



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

February 2016

A-KIT

PAGE 1 OF 1

Data Qualified?
Yes / No

STORET Station Name: NORTH CREEK

Date: 07/25/2016
(mm/dd/yyyy)

STORET Station ID: G3SW0034

Latitude: 27 20 51.3" N
(Decimal Degrees)

WBID: 1984AB RQ: 2016-07-25-91

ORG ID: 21FLTPA

Longitude: -82.4751" W
(Decimal Degrees)

Receiving Body of Water:

Field ID: G3SW0034

County: SARASOTA

Sampling Team Members				WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check	Sampling Equipment			
									☒ Sample Container	☐ Van Dorn	☐ Pole	
									☐ 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 / <u>Normal</u> / High / Flooded										Matrix: <u>Fresh</u> / Marine / DI		
Meter ID# <u>LIL JDN</u>										Tide Falling: Yes / No / <u>NA</u>		
Time Zone	Time	Sample Depth (m)	Total Depth (m)	DO (mg/L)	DO (%SAT)	pH	Salinity (ppt)	Secchi Disk (m)	Sp COND (umhos/cm)	Temp. (C°)		
EST	<u>11:10</u>	<u>0.3</u>	<u>0.3</u>	<u>3.1</u>	<u>39</u>	<u>7.1</u>	<u>0.81</u>	<u>0.3</u>	<u>1615</u>	<u>26.5</u>		
CEN								<u>"5"</u>				
Biological Samples Collected: None HA SCI <u>LVS</u> <u>RPS</u> LVI Other												
Parameter Suite		Parameter Methods					Preservation		Acid Lot#	Expiration	pH Check	
Preserved Nutrients		☒ W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP					☒ Ice ☒ H2SO4		<u>73488</u>	<u>12-7-16</u>	☒ <2	
Metals		☐ W-ICPMS ☐ W-ICP					☐ Ice ☐ HNO2				☐ <2	
Filtered Nutrients		☒ W-PO4-F ☒ Field Filtered 0.45 um Filter					☒ Ice					
Chlorophyll		☒ CHLSUITE-W					☒ Ice					
BOD		☐ BOD-UNIN					☐ Ice					
Physical/Aggregate (Kit A)		☒ Alkalinity / W-F / W-TSS / TURBIDITY / W-CL-IC / W-COLOR / W-SO4-IC / W-TDS					☒ Ice					
Physical/Aggregate (Kit B)		☐ Alkalinity / W-F / W-TSS / TURBIDITY					☐ Ice					
Macroinvertebrates		☐ MI-FW-QLDC					☐ Formalin					
Microbiology		☐ E Coli ☐ F Coli ☐ Entero ☐ QPCR					☐ Ice					
Periphyton		☐ ALGAE-ID					☐ Ice					
Pesticides		☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R ☐ W-PC-AA-SF ☐ W-UHERB-AA ☐ W-GLYPH					☐ Ice ☐ Other					
Flow m/s		"J" Quality Flow										

Place Preservative Sticker(s) Here
(if Available)

Notes:

RQ-2016-07-25-91
Date: 07/25/16
Time:



Signature: [Signature]

Date: 07/25/2016

Field Parameters Entered into LIMS: _____
(Initials/Date)

Field Parameters QC in LIMS: _____
(Initials/Date)

Date Migrated to STORET: _____
(Initials/Date)

Field Sheets Scanned/Saved: _____
(Initials/Date)

FedEx Package
Express **US Airbill**

FedEx Tracking Number **8099 4720 0615**

1 From Please print and press hard.

Date **7-22-16** Sender's FedEx Account Number

Sender's Name **J. Aschew** Phone **813 470-5772**

Company **FAEP**

Address **13051 N. TILKINSON AVE**

City **Tampa** State **FL** ZIP **33604**

2 Your Internal Billing Reference

First 25 characters will appear on invoice.

To Recipient's **SAMPLE RECEIVING** Phone **(850) 245-8085**

Company **FLORIDA DEP/CHEMISTRY SECTION**

Address **2500 BLAIRSTONE RD**

We cannot deliver to PO boxes or PO ZIP codes.

