LES04 EA - Certification of Laboratory for Environmental Analysis – Microbiology Amendment

Laboratory Certification Program





Overview

- This presentation is to assist in completing a new LES04 EA -Certification of Laboratory for Environmental Analysis -Microbiology Amendment
- □ Purpose of this certification:
 - This form is for certified laboratories in Massachusetts that want to add certification for extra analyte testing. Application to certify additional testing category(s) at microbiological analysis laboratories as authorized pursuant to MGL c. 21, s.27, c. 21A, s. 2(28), c 21C, s. 4, c. 21E, s. 3, c. 111 § 142A-142E, 150A, 160 and 310 CMR 42.00.
 - These regulations establish a program for Department certification of laboratories to conduct analytical measurements for purposes of determining compliance with Department standards where the Department or a client requires that such measurements be conducted by a certified laboratory.
 - This document will take you through the EEA ePlace online application process



EEA ePLACE Portal

General Navigation

Always Click Continue Application by to move to the next page

Any field with a red asterisk (*) is required before you can move off the page

Click Save and resume later to save your work and resume at a later time

- Click on the tool tips where applicable to get more details
- Click on Instructions tab application process

Instructions

for more information on the

□ We strongly suggest using Microsoft EDGE as a preferred browser



How to Apply

- Click or type this address on your browser: <u>Mass.gov EEA</u> <u>ePLACE Portal</u>
- Log into your account in EEA ePlace Portal using your username/password





Announcements Accessibility Support Register for an Account Reports (2) 🗸 Login

Need Help? For technical assistance in using this web application, please call the ePLACE Help Desk Team at (844) 733-7522 or (844) 73-ePLAC between the hours of 7:30 AM-5:00 PM Monday-Friday, with the exception of all Commonwealth and Federally observed holidays. If you prefer, you can also e-mail us at ePLACE_helpdesk@state.ma.us. For assistance with non-technical questions, please contact the issuing Agency directly using the links below.

Contact: Energy and Environmental Affairs, MASSDEP Energy and Environmental Affairs, MDAR Energy and Environmental Affairs, DCR

For DPL, DCAMP and ABCC permits or licenses, please click here.

<u>Convenience Fee:</u> Please note there will be a convenience fee for all online credit card transactions. There is also a nominal fee for online payment by check.

Home

Portal	User Name or E-mail:
he Commonwealth of Massachusetts is pleased to offer online access to many	>
censing, permitting and certificate services. With ePLACE, the Commonwealth hopes	
o deliver more efficient, convenient, and interactive e-government services.	Password:
Indiana for Liconaco and Applicants:	
prioris for Licensees and Applicants.	
Apply for, Renew, or Amend a License, Permit, Certificate, Notification or Registration	Login »
Make Payments Online	
,	
	Remember me on this computer
PLACE Portal Account Registration:	I've forgotten my password New Users: Register for an Account
n order to utilize most of the services available through the ePLACE, you must first	
edister for an account to do any of the following:	Please note: At this time, the ePLACE
gister for an account to do any of the following.	licenses, permits and certificates issued
Apply for a License, Permit, Certificate, Notification or Registration	by Energy and Environmental
Renew a License, Permit, Certificate or Registration	Affairs(EEA). It does not service any othe
Track the Status of Applications	type of license, permit or certificates that
hack the status of Applications	Is issued or approved by the
Review and Update Applications, Permitting and/or Certificate Information	municipalities. ePLACE does not service
	any federal licenses or permits

