

Nassau Mid West

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: NE-DIST

Requester: Jeremy M. ParrishField Report Prepared By: Jeremy Parrish

Project ID: SMP

Collected By: Jeremy ParrishSampling Agency: FDEP-NE

Location <u>19010063 Brandy Br. @ 121</u>		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>4/14/16</u> Time <u>900</u>		Eastern Central	Composite end Date _____ Time _____		Bottle Group(s) (See pg 2) <u>A</u>	
Field ID <u>98</u>		Matrix (type, e.g., Salt, Fresh, etc) <u>Fresh</u>		Diss. Oxygen <u>2.2</u>	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)			
STORET # <u>19010063</u>		Temp (C) <u>18.9</u>	pH <u>6.92</u>	Sample Depth <u>0.3</u>	☐ ft ☒ m	Sp. Conductance (umho/cm) <u>97</u>			
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) <u>0.05</u>	Comments						
Location <u>Cedar cr. @ 125</u>		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>4/14/16</u> Time <u>935</u>		Eastern Central	Composite end Date _____ Time _____		Bottle Group(s) <u>A</u>	
Field ID		Matrix (type, e.g., Salt, Fresh, etc) <u>Fresh</u>		Diss. Oxygen <u>5.06</u>	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)			
STORET # <u>64NE0003</u>		Temp (C) <u>18.8</u>	pH <u>7.05</u>	Sample Depth <u>0.3</u>	☐ ft ☒ m	Sp. Conductance (umho/cm) <u>57</u>			
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) <u>0.03</u>	Comments						
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____		Eastern Central	Composite end Date _____ Time _____		Bottle Group(s)	
Field ID		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)			
STORET #		Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)			
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments						
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____		Eastern Central	Composite end Date _____ Time _____		Bottle Group(s)	
Field ID		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)			
STORET #		Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)			
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments						

Relinquished By: <u>Jeremy Carr</u>	Date/Time <u>4/14/2016 @ 1:30</u>	Shipping Method	Number of Coolers Shipped:	Received By: <u>SK</u>	Date/Time <u>4-15-16/9:29</u>
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Group: A	Bottle Type:	P-1L	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab	2
	ALKALINITY						
	TURBIDITY						
	W-CL-IC						
	W-COLOR						
	W-F						
	W-SO4-IC						
	W-TDS						
	W-TSS						
Group: A	Bottle Type:	P-1L	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab	2
	BOD-UNIN						
Group: A	Bottle Type:	BP-1L	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab	2
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 2	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	2
	W-NH3						
	W-NO2NO3						
	W-S-A-TP						
	W-TKN						
	W-TOC						
Group: A	Bottle Type:	P-125ML	# of Bottles: 2	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	2
	W-PO4-F						

Date of Request: 14-APR-2016
 Created By: PARRISH_J On: 14-APR-2016
 Modified By: SWANSON_C On: 14-APR-2016
 Customer: NE-DIST
 Project: SMP
 Division:
 District: Northeast District
 Sampling Event: Nassau Mid West

Send Coolers To:

Phone: 904-256-1700
 8800 Baymeadows Way West

 Jacksonville, FL 32256-7577
 Attn: Jeremy Parrish

Program Module Number:
 Priority: 3
 Event Status: A
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 14-APR-2016
 Biology Request Reviewed By: SWANSON_C On: 14-APR-2016
 Sampling Kit Required: NO Ship on:
 Sampling Kit Shipped:
 Sampling Kit Packed By:
 Preservatives Needed: NO
 Date to Receive Samples: 14-APR-2016
 Received By:

Send Final Report To:

8800 Baymeadows Way West

 Jacksonville, FL 32256-7577
 Attn: Jeremy Parrish

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

Comments:

Bottle Group A (Water) With 2 Samples:

Bottle Type: P-1L	Number of Bottles: 2	Preserved With: ICE
ALKALINITY	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO ₃ /L
TURBIDITY	Template: DEFAULT	(EPA 180.1 Rev. 2.0) Turbidity in aqueous matrices
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
Color (true)		
W-F	Template: DEFAULT	(SM 4500 F-C-97) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)
W-SO ₄ -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
W-TSS	Template: DEFAULT	(SM 2540 D-97) Total Suspended Solids in aqueous matrices
Bottle Type: P-1L	Number of Bottles: 2	Preserved With: ICE
BOD-UNIN	Template: DEFAULT	(SM 5210 B) BOD, NOT nitrogen-inhibited
Bottle Type: BP-1L	Number of Bottles: 2	Preserved With: ICE
CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, phaeophytin and ratio by spectrophotometry
Bottle Type: P-500ML	Number of Bottles: 2	Preserved With: ICE And H ₂ SO ₄
W-NH ₃	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
W-NO ₂ NO ₃	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: 2	Preserved With: ICE-FLTR
W-PO ₄ -F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L

RQ-2016-04-11-57

Log-in Checklist

Shipping Method: FedexDate/Time of Receipt: 4-15-16/9:29

Cooler ID	Cooler Temperature*	No. Sample Containers in Cooler	Evidence Tape				Tracking # (fill out only if waybill copy is damaged)
			Present?		*Intact?		
			Yes	No	Yes	No	
Blue	0.4	10		☒			

*If the temperature of a cooler is above 6.0 °C (or above 10.0 °C for W-1-4-DIOX), or if Evidence Seal is damaged, identify the containers in the affected cooler(s) on back of this form.

****Note:** If "No" is checked in any of the fields below, fill out the back of this form with additional details (Field ID, Test IDs, etc.) and generate an NCR.

**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 (Blue dot on container)

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-AHERB-AA (-AHB-AA-R)			W-PCL-SQ (-R)			
W-BNA (-625, -R)			W-PDQUAT			
W-CARB-AA (-CAB-AA-R)			W-PESTNP-R			
W-ENDO-AA			W-PSCL-TQ			
W-GLYPH			W-PSNP-TQ			
W-NP-AA-SF			W-PST-CL-R			
W-PAH (-R)			W-TR-TQ			
W-PCB-R						

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

**Acid Preserved Samples: pH ≤ 2.0? Yes ☒ No ☐ NA ☐ Init: SK

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

Coolers Unpacked/Checked by: SK Date: 4-15-16 NCRs (Y/N)? N

Event ID: NE-DIST-2016-04-15-01 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

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_____ No_____

If no, were samples shipped on dry ice? Yes_____ No_____

FOR CLEAN LAB USE ONLY – Methyl Mercury Preservation Check:

Samples Preserved within 48 hours? Yes_____ No_____

Date and time samples preserved: _____

Additional Comments:

00335

01000

FedEx *NEW Package*
Express *US Airbill*

 FedEx Tracking Number **8996 2134 3850**
1 From This portion can be removed for Recipient's records.

 Date **4-14-2016** FedEx Tracking Number **899621343850**

 Sender's Name **A. Kalmbacher** Phone

 Company **FDEP / NE ROC**

 Address **8800 Bay Meadows Way W**

 City **Jacksonville** State **FL** ZIP **32256**
2 Your Internal Billing Reference

 To Recipient's Name **SAMPLE RECEIVING** Phone **850 245-8085**

 Company **FLORIDA DEP/CHEMISTRY SECTION**

 Address **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**

0447551769



8996 2134 3850

SPH2

 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?
☒ **No** ☐ **Yes** As per attached Shipper's Declaration. ☐ **Yes** Shipper's Declaration not required.

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

☐ **Dry Ice** Dry ice, 9 UN 1845 x kg ☐ **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 **1** Total Weight **99** lbs.

Credit Card Auth.

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

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