



***FY 2012 Drinking Water Microbiology
Laboratory Certification Application***

*Environmental Health Laboratory
5251 Dr. Martin Luther King Jr., Avenue, Anchorage, AK 99507*

NOTE: This application is for the fiscal year FY 2012 drinking water laboratory certification for microbiological contaminants during the period of July 1, 2011 through June 30, 2012. **Changes in this application reflect new fees established in 18 AAC 80.1110 effective July 25, 2010; see page 4 for APPLICATION and FEE DUE DATES.** Completed applications do not automatically guarantee certification for drinking water analysis. This department will determine the certification status of a laboratory after final review of all submitted information. **All supporting documentation and BASE fee must be received before certification will be considered.**

General Information

Laboratory Name _____		Lab Certification # _____	
Mailing Address _____	City _____	State _____	Zip _____
Physical Address _____	City _____	State _____	Zip _____
Primary Lab Contact _____	Primary Contact EMAIL _____		
Primary Lab Contact Title _____	Primary Contact PHONE _____	Primary Contact FAX _____	
Laboratory Manager _____	E-mail Address _____	Phone _____	

Laboratory Fees

The following fees for certification of a laboratory analyzing drinking water for bacteriological contaminants are assigned in State of Alaska Drinking Water Regulations 18 AAC 80.1110, **effective July 25, 2010:**

- BASE FEE Certification of a laboratory for bacteriological contaminants (**DUE WITH APPLICATION**): **\$150**
- METHOD CERTIFICATION FEES (see fees below)

Please include with your completed application a check or money order made payable to the **State of Alaska** for the \$150 BASE FEE listed above. All fees assessed are non-refundable if the department does not certify or recertify the laboratory requesting the departmental services. *Please include on the check your Laboratory Certification Number in order to process your funds properly.* **An INVOICE will be sent to you for the remaining method fees based on your application.**

For assistance with credit card payment, please contact our EHL Office Assistant, Rikki Stillman, at (907) 375-8202.

Methods of Analysis Certification Fees

Please select from the following list those methods for which you would like to be certified. All laboratories must be certified for at least one (1) total coliform and one (1) fecal coliform/or *E. coli* method. Laboratories must follow EPA-approved applications for each method. **Please note each Method group has multiple analytes; if you have questions, please contact the Certification Officer. All methods include confirmation steps.**

MICRO I Methods (\$126 per box checked)

TOTAL COLIFORM / *E. coli*

- Colilert® (SM 9223 B) and/or Colilert® Quanti-Tray® and/or Colilert-18® (SM 9223 B) and/or Colilert-18® Quanti-Tray® (*Circle all that apply*)
- Colisure™ (SM 9223 B)
- Colitag®
- Readycult®

HETEROTROPHIC COUNT

- SimPlate® (SM 9215 E)

ENTEROCOCCI

- Enterolert® (ASTM D6503-99)

MICRO III Methods (\$441 per box checked)

TOTAL COLIFORM/FECAL COLIFORM

- mEndo Broth (SM 9222 B) → BGB/EC (SM9221 B/E) including confirmations
- Chromocult®
- Coliscan®

TOTAL COLIFORM / *E. coli*

- m-ColiBlue24® (approved by EPA)
- mEndo Broth (SM 9222 B) → NA-MUG (SM 9222 G)

***E. coli* only (LT2)**

- mEndo Broth (SM 9222 B) → NA-MUG (SM 9222 G)
- mFC (SM 9222 D) → NA-MUG (SM 9222 G)

FECAL COLIFORM only

- mFC (SM 9222 D)

ENTEROCOCCI

- Membrane Filter, mE → EIA (SM 9230 C)

MICRO II Methods (\$410 per box checked)

TOTAL COLIFORM/FECAL COLIFORM

- Clark's Presence-Absence (P/A) Broth (SM 9221 D/SM 9221 E) including confirmations
- LTB/BGB/EC Broth (SM 9221 B/SM 9221 E)

***E. coli* only (LT2)**

- LTB → EC-MUG (SM 9221 F)

FECAL COLIFORM only (SWTR)

- A-1 Broth (SM 9221 E)

HETEROTROPHIC COUNT

- Pour Plate Method (SM 9215 B)
- Spread Plate Method, R2A (SM 9215 C)

Laboratory Information

- Federal
- Municipal
- Commercial
- Seasonal _____ (operational dates)
- Public Health
- Other (please specify) _____

SAMPLES TO BE PROCESSED

Please select from the following options the compliance samples your laboratory analyzes or would like to analyze:

- PWS TCR Distribution Water
- PWS GWR Source Water
- PWS SWTR Source Water
- PWS LT2 Source Water
- Pools & Spa Water - Treated
- Recreational Water – Surface Water
- Recreational Water - Marine
- Other (please specify) _____

Technical Information

LABORATORY QUALITY ASSURANCE PLAN (QAP)

- Laboratory must submit a *current* written Quality Assurance Plan (QAP) **on an ANNUAL basis** following the guidelines established in Chapter III *The Manual for the Certification of Laboratories Analyzing Drinking Water*, 5th Edition, EPA 815-R-05-004, January 2005. A copy of this Manual may be obtained by going to the EPA web site at <http://www.epa.gov/safewater/labcert/labindex.html>.

STANDARD OPERATING PROCEDURES (SOP)

- Standard Operating Procedures (SOP) for each method must be submitted **annually**. Guidance on writing an SOP can be obtained from the EPA web site at <http://www.epa.gov/quality/qs-docs/g6-final.pdf>. All NEW methods for which the lab is seeking approval must be submitted with supporting SOP documentation.

Performance Evaluation Results

PERFORMANCE EVALUTION DATA

- To be certified for a specific method, a laboratory is required to successfully analyze a Performance Evaluation (PE) or Proficiency Test (PT) sample set obtained from an approved Proficiency Testing (PT) Provider. To obtain a list of EPA approved PT providers contact this office at (907) 375-8209. A laboratory may be certified for more than one method upon successful completion of a single set of PT samples. Please refer to Chapter V, Section 7, of the current EPA Laboratory Certification Manual for details. **Proficiency in enumerative methods must be tested with an enumerative PT.**
- Laboratories seeking certification RENEWAL must provide copy of **current (i.e. PT study CLOSE DATE less than twelve months old)** satisfactory PT results for each method before the May 30th deadline.

Applicant Signature

By signing this document you attest that the information contained within is truthful and represents the laboratory operations as best known to you.

Printed Name of Legal Representative

Title

Signature of Legal Representative

Date

**NOTE: renewal packets *and* BASE fees are due no later than May 30th.
Once the application is received, we will send you an INVOICE for the
method fees based on your method selections.
The invoice will be due within 30 days.**

Please make sure you include all the required information when submitting your application

- **Application** form, fully completed
- **Copy of current PT results for each method**
- Copy of laboratory's **Quality Assurance Plan**, updated annually
- Copies of current analytical **Standard Operating Procedures**
- **FY11 Personnel Status Survey** form fully completed plus copy of **organization chart**
- **BASE fee** made out to the State of Alaska (METHOD FEES MUST be submitted under separate cover with copy of invoice; *must meet deadline*).

-  **You may use credit card for payment; contact Rikki Stillman, 907-375-8202.**

Mail or email completed forms and fees to:

State of Alaska
Attn: Sherri Trask
Environmental Health Laboratory
5251 Dr. Martin Luther King Jr. Avenue
Anchorage, AK 99507

If you have any question on this application please contact:

Sherri Trask
Drinking Water Microbiology Lab Certification Officer
Phone: (907) 375-8209
Fax: (907) 929-7335
E-mail sherri.trask@alaska.gov