



Department of Environment and Natural Resources

Environmental Management Bureau

DENR Compound, Visayas Avenue, Diliman, Quezon City

Tel. Nos. 4264338/ 4264339; Fax Nos. 4264335/ 4264340

ENVIRONMENTAL LABORATORY RECOGNITION

Application Form

Laboratory name: Ostrea Mineral Laboratories, Inc.		Date established: July 1, 2024	
Laboratory address: Manila NCR			
Telephone number: (094) 320-4923	Fax number: (092) 130-1293	Email address: labhead@gmail.com	
Laboratory address: Manila NCR			
Laboratory head name: Amie Lab Head	Laboratory contact number: (312) 433-4593	Laboratory head citizenship: Filipino	
Business Permit No. (at- tach copy of permit): 223109fds908032	Date Issued: September 1, 2024	Place Issued: December 10, 2024	Expiration Date: Quezon City Philippines
Tax identification number (TIN): 031-203-210-301			
Mission statement: This is the mission of the lab			
Scope of desired recognition			
Type of sample/s	Parameter/s	Analytical Method	Reference
Water and Wastewater	Ammonia as NH_4N	Ammonia – Selective Elec- trode Method	SMEWW 4500-NH3 D
Water and Wastewater	Chloride	Argentometric Method	SMEWW 4500-Cl- B
Stationary Source Emis- sions	Antimony and its com- pounds	AAS (US EPA Method 29)	---
Sediments	Arsenic	Manual Hydride Generation / Atomic Absorption Spec- trophotometric Method	---
Stationary Source Emis- sions	Antimony and its com- pounds	AAS (US EPA Method 29)	---
Ambient Air	Nitrogen Dioxide	Chemiluminescence Method	---



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Wastes	Cadmium and its compounds	AAS (US EPA Method 1311)	---
Accreditation record of the laboratory (attach copy of accreditation certificate/s):			
Accrediting body/ Address:	Nature/ scope of accreditation:	Expiration date:	
New Accreditation	Scope of acc	December 21, 2024	
Technical and support personnel of the laboratory			
Name	Highest educational attainment/License No.	Job title	Years of experience in environmental analysis/management
Personnel Record 1	College Graduate	Software Engineer	5
Scope and nature of work of the laboratory: This is our scope of work			
Geographical area currently served by the laboratory regarding acceptance of testing work (restrictions): This is the areas that we serve			
Categories of clients which use its services/ or whether the laboratory will accept testing work from: government_agenciesmanufacturersassociated_organizations			
Other technical role / services offered by the laboratory: calibrationconsulting_servicesdesign_of_pollution_control			
Laboratory test report forms (attach copy of laboratory test report forms): --See all attachments--			
Reference literature available in the laboratory (attach list of reference literature available with complete bibliographicdescription): --See all attachments--			
Equipment calibration and maintenance program of the laboratory (attach detailed description of equipment calibration and maintenance program of the laboratory): --See all attachments--			
Quality assurance/ quality control program of the laboratory (attach detailed description of the quality assurance/quality control program of the laboratory): --See all attachments--			
Track record of the laboratory			
Type of sample/s	Parameter/s	No. of samples analysed	Date covered
Water and Wastewater	Benzo(a)pyrene	56	December 1, 2024 to December 17, 2024
Water and Wastewater	Boron	7865	



		December 4, 2024 to December 13, 2024
Floor plan of the laboratory and related facilities (attach floor plan scale (1:100)): --See all attachments--		
Pollution control and waste management practices adopted by the laboratory (attached detailed description of the waste management practices adopted by the laboratory): --See all attachments--		



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I hereby certify to the best of my knowledge and information, under penalty of law, to the truth and correctness of the above statement and that this application was prepared by me or under my personal jurisdiction.

(City/ Municipality, Province)

(Date)

Res. Cert. No _____

Issued at _____

Issued on _____

(Signature above printed name of the Head of the Laboratory)

Noted by:

Res. Cert. No _____

Issued at _____

Issued on _____

(Signature above printed name of the Head of the Laboratory)

Date: _____

ACKNOWLEDGMENT

SUBSCRIBED AND SWORN TO before me this _____ day of _____, affiant exhibiting his Residence Certificate as indicated above

Doc. No _____

Page No. _____

Book No. _____

Series of _____

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