Boldly "X" this box if there are qualified data on this page.

CALIBRATION AND VERIFICATION LOG (FDEP SOP FT 1000-FT 1500, FD 1000-FD 4000)

Meter ID: YSI ProDSS RQ- 2021-04-12-76 (2021-04-05-44) Project: Source tracking (BMAP-)

Notes: (1) Always wait for meter to stabilize before recording any readings.
(2) Report all digits displayed. Do not round before reporting measurements. (See special instructions for depth).
(3) For Calibrations, record calibrated meter reading. Do not record initial meter reading before calibration.

Temperature (Quarterly) FT 1400 Date of Last Temperature Verification ______

DO DEP SOP FT 1500	Name	Date	Time CT-ET	Temp °C	Barometer mmHg	D.O. Chart mg/L	Meter D.O. mg/L	% DO	Probe Charge	Probe Gain	Pass / Fail	Lab / Field
Calibr.	J Parnsh	4/14/21	800	21.9	764	8.9	8.9	100.5	—	1.056	P	L
ICV	⟂	⟂	801	21.9	764	8.8	8.8	100.4	—	1.056	P	L
CCV	J Parnsh	4/14/21	1327	23.1	763	8.6	8.6	100.1	—	—	P	L
CCV											P / F	L / F

DO Acceptance criteria from Table ± 0.3 mg/L. **Rapid-Pulse Sensors:** DO Gain Range 0.7 to 1.4; DO Charge Range 25-75.
Optical: DO gain range 0.85 to 1.15 (Pro DSS 0.75 to 1.50); DO charge N/A. **Steady-state & Galvanic Sensors:** DO Gain & Charge N/A.

Spec. Cond. FT 1200	Name	Date	Time CT-ET	Lot #	Explr. Date	Standard µmhos/cm	Meter Reading µmhos/cm	Pass / Fail	Lab / Field
Calibr.	J Parnsh	4/14/21	803	202228	1/22	1000	1000	P	L
ICV	⟂	4/14/21	804	201222A	1/22	100	103.6	P	L
CCV	J Parnsh	4/14/21	1328	2004 07B	4/21	20000	19715	P	L
CCV								P / F	L / F

Conductivity Acceptance criteria ± 5%

pH DEP SOP FT 1100	Name	Date	Time CT-ET	Lot #	Expir. Date	pH Buffer SU	Temp °C	Meter reading SU	mV	Pass / Fail	Lab / Field
Calibr.	J Parnsh	4/14/21	805	2010C27	10/22	7.	23.2	7.01	~~-45~~ 39.0	P	L
Calibr.	|	|	806	2010C31	9/22	4.	23.2	4.00	135.4	P	L
Calibr.	|	|	807	2012797	5/22	10.	23.2	10.02	212	P	L
ICV	⟂	⟂	808	2010C31	9/22	4.	23.2	4.01	135.3	P	L
CCV	J Parnsh	4/14/21	1329	2012797	5/22	10.	23.4	10.04	-214.1	P	L
CCV										P / F	L / F

pH Acceptance criteria ± 0.2 SU; mV pH 7 Range 0 ± 50; mV pH 4 Range +180 ± 50; mV pH 10 Range -180 ± 50;
If mV are recorded: slope from 7 to 10 ______, slope from 4 to 7 ______ (both must be between 165 and 180 mV)

Does meter have a depth sensor that will be used to measure total depth & sample depth? YES / NO / NA (not surf. water project)
If **YES**, complete daily Calibr. & ICV below and list date of last quarterly depth verification: ______
If **NO**, what will be used? (circle one) **Secchi Disk Line / Sonar** Unique ID: ______; Date of last verification: ______

Depth Sensor (Daily Calibration & ICV)	Name	Date	Time CT-ET	Calibrated Value (0.00 or Offset), meters	ICV Value, meters	Pass / Fail	Lab / Field
Pressure mode in air	J Parnsh	4/14/21	819	0.00	0.00	P	L

Report two decimal places. Round numbers ≤ 4 down, ≥ 5 up. ICV acceptance criteria ± 5 % or ± 0.05m, whichever is greater.

