

Florida Department of Environmental Protection

Event ID *

Request Number: RQ-2009-05-25-17

Central Laboratory Sample Submittal Form

Project Greenshores

Requester: William Chandler

Field Report Prepared By: Mike King

Customer: NW-DIST

Collected By: Zack Shang

Send Final Report To Bill Chandler

Project ID: DISCRTNARY

Sampling Agency: FDCP

PMAS: 1306

Lab ID *	Location	☐ Comp ☒ Grab	Collection (begin) Date 6/1/09 Time 1000	Eastern Central	Collection (end) Date Time	Eastern Central	Bottle Group(s)**	
	Range marker E. of Texar							
	Field ID		Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L)	Storet Station Number			
	1			7.99				
	Matrix (Include type e.g. Salt, Fresh, etc)	Temp (C)	pH	Sample Depth ☒ m ☐ ft	Salinity (PPTH) ☐ Sp Conductance (umho/cm)	NPDES Number		
		26.71	8.25	0.5				
	Latitude	Longitude	Comments					
	0	0						
Lab ID *	Location	☐ Comp ☒ Grab	Collection (begin) Date 6/1/09 Time 1012	Eastern Central	Collection (end) Date Time	Eastern Central	Bottle Group(s)**	
	1/2 Bridge and Muscogee							
	Field ID		Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L)	Storet Station Number			
	2			7.88				
	Matrix (Include type e.g. Salt, Fresh, etc)	Temp (C)	pH	Sample Depth ☒ m ☐ ft	Salinity (PPTH) ☐ Sp Conductance (umho/cm)	NPDES Number		
		26.92	8.29	0.5				
	Latitude	Longitude	Comments					
	0	0						
Lab ID *	Location	☐ Comp ☒ Grab	Collection (begin) Date 6/1/09 Time 1021	Eastern Central	Collection (end) Date Time	Eastern Central	Bottle Group(s)**	
	East of Primary Stormdrain							
	Field ID		Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L)	Storet Station Number			
	3			7.60				
	Matrix (Include type e.g. Salt, Fresh, etc)	Temp (C)	pH	Sample Depth ☒ m ☐ ft	Salinity (PPTH) ☐ Sp Conductance (umho/cm)	NPDES Number		
		27.35	8.15	0.5				
	Latitude	Longitude	Comments					
	0	0						
Lab ID *	Location	☐ Comp ☒ Grab	Collection (begin) Date 6/1/09 Time 1137	Eastern Central	Collection (end) Date Time	Eastern Central	Bottle Group(s)**	
	100 Ft. South of Stormdrain							
	Field ID		Tot Res Chlorine (mg/L)	Diss Oxygen (mg/L)	Storet Station Number			
	4			9.12				
	Matrix (Include type e.g. Salt, Fresh, etc)	Temp (C)	pH	Sample Depth ☒ m ☐ ft	Salinity (PPTH) ☐ Sp Conductance (umho/cm)	NPDES Number		
		28.97	8.11	0.5				
	Latitude	Longitude	Comments					
	0	0						
Relinquished By:	Date/Time	Shipping Method:	Received By:	Date/Time	Relinquished By:	Date/Time	Received By:	Date/Time
	6/1/09 1500	FDCP	Tahmaur	6/2/09 9:25				
			Ibrahim:					

* Shaded Areas for Lab use only.

** Please see reverse side for Bottle Group information.

last revised October 1, 2003

Group	Bottle Type	# of Bottles	Preservative	Enter Number of Bottles Sent to Lab
A	P-1L	14	ICE	4
BOD-UNIN				
A	BP-1L	14	ICE	4
CHLSUITE-W				
A	TEST HAS NO BOTTLES	14	ICE	4
NW-UWF-ENT				
NW-UWF-FC				
A	P-1L	14	ICE	4
TURBIDITY				
W-COLOR				
W-TSS				
A	P-500ML	14	ICE And H2SO4	4
W-NH3				
W-NO2NO3				
W-S-A-TP				
W-TKN				

Florida Department of Environmental Protection

Event ID *

Request Number: RQ-2009-05-25-17

Central Laboratory Sample Submittal Form

Project Greenshores

Requester: William Chandler

Field Report Prepared By: Mike Ry

Customer: NW-DIST

Collected By: Zack Shang

Send Final Report To Bill Chandler

Project ID: DISCRTNARY

Sampling Agency: FDER

PMAS: 1306

Lab ID *	Location	<u>End of Chase st</u>		☐ Comp ☒ Grab	Collection (begin) Date <u>6/1/09</u> Time <u>1145</u>	Eastern Central	Collection (end) Date _____ Time _____	Eastern Central	Bottle Group(s)**
	Field ID	<u>5</u>		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <u>6.91</u>	Storet Station Number		
	Matrix (Include type e.g. <u>Salt</u> , Fresh, etc)	Temp (C) <u>28.57</u>	pH <u>7.98</u>	Sample Depth ☒ m <u>0.5</u> ☐ ft	<u>16.44</u>		☒ Salinity (PPTH) ☐ Sp Conductance (umho/cm)	NPDES Number	
	Latitude <u>0</u> ' <u>"</u>	Longitude <u>0</u> ' <u>"</u>		Comments					

Lab ID *	Location	<u>1/2 Muscogee and Hawkshaw</u>		☐ Comp ☒ Grab	Collection (begin) Date <u>6/1/09</u> Time <u>1122</u>	Eastern Central	Collection (end) Date _____ Time _____	Eastern Central	Bottle Group(s)**
	Field ID	<u>6</u>		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <u>7.99</u>	Storet Station Number		
	Matrix (Include type e.g. <u>Salt</u> , Fresh, etc)	Temp (C) <u>27.78</u>	pH <u>8.26</u>	Sample Depth ☒ m <u>0.5</u> ☐ ft	<u>15.54</u>		☒ Salinity (PPTH) ☐ Sp Conductance (umho/cm)	NPDES Number	
	Latitude <u>0</u> ' <u>"</u>	Longitude <u>0</u> ' <u>"</u>		Comments					

Lab ID *	Location	<u>1/2 Bridge and Port</u>		☐ Comp ☒ Grab	Collection (begin) Date <u>6/1/09</u> Time <u>1030</u>	Eastern Central	Collection (end) Date _____ Time _____	Eastern Central	Bottle Group(s)**
	Field ID	<u>7</u>		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <u>7.96</u>	Storet Station Number		
	Matrix (Include type e.g. <u>Salt</u> , Fresh, etc)	Temp (C) <u>27.03</u>	pH <u>8.30</u>	Sample Depth ☒ m <u>0.5</u> ☐ ft	<u>16.01</u>		☒ Salinity (PPTH) ☐ Sp Conductance (umho/cm)	NPDES Number	
	Latitude <u>0</u> ' <u>"</u>	Longitude <u>0</u> ' <u>"</u>		Comments					

Lab ID *	Location	<u>West of Stormdrain Inside rocks</u>		☐ Comp ☒ Grab	Collection (begin) Date <u>6/1/09</u> Time <u>1150</u>	Eastern Central	Collection (end) Date _____ Time _____	Eastern Central	Bottle Group(s)**
	Field ID	<u>8</u>		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <u>6.75</u>	Storet Station Number		
	Matrix (Include type e.g. <u>Salt</u> , Fresh, etc)	Temp (C) <u>29.04</u>	pH <u>7.92</u>	Sample Depth ☒ m <u>0.5</u> ☐ ft	<u>14.52</u>		☒ Salinity (PPTH) ☐ Sp Conductance (umho/cm)	NPDES Number	
	Latitude <u>0</u> ' <u>"</u>	Longitude <u>0</u> ' <u>"</u>		Comments					

Relinquished By: <u>[Signature]</u>	Date/Time <u>6/1/09 1500</u>	Shipping Method: <u>FEDEX</u>	Received By: <u>Tahmuna Ebrahim</u>	Date/Time <u>6/1/09 4:25</u>	Relinquished By:	Date/Time	Received By:	Date/Time
-------------------------------------	---------------------------------	----------------------------------	--	---------------------------------	------------------	-----------	--------------	-----------

* Shaded Areas for Lab use only.

