Request Number: RQ-2016-10-24-38

Tumblin Creek SCI

Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: NE-DIST

Project ID: SMP

Requester: Nicole Frederick

Field Report Prepared By: N. Frederick

Collected By: N. Frederick / J. Parrish

Sampling Agency: NE ROC

Location / Field ID / STORET # / Latitude / Longitude	Collection	Measurements	Bottle Group(s)
Location: field id G1NE0856 10312016	☐ Comp ☒ Grab; Collection (comp begin or grab) Date 10/31/16 Time 0955 (Eastern) Central; Composite end Date Time		Bottle Group(s) (See pg 2): A
Field ID: Tumblin Creek above 14th SCI	Matrix (type, e.g., Salt, Fresh, etc): Fresh	Diss. Oxygen 7.42 ☒ mg/L ☐ % sat; Total Res. Chlorine (mg/L)	
STORET #: storet ID GINE0856	Temp (C): 21.49; pH: 7.84	Sample Depth 0.1 ☐ ft ☒ m; Sp. Conductance (umho/cm): 363	
Latitude 29.63907 ☒ dd ☐ dms; Longitude 82.33837 ☒ dd ☐ dms	Salinity (ppt): 0.17	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	
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:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
				SK	11-1-16/10:15

Group: A Bottle Type: PJ-2L # of Bottles: 4 Preservative: Formalin Enter Number of Bottles Sent to Lab 2

MI-FW-QLDC

RQ-2016-10-24-38

Date of Request: 05-OCT-2016
Created By: FREDERIC_N On: 05-OCT-2016
Modified By: MATTHEWS_D On: 10-OCT-2016
Customer: NE-DIST
Project: SMP
Division:
District: Northeast District
Sampling Event: Tumblin Creek SCI

Send Coolers To:

Phone: 904-256-1700
8800 Baymeadows Way W
Suite B 200
Jacksonville, FL 32256-7577
Attn: Nicole Frederick

Send Final Report To:

8800 Baymeadows Way W
Suite B 200
Jacksonville, FL 32256-7577
Attn: Nicole Frederick

Program Module Number:
Priority: 3
Event Status: A
Criminal Investigation: NO
Chemistry Request Reviewed By:
Biology Request Reviewed By: MATTHEWS_D On: 10-OCT-2016
Sampling Kit Required: NO Ship on:
Sampling Kit Shipped:
Sampling Kit Packed By:
Preservatives Needed: NO
Date to Receive Samples: 24-OCT-2016
Received By:

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

Comments:

Bottle Group A (Biological) With 2 Samples:

Bottle Type: PJ-2L Number of Bottles: 4 Preserved With: Formalin
MI-FW-QLDC Template: DEFAULT (SOP-IZ06) No. Taxa of FW macroinverts, qual samp, 20 dipnets.

* - The laboratory is not NELAP certified for this analyte/method, or certification is not applicable.

2016-10-24-17

Log-in Checklist

RQ-2016-10-24-38626 (14 bottles)

Shipping Method: Fedex Date/Time of Receipt: 11-1-16/10:15

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	
Red	0.1	14 14		✓	✓		

*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: 11-1-16 NCRs (Y/N)? N

Event ID: NELSL-2016-11-01-02 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 – Total Mercury Preservation Check (W-HG-AF; W-HG-AF-F):

Samples preserved within 48 hours? Yes_____ No_____

Date and time samples preserved: _____

Additional Comments:

FedEx Express Package US Airbill

FedEx Tracking Number 8104 1261 6470

Form ID No. 0215 — Recipient's Copy

1 From

Date 10/31/16

Sender's Name Jeremy Parrish Phone 904 256 1700

Company FDEP

Address 8800 Baymeadows Way West Dept./Floor/Suite/Room

City JAX State FL ZIP 32256

2 Your Internal Billing Reference

3 To

Recipient's Name SAMPLE RECEIVING Phone 850 245-8085

Company FLORIDA DEP/CHEMISTRY SECTION

Address 2600 BLAIRSTONE RD Dept./Floor/Suite/Room

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City TALLAHASSEE State FL ZIP 32399-6542

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.

0124452242

8104 1261 6470

4 Express Package Service * To most locations.

Packages up to 150 lbs. For packages over 150 lbs., use the 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.
- [x] 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

- [ ] 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
- [x] Other

6 Special Handling and Delivery Signature Options Fees may apply. See the FedEx Service Guide.

- [ ] 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.
- [ ] Indirect Signature — If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only.

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 ____ x ____ kg

Restrictions apply for dangerous goods — see the current FedEx Service Guide.

- [ ] 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.
- [x] Recipient
- [ ] Third Party
- [ ] Credit Card
- [ ] Cash/Check

[redacted] 362

Total Packages 3 Total Weight ____ lbs. Credit Card Auth. ____

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

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