



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2017

A-KIT

PAGE 1 OF 1

Data Qualified?

Yes / No

STORET Station Name:

BAKER CREEK

Date:

6-5-17

STORET Station ID:

G2SW0012

WBID:

1522C

Latitude:

28° 02' 52.4" N

County:

Hillsborough RQ - 2017-06-05-35

ORG ID: 21FLTPA

Longitude:

82° 16' 05.7" W

Receiving Body of Water:

Field ID:

G2SW0012

Sampling Team Members

Judy Ashton
Laurie Bachler

Sampling Equipment

- ☒ Sample Container ☐ Van Dorn ☐ Pole
☐ Carboy ☐ Syringe
☐ Dipper ☐ Other

Equipment ID

Collection Method

- ☐ Wading ☐ Via Boat
☒ From Shore ☐ Canoe/Kayak
☐ Other (note below) ☐ Electric Motor
☐ Gasoline Motor

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

Matrix: Fresh / Marine / DI

Meter ID#

Wetzel

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	1055	0.3		2.7	33	6.9	0.14		300	24.8
CEN			0.3					0.3		

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
Reserved Nutrients	☒ W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	☒ Ice ☒ H2SO4			☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO3			☐ <2
Filtered Nutrients	☒ W-PO4-F ☐ Field Filtered 0.45 µm Filter	☒ Ice			
Chlorophyll	☒ CHL-SUITE-W	☒ Ice			
Physical/Aggregate (Fresh)	☒ Alkalinity / W-F / W-TSS / TURBIDITY / W-CHL / W-COLOR / W-SO4-IC / W-TDS	☒ Ice			
Physical/Aggregate (Marine)	☐ Alkalinity / W-F / W-TSS / TURBIDITY	☐ Ice			
Macroinvertebrates	☐ MI-FW-QLDC	☐ Formalin			
Periphyton	☐ ALGAE-ID	☐ Ice			
Microbiology	☒ E Coli ☐ F Coli ☐ Enterococcus ☐ PCR-FILTER	☒ Ice			
Tracers	☐ W-SUC-AA-R ☐ W-UHERB-AA	☐ Ice			
Pesticides	☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R ☐ W-PCL-SQ-R ☐ W-UHERB-AA ☐ W-GLYPH	☐ Ice ☐ Other			

Place Preservative Sticker(s) Here
(If Available)

Notes:

RQ-2017-06-05-35

Date: 06/05/17

Time:

Baker Creek

G2SW0012

↓ STORET Field ID ↑

G2SW0012

Signature:

[Signature]

Date:

6-5-17

Field Parameters Entered into LIMS: SM 06/06/2017

(Initials/Date)

Field Parameters QC in LIMS: LB 6-7-17

(Initials/Date)

Date Migrated to STORET:

(Initials/Date)

Field Sheets Scanned/Saved: SM 09/25/2017

(Initials/Date)



Client Name:		FDEP		Project Name:		SMP		BOTTLE SIZE & TYPE												
Address:		13051 N. Telecom Pkwy		Project Number:		PA: 2017-06-05-35			ANALYSIS REQUIRED										LABORATORY I.D. NUMBER	
		Temple Terrace, FL 33637		PO Number:		AF3ISE														
Phone:		813-470-5700		FDEP Facility No:		SW ROC														
FAX:				FDEP Facility Address:		13051 N. Telecom Pkwy														
Contact:		Matt Bearden				Temple Terrace, FL, 33637														
Sampled By:		L. Bachler / J. Ashton		Special Instructions:						E Coli										
Turn Around Time:		☒ STANDARD ☐ RUSH																		
AEL Profile #:																				
						☐ ADaPT ☐ EQuIS ☐ Other														
SAMPLE ID	SAMPLE DESCRIPTION	Grab Comp	SAMPLING		MATRIX	NO. COUNT	Preservation	Ice												
			DATE	TIME			Field-Filtered?													
G2SW0006	English Creek	X	6-5-17	0940	FW	1			1											
G2SW0022	Mill Creek	X	6-5-17	1025	FW	1			1											
G2SW0012	Baker creek	X	6-5-17	1055	FW	1			1											
G2SW0046	Delany Creek 1	X	6-5-17	1135	FW	1			1											
G2SW0066	Delany Creek 2	X	6-5-17	1150	FW	1			1											
Matrix Code: WW = wastewater SW = surface water GW = ground water DW = drinking water O = oil A = air SO = soil SL = sludge								Preservation Code: I = ice H=(HCl) S = (H ₂ SO ₄) N = (HNO ₃) T = (Sodium Thiosulfate)												

Received on Ice ☒ Yes ☐ No ☐ Temp taken from sample ☐ Temp from blank ☐ Where required, pH checked

Temp. when received (observed) _____ °C Temp. when received (corrected) _____ °C

DCN: AD-051 Form last revised 11/17/16

Device used for measuring Temp by unique identifier (circle IR temp gun used) J: 9A G: LT-1 LT-2 T: 10A A: 3A M: 3A S: 1V

Relinquished by:		Date	Time	Received by:		Date	Time
1	L. Bachler	6-5-17	1230			6/5/17	1230
2							
3							

FOR DRINKING WATER USE:

(When PWS information not otherwise supplied) PWS ID: _____

Contact Person: _____ Phone: _____

Supplier of Water:

RUNS 13 & 14

Florida Department of Environmental Protection Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQAP

Requester: Judy Ashton

Field Report Prepared By:

Project ID: SMP

Collected By: J. Ashmore, L. Baker

Sampling Agency: *KSL*

Location	RQ-2017-06-05-35 Date: 06/05/17 Time:		☐ Comp ☒ Grab Date 6-5-17 Time 0940		☐ Eastern ☒ Central Date _____ Time _____	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)	
Field #	G2SW0006 ↓STORET Field ID ↑ English Creek		Matrix (type, e.g., Salt, Fresh etc)		Diss. Oxygen 6.5	☒ mg/L ☐ % sat Total Res. Chlorine (mg/L)	13	
STORET #	G2SW0006		Temp (C) 24.2	pH 7.0	Sample Depth 0.3	☐ ft ☒ m Sp. Conductance (umho/cm) 355		
Latitude	☐ dms ☐ dms		☐ dd ☒ dms Salinity (ppt) 0.17	Comments DROPPED W/ E. COLI @ ALC				
Location	RQ-2017-06-05-35 Date: 06/05/17 Time:		☐ Comp ☒ Grab Date 6-5-17 Time 1025		☐ Eastern ☒ Central Date _____ Time _____	Composite end Date _____ Time _____	Bottle Group(s)	
Field #	G2SW0022 ↓STORET Field ID ↑ Mill Creek		Matrix (type, e.g., Salt, Fresh etc)		Diss. Oxygen 4.6	☒ mg/L ☐ % sat Total Res. Chlorine (mg/L)	B/C	
STORET #	G2SW0022		Temp (C) 26.4	pH 7.1	Sample Depth 0.3	☐ ft ☒ m Sp. Conductance (umho/cm) 350		
Latitude	☐ dd ☒ dms Longitude		☐ dd ☒ dms Salinity (ppt) 0.17	Comments DROPPED W/ E. COLI @ ALC				
Location	RQ-2017-06-05-35 Date: 06/05/17 Time:		☐ Comp ☒ Grab Date 6-5-17 Time 1055		☐ Eastern ☒ Central Date _____ Time _____	Composite end Date _____ Time _____	Bottle Group(s)	
Field #	G2SW0012 ↓STORET Field ID ↑ Baker Creek		Matrix (type, e.g., Salt, Fresh etc)		Diss. Oxygen 2.7	☒ mg/L ☐ % sat Total Res. Chlorine (mg/L)	B	
STORET #	G2SW0012		Temp (C) 24.8	pH 6.9	Sample Depth 0.3	☐ ft ☒ m Sp. Conductance (umho/cm) 300		
Latitude	☐ dms ☐ dms		☐ dd ☒ dms Salinity (ppt) 0.14	Comments DROPPED W/ E. COLI @ ALC				
Location	RQ-2017-06-05-35 Date: 06/05/17 Time:		☐ Comp ☒ Grab Date 6-5-17 Time 1135		☐ Eastern ☒ Central Date _____ Time _____	Composite end Date _____ Time _____	Bottle Group(s)	
Field #	G2SW0046 ↓STORET Field ID ↑ Delany Creek 1		Matrix (type, e.g., Salt, Fresh etc)		Diss. Oxygen 1.6 0.3	☒ mg/L ☐ % sat Total Res. Chlorine (mg/L)	A/B/C	
STORET #	G2SW0046		Temp (C) 27.9	pH 6.9	Sample Depth 0.3	☐ ft ☒ m Sp. Conductance (umho/cm) 19171		
Latitude	☐ dms ☐ dms		☐ dd ☒ dms Salinity (ppt) 11.3	Comments DROPPED W/ E. COLI @ ALC				
Relinquished By:		Date/Time	Shipping Method		Number of Coolers Shipped:		Received By:	Date/Time
A. Starn		6-5-17 1700	FED EXP		1			

Group: A	Bottle Type: P-1L	# of Bottles: 3	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: 3	Preservative: ICE	Enter Number of Bottles Sent to Lab
CHLSUITE-W				
Group: A	Bottle Type: P-500ML	# of Bottles: 3	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: 3	Preservative: ICE-FLTR	Enter Number of Bottles Sent to Lab
W-PO4-F				
Group: B	Bottle Type: P-120ML-WC-THI	# of Bottles: 6	Preservative: ICE	Enter Number of Bottles Sent to Lab
SWD-AEL-EC				
Group: C	Bottle Type: QPCR-P-250ML	# of Bottles: 4	Preservative: ICE	Enter Number of Bottles Sent to Lab
PCR-FILTER				
Group: C	Bottle Type: BG-1L	# of Bottles: 2	Preservative: ICE	Enter Number of Bottles Sent to Lab
W-AHERB-AA W-SUC-AA-R W-UHERB-AA				



Package
US Airbill

FedEx
Tracking
Number

8113 0562 4334

From Please print and press hard.

Date 10-5-17

Sender's FedEx
Account Number

98940000000000000000

Sender's
Name

Phone (813) 470-5700

Company

FDEP

Address 13051 N. Telecon Pkwy

Dept./Floor/Suite/Room

City Temple Terrace

State FL

ZIP 33637

Four Internal Billing Reference

List 24 characters will appear on invoice.

To

Recipient's Name SAMPLE RECEIVING

Phone (550) 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

0126430468



Shipping online just got easier.
Go to fedex.com/ite

Form
ID No.

0215

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.

☒ 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

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, 5 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.

☒ 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*

50

lbs.

\$

00

Your 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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