** Please see reverse side for Bottle Group information.

last revised October 1, 2003

Group: A	Bottle Type: P-1L	# of Bottles: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab <u>4</u>
BOD-UNIN				
Group: A	Bottle Type: BP-1L	# of Bottles: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab <u>4</u>
CHLSUITE-W				
Group: A	Bottle Type: TEST HAS NO BOTTLES	# of Bottles: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab <u>4</u>
NW-UWF-ENT				
NW-UWF-FC				
Group: A	Bottle Type: P-1L	# of Bottles: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab <u>4</u>
TURBIDITY				
W-COLOR				
W-TSS				
Group: A	Bottle Type: P-500ML	# of Bottles: 14	Preservative: ICE And H2SO4	Enter Number of Bottles Sent to Lab <u>4</u>
W-NH3				
W-NO2NO3				
W-S-A-TP				
W-TKN				

Florida Department of Environmental Protection

Event ID *

Request Number: RQ-2009-05-25-17

Central Laboratory Sample Submittal Form

Project Greenshores

Requester: William Chandler

Field Report Prepared By: Mike Ray

Customer: NW-DIST

Collected By: Zack Schang

Send Final Report To Bill Chandler

Project ID: DISCRTNARY

Sampling Agency: FDEP

PMAS: 1306

Lab ID *	Location <u>West end of Hawkshaw 100 FT South of outfall</u>			☐ Comp ☒ Grab		Collection (begin) Date <u>6/1/09</u> Time <u>1055</u>		Eastern ☒ Central		Collection (end) Date _____ Time _____		Bottle Group(s)**
	Field ID			Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <u>7.70</u>		Storet Station Number				
	Matrix (Include type e.g. Salt, Fresh, etc) <u>9</u>			Temp (C) <u>27.35</u>	pH <u>8.15</u>	Sample Depth ☒ m <u>0.5</u> ☐ ft		☒ Salinity (PPT) ☐ Sp Conductance (umho/cm)		NPDES Number		
	Latitude 0 ' " .			Longitude 0 ' " .			Comments					

Lab ID *	Location <u>Between Marina & outfall</u>			☐ Comp ☒ Grab		Collection (begin) Date <u>6/1/09</u> Time <u>1045</u>		Eastern ☒ Central		Collection (end) Date _____ Time _____		Bottle Group(s)**
	Field ID			Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <u>7.63</u>		Storet Station Number				
	Matrix (Include type e.g. Salt, Fresh, etc) <u>10</u>			Temp (C) <u>27.68</u>	pH <u>8.23</u>	Sample Depth ☒ m <u>0.5</u> ☐ ft		☒ Salinity (PPT) ☐ Sp Conductance (umho/cm)		NPDES Number		
	Latitude 0 ' " .			Longitude 0 ' " .			Comments					

Lab ID *	Location <u>Entrance of Marina</u>			☐ Comp ☒ Grab		Collection (begin) Date <u>6/1/09</u> Time <u>1040</u>		Eastern ☒ Central		Collection (end) Date _____ Time _____		Bottle Group(s)**
	Field ID			Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <u>7.78</u>		Storet Station Number				
	Matrix (Include type e.g. Salt, Fresh, etc) <u>11</u>			Temp (C) <u>27.55</u>	pH <u>8.29</u>	Sample Depth ☐ m <u>0.5</u> ☐ ft		☒ Salinity (PPT) ☐ Sp Conductance (umho/cm)		NPDES Number		
	Latitude 0 ' " .			Longitude 0 ' " .			Comments					

Lab ID *	Location <u>1/4 Between Bridge and Port 400 ft from shore</u>			☐ Comp ☒ Grab		Collection (begin) Date <u>6/1/09</u> Time <u>1130</u>		Eastern ☒ Central		Collection (end) Date _____ Time _____		Bottle Group(s)**
	Field ID			Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <u>7.62</u>		Storet Station Number				
	Matrix (Include type e.g. Salt, Fresh, etc) <u>12</u>			Temp (C) <u>27.25</u>	pH <u>8.21</u>	Sample Depth ☐ m <u>0.5</u> ☐ ft		☒ Salinity (PPT) ☐ Sp Conductance (umho/cm)		NPDES Number		
	Latitude 0 ' " .			Longitude 0 ' " .			Comments					

Relinquished By:	Date/Time <u>6/1/09 1130</u>	Shipping Method: <u>Fedex</u>	Received By: <u>Tahmouni Ebrahim</u>	Date/Time <u>06/02/09 9:25</u>	Relinquished By:	Date/Time	Received By:	Date/Time
------------------	---------------------------------	----------------------------------	---	-----------------------------------	------------------	-----------	--------------	-----------

* Shaded Areas for Lab use only.

