IWEA Laboratory Excellence Award Application

The IWEA Laboratory Excellence Award recognizes those laboratories that demonstrate a high level of commitment to good laboratory practice and accurate data reporting. All municipal and industrial wastewater treatment laboratories are eligible for the award. The IWEA Laboratory Committee presents the award during the annual IWEA Conference to those laboratories scoring minimum levels established. To become eligible, you must complete and submit this form by February 21, 2017 to: Lindsay Grossman at lgrossmann@mishawaka.in.gov or fax to (574) 255-3557. Lindsay can be reached by phone at (574) 258-1655 with any questions.

The program requires an on-site visit by members of the Laboratory Committee. The visit will last approximately 2-4 hours and is pre-scheduled to fit your working hours during the months of February thru March. During the visit, our inspectors will examine your laboratory records and equipment. An inspection form developed by the Laboratory Committee is used to rate your laboratory conformance to established good laboratory practices. The results of your inspection will be mailed to you in May 2017. The Laboratory Committee encourages your participation in this very worthwhile program and looks forward to visiting your laboratory.

First-Time Applicant  

(Please Type or Print)

Facility Name: (As it should appear on the award):

Facility Street Address: ________________________________________________________________

Facility Mailing Address: ______________________________________________________________

Laboratory Manager/Supervisor Name: ______________________________________________________

Telephone: _________________________________ Fax: _________________________________

Email: ______________________________________________________________

Location: (Please list nearest highway intersection & attach a map)

____________________________________________________________________________________

Facility Permit Class:__________________________________________________________

Please fill in the analytical method used for any of the following tests required by your NPDES permit.

Ammonia__________________________________________________________

TSS__________________________________________________________

CBOD__________________________________________________________

Fecal or E.coli_____________________________________________________

Metals__________________________________________________________

Phosphorus________________________________________________________

pH__________________________________________________________

Some laboratories may wish to not participate in the awards competition but want to be inspected. If you wish to be ONLY INSPECTED during 2017, please check here:  