

LVI

## Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: NW-DIST

Requester: Michael King

Field Report Prepared By: F. Butera

Project ID: SMP

Collected By: Rick Abad, Frank Butera

Sampling Agency: DEP-NWROC

|          |                                                                                        |  |                                                             |                                                                           |                                                             |                                                                            |                                     |                               |
|----------|----------------------------------------------------------------------------------------|--|-------------------------------------------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------|----------------------------------------------------------------------------|-------------------------------------|-------------------------------|
| Location | Location: Bass Lk<br>Drainage Mooney Dr Head<br>RQ-2016-08-01-48<br>Date:<br>Time: CST |  | G3NW0097<br>Field ID ↑<br>STORET ↓<br>3201BJ10              | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date 8-9-2016 Time 12:40 | Eastern<br>Central                                                         | Composite end<br>Date Time          | Bottle Group(s)<br>(See pg 2) |
| Field ID |                                                                                        |  |                                                             | Matrix (type, e.g., Salt, Fresh, etc)<br>FRESH                            | Diss. Oxygen<br>3.2                                         | <input checked="" type="checkbox"/> mg/L<br><input type="checkbox"/> % sat | Total Res. Chlorine<br>(mg/L)       | A                             |
| STORET # |                                                                                        |  |                                                             | Temp (C)<br>27.3                                                          | pH<br>6.1                                                   | Sample Depth<br>0.4                                                        | Sp. Conductance<br>(umho/cm)<br>162 |                               |
| Latitude | <input type="checkbox"/> dd<br><input type="checkbox"/> dms                            |  | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Salinity (ppt)<br>0.1                                                     | 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                                                    |                                                                            |                                     |                               |
| 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: FB | Date/Time: 8/9/2016 | Shipping Method: Fed Ex | Number of Coolers Shipped: 1 | Received By: SK | Date/Time: 8-10-16/9/14S |
|---------------------|---------------------|-------------------------|------------------------------|-----------------|--------------------------|

|          |              |         |                 |               |               |                                     |          |
|----------|--------------|---------|-----------------|---------------|---------------|-------------------------------------|----------|
| Group: A | Bottle Type: | P-1L    | # of Bottles: 1 | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | <u>1</u> |
|          | ALKALINITY   |         |                 |               |               |                                     |          |
|          | TURBIDITY    |         |                 |               |               |                                     |          |
|          | W-CL-IC      |         |                 |               |               |                                     |          |
|          | W-COLOR      |         |                 |               |               |                                     |          |
|          | W-F          |         |                 |               |               |                                     |          |
|          | W-SO4-IC     |         |                 |               |               |                                     |          |
|          | W-TDS        |         |                 |               |               |                                     |          |
|          | W-TSS        |         |                 |               |               |                                     |          |
| Group: A | Bottle Type: | BP-1L   | # of Bottles: 1 | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | <u>1</u> |
|          | CHLSUITE-W   |         |                 |               |               |                                     |          |
| Group: A | Bottle Type: | P-500ML | # of Bottles: 1 | Preservative: | ICE And H2SO4 | Enter Number of Bottles Sent to Lab | <u>1</u> |
|          | W-NH3        |         |                 |               |               |                                     |          |
|          | W-NO2NO3     |         |                 |               |               |                                     |          |
|          | W-S-A-TP     |         |                 |               |               |                                     |          |
|          | W-TKN        |         |                 |               |               |                                     |          |
|          | W-TOC        |         |                 |               |               |                                     |          |
| Group: A | Bottle Type: | P-125ML | # of Bottles: 1 | Preservative: | ICE-FLTR      | Enter Number of Bottles Sent to Lab | <u>1</u> |
|          | W-PO4-F      |         |                 |               |               |                                     |          |

Date of Request: 26-JUL-2016  
 Created By: KING\_M On: 26-JUL-2016  
 Modified By: WATTS\_J On: 28-JUL-2016  
 Customer: NW-DIST  
 Project: SMP  
 Division: Division of Environmental Assessment and Restoration  
 District: Northwest ROC  
 Sampling Event: LVI

**Send Coolers To:**

Phone: SC-695-0605  
 160 W Government st  
 Suite 208A  
 Pensacola, FL 32502-5794  
 Attn: Michael King

