A-KIT

PAGE 1 OF 1

Data Qualified? Yes / No

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2017

STORET Station Name: TROUT CREEK **Date:** 7-13-17 (mm/dd/yyyy)

STORET Station ID: G2SW0021 **WBID:** 1455 **Latitude:** 28 05 51.462 (Decimal Degrees)

County: Hills **RQ -** 2017-07-10-24 **ORG ID:** 21FLTPA **Longitude:** 82 21 30.388 (Decimal Degrees)

Receiving Body of Water: _____ **Field ID:** G2SW0021

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Judy Ashton		X			
Hannah Simmons	X		X		

Sampling Equipment

- [X] Sample Container
- [ ] Carboy
- [ ] Dipper
- [ ] Van Dorn
- [ ] Syringe
- [ ] Other
- [ ] Pole

Equipment ID _____

Collection Method

- [X] Wading
- [ ] From Shore
- [ ] Other (note below)

Via Boat
- [ ] Canoe/Kayak
- [ ] Electric Motor
- [ ] Gasoline Motor

Water Level: Dry / Pooled / Low / Normal / High / (Flooded)

Matrix: (Fresh) / Marine / DI

Meter ID# LIC JON **Photos:** Yes / (No)

Tide Falling: Yes / No / (NA)

Time Zone	Time	Sample Depth (m)	Total Depth (m)	DO (mg/L)	DO (%SAT)	pH	Salinity (ppt)	Secchi Disk (m)	Sp COND (µmhos/cm)	Temp. (C°)
(EST)	950	0.3		5.1	60	7.1	0.1	0.5	164	25.8
CEN			0.5					11'5"		

Biological Samples Collected: (None) HA SCI RPS Algae ID LVS LVI Other _____

SBIO ID Numbers: SBIO-ID: RPS-ID: Macrophyte-ID: LIMS#:

Parameter Suite	Parameter Methods	Preservation	Acid Lot#	Expiration	pH Check
Preserved Nutrients	[X] W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	[X] Ice [X] H_2SO_4			[X] <2
Metals	[ ] W-ICPMS [ ] W-ICP	[ ] Ice [ ] HNO_3			[ ] <2
Filtered Nutrients	[X] W-PO4-F [ ] Field Filtered 0.45 µm Filter	[X] Ice			
Chlorophyll	[X] CHLSUITE-W	[X] Ice			
Physical/Aggregate (Fresh)	[X] Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-IC / W-COLOR / W-SO4-IC / W-TDS	[X] Ice			
Physical/Aggregate (Marine)	[ ] Alkalinity / W-F / W-TSS / TURBIDITY	[ ] Ice			
Macroinvertebrates	[ ] MI-FW-QLDC	[ ] Formalin			
Periphyton	[ ] ALGAE-ID	[ ] Ice			
Microbiology	[X] E Coli [ ] F Coli [ ] Entero [ ] PCR-FILTER	[ ] Ice			
Tracers	[X] W-SUC-AA-R [X] W-UHERB-AA	[ ] Ice			
Pesticides	[ ] W-PSNP-TQ [ ] W-AHERB-AA [ ] W-PYR-AA-R [ ] W-PCL-SQ-R [X] W-UHERB-AA [ ] W-GLYPH	[ ] Ice [ ] Other			
Flow	"J" Qualify Flow 0.33 m/s				

Place Preservative Sticker(s) Here (If Available)

Notes: PCR-FILTER PREVIOUSLY DRY

RQ-2017-07-10-24
Date: 07-13-2017
Time:
Trout Crk

G2SW0021
Field ID
STORET
G2SW0021

Signature: _____ **Date:** 7-13-17

Field Parameters Entered into LIMS: SM 08/22/2017 (Initials/Date)

Field Parameters QC in LIMS: SM 10/16/2017 (Initials/Date)

Date Migrated to STORET: _____ (Initials/Date)

Field Sheets Scanned/Saved: SM 10/16/2017 (Initials/Date)

