



January 03, 2018

Service Request No:J1708856

Sara Armour  
Florida Department of Environmental Protection  
Bureau of Laboratories  
2600 Blair Stone Road  
Tallahassee, FL 32399

**Laboratory Results for: LSJR BMAP TRIBS**

Dear Sara,

Enclosed are the results of the sample(s) submitted to our laboratory December 27, 2017  
For your reference, these analyses have been assigned our service request number **J1708856**.

All analyses were performed according to our laboratory's quality assurance program. The test results meet requirements of the NELAP standards except as noted in the case narrative report. All results are intended to be considered in their entirety, and ALS Environmental is not responsible for use of less than the complete report. Results apply only to the items submitted to the laboratory for analysis and individual items (samples) analyzed, as listed in the report. In accordance to the NELAC 2003 Standard, a statement on the estimated uncertainty of measurement of any quantitative analysis will be supplied upon request.

Respectfully submitted,

**ALS Group USA, Corp. dba ALS Environmental**

Gina Bondani  
Project Manager

**ADDRESS** 9143 Philips Highway, Suite 200, Jacksonville, FL 32256  
**PHONE** +1 904 739 2277 | **FAX** +1 904 739 2011  
ALS Group USA, Corp.  
dba ALS Environmental



## Sample Receipt Information

**ALS Environmental—Jacksonville Laboratory**  
9143 Philips Highway, Suite 200, Jacksonville, FL 32256  
Phone (904) 739-2277 Fax (904) 739-2011  
[www.alsglobal.com](http://www.alsglobal.com)

**Client:** Florida DEP  
**Project:** LSJR BMAP TRIBS

**Service Request:**J1708856

**SAMPLE CROSS-REFERENCE**

| <u>SAMPLE #</u> | <u>CLIENT SAMPLE ID</u> | <u>DATE</u> | <u>TIME</u> |
|-----------------|-------------------------|-------------|-------------|
| J1708856-001    | G2NE0600                | 12/27/2017  | 0940        |
| J1708856-002    | G2NE0958                | 12/27/2017  | 1040        |
| J1708856-003    | G2NE0161                | 12/27/2017  | 0950        |
| J1708856-004    | G2NE0323                | 12/27/2017  | 1040        |
| J1708856-005    | G2NE0130                | 12/27/2017  | 0915        |

**Cooler Receipt Form**

Client: FDEP DEAR NED RUC Service Request #: 51708856  
 Project: LSJR-BMAP TRBS Shipping paid by ALS?  
 Cooler received on 12/27/17 and opened on 12/27/17 by MLL Yes No N/A  
 COURIER: ALS UPS FEDEX DHL Client Other \_\_\_\_\_ Airbill # \_\_\_\_\_

- 1 Were custody seals on outside of cooler? Yes No  
 If yes, how many and where? #: \_\_\_\_\_ on lid other \_\_\_\_\_
- 2 Were seals intact and signature and date correct? Yes No N/A
- 3 Were custody papers properly filled out? Yes No N/A
- 4 Temperature of cooler(s) upon receipt (Should be 0°C and ≤ 6°C) 2.2
- 5 Thermometer ID T124
- 6 Temperature Blank Present? Yes No
- 7 Were Ice or Ice Packs present Ice Ice Packs No
- 8 Did all bottles arrive in good condition (unbroken, etc....)? Yes No N/A
- 9 Type of packing material present Netting Vial Holder Bubble Wrap  
 Paper Styrofoam Other N/A
- 10 Were all bottle labels complete (sample ID, preservation, etc....)? Yes No N/A
- 11 Did all bottle labels and tags agree with custody papers? Yes No N/A
- 12 Were the correct bottles used for the tests indicated? Yes No N/A
- 13 Were all of the preserved bottles received with the appropriate preservative?  
 HNO3 pH<2 H2SO4 pH<2 ZnAc2/NaOH pH>9 NaOH pH>12 HCl pH<2  
 Preservative additions noted below Yes No N/A
- 14 Were all samples received within analysis holding times? Yes No N/A
- 15 Were VOA vials free of air bubbles greater than 6mm? If present, note below Yes No N/A
- 16 Where did the bottles originate? ALS Client

| Sample ID | Reagent | Lot # | ml added | Initials Date/Time |
|-----------|---------|-------|----------|--------------------|
|           |         |       |          |                    |
|           |         |       |          |                    |
|           |         |       |          |                    |
|           |         |       |          |                    |
|           |         |       |          |                    |
|           |         |       |          |                    |
|           |         |       |          |                    |
|           |         |       |          |                    |
|           |         |       |          |                    |

