

SMP: Lake Letta

Central Laboratory Submittal Form

last revised Nov 10, 2015

Customer: SO-DIST

Requester: Benjamin Paswater

Field Report Prepared By:

Project ID: SMP

Collected By:

Sampling Agency:

Location		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>3/7/16</u> Time <u>1150</u>		☒ Eastern ☐ Central	Composite end Date _____ Time _____		Bottle Group(s) (See pg 2)
RQ-2016-03-07-22 3/7/2016 1813C Lake Letta @ Center		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen <u>8.4</u> <u>93%</u>	☒ mg/L ☒ % sat	Total Res. Chlorine (mg/L)		A
SD030716-5 Field ID STORET 26010555*		Temp (C) <u>20.3</u>	pH <u>6.5</u>	Sample Depth <u>0.3</u>	☐ ft ☒ m	Sp. Conductance (umho/cm) <u>168</u>		
☐ 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)		
☐ 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)		
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Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____		☐ Eastern ☐ Central	Composite end Date _____ Time _____		Bottle Group(s)
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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)		
☐ dd ☐ dms		Salinity (ppt)	Comments					

Relinquished By:	Date/Time	Shipping Method	Received By:	Date/Time	Relinquished By:	Date/Time	Received By:	Date/Time
<i>[Signature]</i>	<u>3/7/16</u>	<u>FedEx</u>	<i>[Signature]</i>	<u>03-08-16</u>				
				<u>09:45</u>				

Group: A	Bottle Type:	P-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	ALKALINITY						
	TURBIDITY						
	W-CL-IC						
	W-COLOR						
	W-F						
	W-SO4-IC						
	W-TDS						
	W-TSS						
Group: A	Bottle Type:	P-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	BOD-UNIN						
Group: A	Bottle Type:	BP-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	CHLSUITE-W						
Group: A	Bottle Type:	BG-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	W-AHERB-AA						
	W-GLYPH						
	W-UHERB-AA						
Group: A	Bottle Type:	P-500ML	# of Bottles: 1	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	1
	W-NH3						
	W-NO2NO3						
	W-S-A-TP						
	W-TKN						
	W-TOC						
Group: A	Bottle Type:	BG-1L	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
	W-PC-AA-SF						
Group: A	Bottle Type:	P-125ML	# of Bottles: 1	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	1
	W-PO4-F						
Group: A	Bottle Type:	BG-1L	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
	W-PSNP-TQ						
Group: A	Bottle Type:	BG-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	W-PYR-AA-R						

Date of Request: 10-FEB-2016
 Created By: PASWATER_B On: 10-FEB-2016
 Modified By: WATTS_J On: 18-FEB-2016
 Customer: SO-DIST
 Project: SMP
 Division: Division of Environmental Assessment and Restoration
 District: South District
 Sampling Event: SMP: Lake Letta

Send Coolers To:

Phone: 239-332-6975 SC 748-6975
 FLDEP South District Office
 2295 Victoria Ave. Suite 364
 Fort Myers, FL 33901
 Attn: Ben Paswater

Program Module Number:
 Priority: 3
 Event Status: R
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 18-FEB-2016
 Biology Request Reviewed By: SWANSON_C On: 12-FEB-2016
 Sampling Kit Required: YES Ship on: 26-FEB-2016
 Sampling Kit Shipped: YES On: 23-FEB-2016
 Sampling Kit Packed By: LASHLEY_C
 Preservatives Needed: NO
 Date to Receive Samples: 07-MAR-2016
 Received By: SHAIK_A On: 08-MAR-2016

Send Final Report To:

FLDEP South District Office
 2295 Victoria Ave. Suite 364
 Fort Myers, FL 33901
 Attn: Ben Paswater

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

Comments: SMP: Lake Letta

Bottle Group A (Water) With 1 Samples:

Bottle Type: P-1L	Number of Bottles: 1	Preserved With: ICE
ALKALINITY	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO3/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-SO4-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: 1	Preserved With: ICE
BOD-UNIN	Template: DEFAULT	(SM 5210 B) BOD, NOT nitrogen-inhibited
Bottle Type: BP-1L	Number of Bottles: 1	Preserved With: ICE
CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, phaeophytin and ratio by spectrophotometry
Bottle Type: BG-1L	Number of Bottles: 1	Preserved With: ICE
W-AHERB-AA	Template: DEFAULT	(USGS O-2060-01) Chlorinated (phenoxy acid) herbicides in water matrices by HPLC/MS/MS
W-GLYPH	Template: DEFAULT	(EPA 8321B) Glyphosate in water matrices by HPLC/MS/MS
W-UHERB-AA	Template: DEFAULT	(USGS O-2060-01) Urea herbicides and other chemicals in water matrices by HPLC/MS/MS
Bottle Type: P-500ML	Number of Bottles: 1	Preserved With: ICE And H2SO4
W-NH3	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
W-NO2NO3	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: BG-1L	Number of Bottles: 4	Preserved With: ICE
W-PC-AA-SF	Template:	(DEP SOP: GC-011-5 (based on EPA 608 and 617)) Organochlorine pesticides (low levels) in water matrices by GC/ECD.