Request Number: RQ-2017-07-10-24

RUN 13/14

Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQAP

Project ID: SMP

Requester: Judy Ashton

Collected By: J. Ashton, H. Saranille

Field Report Prepared By: J. Ashton

Sampling Agency: FAEP

Location / Field ID / STORET # / Latitude	Comp/Grab	Collection (comp begin or grab)	Eastern/Central	Composite end	Bottle Group(s) (See pg 2)
RQ-2017-07-10-24 Date: 07-13-2017 Time: G2SW0011 Field ID STORET G2SW0011 New River	☒ Grab	Date 7-13-17 Time 905	Eastern	Date / Time —	A/B
	Matrix: Fresh	Diss. Oxygen 1.8 ☒ mg/L	Total Res. Chlorine (mg/L) —		
	Temp (C) 26.8	pH 7.3	Sample Depth 0.3 ☒ m	Sp. Conductance (umho/cm) 170	
	Salinity (ppt) 0.1	Comments: Dropped off E. Coli @ AEL			
RQ-2017-07-10-24 Date: 07-13-2017 Time: G2SW0021 Field ID STORET G2SW0021 Trout Crk	☒ Grab	Date 7-13-17 Time 950	Eastern	Date / Time —	B/C
	Matrix: Fresh	Diss. Oxygen 5.1 ☒ mg/L	Total Res. Chlorine (mg/L) —		
	Temp (C) 25.8	pH 7.1	Sample Depth 0.3 ☒ m	Sp. Conductance (umho/cm) 164	
	Salinity (ppt) 0.1	Comments: Dropped off E. Coli @ AEL			
RQ-2017-07-10-24 Date: 07-13-2017 Time: G2SW0019 Field ID STORET G2SW0019 Blackwater Crk	☒ Grab	Date 7-13-17 Time 1125	Eastern	Date / Time —	B
	Matrix: Fresh	Diss. Oxygen 6.9 ☒ mg/L	Total Res. Chlorine (mg/L) —		
	Temp (C) 26.8	pH 7.6	Sample Depth 0.3 ☒ m	Sp. Conductance (umho/cm) 209	
	Salinity (ppt) 0.1	Comments: Dropped off E. Coli @ AEL			
RQ-2017-07-10-24 Date: 07-13-2017 Time: G2SW0012 Field ID STORET G2SW0012 Baker	☒ Grab	Date 7-13-17 Time 1220	Eastern	Date / Time —	B
	Matrix: Fresh	Diss. Oxygen 5.7 ☒ mg/L	Total Res. Chlorine (mg/L) —		
	Temp (C) 26.4	pH 7.5	Sample Depth 0.5 ☒ m	Sp. Conductance (umho/cm) 234	
	Salinity (ppt) 0.1	Comments: Dropped off E. Coli @ AEL			

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
Judy Ashton	7-13-17 1700	FedEx	2		

Group: A	Bottle Type: P-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	2
	ALKALINITY TURBIDITY W-CL-IC W-COLOR W-F W-SO4-IC W-TDS W-TSS					
Group: A	Bottle Type: BP-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	2
	CHLSUITE-W					
Group: A	Bottle Type: P-500ML	# of Bottles: 1	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	2
	W-NH3 W-NO2NO3 W-S-A-TP W-TKN W-TOC					
Group: A	Bottle Type: P-125ML	# of Bottles: 1	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	2
	W-PO4-F					
Group: B	Bottle Type: P-120ML-WC-THI	# of Bottles: 6	Preservative:	ICE	Enter Number of Bottles Sent to Lab	9
	SE-AEL-EC DROPPED OFF P AEL					
Group: C	Bottle Type: QPCR-P-250ML	# of Bottles: 8	Preservative:	ICE	Enter Number of Bottles Sent to Lab	8
	PCR-FILTER					
Group: C	Bottle Type: BG-1L	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
	W-AHERB-AA W-SUC-AA-R W-UHERB					
Group: C	Bottle Type: TEST HAS NO BOTTLE	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	
	~~X-UHERB-AA~~					
Group: D	Bottle Type: QPCR-P-250ML	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
	PCR-FILTER PCR-GULL2 PCR-HF183					

Advanced
Environmental Laboratories, Inc.
☐ 6601 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574
☑ 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84569
☐ 2106 NW 67th Place, Ste. 7 • Gainesville, FL 32606 • 352.367.1500 • Fax 352.367.0050 • E82620
☐ 528 S. North Lake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597 • E83076

LAB NUMBER:

Page 1 of 2

CLIENT NAME: FDEP - SW District	PROJECT NAME: TMDL / SMP		
ADDRESS: 13051 N. Telecom Pkwy	P.O. NUMBER/PROJECT NUMBER:		
Temple Terrace, FL 33637	PROJECT LOCATION: Florida		
PHONE: 813-470-5700	FAX: 813-470-5996		
CONTACT: Matthew Bearden Sarah Ernst	SAMPLED BY:		
TURN AROUND TIME: ☑ STANDARD ☐ RUSH	REMARKS/SPECIAL INSTRUCTIONS: PO AF315E		

Samples are ambient water and not suspected to contain chlorine

WW=waste water SW=surface water GW=ground water DW=drinking water O=oil A=air SO=soil SL=sludge

