



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

February 2016

A-KIT

PAGE 1 OF 1

STORET Station Name: North Creek

Date: 11-14-16
(mm/dd/yyyy)

STORET Station ID: G3SW0034

Latitude: 27° 12' 18.468" N
(Decimal Degrees)

WBID: 1984AB RQ: 2016-11-14-36

ORG ID: 21FLTPA

Longitude: -82° 28' 30.324" W
(Decimal Degrees)

Receiving Body of Water: G.M.

Field ID: G3SW0034

County: SARASOTA

Sampling Team Members						WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check	Sampling Equipment		
<u>Stephen Clingerman</u> <u>Judy Ashton</u>											☒ 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 / Normal / High / Flooded

Matrix: Fresh / Marine / DI

Meter ID#

Photos: Yes / No

Tide Falling: Yes / No / NA

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	11:10	0.3	0.3	5.7	65	6.9	0.83	0.3	1649	21.8
CEN								15"		

Biological Samples Collected: None HA SCI LVS RPS 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			☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO2			☐ <2
Filtered Nutrients	☒ W-PO4-F ☒ Field Filtered 0.45 µm 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 ☐ Enteroc ☐ 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: 0.1 m/s "J" Quality Flow

Notes: <u>PARLS OF CREEK STILLNANT -</u> <u>VERY INCISED, VERY SHAADY -</u> <u>LOTS OF EXOTICS ON BANKS</u>	RQ-2016-11-14-36
	Date: 11/14/2016 Field ID: <u>G3SW0034</u>
	Time:
	STORET: <u>G3SW0034</u>

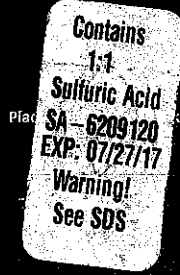
Signature: [Signature] Date: 11-14-16

Field Parameters Entered into LIMS: SC 12-04-2016 Field Parameters QC in LIMS: SC 01-05-17 SE 11/12/17

Date Migrated to STORET: (Initials/Date) Field Sheets Scanned/Saved: (Initials/Date)

LIMS 1850032

Visit 77282



Waterbody: NORTH CREEK

Date: 11-14-16

County: Sauk County

Storet Number: 635W003

Analyst: May Astrow

Signature: [Signature]

Comments: *L 2m2 VEL*

Instructions: Note taxa growing in the water with a checkmark if present, "D" if dominant, and "C" if codominant (dominance only if 1 m² of taxa present). Note in the boxes below if no dominant are selected, and note total macrophyte abundance rank for each section. Only the most common taxa are listed, so use blank spaces for additional taxa names.

[illegible]

DEP FORM FD 9000-25 Rapid Periphyton Survey Field Sheet

Site: <u>Noan Creek</u>					County: <u>Santa</u>		Date: <u>11-14-10</u>		Investigators: <u>J. Ashby S. Chapman</u>	
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			60	1	N			
	2					2				
	3					3				
	4					4				
	5			96		5			96	
	6					6				
	7					7				
	8					8				
	9					9				
10	1	N			70	1	N			
	2					2				
	3					3				
	4					4				
	5			96		5			96	
	6					6				
	7					7				
	8					8				
	9					9				
20	1	N			80	1	N			
	2					2				
	3					3				
	4					4				
	5			96		5			96	
	6					6				
	7					7				
	8					8				
	9					9				
30	1	N			90	1	N			
	2					2				
	3					3				
	4					4				
	5			96		5			96	
	6					6				
	7					7				
	8					8				
	9					9				
40	1	N			100	1	N			
	2					2				
	3					3				
	4					4				
	5			96		5			96	
	6					6				
	7					7				
	8					8				
	9					9				
50	1					1				
	2					2				
	3					3				
	4					4				
	5			96		5			96	
	6					6				
	7					7				
	8					8				
	9					9				

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%.

STORET Station Number:

63520034

Secchi depth

Estimated? NO0.3

points ranked 4-6

total points assessed

% points ranked 4-6

0990

Check accompanying data collected at same site/date.

Algal mat sample

Linear Veg Survey

Habitat Assessment

SCI/Biorecon

Water sample

☒☒RQ-2016-11-14-36

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

0.1 m/s

Group: A	Bottle Type:	P-1L	# of Bottles: 6	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: 6	Preservative:	ICE	Enter Number of Bottles Sent to Lab	0
	BOD-UNIN						
Group: A	Bottle Type:	BP-1L	# of Bottles: 6	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 6	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: 6	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	1
	W-PO4-F						



Package
US Airbill

FedEx
Tracking
Number

8104 1261 2534

MUR4

From Please print and press hard.

Date 11-14-14 Sender's FedEx Account Number

Sender's Name FOEP Phone (813) 470-5700

Company

Address 13051 N. Telecom Pkwy Dept./Floor/Suite/Room

City Temple Terrace State FL ZIP 33637

Your Internal Billing Reference

First 24 characters will appear on invoice.

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 32399-6542

0124452242



Deliveries when and where you want
Learn about FedEx Delivery Manager fedex.com/delivery

Firm ID No. 0215

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.

2nd 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?

One box must be checked.

☒ No ☐ Yes ☐ Yes Shipper's Declaration not required.

☐ Dry Ice Dry Ice, 9, UN 1845 x kg

Restrictions apply for dangerous goods — see the current FedEx Service Guide.

☐ Cargo Aircraft Only

7 Payment Bill to:

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

☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check

FedEx Acct. No. Credit Card No. 4490-2262-9

Exp. Date

Total Packages

Total Weight

Total Declared Value*

1 50 lbs. \$.00

*Our liability is limited to US\$100 unless you declare a higher value. See back for details. By using this airbill you agree to the service conditions on the back of this airbill and in the current FedEx Service Guide, including terms that limit our liability.

Rev. Date 5/15 • Part #03134 • ©1994-2015 FedEx • PRINTED IN U.S.A. SRM

611

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