File an Online Application

Click on the "My Records" tab to start

0		s State w2 topics	s State Forms	Accessibility FAQs			
	An Official website of the C	ommonescalth of Maco	etheedta				
	EEA ePLACE	Portal					
	Logged	lin as: Test Test (] Accessibility Sup	port Collections (0)	Reports (3) 👻	Account Management Announe	Logoul
New ePL If yo issu	ed Help? For technical a AC between the hours ou prefer, you can also o ing Agency directly usin teace:	ssistance in using r f7:30 AM-5:00 P/ e-mail us at cPLAC ing the links below.	this web applicatio M Monday-Friday. FE_helpdesk@sta	n, please call the ePLA with the exception of a terma.us. For assistant	⊐ Help Desk Te I Commonweal e with non-tecl	am at (844) 753-7522 or th and Federally observed mical questions, please o	(844) 73- I holidays ontact the
Eni	ergy and Environment ergy and Environment ergy and Environment	al Affairs, MASSD al Affairs, MDAR al Affairs, DCR	DEP				
For	OPL, DCAMP and ABCO	permits or license	as, please click he	r#			
20		ote there will be a	convenience fee f	or all online credit card	transactions. Th	ere is also a nominal fee	10001
Cor pay	wenierce Fee: Please n ment by check.						for online
Cor pay	weniah ce Fee: Please n ment by check.						tor online
Cor pay	weniehoe Fee: Please n ment by Check.	4		7			tor online
Car pay	Dashboard	My Records	My Account]			tor online
Cor pay	International Fee: Please in merit by Check.	My Records	My Account				for online
Cor pay	Dashboard Welcome Test Test You are now logged in	My Records	My Account	e Fortal.		File an Online Application	for online
	Dashboard Dashboard Welcome Test Test You are now logged in What would you like	My Records	My Accourt realth's EEA ePlac	e Portai.		File an Online Application	
	Dashboard Dashboard Welcome Test Test You are now logged in What would you like New License, Permit, Ci	My Records to the Commonw e to do? eruncate. Noullicate	My Account realth's EEA ePlac	e Portal. Click Here		File an Online Application	
	Dashboard Dashboard Dashboard Welcome Test Test You are now logged in What would you like New License, Permit, C Renew License, Permit, C	My Records to the Commonw e to do? eruflicate. Notificatk Ceruflicate or Regis	My Accourn realth's EEA ePlac on or Registration stration (select "My	Portal. Click Here Records" above)		File an Online Application	



Access your record

A list of your records will be displayed:

Locate the laboratory authorization	Home Dashboard	My Re	ecords M	y Account				
autionzation								
record you need to	✓ DEP							
Amend	Showing 1-10 of 99	Download resu	Its Add to collection					
	Date	Record Number	Record Type	Facility/Location Address	Status	Action	Expiration Date	Le
Click on	Ľ		LES EA - Certification of					
"Amendment" to	06/09/2022	LES-M- MA153	Laboratory for Environmental Analysis Authorization		Active	Amendment	06/30/2022	
continue								



Access your record

- Click on "LES04 EA

 Certification of Laboratory for
 Environmental
 Analysis Microbiology
 Amendment"
- Click "Continue Application" to proceed

Home

DEP Applications

Select an Amendment Type

Choose one of the following available amendment types. For assistance or to apply for an amendment type not listed below please contact us.

Search

LES EA - Laboratory Administrative Amendment

O LES03 EA - Certification of Laboratory for Environmental Analysis - Chemistry Amendment

LES04 EA - Certification of Laboratory for Environmental Analysis - Microbiology Amendment

Continue Application »



- The system will display the Laboratory Information currently on file
- To review or modify the information, click the "Edit or View" button
- A pop-up will open, where the Laboratory Information can be modified
- Click "Continue Application" to proceed



To update your laboratory information, please click the "Edit or View" button and modify the information accordingly.

Laboratory Information:
Boston test Laboratory
1 State St
Boston, MA, 12345
Telephone #: 111-1111 Email: test@test.com

Edit or View Remove

Continue Application »



Individual/Organization:	*Name Of Orga	nization:		()	
Organization	 Boston Test Lab 				
Country:	* Address Line 1:	(?	Ad	dress Line 2:	
United States 🔹	1 Winter St		Su	ite 800	
City:	*State:			Zip:	
Boston	MA		•	12345-	
E-mail:	0	*Telephone #:	?	* Tax ID:	
test@test.com		111-111-1111		12345	
Is mailing address same ibove?:) Yes () No	as the physical addr	ress specified			

