

Log-in Checklist

RQ- _____

Login Station ID: _____

Shipping Method: FedEx | UPS | HD | Greyhound

Date/Time of Receipt: _____

Cooler Temperature*	Samples Frozen	* All Samples in Cooler Preserved with		Number of Sample Containers in Cooler	Evidence Tape				Tracking # Damaged waybills only
					Present?		*Intact?		
	YES	HNO ₃	Formalin		Yes	No	Yes	No	

* HNO3 and Formalin persevered samples do **NOT** have a temperature requirement. For all others, if the temperature of a cooler is above 6.0 °C (or above 10.0 °C for W-1-4-DIOX and microbiology), or if Evidence Seal is damaged. Identify the containers in the affected cooler(s) on back of this form. **DOH coolers can exceed 2.0 °C above standard temperature without customer notification/confirmation.**

****Note:** If “No” is checked below, fill out the back of this form (Field ID, Test IDs, etc.) and generate an **NCR**.

**Chain of Custody/ Field Sheet(s) Included? Yes _____ No _____

Micro-Biology Overflow Chain of Custody/ Field Sheet(s) Included? Yes _____ No _____

CONTAINER CHECK

****Evidence Tape on Bottles?** Yes _____ No _____ **If yes, is it intact?** Yes _____ No _____

****Caps on tight?** Yes _____ No _____ ****Containers intact?** Yes _____ No _____

****Sufficient Sample Volume:** Yes _____ No _____

CHLORINE CHECK REQUIRED? (Blue dot on container) Yes _____ No _____ Init: _____

Check the Box marked “Yes” or “No” for the Presence of Chlorine. If Cl detected, an NCR is required.					
Analysis	Yes	No	Analysis	Yes	No
W-1,4 DIOX			W-PC-AA-SF		
W-E8321-DI, -MS, -21			W-NP-AA-SF		
W-BNA (-625, -R)			W-PDQUAT		
W-CARB-AA (-CAB-AA-R)			W-PCL-SQ-R		
W-U2060-MS			W-TR-TQ		
W-PCB-R			W-CT-CI-R		
W-PAH (-R)			W-PSNP-TQ		
W-PFAS-MS					

PRESERVATION CHECK (EXCLUDING SAMPLES SENT TO OVERFLOW LABS, “OV-“)

****Acid Preserved Samples:** pH ≤ 2.0? Yes _____ No _____ NA _____ Init: _____

****W-1-4-DIOX (Green dot on container) preserved to pH < 4.0?** Yes _____ No _____ NA _____ Init: _____

Coolers Unpacked/Checked by: _____ **Date:** _____ **NCRs (Y/N)?** _____

Event ID: _____ **NCR #** _____

Log-in Checklist

Samples with Incorrect pH Preservation or presence of Chlorine

Field ID	Bottle Test ID(s)	pH / Cl	Action Taken

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		Evidence Tape Not Intact
			CK	BR	CK	BR	

Samples with Insufficient Volume for Analyses

Field ID	Bottle Test ID(s)	Action Taken

Additional Comments:

Infrared Thermometer ID:	
pH Paper 0.0 – 3.0 Lot #	
pH Paper 0 – 13 Lot #	
Chlorine Test Strips Lot #	

ENCORE SAMPLES

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

Were Encore samples received? Yes_____ No_____

Date and time placed in freezer _____

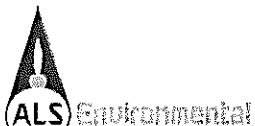
Were all samples placed in freezer within 48 hours of collection? Yes_____ If No_____

no, were samples shipped on dry ice? Yes_____ No_____

FOR CLEAN LAB USE ONLY – Total Mercury Preservation Check(W-HG-AF;W-HG-AF-F):

