

RQ- 2017-12-04-25

Log-in Checklist

Shipping Method: FedexDate/Time of Receipt: 12-7-17 / 10:35

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
<u>Red</u>	<u>2.1</u>	<u>8</u>		☒		

*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			W-CT-CI-R		

PRESERVATION CHECK (EXCLUDING SAMPLES SENT TO OVERFLOW LABS, "OV-")

**Acid Preserved Samples: pH ≤ 2.0? Yes ☒ No ☐ NA ☐ Init: SR

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

Coolers Unpacked/Checked by: SR Date: 12-7-17

NCRs (Y/N)? N

Event ID: NW-DIS-2017-12-07-02

NCR # 6806

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:

Central Laboratory Submittal Form

Customer: NW-DIST

Project ID: SMP

Requester: Michael King

Field Report Prepared By: W Bretana

Collected By: S Stadel W Bretana

Sampling Agency: FDEP NW ROC

Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 12/5/17 Time 1230		Eastern Central	Composite end Date Time		Bottle Group(s) (See pg 2)	
Field ID G3NW0077		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 5.87		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		A
STORET # G3NW0077		Temp (C) 17.74		pH 5.44		Sample Depth 0.3		Sp. Conductance (umho/cm) 27		
Latitude ☐ dd ☐ dms		Salinity (ppt) 0.01		Comments						
Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 12/5/17 Time 1230		Eastern Central	Composite end Date Time		Bottle Group(s)	
Field ID G4NW0361		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 9.53		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		A
STORET # G4NW0361		Temp (C) 18.41		pH 5.82		Sample Depth 0.3		Sp. Conductance (umho/cm) 22		
Latitude ☐ dd ☐ dms		Salinity (ppt) 0.01		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)		
STORET #		Temp (C)		pH		Sample Depth		Sp. Conductance (umho/cm)		
Latitude ☐ dd ☐ dms		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)		
STORET #		Temp (C)		pH		Sample Depth		Sp. Conductance (umho/cm)		
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms		Salinity (ppt)		Comments				

Relinquished By: W Bretana	Date/Time: 12/5/17 1630	Shipping Method: FedEx	Number of Coolers Shipped: 1	Received By: SR	Date/Time: 12-7-17 10135
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Group: A	Bottle Type:	P-1L	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
	ALKALINITY					
	TURBIDITY					
	W-CL-IC					
	W-COLOR					
	W-F					
	W-SO4-IC					
	W-TDS					
	W-TSS					

Group: A	Bottle Type:	BP-1L	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab _____
	CHLSUITE-W					

Group: A	Bottle Type:	P-500ML	# of Bottles: 2	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab _____
	W-NH3					
	W-NO2NO3					
	W-S-A-TP					
	W-TKN					
	W-TOC					

Group: A	Bottle Type:	P-125ML	# of Bottles: 2	Preservative:	FILTER-ICE	Enter Number of Bottles Sent to Lab _____
	W-PO4-F					

Date of Request: 17-OCT-2017
 Created By: KING_M On: 17-OCT-2017
 Modified By: WALTERS_J On: 13-NOV-2017
 Customer: NW-DIST
 Project: SMP
 Division: Division of Environmental Assessment and Restoration
 District: Northwest ROC
 Sampling Event: East Lake Run WBID 179A 61A

Send Coolers To:

Phone: SC-695-0605
 160 W Government St
 Suite 208A
 Pensacola, FL 32502-5794
 Attn: Michael King

Send Final Report To:

160 W Government St
 Suite 208A
 Pensacola, FL 32502-5794
 Attn: Michael King

Program Module Number: 1306
 Priority: 3
 Event Status: A
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 13-NOV-2017
 Biology Request Reviewed By: WALTERS_J On: 13-NOV-2017
 Sampling Kit Required: NO Ship on:
 Sampling Kit Shipped:
 Sampling Kit Packed By:
 Preservatives Needed: NO
 Date to Receive Samples: 04-DEC-2017
 Received By:

Report Type: Final Only
 FTP Data: NO
 QC Report: YES
 Date Log: NO
 Authorization Log: NO

Comments:

Bottle Group A (Water) With 2 Samples:

Bottle Type: P-1L	Number of Bottles: 2	Preserved With: ICE
ALKALINITY	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO3/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-SO4-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: 2	Preserved With: ICE
CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry
Bottle Type: P-500ML	Number of Bottles: 2	Preserved With: ICE And H2SO4
W-NH3	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
W-NO2NO3	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: 2	Preserved With: FILTER-ICE
W-PO4-F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L

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FedEx Package
Express **US Airbill**
FedEx
Tracking
Number

8029 9109 7350

Form
ID No.

0215

SPH1

Recipient's Copy

1 From

Date 12/5/17

Sender's
Name

Bretana

Phone 850 595-8300

Company

FDEP

Address

100 W Government St

Dept./Floor/Suite/Room

City

Pensacola

State

FL

ZIP

32502

2 Your Internal Billing Reference

3 To

Recipient's
Name

Phone 850 245-8085

Company

FLORIDA DEP/CHEMISTRY SECTION

Address 2600 BLAIRSTONE RD

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Dept./Floor/Suite/Room

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City TALLAHASSEE

State

FL

ZIP

32399-6542

HOLD Weekday
FedEx location address
REQUIRED. NOT available for
FedEx First Overnight.
☐
HOLD Saturday
FedEx location address
REQUIRED. Available ONLY for
FedEx Priority Overnight and
FedEx 2Day to select locations.
☐

8029 9109 7350

4 Express Package Service

* To most locations.
NOTE: Service order has changed. Please select carefully.
Packages up to 150 lbs.
For packages over 150 lbs., use the
FedEx Express Freight US Airbill.

Next Business Day

☐ **FedEx First Overnight**
Earliest next business morning delivery to select
locations. Friday shipments will be delivered on
Monday unless SATURDAY Delivery is selected.

☒ **FedEx Priority Overnight**
Next business morning.* Friday shipments will be
delivered on Monday unless SATURDAY Delivery
is selected.

☐ **FedEx Standard Overnight**
Next business afternoon.*
Saturday Delivery NOT available.

2 or 3 Business Days

☐ **FedEx 2Day A.M.**
Second business morning.*
Saturday Delivery NOT available.

☐ **FedEx 2Day**
Second business afternoon.* Thursday shipments
will be delivered on Monday unless SATURDAY
Delivery is selected.

☐ **FedEx Express Saver**
Third business day.*
Saturday Delivery NOT available.

5 Packaging

* Declared value limit \$500.

☐ FedEx Envelope*☒ FedEx Pak*☐ FedEx
Box☐ FedEx
Tube☒ Other

6 Special Handling and Delivery Signature Options

☐ **SATURDAY Delivery**
NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

☐ **No Signature Required**
Package may be left without
obtaining a signature for delivery.

☐ **Direct Signature**
Someone at recipient's address
may sign for delivery. *Fee applies.*
☐ **Indirect Signature**
If no one is available at recipient's
address, someone at a neighboring
address may sign for delivery. For
residential deliveries only. *Fee applies.*

Does this shipment contain dangerous goods?

One box must be checked.

☒ **No** ☐ **Yes**
As per attached
Shipper's Declaration. ☐ **Yes**
Shipper's Declaration
not required.

☐ **Dry Ice**
Dry Ice, 9 UN 1845 _____ x _____ kg

 Dangerous goods (including dry ice) cannot be shipped in FedEx packaging
or placed in a FedEx Express Drop Box.

☐ **Cargo Aircraft Only**

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

Obtain recip.
Acct. No. ☐
☐ **Sender**
Acct. No. in Section
1 will be billed.

☒ **Recipient**
☐ **Third Party**
☐ **Credit Card**
☐ **Cash/Check**

Total Packages

Total Weight

1 60 lbs.

Credit Card Auth.

*Our liability is limited to US\$100 unless you declare a higher value. See the current FedEx Service Guide for details.

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