8

 Your current information on file will be displayed

Refer to individual section instructions for the steps to update the information

	oratory rmation	2 Analyte Information	3 Documents	4 Special Fee Provision	5 Review	6
Step 1	1:Laboratory	Information>Pa	ge 2 of 3			
Labor	atory Owners				* indicate	es a required fiel
LABORA	ATORY OWNERS					
To add	new owners, click	the "Add a Row" butt	o n .			
7 To mod	ify information, cl	ick on the "Actions" b	utton for that row and cl	ick "Edit".		
To dele	te the row, click o	n the "Actions" buttor	n for that row and click "[)elete".		
Showin	a 1-1 of 1					
	Laborat	ory Owner Name				
	Test					Actions 🗸
_						
Add a	Kow Edit	Selected Delete	selected			
Labor						
Labor						
Labora LABORA	ATORY HOURS	lick the "Add a Row" I	outton.			
Labor LABOR To add To mod	ATORY HOURS operating hours, c	lick the "Add a Row" I	outton. utton for that row and cl	ick "Edit".		
Labora LABORA To add To mod To dele	ATORY HOURS operating hours, c lify information, cl te the row, click o	lick the "Add a Row" I ick on the "Actions" b n the "Actions" buttor	outton. utton for that row and cl n for that row and click "[ick "Edit". Delete".		
Labor LABOR To add To mod To dele	ATORY HOURS operating hours, c lify information, cl te the row, click o	lick the "Add a Row" I ick on the "Actions" b n the "Actions" buttor	outton. utton for that row and cl I for that row and click "[ick "Edit". Delete".		
Labora LABORA To add To mod To dele	ATORY HOURS operating hours, c lify information, cl te the row, click of g 1-1 of 1	lick the "Add a Row" I ick on the "Actions" b n the "Actions" buttor	outton. utton for that row and cl I for that row and click "[ick "Edit". Delete".		
Labora LABORA To add a To mod To delet Showin	ATORY HOURS operating hours, c ify information, cl ite the row, click of g 1-1 of 1 Day	lick the "Add a Row" t ick on the "Actions" b n the "Actions" buttor Start Time (hh:mm)	outton. utton for that row and cl n for that row and click "[Start Time (AM/PM)	ick "Edit". Delete". End Time (hh:mm)	End Time (AM/PM)	



EEA ePLACE Portal

Refer to individual section instructions for the steps to update the information

Note: A Laboratory Personnel Form must be submitted for each staff member <u>added or</u> <u>modified.</u> When saving the file, please use the "LPF-Lastname-Firstname" format

Click "Continue
 Application" to proceed

Laboratory Personnel

LABORATORY PERSONNEL

To add a new laboratory staff member, click the "Add a row" button.

To modify staff member information, click on the "Actions" button for that row and click "Edit".

To delete the row, click on the "Actions" button for that row and click "Delete".

<u>Note:</u> A Laboratory Personnel Form must be submitted for each individual added to the table below. Also submit a copy of the form for any individual for which a change in job title is requested. When saving the file, please use the "LPF-Lastname-Firstname" format.

Please download the form here - Laboratory Personnel Form.

Showing 1-1 of 1





Save and resume later



- The system will display the Laboratory Information currently on file
- Refer to individual section instructions for the steps to update the information

EEA ePLACE Portal

Click "Continue Application" to proceed

1 Information	2 Analyte Information	3 Documents	4 Special Fee Provision	5 Review	6
Step 1:Labor	atory Information>Pa	ige 3 of 3		* indicates	a required fi
Laboratory Fa	cility				
ABORATORY FAC	CILITY				
To add new facilit To modify inform	y information, click the "Add ation, click on the "Actions" b	a Row" button. outton for that row and c	lick "Edit".		
o delete the row	, click on the "Actions" buttor	n for that row and click "	Delete".		
Showing 1-1 of 1					
Showing 1-1 of 1	y Details		Description		
Showing 1-1 of 1 Facilit Bench	y Details Space (sq/ft) - Microbiology		Description Use the Space for MB Lab.		Actions

Laboratory Equipment

LABORATORY EQUIPMENT

To add new equipment, click the "Add a Row" button. To modify information, click on the "Actions" button for that row and click "Edit". To delete the row, click on the "Actions" button for that row and click "Delete".