Samples preserved within 48 hours? Yes_____ No_____

Date and time samples preserved: _____



CHAIN OF CUSTODY / LABORATORY ANALYSIS REQUEST FORM

9143 Philips Highway, Suite 200 Jacksonville, FL 32256 / Ph(904) 739-2277 / FAX (904) 739-2011

Page 1

J2000111

Florida DEP
BMAP 1

5



Project Name BMAP 1		Project Number RQ-2020-01-06-43		ANALYSIS REQUESTED (Include Method Number and #)																			
Report To Jeremy Parrish		Report CC Dep-overflowmicro@dep.state.fl.us																					
Company/Address 8800 Baymeadows Way W Jacksonville, FL 32256																							
Phone # (904)256-1700		FAX #																					
Sampler's Signature <i>[Signature]</i>		Sampler's Printed Name Amy Kalmbacher																					
CLIENT SAMPLE ID		LAB ID		SAMPLING DATE TIME		Matrix																	
20030760				1-8-2020 0915		SW																	
20030082				0940		1																	
20030801				1020		1																	
20030953				1045		2																	
20030793				1125		2																	
20030958				1135		2																	
20030891				1200		2																	
Special Instructions/Comments: 0.4°				TURNAROUND REQUIREMENTS ☐ RUSH (SURCHARGES APPLY) ☒ STANDARD REQUESTED FAX DATE REQUESTED REPORT DATE				REPORT REQUIREMENTS ☐ I. Results Only ☐ II. Results + QC Summaries (LCS, DUP, MS/MSD as required) ☐ III. Results + QC and Calibration Summaries ☐ IV. Data Validation Report with Raw Data Edata ☐ Yes ☐ No				INVOICE INFORMATION P.O. # Bill to:											
Relinquished By <i>[Signature]</i>		Received By <i>[Signature]</i>		Relinquished By <i>[Signature]</i>		Received By <i>[Signature]</i>		Relinquished By <i>[Signature]</i>		Received By <i>[Signature]</i>													
Printed Name Amy Kalmbacher		Printed Name Amy Kalmbacher		Printed Name Amy Kalmbacher		Printed Name Amy Kalmbacher		Printed Name Amy Kalmbacher		Printed Name Lee Mason													
Firm FDEP NE ROC		Firm		Firm		Firm		Firm		Firm ALS													
Date/Time 1-08-2020 1217		Date/Time		Date/Time		Date/Time		Date/Time		Date/Time 1/8/2020 1225													

Date of Request: 23-DEC-2019
Created By: PARRISH_J On: 23-DEC-2019
Modified By: JASROTIA_P On: 02-JAN-2020
Customer: NE-DIST
Project: SMP
Division: Division of Environmental Assessment and Restoration
District: Northeast District
Sampling Event: Bmap 1 2020

Send Coolers To:

Phone: 904-807-3300
8800 Baymeadows Way West
Suite 100
Jacksonville, FL 32256
Attn: Jeremy Parrish

Program Module Number:
Priority: 3
Event Status: R
Criminal Investigation: NO
Chemistry Request Reviewed By:
Biology Request Reviewed By: JASROTIA_P On: 02-JAN-2020
Sampling Kit Required: NO Ship on:
Sampling Kit Shipped:
Sampling Kit Packed By:
Preservatives Needed: NO
Date to Receive Samples: 06-JAN-2020
Received By: MIRABITO_A On: 17-JAN-2020

Send Final Report To:

8800 Baymeadows Way West
Suite 100
Jacksonville, FL 32256
Attn: Jeremy Parrish

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

Comments: Group A: (Surf.Fresh)Bacteria
Group B:(Surf.Salt)Bacteria

NE-ALS-ECQ
NE-ALS-ENQ

Packing Notes:
None

Bottle Group A (Water) With 5 Samples:

Bottle Type: P-120ML-WC-THI Number of Bottles: 10 Preserved With: ICE
NE-ALS-ECQ Template: DEFAULT (SM 9223 B Quanti-Tray) E. coli by Colilert/QT by ALS in Jacksonville
Escherichia Coli-Quanti-Tray

Bottle Group B (Water) With 2 Samples:

Bottle Type: P-120ML-WC-THI Number of Bottles: 4 Preserved With: ICE
NE-ALS-ENQ Template: DEFAULT (ASTM D650399) Enterococci by Enterolert/QT by ALS in Jacksonville
ENTEROCOCCI-ENTEROLERT