



Commonwealth of Virginia
 Department of General Services
 Division of Consolidated Laboratory Services
 Richmond, Virginia

Fee Payment Form

Laboratory Name: _____

EPA Laboratory ID: _____

Virginia Laboratory ID: _____

Date: _____

Payment Amount: _____

- Program: VELAP Commercial Laboratory (1VAC30-46)
 VELAP Non-Commercial Laboratory (1VAC-30-45)
 SDWA Drinking Water Laboratory (1VAC-30-41)
 Tuning Fork Certification

If you require a receipt, please request it in writing with your payment. Thank you.

- Method of Payment: Payment by check payable to: **“Treasurer, Commonwealth of Virginia”**
Mail To: Attn: Laboratory Certification, DCLS, 600 North 5th Street; Richmond, VA
- Payment by any of the following: **The Laboratory MUST pre-arrange, or provide documentation of transfer of funds, with the laboratory’s Lead Assessor or Laboratory Certification group [Lab_Cert@dgs.virginia.gov or (804) 648-4480] in order for the payment to be credited to the laboratory’s account:**
- Inter-Agency Transfer
- Direct Bank Transfer
- Any other payment made DIRECTLY to DGS Fiscal Services, **including credit card payments not submitted to the VELAP office using the form below.**
- Payment by **credit card** - please sign and include the information below
Mail To: Laboratory Certification, DCLS, 600 North 5th Street; Richmond, VA
OR Fax to: (804) 692-0416

Credit Card Type: Visa Credit Card Account Number: _____ Expiration _____
 Mastercard _____ _____ / _____

_____ 3 Digit Code On Back of Credit _____ Credit Card Billing Zip Code: _____
 Cardholder Name (please print) _____ _____ - _____

_____ _____ _____
 Cardholder Signature Date Daytime Phone