

Florida Department of Environmental Protection
Central Laboratory Submittal Form

Customer: SW-DIST

Project ID: SMP

Requester: Judy Ashton

Field Report Prepared By: Ashley Sammons

Collected By: Ashley Sammons

Sampling Agency: FDEP

RQ-2016-02-08-56 Date: 02/10/16 Time:		G4SW0094 64SU0094		Latitude Longitude		STORET #	
Matrix (type, e.g., Salt, Fresh, etc) Fresh		Date 2/10/16 Time 1100		Collection (comp begin or grab) Date 2/10/16 Time 1100		Composite end Date	
Temp (C) 10.0 pH 5.8		Diss. Oxygen 8.7 % sat 70		Total Res. Chlorine (mg/L) 91		Bottle Group(s) A	
Salinity (ppt) 0.04 Comments Flow rate = 0.25 m/s							
RQ-2016-02-08-56 Date: 02/10/16 Time:		G4SW0093 64SU0093		Latitude Longitude		STORET #	
Matrix (type, e.g., Salt, Fresh, etc) Fresh		Date 2/10/16 Time 1120		Collection (comp begin or grab) Date 2/10/16 Time 1120		Composite end Date	
Temp (C) 10.9 pH 5.6		Diss. Oxygen 9.1 % sat 81		Total Res. Chlorine (mg/L) 91		Bottle Group(s) A	
Salinity (ppt) 0.04 Comments Flow rate = 0.25 m/s							
RQ-2016-02-08-56 Date: 02/10/16 Time:		G5SW0115 65SU0115		Latitude Longitude		STORET #	
Matrix (type, e.g., Salt, Fresh, etc) Fresh		Date 2/10/16 Time 1335		Collection (comp begin or grab) Date 2/10/16 Time 1335		Composite end Date	
Temp (C) 15.3 pH 6.8		Diss. Oxygen 8.7 % sat 80		Total Res. Chlorine (mg/L) 109		Bottle Group(s) A	
Salinity (ppt) 0.04 Comments							
RQ-2016-02-08-56 Date: 02/10/16 Time:		G5SW0116 65SU0116		Latitude Longitude		STORET #	
Matrix (type, e.g., Salt, Fresh, etc) Fresh		Date 2/10/16 Time 1345		Collection (comp begin or grab) Date 2/10/16 Time 1345		Composite end Date	
Temp (C) 15.9 pH 6.7		Diss. Oxygen 8.1 % sat 83		Total Res. Chlorine (mg/L) 170		Bottle Group(s) A	
Salinity (ppt) 0.04 Comments							

Relinquished By: Judy Ashton	Date/Time: 2/10/16 5:00	Shipping Method: FedEx	Received By:	Date/Time:
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Florida Department of Environmental Protection

Central Laboratory Sample Submittal Form

Request Number: ~~BO 2014-12-04-20~~

VADIS T-400, T-404A, T-406D, T-500A, T-506B, T-519Z

Requester:

Field Report Prepared By:

Customer: SW-DIST

Project ID: SMP

PWAS:

Collected By:

Send Final Report To:

Sampling Agency:

Lab ID *	RQ-2016-02-08-56 Date: 02/10/16 Time:		 G5SW0113 G5SW0113		Temp 15.9 °C pH 6.9		☐ Comp ☒ Grab Total Res Chlorine (mg/L) 9.3 mg/L Sample Depth 0.3 m		Collection (comp begin or grab) Date 2/10/16 Time 1430 Diss Oxygen (mg/L) 9.3 % Salinity (PPT) 0.07 Sp Conductance (umho/cm) 157		Composite end Date Store Station Number G5SW0113 NPDES Number		Eastern Central		Bottle Group(s)** A	
	Latitude		Longitude		☐ dd ☐ dms		☐ dd ☐ dms		Comments Fresh water							
Lab ID *	RQ-2016-02-08-56 Date: 02/10/16 Time:		 G5SW0114 G5SW0114		Temp 15.6 °C pH 6.8		☐ Comp ☒ Grab Total Res Chlorine (mg/L) 9.5 mg/L Sample Depth 0.3 m		Collection (comp begin or grab) Date 2/10/16 Time 1440 Diss Oxygen (mg/L) 9.5 % Salinity (PPT) 0.07 Sp Conductance (umho/cm) 157		Composite end Date Store Station Number G5SW0114 NPDES Number		Eastern Central		Bottle Group(s)** A	
	Latitude		Longitude		☐ dd ☐ dms		☐ dd ☐ dms		Comments Fresh water							
Lab ID *	Location								Collection (comp begin or grab) Date Diss Oxygen (mg/L)		Composite end Date Store Station Number		Eastern Central		Bottle Group(s)**	
	Field ID								Total Res Chlorine (mg/L)		Store Station Number					
	Matrix (include type e.g. Salt, Fresh, etc)		Temp (C)		pH		Sample Depth ☐ m ☐ ft		☐ Salinity (PPT) ☐ Sp Conductance (umho/cm)		NPDES Number					
	Latitude		Longitude		☐ dd ☐ dms		☐ dd ☐ dms		Comments							
Lab ID *	Location								Collection (comp begin or grab) Date Diss Oxygen (mg/L)		Composite end Date Store Station Number		Eastern Central		Bottle Group(s)**	
	Field ID								Total Res Chlorine (mg/L)		Store Station Number					
	Matrix (include type e.g. Salt, Fresh, etc)		Temp (C)		pH		Sample Depth ☐ m ☐ ft		☐ Salinity (PPT) ☐ Sp Conductance (umho/cm)		NPDES Number					
	Latitude		Longitude		☐ dd ☐ dms		☐ dd ☐ dms		Comments							
Relinquished By:	Date/Time		Shipping Method:		Received By:		Date/Time		Relinquished By:		Date/Time		Received By:		Date/Time	

* Shaded Areas for Lab use only.

