



Louisiana Environmental Laboratory Accreditation Program Instructions for Completing the Application Form

Purpose:

This application form provides a means for environmental laboratories to apply for accreditation to submit environmental laboratory data as required by LAC 33:I.Subpart 3. The application form also provides the information needed to assess fees for the parameters a laboratory is accredited to perform.

Explanation and Definition:

The "Application for Environmental Laboratory Accreditation" is to be completed by environmental laboratories applying for certification in accordance with LAC 33:I.Subpart 3. The completed application form, attachments, and enclosures, **with the required \$660.00 application fee**, are to be submitted to the Louisiana Department of Environmental Quality, OES, Permit Support Services Division, Notifications and Accreditations Section, Louisiana Environmental Laboratory Accreditation Program, PO Box 4313, Baton Rouge, LA 70821-4313. Do not mark the section for the Assigned Louisiana Laboratory/Stack Tester Identification Number. That number will be assigned when the application is received by the Department.

"Section by Section Instructions"

Section A. Purpose and Type of Application:

In the left box, mark the box that identifies whether the laboratory is applying for initial accreditation, renewal accreditation, reaccreditation, or an additional test category. In the right box, mark the box that identifies whether the laboratory is seeking State accreditation or NELAP accreditation.

Section B. General Information:

Enter general information about the lab, including the laboratory's official or legal name. If your lab is a branch office or a substation of the Company, specify the location or the branch name after a dash. Limit name to 27 characters (including punctuation and spaces) for computer entry. **Note: What you put here is exactly how your laboratory name will appear on the certificate and in all of our records.** Additionally, complete the mailing address of the office where correspondence should be sent (i.e., P. O. Box), city, contact information, parish code (if the lab is located in Louisiana, use the reference in the attached list of parish codes), state code, laboratory's business telephone and fax numbers, e-mail address, and the shipping address (complete address of the office where the invoice for fees should be sent by street address - not P. O. Box). If no street address has been assigned, enter a location or description. Also, enter the hours of operation, geographic location, Vehicle Identification Number if you own or use a Mobile Laboratory, and billing information.

Section C. Type of Laboratory:

Mark an (X) in the box for the type of laboratory that applies.

Section D. Out-of-State Laboratories:

List all Environmental Laboratory Accreditations/Certifications held by the laboratory, including the names of the certifying authority, type of certification, and date of expiration. Attach copies of all current Accreditation/Certificates, including lists of parameters and methods, last two Water Study and Water Pollutant Performance Evaluation study results, most recent on-site evaluation reports and responses to deviations from each of the following State Accreditation/Certification Programs (Add additional columns and use additional sheets if necessary).

Section E. Laboratory Technical Director:

Enter the name and contact information of the person designated responsible for the laboratory operations. Include education, any licenses, certifications, or registrations held, the issuing body, and related laboratory expiration date of each. Summarize the laboratory's technical director's experience below this Section on the form.

Section F. Quality Assurance Officer:

Enter the name of the QA Officer, position held, telephone number, name of educational institution and degree. Also summarize the QA Officer's training and experience below this Section on the form. Include any licenses, certifications, or registrations held, issuing body, and expiration date.

Section G. All Other Personnel:

List all personnel involved in laboratory operations and their position held. Please add additional tables for additional personnel, and ***make additional copies of this page***, if needed. Include primary duties. Resumes may be attached.

Section H. Fees: Test Categories, Fields of Testing, and Fee Calculation:

(Example of Fee Calculation noted below)

TEST CATEGORIES	Fields of Testing					Applicant's Fees
	Air Emission	Non-Potable Water	Solid and Chemical Materials	Biological Tissue	Annual Fee per Category	
Metals		X	X		\$330	\$330
Air Pollutants Including Industrial Hygiene and Toxic Organic Compounds (T.O.) Methods	X				\$330	\$330
Nutrients, Minerals, Ion, Demands, Classical Wet Chemistry, Total & Fecal Coliforms		X			\$330	\$330
Microbiology Including Fecal & Total Coliform					\$330	
Bioassay / Biomonitoring					\$330	
Organics Including Volatiles, Semi-Volatiles, Pesticides, Herbicides, and PCBs		X	X		\$330	\$330
Dioxins and Furans					\$330	
Radiochemistry					\$330	
Asbestos					\$330	
Geotechnical Soil Testing					\$330	
Minor Conventional Parameters (BOD ₅ , O&G, TSS, Fecal & Total Coliform, Residual Chlorine Only)*					\$264	
*Do not check this category if you checked any other category. This category is for laboratories seeking accreditation for these parameters only.	Total Test Category Annual Fee					\$ 1320

TOTAL ANNUAL FEE CALCULATION:

Total Test Category Annual Fee (As calculated noted from the fee table above)	\$ 1320
Annual Surveillance and Evaluation Fee (ASEF) <i>Add \$330, if you checked only one Test Category above.</i>	\$ 0
Total Annual Fee for Your Laboratory Total Test Category Annual Fee + ASEF (if applicable)	\$ 1320

