National Radon Safety Board
NRSB
Certified Radon Professionals

Radon Measurement **Technician** Application - **INITIAL**

This application is to be used for **INITIAL** certification of a Radon **Measurement TECHNICIAN**.
You may email all applications and supporting documents to info@NRSB.org (preferred)
or mail to: NRSB, 14 Hayes Street, Elmsford, NY 10523. Certification is subject to review and approval by the NRSB.

Name of Applicant * _____

Business Address: _____

City, State, Zip: _____

Mailing Address (if different) _____

Telephone_____ Fax: _____

E-mail: _____ Website: _____

*This name will appear on certificate issued by NRSB

An NRSB certified individual must be affiliated with an NRSB registered business.
Indicate the name of the affiliated radon business below.

Affiliated Radon Business _____ NRSB Reg. #:_____

Service Area (OPTIONAL) *(This will be listed in your professional profile on the NRSB website)*

What is your "Service Area Distance"? That is – how far will you normally travel from the office?

☐ 10 Miles ☐ 15 Miles ☐ 20 Miles ☐ More than 20 Miles ☐ Other:_____

Are you willing to travel beyond the Service Area stated above, would there be a fee?

☐ Yes, I am willing to travel beyond the Service Area Distance at no fee.
☐ Yes, I am willing to travel beyond the Service Area Distance for a flat fee of _____
☐ Yes, I am willing to travel beyond the Service Area Distance for a fee determined on a case-by-case basis.
☐ No, I am not willing to travel beyond the Service Area Distance.
☐ Other:_____

States

A state with an asterisk (*) means that state has regulations for radon measurement and/or radon mitigation.

Please mark all states in which the applicant will provide radon services. **Provide a copy of the current state radon measurement/mitigation certification or license for each regulated state listed that issues such certification or license.**

☐ Alabama	☐ Alaska	☐ Arizona	☐ Arkansas	☐ California*
☐ Colorado*	☐ Connecticut*	☐ Delaware	☐ Florida*	☐ Georgia
☐ Hawaii	☐ Idaho	☐ Illinois*	☐ Indiana*	☐ Iowa*
☐ Kansas*	☐ Kentucky*	☐ Louisiana	☐ Maine*	☐ Maryland
☐ Massachusetts	☐ Michigan	☐ Minnesota*	☐ Mississippi	☐ Missouri
☐ Montana	☐ Nebraska*	☐ Nevada	☐ New Hampshire	☐ New Jersey*
☐ New Mexico	☐ New York*	☐ North Carolina	☐ North Dakota	☐ Ohio*
☐ Oklahoma	☐ Oregon	☐ Pennsylvania*	☐ Rhode Island*	☐ South Carolina
☐ South Dakota	☐ Tennessee	☐ Texas	☐ Utah*	☐ Vermont
☐ Virginia*	☐ Washington	☐ West Virginia*	☐ Wisconsin	☐ Wyoming

– The list of regulated states above is subject to change without notice –

List any US territory or country other than the United States in which the applicant will provide radon services:

_____

_____

Training and Education

- Submit a copy of a certificate demonstrating successful completion of an NRSB-approved course for initial training
  - A list of **NRSB-approved initial Measurement training courses** can be found at https://nrsb.org/courses/initial-courses-for-measurement/
- Submit a copy of your **NRSB exam score letter** showing a passing score of 70% or better

Devices

A measurement **TECHNICIAN** can only PLACE and/or RETRIEVE a device under a Quality Assurance Plan designed by a **Radon Measurement Specialist.**

- As a Technician, provide the **accreditation name and NRSB ARL number of the laboratory that will perform analytical services** for each listed device. A list of the laboratory accreditation numbers can be found at: https://nrsb.org/wp-content/uploads/2026/10/NRSB-Accredted-Radon-Laboratories-28Oct2026.pdf

  OR

  Provide the name of the **NRSB Radon Measurement Specialist and their NRSB Certification number** that has taken a proficiency test for the device type(s) listed and will be reading the measurements and signing the reports.
- List the NRSB Device Number and Measurement Method Code for *each type* of all radon measurement devices you will be placing and/or retrieving, **NOT** for every single device. *For example, if you will be placing and/or retrieving 6 AC devices that are all from the same manufacturer, you only need to enter that NRSB Device Number **ONCE.***
  - A list of NRSB Device Numbers and Measurement Method Codes can be found at https://nrsb.org/wp-content/uploads/2026/10/NRSB-Approved-Devices-28Oct2026.pdf

NRSB Device Number	Measurement Method Code	NRSB Laboratory Name **OR** Measurement Specialist Name	NRSB Laboratory Accreditation **OR** Measurement Specialist Number

Quality Control

The applicant agrees to follow the policies and procedures of the Quality Assurance Program (QAP) of any affiliated Radon Business. The NRSB reserves the right to obtain copies of any QAP documents used by the applicant.

Use of Certification and Logo

The applicant will not make claims about certification in a manner inconsistent with the scope of the certification issued. The applicant will not use certification status in any manner that would bring disrepute on the NRSB or be used in a way the NRSB deems misleading. The applicant agrees to discontinue any claims of certification including use of the NRSB logo, certification numbers, and references to the NRSB that may be misleading upon expiration, suspension or revocation of certification.

