivalent to receiving 1,500 chest x-rays per year. If we had known, my dad might still be with us today. You see, radon-induced lung cancer is preventable through testing and mitigation. We didn’t know.

Unlike my father, I am a cancer survivor. I won my battle. Understanding that each day, a person in our county loses their own battle with radon-induced lung cancer every 26 minutes is sobering. I know what my family has gone through. Knowing that these lives could have been saved is why I am here today.

Ten years ago, the US Surgeon General warned us about radon, advising that every home should be tested. Our state radon programs are the most important resource making our citizens aware of this warning. The SIRG program is the only federal program that exists to help our state programs in this important mission—and the FY16 budget proposes to eliminate it.

From my perspective, cutting our nation’s radon program is the exact opposite of what is needed. In fact, a strong case can be made that we should actually be spending more to prevent radon-induced lung cancer. In addition to the lives saved, the return on investment in preventing the costly direct and indirect healthcare burden is compelling.

According to the EPA’s own Inspector General’s 2008 report, “Nearly two decades after passage of the 1988 Indoor Radon Abatement Act (IRAA), exposure to indoor radon continues to grow. Efforts to reduce exposure through mitigation or building with radon-resistant new construction have not kept pace.”

The radon problem in our country is getting worse, not better. We have more buildings with elevated radon levels today than in 1988, which is when your colleagues passed the Indoor Radon Abatement Act—a law designed to address the radon problem in our country. Twenty five years later, an American dies every 26 minutes from radon-induced lung cancer. According to a TODAY SHOW report, an estimated 70,000 classrooms contain toxic radon levels. One of every 15 homes in our country contains toxic levels of radioactive radon gas. Does this sound like a program that should be cut or eliminated? I sincerely hope not.

The hard reality is that this is a program that’s voluntary nature has proven to be ineffective. With the evident ineffectiveness of the program, why hasn’t EPA taken steps to regulate? After all, the Administrator was given the authority to regulate some 25 years ago. How many more lives need to be taken by this preventable disease before EPA wakes up? A simple, inexpensive test is all that is required during the real estate transaction to know if a problem exists.

The overall impact of eliminating the SIRG program will be the systematic elimination of our country’s outreach and education efforts as they pertain to radon. A majority of our 45 state and tribal radon programs will be forced to close or eliminate their public outreach programs. Basic data collection on radon risk reduction will no longer occur. Fewer of our buildings will be tested, and when a problem is found, it will not be fixed. Consumers will no longer have a state or tribal program to protect their interests in dealing with unregulated contractors. Low income citizens will no longer receive free radon test kits or objective advice on radon risk reduction. More than 21,000 lives will continue to be lost each year. For those of us who are reminded each day of the importance of preventing radon-induced lung cancer, this is not acceptable.

On behalf of the members of CanSAR, I respectfully ask for this Committee to do the following:

1. First, and by far the top priority, is our request for the Subcommittee to restore the $8 million for the SIRG program, the $8 million that is proposed to be eliminated by the President’s FY16 Budget proposal. SIRG is the only federal program that provides essential matched funding to the states to conduct and continue programs

“You see, radon-induced lung cancer is preventable through testing and mitigation. We didn’t know.”
designed to bring radon education and mitigation to your constituents. This is not a request for an increase in funding or for new funding, but rather a continuation of funding. It is not new money.

While EPA’s comments in the Budget submittal might indicate that SIRG has achieved its purposes and is no longer necessary, the facts indicate otherwise. The American Association of Radon Scientists and Technologists (AARST) can produce for the record recent annual reports from nearly one-third of the states that document how SIRG funds are being used to good effect and the necessity of SIRG funds to continue that work.

Further, EPA is in the process of rolling out its proposed National Radon Action Plan (NRAP). While EPA has denied that its shift from the existing Federal Radon Action Plan (FRAP) to NRAP does not signal a divestment by EPA on radon action, the proposal to eliminate SIRG raises doubts about that assertion. In fact, if NRAP were rolled out today as the first EPA action on radon, we would argue that SIRG would need to be invented for NRAP to be successful.

The bottom line is that the $8 million to support SIRG is essential to move forward in radon education and mitigation. Without it, state action to attack this problem will stagnate or halt.

2. Secondary recommendation. While the $8 million restoration in SIRG funding is the clear top priority, let me suggest other actions the Subcommittee can take with regard to funding and language to ensure that funding is used to its best utility. CanSAR supports the $1 million increase for Environmental Program Management – but with a condition added to the increase. The FY16 Budget proposes $3.36 million, an increase of $1 million. Mr. Chairman, we would recommend that if the Subcommittee does grant the $1 million increase for Environmental Program Management, that the Subcommittee include language to require the Administrator to use such funds in this account as necessary to secure the FTEs necessary for full and timely implementation of the SIRG program.

I thank you for your foresight and leadership on this issue. Your action will help save lives.
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“It is a way to make your voice heard about the need to test every home, to get rid of radon.” – Ruth Ann Lipic, President, MidWest AARST Chapter

YOU CAN BE A HERO

“Most cancers,” writes Daniel J. Hunter of the Harvard School of Public Health in a recent Boston Globe article, “are theoretically preventable.” In the case of Radon-Induced Lung Cancer, it isn’t just theory. Radon-induced lung cancer is preventable. Reducing the radon levels a person is exposed to will significantly reduce potential damage to lung cells caused by inhaled radioactive decay particles.