Section I. Methods:

Complete table by indicating the parameter, method, matrix, and whether the proficiency test results/ analytical data package have been performed/are included. If the PT Results/ Analytical Data Package column is marked "No", provide explanation on separate page. Type in the approved method(s) or standard operating procedure(s) that the laboratory is seeking accreditation to perform. See Example below:

Office Use Only	Parameter	Method	Matrix	*Listed on Scope from Primary Accreditation Body (Y/N)	**Proficiency Test Results/ Analytical Data Package (Y/N)
	Lead	SW-846 6010	NPW	Y	Y
	Traverse Points	Method 1 40 CFR 60 Appendix A	Air Emission	N	Y
	Particulate	Method 5 40 CFR 60 Appendix A	Air Emission	N	Y
	Sampling Only	Method 17 40 CFR 60 Appendix A	Air Emission	N	Y
	Extractive FTIR Specifications	CEMS PS 1 40 CFR 60 Appendix B	Air Emission	N	Y
	Endrin	TO-10A	Air Emission	Y	Y
	pH	SM 4500-H B (21 st Edition)	NPW	Y	Y
	Fecal streptococci (MPN)	SM 9230 B (20 th Edition)	NPW	Y	Y
	Ceriodaphnia dubia	EPA 600/4-90/027F	NPW	Y	Y
	Alumina Clean Up	SW-846 3610	SCM	N	Y
	Fenthion	SW-846 8141	SCM	N	Y
	Chrysene	SW-846 8310	Tissue	Y	Y
	3, 3'-Dichlorobiphenyl	EPA 1668	SCM	Y	Y
	Radium-226	HASL Ra-02-RC, Ra-03-RC	SCM	Y	Y
	Asbestos in Friable Material	EPA 600/M4-82-020	SCM	Y	Y
	Unconfined Compressive Strength of Soil	ASTM D 2166	SCM	N	Y

Section I. Methods (continued):

Make additional copies of the Methods table as needed.

The following is additional clarification regarding the Methods table.

*For Recognition Only, on the column noted as "Listed on Scope from Primary Accreditation Body", mark "Y" for Yes and "N" for No. If Recognition Only is not requested, mark "NA" for Not Applicable.

** If the Proficiency Test (PT) Results/ Analytical Data Package column is marked "No", provide an explanation on separate page and attach behind this page.

Out-of-state laboratories: The State Certifying Authority's certificate must reflect the appropriate certification for each parameter and method listed. If a parameter is not listed on the accreditation/certificate by the State Accrediting/Certifying Authority, approval cannot be issued by the Louisiana Environmental Laboratory Accreditation Program. Also, please attach documentation of EPA approval for method modification.

Section J. Quality Control:

Check the quality control practices used by your laboratory with the frequency they are performed. If a Section does not pertain to your laboratory, include "NA" in the comment section with an explanation. The laboratory's quality assurance plan and a list of standard operating procedures must be submitted with the completed application package.

Section K. Statement of Validation:

The application must be signed and dated by the Laboratory Representative attesting to the validity of the information documented in the application. The name of the representative must be type or printed legibly.

Section L. Designation of Laboratory Representative:

The Laboratory Representative must be designated by the laboratory's governing body (owners, directors, commissioners, councilmen, mayor, board members, or whosoever occupies the status of proprietor). The designation must be submitted to the LDEQ on company letterhead, and signed and dated and the name of the above must be type or printed legibly.

Section M. Attestation of Compliance Form:

Complete the form with the appropriate signatures and return it with your application.

NOTE: The application must be typed. The shaded areas on the application are for LDEQ Office Use Only. Please do not mark in the shaded areas.

Office Mechanics and Filing of the Louisiana Accreditation/Stack Tester Application:

Please complete the application form and submit with one copy of the application form, along with the application fee, attachments, and enclosures need to be routed to the Louisiana Department of Environmental Quality, Environmental Laboratory Accreditation Program. The mailing and shipping address appear below:

Mailing Address:

LDEQ, OES, Permit Support Services Division
Notifications and Accreditations Section
Louisiana Environmental Laboratory Accreditation Program
P. O. Box 4313 Baton Rouge, LA 70821-4313 Attn: Mr. Paul Bergeron

Shipping Address:

LDEQ, OES, Permit Support Services Division
Louisiana Environmental Laboratory Accreditation Program
602 N. 5th Street
Baton Rouge, LA 70802
Attn: Mr. Paul Bergeron

Please retain a copy of your completed application form in your file for future reference. If you have any questions concerning the application form or the Environmental Laboratory Accreditation Program, please call (225) 219-1244.

Please see the attachment which contains Louisiana Parish Codes and the Federal Information Processing Standard (FIPS) Codes for States.

