

# State Water Resources Control Board

**APPLICATION FOR RENEWAL ACCREDITATION**

**Environmental Laboratory Accreditation Program**

This application is ***for use by laboratories geographically located in California*** ***seeking renewal of an existing accreditation*** granted under the California Environmental Laboratory Accreditation Act (Chapter 4 commencing with Section 100825, Part 1, Division 101, of the California Health & Safety Code). ***Changes to the laboratory’s existing accreditation cannot be made on a renewal application.***

Any laboratory seeking a change in name, change in location, addition of a satellite or mobile laboratory, and/or addition or reinstatement of Field(s) of Accreditation must submit an Amendment Application.

**PART A – LABORATORY INFORMATION**

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| **Name of Laboratory**: |
| **Certificate Number**: |
| **Expiration Date**: |
| **Laboratory Contact Person**: |
| **Contact Email**: |
| **Contact Phone Number**: |
| **State Regulatory Agency the Laboratory Reports to** *(select all that apply):*  Division of Drinking Water  State Water Resources Control Board  Regional Water Quality Control Board(s):  Department of Toxic Substances Control  Department of Conservation  Other: |
| **Number of Full-time Technical Employees**: |
| **Number of Part-time Technical Employees**: |

**PART B – QUALITY MANUAL**

Submit an electronic copy of the laboratory Quality Manual. The Quality Manual must meet the requirements of the 2016 TNI Standard Volume 1 – Revision 2.1, Module 2, Section 4.2.8.3 and 4.2.8.4.

**PART C – FIELD(S) OF ACCREDITATION TABLES**

Populate the Field(s) of Accreditation Tables for which the laboratory is seeking accreditation by placing a (Y) in the appropriate column. ***Addition or reinstatement of Field(s) of Accreditation to the laboratory’s existing accreditation will not be accepted in the renewal application package.***

Submit the Field(s) of Accreditation Tables in two formats:

1. Electronic Copies: Print the populated Field(s) of Accreditation Tables, sign the bottom of the first page of each Table, scan, and submit electronically.
2. Excel Copies: Submit the populated Field(s) of Accreditation Tables as Excel files so that ELAP can directly upload the requested Field(s) of Accreditation to ELAP’s database.

**PART D – PROFICIENCY TESTING**

Submit electronic copies of the laboratory’s Proficiency Testing study results with acceptable scores for each Field(s) of Accreditation in the application. Proficiency Testing must comply with the requirements of CCR Section 64802.15.

Laboratories seeking renewal accreditation for aquatic toxicity testing must include a current reference toxicant control chart for each method, species, and endpoint.

**PART E – ON-SITE ASSESSMENT**

Submit electronic copies of documentation from the laboratory’s On-Site Assessment that complies with the requirements of CCR Section 64802.20. Use the checklist below to ensure submittal of all required documents.

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| **Date of On-Site Assessment**: |
| **Assessment Performed By**:  ELAP  Third-Party Assessment (TPA) Agency  Organization Name: |
| **Checklist of Required Documents**:  Completion Letter  On-Site Assessment Report (OSAR)  Approved Corrective Action Plan (CAP)  Assessment Checklists (for TPA assessment only)  Laboratory’s Previous Corrective Action Plan |

**PART F – APPLICATION FEE   
*MUST BE COMPLETED OR APPLICATION WILL BE RETURNED***

Each laboratory is required to pay a nonrefundable renewal application fee, due at the time of submittal of the application. The application fee is comprised of two components:

1. **Base fee** – $4,030
2. **Per Field of Accreditation (FOA) fee** – Count the number of individual subgroups in the Field(s) of Accreditation Tables for which you are seeking accreditation to determine which Tier applies. You do not have to pay the fees for any Tiers falling outside of the one that applies to your laboratory (i.e. only select one Tier price in the table below).

*FEE CALCULATOR*

Use the table below to calculate your total Renewal Application Fee. The base fee has been filled in for you because it applies to all laboratories. Fill in only one Tier price and add it to the base fee to determine your Total Renewal Application Fee.

|  |  |  |
| --- | --- | --- |
| **Fee Component** | **Price** | **My Cost** |
| Base Fee | $4,030 | **$4,030** |
| Field of Accreditation (FOA) Fee | -- |  |
| Tier 1 – 1-10 FOAs | $585 |  |
| Tier 2 – 11-49 FOAs | $1,495 |  |
| Tier 3 – 50-99 FOAs | $4,485 |  |
| Tier 4 – 100-149 FOAs | $7,475 |  |
| Tier 5 – 150-249 FOAs | $10,465 |  |
| Tier 6 – 250-349 FOAs | $13,445 |  |
| Tier 7 – 350 - 499 FOAs | $16,445 |  |
| Tier 8 – 500 – 999 FOAs | $19,500 |  |
| Tier 9 – 1,000-1,999 FOAs | $24,500 |  |
| Tier 10 – 2,000 + FOAs | $29,500 |  |
| **Total Renewal Application Fee** |  |  |

*HOW TO PAY*

Option 1: Online Payments (via Visa, MasterCard, or Discover):

1. Visit <http://www.officialpayments.com/> and select “State Payments”
2. On the “Make A Payment” page, select the following:
   1. State or Territory – Select California
   2. Payment Entity – Select State Water Resources Control Board
   3. Payment Type – Select Invoices
3. Select the “Make A Payment” button
4. In the SWRCB Invoice Types drop down menu on the bottom of the page, select “Environmental Laboratory Accreditation Program (ELAP) Invoice” and click “Search”
5. Input the “SWRCB Invoice Number” and “Amount” from the laboratory’s Renewal Application and Fee Notice, then click the green “ADD” button
6. Select “View Cart”
7. If everything is correct, select “Continue” to input payment information and submit.

Option 2: Manual payments (via check, money order, or cashier’s check):

1. Make your payment payable to the State Water Resources Control Board
2. Include the ELAP invoice number from the laboratory’s Renewal Application and Fee Notice on the payment
3. Remit payment to one of the following addresses:

**State Water Resources Control Board Accounting Department**ATTN: ELAP FEES  
PO Box 1888  
Sacramento, CA 95812-1888

*Or*

**State Water Resources Control Board Accounting Department**ATTN: ELAP FEES  
1001 I Street, 18th Floor  
Sacramento, CA 95814  
(physical address for courier services)

**PART G – CERTIFYING SIGNATURES**

The Technical Manager and Quality Manager below certify that the laboratory location or ownership has not changed since the prior application, and re-affirm the laboratory’s commitment to compliance with the Environmental Laboratory Accreditation Act and its regulations (California Code of Regulations, title 22, chapter 19, articles 1 through 7):

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| **Name of Technical Manager**: |
| Signature: Date: |
| **Name of Quality Manager** *(if designated):* |
| Signature: Date: |

The owner, owner’s agent, or corporate officer authorized to act on behalf of the laboratory, is authorized to sign and submit this document and certifies that all information contained within is true and accurate.

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| **Name of Representative Submitting Application**: |
| Signature: Date: |

***For ELAP Admin use ONLY***

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| Application Number: |
| Date Submitted: |
| Date Returned to Laboratory (if incomplete): |
| Date Complete: |
| Comments: |