

BERTS #

Code 188

02-68-539238

268147900

July 23, 2017

Dear Nancy,

Enclosed is the annual reporting for One Hour Martinizing Butler.

Nothing has changed, including my ability to sell the building.

Tom Grimm

Sub-Slab Depressurization Systems Annual O&M Inspection Form

Property Identification Number: _____ Temperature (Ambient): _____ °F
 Tenant's Name: Tom Corum Temperature (House): _____ °F
 Owner's Name: _____ Barometric Pressure: _____ "Hg
 Owners Address (If Different from Property): 12524 West Hampton Pl. North Falls, VA Weather Conditions: _____
 Inspector Name: Tom Corum 53051
 Date: 5-23-14
 Time: 1:30 pm.

System Inspection

Is Fan Operating? Yes No NA
 Any Unusual Fan Noises? Yes No
 Are Vent Piping and Piping Joints Intact? Yes No
 Any Caulking Required Around Piping Penetrations? Yes No
 Is System Padlock Intact (System ON/OFF Switch)? Yes No NA
 Is O&M Manual Present? Yes No
 Any Areas In Need of Additional Sealing? Yes No
 List Areas to be Sealed: _____
 List Any Necessary System Repairs: _____

Tenant/Owner Observations

Any Change in Fan Noise or Vibration? Yes No NA
 Have you Turned the Fan OFF for Any Period of Time? Yes No NA
 Reason? _____
 Is Differential Pressure in the Manometer Outside of Normal Operating Range? Yes No NA
 Is the System Manometer Steady? Yes No NA
 Have You or the Owner Made any Changes to the Basement or Other Foundation? Yes No
 If So, What Were the Changes: _____

Quarterly Manometer Measurements

Sample Point ID	Minimum Vacuum (in w.c.)	Inspection			Post Repair (If Necessary)		
		Date	Time	Pressure (in w.c.)	Date	Time	Pressure (in w.c.)
Manometer - Q1	0.50						
Manometer - Q2	0.50	5-23-14	1:30	.75			
Manometer - Q3	0.50	5-28-15	10:35	.70			
Manometer - Q4	0.50	6-1-16	11:00	.71			
		10-2-16	1:30	.74			
		1-3-17	11:10	.78			
		4-10-17	12:45	.77			
		7-7-17	3:00	.80			

Comments (Any Repairs Made While Visiting, etc.): _____

Repairs

Additional Sealing Completed: _____ Date: _____
 System Repairs Completed: _____ Date: _____



Annual Maintenance/Inspection of engineered barrier at 12523 West Hampton Avenue property has been completed and documented by property owner. Date of inspection: 5-23-14

Note: The active mitigation system design is based on the sub-slab depressurization system (SSDS), sub-membrane depressurization system (SMDS), and crawspace depressurization system (CSDS) design criteria found in American Society for Testing and Materials (ASTM) Designation: E2121-03, Standard Practice for Installing Radon Mitigation Systems in Existing Low-Rise Residential Buildings (ASTM, 2008), United States Environmental Protection Agency (U.S. EPA) Region 5, Vapor Intrusion Guidebook (U.S. EPA, 2010), and U.S. EPA 625, Radon Reduction Techniques for Existing Detached Houses (U.S. EPA, 1993), and U.S. EPA, Indoor Air Vapor Intrusion Mitigation Approaches (U.S. EPA, 2008).

