**Laboratory Agreement Form**

**Floatation System Facility Construction Permit Application**

A laboratory certified by the Washington State Department of Ecology must agree to test float water samples from your facility, as specified below.

Submit this form and other required application items electronically to: WaterRecreation@doh.wa.gov

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
|  | I,  |   | , the undersigned representative, confirm that  |   |  |
|   |  (Laboratory Representative Full Name) (Laboratory Name) |  |
|  | agrees to test float water samples provided by  |   | according to the following testing methods. |
|  |  (Floatation System Facility Name) |
|  | **Testing Methods**  |  |
|  | Float water will be tested by performing (a and b) or (a and c) of the following list:  |  |
|  | 1. Heterotrophic plate counts (CFU per milliliter).
 |  |
|  | 1. Total coliform test by membrane filter technique (CFU per 100 milliliters).
 |  |
|  | 1. Total coliform test by the most probable number (MPN) technique (CFU per 100 milliliters).
 |  |
|  |  |  |
|  | Laboratory Representative Signature: |  |  Date: |   |  |
|  |  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
|  | I,  |   | , the undersigned owner, agree to collect float water samples according to the following: |  |
|   |  (Floatation System Facility Owner Name)  |  |
|  | **Sample Collection Requirements**  |  |
|  | 1. The owner must take float water samples from each tank once a month for the first six months of opening the
 |  |
|  | business. The sample must be tested at a laboratory to ensure that bacteriological standards are met. Upon  |  |
|  | successive compliance with the bacteriological standards for six months, testing frequency may be reduced to  |  |
|  | once every six months thereafter. |  |
|  | 1. The owner shall abide by the sampling procedures specified by the laboratory.
 |  |
|  | 1. The owner shall take samples that are representative of the usual condition of the float water. For this, the owner
 |  |
|  | must take samples of float water that has been in use for at least 10 sessions. |  |
|  |   |  |
|  | Owner Signature: |  |  Date: |   |  |  |
|  |  |  |  |  |

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