

SMP: Bobcat Cr, Unnamed Ditches

## Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: SO-DIST

Requester: Benjamin Paswater

Field Report Prepared By:

Project ID: SMP

Collected By:

Ben Paswater, Dan Berger, Chris Link

Sampling Agency:

Ben Paswater  
FDEP South

|                                                                               |  |                                                                           |                                                         |                         |                                                                                       |                                  |
|-------------------------------------------------------------------------------|--|---------------------------------------------------------------------------|---------------------------------------------------------|-------------------------|---------------------------------------------------------------------------------------|----------------------------------|
| Location                                                                      |  | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date 5/3/16 Time 930 | Eastern<br>Central      | Composite end<br>Date Time                                                            | Bottle<br>Group(s)<br>(See pg 2) |
| RQ-2016-04-25-05<br>5/3/2016<br>WBID 2028<br>2028 Site 3                      |  | Matrix (type, e.g., Salt, Fresh, etc)                                     |                                                         | Diss. Oxygen<br>5.2 62% | <input checked="" type="checkbox"/> mg/L<br><input checked="" type="checkbox"/> % sat | Total Res. Chlorine<br>(mg/L)    |
| G3SD050316-1<br>Field ID<br>STORET<br>25020580FTM                             |  | Temp<br>(C) 24.0                                                          | pH 6.2                                                  | Sample<br>Depth 0.3     | <input type="checkbox"/> ft<br><input checked="" type="checkbox"/> m                  | Sp. Conductance<br>(umho/cm) 325 |
| <input type="checkbox"/> dd<br><input type="checkbox"/> dms                   |  | Salinity<br>(ppt)                                                         | Comments dry                                            |                         |                                                                                       |                                  |
| 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<br>Group(s)               |
| RQ-2016-04-25-05<br>5/3/2016<br>WBID 2028<br>2028 Site 1                      |  | 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)    |
| G3SD050316-2<br>Field ID<br>STORET<br>25020578FTM                             |  | Temp<br>(C)                                                               | pH                                                      | Sample<br>Depth         | <input type="checkbox"/> ft<br><input type="checkbox"/> m                             | Sp. Conductance<br>(umho/cm)     |
| <input type="checkbox"/> dd<br><input type="checkbox"/> dms                   |  | Salinity<br>(ppt)                                                         | Comments dry                                            |                         |                                                                                       |                                  |
| Location                                                                      |  | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date 5/3/16 Time     | Eastern<br>Central      | Composite end<br>Date Time                                                            | Bottle<br>Group(s)               |
| RQ-2016-04-25-05<br>5/3/2016<br>WBID 2033<br>Bobcat Creek in<br>Preserve East |  | 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)    |
| G3SD050316-3<br>Field ID<br>STORET<br>PEACRV0012FTM                           |  | Temp<br>(C)                                                               | pH                                                      | Sample<br>Depth         | <input type="checkbox"/> ft<br><input type="checkbox"/> m                             | Sp. Conductance<br>(umho/cm)     |
| <input type="checkbox"/> dd<br><input type="checkbox"/> dms                   |  | Salinity<br>(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<br>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<br>(C)                                                               | pH                                                      | Sample<br>Depth         | <input type="checkbox"/> ft<br><input type="checkbox"/> m                             | Sp. Conductance<br>(umho/cm)     |
| Latitude<br><input type="checkbox"/> dd<br><input type="checkbox"/> dms       |  | Longitude<br><input type="checkbox"/> dd<br><input type="checkbox"/> dms  | Salinity<br>(ppt)                                       | Comments                |                                                                                       |                                  |

|                                  |                          |                           |                                 |                    |                          |
|----------------------------------|--------------------------|---------------------------|---------------------------------|--------------------|--------------------------|
| Relinquished By:<br>Ben Paswater | Date/Time<br>5/3/16 11am | Shipping Method<br>Fed Ex | Number of Coolers Shipped:<br>1 | Received By:<br>SK | Date/Time<br>5-4-16/9:33 |
|----------------------------------|--------------------------|---------------------------|---------------------------------|--------------------|--------------------------|