Louisiana Parish Codes

Parishes and Parish Codes:

<u>Parish</u>	<u>Parish Code</u>	<u>Parish</u>	<u>Parish Code</u>
Acadia	001	Madison	065
Allen	003	Morehouse	067
Ascension	005	Natchitoches	069
Assumption	007	Orleans	071
Avoyelles	009	Ouachita	073
Beauregard	011	Plaquemine	075
Bienville	013	Pointe Coupee	077
Bossier	015	Rapides	079
Caddo	017	Red River	081
Calcasieu	019	Richland	083
Caldwell	021	Sabine	085
Cameron	023	St Bernard	087
Catahoula	025	St Charles	089
Claiborne	027	St Helena	091
Concordia	029	St James	093
DeSoto	031	St John the Baptist	095
East Baton Rouge	033	St Landry	097
East Carroll	035	St Martin	099
East Feliciana	037	St Mary	101
Evangeline	039	St Tammany	103
Franklin	041	Tangipahoa	105
Grant	043	Tensas	107
Iberia	045	Terrebonne	109
Iberville	047	Union	111
Jackson	049	Vermilion	113
Jefferson	051	Vernon	115
Jefferson Davis	053	Washington	117
Lafayette	055	Webster	119
Lafourche	057	West Baton Rouge	121
La Salle	059	West Carroll	123
Lincoln	061	West Feliciana	125
Livingston	063	Winn	127

FIPS Codes for States and the District of Columbia:

<u>Name</u>	<u>FIPS State Numeric Code</u>	<u>FIPS State Alpha Code</u>	<u>Name</u>	<u>FIPS State Numeric Code</u>	<u>FIPS State Alpha Code</u>
Alabama	01	AL	Missouri	29	MO
Alaska	02	AK	Montana	30	MT
Arizona	04	AZ	Nebraska	31	NE
Arkansas	05	AR	Nevada	32	NV
California	06	CA	New Hampshire	33	NH
Colorado	08	CO	New Jersey	34	NJ
Connecticut	09	CT	New Mexico	35	NM
Delaware	10	DE	New York	36	NY
District of Columbia	11	DC	North Carolina	37	NC
Florida	12	FL	North Dakota	38	ND
Georgia	13	GA	Ohio	39	OH
Hawaii	15	HI	Oklahoma	40	OK
Idaho	16	ID	Oregon	41	OR
Illinois	17	IL	Pennsylvania	42	PA
Indiana	18	IN	Rhode Island	44	RI
Iowa	19	IA	South Carolina	45	SC
Kansas	20	KS	South Dakota	46	SD
Kentucky	21	KY	Tennessee	47	TN
Louisiana	22	LA	Texas	48	TX
Maine	23	ME	Utah	49	UT
Maryland	24	MD	Vermont	50	VT
Massachusetts	25	MA	Virginia	51	VA
Michigan	26	MI	Washington	53	WA
Minnesota	27	MN	West Virginia	54	WV
Mississippi	28	MS	Wisconsin	55	WI
			Wyoming	56	WY

FIPS Codes for the Outlying Areas of the United States, the Freely Associated States, and Trust Territory:

<u>Area Name</u>	<u>FIPS State Numeric Code</u>	<u>FIPS State Alpha Code</u>	<u>Status</u>
American Samoa	60	AS	1
Federated States of Micronesia	64	FM	3
Guam	66	GU	3
Marshall Islands	68	MH	4
Northern Mariana Islands	69	MP	1
Palau	70	PW	2
Puerto Rico	72	PR	1
U.S. Minor Outlying Islands	74	UM	
Virgin Islands of the U.S.	78	VI	

Status:

- 1 Under U.S. sovereignty
- 2 An aggregation of nine U.S. territories: Baker Island, Howland Island, Jarvis Island, Johnston Atoll, Kingman Reef, Midway Islands, Navassa Island, Palmyra Atoll, and Wake Island. Each territory is assigned a FIPS County Code in FIPS PUB 6-3, and may be individually identified through a combination of the FIPS State Code (74 or UM) and the appropriate FIPS County Code.
- 3 A Compact of Free Association with the United States of America is now in full force. It was announced by Presidential proclamation on November 3, 1986.
- 4 Remains a trust territory.

FIPS State Numeric Codes for the Individual Minor Outlying Island Territories:

<u>Area Name</u>	<u>FIPS State Numeric Code</u>
Baker Island	81
Howland Island	84
Jarvis	86
Johnston Atoll	67
Kingman Reef	89
Midway Islands	71
Navassa Island	76
Palmyra Atoll	95
Wake Island	79

FIPS PUB 5-2 (CHANGES REQUEST FORM TO FIPS PUB5-2)

Codes for the Identification of the States, the District of Columbia and the Outlying areas of the United States, and associated areas:

Institute for Computer Science and Technology
Technology Building, Room B-14
National Bureau of Standards