Additional comments and/or explanation of all discrepancies noted above:

Client approval to run samples if discrepancies noted:

Date:



# CHAIN OF CUSTODY/LABORATORY ANALYSIS REQUEST FORM

9143 Phillips Highway, Ste 200 • Jacksonville, FL 32256 (904) 739-2277 • 800-695-7222 x06 • FAX (904) 739-2011

SR#

J1708856

CAS Contract

PAGE 1 OF 1

| Project Name                                                                                                           |                                                                               | Project Number                                                                                                                                                                                                                  |         | ANALYSIS REQUESTED (Include Method Number and Container Preservative)           |                               |
|------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------------------------------------------------------------------------------|-------------------------------|
| LSJR BMAP TRIPS                                                                                                        | RQ-2017-12-18-10                                                              | PREP-Overflying @ FLUS                                                                                                                                                                                                          | DEP-518 | 8                                                                               | 8                             |
| Project Manager                                                                                                        |                                                                               |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| Company/Address                                                                                                        | J1708856<br>Florida Department of Environmental Protection<br>LSJR BMAP TRIPS |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| FDEP DEAR NED ROC                                                                                                      |                                                                               |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| 8800 Bynumbers Wey W Suite 100                                                                                         |                                                                               |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| Jcx FL 32256                                                                                                           |                                                                               |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| Phone #                                                                                                                |                                                                               |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| 904-256-1700                                                                                                           |                                                                               |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| Sampler's Signature                                                                                                    | B. Davis                                                                      |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| Sampler's Printed Name                                                                                                 | B. Davis                                                                      |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| LAB ID                                                                                                                 | SAMPLING DATE                                                                 | SAMPLING TIME                                                                                                                                                                                                                   | MATRIX  | NUMBER OF CONTAINERS                                                            | REMARKS/ALTERNATE DESCRIPTION |
| G2NE0660                                                                                                               | 12/27/17                                                                      | 940                                                                                                                                                                                                                             | SW      | 1                                                                               | Collected by B. Davis         |
| G2NE0958                                                                                                               | 12/27/17                                                                      | 1040                                                                                                                                                                                                                            | SW      | 1                                                                               |                               |
| G2NE0761                                                                                                               | 12/27/17                                                                      | 0950                                                                                                                                                                                                                            | SW      | 1                                                                               | Collected by O'Connor         |
| G2NE0323                                                                                                               | 12/27/17                                                                      | 1040                                                                                                                                                                                                                            | SW      | 1                                                                               |                               |
| G2NE0130                                                                                                               | 12/27/17                                                                      | 0915                                                                                                                                                                                                                            | SW      | 1                                                                               |                               |
| SPECIAL INSTRUCTIONS/COMMENTS                                                                                          |                                                                               |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| See QAPP <input type="checkbox"/>                                                                                      |                                                                               |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| SAMPLE RECEIPT: CONDITION/COOLER TEMP: 2.7                                                                             |                                                                               |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| RELINQUISHED BY                                                                                                        |                                                                               | RECEIVED BY                                                                                                                                                                                                                     |         | CUSTODY SEALS: Y <input checked="" type="checkbox"/> N <input type="checkbox"/> |                               |
| Signature: B. Davis                                                                                                    | Signature: PO Connor                                                          |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| Printed Name: B. Davis                                                                                                 | Printed Name: PO Connor                                                       |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| Firm: FDEP DEAR NED                                                                                                    | Firm: DEAR NED ROC                                                            |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| Date/Time: 12/27/17 1230                                                                                               | Date/Time: 12-27-17 1300                                                      |                                                                                                                                                                                                                                 |         |                                                                                 |                               |
| TURNAROUND REQUIREMENTS                                                                                                |                                                                               | REPORT REQUIREMENTS                                                                                                                                                                                                             |         | INVOICE INFORMATION                                                             |                               |
| RUSH (SURCHARGES APPLY)<br><input checked="" type="checkbox"/> STANDARD<br>REQUESTED FAX DATE<br>REQUESTED REPORT DATE |                                                                               | I. Results Only<br>II. Results + QC Summaries (LCS, DUP, MS/MSD as required)<br>III. Results + QC and Calibration Summaries<br>IV. Data Validation Report with Raw Data<br>V. Specialized Forms / Custom Report<br>Edata Yes No |         | PO #<br>BILL TO:<br>RECEIVED BY                                                 |                               |
| RELINQUISHED BY                                                                                                        |                                                                               | RECEIVED BY                                                                                                                                                                                                                     |         | Signature<br>Printed Name<br>Firm<br>Date/Time                                  |                               |
| Signature: B. Davis                                                                                                    | Signature: PO Connor                                                          | Signature: PO Connor                                                                                                                                                                                                            |         | Signature: PO Connor                                                            |                               |
| Printed Name: B. Davis                                                                                                 | Printed Name: PO Connor                                                       | Printed Name: PO Connor                                                                                                                                                                                                         |         | Printed Name: PO Connor                                                         |                               |
| Firm: FDEP DEAR NED                                                                                                    | Firm: DEAR NED ROC                                                            | Firm: DEAR NED ROC                                                                                                                                                                                                              |         | Firm: DEAR NED ROC                                                              |                               |
| Date/Time: 12/27/17 1230                                                                                               | Date/Time: 12-27-17 1300                                                      | Date/Time: 12-27-17 1330                                                                                                                                                                                                        |         | Date/Time: 12-27-17 1330                                                        |                               |



