

Groover Branch / Glencoe Ditches

## Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: CEN-DIST

Requester: Michael Linger

Field Report Prepared By: Mike Linger

Project ID: SMP

Collected By: Mike Linger, Mike Drannan

Sampling Agency: FDEP

CE-ROC

|          |                                                             |  |                                                             |  |                                                                           |                                                             |                                                                            |                                  |                               |
|----------|-------------------------------------------------------------|--|-------------------------------------------------------------|--|---------------------------------------------------------------------------|-------------------------------------------------------------|----------------------------------------------------------------------------|----------------------------------|-------------------------------|
| Location | Groover Branch @ Airport Road Bridge                        |  | G5CE0040<br>Field ID ↑<br>STORET ↓<br>27010580              |  | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date 10/26/16 Time 10:33 | Eastern<br>Central                                                         | Composite end<br>Date Time       | Bottle Group(s)<br>(See pg 2) |
| Field ID |                                                             |  |                                                             |  | Matrix (type, e.g., Salt, Fresh, etc)                                     | Diss. Oxygen<br>2.2                                         | <input checked="" type="checkbox"/> mg/L<br><input type="checkbox"/> % sat | Total Res. Chlorine<br>(mg/L)    | A                             |
| STORET   | Date: 10/26/2016<br>RQ-2016-10-24-77                        |  |                                                             |  | Temp (C) 19.5                                                             | pH 6.6                                                      | Sample Depth 0.2                                                           | Sp. Conductance<br>(umho/cm) 398 |                               |
| Latitude | <input type="checkbox"/> dd<br><input type="checkbox"/> dms |  | <input type="checkbox"/> dd<br><input type="checkbox"/> dms |  | Salinity (ppt)                                                            | Comments                                                    |                                                                            |                                  |                               |
| Location | Glencoe Ditches @ 225m South of Turnbull Bay Rd.            |  | G5CE0077<br>Field ID ↑<br>STORET ↓<br>27010117              |  | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date 10/26/16 Time 12:08 | Eastern<br>Central                                                         | Composite end<br>Date Time       | Bottle Group(s)               |
| Field ID |                                                             |  |                                                             |  | Matrix (type, e.g., Salt, Fresh, etc)                                     | Diss. Oxygen<br>4.3                                         | <input checked="" type="checkbox"/> mg/L<br><input type="checkbox"/> % sat | Total Res. Chlorine<br>(mg/L)    | A                             |
| STORET   | Date: 10/26/16<br>RQ-2016-10-24-77                          |  |                                                             |  | Temp (C) 23.0                                                             | pH 7.0                                                      | Sample Depth 0.3                                                           | Sp. Conductance<br>(umho/cm) 862 |                               |
| Latitude | <input type="checkbox"/> dd<br><input type="checkbox"/> dms |  | <input type="checkbox"/> dd<br><input type="checkbox"/> dms |  | Salinity (ppt)                                                            | Comments                                                    |                                                                            |                                  |                               |
| Location |                                                             |  |                                                             |  | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab            | Collection (comp begin or grab)<br>Date Time                | Eastern<br>Central                                                         | Composite end<br>Date Time       | Bottle Group(s)               |
| Field ID |                                                             |  |                                                             |  | Matrix (type, e.g., Salt, Fresh, etc)                                     | Diss. Oxygen                                                | <input type="checkbox"/> mg/L<br><input type="checkbox"/> % sat            | Total Res. Chlorine<br>(mg/L)    |                               |
| STORET # |                                                             |  |                                                             |  | Temp (C)                                                                  | pH                                                          | Sample Depth                                                               | Sp. Conductance<br>(umho/cm)     |                               |
| Latitude | <input type="checkbox"/> dd<br><input type="checkbox"/> dms |  | <input type="checkbox"/> dd<br><input type="checkbox"/> dms |  | Salinity (ppt)                                                            | Comments                                                    |                                                                            |                                  |                               |
| Location |                                                             |  |                                                             |  | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab            | Collection (comp begin or grab)<br>Date Time                | Eastern<br>Central                                                         | Composite end<br>Date Time       | Bottle Group(s)               |
| Field ID |                                                             |  |                                                             |  | Matrix (type, e.g., Salt, Fresh, etc)                                     | Diss. Oxygen                                                | <input type="checkbox"/> mg/L<br><input type="checkbox"/> % sat            | Total Res. Chlorine<br>(mg/L)    |                               |
| STORET # |                                                             |  |                                                             |  | Temp (C)                                                                  | pH                                                          | Sample Depth                                                               | Sp. Conductance<br>(umho/cm)     |                               |
| Latitude | <input type="checkbox"/> dd<br><input type="checkbox"/> dms |  | <input type="checkbox"/> dd<br><input type="checkbox"/> dms |  | Salinity (ppt)                                                            | Comments                                                    |                                                                            |                                  |                               |

