



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

SPRINGS INITIATIVE MONITORING PROGRAM

SAMPLE CUSTODY RECORD

SK 5-11-12
10:14a

SAMPLING AGENCY		PROJECT	SAMPLER NAMES	SHIPPING METHOD: (circle or fill in)	LAB PROJECT CODE
FDEP-GWM		WTRSHD-MGT SPRINGS QUARTERLY	Edgar Wade Mike Nash	DHL Greyhound <u>FedEx</u> Hand Delivered by: _____ Other Method: _____	WTRSHD-MGT SPRINGS
STATION IDENTIFIER		SAMPLE INFORMATION			LAB IDENTIFIER
1	 JUNIPER SPRING SPRG1204 2ND MAG. SPRING	Sample Date: <u>5/9/12</u> Sample Time (EST): <u>15:54</u> Matrix: <u>Water</u> (circle one) Sediment Sp. Cond: <u>111</u> μ mhos/cm pH: <u>8.10</u> SU DO: <u>6.48</u> mg/L Temp: <u>22.25</u> °C Comments: _____			Lab Sample ID
2	 SILVER GLEN SPRINGS SPRG1204 1ST MAG. SPRING	Sample Date: <u>5/9/12</u> Sample Time (EST): <u>17:05</u> Matrix: <u>Water</u> (circle one) Sediment Sp. Cond: <u>1800</u> μ mhos/cm pH: <u>7.56</u> SU DO: <u>2.88</u> mg/L Temp: <u>23.45</u> °C Comments: _____			Lab Sample ID
3	Station ID _____ Station Name _____	Sample Date: _____ Sample Time (EST): _____ Matrix: <u>Water</u> (circle one) Sediment Sp. Cond: _____ μ mhos/cm pH: _____ SU DO: _____ mg/L Temp: _____ °C Comments: _____			Lab Sample ID
4	Station ID _____ Station Name _____	Sample Date: _____ Sample Time (EST): _____ Matrix: <u>Water</u> (circle one) 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>Water</u> (circle one) 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.



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STATION IDENTIFIER		SAMPLE INFORMATION			LAB IDENTIFIER
1	 APOPKA (GOURNECK) SPRING SPRG1204 2ND MAG. SPRING	Sample Date: <u>5/9/12</u> Sample Time (EST): <u>10:20</u> Matrix: <u>Water</u> Sediment Sp. Cond: <u>275</u> μ mhos/cm pH: <u>7.57</u> SU DO: <u>3.80</u> mg/L Temp: <u>24.42</u> °C Comments: <u>used S+WMD YSI & Readings</u>			Lab Sample ID
2	 ALEXANDER SPRINGS SPRG1204 1ST MAG. SPRING	Sample Date: <u>5/9/12</u> Sample Time (EST): <u>14:39</u> Matrix: <u>Water</u> Sediment Sp. Cond: <u>1057</u> μ mhos/cm pH: <u>7.39</u> SU DO: <u>1.03</u> mg/L Temp: <u>24.35</u> °C Comments: _____			Lab Sample ID
3	Station ID _____ Station Name _____	Sample Date: _____ Sample Time (EST): _____ Matrix: <u>Water</u> Sediment Sp. Cond: _____ μ mhos/cm pH: _____ SU DO: _____ mg/L Temp: _____ °C Comments: _____			Lab Sample ID
4	Station ID _____ Station Name _____	Sample Date: _____ Sample Time (EST): _____ Matrix: <u>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>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.

Printed: 5/11/2012 10:44:17 AM

Page 1 of 1

Date of Request: 24-APR-2012
 Created By: MADDOX_G On: 24-APR-2012
 Modified By: BRACKETT_K On: 24-APR-2012
 Customer: WTRSHD-MGT
 Project: SPG_QTR_WQ
 Division:
 District:
 Sampling Event: SPRG1204

Send Coolers To:

Phone: (561) 876 6042
 FDEP Ground Water and Springs Protection
 2600 Blair Stone Road
 Tallahassee, FL 32399
 Attn: Gary Maddox

Program Module Number:
 Priority: 3
 Event Status: S
 Criminal Investigation: NO
 Chemistry Request Reviewed By: BRACKETT_K On: 24-APR-2012
 Biology Request Reviewed By:
 Sampling Kit Required: YES Ship on: 24-APR-2012
 Sampling Kit Shipped: YES On: 02-MAY-2012
 Sampling Kit Packed By: RUSH_F
 Date to Receive Samples: 07-MAY-2012
 Received By:

Send Final Report To:

2600 Blair Stone Rd.
 Tallahassee, FL 32399-2400
 Attn: Gary Maddox

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

Comments: Will pick up coolers. Thank you!

