

A-KIT

Request Number: 2016-10-31-57 Florida Department of Environmental Protection
Central Laboratory Submittal Form

Page 1 of 2
last revised Nov 10, 2015

Customer: SW-DIST

Requester: Judy AshtonField Report Prepared By: Judy Ashton

Project ID: SMP

Collected By: J. Ashton, EGOSampling Agency: FDEP

Location: <u>LAKE HANCOCK</u>	☐ Comp ☒ Grab	Collection (comp begin or grab) Date: <u>11-1-16</u> Time: <u>10:15</u>	Eastern Central	Composite end Date: _____ Time: _____	Bottle Group(s) (See pg 2)
RQ-2016-10-31-57 Date: <u>11/1/16</u> Time: _____ Field ID: <u>G5SW0046</u> Field ID STORED 	Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen: <u>5.7</u> mg/L <u>40</u> % sat	Total Res. Chlorine (mg/L)		A
ORET #: <u>Lake Hancock</u>	Temp (C): <u>23.8</u>	pH: <u>6.5</u>	Sample Depth: <u>0.3</u> ft <u>3</u> m	Sp. Conductance (umho/cm): <u>111</u>	
Latitude: _____ Longitude: _____	☐ dd ☐ dms	Salinity (ppt): <u>0.05</u>	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: _____ ft _____ m	Sp. Conductance (umho/cm)	
Latitude: _____ 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)		
ORET #: _____	Temp (C): _____	pH: _____	Sample Depth: _____ ft _____ m	Sp. Conductance (umho/cm)	
Latitude: _____ 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)		
ORET #: _____	Temp (C): _____	pH: _____	Sample Depth: _____ ft _____ m	Sp. Conductance (umho/cm)	
Latitude: _____ Longitude: _____	☐ dd ☐ dms	Salinity (ppt)	Comments		

Relinquished By: <u>J. Ashton</u>	Date/Time: <u>11-1-16 1700</u>	Shipping Method: <u>FDEP</u>	Received By: _____	Date/Time: _____	Relinquished By: _____	Date/Time: _____	Received By: _____	Date/Time: _____
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TOTAL # COOLERS = 1

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

Group A PKD-QN-BV BP-1L 1 BOTTLE 16005

1

Date of Request: 13-OCT-2016
 Created By: ASHTON_J On: 13-OCT-2016
 Modified By: MATTHEWS_D On: 14-OCT-2016
 Customer: SW-DIST
 Project: SMP
 Division:
 District: Southwest District
 Sampling Event: Hancock

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: R
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 14-OCT-2016
 Biology Request Reviewed By: MATTHEWS_D On: 14-OCT-2016
 Sampling Kit Required: YES Ship on: 31-OCT-2016
 Sampling Kit Shipped: YES On: 31-OCT-2016
 Sampling Kit Packed By: KITCHEN_S
 Preservatives Needed: NO
 Date to Receive Samples: 01-NOV-2016
 Received By: SHAIK_A On: 02-NOV-2016

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: Add phyto

Bottle Group A (Water) With 1 Samples:

Bottle Type: P-1L	Number of Bottles: 1	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: 1	Preserved With: ICE
CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, phaeophytin and ratio by spectrophotometry
Bottle Type: BP-1L	Number of Bottles: 1	Preserved With: Lugols
PKD-QN-BV	Template: DEFAULT	(SOP-AB05) No. of wet taxa of quantitative phytoplankton sample w/speciation and cell counts.
Bottle Type: P-500ML	Number of Bottles: 1	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: 1	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

* - The laboratory is not NELAP certified for this analyte/method, or certification is not applicable.

2016-10-31-57 = 5
 RQ- 2016-10-31-58 = 4

Log-in Checklist

Shipping Method: FEDEX

Date/Time of Receipt: 11-2-16 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	
Recd	1.1C	9		✓			

*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: ADJ

**W-1-4-DIOX (Green dot on container) preserved to pH < 4.0? Yes ☐ No ☒ NA ☐ Init: ADJ

Coolers Unpacked/Checked by: ADJ Date: 11-2-16 NCRs (Y/N)? ☐

Event ID: Hancock
SW-DIST-2016-11-02-01 (SMP)
 Date Received: 02-NOV-2016 10:30
 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:

