


Your Radon Laboratory Tester license (number RTL00935) 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
RTL00935	Active	12/31/2020

Dominic Gehret

STATE FORM 49122 (9-98)

Approved by
State Board of
Accounts 1999

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Dominic Gehret

Kristina Box, MD, FACOG
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State Health Commissioner
Indiana State Department of Health

REMOVE AT PERFORMANCE