



HMP XXXX

**RADON Risk Assessment
Formal Letter of Acceptance**

Date XXXX

Reference – Radon Risk Assessment dated *[add date]*.

Dear Recipient:

You are receiving this letter as the appointed Duty Holder who will formally accept on behalf of either HMPPS, MOJ Property Services and FM Provider this Radon Risk Assessment undertaken by *[add FM Provider name]* Radiation Protection Advisor, *[Add name of Risk Assessor]*, on *[add date]*.

Statement:

All parties hereby accept that they must implement and control suitable and sufficient management arrangements to ensure that the mitigations and controls within the attached Radon Risk Assessment are maintained, so far as they are within their control.

For Radon Risk Assessment see Annex A.

For Roles & Responsibilities see Annex B.

For Signature Sheet see Annex C.

Annex A

[Embed Radon Risk Assessment Here]

Annex B

[Add Roles & Responsibilities Document here]

This document is contained in the Assessment and Control of Radon in HMPPS Prisons, Probation Sites and Contracted Prisons Policy Framework

Annex C

Signature Sheet

For HMPPS: (Governor)..... *[Add Governors name and Signature]*

For MOJ Property: (APOM)..... *[Add APOM name and Signature]*

For FM Provider: (SM)..... *[Add Site Manager name and Signature]*

When completed this document must be discussed at the Monthly Estates Tripartite Meeting and a record added to the formal minutes for audit purposes.