

field ID



G5NE0095 02202017

Red House Branch
@ Heffron Rd

storet ID



27010076

OF ENVIRONMENTAL PROTECTION
ORING PROGRAM FIELD SHEET

January 2017

PAGE 1 OF 1

Data Qualified?

Yes / No

Date:

2/20/17
(mm/dd/yyyy)

STORET Station ID:

WBID: 2472

Latitude:

29.9270
(Decimal Degrees)

County:

RQ

2017-02-20-08

ORG ID: 21FLA

Longitude:

81.3781
(Decimal Degrees)

Receiving Body of Water:

Field ID:

Sampling Team Members

Nicole Frederick
Pat O'Conner

WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
X	X	X	X	X

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 / Pooled / Low / Normal / High / Flooded

Matrix: Fresh / Marine / DI

Meter ID#

Quanta

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 (µmhos/cm)	Temp. (C°)
EST	0955	0.15	0.30	6.87	71.2	7.65	0.31	0.30	635	17.34
CEN								NDB		

Biological Samples Collected: None HA SCI RPS Algae ID LVS LVI Other

SBIO ID Numbers:

SBIO-ID:

RPS-ID:

Macrophyte-ID:

LIMS#:

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-P04-F ☐ Field Filtered 0.45 µm Filter	☒ Ice			
Chlorophyll	☒ CHLSUITE-W	☒ Ice			
Physical/Aggregate (Fresh)	☒ Alkalinity / ☒ W-F / ☒ W-TSS / ☒ TURBIDITY / ☒ W-Cl-IC / ☒ W-COLOR / ☒ W-SO4-IC / ☒ W-TDS	☒ Ice			
Physical/Aggregate (Marine)	☐ Alkalinity / ☐ W-F / ☐ W-TSS / ☐ TURBIDITY	☐ Ice			
Macroinvertebrates	☐ MI-FW-QLDC	☐ Formalin			
Periphyton	☐ ALGAE-ID	☐ Ice			
Microbiology	☒ E Coli ☐ F Coli ☐ Enterococcus ☐ PCR-FILTER	☒ Ice			
Tracers	☒ W-SUC-AA-R ☒ W-UHERB-AA	☒ Ice			
Pesticides	☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R ☐ W-PCL-SQ-R ☐ W-UHERB-AA ☐ W-GLYPH	☐ Ice ☐ Other			

Contains

1:1

Sulfuric Acid

SA-6302030

EXP: 10/28/17

Warning!

See SDS

Preservative Sticker(s) Here
(If Available)

Notes:

Place Label Here
(If Available)

Signature:

Date:

2/20/17

Field Parameters Entered into LIMS:

202/22/17
(Initials/Date)

Field Parameters QC in LIMS:

(Initials/Date)

Date Migrated to STORET:

(Initials/Date)

Field Sheets Scanned/Saved:

(Initials/Date)

Acode is ENTMPN for E.Coli/Quanti-Tray field ID: G5NE0069



CHAIN-OF-CUSTODY / Analytical Request Document

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

Section A Required Client Information:		Section B Required Project Information:		Section C Invoice Information:		Page: of
Company: <u>FDEP</u>		Report To: <u>Dep - Overflow micromedep.state</u>		Attention: <u>ELUS</u>		REGULATORY AGENCY ☐ NPDES ☐ GROUND WATER ☐ DRINKING WATER ☐ UST ☐ RCRA ☐ OTHER _____
Address: <u>8800 Baymeadows</u> <u>Way W</u>		Copy To: <u>jeremy.m.parrish@dep.state.fl.us</u>		Company Name:		
Email To:		Purchase Order No.:		Address:		
Phone: Fax:		Project Name:		Pace Quote Reference:		Site Location STATE:
Requested Due Date/TAT:		Project Number:		Pace Project Manager:		
				Pace Profile #:		

ITEM #	Section D Required Client Information	Matrix Codes MATRIX / CODE	Matrix Code (see valid codes to left)	SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED				SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives								Analysis Test ↓	Requested Analysis Filtered (Y/N)										Residual Chlorine (Y/N)	Pace Project No./ Lab I.D.
					COMPOSITE START		COMPOSITE END/GRAB				Unpreserved	H ₂ SO ₄	HNO ₃	HCl	NaOH	Na ₂ S ₂ O ₃	Methanol	Other													
					DATE	TIME	DATE	TIME																							
1	<u>E. coli Red Horse @</u>	<u>Hefflon</u>	<u>WT</u>	<u>G</u>	<u>2/20/17</u>	<u>0955</u>	<u>2/21/17</u>	<u>0955</u>	<u>17.34</u>	<u>X</u>																					
2	<u>E. coli moSES @ US1</u>		<u>WT</u>	<u>G</u>	<u>2/20/17</u>	<u>1140</u>	<u>17.36</u>		<u>X</u>																						
3																															
4																															
5																															
6																															
7																															
8																															
9																															
10																															
11																															
12																															

SAMPLER NAME AND SIGNATURE		Temp in °C	Received on ice (Y/N)	Custody Sealed Cooler (Y/N)	Samples intact (Y/N)
PRINT Name of SAMPLER:	<u>Nicole Frederick / Pat O'Cooper</u>				
SIGNATURE of SAMPLER:	<u>Nicole</u>				
DATE Signed (MM/DD/YY): <u>2/20/2017</u>					

*Important Note: By signing this form you are accepting Pace's NET 30 day payment terms and agreeing to late charges of 1.5% per month for any invoices not paid within 30 days.