



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

SPRINGS INITIATIVE MONITORING PROGRAM

SAMPLE CUSTODY RECORD

ABP
09-21-12
09:25

RQ-2012-09-17-36

SAMPLING AGENCY		PROJECT	SAMPLER NAMES	SHIPPING METHOD: (circle or fill in)	LAB PROJECT CODE
ACEPD Alachua County		Santa Fe GW Sampling	Jennifer Mitchell	DHL Greyhound Hand Delivered by: _____ Other Method: <u>Fed Ex</u>	WTRSHD-MGT SPRINGS
STATION IDENTIFIER		SAMPLE INFORMATION			LAB IDENTIFIER
1	AAK7044 Station ID <u>Santa Fe Hills</u> Station Name	Sample Date: <u>9/20/12</u> Sample Time (EST): <u>10:12</u> Matrix: (circle one) <u>Water</u> Sediment Sp. Cond: _____ μ mhos/cm pH: _____ SU DO: _____ mg/L Temp: _____ °C Comments: _____			Lab Sample ID
2	AAK7037 Station ID <u>Bliss</u> Station Name	Sample Date: <u>9/20/12</u> Sample Time (EST): <u>11:17</u> Matrix: (circle one) <u>Water</u> Sediment Sp. Cond: _____ μ mhos/cm pH: _____ SU DO: _____ mg/L Temp: _____ °C Comments: _____			Lab Sample ID
3	AAK7014 Station ID <u>Joan Peckington</u> Station Name	Sample Date: <u>9/20/12</u> Sample Time (EST): <u>11:55</u> Matrix: (circle one) <u>Water</u> Sediment Sp. Cond: _____ μ mhos/cm pH: _____ SU DO: _____ mg/L Temp: _____ °C Comments: _____			Lab Sample ID
4	AAK7013 Station ID <u>Julie Peckington</u> Station Name	Sample Date: <u>9/20/12</u> Sample Time (EST): <u>13:10</u> Matrix: (circle one) <u>Water</u> Sediment Sp. Cond: _____ μ mhos/cm pH: _____ SU DO: _____ mg/L Temp: _____ °C Comments: _____			Lab Sample ID
5	AAK7015 Station ID <u>Newberry Cemetery</u> Station Name	Sample Date: <u>9/20/12</u> Sample Time (EST): <u>13:37</u> Matrix: (circle one) <u>Water</u> Sediment Sp. Cond: _____ μ mhos/cm pH: _____ SU DO: _____ mg/L Temp: _____ °C Comments: _____			Lab Sample ID

Project analytes listed on the back of this sheet. Analytes and sample containers are submitted as listed, per site, unless otherwise noted in the comment section above.

SPRINGS INITIATIVE MONITORING NETWORK
CONTAINER INVENTORY FOR EACH STATION

LAB	CONTAINER	ANALYSES	DESCRIPTION	SAMPLE PREPARATION
DEP	Nutrients/Anions	Turbidity, Alkalinity, Cl, Color, F, SO ₄ , TDS, TSS	(1) 1 liter plastic	Unfiltered; chill to 4°C
DEP	Nutrients/Anions	NH ₃ , NO ₂ /NO ₃ , TKN, TP, TOC	(1) 500 ml plastic	Unfiltered; H ₂ SO ₄ vial to pH < 2; chill to 4°C
DEP	Metals	Ca, K, Mg, Na	(1) 500 ml plastic	Unfiltered; HNO ₃ vial to pH < 2; chill to 4°C
DEP	Microbiology	Enterococci Fecal Coliform Total Coliform	(3) Whirlpacks 4 oz	Unfiltered; chill to 4°C
DEP	Metals- F	Ca, K, Na, Mg	(1) 125 ml plastic	Filtered; HNO ₃ vial to pH < 2; chill to 4°C
DEP	Nutrients/Anions- F	Cl, SO ₄ , F, o-PO ₄ , Alkalinity, Specific conductance	(1) 500 ml plastic	Filtered; chill to 4°C
DEP	Nutrients/Anions- F	NO ₂ , NO ₃ , NH ₃ , TKN, TP	(1) 500 ml plastic	Filtered; H ₂ SO ₄ vial to pH < 2; chill to 4°C