## Miscellaneous Forms

**ALS Environmental—Jacksonville Laboratory**  
9143 Philips Highway, Suite 200, Jacksonville, FL 32256  
Phone (904) 739-2277 Fax (904) 739-2011  
[www.alsglobal.com](http://www.alsglobal.com)



## **FLORIDA DEP DATA QUALIFIERS**

- B Results based upon colony counts outside the acceptable range.
- D Measurement was made in the field.
- H Value based on field kit determination; results may not be accurate.
- I The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.
- J Estimated value (one of the following reasons is discussed in the project case narrative).
1. The result may be inaccurate because the surrogate recovery limits have been exceeded.
  2. No known quality control criteria exists for the component.
  3. The reported value failed to meet the established quality control criteria for either precision or accuracy.
  4. The sample matrix interfered with the ability to make any accurate determination (e.g., primary and confirmation results show greater than 40% RPD).
  5. The data is questionable because of improper laboratory or field protocols (e.g., GC/MS Tune did not meet method criteria).
- K Off scale low. The value is less than the lowest calibration standard but greater than the method reporting limit (MRL).
- L Off scale high. The analyte is above the upper limit of the linear calibration range.
- M The MDL/MRL has been elevated because the analyte could not be accurately quantified due to matrix interference.
- N Presumptive evidence of the analyte. Confirmation was not performed.
- Q Sample held beyond the accepted holding time.
- T Value reported is less than the laboratory method detection limit. The value is reported for informational purposes only.
- U Indicates that the compound was analyzed for but not detected.
- V Indicates that the analyte was detected in both the sample and the associated method blank.
- Y The laboratory analysis was from an improperly preserved sample.
- Z Too many colonies were present (TNTC). The numeric value represents the filtration volume.



**Jacksonville Lab ID # for State Certifications<sup>1</sup>**

| <b>Agency</b>                                                  | <b>Number</b>   | <b>Expiration Date</b> |
|----------------------------------------------------------------|-----------------|------------------------|
| Department of Defense                                          | 66206           | 7/31/2018              |
| Florida Department of Health                                   | E82502          | 6/30/2018              |
| Georgia Department of Natural Resources                        | 958             | 6/30/2018              |
| Kentucky Division of Waste Management                          | 123042          | 6/30/2018              |
| Louisiana Department of Environmental Quality                  | 02086           | 6/30/2018              |
| Maine Department of Health and Human Services                  | 2015002         | 2/3/2019               |
| North Carolina Department of Environment and Natural Resources | 527             | 12/31/2017             |
| Pennsylvania Department of Environmental Protection            | 68-04835        | 8/31/2018              |
| South Carolina Department of Health and Environmental Control  | 96021001        | 6/30/2018              |
| Texas Commission on Environmental Quality                      | T104704197-16-8 | 5/31/2018              |
| Virginia Environmental Accreditation Program                   | 460191          | 12/14/2018             |

<sup>1</sup> Analyses were performed according to our laboratory's NELAP-approved quality assurance program and any applicable state or agency requirements. The test results meet requirements of the current NELAP/TNI standards or state or agency requirements, where applicable, except as noted in the laboratory case narrative provided. For a specific list of accredited analytes, refer to <http://www.alsglobal.com/en/Our-Services/Life-Sciences/Environmental/Downloads/North-America-Downloads>



