



MANDATORY RADON MEASUREMENT REPORT
SUPPLEMENTAL PAGE
(Use if needed with DH 1777)



SECTION 3: RESULTS (CONTINUED)

Building Name or ID Number (If Applicable)

Buildings per address ___

Building No. ___ of ___ Requiring Testing

Measurement Type: [] Initial or [] 5 Year Retest

Dates of Measurement: FROM / / TO / /

Name of Person Who Performed Measurement (Placed Device)

Certificate No. (If Applicable)

Table with 6 columns: Story, Apt/Room, Result, Units†, Device‡, Time in Hours. Multiple rows for data entry.

†P for pCi/L or W for WL

‡AC-Activated Carbon Adsorption, AT-Alpha Track, CR-Continuous Radon Monitor, CW-Continuous Working Level Monitor, EL-Electret Ion Chamber Long Term, ES-Electret Ion Chamber Short Term, LS-Liquid Scintillation, RP-RPISU, UT-Unfiltered Alpha Track