With more than 224,000 new lung cancer diagnoses in the U.S. in 2014 (10% or more due to radon exposure) it is inevitable that we, as family members, friends, and radon professionals, are in the unfortunate position of seeing someone suffer through this terrible disease. The treatments alone are heart wrenching, and the prognosis is grim: The 5-year survival rate is less than 17%. Help us prevent the preventable. Become a contributor to the ARPC-100 Advertising fund.

As a contributor you will effect LONG TERM CHANGE, you can be the HERO in this story.

We are just half way to our goal of $100,000 for the year 2015. The need for your contribution goes beyond the affect a change in radon policy will have on our business. We’ve spoken about this. By contributing to the ARPC-100 fund you are creating the OPPORTUNITY to reduce the numbers of Radon-Induced Lung Cancer patients we see in our working and personal lives daily.

By hitting our goal, we continue our strong work behind the scenes, in hall ways, and in discussions that change in radon policy MUST happen, that this policy change MUST be supported by all branches of government, local, state and national, and, most importantly, this change WILL save more lives from radon-induced lung cancer.

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Make checks payable to AARST and mail with this form to: AARST, P.O. Box 2109, Fletcher, NC 28732
To pay by credit card please use the reverse side of this form. You will receive a receipt.
Who are the 2015 ARPC-100?

It is with sincere thanks and congratulations we announce the following companies and individuals who have stepped up and asked to be part of the story. With $49,000 more to raise there is room for more heroes! Won’t you contribute today?

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We are getting there!

As of January 21, 2015 you have helped raise over $51,000.

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$51,000

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Proactive Legislation
State Legislative Action Against Radon Doesn’t Just Happen

Without the behind-the-scenes efforts of dedicated radon advocates and radon professionals like you, legislators are content with the status quo. In many states, legislators point to old, inadequate “radon disclosure” laws and declare that their states are “taking care of the radon issue.” That’s not acceptable.

Since 2008, AARST has been working with other advocates and attending the annual Summit of the National Conference of State Legislatures to introduce new policies and laws to state lawmakers from every state. Well over a hundred pieces of new state legislation have been introduced. And there have been major success stories that have resulted in increased testing and mitigation in Illinois, Minnesota, Kentucky, New Hampshire, Maine and other states thanks to a proactive group of state officials, AARST members and advocates from CanSAR, CRRRR, and other cancer advocacy groups.

Introduce Legislation In Your State: It’s Your Right and Responsibility!

Four State Policy Models That Will Save Lives

AARST has four model state model legislative packages that will save lives by reducing exposure to a radioactive gas that causes a death from lung cancer every 25 minutes in the U.S.A.

Model A: Real Estate and Home Occupancy Required Testing

Summary: Provides that prior to the sale of a residential property, the seller or property manager must have the property tested for radon gas according to EPA or ANSI recognized measurement protocols conducted by either a state licensed and/or an EPA recognized, or ANSI accredited certified radon measurement professional.

Result: Test(s) must be furnished to prospective buyer(s).

Model B: Buyer Notification and Disclosure

Includes: A description of any radon concentrations, mitigation, or remediation; information regarding the radon mitigation system, including system description and documentation, if such system has been installed in the dwelling; and a radon warning statement that states, in part:

“Every buyer of any interest in residential real property is notified that the property may present exposure to dangerous levels of indoor radon gas that may place the occupants at risk of developing radon-induced lung cancer. Radon, a Class A human carcinogen, is the leading cause of lung cancer in nonsmokers and the second leading cause overall. The seller of any interest in residential real property is required to provide the buyer with any information on radon test results of the dwelling.”

Model C: Radon Resistant New Construction Regulations/Standards Code Adoption

Summary: Regulates energy efficiency for the design and construction of buildings regulated by the International Residential Code (IRC) as adopted and amended by the state of _____.

The intent of these criteria is to provide a means for furnishing quality indoor air, assuring building durability, and permitting energy efficient operation. Pursuant to part 1322.2100, Appendix F (or subsequent revisions or adoptions) of the 2006 International Residential Code (IRC) applies to all residential buildings covered by this chapter. Exceptions: 3. Additions to existing dwellings or dwelling units may be made without making the entire dwelling or dwelling unit comply, provided that the: addition complies with all the requirements of this chapter. 4. Alteration or repairs to existing dwellings or dwelling units may be made without making the entire dwelling or dwelling unit comply, provided the alteration complies with as many requirements of this chapter as feasible, as determined by _____.

Model D: State Licensure through Recognized Certification Professional Qualifications Criteria

Legislative intent: The general assembly recognizes that radon is an odorless, colorless, tasteless, and radioactive gas that occurs naturally in soil and groundwater; that radon enters homes and buildings through openings in foundations, decays to form radon progeny, and unless vented to the atmosphere, accumulates in buildings and becomes hazardous to human health, and prolonged exposure to elevated concentrations of radon decay products has been associated with increases in the risk of lung cancer. The general assembly recognizes that there is a need to protect human health and prevent exposure to elevated concentrations of radon and a higher risk of mortality from lung cancer.

These models have already been successful. They can work in your state. But they need your involvement.

1. Contact AARST for a copy of these legislative models.
2. Pick up the phone and call your state policy makers, your state legislators.
3. Talk to your local cancer society, local doctors, the local American Lung Association.
4. For guidance contact Peter Hendrick at director@aarst.org or Jane Malone at janemaloneedc@gmail.com.
5. For existing laws go to: www.eli.org/sites/default/files/docs/2015_radon_database.pdf.

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