Bottle Group A (Water) With 1 Samples:

Bottle Type: P-125ML	Number of Bottles: 1	Preserved With: ICE-FLTR
W-PO4-F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L
Bottle Type: BG-1L	Number of Bottles: 4	Preserved With: ICE
W-PSNP-TQ	Template:	(EPA 8270D) Organonitrogen and phosphorus pesticides (ultra trace level) in water matrices by GC/MS/MS
Bottle Type: BG-1L	Number of Bottles: 1	Preserved With: ICE
W-PYR-AA-R	Template: DEFAULT	(EPA 8321B) Pyraclostrobin in water matrices by HPLC/MS/MS

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

Log-in Checklist

RQ- 2016-03-07-22

Shipping Method: Fed Exp

Date/Time of Receipt: 03-08-16/9:45

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	1.7C	5		☒			
Red	0.8C	4		☒			
Red	1.1C	6		☒			

*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: ADP

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

Coolers Unpacked/Checked by: ADP Date: 3-8-16 NCRs (Y/N)? 1

Event ID: SMP: Lake Letta NCR #

SO-DIST-2016-03-08-02 (SMP)
Date Received: 08-MAR-2016 09:45

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:

3/7/16
Der's ne Ben Phone 317 269 5236

pany
ress
State ZIP

Internal Billing Reference

ipient's ne SAMPLE RECEIVING Phone 850 245-8085

pany FLORIDA DEP/CHEMISTRY SECTION

ress 2600 BLAIRSTONE RD
annot deliver to P.O. boxes or P.O. ZIP codes.

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

TALLAHASSEE State FL ZIP 32399

0121555852



8094 7803 2426

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
☒ FedEx Priority Overnight
☐ FedEx Standard Overnight

2 or 3 Business Days
☐ FedEx 2Day A.M.
☐ FedEx 2Day
☐ FedEx Express Saver

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
☐ No Signature Required
☐ Direct Signature
☐ Indirect Signature
☒ Does this shipment contain dangerous goods?
☒ No ☐ Yes ☐ Yes ☐ Dry Ice ☐ Cargo Aircraft Only

7 Payment Bill to:
Sender ☐ Recipient ☒ Third Party ☐ Credit Card ☐ Cash/Check
Total Packages Total Weight
611

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3/7/16
Der's ne Ben Phone 317 289 5236

pany
ress
State ZIP

Internal Billing Reference

ipient's ne SAMPLE RECEIVING Phone 850 245-8085

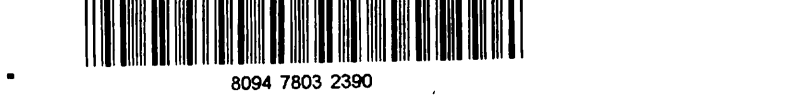
pany FLORIDA DEP/CHEMISTRY SECTION

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TALLAHASSEE State FL ZIP 32399

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Next Business Day
☐ FedEx First Overnight
☒ FedEx Priority Overnight
☐ FedEx Standard Overnight

2 or 3 Business Days
☐ FedEx 2Day A.M.
☐ FedEx 2Day
☐ FedEx Express Saver

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
☐ No Signature Required
☐ Direct Signature
☐ Indirect Signature
☒ Does this shipment contain dangerous goods?
☒ No ☐ Yes ☐ Yes ☐ Dry Ice ☐ Cargo Aircraft Only

7 Payment Bill to:
Sender ☐ Recipient ☒ Third Party ☐ Credit Card ☐ Cash/Check
Total Packages Total Weight
611

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05809015

FedEx
Express

 Package
US Airbill

 FedEx
Tracking
Number

8094 7803 2415

Form
ID No.

0215

MUR3

1 From [REDACTED]
 Date 3/7/16
 Sender's Name Ban Phone 317 282 5236
 Company DEP
 Address 2293 Victoria
 City FL Mgrs State FL ZIP 33401

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

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

 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.
☐

0121555852



8094 7803 2415

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?

- ☒ No ☐ Yes ☐ Yes
One box must be checked. As per attached
Shipper's Declaration. Shipper's Declaration
not required.

- ☐ Dry Ice
Dry Ice, 9 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 6 Total Weight 6.2 lbs. Credit Card Auth.

*Our liability is limited to USD100 unless you declare a higher value. See the current FedEx Service Guide for details.

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