Showing 1-1 of 1





Continue Application »

Step 2: Analyte Information

- To add or drop an Analyte/Method for <u>Potable Water Microbiology</u>:
 - Click on the "Actions" button beside the analyte
 - Click "Edit"
 - To request certification for a new analyte/method, please enter the method in the "New Method(s) field"
 - To drop certification for a method, please enter the method information in the "Remove Method(s) field"
 - To drop certification for an analyte, please list all the method(s) for which the laboratory is currently certified in the "Remove Method(s) field"

Click "Continue Application" to proceed



EEA ePLACE Portal

	1 Laboratory Information	2 Analyte Information	3 Documents	4 Special Fee Provision	5 Review	6
--	-----------------------------	--------------------------	-------------	----------------------------	----------	---

Step 2: Analyte Information > Page 1 of 2

Please read the guidance below:

To add or drop an Analyte/Method:

- Click on the "Actions" button beside the analyte
- Click "Edit"
- To request certification for an analyte/method, please enter the method in the "New Method(s) field". If you are requesting certification for multiple methods separate them using a comma.
- To drop certification for a method, please enter the method information in the "Remove Method(s) field".
- To drop certification for an analyte, please list all the method(s) for which the laboratory is currently certified in the "Remove Method(s) field".

To review the fee associated with each analyte, click here.

* indicates a required field

Potable Water Microbiology

POTABLE WATER MICROBIOLOGY

Use the "Continue Application" button to move to the next certification area.

Showing 1-7 of 7

-					
Analyte	Category	Certified Method(s)	New Method(s)	Remove Method(s)	
Total Coliform	Water Treatment and Distribution	ENZ. SUB. SM9223		Z	Actions 🔻
Escherichia coli	Water Treatment and Distribution	ENZ. SUB. SM9223			Actions 🔻
Total Coliform	Source Water				Actions 🔻
Fecal Coliform	Source Water	" button to move to the pe	vt certification area		in tionis 🔻
Escherichia coli	Source	in button to move to the ne	at certification area		io <mark>ns 🔻</mark>
Enterococci	*Analyte:	Category:	h ad Distribution	Certified Method(s):	ions 🔻
Heterotrophic Plate Count	Source	water freatmen			ions 🔻
Continue Application					11
Continue Application	New Method(s):	Remove Meth	od(s):		liter
		11	11		
12	Submit Cancel				

Step 2: Analyte Information

- To add or drop an Analyte/Method for <u>Non- Potable Water Microbiology</u>:
 - Click on the "Actions" button beside the analyte
 - Click "Edit"
 - To request certification for a new analyte/method, please enter the method in the "New Method(s) field"
 - To drop certification for a method, please enter the method information in the "Remove Method(s) field"
 - To drop certification for an analyte, please list all the method(s) for which the laboratory is currently certified in the "Remove Method(s) field"

EEA ePLACE Portal

Click "Continue Application" to proceed



 1 Laboratory Information
 2 Analyte Information
 3 Documents
 4 Special Fee Provision
 5 Review
 6

Step 2:Analyte Information>Page 2 of 2

Please read the guidance below:

To add or drop an Analyte/Method:

- Click on the "Actions" button beside the analyte
- Click "Edit"
- To request certification for an analyte/method, please enter the method in the "New Method(s) field". If you are requesting
 certification for multiple methods separate them using a comma.
 - To drop certification for a method, please enter the method information in the "Remove Method(s) field".
- To drop certification for an analyte, please list all the method(s) for which the laboratory is currently certified in the "Remove Method(s) field".

To review the fee associated with each analyte, click here.

* indicates a required field.

Non-Potable Water Microbiology

NON-POTABLE WATER MICROBIOLOGY

Use the "Continue Application" button to move to the next certification area

Showing 1-5 of 5

Anal

Esch

Ente Feca

Esch

Ente

yte	Category	Certified Method(s)	New Method(s)	Remove Method(s)	
erichia coli	Ambient Water	SM 9223B-COLILERT		Z	Actions v
rococci	Ambient Water	ENTEROLERT			Actions 🔻
l Coliform	Wastewater	MF-SM9222D			Actions v
erichia coli	Wastewater	Use the "Continue Application" butt	on to move to the next certificat	tion area.	in 💌
rococci	Wastewater	*Analyte:	Category:	Certified Method(s	s): n 🔻
		Total Coliform	Water Treatment and Distri	ibution ENZ. SUB. SM9223	
ontinue Applica	ation »	New Method(s):	Remove Method(s):	4	a er
13	3	Submit Cancel	1		

Step 3: Documents

- Upload all required documents for your application
 - The required documents be listed in the table —
- □ To begin attaching documents, click "Brov