Field ID	SITE NAME	Grab Comp	SAMPLING DATE	SAMPLING TIME	MATRIX	NO. COUNT
RQ-2017-07-10-24 Date: 07-13-2017 Time:	G2SW0011 Field ID STORET G2SW0011	Grab	7-13-17	905	SW	1
New River						
RQ-2017-07-10-24 Date: 07-13-2017 Time:	G2SW0021 Field ID STORET G2SW0021	Grab	7-13-17	950	SW	1
Trout Crk		Grab			SW	
RQ-2017-07-10-24 Date: 07-13-2017 Time:	G2SW0019 Field ID STORET G2SW0019	Grab	7-13-17	1125	SW	1
Blackwater Crk		Grab			SW	
RQ-2017-07-10-24 Date: 07-13-2017 Time:	G2SW0012 Field ID STORET G2SW0012	Grab	7-13-17	1220	SW	1
Baker						

Preserv	Ice, T	BOTTLE SIZE & TYPE	LAB NUMBER
		Sterile Plastic Bottle / Fecal Coliforms	E, Col
	ICE		
			1
			1
			1
			1

Ice H=(HCl) S=(H_2SO_4) N=(HNO_3) T=(Sodium Thiosulfate)

Shipment Out: _____ Ret: _____ Method Via: _____ Via: _____

Sample Kit RB _____ D/T _____ AB _____ D/T _____ Trip Bl. _____ Cooler # _____

Received on Ice ☐ Yes ☐ No QC ☐ sent ☐ received

	Relinquish by:	Date	Time	Received by:	Date	Time
1	Joey Ash	7-13-17	1411		7/13/17	1411
2						
3						
4						

revised 1/12

FedEx Express Package US Airbill

FedEx Tracking Number 8115 9628 0642

Form ID No. 0215

From *Please print and press hard.*

Date

Sender's FedEx Account Number

Sender's Name

Phone (813) 470-5700

Company F DEP

Address 13051 N Telecom Pkwy 101

Dept./Floor/Suite/Room

City Temple Terrace State FL ZIP 33637

Your Internal Billing Reference
First 24 characters will appear on invoice.

To

Recipient's Name SAMPLE RECEIVING

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.

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.

City TALLAHASSEE State FL ZIP 32399

0126912290

Ship it. Track it. Pay for it. All online.
Go to fedex.com

4 Express Package Service

* To most locations.

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.
- [X] 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
- [X] Other

6 Special Handling and Delivery Signature Options

Fees may apply. See the FedEx Service Guide.

- [ ] 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.
- [ ] Indirect Signature — If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only.

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

Restrictions apply for dangerous goods — see the current FedEx Service Guide.

- [ ] Cargo Aircraft Only

7 Payment *Bill to:*

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

- [ ] Sender — Acct. No. in Section 1 will be billed.
- [X] Recipient
- [ ] Third Party
- [ ] Credit Card
- [ ] Cash/Check

FedEx Acct. No. / Credit Card No. 4490-2262-9 Exp. Date

Total Packages	Total Weight	Total Declared Value†
	lbs.	$ .00

†Our liability is limited to US$100 unless you declare a higher value. See back for details. By using this airbill you agree to the service conditions on the back of this airbill and in the current FedEx Service Guide, including terms that limit our liability.

611

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PULL AND RETAIN THIS COPY BEFORE AFFIXING TO THE PACKAGE. NO POUCH NEEDED.

MUR4

FedEx Express Package US Airbill

FedEx Tracking Number 8115 9551 7929

Form ID No. 0215

From *Please print and press hard.*

Date 07/13/15

Sender's FedEx Account Number

Sender's Name

Phone (813) 470-5700

Company F DEP

Address 13051 N Telecom Pkwy 101

Dept./Floor/Suite/Room

City Temple Terrace State FL ZIP 33637

Your Internal Billing Reference
First 24 characters will appear on invoice.

To

Recipient's Name SAMPLE RECEIVING

Phone (850) 245-8085

Company FLORIDA DEP/CHEMISTRY SECTION

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

Dept./Floor/Suite/Room

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City TALLAHASSEE State FL ZIP 32399

0126912290

Ship it. Track it. Pay for it. All online.
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* To most locations.

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- [X] Other

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- [X] Recipient
- [ ] Third Party
- [ ] Credit Card
- [ ] Cash/Check

FedEx Acct. No. / Credit Card No. 4490-2262-9 Exp. Date

Total Packages	Total Weight	Total Declared Value†
1	50 lbs.	$ – .00

†Our liability is limited to US$100 unless you declare a higher value. See back for details. By using this airbill you agree to the service conditions on the back of this airbill and in the current FedEx Service Guide, including terms that limit our liability.

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