** Please see reverse side for Bottle Group information.

last revised October 1, 2003

Group: A	Bottle Type: P-1L	# of Bottles: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab
BOD-UNIN				
Group: A	Bottle Type: BP-1L	# of Bottles: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab
CHLSUITE-W				
Group: A	Bottle Type: TEST HAS NO BOTTLES	# of Bottles: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab
NW-UWF-ENT				
NW-UWF-FC				
Group: A	Bottle Type: P-1L	# of Bottles: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab
TURBIDITY				
W-COLOR				
W-TSS				
Group: A	Bottle Type: P-500ML	# of Bottles: 14	Preservative: ICE And H2SO4	Enter Number of Bottles Sent to Lab
W-NH3				
W-NO2NO3				
W-S-A-TP				
W-TKN				

Florida Department of Environmental Protection

Event ID *

Request Number: RQ-2009-05-25-17

Project Greenshores

Central Laboratory Sample Submittal Form

Requester: William Chandler

Field Report Prepared By: Mick King

Customer: NW-DIST

Collected By: Zack Schanze

Send Final Report To Bill Chandler

Project ID: DISCRTNARY

Sampling Agency: FDEP

PMAS: 1306

Lab ID *	Location <u>Inside hawkshaw lagoon</u>			☐ Comp		Collection (begin)		Eastern		Collection (end)		Eastern		Bottle Group(s)**
	Field ID			☒ Grab		Date <u>6/1/09</u> Time <u>1155</u>		☒ Central		Date		Time		
	Matrix (Include type e.g. Salt, Fresh, etc) <u>13</u>			Temp (C) <u>27.38</u>		pH <u>7.52</u>		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <u>5.50</u>		Storet Station Number		
	Latitude 0 ' "			Longitude 0 ' "		Sample Depth ☒ m <u>0.5</u>		☒ Salinity (PPT) <u>16.67</u>		NPDES Number		☐ Sp Conductance (umho/cm)		
	Comments													

Lab ID *	Location <u>East or Stormdrain inside PGS site 2</u>			☐ Comp		Collection (begin)		Eastern		Collection (end)		Eastern		Bottle Group(s)**
	Field ID			☒ Grab		Date <u>6/1/09</u> Time <u>1114</u>		☒ Central		Date		Time		
	Matrix (Include type e.g. Salt, Fresh, etc) <u>14</u>			Temp (C) <u>27.95</u>		pH <u>8.24</u>		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L) <u>7.73</u>		Storet Station Number		
	Latitude 0 ' "			Longitude 0 ' "		Sample Depth ☒ m <u>0.5</u>		☒ Salinity (PPT) <u>14.32</u>		NPDES Number		☐ Sp Conductance (umho/cm)		
	Comments													

Lab ID *	Location			☐ Comp		Collection (begin)		Eastern		Collection (end)		Eastern		Bottle Group(s)**
	Field ID			☐ Grab		Date		Time		Date		Time		
	Matrix (Include type e.g. Salt, Fresh, etc)			Temp (C)		pH		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L)		Storet Station Number		
	Latitude 0 ' "			Longitude 0 ' "		Sample Depth ☐ m ☐ ft		☐ Salinity (PPT)		NPDES Number		☐ Sp Conductance (umho/cm)		
	Comments													

Lab ID *	Location			☐ Comp		Collection (begin)		Eastern		Collection (end)		Eastern		Bottle Group(s)**
	Field ID			☐ Grab		Date		Time		Date		Time		
	Matrix (Include type e.g. Salt, Fresh, etc)			Temp (C)		pH		Tot Res Chlorine (mg/L)		Diss Oxygen (mg/L)		Storet Station Number		
	Latitude 0 ' "			Longitude 0 ' "		Sample Depth ☐ m ☐ ft		☐ Salinity (PPT)		NPDES Number		☐ Sp Conductance (umho/cm)		
	Comments													

Relinquished By: <u>[Signature]</u>	Date/Time: <u>6/1/09 1500</u>	Shipping Method: <u>FED EX</u>	Received By: <u>Tahmoures Ebrahimi</u>	Date/Time: <u>06/02/09 9:25</u>	Relinquished By:	Date/Time:	Received By:	Date/Time:
-------------------------------------	-------------------------------	--------------------------------	--	---------------------------------	------------------	------------	--------------	------------

* Shaded Areas for Lab use only.

