

*[For VAP certified laboratories to attest to "certified data" under OAC 3745-300-13(N) and OAC 3745-300-04(A). Note that Ohio EPA is to receive a legible copy of the CL's affidavit. The entity that received the CL's analytical report under affidavit may retain the CL's affidavit original.]*

I, [insert name of the affiant who will sign this affidavit], being first duly sworn according to law, state that, to the best of my knowledge, information and belief:

- Document ID \_\_\_\_\_ Date \_\_\_\_\_ of \_\_\_\_\_  
Document \_\_\_\_\_

6. **[Insert CL's name]** was a VAP certified laboratory pursuant to OAC 3745-300-04 when it performed the analyses referenced herein.
7. All analyses under this affidavit consist of VAP “certified data” as described in OAC 3745-300-04(A) - - unless paragraph b., below, specifies the exceptions:
  - a. The laboratory performed the analyses within its current VAP certification. The laboratory was certified for each analyte, parameter group and method used at the time that it performed the analyses. The analyses were performed consistent with the laboratory’s standard operating procedures and quality assurance program plan as approved under OAC 3745-300-04.
  - b. Exceptions, if any: ***If no exceptions are known to apply note “none” or “not***

**applicable.” If exceptions apply specify the exceptions, by listing below the sample number or document ID, analyte or parameter group, and method at issue. A statement may be added that describes the reasons VAP certified data was not produced. Some possible reasons include:** The analyses specified below (a) may not have been or were not performed consistent with laboratory’s procedures as required by its Ohio EPA-approved SOP or QAPP, or (b) are not encompassed by VAP’s certified lab program.

<u>Sample Number / Document ID</u>	<u>Analyte / Parameter Group</u>	<u>Method</u>
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**See also OAC 3745-300-04(H) for additional situations when disclosure is required. If no exceptions apply, please delete this bracketed red text.]**

8 The information, data, documents and reports identified under this affidavit are true, accurate and complete.

Further affiant sayeth naught.

\_\_\_\_\_  
Signature of Affiant

Sworn to before me and subscribed in my presence this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public