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APP
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SAMPLING AGENCY		PROJECT	SAMPLER NAMES	SHIPPING METHOD: (circle or fill in)	LAB PROJECT CODE
ACEPD Alachua County		Sentzfc GW Sampling	Jennifer Mitchell	DHL Greyhound Hand Delivered by: _____ Other Method: <u>FedEx</u>	WTRSHD-MGT SPRINGS
STATION IDENTIFIER		SAMPLE INFORMATION			LAB IDENTIFIER
1	AAE1421 Station ID <u>Trinbach</u> Station Name	Sample Date: <u>9/20/12</u> Sample Time (EST): <u>14:00</u> Matrix: <u>(circle one) Water</u> Sediment Sp. Cond: _____ μ mhos/cm pH: _____ SU DO: _____ mg/L Temp: _____ °C Comments: _____			Lab Sample ID
2	AAE1420 Station ID <u>Lewis</u> Station Name	Sample Date: <u>9/20/12</u> Sample Time (EST): <u>14:16</u> Matrix: <u>(circle one) Water</u> Sediment Sp. Cond: _____ μ mhos/cm pH: _____ SU DO: _____ mg/L Temp: _____ °C Comments: _____			Lab Sample ID
3	AAAG137 Station ID <u>Majors</u> Station Name	Sample Date: <u>9/20/12</u> Sample Time (EST): <u>15:07</u> Matrix: <u>(circle one) Water</u> Sediment Sp. Cond: _____ μ mhos/cm pH: _____ SU DO: _____ mg/L Temp: _____ °C Comments: _____			Lab Sample ID
4	AAE0815 Station ID <u>Gornberg</u> Station Name	Sample Date: <u>9/20/12</u> Sample Time (EST): <u>15:22</u> Matrix: <u>(circle one) Water</u> Sediment Sp. Cond: _____ μ mhos/cm pH: _____ SU DO: _____ mg/L Temp: _____ °C Comments: _____			Lab Sample ID
5	_____ Station ID _____ Station Name	Sample Date: _____ Sample Time (EST): _____ Matrix: <u>(circle one) Water</u> Sediment Sp. Cond: _____ μ mhos/cm pH: _____ SU DO: _____ mg/L Temp: _____ °C Comments: _____			Lab Sample ID

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SPRINGS INITIATIVE MONITORING NETWORK
CONTAINER INVENTORY FOR EACH STATION

LAB	CONTAINER	ANALYSES	DESCRIPTION	SAMPLE PREPARATION
DEP	Nutrients/Anions	Turbidity, Alkalinity, Cl, Color, F, SO ₄ , TDS, TSS	(1) 1 liter plastic	Unfiltered; chill to 4°C
DEP	Nutrients/Anions	NH ₃ , NO ₂ /NO ₃ , TKN, TP, TOC	(1) 500 ml plastic	Unfiltered; H ₂ SO ₄ vial to pH < 2; chill to 4°C
DEP	Metals	Ca, K, Mg, Na	(1) 500 ml plastic	Unfiltered; HNO ₃ vial to pH < 2; chill to 4°C
DEP	Microbiology	Enterococci Fecal Coliform Total Coliform	(3) Whirlpacks 4 oz	Unfiltered; chill to 4°C
DEP	Metals- F	Ca, K, Na, Mg	(1) 125 ml plastic	Filtered; HNO ₃ vial to pH < 2; chill to 4°C
DEP	Nutrients/Anions- F	Cl, SO ₄ , F, o-PO ₄ , Alkalinity, Specific conductance	(1) 500 ml plastic	Filtered; chill to 4°C
DEP	Nutrients/Anions- F	NO ₂ , NO ₃ , NH ₃ , TKN, TP	(1) 500 ml plastic	Filtered; H ₂ SO ₄ vial to pH < 2; chill to 4°C



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SAMPLE CUSTODY RECORD

ABJ
09-21-12
09.25

SAMPLING AGENCY		PROJECT	SAMPLER NAMES	SHIPPING METHOD: (circle or fill in)	LAB PROJECT CODE
ACEPD		Sucrose WTRSHD MGT Springs	Gregory Owen	DHL Greyhound Hand Delivered by: _____ Other Method: <u>fed Ex</u>	WTRSHD-MGT SPRINGS
STATION IDENTIFIER		SAMPLE INFORMATION			LAB IDENTIFIER
1	<u>Main</u> Station ID	Sample Date: <u>9/20/12</u> Sample Time (EST): <u>8:50</u> Matrix: (circle one) <u>Water</u> <u>Sediment</u>			Lab Sample ID
	Station Name	Sp. Cond: <u>N/2</u> μ mhos/cm pH: <u>N/2</u> SU DO: <u>N/2</u> mg/L Temp: <u>N/2</u> °C Comments: _____			
2	<u>AAAG125</u> Station ID	Sample Date: <u>9/20/12</u> Sample Time (EST): <u>15:45</u> Matrix: (circle one) <u>Water</u> <u>Sediment</u>			Lab Sample ID
	Station Name	Sp. Cond: <u>N/2</u> μ mhos/cm pH: <u>N/2</u> SU DO: <u>N/2</u> mg/L Temp: <u>N/2</u> °C Comments: _____			
3	_____ Station ID	Sample Date: _____ Sample Time (EST): _____ Matrix: (circle one) <u>Water</u> <u>Sediment</u>			Lab Sample ID
	Station Name	Sp. Cond: _____ μ mhos/cm pH: _____ SU DO: _____ mg/L Temp: _____ °C Comments: _____			
4	_____ Station ID	Sample Date: _____ Sample Time (EST): _____ Matrix: (circle one) <u>Water</u> <u>Sediment</u>			Lab Sample ID
	Station Name	Sp. Cond: _____ μ mhos/cm pH: _____ SU DO: _____ mg/L Temp: _____ °C Comments: _____			
5	_____ Station ID	Sample Date: _____ Sample Time (EST): _____ Matrix: (circle one) <u>Water</u> <u>Sediment</u>			Lab Sample ID
	Station Name	Sp. Cond: _____ μ mhos/cm pH: _____ SU DO: _____ mg/L Temp: _____ °C Comments: _____			

Project analytes listed on the back of this sheet. Analytes and sample containers are submitted as listed, per site, unless otherwise noted in the comment section above.

**SPRINGS INITIATIVE MONITORING NETWORK
CONTAINER INVENTORY FOR EACH STATION**

LAB	CONTAINER	ANALYSES	DESCRIPTION	SAMPLE PREPARATION
DEP	Nutrients/Anions	Turbidity, Alkalinity, Cl, Color, F, SO ₄ , TDS, TSS	(1) 1 liter plastic	Unfiltered; chill to 4°C
DEP	Nutrients/Anions	NH ₃ , NO ₂ NO ₃ , TKN, TP, TOC	(1) 500 ml plastic	Unfiltered; H ₂ SO ₄ vial to pH < 2; chill to 4°C
DEP	Metals	Ca, K, Mg, Na	(1) 500 ml plastic	Unfiltered; HNO ₃ vial to pH < 2; chill to 4°C
DEP	Microbiology	Enterococci Fecal Coliform Total Coliform	(3) Whirlpacks 4 oz	Unfiltered; chill to 4°C
DEP	Metals- F	Ca, K, Na, Mg	(1) 125 ml plastic	Filtered; HNO ₃ vial to pH < 2; chill to 4°C
DEP	Nutrients/Anions- F	Cl, SO ₄ , F, o-PO ₄ , Alkalinity, Specific conductance	(1) 500 ml plastic	Filtered; chill to 4°C
DEP	Nutrients/Anions- F	NO ₂ NO ₃ , NH ₃ , TKN, TP	(1) 500 ml plastic	Filtered; H ₂ SO ₄ vial to pH < 2; chill to 4°C

Date of Request: 10-SEP-2012
Created By: MADDOX_G On: 10-SEP-2012
Modified By: BRACKETT_K On: 11-SEP-2012
Customer: WTRSHD-MGT
Project: TMDL
Division:
District:
Sampling Event: Alachua County - Santa Fe GW Sampling

Send Coolers To:

Phone: (850) 245-8577
2600 Blair Stone Rd.

Tallahassee, FL 32399-2400
Attn: Gary Maddox - for pick up by on morning of 9/18

Program Module Number:

Priority: 3
Event Status: R
Criminal Investigation: NO
Chemistry Request Reviewed By: BRACKETT_K On: 11-SEP-2012
Biology Request Reviewed By:

Send Final Report To:

2600 Blair Stone Rd.

Tallahassee, FL 32399-2400
Attn: Gary Maddox

Sampling Kit Required: YES Ship on: 10-SEP-2012
Sampling Kit Shipped: YES On: 12-SEP-2012
Sampling Kit Packed By: KITCHEN_S
Date to Receive Samples: 17-SEP-2012
Received By: SHAIK_A On: 21-SEP-2012

Report Type: Final Only
FTP Data: NO
QC Report: YES
Date Log: NO
Authorization Log: NO

Comments: If kit is ready by afternoon of 9/17 samplers can pick up kit. INCLUDE FEDEX Shipping bills.

Suite A (Water) With 20 Samples:

Bottle Type: BG-1L Number of Bottles: 44 Preserved With: ICE
W-SUC-AA-R Template: DEFAULT (DEP SOP: LC-001-2 (based on EPA 8321B)) Analysis of sucralose in water matrices by HPLC/MS/MS

* - The laboratory is not NELAP certified for this analyte/method, or certification is not applicable.

Log-in Checklist

RQ-2012-09-17-36

Shipping Method: FedEx

Date/Time of Receipt: 09-21-12/9:25

COOLER CHECK

Cooler ID	Cooler Temp.	Evidence Tape				No. Sample Containers in Cooler	Tracking # (fill out only if waybill copy can't be place in folder)
		Present?		*Intact?			
		Yes	No	Yes	No		
White	2.3C		☒			8	
White	4.1C		☒			10	
Red	4.8C		☒			4	

If the temperature of a cooler is above 6.0 °C (or greater than 10.0 °C for W-1-4-DIOX) or an evidence seal is damaged then identify the bottles, in the affected cooler(s), on back of form.

CONTAINER CHECK

Evidence Tape on Bottles Present: Yes ☒ No ☐ *If Yes, is it intact: Yes ☐ No ☐

Condition of Containers:

*Caps on tight? Yes ☒ No ☐ *Containers intact? Yes ☒ No ☐

*Chain Of Custody/ Field Sheet(s) Included? Yes ☒ No ☐

*Acid Preserved Samples: pH ≤ 2? Yes ☐ No ☐ NA ☒

*Base Preserved Samples: pH ≥ 12 or 9? Yes ☐ No ☐ NA ☒
(W-CN, OV-CN - pH ≥ 12), (W-SULFDE-F, W-SULFIDE - pH ≥ 9)

S-VOC-MS: samples in Encores must be frozen within 48 hours of collection.

Were Encore samples received? Yes ☐ No ☒

If yes, place in freezer immediately upon receipt. Date/Time Placed in Freezer: _____

Was every sample placed in freezer within 48 hours of collection? Yes ☐ No ☐

*If no, were samples shipped on dry ice? Yes ☐ No ☐

*Preserved Samples for W-1-4-DIOX- pH < 4? Yes ☐ No ☐ NA ☒

*Samples for W-1-4-DIOX- Samples free of chlorine? Yes ☐ No ☐ NA ☒

*Sample Volume Sufficient: Yes ☒ No ☐

Coolers Unpacked/Checked by: ADD Date: 9/21/12 NCRs (y/n)? Y

Event ID: Alachua County - Santa Fe GW Samp WTRSHD-MGT-2012-09-21-02 (TMDL) NCR # _____

FOR CLEAN LAB USE ONLY - Methyl Mercury Preservation Check:

*Samples Preserved within 48 hours? Yes ☐ No ☐

Date/Time samples preserved: _____

* If "No" is checked then fill out the back of this form with the details (field ID, test IDs, etc.) and generate an NCR.