	1 Laboratory Information	2 Analyte Information	3 Documents	4 Special Fee Provision	5 Review	6
ad all required ments for your cation	Step 3:Docume A Laboratory Person for any individual for format.	ents>Page 1 of 1 Inel Form must be submit r which a change in job ti	ted for each individual ad tle is requested. When sa	lded to the personnel table ving the file, please use the	. Also submit a copy of th "LPF-Lastname-Firstnam	e form e"
required documents will sted in the table	The form may be do Documents	wnload here – Laborator	y Personnel Form.		* indicates a rec	uired field.
egin attaching ments, click "Browse"	Please upload 2 1. Laboratory Quality 2. Standard Operatin	Required Document(s y Assurance Plan ng Procedures) which are mandator	y to submit this Applica	ition:	
	Attachment					
	When uploading file do The 'File Name' (includi The document 'Descrip Documents that exceet .bat;.bin;.dll;.exe;.js;.ms are disallowed file type	cument(s) the maximum file : ng file extension) MUST NOT tion' MUST NOT exceed 50 c d any of these limits will be re si;.sql;.vbs;ade;adp;chm;cmd; s to upload.	size allowed is 50 MB . exceed 75 characters in leng haracters in length. moved by the system, and ca com;cpl;hta;ins;isp;jar;jse;lit	ith. annot be retrieved, which may o ;lnk;mde;msc;msp;mst;php;pil	delay the review process. f;scr;sct;shb;sys;vb;vbe;vxd;v	vsc;wsf;wsl
	Name Ty	ype Size	Latest Update	Description	Action	
$\langle \rangle$	No records found.					
Ž	N N					
	Browse					
	Continue Applic	cation »			Save and resum	e later
EA ePLACE Portal						



Step 3: Documents (Attaching)

- A "File Upload" window opens
- Click "Browse"
- Choose the file(s) you want to attach
- When all files reach 100%, click "Continue"

File Upload		×
When uploading file document(s) the maximu The 'File Name' (including file extension) MUS The document 'Description' MUST NOT exce Documents that exceed any of these limits w retrieved, which may delay the review proces	um file size allowed is 100 MB . ST NOT exceed 75 characters in length. ed 50 characters in length. ill be removed by the system, and cannot be ss.	
Blank Upload 1.docx	100%	
Blank Upload 2.docx	100%	
Blank Upload 3.docx	100%	
Continue Browse	Remove All Cancel	



Step 3: Documents (Attaching)

□ Select the document type .

- Provide a description of each document that you uploaded
- Click "Browse" to add more documents
- When all documents are uploaded and described, click "SAVE"
 - Note If you click SAVE and RESUME, that will <u>not</u> save your documents, make sure to click SAVE first for the documents to be saved to the application
- Click "Continue Application" to proceed



