



*Ft. Myers Lab02
10090 Bavaria Rd.
Fort Myers, FL 33913
TEL: (239) 590-0337 FAX: (239) 590-0536
Website: www.sanderslabs.net*

September 01, 2017

Arielle Taylor-Manges
DEP-Bureau of Labs-Biology Section
Twin Towers Lab Complex A RM 216 6515
Tallahassee, FL 32399
TEL: (850) 245-8191
FAX:

RE: DEP Fecals

Order No.: 1708827

Dear Arielle Taylor-Manges:

Sanders Laboratories, Inc received 1 sample(s) on 8/28/2017 for the analyses presented in the following report.

These pages may include, but are not limited to: Analytical Data, Chains of Custodies, Subcontracted Data and Case Narratives.

Reports are archived for a minimum of 5 years. Copies of reports are available for a fee of \$50.00. Copies will be provided within 2 weeks of the time of the request.
Laboratory PQL's are available upon request.

Test results meet all the requirements of the NELAP standards, unless otherwise noted.
Nokomis Certificate # E84380 Fort Myers Certificate # E85457

A statement of estimated uncertainty of results is available upon request.
Laboratory report shall not be reproduced except in full, without the written approval of Sanders Laboratories.

Sanders Laboratories follows DEP standard operating procedures for field sampling, unless otherwise noted.

Katie Strothman
Laboratory Director

Original



*Ft. Myers Lab02
10090 Bavaria Rd.
Fort Myers, FL 33913
TEL: (239) 590-0337 FAX: (239) 590-0536
Website: www.sanderslabs.net*

Definition Only

WO#: 1708827
Date: 9/1/2017

Definitions:

B: Results based upon colony counts outside the acceptable range.

G: Sample value indicates that the analyte was detected at or above the method detection limit in both the sample and the associated field blank, equipment blank, or trip blank, and the blank value was greater than 10% of the associated sample value. The value in the blank shall not be subtracted from associated samples.

I: The reported value is greater than or equal to the laboratory MDL but less than the laboratory PQL.

J: Estimated Value.

J7: Excessive amounts of Sodium Sulfite used to dechlorinate the sample due to high levels of chlorine present.

K: Off scale low, actual value is known to be less than the value given.

L: Off scale high, actual value is known to be greater than the value given.

NC: Not Certified. Parameter was ran but is not covered under laboratory accredited scopes.

Q: Sample held beyond acceptable holding time.

U: The compound was analyzed for, but not detected.

V: Indicates that the analyte was detected at or above the MDL in both the sample and the associated method blank and the value of 10 times the blank value was equal to or greater than the associated sample value.

Y: The laboratory analysis was from an improperly preserved sample.

Z: Too many colonies were present for accurate counting.



Ft. Myers Lab02
10090 Bavaria Rd.
Fort Myers, FL 33913
TEL: (239) 590-0337 FAX: (239) 590-0536
Website: www.sanderslabs.net

Analytical Report

(continuous)

WO#: 1708827

Date Reported: 9/1/2017

CLIENT: DEP-Bureau or Labs-Biology Section

Lab Order: 1708827

Project: DEP Fecals

Lab ID: 1708827-001

Collection Date: 8/28/2017 11:20:00 AM

Client Sample ID: 2820268FTM

Matrix: AQUEOUS

Analyses	Result	MDL	Qual	Units	DF	Date Analyzed
----------	--------	-----	------	-------	----	---------------

TOTAL COLIFORM MMO-MUG

A9223B

Analyst: KS

Escherichia Coli	214	1.00		MPN/100mL	1	8/28/2017 3:05:00 PM
------------------	-----	------	--	-----------	---	----------------------

Qualifiers:

H Holding times for preparation or analysis exceeded
ND Not Detected at the Reporting Limit
RL Reporting Detection Limit
W Sample container temperature is out of limit as specified at testcode

M Manual Integration used to determine area response
PL Permit Limit
U Samples with CalcVal < MDL

Original



CHAIN OF CUSTODY RECORD

Project #
(Lab Use Only)

1702827

Client:

FDEP Bureau of Labs

Address:

2600 Blair Stone Rd
Tallahassee FL 32399

Phone:

Fax:

Report To:

Carina Tull

Email:

Bill to:

Carina Tull

P.O. #

Lab 039

Project Name:

SMP

Project Location:

Pollywog Creek

Customer Type:

Kit #:

Requested Due Date:

Preservative: HCL = H, HNO₃ = N, Na₂S₂O₃ = STH₂SO₄ = S, NaOH = SH, NH₄Cl = NH

Sampled By (PRINT)

Ben Paswater

Sampler Signature

Ben Paswater

Sample

Preservatives

Matrix

Sample Description

Date

Time

Type

SW

2820268 FTM

8/28/17

1120

SW

pH

Ice

Quant
E-ColiSample
ID #
(Lab Use
Only)

1A

Bottle Lot #

Comments

Relinquished By/Affiliation

Date

Time

Accepted By/Affiliation

Date

Time

10322

RQ-2017-08-28-02

Okay to Run
As Is...

Client Initial:

Samples On
Ice

Yes No

Ben Paswater

8/28/17

1325

Ben Paswater

8/28

1325

1.8