



## APPENDIX D

### 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 #5.0.* 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. I also understand that failure to meet these requirements may lead to a downgrade of certification status or revocation of my certification with the State of New Mexico Drinking Water Bureau.

**Laboratory Name:** \_\_\_\_\_

**Job title:** \_\_\_\_\_

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

**Please sign and return to:**

Drinking Water Laboratory Certification Program

[NMENV-DWBlabcert@state.nm.us](mailto:NMENV-DWBlabcert@state.nm.us)