

VIRGINIA ENVIRONMENTAL LABORATORY ACCREDITATION PROGRAM
VIRGINIA DIVISION OF CONSOLIDATED LABORATORIES
600 North 5th Street
Richmond, Virginia 23219
(804)648-4480

Laboratory Name: _____

Laboratory Address: _____

**Applicant Laboratory
Certification of Compliance**

***ATTACHMENT TO:
APPLICATION FOR CERTIFICATION UNDER 1VAC 30-45
OR ACCREDITATION UNDER 1VAC 30-46***

The applicant understands and acknowledges that the laboratory is required to be continually in compliance with the Virginia environmental laboratory certification program regulation (1 VAC 30, Chapter 45 or 1 VAC 30, Chapter 46) and is subject to the provisions of 1 VAC 30-45-100 or 1 VAC 30-46-100 in the event of noncompliance. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the laboratory or those persons directly responsible for gathering and evaluating the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. Submitting false information or data shall result in denial of certification (accreditation) or decertification (withdrawal of accreditation). I hereby further certify that I am authorized to sign this application.

RESPONSIBLE OFFICIAL:

PRINT: _____ **SIGN:** _____ **DATE:** _____

LEAD LABORATORY MANAGER or LEAD TECHNICAL DIRECTOR:

PRINT: _____ **SIGN:** _____ **DATE:** _____

QUALITY ASSURANCE OFFICER:

PRINT: _____ **SIGN:** _____ **DATE:** _____