

Request Number: 2016-10-24-68

Florida Department of Environmental Protection
Central Laboratory Submittal FormPage 1 of 2
last revised Nov 10, 2015

Customer: SW-DIST

Requester: Judy Ashton

Field Report Prepared By: S. Clingerman/J. Ashton

Project ID: SMP

Collected By: S. Clingerman/J. Ashton

Sampling Agency: 21 FLTPA

Location	BELLOWS LAKE/EAST LAKE	☐ Comp ☒ Grab	Collection (comp begin or grab) Date 10/26/2016 Time 9:25	Eastern Central	Composite end Date Time	Bottle Group(s) (See pg 2)
Field ID	RQ-2016-10-24-68 Date: 10/26/2016 Field ID: G1SW0044	Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen 10.3 mg/L 120 % sat	☒ mg/L ☒ % sat	Total Res. Chlorine (mg/L)	A
ORET #	Time:	Temp (C) 22.7	pH 8.4	Sample Depth 0.3	Sp. Conductance (umho/cm) 122	
Latitude	Longitude	Salinity (ppt) 0.04	Comments			
Location	LAKE THOMAS OUTLET	☐ Comp ☒ Grab	Collection (comp begin or grab) Date 10/26/2016 Time 11:45	Eastern Central	Composite end Date Time	Bottle Group(s)
Field ID	RQ-2016-10-24-68 Date: 10/26/2016 Field ID: G1SW0050	Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen 7.9 mg/L 81 % sat	☒ mg/L ☒ % sat	Total Res. Chlorine (mg/L)	A
ORET #	Time:	Temp (C) 20.3	pH 6.0	Sample Depth 0.3	Sp. Conductance (umho/cm) 175	
Latitude	Longitude	Salinity (ppt) 0.08	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)	
ORET #		Temp (C)	pH	Sample Depth	Sp. Conductance (umho/cm)	
Latitude	Longitude	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)	
ORET #		Temp (C)	pH	Sample Depth	Sp. Conductance (umho/cm)	
Latitude	Longitude	Salinity (ppt)	Comments			

Relinquished By:	Date/Time	Shipping Method	Received By:	Date/Time	Relinquished By:	Date/Time	Received By:	Date/Time
S. Clingerman	10/26/2016 1800	Red Ex					SK	10-27-16/10:30

Group: A Bottle Type: P-1L # of Bottles: 6 Preservative: ICE Enter Number of Bottles Sent to Lab 2

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 2

BOD-UNIN

Group: A Bottle Type: BP-1L # of Bottles: 6 Preservative: ICE Enter Number of Bottles Sent to Lab 2

CHLSUITE-W

Group: A Bottle Type: P-500ML # of Bottles: 6 Preservative: ICE And H2SO4 Enter Number of Bottles Sent to Lab 2

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 2

W-PO4-F

Date of Request: 06-OCT-2016
 Created By: ASHTON_J On: 06-OCT-2016
 Modified By: MATTHEWS_D On: 10-OCT-2016
 Customer: SW-DIST
 Project: SMP
 Division:
 District: Southwest District
 Sampling Event: Bellows, Lk Thomas Outlet

Send Coolers To:

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

Program Module Number:
 Priority: 3
 Event Status: A
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 06-OCT-2016
 Biology Request Reviewed By: MATTHEWS_D On: 10-OCT-2016
 Sampling Kit Required: NO Ship on:
 Sampling Kit Shipped:
 Sampling Kit Packed By:
 Preservatives Needed: NO
 Date to Receive Samples: 26-OCT-2016
 Received By:

Send Final Report To:

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

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

Comments:

Bottle Group A (Water) With 2 Samples:

Bottle Type: P-1L	Number of Bottles: 2	Preserved With: ICE
ALKALINITY	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO ₃ /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-SO ₄ -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: 2	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: 2	Preserved With: ICE And H ₂ SO ₄
W-NH ₃	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
W-NO ₂ NO ₃	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: 2	Preserved With: ICE-FLTR
W-PO ₄ -F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L

Log-in Checklist

RQ- 2016-10-24-68

Shipping Method: Fedex

Date/Time of Receipt: 10-27-16/10:30

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	Yes	No		
Red	2.0	8		☒			

*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: 10-24-16

NCRs (Y/N)? N

Event ID: SW-DIST-2016-10-27-01

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:

00380

01000

16178

FedEx Package
Express US Airbill
FedEx
Tracking
Number

8104 1261 4824

1 From

Date 10-26-16

Sender's
Name

Phone 813 470-5100

Company

Address

City

State

ZIP

2 Your Internal Billing Reference

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.

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



8104 1261 4824

Form
ID No.

0215

4 Express Package Service

* To most locations.

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

☐ 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?

☒ No

☐ Yes

As per attached Shipper's Declaration.

☐ Yes

Shipper's Declaration not required.

☐ Dry Ice

Dry ice, 9 UN 1845

☐ Cargo Aircraft Only

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

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

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 1800.GoFedEx 1800.463.3339

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