Suite A (Water) With 10 Samples:

Bottle Type: P-1L	Number of Bottles: 10	Preserved With: ICE
TURBIDITY	Template: DEFAULT	(EPA 180.1 Rev. 2.0) Turbidity in aqueous matrices
W-ALK	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO3/L
W-CL-IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Chloride in aqueous matrices
W-COLOR	Template: DEFAULT	(SM 2120 B) True Color measured at 450 nm or Apparent Color
Color (true)		
W-SO4-IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Sulfate in aqueous matrices
W-TDS	Template: DEFAULT	(SM 2540 C-97) Total Dissolved Solids in aqueous matrices
Bottle Type: P-500ML	Number of Bottles: 10	Preserved With: HNO3
W-ICP	Template:	(EPA 200.7 Rev. 4.4) Total Recoverable Metals analysis using ICP emission spectroscopy for aqueous samples supporting Clean Water Act Projects
Boron		
Calcium		
Magnesium		
Potassium		
Sodium		
Bottle Type: P-500ML	Number of Bottles: 10	Preserved With: ICE And H2SO4
W-NH3	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
W-NO2NO3	Template: DEFAULT	(EPA 353.2 Rev. 2.0) Nitrite/Nitrate in aqueous matrices as mg N/L
W-S-A-TP	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Total Phosphorus in aqueous matrices as mg P/L
W-TKN	Template: DEFAULT	(EPA 351.2 Rev. 2.0) Total Kjeldahl Nitrogen in aqueous matrices
W-TOC	Template: DEFAULT	(SM 5310 B-00) Nonpurgeable Organic Carbon in aqueous matrices
Bottle Type: P-125ML	Number of Bottles: 10	Preserved With: ICE-FLTR
W-PO4-F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L
Bottle Type: BG-1L	Number of Bottles: 22	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-2012-05-07-38

Shipping Method: Fedex Date/Time of Receipt: 5-11-12/10:14

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	4.3		✓			12	
White	4.8		✓			12	

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: SK Date: 5-10-12 NCRs (y/n)? Y

Event ID: WTRSHD-MGT-2012-05-11-01 NCR # 4142

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

NEW Package
Express US Airbill

FedEx
Tracking
Number

8768 6113 5236

This portion can be removed for Recipient's records.

5/10/12

FedEx
Tracking Number

876861135236

Sender's
Name
Edgar Wade

Phone 850 508-3559

Company
Florida Dept. of Environmental Protection

Address
2600 Blair Stone Rd

Dept./Floor/Suite/Room

Tallahassee

State FL ZIP 32399

Internal Billing Reference

Recipient's
Name

Phone 850 245-8085

Company
FLORIDA DEP/CHEMISTRY SECTION

Address
2600 BLAIRSTONE RD

Do not 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.

TALLAHASSEE

State FL ZIP 32399-6542

0442083090



8768 6113 5236

HOLD Weekday
FedEx location address
REQUIRED. NOT available for
FedEx First Overnight.

☐

HOLD Saturday
FedEx location address
REQUIRED. Available ONLY for
FedEx Priority Overnight and
FedEx 2Day to select locations.

☐

Form
ID 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 US Airbill.

Next Business Day

☐ **FedEx First Overnight**
Earliest 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**
Next business afternoon.*
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, 9 UN 1845

☐ **Cargo Aircraft Only**

Dangerous goods (including dry ice) cannot be shipped in FedEx packaging
or placed in a FedEx Express Drop Box.

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

63 lbs.

Credit Card Auth.

*Our liability is limited to \$100 unless you declare a higher value. See the current FedEx Service Guide for details.

611

Rev. Date 11/10 • Part #163134 • ©1994-2010 FedEx • PRINTED IN U.S.A. SR5

NEW Package
Express US Airbill

FedEx
Tracking
Number

8768 6113 5247

This portion can be removed for Recipient's records.

5/10/12

FedEx
Tracking Number

876861135247

Sender's
Name
Edgar Wade

Phone 850 508-3559

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Florida Dept. of Environmental Protection

Address
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Dept./Floor/Suite/Room

Tallahassee

State FL ZIP 32399

Internal Billing Reference

Recipient's
Name

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Dept./Floor/Suite/Room

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TALLAHASSEE

State FL ZIP 32399-6542

0442083090



8768 6113 5247

Form
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