## **ACRONYMS**

|            |                                                                                                                                          |
|------------|------------------------------------------------------------------------------------------------------------------------------------------|
| ASTM       | American Society for Testing and Materials                                                                                               |
| A2LA       | American Association for Laboratory Accreditation                                                                                        |
| CARB       | California Air Resources Board                                                                                                           |
| CAS Number | Chemical Abstract Service registry Number                                                                                                |
| CFC        | Chlorofluorocarbon                                                                                                                       |
| CFU        | Colony-Forming Unit                                                                                                                      |
| DEC        | Department of Environmental Conservation                                                                                                 |
| DEQ        | Department of Environmental Quality                                                                                                      |
| DHS        | Department of Health Services                                                                                                            |
| DOE        | Department of Ecology                                                                                                                    |
| DOH        | Department of Health                                                                                                                     |
| EPA        | U. S. Environmental Protection Agency                                                                                                    |
| ELAP       | Environmental Laboratory Accreditation Program                                                                                           |
| GC         | Gas Chromatography                                                                                                                       |
| GC/MS      | Gas Chromatography/Mass Spectrometry                                                                                                     |
| LUFT       | Leaking Underground Fuel Tank                                                                                                            |
| M          | Modified                                                                                                                                 |
| MCL        | Maximum Contaminant Level is the highest permissible concentration of a substance allowed in drinking water as established by the USEPA. |
| MDL        | Method Detection Limit                                                                                                                   |
| MPN        | Most Probable Number                                                                                                                     |
| MRL        | Method Reporting Limit                                                                                                                   |
| NA         | Not Applicable                                                                                                                           |
| NC         | Not Calculated                                                                                                                           |
| NCASI      | National Council of the Paper Industry for Air and Stream Improvement                                                                    |
| ND         | Not Detected                                                                                                                             |
| NIOSH      | National Institute for Occupational Safety and Health                                                                                    |
| PQL        | Practical Quantitation Limit                                                                                                             |
| RCRA       | Resource Conservation and Recovery Act                                                                                                   |
| SIM        | Selected Ion Monitoring                                                                                                                  |
| TPH        | Total Petroleum Hydrocarbons                                                                                                             |
| tr         | Trace level is the concentration of an analyte that is less than the PQL but greater than or equal to the MDL.                           |



## Sample Results

**ALS Environmental—Jacksonville Laboratory**  
9143 Philips Highway, Suite 200, Jacksonville, FL 32256  
Phone (904) 739-2277 Fax (904) 739-2011  
[www.alsglobal.com](http://www.alsglobal.com)



## Microbiology

**ALS Environmental—Jacksonville Laboratory**  
9143 Philips Highway, Suite 200, Jacksonville, FL 32256  
Phone (904)739-2277 Fax (904)739-2011  
[www.alsglobal.com](http://www.alsglobal.com)

ALS Group USA, Corp.  
dba ALS Environmental

Analytical Report

**Client:** Florida DEP  
**Project:** LSJR BMAP TRIBS  
**Sample Matrix:** Water  
**Analysis Method:** ASTM D6503-99

**Service Request:** J1708856  
**Date Collected:** 12/27/17  
**Date Received:** 12/27/17  
**Units:** MPN/100mL  
**Basis:** NA

Enterococcus

| Sample Name  | Lab Code     | Result | PQL | Dil. | Date Analyzed  | Q |
|--------------|--------------|--------|-----|------|----------------|---|
| G2NE0130     | J1708856-005 | 240    | 2.0 | 2    | 12/27/17 15:32 |   |
| Method Blank | J1708856-MB  | 1.0 U  | 1.0 | 1    | 12/27/17 15:32 |   |

ALS Group USA, Corp.  
dba ALS Environmental

Analytical Report

**Client:** Florida DEP  
**Project:** LSJR BMAP TRIBS  
**Sample Matrix:** Water  
**Analysis Method:** SM 9223 B

**Service Request:** J1708856  
**Date Collected:** 12/27/17  
**Date Received:** 12/27/17  
**Units:** MPN/100mL  
**Basis:** NA

Escherichia coli

| Sample Name  | Lab Code     | Result | PQL | Dil. | Date Analyzed  | Q |
|--------------|--------------|--------|-----|------|----------------|---|
| G2NE0600     | J1708856-001 | 1210   | 10  | 10   | 12/27/17 15:22 |   |
| G2NE0958     | J1708856-002 | 435    | 10  | 10   | 12/27/17 15:22 |   |
| G2NE0161     | J1708856-003 | 181    | 10  | 10   | 12/27/17 15:22 |   |
| G2NE0323     | J1708856-004 | 20     | 10  | 10   | 12/27/17 15:22 |   |
| Method Blank | J1708856-MB  | 1.0 U  | 1.0 | 1    | 12/27/17 15:22 |   |