** Please see reverse side for Bottle Group information.

last revised October 1, 2003

Group: A	Bottle Type: P-1L	# of Bottles: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab <u>2</u>
BOD-UNIN				
Group: A	Bottle Type: BP-1L	# of Bottles: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab <u>2</u>
CHLSUITE-W				
Group: A	Bottle Type: TEST HAS NO BOTTLES	# of Bottles: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab <u>2</u>
NW-UWF-ENT				
NW-UWF-FC				
Group: A	Bottle Type: P-1L	# of Bottles: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab <u>2</u>
TURBIDITY				
W-COLOR				
W-TSS				
Group: A	Bottle Type: P-500ML	# of Bottles: 14	Preservative: ICE And H2SO4	Enter Number of Bottles Sent to Lab <u>2</u>
W-NH3				
W-NO2NO3				
W-S-A-TP				
W-TKN				

SAMPLE TRANSMITTAL FORM

Document Reference # 05.1.0

Project: Project GreenShores FDEP

Laboratory: Wetlands Research Laboratory

Sampler's initials

ZS/NH

Method of transport: _____ on ice by automobile _____

Page 1 of 1Samples delivered by: Mike King of _____ FDEPDate/Time: 6/1/09 / _____

Sample received by: _____ of _____ WRL

Date/Time: _____ / _____

Instructions: Fill in all fields except "Lab ID" on sample transport form completely. Each sample container must use a separate line. Place this form in a waterproof bag and place it with the samples for transport. If a field log or other chain of custody is attached, that information may be referenced on this form and the log or COC attached.

Lab ID	Sample ID	Matrix ¹	Type ²	Container Type	Analyses Requested	Preservative	Sample (°C) ³	Sampling Date/Time
	#1-Pensacola Bay-3302H32GS1	SW	G	Sterile plastic	Enterococcus/Fecal Coliform MF	ice/Na2S2O3		6/1/09 / 1000
	#2-Pensacola Bay-3302J8GS2	SW	G	Sterile plastic	Enterococcus/Fecal Coliform MF	ice/Na2S2O3		" / 1013
	#3-Pensacola Bay-3302J2GS3	SW	G	Sterile plastic	Enterococcus/Fecal Coliform MF	ice/Na2S2O3		" / 1021
	#4-Pensacola Bay-3302J2GS4	SW	G	Sterile plastic	Enterococcus/Fecal Coliform MF	ice/Na2S2O3		" / 1137
	#5-Pensacola Bay-3302J2GS5	SW	G	Sterile plastic	Enterococcus/Fecal Coliform MF	ice/Na2S2O3		" / 1145
	#6-Pensacola Bay-3302J1GS6	SW	G	Sterile plastic	Enterococcus/Fecal Coliform MF	ice/Na2S2O3		" / 1122
	#7-Pensacola Bay-3302J8GS7	SW	G	Sterile plastic	Enterococcus/Fecal Coliform MF	ice/Na2S2O3		" / 1030
	#8-Pensacola Bay-3302J2GS8	SW	G	Sterile plastic	Enterococcus/Fecal Coliform MF	ice/Na2S2O3		" / 1150
	#9-Pensacola Bay-3302J1GS9	SW	G	Sterile plastic	Enterococcus/Fecal Coliform MF	ice/Na2S2O3		" / 1055
	#10-Pensacola Bay-3302J7GS10	SW	G	Sterile plastic	Enterococcus/Fecal Coliform MF	ice/Na2S2O3		" / 1045
	#11-Pensacola Bay-3302J7GS11	SW	G	Sterile plastic	Enterococcus/Fecal Coliform MF	ice/Na2S2O3		" / 1040
	#12-Pensacola Bay-3302J7GS12	SW	G	Sterile plastic	Enterococcus/Fecal Coliform MF	ice/Na2S2O3		" / 1130
	#13-Pen Bay/Hawkshaw Lagoon-3302J1HL1	SW	G	Sterile plastic	Enterococcus/Fecal Coliform MF	ice/Na2S2O3		" / 1155
	#14-Pensacola Bay-3302J1GS7	SW	G	Sterile plastic	Enterococcus/Fecal Coliform MF	ice/Na2S2O3		" / 1112

Comments _____ sample container lot# BQ 2009-05-25-17

Contact organization _____ FDEP

Contact name Brae Hartsborn

Phone: (850) 595-8300

Address 160 Governmental Center, suite 308, Pensacola, FL 32502Sampler's name: Zack Schang¹Matrix: SW = surface water, PW = pore water, GW = ground water, S = soil/sediment, X = _____²Type codes: G = grab, C = composite, X = G³Recorded using IRT-2

