Application for Accreditation Revision

 Maine Laboratory Accreditation

Maine Laboratory Accreditation Program • 286 Water St., 11 SHS • Augusta, ME 04333-0011

(207) 287-1929 • (207) 287-3220 • FAX: (207) 287-4172

**A. Date of Revision Request:**

**B. Type of revision:** ✓ Check applicable boxes.

 [ ]  Addition of method(s) [ ]  Addition of analyte(s) to existing method

[ ]  Removal of method(s) [ ]  Removal of analyte(s) from existing method

**C. Laboratory Name:**

 **EPA ID #**

**D. Physical Address (lab location to appear on certificate):**

(Number and Street)

(City) (State) (Zip Code)

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

(P.O. Box or Number and Street)

(City) (State) (Zip Code)

**F. Lab Telephone Number:**

**G. Fees**

1. A change fee of $50 will be assessed if a laboratory requests additional methods at any time other than when applying for, or renewing, its certification.

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

3. The laboratory will be charged the one-year price if a method is added to the certificate one year or more beyond the original certificate issue date.

 4. There is no fee to add analytes to a method for which the lab is currently certified.

 5. There is no fee to remove methods or analytes from the certificate.

 6. There are no refunds given for methods voluntarily dropped or removed due to suspension or revocation.

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| --- | --- | --- | --- |
|  | Fees | Number of Methods Requested | Total   |
| Change Fee | $50 |  |  |
| **METHOD CATEGORIES** |  |  |  |
| Bacteriology Methods | $75 per method/2 yr.\* |  |  |
| Inorganic Chemistry Methods | $75 per method/2 yr.\* |  |  |
| Metals Methods | $150 per method/2 yr.\* |  |  |
| Organic Compounds Methods | $175 per method/2 yr.\*  |  |  |
| Radiochemistry Methods | $250 per method/2 yr.\* |  |  |
| Environmental Lead Program | $600/2 yr.\* |  |  |
| **TOTAL PAYMENT:** |  |  | $  |

\*Halve for 1-year.

**Payment:** Please make check payable to: ‘**Treasurer, State of Maine’** for the amount listed above. Please mail checks to: Maine Laboratory Accreditation Program, 286 Water Street, 11 SHS, Augusta, ME 04333

 Check Number: Check Amount:

**H. When adding a new method(s) or analyte(s) to the certificate, the following information is required:**

**Out-of-State Laboratories:**

Please submit an electronic copy of the current certificateheld by the laboratory for the method/analyte requested. Include lists of parameters and methods requested from the Maine method/analyte table with associated, current MDL/RL data. Also please include a copy of current PT studies for method/analyte requested.

**Name of Certifying Authority:**       **Expiration Date:**

**In-state laboratories:**

Submit an electronic copy of the parameters and methods requested from the Maine method/analyte table with associated, current MDL/RL data.

**I. Statement of Validation:**

I have read 10-144 and 06-096 CMR, Chapter 263, Maine Comprehensive and Limited Environmental Laboratory Accreditation Rules.

I submit this completed Application to the Maine Laboratory Accreditation 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 10-144 and 06-096 CMR, Chapter 263:

[ ]  A laboratory procedures manual (SOP) meeting the standards of Section 9 (when applicable).

[ ]  The list of Program/method/analyte combinations requested (in the electronic format specified by the State found in the Method/Analyte Table (MAT). Please include lab determined MDL and RL values with units in this table.

[ ]  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 6 months of the date that the application is received by the certification officer.

With the attached application(s), I hereby apply for accreditation in accordance with the terms listed in 10-144 and 06-096 CMR, Chapter 263, Maine Comprehensive and Limited Environmental Laboratory Accreditation Rules.

Signature of Laboratory Representative Print Name Date