

October 16, 2017

Frances Moore
Florida DEP - Bureau of Labs-Biology Section
Twin Towers/LAB Complex A
2600 Blair Stone Rd
Tallahassee, FL 32399

RE: Workorder: G1708503 SUW2

Dear Frances Moore:

Enclosed are the analytical results for sample(s) received by the laboratory on Wednesday, October 04, 2017. Results reported herein conform to the most current NELAC standards, where applicable, unless otherwise narrated in the body of the report. The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody and results pertain only to these samples.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Jessica Bunnell - Project Manager
JBunnell@AELLab.com

Enclosures

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SAMPLE SUMMARY

Workorder: G1708503 SUW2

Lab ID	Sample ID	Matrix	Date Collected	Date Received
G1708503001	G1NE060510042017	Water	10/4/2017 12:10	10/4/2017 13:00
G1708503002	G1NE033210042016	Water	10/4/2017 10:55	10/4/2017 13:00
G1708503003	G1NE056521030086	Water	10/4/2017 11:30	10/4/2017 13:00
G1708503004	G1NE061710042016	Water	10/4/2017 10:15	10/4/2017 13:00
G1708503005	G1NE061710042016	Water	10/4/2017 10:30	10/4/2017 13:00

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ANALYTICAL RESULTS

Workorder: G1708503 SUW2

Lab ID: **G1708503001** Date Received: 10/04/17 13:00 Matrix: Water
 Sample ID: **G1NE060510042017** Date Collected: 10/04/17 12:10

Sample Description: Location:

Parameters	Results	Qual	Units	DF	Adjusted PQL	Adjusted MDL	Analyzed	Lab
Microbiology								
Analysis Desc: Escherichia Coli,EPA 1603,Water			Analytical Method: EPA 1603					
E. Coli	1800	B	#/100 mL	10	10	10	10/4/2017 19:14	G

Lab ID: **G1708503002** Date Received: 10/04/17 13:00 Matrix: Water
 Sample ID: **G1NE033210042016** Date Collected: 10/04/17 10:55

Sample Description: Location:

Parameters	Results	Qual	Units	DF	Adjusted PQL	Adjusted MDL	Analyzed	Lab
Microbiology								
Analysis Desc: Escherichia Coli,EPA 1603,Water			Analytical Method: EPA 1603					
E. Coli	70	B, Q	#/100 mL	10	10	10	10/4/2017 19:14	G

Lab ID: **G1708503003** Date Received: 10/04/17 13:00 Matrix: Water
 Sample ID: **G1NE056521030086** Date Collected: 10/04/17 11:30

Sample Description: Location:

Parameters	Results	Qual	Units	DF	Adjusted PQL	Adjusted MDL	Analyzed	Lab
Microbiology								
Analysis Desc: Escherichia Coli,EPA 1603,Water			Analytical Method: EPA 1603					
E. Coli	90	B, Q	#/100 mL	10	10	10	10/4/2017 19:14	G

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ANALYTICAL RESULTS

Workorder: G1708503 SUW2

Lab ID: **G1708503004** Date Received: 10/04/17 13:00 Matrix: Water
 Sample ID: **G1NE061710042016** Date Collected: 10/04/17 10:15

Sample Description: Location:

Parameters	Results	Qual	Units	DF	Adjusted PQL	Adjusted MDL	Analyzed	Lab
Microbiology								
Analysis Desc: Escherichia Coli,EPA 1603,Water			Analytical Method: EPA 1603					
E. Coli	550	Q	#/100 mL	10	10	10	10/4/2017 19:14	G

Lab ID: **G1708503005** Date Received: 10/04/17 13:00 Matrix: Water
 Sample ID: **G1NE061710042016** Date Collected: 10/04/17 10:30

Sample Description: Location:

Parameters	Results	Qual	Units	DF	Adjusted PQL	Adjusted MDL	Analyzed	Lab
Microbiology								
Analysis Desc: Escherichia Coli,EPA 1603,Water			Analytical Method: EPA 1603					
E. Coli	300	B,Q	#/100 mL	20	20	20	10/4/2017 19:14	G

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ANALYTICAL RESULTS QUALIFIERS