Code of Ethics for Radon Professionals

The following Code of Ethics serves as an agreement with radon professionals who possess a current NRSB certification. The established rules are necessary to protect the life, health, property and welfare of the public, and to maintain the credibility of the certification program. Accordingly, each NRSB certificate holder agrees to retain full responsibility and liability for their actions and agrees to comply with the following Code of Ethics. Violation of this Code of Ethics or failure to abide by the requirements described herein might be cause for suspending or revoking NRSB certification.

Responsibility: Protect the safety, health and welfare of the public, by performing all certified activities in accordance with properly established and approved procedures and standards adopted by the National Radon Safety Board.

Integrity: Perform all certified activities honestly and treat the public, clients and employer in an impartial, ethical and professional manner. All details of the certified activity shall faithfully and accurately reflect the inspections; procedures used, and result obtained.

Conflict of Interest: Consciously avoid conflicts of interest and openly disclose such conflicts to all concerned parties.

Improper Conduct: Refrain from work activities outside the area of certification without prior approval.

Safety: Act in a safe and responsible manner while conducting certified activities, ensuring that all required and necessary safety procedures are in place and are being used by yourself and others for whom one is responsible.

_____Initial here to confirm you have read through the information above.

Representations

Has the applicant described in this application or anyone affiliated* with the applicant named in this application ever had a radon license, certification or accreditation denied, suspended, revoked or not renewed by a Federal, National, or State agency?

☐ **Yes** ☐ **No** **If yes, submit a letter explaining the reasons for the revocation or non-renewal.**

The applicant agrees to notify the National Radon Safety Board within 7 days, in writing, of any radon license or certification denied, suspended, revoked, or not renewed by a Federal, National or State agency. The applicant agrees to notify the National Radon Safety Board within 30 days, in writing, of any change in the information provided in this application.

The applicant and all persons or entities affiliated* with the applicant are responsible for complying with the requirements of each State and/or other legal jurisdiction in which radon services are offered. Failure to maintain accreditation, certification or licensure or engaging the services of an entity or individual that is not in compliance with the requirements of a States' radon regulations in which the applicant provides radon services may result in loss of NRSB accreditation. The applicant attests that all information in this application is truthful and accurate and further agrees that the applicant and all persons or entities affiliated with the applicant will comply with NSRB requirements. Providing false or misleading information or failing to comply with NRSB requirements may result in loss of NRSB accreditation.

The NRSB reserves the right to contact any State, National, or private certification agency regarding any information provided in this application.

The undersigned understands that certification does not constitute any form of license. Additionally, the applicant releases and forever discharges the, NRSB, a non-profit organization, and NRSB contractors or subcontractors from any and all liabilities, claims, demands, or causes of action whatsoever, which now exist or which may hereafter arise on account of the applicants activities henceforth as certified or accredited by the NRSB. The applicant authorizes the NRSB to list the

applicants' certification or accreditation on the Internet or in printed publication. For good and valid consideration it is acknowledged herein the applicant agrees to release and discharge the NRSB from any and all claims related to this application for the applicant's certification or accreditation by the NRSB that exists now or in the future.

*Affiliated: an affiliated entity is owned or substantially controlled by another entity

Applicant's Signature	Print Name	Title	Date

Applicants have up to 6 months to complete the application process, once the initial application is received.

Name of Applicant: _____

APPLICATION FEES

PLEASE SELECT ONE OR MORE AS APPLICABLE

Radon Measurement Technician	1 year $125.00	2 years $200.00	
Radon Measurement Specialist	1 year $125.00	2 years $200.00	
Radon Mitigation Specialist	1 year $125.00	2 years $200.00	
Laboratory Accreditation	1 year $125.00	2 years $200.00	
Tertiary Chamber	Initial $400.00	Renewal – 2 Year $250.00	
Secondary Chamber	Initial $600.00	Renewal – 2 Year $350.00	
Total (Non-Refundable)			

PAYMENT OPTIONS

Check Enclosed or Mailed/Make Checks Payable To: **CCICN/NRSB**

Credit or Debit Card payment: https://link.clover.com/urlshortener/R8FQVf

ALL PAYMENTS ARE NON-REFUNDABLE

Checklist for applications (initial and renewal)

- Code of ethics response on each application *(page 3)*
- Sign and date all applications
- Continuing Education credits *(for renewal applications)*
- Certificate of Calibration for CRM(s) & Electret Ion Chambers *(if applicable)*
- Proficiency Test for each model of CRM and for each type of Electret Ion Chamber *(initial applications)*
- Proficiency Test for each model of CRM not listed in previous applications and for each type of Electret Ion Chamber not listed in previous applications *(renewal applications)*
- Either a Blind Spike Test or a Proficiency Test for each type of Electret Ion Chamber listed in previous applications
- *(renewal applications)*
- Sample report and/or warranties/guarantees
- Application Fees

You may send applications and supporting documents to: **info@NRSB.org**, (Preferred method)
or send to: NRSB, 14 Hayes Street, Elmsford, NY 10523.
If you have any questions please contact NRSB at 914.345.1168.

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