Date of Request: 01-APR-2009
 Created By: CHANDLER_W On: 01-APR-2009
 Modified By: BRACKETT_K On: 11-MAY-2009
 Customer: NW-DIST
 Project: DISCRTNARY
 Division::
 District: Northwest District
 Sampling Event: Project Greenshores

Send Coolers To:

Phone: SC-695-8300
 160 Government Center
 Suite 308
 Pensacola, FL 32502-5794
 Attn: Bill Chandler

Send Final Report To:

160 Government Center
 Suite 308
 Pensacola, FL 32502-5794
 Attn: Bill Chandler

Program Module Number: 1306
 Priority: 3
 Event Status: R
 Criminal Investigation: NO
 Chemistry Request Reviewed By: BRACKETT_K On: 11-MAY-2009
 Biology Request Reviewed By: WHITING_D On: 27-APR-2009
 Sampling Kit Required: YES Ship on: 11-MAY-2009
 Sampling Kit Shipped: YES On: 14-MAY-2009
 Sampling Kit Packed By: CRANE_C
 Date To Receive Samples: 25-MAY-2009
 Received By: EBRAHIM_TO On: 02-JUN-2009

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

Comments:

Suite A (Water) With 14 Samples:

Bottle Type: P-1L **Number of Bottles: 1** **Preserved With: ICE**

BOD-UNIN Template: BOD20-UNIN BOD, NOT nitrogen-inhibited

Bottle Type: BP-1L **Number of Bottles: 1** **Preserved With: ICE**

CHLSUITE-W Template: DEFAULT Phytoplankton chlorophyll-a and phaeophytin and ratio by spectrophotometry

Bottle Type: TEST HAS NO B **Number of Bottles: 1** **Preserved With: ICE**

NW-UWF-ENT Template: DEFAULT Enterococci by membrane filter method by UWF Overflow Laboratory for NWD

NW-UWF-FC Template: DEFAULT Fecal coliforms by membrane filter method by UWF Overflow Laboratory for NWD

Bottle Type: P-1L **Number of Bottles: 1** **Preserved With: ICE**

TURBIDITY Template: DEFAULT Turbidity in aqueous matrices

W-COLOR Template: DEFAULT Color in water samples

W-TSS Template: DEFAULT Total Suspended Solids in aqueous matrices

Bottle Type: P-500ML **Number of Bottles: 1** **Preserved With: ICE And H2SO4**

W-NH3 Template: DEFAULT Ammonia in aqueous matrices as mg N/L

W-NO2NO3 Template: DEFAULT Nitrite/Nitrate in aqueous matrices as mg N/L

W-S-A-TP Template: DEFAULT Low Level Total Phosphorus in fresh water matrices

W-TKN Template: DEFAULT Total Kjeldahl Nitrogen in aqueous matrices

Log-in Checklist

RQ ID: 2009-05-25-17

Shipping Method: Fe2EX Date/Time of Receipt: 06/02/09 9:25

Cooler Check

Cooler Check							
Cooler ID	Cooler Temp.	Evidence Tape				No. Sample Containers in Cooler	* Tracking #
		Present?		Intact?			
		Yes	No	Yes	No		
White	1.1 C°		✓			16	
Gray	1.7 C°		✓			12	
White	1 C°		✓			16	

Note: If the the temperature of a cooler is above 6° C or an evidence seal is damaged then identify the bottles, in the affected cooler(s), on back of form.

* Write the tracking number only if the waybill copy cannot be placed in the folder.

Evidence Tape on Bottles Present: Yes _____ No ☒

If Yes, is it intact? Yes _____ No _____

If No, fill out back of form.

Condition of Containers:

Loose Caps: Yes _____ No ☒ If Yes, fill out back of form.

Broken Containers: Yes _____ No ☒ If Yes, fill out back of form.

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

If Yes, verify receipt of all containers listed, then sign COC/field form. Document discrepancies (i.e. missing containers) on COC/field form.

Acid Preserved Samples: pH ≤ 2 ? Yes ☒ No _____ NA E.T.

If No, fill out back of form and check unpreserved containers with same field ID.

Base Preserved Samples: pH ≥ 12 or 9? Yes _____ No _____ NA ☒ E.T.