Workorder: G1708503 SUW2

PARAMETER QUALIFIERS

- U The compound was analyzed for but not detected.
- I The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.
- B Results based upon colony counts outside the acceptable range.
- Q Analyzed out of hold

LAB QUALIFIERS

- G DOH Certification #E82001(AEL-G)(FL NELAC Certification)
- [1] Incubator#1: 10/04/17 19:14-21:20 Incubator#2: 10/04/17 21:20- 10/05/17 19:25

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QUALITY CONTROL DATA

Workorder: G1708503 SUW2

QC Batch: MICg/2867 Analysis Method: EPA 1603
QC Batch Method: EPA 1603 Prepared:
Associated Lab Samples: G1708503001, G1708503002, G1708503003, G1708503004, G1708503005

METHOD BLANK: 2501128

Parameter	Units	Blank Result	Reporting Limit Qualifiers
Microbiology E. Coli	#/100 mL	1	1 U

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Workorder: G1708503 SUW2

Lab ID	Sample ID	Prep Method	Prep Batch	Analysis Method	Analysis Batch
G1708503001	G1NE060510042017			EPA 1603	MICg/2867
G1708503002	G1NE033210042016			EPA 1603	MICg/2867
G1708503003	G1NE056521030086			EPA 1603	MICg/2867
G1708503004	G1NE061710042016			EPA 1603	MICg/2867
G1708503005	G1NE061710042016			EPA 1603	MICg/2867

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Altamonte Springs: 380 Northlake Blvd., Suite 1048 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597
Gainesville: 4966 SW 41st Blvd. • Gainesville, FL 32608 • 352.377.2349 • Fax 352.395.6639
Jacksonville: 6681 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354
Miramar: 10200 USA Today Way • Miramar, FL 33025 • 954.889.2288 • Fax 954.889.2281
Tallahassee: 2639 North Monroe Street, Suite D • Tallahassee, FL 32303 • 850.219.6274 • Fax 850.219.6275
Tampa: 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.0616 • Fax 813.630.4277

AN708503

Client Name:		FDEP	Project Name:		Run name:		
Address:		8800 BAYMEADOWS WAY W JACKSONVILLE, FL. 32256		P.O. Number or Project Number	RQ-2017-09-11-13		
Phone:		904-256-1541		FDEP Facility No:	N/A		
FAX:				Project Address:	N/A		
Contact:		JEREMY PARRISH		Special Instructions:			
Sampled By:		NED:		E-mail report to: Dep-Overflwmicro@dep.state.fl.us			
Turn Around Time:		☒ STANDARD ☐ RUSH					
Page:		1 of 1		☐ ADAPT ☐ EQUIS ☐ Other			

SAMPLE ID	SAMPLE DESCRIPTION	Grab Comp	SAMPLING		MATRIX	NO. COUNT	PRESERVATION	ANALYSIS REQUIRED				BOTTLE SIZE & TYPE	LABORATORY I.D. NUMBER	
			DATE	TIME				ECOLI-18QT (ECOLI)	ENT-24-QT (ENTERO)	FCOLI-MF (Fecal Coliforms)				
field ID 	G1NE0605 10042017	3RAB	10/4/17	1210	SW	1								001
field ID 	G1NE0332 10042016	Grab	10/4/17	1055	SW	1								002
field ID 	G1NE0617 10042016	Grab	10/4/17	1130	SW	1								003
field ID 	G1NE0617 10042016	Grab	10/4/17	1015	SW	1								004
field ID 	G1NE0617 10042016	Grab	10/4/17	1030	SW	1								005

Matrix Code: WW = wastewater SW = surface water GW = ground water DW = drinking water O = oil A = air SO = soil SL = sludge

Received on Ice ☒ Yes ☐ No Temp taken from sample ☐ Temp from blank

DCN: AD-051 Form last revised 04/30/2015

Device used for measuring Temp by unique identifier (circle IR temp gun used) J: 9A G: LT-1 LT-2 T: 10A A: 3A M: 3A S: IV

Relinquished by: _____ Date: _____ Time: _____ Received by: _____ Date: _____ Time: _____

Where required, pH checked _____ Temperature when received 39 (in degrees celsius)

FOR DRINKING WATER USE:

PWS ID: _____ Contact Person: _____ Phone: _____ Supplier of Water: _____ Site Address: _____