

Stationary Source Audit Sample (SSAS) Table
Change Request Application

SUBMISSION DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 1 – Requestor/Organization Information**

Requestor:

Organization:

Address:

City: State: Zip:

Telephone: Facsimile:

Email:

**Section 2 – Change Request**

Instructions: Check the corresponding box below to indicate the type of change you are requesting, and complete the corresponding section as instructed. Requests for multiple types of changes must be submitted using separate applications.

 **Add Method(s) or Analyte(s); complete Sections 3 and 3A**

 **Remove Method(s) or Analyte(s); complete Sections 3 and 3B**

 **Change concentration ranges, units, or acceptance criteria; complete Section 4**

 **Change footnotes; complete Section 4**

 **Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; complete Section 4**

**Section 3 – Add or Remove Method(s) or Analyte(s)**

Instructions: Supply all requested information below. Attach additional sheets if necessary. If requesting addition, also complete Section 3A. If requesting removal, also complete Section 3B.

**Method(s) to be added or removed:**

|  |  |
| --- | --- |
| **TNI Method Code** | **Method Name/Description** |
|  |  |
|  |  |

**Analyte(s) to be added or removed:**

|  |  |
| --- | --- |
| **TNI Analyte Code** | **Analyte Name** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**Reason(s) for adding or removing the method(s) and/or analyte(s):**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Requests for adding or removing a method, analyte, or group of analytes must be sponsored by at least one Regulatory Agency (including the requestor).**

Sponsor Regulatory Agency:

Official Contact:

Address:

City: State: Zip:

Telephone: Facsimile:

Email:

**Note here if reference to any additional Regulatory Agency sponsors is being provided.**

**Additional sponsors? No**

 **Yes**  Other Sponsors : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, provide contact information on additional sponsors as an attachment to the application.

**Section 3A – Addition of Method(s) and/or Analyte(s)**

Do any TNI approved SSAS Providers currently offer the analyte(s) in a product suitable for use as a SSAS audit sample?

**No**  **Yes**  **Unknown**

If yes, attach a list of products known to be currently available (specify each SSAS Provider, SSAS Provider’s product name, and SSAS Provider’s catalog reference.)

The following documentation must also be provided as attachments to this application when requesting addition of new analyte(s):

1. Proposed spiking concentration and initial acceptance criteria
2. Information on technical feasibility – This must include one or more method validation studies showing that the analyte(s) can be measured at the required concentration range by the specified SSAS method.

**Section 3B – Removal of Method(s) and/or Analyte(s)**

Do any Regulatory Agencies currently collect /use data resulting from the analysis of the audit sample method(s) or analyte(s)?

**No**  **Yes**  **Unknown**

The following documentation must also be provided as attachments to this application when requesting removal of method(s) and/or analyte(s):

1. Copies of any supporting documents that were referenced in Section 3 in the reason(s) provided for removing the method(s) and/or analyte(s).

**Section 4 – Miscellaneous Changes**

**Describe in detail the changes requested. Provide attachments as needed.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section 5 – Submittal of Application**

All applications (including attachments) must be submitted electronically via email to the TNI SSAS Expert Committee Chair. No paper copies will be accepted. Contact information is posted on the SSAS Expert Committee page on the TNI website at <http://nelac-institute.org>.

Please complete the application and provide the supporting documentation as instructed. Incomplete applications will delay the review process and may be returned to the requestor.