

DEPARTMENT OF PUBLIC HEALTH RADON PROGRAM NITIAL SCHOOL BADON MEASUREMENT REPOR

INITIAL SCHOOL RADON MEASUREMENT REPORT FORM

CT Department of Public Health Radon Program

January 2021

The following form must be submitted to the Connecticut Department of Public Health Radon Program within ten (10) business days of providing a final written report of radon measurement activities to school personnel. Do not send test results or other documents. Submit only one signed form by mail, fax OR email (preferred) to the Radon Program at:

410 Capitol Avenue MS#12RAD

Hartford, CT 06134-0308 Fax: 860-509-7295

Email: DPH.RadonReports@ct.gov RMT Johnson Elementary School Name of School: 500 Whittlesey Drive Address: (Street, town, zip code) Bethel, CT 06801 Hygenix Div of Pennoni Measurement Company: Please provide the following summary information: Testing Dates: 11/8/22-11/10/22 (deployment & retrieval. Include confirmatory testing dates if necessary) Total # of Rooms Tested: 47 Total # of Rooms Requiring Re-Testing: Total # of Rooms Where Average Results were at or above 4.0 pCi/L: Radon measurement activities were performed at the location above in accordance with United States Environmental Protection Agency protocols and the Connecticut Department of Public Health Radon Program's School Radon Testing Guidance. Ted Tio NRSB#6SS0041 11/16/22 Measurement Professional / NRPP/NRSB # Signature Date



School Designee / Title

Phone: (860) 509-7300

Telephone Device for the Deaf (860) 509-7191

450 Capitol Avenue - MS # 51RAD

P.O. Box 340308 Hartford, CT 06134

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Signature

Date



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	Email: DPH.Rado	onReports@ct.gov		
Name of School:	Anna H Rockwell Elementary School			
Address: (Street, town, zip code)	400 Whittlesey Drive			
(Sirver, town, zip code)	Bethel, CT 06801			
Measurement Company:	Hygenix	Div of Pennoni		
Please provide the following summore Testing Dates: (deployment & retrieval. Include confirmatory testing dates if necessary)	ary information: 11/8/22-11/10/22			
Total # of Rooms Tested:	25			
Total # of Rooms Requiring Re-Testing:	0			
Total # of Rooms Where Average Results were at or				
above 4.0 pCi/L:	0			
Radon measurement activities were per Environmental Protection Agency protection Program's School Radon Testing Guide	ocols and the Conn	tion above in accordance with Un ecticut Department of Public Hea	uited States Ilth Radon	
Ted Tio NRSB#6SS00	41		11/16/22	
Measurement Professional / NRPP/NRS	SB #	Signature	Date	
School Designee / Title		Simple	11/16/22	
oction Designee / Title		Signature (860) 509-7300 for the Deaf (860) 509-7191	Date	



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DEPARTMENT OF PUBLIC HEALTH RADON PROGRAM SCHOOL RADON RE-EVALUATION REPORT FORM

January 2021

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CT Department of Public Health Radon Program 410 Capitol Avenue MS#12RAD Hartford, CT 06134-0308 Fax: 860-509-7295

Email: DPH.RadonReports@ct.gov

Name of School:	Bethel Middle School			
Address: (Street, town, zip code)	600 Whittlesey Drive			
	Bethel, CT 06801			
	Name and the state of the state			
Measurement Company:	Hygenix Div of Pennoni			
Please provide the following summa	ry information:			
Testing Dates:	11/8/22-11/10/22			
(deployment & retrieval. Include confirmatory testing dates if necessary)			Name augusts	
Total # of Rooms Tested:	05			
Total # of Rooms Requiring				
Re-Testing:	0			
Total # of Rooms Where Average Results were at or				
above 4.0 pCi/L:	0			
Radon measurement activities were per Environmental Protection Agency proto Program's School Radon Testing Guida	cols and the Conn	tion above in accordance with Unit ecticut Department of Public Healt	ed States h Radon	
Ted Tio NRSB# 6SS00		40	11/16/22	
Measurement Professional / NRPP/NRS	B #	Signature	Date	
Robert Germinara			1/14/22	
School Designee / Title		Signature	Date	



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> CT Department of Public Health Radon Program 410 Capitol Avenue MS#12RAD Hartford, CT 06134-0308 Fax: 860-509-7295

Email: DPH.RadonReports@ct.gov Bethel High School Name of School: 300 Whittlesey Drive Address: (Street, town, zip code) Bethel, CT 06801 Hygenix Div of Pennoni Measurement Company: Please provide the following summary information: **Testing Dates:** 11/8/22-11/10/22 (deployment & retrieval. Include confirmatory testing dates if necessary) Total # of Rooms Tested: 07 Total # of Rooms Requiring Re-Testing: Total # of Rooms Where Average Results were at or above 4.0 pCi/L: 0 Radon measurement activities were performed at the location above in accordance with United States Environmental Protection Agency protocols and the Connecticut Department of Public Health Radon Program's School Radon Testing Guidance. Ted Tio NRSB# 6SS0041 11/16/22



Measurement Professional / NRPP/NRSB #

School Designee / Title

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Signature

Signature

Date

Date



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Email: DPH.RadonReports@ct.gov

Name of School:	Frank A Berry School			
Address: (Street, town, zip code)	200 Whittlesey Drive			
(enough to mi, zip code)	Bethel, CT 06801			
Measurement Company:	Hygenix Div of Pennoni			
Please provide the following summa	ry information:		Management .	
Testing Dates: (deployment & retrieval. Include confirmatory	11/8/22-11/10/22		MER ALVANDA I I II.	
testing dates if necessary)				
Total # of Rooms Tested:	06			
Total # of Rooms Requiring Re-Testing:	0			
Total # of Rooms Where Average Results were at or above 4.0 pCi/L:	0			
Radon measurement activities were per Environmental Protection Agency protection Program's School Radon Testing Guida	cols and the Conn	tion above in accordance with Unit ecticut Department of Public Healt	ed States h Radon	
Ted Tio NRSB# 6SS0		(1)	11/16/22	
Measurement Professional / NRPP/NRS	B#	Signature	Date	
Robert Germinouro		(9)	1/16/22	
School Designee / Title		Signature	Date	



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