**** Please see reverse side for Bottle Group information.**

last revised October 1, 2003



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2016

PAGE 1 OF 1

Data Qualified?
Yes / No

STORET Station Name: mattress Drain 2

Date: 02/10/2016
(mm/dd/yyyy)

STORET Station ID: 645W0093

Latitude: 28° 17' 22.41
(Decimal Degrees)

WBID: 1435 RQ: 2016-02-08-56

ORG ID: 21FLTPA

Longitude: 81° 56' 37.61
(Decimal Degrees)

Receiving Body of Water: —

Field ID: 645W0093

County: POIK

Sampling Team Members		WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check	Duplicate Collection	Blank Collection	Sampling Equipment		
Judy Ashton		X	X		X	X			☒ Sample Container	☐ Van Dorn	☐ Pole
Ashtley Salmeron				X					☐ Carboy	☒ Syringe	
									☐ Dipper	☐ Other	
									Equipment ID		
									Collection Method		
									☒ Wading	☐ Via Boat	
									☐ From Shore	☐ Canoe/Kayak	
									☐ Other (note below)	☐ Electric Motor	
										☐ Gasoline Motor	
Water Level: Dry / Low / Normal / <u>High</u> / Flooded									Matrix: <u>Fresh</u> Marine / DI		
Meter ID# <u>Lil Jon</u>									Photos: <u>Yes</u> / No		
									Tide Falling: Yes / No / <u>NA</u>		

Field Sample Flow rate = 0.25 m/s

Time Zone	Time	Total Depth (m)	Sample Depth	Temp (°C)	DO (mg/L)	DO (%SAT)	COND (µmhos/cm)	Salinity (ppt)	pH	Secchi Disk (m)
EST	1120	0.5	0.3	10.9	9.1	81	91	0.04	5.6	0.5
CEN										

Biological Samples Collected:		None	HA	SCI	LVS	RPS	LVI	Other
Parameter Suite	Parameter Methods		Preservation	Acid Lot#	Expiration	pH Check		
Preserved Nutrients	☒ TKN / TP / Nox / NH3 / TOC	☐ Other	☒ Ice ☒ H ₂ SO ₄			☒ < 2		
Metals	☐ W-ICPMS ☐ W-ICP		☐ Ice ☐ HNO ₃			☒ < 2		
Filtered Nutrients	☒ oP	☐ Field Filtered 0.45 µm Filter	☒ Ice					
Chlorophyll	☒ CHLSUITE-W		☒ Ice					
BOD	☒ BOD-INHB ☐ BOD-UNIN		☒ Ice					
Physical/Aggregate	☒ TSS / Turbidity / Alkalinity / Color	☐ Other	☐ Ice					
Macroinvertebrates	☐ MI-FW-QDC		☐ Formalin					
Microbiology	☐ E Coli ☐ F Coli ☐ Entero ☐ QPCR		☐ Ice					
Periphyton	☐ ALGAE-ID		☐ Ice					
Pesticides	☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R		☐ Ice					
	☐ W-PSCL-TQA ☐ W-UHERB-AA ☐ W-GLYPH		☐ Other					

Contains
1:1
Sulfuric Acid
SA-5259020
EXP: 09/16/16
Warning!

Place Preserved Samples Here
(If Available)

FedEx Package
Express **US Airbill** Tracking Number **8092 3436 9920**

MUR3

1 From Please print and press hard.

Date **02-10-2010** Sender's FedEx Account Number

Sender's Name **FDEP**

Phone **813 470 5770**

Company

Address

1305 / N. Telecom Pkwy

Dist./Post/State/Zip

City

Temple Terrace

State

FL

ZIP

33637

2 Your Internal Billing Reference

Five 24 characters will appear on invoice.

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.

Dist./Post/State/Zip

Address

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

City **TALLAHASSEE**

State

FL

ZIP

32399-6542

0120775907

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Packages up to 150 lbs. for packages over 150 lbs., use the FedEx Express Freight form.

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☒ FedEx Priority Overnight

Expedited delivery to select locations. Priority shipments will be delivered on Monday unless SAT/UNDAY Delivery is selected.

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Standard Delivery NOT available.

5 Packaging *Declared value limit \$500.

☐ FedEx Envelope* ☐ FedEx Pak* ☐ FedEx Box ☐ FedEx Tube ☒ Other

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☐ SATURDAY Delivery NOT available for FedEx Standard Overnight, FedEx 2Day/AM, or FedEx Express Saver.

☐ No Signature Required

☐ Direct Signature

☐ Indirect Signature

☐ Does this shipment contain dangerous goods?

One box must be checked.

☐ No ☐ Yes ☐ As per attached Shipper's Declaration. ☐ Shipper's Declaration. ☐ Dry Ice ☐ Cargo Aircraft Only

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

☐ FedEx Invoice ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check

Total Packages **1** Total Weight **50** lbs. \$ **61.11**



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