EEA ePLACE Portal

type.		R
Select	*	
Eler		
MDAR_Pesticide_Approval_v	1 20220314 145608	
(1).pdf		
100%		
*Description (Maximum	50 characters):	
A maximum of 50 characters	K	
*Type:		R
Select	*	
File:		
File: MDAR_Pesticide_Approval_v	1_20220314_145608.pdf	
File: MDAR_Pesticide_Approval_v 100%	1_20220314_145608.pdf	
File: MDAR_Pesticide_Approval_v 100% * Description (Maximum	11_20220314_145608.pdf 50 characters):	
File: MDAR_Pesticide_Approval_v 100% • Description (Maximum A maximum of 50 character	11_20220314_145608.pdf 50 characters):	
File: MDAR_Pesticide_Approval_v 100% * Description (Maximum A maximum of 50 character	11_20220314_145608.pdf 50 characters):	
File: MDAR_Pesticide_Approval_v 100X * Description (Maximum A maximum of 50 character	11_20220314_145608 pdf 50 characters): ,	é
File: MDAR_Pesticide_Approval_v 100% * Description (Maximum A maximum of 50 character * Type:	11_20220314_145608 pdf 50 characters):	
File: MDAR_Pesticide_Approval_v 100X * Description (Maximum A maximum of 50 characten * Type: Select	11_20220314_145608 pdf 50 characters):	e 8
File: MDAR_Pesticide_Approval_v 100X * Description (Maximum A maximum of 50 character * Type: Select	11_20220314_145608 pdf 50 characters):	
File: MDAR_Pesticide_Approval_v 100X * Description (Maximum A maximum of 50 characten * Type: Select File:	11_20220314_145608 pdf 50 characters):	
File: MDAR_Pesticide_Approval_v 100X Description (Maximum A maximum of 50 character Type: Select File: MDAR_Pesticide_Approval_v	11_20220314_145608 pdf 50 characters): 11_20210102_160712 pdf	
File: MDAR_Pesticide_Approval_v * Description (Maximum A maximum of 50 character * Type: Select File: MDAR_Pesticide_Approval_v 100x	11_20220314_145608 pdf 50 characters): 11_20210102_160712 pdf	R
File: MDAR_Pesticide_Approval_v * Description (Maximum A maximum of 50 character * Type: Select File: MDAR_Pesticide_Approval_v * 100X	11_20220314_145608 pdf 50 characters): 11_20210102_160712.pdf 50 characters):	
File: MDAR_Pesticide_Approval_v * Description (Maximum A maximum of 50 character * Type: Select File: MDAR_Pesticide_Approval_v 100x * Description (Maximum A maximum of 50 character	11_20220314_145608 pdf 50 characters): 11_20210102_160712 pdf 50 characters):	
File: MDAR_Pesticide_Approval_v * Description (Maximum A maximum of 50 characteri * Type: Select File: MDAR_Pesticide_Approval_v 100x * Description (Maximum A maximum of 50 characteri	11_20220314_145608.pdf 50 characters): 11_20210102_160712.pdf 50 characters):	
File: MDAR_Pesticide_Approval_v * Description (Maximum A maximum of 50 character * Type: Select File: MDAR_Pesticide_Approval_v 100x * Description (Maximum A maximum of 50 character	11_20220314_145608.pdf 50 characters): 11_20210102_160712.pdf 50 characters):	
File: MDAR_Pesticide_Approval_v * Description (Maximum A maximum of 50 character * Type: Select File: MDAR_Pesticide_Approval_v 100x * Description (Maximum A maximum of 50 character	11_20220314_145608.pdf 50 characters): 11_20210102_160712.pdf 50 characters):	

Step 3: Documents (Attaching)

- You should see a message that you have successfully attached documents
- Review the list of attached documents
- Click "Continue Application" to proceed

The attachment(s) has/have been successfully uploaded. It may take a few minutes before changes are reflected.

LES04 EA - Certification of Laboratory for Environmental Analysis - Microbiology Amendment

1 Laboratory 2 Analyte Information 2 Information	3 Documents	4 Special Fee Provision	5 Review	6
---	-------------	----------------------------	----------	---

Step 3:Documents>Page 1 of 1

A Laboratory Personnel Form must be submitted for each individual added to the personnel table. Also submit a copy of the form for any individual for which a change in job title is requested. When saving the file, please use the "LPF-Lastname-Firstname" format.

The form may be download here - Laboratory Personnel Form.

* indicates a required field

Documents

Please upload 2 Required Document(s) which are mandatory to submit this Application:

1. Laboratory Quality Assurance Plan

2. Standard Operating Procedures

Attachment

When uploading file document(s) the maximum file size allowed is 50 MB.

The 'File Name' (including file extension) MUST NOT exceed 75 characters in length.

The document 'Description' MUST NOT exceed 50 characters in length.

Documents that exceed any of these limits will be removed by the system, and cannot be retrieved, which may delay the review process. .bat;bin;dlt;exe;js;.msi;sdt;vbs;ade;adp;chm;cmd;com;cpt;hta;ins;ispjar;jse;lib;lnk;mde;msc;msp;mst;php;pif;scr;sct;shb;sys;vb;vbe;vxd;wsc;wsf;wsh are disallowed file types to upload.

Name	Type	Size	Latest Update	Description	Action
invite_1 - Copy - Copy - Copy.png	Laboratory Quality Assurance Plan	88.12 KB	06/09/2022	QA Plan	Actions -
invite_1 - Copy - Copy (2).png	Standard Operating Procedures	88.12 KB	06/09/2022	SOP	Actions -



Continue Application »



Save and resume later

Step 4: Special Fee Provision

- If Special Fee Provision is applicable, check the appropriate box and provide requested information
 If Special Fee Provision is applicable, check the step 4:
 - Click "Continue Application" to proceed

1 ² Analyte Information	3 Documents	4 Special Fee Provision	5 Review	6 Application Submitted
Step 4:Special Fee F	Provision>Page 1 of	f 1		* indicatos a roquirod field
Special Fee Provision				indicates a required nero.
vemotion: ①				
Exclusion (special agreem	ent or policy): 🕖			
Substitution (ASP/IRP): (?))			
] Double Fee for Enforceme	ent: 🕧			
∃ Hardship payment extens	ion request: 🕐			
Continue Application	»			Save and resume later



Step 5: Review

- The entire application is shown on a single page for your review
- If you identify something you want to change, click "Edit Application"
- Otherwise, continue to the bottom of the page







Step 5: Review

- Read the Certification Statement at the bottom of the Review Page
- Click the check box to complete your certification
- Click "Continue Application" to proceed with your submittal

I attest under the pains and penalties of perjury: I attest under the pains and penalties of perjury: (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this certification statement; (ii) that, based on my inquiry of those individuals responsible for obtaining the information, the information contained in this submittal is to the best of my knowledge, true, accurate, and complete; (iii) that I am fully authorized to make this attestation on behalf of this facility; and (iv) that this laboratory is in compliance with 310 CMR 42.08(3) and has readily available on the premises all equipment, supplies, Date:		
 (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this certification statement; (ii) that, based on my inquiry of those individuals responsible for obtaining the information, the information contained in this submittal is to the best of my knowledge, true, accurate, and complete; (iii) that I am fully authorized to make this attestation on behalf of this facility; and (iv) that this laboratory is in compliance with 310 CMR 42.08(3) and has readily available on the premises all equipment, supplies, By checking this box, I agree to the above certification. 	attest under the pains and penalties of periury:	*
 (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this certification statement; (ii) that, based on my inquiry of those individuals responsible for obtaining the information, the information contained in this submittal is to the best of my knowledge, true, accurate, and complete; (iii) that I am fully authorized to make this attestation on behalf of this facility; and (iv) that this laboratory is in compliance with 310 CMR 42.08(3) and has readily available on the premises all equipment, supplies, By checking this box, I agree to the above certification. 		
accompanying this certification statement; (ii) that, based on my inquiry of those individuals responsible for obtaining the information, the information contained in this submittal is to the best of my knowledge, true, accurate, and complete; (iii) that I am fully authorized to make this attestation on behalf of this facility; and (iv) that this laboratory is in compliance with 310 CMR 42.08(3) and has readily available on the premises all equipment, supplies, By checking this box, I agree to the above certification.	(i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents	
 (ii) that, based on my inquiry of those individuals responsible for obtaining the information, the information contained in this submittal is to the best of my knowledge, true, accurate, and complete; (iii) that I am fully authorized to make this attestation on behalf of this facility; and (iv) that this laboratory is in compliance with 310 CMR 42.08(3) and has readily available on the premises all equipment, supplies, By checking this box, I agree to the above certification. 	accompanying this certification statement;	
submittal is to the best of my knowledge, true, accurate, and complete; (iii) that I am fully authorized to make this attestation on behalf of this facility; and (iv) that this laboratory is in compliance with 310 CMR 42.08(3) and has readily available on the premises all equipment, supplies, By checking this box, I agree to the above certification. Date:	(ii) that, based on my inquiry of those individuals responsible for obtaining the information, the information contained in this	
(iii) that I am fully authorized to make this attestation on behalf of this facility; and (iv) that this laboratory is in compliance with 310 CMR 42.08(3) and has readily available on the premises all equipment, supplies, By checking this box, I agree to the above certification. Date:	submittal is to the best of my knowledge, true, accurate, and complete;	
(iv) that this laboratory is in compliance with 310 CMR 42.08(3) and has readily available on the premises all equipment, supplies, By checking this box, I agree to the above certification. Date:	(iii) that I am fully authorized to make this attestation on behalf of this facility; and	
By checking this box, I agree to the above certification.	(iv) that this laboratory is in compliance with 310 CMR 42.08(3) and has readily available on the premises all equipment, supplies,	•
	By checking this box, I agree to the above certification. Date:	

Continue Application »

Save and resume later



Step 6: Pay Fees

You will have the option to select the payment method:

Pay Online

Pay by Mail

- Online payment will require a service charge
- Select the payment method you prefer to continue

Step 6:Pay Fees

Listed below is the fee for the authorization that you are applying for. The following screen will display your total fees.

