# **Iowa Department of Public Heath Division of Environmental Health**

# **Water Treatment System Modification Application**

#### Mail application packet to:

Iowa Department of Public Health Water Treatment System Program 321 E 12<sup>th</sup> Street Des Moines IA 50319-0075

Manufacturer				
Company Name				
Contact Name				
Street Address				
City		State	Zip	
Telephone		Fax		
E-mail				

If another company is submitting the application on behalf of the manufacturer, please complete the following.

Agent			
Company Name			
Contact Name			
Street Address			
City	State	Zip	
Telephone	Fax		
E-mail			

# **Description of Modification**

Complete a copy of this page for each registered product that is modified. The product trademark and model number(s) must be the same as on the initial registration or a new initial registration application must be submitted.

Type of Modification (Mark all that apply)		
Add contaminant claim		
Delete contaminant claim		
Capacity change		
Daily production rate change		
Treatment component or module added or deleted		

# **Treatment Component Change**

Trademark(s)	IA Reg#	Model #	Treatment Component Added/Deleted

### Changes to Claims, Capacity, or DPR

Parameter	Add/Delete	Old	New	Test Lab
		Capacity	New Capacity	
DPR (RO only)				

#### **Testing Agency Information**

List each test agency, whether it is ANSI accredited, the parameters tested, and the standards on which the testing was based. If applicable, provide evidence of a product listing. List a contact for the agency and the contact information.

Test Agency	ANSI (Y/N)		
Street			
City State, Zip			
Contact			
Telephone			
E-mail			
Test Agency	ANSI (Y/N)		
Street			
City State, Zip			
Contact			
Telephone			
E-mail			

If a component or a claim is not tested in accordance with NSF/ANSI 44, 53, 55, 58, or 62, the manufacturer or the testing agency must submit a detailed testing protocol. Requirements for protocol submission are enclosed.

If the testing agency is not ANSI-accredited for product testing, the data generated during product testing must be submitted. IDPH may require data submission from any testing agency if the product is not tested in accordance with one of the standards above.

If a testing agency has not been authorized by the Iowa Department of Public Health as a third-party testing agency, the agency must submit an application for status as a third-party testing agency in Iowa. The application and instructions for submittal are on the Web site at <a href="http://www.idph.state.ia.us/eh/water\_treatment.asp">http://www.idph.state.ia.us/eh/water\_treatment.asp</a>.

#### **Submission Checklist**

Use this checklist to help ensure that all the proper documentation is submitted to IDPH for WTD certification. Materials may be submitted electronically, but they must be clearly labeled. We cannot do electronic or credit card payments at this time.

Completed application form	Product label(s)
Modification review fee (\$100 per	Owner manual
WTD, must be paid by check or	
money order)	
Performance data sheet	Installation instructions
Engineering drawings for new	Promotional material, including
treatment components	brochures and packaging
Statement of equivalent	Test protocol, if applicable
performance for new treatment	
components (by test agency)	
Test agency info and product listing	Test data, if applicable