Log-In Checklist

Samples in Coolers with Incorrect Preservation or Damaged Evidence Tape

Cooler ID	Field ID	Bottle Test ID(s)

Bottles Not Intact

Field ID	Bottle Test ID(s)	Loose Cap	Damaged Cap		Damaged Container		Evid. Tape Not Intact
			CK	BR	CK	BR	

Samples With Incorrect pH Preservation

Field ID	Bottle Test ID(s)	pH	Action Taken

Samples With Insufficient Volume for Analyses

Field ID	Bottle Test ID(s)	Action Taken

Additional Comments:

CK - Cracked, BR - Broken

801014494102
FedEx Tracking Number
For Recipient's records
801014494102
Sender's Name: Jim Myles
Phone: 352 213-2607
Company: ACEPD
Address: 408 W University Ave Suite 100
City: Gainesville State: FL ZIP: 32601

2 Your Internal Billing Reference
3 To Recipient's Name: SAMPLE RECEIVING
Phone: 850 245-8085

Company: FLORIDA DEP/CHEMISTRY SECTION
Address: 2600 BLAIRSTONE RD
City: TALLAHASSEE State: FL ZIP: 32399-6542
0453899248



85
TRK# 8010 144
0215
36 TL
Next Business Day
FedEx First Overnight
FedEx Priority Overnight
FedEx Standard Overnight
2 or 3 Business Days
NEW FedEx Second business day delivery
FedEx 2Day
FedEx Express
Packaging
Special Handling and Delivery Signature Options
SATURDAY Delivery
No Signature Required
Direct Signature
Indirect Signature
Does this shipment contain dangerous goods?
Payment \$11.00
Sender
Recipient
Third Party
Credit Card
Cash/Check
Total Packages: 1
Total Weight: 5.9
611

801014494102
0453899248
TALLAHASSEE FL ZIP: 32399-6542
Address: 2600 BLAIRSTONE RD
Company: FLORIDA DEP/CHEMISTRY SECTION
Phone: 850 245-8085
Sender's Name: Jim Myles
Phone: 352 213-2607
Company: ACEPD
Address: 408 W University Ave Suite 100
City: Gainesville State: FL ZIP: 32601
36 TL

FedEx Express **NEW Package**
US Airbill
FedEx
Tracking
Number

8010 1449 4098

1 From This portion can be removed for Recipient's records.

Date 9/20/12 FedEx Tracking Number 801014494098Sender's Name Jim Hylers Phone 212 2607Company ACEPDAddress 403 W University Ave Suite 100City Gainesville State FL ZIP 32601

2 Your Internal Billing Reference

3 To

Recipient's Name SAMPLE RECEIVING Phone 850 245-8085Company FLORIDA DEP/CHEMISTRY SECTIONAddress 2600 BLAIRSTONE RD

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Dept./Floor/Suite/Room

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City TALLAHASSEE State FL ZIP 32399-6542

0453899248



8010 1449 4098

Form
FD No.

0215

Recipient's Copy

4 Express Package Service

* To most locations.

NOTE: Service order has changed. Please select carefully.

Packages up to 150 lbs.

For packages over 150 lbs., use the new FedEx Express Freight CD Airbill.

Next Business Day

☐ FedEx First Overnight
 Fastest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

☒ FedEx Priority Overnight
 Next business morning. * Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

☐ FedEx Standard Overnight
 Second business morning. * Saturday Delivery NOT available.

2 or 3 Business Days

☐ NEW FedEx 2Day A.M.
 Second business morning. * Saturday Delivery NOT available.

☐ FedEx 2Day
 Second business afternoon. * Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected.

☐ FedEx Express Saver
 Third business day. * Saturday Delivery NOT available.

5 Packaging

* Declared value limit \$500.

☐ FedEx Envelope* ☐ FedEx Pak* ☐ FedEx Box ☐ FedEx Tube ☒ Other

6 Special Handling and Delivery Signature Options

☐ SATURDAY Delivery
 NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

☐ No Signature Required
 Package may be left without obtaining a signature for delivery.

☐ Direct Signature
 Someone at recipient's address may sign for delivery. Fee applies.

☐ Indirect Signature
 If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only. Fee applies.

Does this shipment contain dangerous goods?

One box must be checked.

☐ No ☐ Yes As per attached Shipper's Declaration ☐ Yes Shipper's Declaration not required ☐ Dry Ice Dry Ice, 6, UN 1845 ☐ Cargo Aircraft Only

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

Obtain recip. Acct. No.

☐ Sender Acct. No. in Section 1 will be billed ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check

Total Packages

Total Weight

Credit Card Auth.

Our liability is limited to \$500 unless you declare a higher value. See the current FedEx Service Guide for details.

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