Request Number: RQ-2016-02-29-26

1348A,1361B,1382C

Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Nov 10, 2015

Customer: SW-DIST

Project ID: SMP

Requester: Judy Ashton

Collected By:

Field Report Prepared By:

Sampling Agency:

RQ-2016-02-29-26 G5SW0123
Date: 03-01-2016
Time:
Field ID: G5SW0123

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 3/1/16 Time 1005 (Eastern / Central) | Composite end Date Time | Bottle Group(s) (See pg 2): A

Matrix (type, e.g., Salt, Fresh, etc): Fresh | Diss. Oxygen 1.4 ☒ mg/L 16 ☒ % sat | Total Res. Chlorine (mg/L)

Temp (C) 22.6 | pH 7.4 | Sample Depth 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm) 525

Latitude ☐ dd ☐ dms | Longitude ☐ dd ☐ dms | Salinity (ppt) 0.25 | Comments

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RQ-2016-02-29-26 G5SW0028
Date: 03-01-2016
Time:
Field ID: G5SW0028

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 3/1/16 Time 1225 (Eastern / Central) | Composite end Date Time | Bottle Group(s): A

Matrix (type, e.g., Salt, Fresh, etc): Fresh | Diss. Oxygen 7.3 ☒ mg/L 84 ☒ % sat | Total Res. Chlorine (mg/L)

Temp (C) 22.5 | pH 7.9 | Sample Depth 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm) 609

Latitude ☐ dd ☐ dms | Longitude ☐ dd ☐ dms | Salinity (ppt) 0.30 | Comments

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RQ-2016-02-29-26 G5SW0121
Date: 03-01-2016
Time:
Field ID: G5SW0121

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 3/1/16 Time 1330 (Eastern / Central) | Composite end Date Time | Bottle Group(s): A

Matrix (type, e.g., Salt, Fresh, etc): Fresh | Diss. Oxygen 8.9 ☒ mg/L 97 ☒ % sat | Total Res. Chlorine (mg/L)

Temp (C) 19.7 | pH 7.5 | Sample Depth 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm) 50

Latitude ☐ dd ☐ dms | Longitude ☐ dd ☐ dms | Salinity (ppt) 7.5 | Comments

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RQ-2016-02-29-26 G5SW0122
Date: 03-01-2016
Time:
Field ID: G5SW0122

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 3/1/16 Time 1340 (Eastern / Central) | Composite end Date Time | Bottle Group(s): A

Matrix (type, e.g., Salt, Fresh, etc): Fresh | Diss. Oxygen 8.6 ☒ mg/L 96 ☒ % sat | Total Res. Chlorine (mg/L)

Temp (C) 20.5 | pH 7.0 | Sample Depth 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm) 50

Latitude ☐ dd ☐ dms | Longitude ☐ dd ☐ dms | Salinity (ppt) 7.0 | Comments

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Relinquished By:	Date/Time	Shipping Method	Received By:	Date/Time	Relinquished By:	Date/Time	Received By:	Date/Time
			[illegible]	03-02-16				

04.25

Group: A Bottle Type: P-1L # of Bottles: 7 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: P-1L # of Bottles: 7 Preservative: ICE **Enter Number of Bottles Sent to Lab** _____

BOD-UNIN

Group: A Bottle Type: BP-1L # of Bottles: 7 Preservative: ICE **Enter Number of Bottles Sent to Lab** _____

CHLSUITE-W

Group: A Bottle Type: P-500ML # of Bottles: 7 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: 7 Preservative: ICE-FLTR **Enter Number of Bottles Sent to Lab** _____

W-PO4-F

GROUP B 50ML TUBE ALGAE RANK 3 1
" " ALGAE RANK 4 1
" " ALGAE RANK 5 1
" " ALGAE RANK 6 1

Request Number: RQ-2016-02-29-26

1348A,1361B,1382C

Florida Department of Environmental Protection

Central Laboratory Submittal Form

last revised Nov 10, 2015

Customer: SW-DIST

Project ID: SMP

Requester: Judy Ashton

Collected By:

Field Report Prepared By:

Sampling Agency:

Locat[ion] RQ-2016-02-29-26 Date: 03/01/16 Time:10:05 G5SW0123	☐ Comp ☐ Grab	Collection (comp begin or grab) Date 03/01/16 Time 10:05	Eastern Central	Composite end Date Time	Bottle Group(s) (See pg 2) B
Field [ID]	Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen ☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
STOR[ET #]	Temp (C)	pH	Sample Depth ☐ ft ☐ m	Sp. Conductance (umho/cm)	
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments Algae Sample, 3.4.5.6		

Location	☐ Comp ☐ Grab	Collection (comp begin or grab) Date Time	Eastern Central	Composite end Date Time	Bottle Group(s)
Field ID	Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen ☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
STORET #	Temp (C)	pH	Sample Depth ☐ ft ☐ m	Sp. Conductance (umho/cm)	
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments		

Location	☐ Comp ☐ Grab	Collection (comp begin or grab) Date Time	Eastern Central	Composite end Date Time	Bottle Group(s)
Field ID	Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen ☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
STORET #	Temp (C)	pH	Sample Depth ☐ ft ☐ m	Sp. Conductance (umho/cm)	
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments		

