

RUN 8

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQAP

Requester: Judy Ashton

Field Report Prepared By: Judy Ashton

Project ID: SMP

Collected By: J. Ashton, L. Baker

Sampling Agency: _____

Location	RQ-2017-10-02-17 Date: 10-03-2017 Time:	Field ID G1SW0021	STORET G1SW0021	Dead Lady	Latitude dd dms	Longitude	dd dms	Salinity (ppt)	0.06	Comments	
Field ID	RQ-2017-10-02-17 Date: 10-03-2017 Time:	Field ID G1SW0019	STORET G1SW0019	Juanita	Latitude dd dms	Longitude	dd dms	Salinity (ppt)	0.06	Comments	
Field ID	RQ-2017-10-02-17 Date: 10-03-2017 Time:	Field ID G1SW0010	STORET G1SW0010	Rock Lake	Latitude dd dms	Longitude	dd dms	Salinity (ppt)	0.07	Comments	
Field ID	RQ-2017-10-02-17 Date: 10-03-2017 Time:	Field ID G1SW0064	STORET G1SW0064	Chapman	Latitude dd dms	Longitude	dd dms	Salinity (ppt)	0.12	Comments	

Location	RQ-2017-10-02-17 Date: 10-03-2017 Time:	Field ID G1SW0021	STORET G1SW0021	Dead Lady	Latitude dd dms	Longitude	dd dms	Salinity (ppt)	0.06	Comments	
Field ID	RQ-2017-10-02-17 Date: 10-03-2017 Time:	Field ID G1SW0019	STORET G1SW0019	Juanita	Latitude dd dms	Longitude	dd dms	Salinity (ppt)	0.06	Comments	
Field ID	RQ-2017-10-02-17 Date: 10-03-2017 Time:	Field ID G1SW0010	STORET G1SW0010	Rock Lake	Latitude dd dms	Longitude	dd dms	Salinity (ppt)	0.07	Comments	
Field ID	RQ-2017-10-02-17 Date: 10-03-2017 Time:	Field ID G1SW0064	STORET G1SW0064	Chapman	Latitude dd dms	Longitude	dd dms	Salinity (ppt)	0.12	Comments	

Relinquished By: <u>J. Ashton</u>	Date/Time: <u>10-2-17 1700</u>	Shipping Method: <u>FedEx</u>	Number of Coolers Shipped: <u>1</u>	Received By: <u>ABD</u>	Date/Time: <u>10-4-17/1000</u>
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Group: A	Bottle Type:	P-1L	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
	ALKALINITY						
	TURBIDITY						
	W-CL-IC						
	W-COLOR						
	W-F						
	W-SO4-IC						
	W-TDS						
	W-TSS						
Group: A	Bottle Type:	BP-1L	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 4	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	4
	W-NH3						
	W-NO2NO3						
	W-S-A-TP						
	W-TKN						
	W-TOC						
Group: A	Bottle Type:	P-125ML	# of Bottles: 4	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	4
	W-PO4-F						

Date of Request: 06-SEP-2017
 Created By: ASHTON_J On: 06-SEP-2017
 Modified By: SWANSON_C On: 07-SEP-2017
 Customer: WQAP
 Project: SMP
 Division: Division of Environmental Assessment and Restoration
 District:
 Sampling Event: RUN 8

Send Coolers To:

Phone: 813-470-5772
 13051 N. Telecom Parkway

 Tampa, FL 33637
 Attn: Judy Ashton

Program Module Number:

Priority: 3
 Event Status: R
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 06-SEP-2017
 Biology Request Reviewed By: SWANSON_C On: 07-SEP-2017
 Sampling Kit Required: YES Ship on: 20-SEP-2017
 Sampling Kit Shipped: YES On: 19-SEP-2017
 Sampling Kit Packed By: REYNOLDS_T
 Preservatives Needed: NO
 Date to Receive Samples: 02-OCT-2017
 Received By: SHAIK_A On: 04-OCT-2017

Send Final Report To:

13051 N. Telecom Parkway

 Tampa, FL 33637
 Attn: Judy Ashton

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

Comments: Group A: Freshwater Kit, No Metals

Bottle Group A (Water) With 4 Samples:

Bottle Type: P-1L	Number of Bottles: 4	Preserved With: ICE
ALKALINITY	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO ₃ /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: 4	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: 4	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: 4	Preserved With: ICE-FLTR
W-PO4-F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L

RQ- 2017-10-02-17

Log-in Checklist

Shipping Method: Fed ExpDate/Time of Receipt: 10-4-17 11:00

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				
Reel	3.9c	16		✓			

*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: ABP

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

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

Event ID: RUN 8
WQAP-2017-10-04-01 (SMP)
 Date Received: 04-OCT-2017 10:00

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:

FedEx NEW Package
Express US Airbill
FedEx
Tracking
Number

8768 6103 8758

1 From This portion can be removed for Recipient's records.

Date 10-2-17 FedEx
Tracking Number

876861038758

Sender's
Name

Phone

813 476 5760

Company

Address

City

State

ZIP

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./Room/Suite/Room

Address

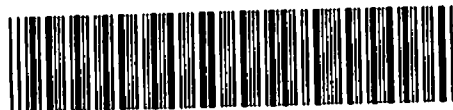
Use this line for the HOLD location address or for continuation of your shipping address.

City FALLAHASSEE

State FL

ZIP 32399-6542

0442083090



8768 6103 8758

Form
ID No. 0215

Recipient's Copy

4 Express Package Service

* To most locations.

NOTE: Service order has changed. Please select carefully.

Packages up to 150 lbs.
For packages over 250 lbs., use the new
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

☐ NEW 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 \$200.

☐ 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, & UN 1845 _____ 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
I will be billed.

☒ Recipient

☐ Third Party

☐ Credit Card

☐ Cash/Check

☐ Sender
Acct. No. in Section
I will be billed.

Total Packages

Total Weight

Credit Card Auth.

Your liability is limited to \$200 unless you declare a higher value. See the current FedEx Service Guide for details.

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