

Application for Maine Laboratory Certification

Laboratory Certification Program • SHS 11 • Augusta, ME 04333-0011 • (207) 287-1929

Date of Application:

A. Purpose of Application: Mark (X) one.

- Initial Certification
 Renewal Certification

B. Type of Application: Mark (X) one.

- Limited Certification Environmental Lead Certification
 In-State Certification Out-of State Certification

C. Laboratory Name:

ME Laboratory Certification #
(If Renewal)

EPA ID #

D. Physical Address:

(Number and Street)

(City) (State) (Zip Code)

E. Mailing Address:

(P.O. Box or Number and Street)

(City) (State) (Zip Code)

F. Laboratory Telephone Number:

G. Laboratory Fax Number:

H. Internet Address:

I. Type of Laboratory: Mark (X) One

- Commercial Laboratory
- Mobile/Field Laboratory
- Local-, State-, or Federal Laboratory

- Non-Commercial Industrial Laboratory
- Non-Commercial Municipal Laboratory
- University or College Laboratory

J. Laboratory Representative for Certification:

Telephone Number:

Email Address:

K. Certifying Authority Information (Out-of-State Laboratories Only):

List below all Environmental Laboratory Certification(s) held by the laboratory. **Submit electronic copies** of all current **Certificates** and **State Rules and Regulations**, including lists of parameters and methods, **most recent on-site evaluation reports and responses to deviations from each of the following State Certification/Certification Programs:**

Name of Certifying Authority:

Type of Certification: (Check all that apply.) DW WW RCRA UST Env Pb

Expiration Date:

Most Recent Onsite Assessment Date:

Name of Certifying Authority:

Type of Certification: (Check all that apply.) DW WW RCRA UST Env Pb

Expiration Date:

Most Recent Onsite Assessment Date:

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Type of Certification: (Check all that apply.) DW WW RCRA UST Env Pb

Expiration Date:

Most Recent Onsite Assessment Date:

L. Laboratory Technical Director: Designate the person responsible for the laboratory operations. Attach resume (Electronic).

Name:

Telephone Number:

Education:

Name of Institution:

Degree/ Major Field:

Certificates or Licenses Held:

Issuing Agency:

Date of Issue:

Experience (related to laboratory analysis):

M. Laboratory QA Officer: Designate the person responsible for the laboratory quality system. Attach resume (electronic).

Name:

Telephone Number:

N. Supervisory Staff

Name: Section:

Name: Section:

Name: Section:

Name: Section:

Name: Section:

Name: Section:

O. Laboratory Ownership

Name:

Telephone Number:

P. FEES

Payment is due at the time of the application submission. Certification is contingent upon payment of invoiced Annual Fees. Certification will not be awarded until all fees are paid.

Limited Certification: \$650 for two year certificate.

Annual Fee Calculation: Place the number of methods requested for each category in each block that applies to your laboratory in the table below. To calculate your Total Fee, add the total number of methods per Test Category and multiply by the Test Method Fee on the right.

TEST CATEGORIES	Test Method Fees	Number of Methods Requested	Fee paid per Method	Fees
Base Fee	\$1200 (same for 1 and 2 year option)			\$1,200
Bacteriology Methods	\$50 per method (2 year option, halve for 1 year option.)			
Inorganic Chemistry Methods	\$50 per method (2 year option, halve for 1 year option.)			
Metals Methods	\$125 per method (2 year option, halve for 1 year option.)			
Organic Compounds Methods	\$150 per method (2 year option, halve for 1 year option.)			
Radiochemistry Methods	\$200 per method (2 year option, halve for 1 year option.)			
Environmental Lead Program	\$600 (2 year option, halve for 1 year option.)			
Onsite Inspection Fee: (out-of-state laboratories) Refer to 4 L (5) (b) and 21 A (7) of rule.	Call (207) 287-1929 to determine the onsite fee for the laboratory.			\$
Total Payment:				\$

Note: The Department will assess a fee for an on-site inspection to out-of-state laboratories. This fee will be based on the established hourly rate of the laboratory certification officer inclusive of preparation time, travel time and inspection time, as well as the travel expenses (travel, meals, lodging and other associated travel expenses) incurred. The minimum fee assessed will be \$1,500 and the maximum fee will be \$3,750.

Form of payment:

Check Check Number: Amount:

Please include with your completed application a check payable to **'Treasurer, State of Maine'** for the appropriate amount listed above.

Q. Statement of Validation:

I have read Chapter 263, Maine Comprehensive and Limited Environmental Laboratory Certification Rules.

I submit this completed Application to the Maine Environmental Laboratory Certification Program. I attest that the information in this application is true, accurate and complete to the best of my knowledge.

In addition to this form and the applicable fees, have submitted the following documents electronically in accordance Chapter 263:

- A quality assurance manual meeting the standards of Section 9.
- A laboratory procedures manual meeting the standards of Section 6.
- A list of the laboratory's detection limits and reporting limits for each field of testing for which the laboratory is requesting certification.
- The list of analytes requested (in the electronic format specified by the state).

- Out-of-state laboratories only:** A copy of all state's or federal agency's certification program requirements or rules, for which the lab is claiming equivalency (in electronic format).
- Out-of-state laboratories only:** A copy of all state's or federal agency's certification program most recent Onsite Assessment Report(s) and Complete Response(s), for which the lab is using equivalency (in electronic format).
- Out-of-state laboratories only:** A copy of all state's or federal agency's certification program most recent certificate(s) for which the lab is claiming equivalency (in electronic format).

For initial certification, I have also included the following:

- The most recent proficiency testing result for each field of testing for which the laboratory seeks certification. The proficiency testing samples must be from an approved provider and be analyzed within one year prior to the date that the application is received by the certification officer.

With the attached application(s), I hereby apply for Certification in accordance with the terms listed in Chapter 263, Maine Comprehensive and Limited Environmental Laboratory Certification Rules.

Signature of Laboratory Representative

Date

Name of Laboratory Representative (type)