

Your Radon Laboratory Tester license (number RTL00318) and reference card are enclosed.

ADDRESS CHANGE: It is your responsibility to notify the Indiana State Dept. of Health, Lead and Healthy Homes program, in writing of any address changes. Please provide your name, previous address, new address, zip code, license number, expiration date, home phone number, and work number in your correspondence.

NAME CHANGE: If you have a name change to report, you must provide the appropriate documentation - such as a copy of a marriage certificate, divorce decree, or court order. Please provide your name, previous address, new address, zip code, certificate number, expiration date, home phone number, and work number in your correspondence.

Send any Name and Address changes to Indiana State Department of Health, Lead and Healthy Homes, 2 N. Meridian Street, 5J, Indianapolis, IN 46204.

LICENSE RENEWAL: The Lead and Healthy Homes Program will forward a license renewal application to the licensee at the address provided to the Indiana State Department of Health for this license about sixty (60) days prior to expiration.



Indiana State Department of Health
Lead and Healthy Homes
 100 N. Senate Avenue, N855
 Indianapolis, IN 46204 (317) 234-4423

Radon Laboratory Tester License


Certificate Number	Status	Expiration Date
RTL00318	Active	12/31/2019

Paul Fletcher

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Approved by
 State Board of
 Accounts 1999

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* REMOVE AT REPRODUCTION *