

## NEW RADON TESTER OR RADON TESTER STATUS CHANGE

(To be completed by the Office)

Rev. 6/2021

**\*\***This is the only form that will be accepted for Radon Tester additions/changes within WPML. **\*\***

Company Name: \_\_\_\_\_

WPML Office ID# for Radon Tester Affiliation: \_\_\_\_\_

Radon Tester Name\*: \_\_\_\_\_

\*As it appears on his/her Certified Radon Tester certificate

Radon Tester WPML ID# (if already assigned): \_\_\_\_\_

Radon Tester Email Address: \_\_\_\_\_  
MANDATORY

Please place a check in the box next to **ONE** appropriate action to be taken:

- NEW RADON TESTER BEING ADDED TO ROSTER\*\*** Effective date: \_\_\_\_\_  
(The Radon Tester has never had a WPML Radon Tester ID#.)  
\*\*A copy of the new Radon Tester's **Certified Radon Tester certificate**, along with the completed **New or Reactivating Radon Tester Information** form (attached) must accompany this form.
- RADON TESTER TRANSFERRING INTO THE OFFICE NAMED ABOVE**  
Effective date: \_\_\_\_\_
- RADON TESTER REACTIVATING#** Effective date: \_\_\_\_\_  
#The completed **New or Reactivating Radon Tester Information** form (attached) must be submitted with this form.
- RADON TESTER BEING REMOVED FROM ROSTER** Effective date: \_\_\_\_\_

**SUPRA KEY RETURN/CANCELLATION** – **The Radon Tester** is responsible for cancelling his/her Supra eKEY® with WPML by sending an email to [inbox@westpenmls.com](mailto:inbox@westpenmls.com).

**OFFICE ADMINISTRATOR TO CONTACT WITH QUESTIONS (Please print or type.):**

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Name of Owner or Office Manager (Please print or type.):  
\_\_\_\_\_

Signature of Owner or Office Manager:  
\_\_\_\_\_

Email to [inbox@westpenmls.com](mailto:inbox@westpenmls.com) or Fax to 412-367-5869.

*This form can be found on the homepage of [www.westpenmls.com](http://www.westpenmls.com).*



8980 Perry Highway  
Pittsburgh, PA 15237  
412-367-5860  
FAX 412-367-5869  
inbox@westpenmils.com

# NEW OR REACTIVATING RADON TESTER INFORMATION \*

Rev. 6/2021

Effective Date: \_\_\_\_\_

\*Complete and submit this form (see email address or fax number above) with the following:

- New Radon Tester or Radon Tester Status Change form** (completed by the Office)
- Copy of the Radon Tester’s Certified Radon Tester certificate**
- Copy of the company’s E&O (Errors and Omissions) Policy with the Radon Tester named on the policy.** (No blanket policies will be accepted.)

**\*\*If the Radon Tester would like to obtain a lockbox key, he/she should email the West Penn Multi-List office at [inbox@westpenmils.com](mailto:inbox@westpenmils.com) and request a Supra eKEY® application.\*\***

Please PRINT CLEARLY, and provide the following information:

Name: \_\_\_\_\_

Home Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_

(NOT the office phone #)

**E-Mail Address:** \_\_\_\_\_  
**MANDATORY**

Company Name: \_\_\_\_\_

WPML Office ID# for Radon Tester Affiliation: \_\_\_\_\_

**Have you ever been a Radon Tester in the West Penn Multi-List?**

YES \_\_\_\_\_ NO \_\_\_\_\_

.....  
**FOR WPML OFFICE USE ONLY**

Office I.D. # \_\_\_\_\_

Radon Tester I.D. # \_\_\_\_\_ Supra and Matrix were searched for possible duplication.

Initials: \_\_\_\_\_ Date: \_\_\_\_\_

***This form can be found on the homepage of [www.westpenmils.com](http://www.westpenmils.com).***