

Request Number: RQ-2017-06-20-36

SMP 2016 Freshwater Kit A

Florida Department of Environmental Protection Central Laboratory Submittal Form

Page 1 of 2

last revised Apr 7, 2016

Customer: WQAP

Requester: Chris Green

Field Report Prepared By:

Woods

Project ID: SMP

Collected By:

Woods/Green

Sampling Agency:

8034

Location <u>Alligator Creek @ CS NW 86th</u>		☐ Comp ☒ Grab		Collection (comp begin or grab) Date <u>10/4/17</u> Time <u>1330</u>		Eastern Central		Composite end Date _____ Time _____		Bottle Group(s) (See pg 2)	
Field ID <u>G1TLHR0017-2017-04</u>		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen <u>7.24</u>		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		A	
STORET # <u>G1TLHR0017</u>		Temp (C) <u>22.67</u> pH <u>4.33</u>		Sample Depth <u>0.3</u>		☐ ft ☒ m		Sp. Conductance (umho/cm) <u>90</u>			
Latitude ☐ dd ☐ dms Longitude ☐ dd ☐ dms		Salinity (ppt) <u>0.04</u>		Comments							
Location <u>G1TLHR0027-2017-04</u>		☐ Comp ☒ Grab		Collection (comp begin or grab) Date <u>10/4/17</u> Time <u>14:25</u>		Eastern Central		Composite end Date _____ Time _____		Bottle Group(s)	
Field ID <u>WBID 3422Q</u>		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen <u>1.53</u>		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		A	
STORET # <u>Field ID ↑ STORET ↓</u>		Temp (C) <u>23.56</u> pH <u>6.90</u>		Sample Depth <u>0.3</u>		☐ ft ☒ m		Sp. Conductance (umho/cm) <u>146</u>			
Latitude ☐ dd ☐ dms Longitude ☐ dd ☐ dms		Salinity (ppt) <u>0.07</u>		Comments <u>time entered from bottle JTW</u>							
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							
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: <u>Woods</u>	Date/Time <u>10/4/17 1612</u>	Shipping Method <u>HO</u>	Number of Coolers Shipped: <u>1</u>	Received By: <u>JTW</u>	Date/Time <u>4:15 10/4/17</u>
----------------------------------	----------------------------------	------------------------------	--	----------------------------	----------------------------------

Log-in Checklist

RQ- 2017-07-17-36

Shipping Method: #D

Date/Time of Receipt: 10/4/17 4:15

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				
red	1.9	8		✓			

*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: JHW

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

Coolers Unpacked/Checked by: JHW Date: 10/4/17 NCRs (Y/N)? N

Event ID: TLH-ROC-2017-10-04-01 NCR #

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: