



APPENDIX D

Drinking Water Bureau

Drinking Water Laboratory Certification Program Acknowledgment Form

Receipt and Acknowledgement of Understanding

(Must be signed by Laboratory Director or QA Officer/Manager and returned for certification to be issued.)

I, _____, have received a copy of the *Drinking Water*
(print name)

Laboratory Certification Program Guidance Manual, Revision#3.0. By signing below, I am acknowledging that I am familiar with, and will implement the procedures and requirements as documented in the referenced *DWLCP Guidance Manual*, as well as all requirements included in the Appendices.

Laboratory Name: _____

Job title: _____

Signature

Date

Please sign and return to:

Bethany Anderson, DWLCP Certification Authority
Drinking Water Bureau
NMENV-DWBlabcert@state.nm.us