|            |                      |                 |                             |                                     |   |
|------------|----------------------|-----------------|-----------------------------|-------------------------------------|---|
| Group: A   | Bottle Type: P-1L    | # of Bottles: 3 | 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: 3 | Preservative: ICE           | Enter Number of Bottles Sent to Lab | 1 |
| BOD-UNIN   |                      |                 |                             |                                     |   |
| Group: A   | Bottle Type: BP-1L   | # of Bottles: 3 | Preservative: ICE           | Enter Number of Bottles Sent to Lab | 1 |
| CHLSUITE-W |                      |                 |                             |                                     |   |
| Group: A   | Bottle Type: P-500ML | # of Bottles: 3 | 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: P-125ML | # of Bottles: 3 | Preservative: ICE-FLTR      | Enter Number of Bottles Sent to Lab | 1 |
| W-PO4-F    |                      |                 |                             |                                     |   |

Printed: 5/4/2016 11:32:48 AM

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Date of Request: 08-MAR-2016  
 Created By: PASWATER\_B On: 08-MAR-2016  
 Modified By: WATTS\_J On: 31-MAR-2016  
 Customer: SO-DIST  
 Project: SMP  
 Division: Division of Environmental Assessment and Restoration  
 District: South District  
 Sampling Event: SMP: Bobcat Cr, Unnamed Ditches

**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: S  
 Criminal Investigation: NO  
 Chemistry Request Reviewed By: WATTS\_J On: 31-MAR-2016  
 Biology Request Reviewed By: SWANSON\_C On: 30-MAR-2016  
 Sampling Kit Required: YES Ship on: 15-APR-2016  
 Sampling Kit Shipped: YES On: 15-APR-2016  
 Sampling Kit Packed By: LASHLEY\_C  
 Preservatives Needed: NO  
 Date to Receive Samples: 25-APR-2016  
 Received By:

**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: Bobcat Cr, Unnamed Ditches

**Bottle Group A (Water) With 3 Samples:**

|                                   |                      |                                                                                                                    |
|-----------------------------------|----------------------|--------------------------------------------------------------------------------------------------------------------|
| Bottle Type: P-1L                 | Number of Bottles: 3 | 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: P-1L                 | Number of Bottles: 3 | Preserved With: ICE                                                                                                |
| BOD-UNIN                          | Template: DEFAULT    | (SM 5210 B) BOD, NOT nitrogen-inhibited                                                                            |
| Bottle Type: BP-1L                | Number of Bottles: 3 | 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: 3 | 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: 3 | 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- 2016-05-25-05

## Log-in Checklist

Shipping Method: FedexDate/Time of Receipt: 5-4-16/9:33

| 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 |                                                       |
| <u>Red</u> | <u>1.9</u>          | <u>4</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: 5-4-16

NCRs (Y/N)? N

Event ID: SO-DIST-2016-05-04-01

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:**



Package  
US Airbill

FedEx  
Tracking  
Number

8099 4719 4936

From 5/3/16  
To  
Sender's name Ben Piskunov Phone 317 289 5236  
Company FIDEP  
Address 2293 Victoria Ave.  
City Ft. Myers State FL ZIP 33901  
Our Internal Billing Reference

Recipient's name SAMPLE RECEIVING Phone 850 245-8085  
Company FLORIDA DEP/CHEMISTRY SECTION  
Address 2600 BLAIRSTONE RD  
Dept./Floor/Suite/Room  
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.  
Address  
is this line for the HOLD location address or for continuation of your shipping address.  
City TALLAHASSEE State FL ZIP 32399



8099 4719 4936

0122643602

Form ID No. 0215  
Recipient's Copy

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 Day

- ☐ 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  
One box must be checked. As per attached Shipper's Declaration. Yes Shipper's Declaration not required.
- ☐ Dry Ice  
Dry Ice, 9 UN 1845 \_\_\_\_\_ 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 1 Total Weight 7.5 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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