Payment may be made by electronic check or credit card for a nominal processing fee. The electronic check fee is \$0.35 per transaction. Credit card payments are 2.35% per transaction. Clicking on the PAY ONLINE button will bring you to the secure online payments portal. Once you have made payment, you will be returned to your application for submittal.

Payment may also be made by mail. However, review of your permit will not begin until payment is received. By clicking on the Pay by Mail button, you will have submitted your application. You will receive a notification email with the location and address to send your payment. That information is also available in the instructions for this authorization.

Application Fees

Fees	Amount
LES04 Amendment Fee	\$220.00
Total Fees	\$220.00
1	
Pay Online » Pay by Mail »	



Pay Online

- If you choose "Pay Online", you will be redirected to the payment site
 - Provide all payment and billing information
 - Accept the terms and conditions and click submit
- You will receive an email receipt from nCourt the payment provider

Billing Information		Payment Information
		Credit/Debit Card Electronic Check/ACH
First Name		Card Type
Enter First Name		Select Card Type
Last Name		Card Number
Enter Last Name		TEST MODE
Street		CVV Code
Enter Street		123
City		Expiration
Enter City		01 ~ 201! ~
State/Territory		
Select State	~	Check to accept both the Commonwealth of Massachusetts and nCourt Terms Agreements.
Zip		
Enter Zip		Commonwealth of Massachusetts Terms Agreement
Phone Number		Lauthorize the charge to my credit card for the amount
()		shown above. I agree to pay the total amount above
Fmail		according to the card issuer agreement. By checking the
Enter Email Address		box below, I certify that I am an authorized user for the above referenced credit card account.
Confirm Email		
Enter Email Address		nCourt Terms Agreement

Please Verify above information before the Submit Payment Button is pressed. Do not click Submit Payment button more than one time.



Back

Pay by Mail

- If you choose "Pay by Mail"
 - Check your email for instructions
- Note The review of your application by the agency will not start until payment has been received

Thank you for submitting your online application form for record type: LES04 EA - Certification of Laboratory for Environmental Analysis - Microbiology Amendment. Your Record Number is: 22-LES04-0015-AMD.

Payment online: If you have paid online by credit or ACH you will receive an additional notification from the epayment vendor that your payment is complete. Review of your application will begin. That notification will include a Reference ID # for your records.

Pay by Mail: If you chose the "Pay by Mail" option, please make your payment in the form of a check or money order made payable to the Commonwealth of Massachusetts. Do not send cash. You must include your Record Number 22-LES04-0015-AMD on the check or money order that must be sent to the address below.

Department of Environmental Protection PO Box 4062 Boston, MA 02211

Review of your application will not begin until after your payment has been received and processed.



Submission Successful!

- When you submit your application, you will receive a Record ID so you can track the status of your application online
- Upon submission of your application please make sure to check your email for system notifications.
 - Note The system notifications will be sent from eipas@mass.gov

Home



LES04 EA - Certification of Laboratory for Environmental Analysis - Microbiology Amendment

1 2 Analyte Information	3 Documents	4 Special Fee Provision	5 Review	6 Application Submitted			
Step 6:Applic	ation Submitted						
Vour a	unlication has been successfully	vsubmitted					
Please print your record and retain a copy for your records.							

Thank you for using our online services. Your Record Number is 22-LES04-0022-AMD.

You will need this number to check the status of your application.



To check the status of an application

Log on to EEA ePlace portal

■<u>Mass.gov EEA ePLACE</u> <u>Portal</u>

Go to your "My Records" page in ePlace to see or track the status of an application





Questions?

□ For technical assistance:

Contact the ePlace Help Desk Team at (844) 733-7522

□Or send an email to: <u>ePLACE_helpdesk@state.ma.us</u>

□ For business related questions, please visit the link below: <u>https://www.mass.gov/how-to/les-04-ea-modification-of-</u> <u>certification-for-microbiology-laboratory</u>



