COMMONWEALTH OF VIRGINIA
DIVISION OF CONSOLIDATED LABORATORY SERVICES
600 North 5th Street
Richmond, VA 23219

804-648-4480

DCLS

FEE PAYMENT FORM for
Virginia Laboratory Certification Programs

Laboratory Name:

EPA Laboratory ID: **Virginia Laboratory ID:** **Date:**

Payment Amount:_____

Reason For Payment:
- ☐ VELAP Fees in full
- ☐ VELAP Fees – partial balance due
- ☐ VELAP Fees – additional tests requested
- ☐ Other : _____

Drinking Water Laboratory Certification Program
- ☐ Microbiology
- ☐ Inorganic Chemistry
- ☐ Organic Chemistry
- ☐ Radiochemistry

☐ Tuning Fork Laboratory Certification Program

If you require a receipt, please request it in writing with your payment. Thank you.

Method of Payment:
- ☐ Payment by **check payable to "Treasurer, Commonwealth of Virginia"**
  (Mail To: Attn: Lab Certification, DCLS, 600 North 5th Street ; Richmond, VA 23219)
- ☐ Payment by **credit card** - please sign and include the information below
  (Mail to address above OR fax to (804)692-0416)

Credit Card Type:
- ☐ Visa
- ☐ Mastercard

Credit Card Account Number: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Expiration ☐☐ / ☐☐

3 Digit Code On Back of Credit ☐☐☐

Credit Card Billing Zip Code: ☐☐☐☐☐ – ☐☐☐☐

Cardholder Name (please print)

Cardholder Signature

Date

Daytime Phone

[DGS Fiscal Use Only: Cost Code: 211 Fund Code: 0501]