Location	☐ Comp ☐ Grab	Collection (comp begin or grab) Date Time	Eastern Central	Composite end Date Time	Bottle Group(s)
Field ID	Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen ☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
STORET #	Temp (C)	pH	Sample Depth ☐ ft ☐ m	Sp. Conductance (umho/cm)	
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments		

Relinquished By:	Date/Time	Shipping Method	Received By:	Date/Time	Relinquished By:	Date/Time	Received By:	Date/Time
			RBP	03-02-16 0925				

Group: A	Bottle Type:	P-1L	# of Bottles: 7	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:	P-1L	# of Bottles: 7	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** _____
	BOD-UNIN					

Group: A	Bottle Type:	BP-1L	# of Bottles: 7	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** _____
	CHLSUITE-W					

Group: A	Bottle Type:	P-500ML	# of Bottles: 7	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: 7	Preservative:	ICE-FLTR	**Enter Number of Bottles Sent to Lab** _____
	W-PO4-F					

RQ-2016-02-29-26

Date of Request: 04-FEB-2016
Created By: ASHTON_J On: 04-FEB-2016
Modified By: WATTS_J On: 08-FEB-2016
Customer: SW-DIST
Project: SMP
Division:
District: Southwest District
Sampling Event: 1348A,1361B,1382C

Send Coolers To:

Phone: 813-470-5951
FL Dept. of Environmental Protection
13051 N. Telecom Parkway
Temple Terrace, FL 33637-0926
Attn: Matthew Bearden

Send Final Report To:

FL Dept. of Environmental Protection
13051 N. Telecom Parkway
Temple Terrace, FL 33637-0926
Attn: Stephen Clingerman

Program Module Number:
Priority: 3
Event Status: R
Criminal Investigation: NO
Chemistry Request Reviewed By: WATTS_J On: 08-FEB-2016
Biology Request Reviewed By: SWANSON_C On: 05-FEB-2016
Sampling Kit Required: YES Ship on: 18-FEB-2016
Sampling Kit Shipped: YES On: 12-FEB-2016
Sampling Kit Packed By: LASHLEY_C
Preservatives Needed: NO
Date to Receive Samples: 01-MAR-2016
Received By: SHAIK_A On: 02-MAR-2016

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

Comments:

Bottle Group A (Water) With 7 Samples:

Bottle Type: P-1L	Number of Bottles: 7	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: P-1L	Number of Bottles: 7	Preserved With: ICE	
BOD-UNIN	Template: DEFAULT	(SM 5210 B) BOD, NOT nitrogen-inhibited	
Bottle Type: BP-1L	Number of Bottles: 7	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: 7	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: 7	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- 2016-02-29-26

Shipping Method: Fed Exp

Date/Time of Receipt: 03-02-16 9:25

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	
BLUE	0.6C	10		✓			
Red	1.4C	14		✓			

*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: ABS

**W-1-4-DIOX (Green dot on container) preserved to pH < 4.0? Yes____ No____ NA ✓ Init: _____

Coolers Unpacked/Checked by: ABS Date: 3-2-16 NCRs (Y/N)? N

Event ID: 1348A, 1361B, 1382C
SW-DIST-2016-03-02-01 (SMP)
Date Received: 02-MAR-2016 09:25

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 – Methyl Mercury Preservation Check:

Samples Preserved within 48 hours? Yes_____ No_____

Date and time samples preserved: _____

Additional Comments:

FedEx Express — Package US Airbill

FedEx Tracking Number 8099 4719 3024

Form ID No. 0215

Date 12/1/2016

Sender's Name FDEP Phone 813 470-5770

Company

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

City Temple Terrace State FL ZIP 33637

Your 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

Cannot deliver to P.O. boxes or P.O. ZIP codes.

Address

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

City TALLAHASSEE State FL ZIP 32399

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.

0122645602

8099 4719 3024

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.
- [X] 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

- [ ] 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
- [X] 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 — As per attached Shipper's Declaration.
- [ ] 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.

Obtain recip Acct. No. [ ]

- [ ] Sender — Acct. No. in Section 1 will be billed.
- [X] Recipient
- [ ] Third Party
- [ ] Credit Card
- [ ] Cash/Check

Total Packages 1 Total Weight 50 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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fedex.com 1.800.GoFedEx 1.800.463.3339

FedEx Express — Package US Airbill

FedEx Tracking Number 8099 4719 2223

Form ID No. 0215

Date 12/1/2016

Sender's Name FDEP Phone 813 470-5770

Company

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

City Temple Terrace State FL ZIP 33637

Your 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

Cannot deliver to P.O. boxes or P.O. ZIP codes.

Address

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

City TALLAHASSEE State FL ZIP 32399

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.

0122645602

8099 4719 2223

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.
- [X] 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

- [ ] 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
- [X] 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 — As per attached Shipper's Declaration.
- [ ] 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.

Obtain recip Acct. No. [ ]

- [ ] Sender — Acct. No. in Section 1 will be billed.
- [X] Recipient
- [ ] Third Party
- [ ] Credit Card
- [ ] Cash/Check

Total Packages 1 Total Weight 50 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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fedex.com 1.800.GoFedEx 1.800.463.3339