Program Module Number: 1306  
 Priority: 3  
 Event Status: R  
 Criminal Investigation: NO  
 Chemistry Request Reviewed By: WATTS\_J On: 28-JUL-2016  
 Biology Request Reviewed By: WATTS\_J On: 28-JUL-2016  
 Sampling Kit Required: NO Ship on:  
 Sampling Kit Shipped:  
 Sampling Kit Packed By:  
 Preservatives Needed: NO  
 Date to Receive Samples: 01-AUG-2016  
 Received By: KITCHEN\_S On: 10-AUG-2016

**Send Final Report To:**

160 W Government st  
 Suite 208A  
 Pensacola, FL 32502-5794  
 Attn: Michael King

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

**Comments:****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: 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: 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: 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                           |

# Log-in Checklist

RQ- 2018-08-01-48

Shipping Method: Fedex

Date/Time of Receipt: 8-10-16/9:45

| 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            |   |          |  |                                                       |
| Red       | 0.8                 | 4                               |               | ✓ |          |  |                                                       |
|           |                     |                                 |               |   |          |  |                                                       |
|           |                     |                                 |               |   |          |  |                                                       |
|           |                     |                                 |               |   |          |  |                                                       |
|           |                     |                                 |               |   |          |  |                                                       |
|           |                     |                                 |               |   |          |  |                                                       |

\*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:** 8-10-16 **NCRs (Y/N)?** N  
**Event ID:** NW-DIST-2016-0810-01 **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:**

1000

**FedEx** NEW Package  
Express US Airbill
FedEx  
Tracking  
Number

8768 6113 7434

## 1 From This portion can be removed for Recipient's records.

Date 8/9/2016

FedEx  
Tracking Number

876861137434

Sender's  
Name

FRANK BUTERA

Phone

854 595 8340

Company

FL DEP - NW ROC

Address

160 W. Governmental St

City

Pensacola

State

FL

ZIP

32502

## 2 Your Internal Billing Reference

## 3 To

Recipient's  
Name

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

32399-6542



8768 6113 7434

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?

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

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

Total Weight

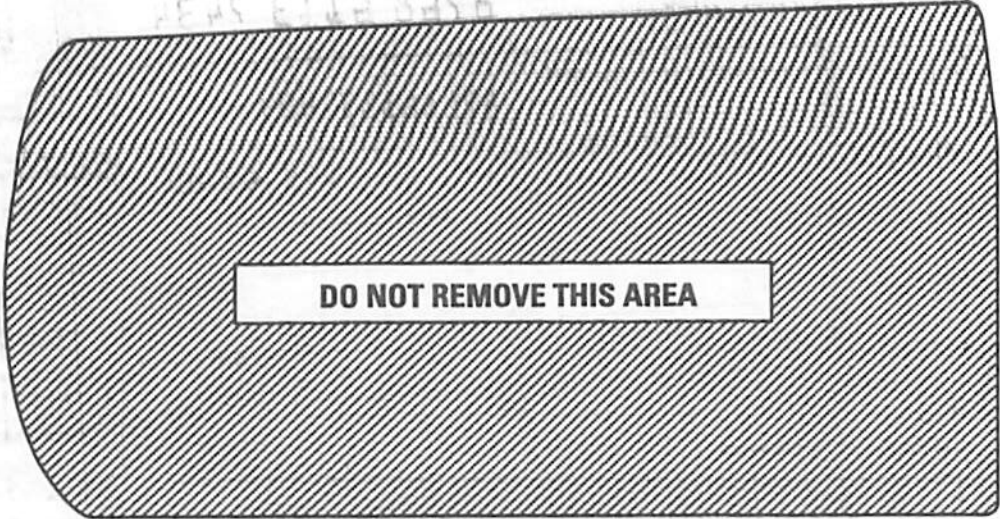
6 lb

Credit Card Auth.

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

Rev. Date 11/10 • Part #163134 • ©1994-2010 FedEx • PRINTED IN U.S.A. SRS

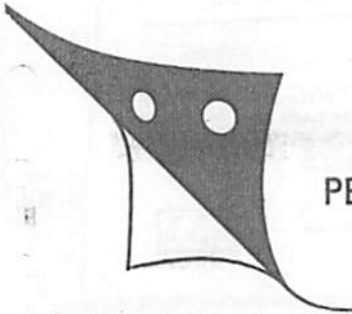
fedex.com 1800.GoFedEx 1800.463.3339



**DO NOT REMOVE THIS AREA**

**Peel and Stick FedEx Express Package US Airbill**

1. Complete front page of the Airbill.
2. Retain "Sender's Copy" for your records.
3. Remove label backing.
4. Adhere Airbill to front of package.  
Please DO NOT remove "FedEx Copy."



**PEEL FROM THIS CORNER.**