Application for Maine Marijuana Testing Facility Certification Revision

Maine Marijuana Certification Program • 286 Water St., 11 SHS • Augusta, ME 04333-0011
(207) 287-4758 • (207) 287-1929 • FAX: (207) 287-4172

A. Date of Revision Request: ______________________

B. Type of Revision: ✓ Check all that apply.

___ Addition of technology(ies)    ___ Addition of analyte(s) to existing technology

___ Removal of technology(ies)    ___ Removal of analyte(s) from existing technology

C. Marijuana Testing Facility Name: ________________________________________________________________

    Marijuana Testing Facility ID#: ______________________

D. Physical Address (Marijuana Testing Facility location to appear on certificate):

____________________________________________________________________

(Number and Street)

________________________________________

(City)                         (State)       (Zip Code)

E. Mailing Address (if different from physical address):

____________________________________________________________________

(P.O. Box or Number and Street)

________________________________________

(City)                         (State)       (Zip Code)

F. Marijuana Testing Facility Telephone Number: ________________________________________________

G. Website Address: ________________________________________________
H. Fees

1. A fee will be charged for the addition of new technologies to the certificate as indicated below.

2. There is no fee to add analytes to a technology for which the marijuana testing facility is currently certified.

3. There is no fee to remove technologies or analytes from the certificate.

4. There are no refunds given for technologies voluntarily dropped or removed due to suspension or revocation.

<table>
<thead>
<tr>
<th>Analyte Categories</th>
<th>Fees</th>
<th>Number of Methods Requested</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Microbiological Contaminants</td>
<td>$50 per technology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Visual Inspection</td>
<td>$50 per technology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Water Activity</td>
<td>$50 per technology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Moisture Content</td>
<td>$50 per technology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Metals</td>
<td>$125 per technology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Solvents</td>
<td>$150 per technology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pesticides</td>
<td>$150 per technology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cannabinoids</td>
<td>$150 per technology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL PAYMENT:</td>
<td></td>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

Payment: Please make check payable to: 'Treasurer, State of Maine' for the amount listed above. Please mail checks to: Maine Marijuana Certification Program, 286 Water Street, 11 SHS, Augusta, ME 04333.

Check Number: _______________ Check Amount: _______________

I. When adding a new technology or analyte to the certificate, the following information is required:

Submit an electronic copy of the analytes and technologies requested from the Maine technology/analyte table with associated, current MDL/RL data.
J. Statement of Validation:

I have read 18-691 CMR, Chapter 5, Maine Certification of Marijuana Testing Facilities Rules and 18-691 CMR, Chapter 1, Maine Adult Use Marijuana Program Rules.

I submit this completed Application to the Maine Marijuana 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, I have submitted the following documents electronically in accordance with 18-691 CMR, Chapter 5:

- A Marijuana Testing Facility procedures manual (SOP) meeting the standards of Section 3.3 (when applicable).
- The list of technology/analyte combination requested (in the electronic format specified by the State, found in the Technology Analyte Table (TAT)). Please include marijuana testing facility-determined MDL and RL values with units in this table.
- The most recent passing proficiency testing result for each field of testing for which the testing facility seeks certification and for which there are proficiency tests available. The proficiency testing samples must be from an approved provider and be analyzed within 6 months of the date that this application is received by the certification officer as per Section 3.4.

With the attached application(s), I hereby apply for certification in accordance with the terms listed in 18-691 Chapter 5, Maine Certification of Marijuana Testing Facilities Rules and Chapter 1 Maine Adult Use Marijuana Program Rules Section 2.1.2D

<table>
<thead>
<tr>
<th>Signature of Laboratory Representative</th>
<th>Print Name</th>
<th>Date</th>
</tr>
</thead>
</table>