Drop/Receives location

Address

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

City **TALLAHASSEE** State **FL** ZIP **32399**

0122645602

Form ID No. **0215**

4 Express Package Service *To most locations.

Packages up to 150 lbs.
Exceeding 150 lbs. call 1-800-4FED-EX
FedEx Express Freight US Airbill

Next Business Day

☐ FedEx First Overnight
Earliest next business morning delivery to select business destinations. Delivery not available on Monday unless Saturday Delivery is selected.

☒ FedEx Priority Overnight
Next business morning. Friday shipments will be delivered on Saturday unless Saturday Delivery is selected.

☐ FedEx Standard Overnight
Next business morning. Saturday delivery NOT available.

2-3 Business Days

☐ FedEx 2Day A.M.
Second business morning. Saturday delivery NOT available.

☐ FedEx 2Day
Second business afternoon. Thursday shipments delivered on Friday 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
Delivery without signature required. May sign for delivery.

☐ Direct Signature
Delivery requires recipient's address. If no one is available at recipient's address, shipment will be returned to sender unless residential deliveries only.

☒ Does this shipment contain dangerous goods?
Dangerous goods must be checked. Yes ☐ No ☐ As per special instructions. Shipper's Declaration and required. Dry ice, 5.0N 1845. x 10. Cargo Aircraft Only.

7 Payment Bill to:

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

Sender ☐ Agent ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check

Package No. **4490-2252-9**

Total Packages **1** Total Weight **52** lbs. Total Declared Value **\$0**

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PULL AND RETAIN THIS COPY BEFORE AFFIXING TO THE PACKAGE. NO POUCH NEEDED.

DEP FORM FD 9000-25 Rapid Periphyton Survey Field Sheet

Site: NORTH CREEK					County: SARASOTA		Date: 07/25/16		Investigators: J. ASHTON / S. CLINGERMAN	
					STORET Station Number:					

Transect (m)	Point 1=right 9=left	Algal Thickness Rank (N-6, X)	Estimated	Canopy Cover	Transect (m)	Point 1=right 9=left	Algal Thickness Rank (N-6, X)	Estimated	Canopy Cover
0	1	N		96	60	1	N		96
	2					2			
	3					3			
	4					4			
	5					5			
	6					6			
	7					7			
	8					8			
	9					9			
10	1	N		96	70	1			96
	2					2			
	3					3			
	4					4			
	5					5			
	6					6			
	7					7			
	8					8			
	9					9			
20	1			96	80	1			96
	2					2			
	3					3			
	4					4			
	5					5			
	6					6			
	7					7			
	8					8			
	9					9			
30	1			96	90	1	N		96
	2					2			
	3					3			
	4					4			
	5					5			
	6					6			
	7					7			
	8					8			
	9					9			
40	1			96	100	1			
	2					2			
	3					3			
	4					4			
	5					5			
	6					6			
	7					7			
	8					8			
	9					9			
50	1			96		1			
	2					2			
	3					3			
	4					4			
	5					5			
	6					6			
	7					7			
	8					8			
	9					9			

Secchi depth	
Estimated?	

# points ranked 4-6	
total points assessed	
% points ranked 4-6	

Check accompanying data collected at same site/date.	
Algal mat sample	
Linear Veg Survey	
Habitat Assessment	
SCI/Biorecon	
Water sample	
RQ-	

Algal Thickness Rank	
N	rough, no algae, slimy, algae up to 1mm
3	>1mm - 6mm
4	>6mm - 20mm
5	>20mm - 10 cm
6	>10 cm

Record "N" and check "Estimated" for points deeper than the Secchi depth; algae are presumed absent. Check "Estimated" if thickness estimated for deep points which can be seen but not reached.

Record "X" for points shallower than Secchi depth for which substrate cannot be seen or reached with the hand. No estimated rank.

Record canopy cover as the number of small densiometer quadrants (out of 96) that HAVE canopy cover. Measure facing upstream at point 4, 5, or 6.

Collect algal mat sample following DEP SOP FS 7240 if the percentage of total sampled points with a thickness rank of 4, 5, or 6 is >20%.

Group: A	Bottle Type:	P-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab
	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
	CHLSUITE-W					
Group: A	Bottle Type:	P-500ML	# of Bottles: 1	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab
	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
	W-PO4-F					