|                      |                             |                       |                              |                 |                          |
|----------------------|-----------------------------|-----------------------|------------------------------|-----------------|--------------------------|
| Relinquished By: MKL | Date/Time 14:00<br>10/26/16 | Shipping Method FedEx | Number of Coolers Shipped: 1 | Received By: SK | Date/Time 10-27-16/10:30 |
|----------------------|-----------------------------|-----------------------|------------------------------|-----------------|--------------------------|

|          |              |         |                 |               |               |                                       |
|----------|--------------|---------|-----------------|---------------|---------------|---------------------------------------|
| 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: | 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      |         |                 |               |               |                                       |

Printed: 10/27/2016 10:52:15 AM

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Date of Request: 26-OCT-2016  
 Created By: LINGER\_M On: 26-OCT-2016  
 Modified By: WATTS\_J On: 26-OCT-2016  
 Customer: CEN-DIST  
 Project: SMP  
 Division:  
 District: Central District  
 Sampling Event: Groover Branch/Glencoe Ditches

**Send Coolers To:**

Phone: 407-897-4180  
 FL Dept. of Environmental Protection  
 3319 Maguire Blvd., Suite 232  
 Orlando, FL 32803-3767  
 Attn: Mike Linger

Program Module Number: 1306  
 Priority: 3  
 Event Status: P  
 Criminal Investigation: NO  
 Chemistry Request Reviewed By: WATTS\_J On: 26-OCT-2016  
 Biology Request Reviewed By:  
 Sampling Kit Required: NO Ship on:  
 Sampling Kit Shipped:  
 Sampling Kit Packed By:  
 Preservatives Needed: NO  
 Date to Receive Samples: 26-OCT-2016  
 Received By:

**Send Final Report To:**

FL Dept. of Environmental Protection  
 3319 Maguire Blvd., Suite 232  
 Orlando, FL 32803-3767  
 Attn: Mike Linger

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 <sub>3</sub> /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 <sub>4</sub> -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: 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 <sub>2</sub> SO <sub>4</sub>                                                             |
| W-NH <sub>3</sub>                 | Template: DEFAULT    | (EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L                                                         |
| W-NO <sub>2</sub> NO <sub>3</sub> | 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 <sub>4</sub> -F              | Template: DEFAULT    | (EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L                           |

RQ-2016-1024-77

## Log-in Checklist

Shipping Method: FedexDate/Time of Receipt: 10/27/16/10:30

| Cooler ID  | Cooler Temperature* | No. Sample Containers in Cooler | Evidence Tape   |    | Tracking # (fill out only if waybill copy is damaged) |    |
|------------|---------------------|---------------------------------|-----------------|----|-------------------------------------------------------|----|
|            |                     |                                 | Present?<br>Yes | No | *Intact?<br>Yes                                       | No |
| <u>Red</u> | <u>2.1</u>          | <u>8</u>                        |                 |    | <input checked="" type="checkbox"/>                   |    |
|            |                     |                                 |                 |    |                                                       |    |
|            |                     |                                 |                 |    |                                                       |    |
|            |                     |                                 |                 |    |                                                       |    |
|            |                     |                                 |                 |    |                                                       |    |
|            |                     |                                 |                 |    |                                                       |    |

\*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: 10-27-16

NCRs (Y/N)? N

Event ID: CEN-DIST-2016-10-27-01

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 – 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:**

01000

**FedEx**  
ExpressPackage  
US AirbillFedEx  
Tracking  
Number

8100 1917 7050

Form  
ID No.

0215

Recipient's Copy

## 1 From

Date 10/26/16

Sender's  
Name

Mike Linger

Phone 407 897-4100

Company

FDEP

Address

3319 Maguire Blvd

Dept./Floor/Suite/Room

City

Orlando

State

FL

ZIP

32803

## 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

Address

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

City

TALLAHASSEE

State

FL

ZIP

32399

0123448864



8100 1917 7050

## 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.☒ 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☒ 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, 3 UN 1845 \_\_\_\_\_ x \_\_\_\_\_ kg☐ Cargo Aircraft Only

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

## 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

Total Weight

Credit Card Auth.

1 50 lbs.

\*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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