COMMENTS:

Form effective August 1, 2018

Revision 2/24/2020

Florida DEP *North East District ROC* BMAP Field sheet

Data Pass CCV? Yes / No

Date: 4/14/21 RQ#: 2021-04-05-44

Event Name: BMAP makeup Meter ID: ProDSSDesi

Sampling Team Members: K. McDonald & J. Parrish

All bacteria samples taken are surface water grab samples.

WIN Number / Site Name	WBID Number	Matrix	Sample Type	Initials Sample & Preservation	Initials Documentation
20030801 Big Fishweir CR SF @ Hamilton ST	2280 A	Surface Fresh ☒ Surface Salt ☐	E. coli ☒ Entero ☐ Fecal ☐	KM	KM
	Sample Access: Wading ☐ Dock ☐ From Shore ☒ Bridge ☐		Sample Ice Preserved in 15 minutes? Yes ☒ No ☐		

Time	Total depth(m)	Sample depth(m)	Temp °C	Conductivity µmhos	Salinity ppth	pH s.u.	D.O. mg/L	D.O. % sat	Secchi m	Tide Ebb/ Flood Slack
4/14	0.324	0.16	21.8	2212	1.13	7.16	4.13	47.3	0.324	Flood
1150									VDB	

Comments and Weather:

tide high 1310

WIN Number / Site Name	WBID Number	Matrix	Sample Type	Initials Sample & Preservation	Initials Documentation
20030793 Craig Cr @ Hendricks Ave	2297B	Surface Fresh ☐ Surface Salt ☒	E. coli ☐ Entero ☒ Fecal ☐	KM	KM
	Sample Access: Wading ☐ Dock ☐ From Shore ☒ Bridge ☐		Sample Ice Preserved in 15 minutes? Yes ☒ No ☐		

Time	Total depth(m)	Sample depth(m)	Temp °C	Conductivity µmhos	Salinity ppth	pH s.u.	D.O. mg/L	D.O. % sat	Secchi m	Tide Ebb/ Flood Slack
1215	0.550	0.3	22.5	11,044	6.27	6.93	3.00	35.8	0.550	Flood
									VDB	

Comments and Weather:

high Slack tide

WIN Number / Site Name	WBID Number	Matrix	Sample Type	Initials Sample & Preservation	Initials Documentation
20030958 Craig Cr 100m Down from footbridge in park	2297B	Surface Fresh ☐ Surface Salt ☒	E. coli ☐ Entero ☒ Fecal ☐	KM	KM
	Sample Access: Wading ☐ Dock ☐ From Shore ☒ Bridge ☐		Sample Ice Preserved in 15 minutes? Yes ☒ No ☐		

Time	Total depth(m)	Sample depth(m)	Temp °C	Conductivity µmhos	Salinity ppth	pH s.u.	D.O. mg/L	D.O. % sat	Secchi m	Tide Ebb/ Flood Slack
1220	0.725	0.3	22.5	13,253	7.70	7.76	7.26	87.4	0.5	Flood

Comments and Weather:

water v. high high Slack tide

Signature: Kelly A McDonald Date: 4/14/21

Field Sheet Scanned (Initials/date): _____ Parameters uploaded to LIMs (Initials/date): _____

Data QC'd in LIMs (Initials/date): BD 05/13/2021 Data Migrated to WIN (Initials/date): _____

All documentation meets requirements of FDEP SOP FD 1000

Revision 2/24/2020

WIN Number / Site Name	WBID Number	Matrix:	Sample Type:	Initials Sample & Preservation	Initials Documentation
20030891 Goodbys CR above West Branch at San Clerc	23216A	Surface Fresh ☒ Surface Salt ☐	E. coli ☒ Entero ☐ Fecal ☐	km	km
	Sample Access: Wading ☐ Dock ☐ From Shore ☒ Bridge ☐		Sample Ice Preserved in 15 minutes? Yes ☒ No ☐		

Time	Total depth(m)	Sample depth(m)	Temp °C	Conductivity µmhos	Salinity ppth	pH s.u.	D.O. mg/L	D.O. % sat	Secchi m	Tide Ebb/ Flood Slack
1245	0.478	0.23	19.5	403.7	0.19	7.42	67.1	6.16		Flood
							↶	↷	VOB	Slack

Comments and Weather:

WIN Number / Site Name	WBID Number	Matrix:	Sample Type:	Initials Sample & Preservation	Initials Documentation
		Surface Fresh ☐ Surface Salt ☐	E. coli ☐ Entero ☐ Fecal ☐		
	Sample Access: Wading ☐ Dock ☐ From Shore ☐ Bridge ☐		Sample Ice Preserved in 15 minutes? Yes ☐ No ☐		

Time	Total depth(m)	Sample depth(m)	Temp °C	Conductivity µmhos	Salinity ppth	pH s.u.	D.O. mg/L	D.O. % sat	Secchi m	Tide Ebb/ Flood Slack

Comments and Weather:

WIN Number / Site Name	WBID Number	Matrix:	Sample Type:	Initials Sample & Preservation	Initials Documentation
		Surface Fresh ☐ Surface Salt ☐	E. coli ☐ Entero ☐ Fecal ☐		
	Sample Access: Wading ☐ Dock ☐ From Shore ☐ Bridge ☐		Sample Ice Preserved in 15 minutes? Yes ☐ No ☐		

Time	Total depth(m)	Sample depth(m)	Temp °C	Conductivity µmhos	Salinity ppth	pH s.u.	D.O. mg/L	D.O. % sat	Secchi m	Tide Ebb/ Flood Slack

Comments and Weather:

WIN Number / Site Name	WBID Number	Matrix:	Sample Type:	Initials Sample & Preservation	Initials Documentation
		Surface Fresh ☐ Surface Salt ☐	E. coli ☐ Entero ☐ Fecal ☐		
	Sample Access: Wading ☐ Dock ☐ From Shore ☐ Bridge ☐		Sample Ice Preserved in 15 minutes? Yes ☐ No ☐		

Time	Total depth(m)	Sample depth(m)	Temp °C	Conductivity µmhos	Salinity ppth	pH s.u.	D.O. mg/L	D.O. % sat	Secchi m	Tide Ebb/ Flood Slack

Comments and Weather:

All documentation meets requirements of FDEP SOP FD 1000

CHAIN OF CUSTODY / LABORATORY ANALYSIS REQUEST FORM

SR #

ALS Contact: Mandy Sullivan

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

Client Name	Project Number
FDEP-NE ROC	RQ-2021- 04-05-44
Report To	**Report CC**
Dep-Overflowmicro@dep.state.fl.us	
Company/Address	
8800 Baymeadows Way W Jacksonville, Fl 32256	
Phone #	**FAX #**
904-256-1700	
Sampler's Signature	**Sampler's Printed Name**
Kelly A McDonald	Kelly A McDonald

ANALYSIS REQUESTED (Include Method Number and Container Preservative)

Preservative Key: 0. None; 1. HCL; 2. HNO3; 3. H2SO4; 4. NaOH; 5. Zn. Acetate; 6. MeOH; 7. NaHSO4; 8. ICE

CLIENT SAMPLE ID	LAB ID	SAMPLING DATE	SAMPLING TIME	Matrix	NUMBER OF CONTAINERS	Preservative	E.Coli	Enterococci	REMARKS
20030801		4/14	1150	SW	1	X	X		Fresh
20030793		↓	1215	↓	1			X	Salt
20030958			1220		1			X	Salt
20030891			1245		1	X	X		Fresh

Special Instructions/Comments: Email Report to: Dep-Overflowmicro@dep.state.fl.us

0.6

TURNAROUND REQUIREMENTS
- ___ RUSH (SURCHARGES APPLY)
- X STANDARD

REQUESTED FAX DATE: N/A

REQUESTED REPORT DATE: N/A

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. # B10739

Bill to:

Relinquished By	Received By	Relinquished By	Received By	Relinquished By	Received By
Signature: Kelly A McDonald	Signature: Valerie Spears	Signature	Signature	Signature	Signature
Printed Name: Kelly A McDonald	Printed Name: Valerie Spears	Printed Name	Printed Name	Printed Name	Printed Name
Firm: FDEP NEROC	Firm: ALS	Firm	Firm	Firm	Firm
Date/Time: 4/14/2021 1258	Date/Time: 4/14/21 1258	Date/Time	Date/Time	Date/Time	Date/Time