(W-CN, OV-CN - pH ≥ 12), (W-SULFIDE-F, W-SULFIDE - pH ≥ 9)

If No, fill out back of form and check unpreserved containers with same field ID.

Sample Volume Sufficient: Yes ☒ No _____ If No, fill out back of form.

Coolers Unpacked/Checked by: E.T. Date: 06/02/09 NCRs (y/n)? N

Event ID: NW-DIST-2009-06-02-01 NCR # _____

NA - Not Applicable

Samples in Coolers with Incorrect Preservation or Damaged Evidence Tape

Cooler ID	Bottle Field ID	Bottle Test ID(s)	Tape intact on Bottle?	
			Yes	No

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

TUE - 02 JUN A2
PRIORITY OVERNIGHT

889 8046 7619

32399
FL-US
TLH

US Airbill
ESS

can be removed for Recipient's records.

FedEx Tracking Number

Phone

State

iling Reference

Phone

RIDA EP/CHEMISTRY SECTION

O BLA RSTONE RD

ares or PD ZIP codes

At a specific FedEx location, print FedEx address here.

HASSEI

State

FL

ZIP

33008



8689 8046 7619

4a

4b

5

6

7

8

9



576997 01JUN09 15:30

10

11

12

ALIGN OF

TUE - 02 JUN A2
PRIORITY OVERNIGHT

TRK# 8689 8046 7630
0215

S Airbill

FedEx
Tracking
Number

8689 8046 7630

Moved for Recipient's records.

FedEx Tracking Number

8689 8046 7630

Phone

Day/night/Suite/Room

State

ZIP

Reference

Phone 850-243

4. EP/CHEMISTRY SECTION

LA RSTONE RD

ZIP codes

Day/night/Suite/Room

At FedEx location, print FedEx address here.

SI State FL ZIP 32399-6042

0699133611



8689 8046 7630

XH TLHA

32399
FL-US
TLH



emp# 576597 01JUN09 15:31

4a Express Package

☒ FedEx Priority Overnight
Next business morning. * First shipment will be delivered unless SATURDAY Delivery.

☐ FedEx Day
Second business day. * Third shipment will be delivered unless SATURDAY Delivery. FedEx Photos rate not.

4b Express Freight

☐ FedEx 10 Day Freight
Next business day. * First shipment will be delivered unless SATURDAY Delivery.

* Call for Confirmation.

5 Packaging

☐ FedEx Envelope*

6 Special Hand

☐ SATURDAY Delivery
Not available for FedEx Standard Overnight, FedEx First Overnight, or FedEx 2Day.
Does this shipment
One 1

☐ No ☐ Yes
As Shipped

Dangerous goods (includes)

7 Payment

☐ Sender
Account Bill in Section
I will be billed.

☒ Total Package

*Our liability is limited to:

8 Resident

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

☐ Address may require delivery. Fee applies.

☐ Signature required for delivery. Fee applies.

Net Date 1008-Pat #15279-C1964-2008 FedEx-PRINTED IN U.S.A.-SRS

Ex. US Airbill
Express

FedEx
Tracking
Number

8689 8046 7620

portion can be removed for Recipient's records

FedEx Tracking Number

868980467620

Phone

Dept./Floor/Suite/Room

State

ZIP

mal Billing Reference

Phone 888 248-8080

FLORIDA REPROCHEMISTRY SECTION

2600 WLA BESTONE RD

for P.O. boxes or P.O. ZIP codes

Dept./Floor/Suite/Room

Package be held at a specific FedEx location, print FedEx address here

LAHASSE

State

FL

ZIP

32399-8002

0879130611



8689 8046 7620

FedEx

TUE - 02 JUN A2
PRIORITY OVERNIGHT

TRK# 8689 8046 7620
0215

XH TLHA

32399
*FL-US
TLH



4a E

☒ Fed

☐ Fed

☐ Fed

4b Ex

☐ Fed

☐ Fed

5 Pat

☐ Fed

☐ Env

emp# 576997 01JUN09 15:31

6 Spe

☐ SAT

☐ Not av

☐ FedEx

☐ No

Dangerous good

7 Paym

☐ Sender

☐ Recd

Total Pay

Our liability is limited

8 Reside

☐ No Signe

☐ Required

☐ Package may

☐ without client

☐ signature for

Rev Date 10/06/01 #156279-01/04-2006 FedEx-PRINTED IN U.S.A.-SRS