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: Cedar Creek **Date:** 4/12/17 (mm/dd/yyyy)

STORET Station ID: 28027024824 0185 **WBID:** 1550A **Latitude:** 28°02'02.4"N (Decimal Degrees)

County: Pinellas **RQ -** 2017-04-10-24 **ORG ID:** 21FLTPA **Longitude:** 82°46'18.3"W (Decimal Degrees)

Receiving Body of Water: _____ **Field ID:** G5SW0129

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Jusy Ashton		X		X	X
Laura Bauer	X		X		

Sampling Equipment

☑ Sample Container ☐ Van Dorn ☐ Pole
☐ Carboy ☐ Syringe
☐ Dipper ☐ Other _____
Equipment ID _____

Collection Method

☑ 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# Li | JDM **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)	1350	0.3	0.3	11.3	131	7.9	0.46	0.3 "S"	938	23.2
CEN										

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	☒ W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	☒ Ice ☒ H_2SO_4			☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO_2			☐ <2
Filtered Nutrients	☒ W-PO4-F ☐ Field Filtered 0.45 µm Filter	☒ Ice			
Chlorophyll	☒ CHLSUITE-W	☒ Ice			
Physical/Aggregate (Fresh)	☒ Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-IC / 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 ☐ Entero ☐ 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			
Flow	"J" Qualify Flow				

Place Preservation Marker(s) Here

Contains 1:1 Sulfuric Acid SA-6302030 EXP: 10/28/17 Warning! See SDS

Notes:

RQ-2017-04-10-24
Date: 04-12-17
Time:
Cedar Creek

G5SW0129
Field ID
STORET
G5SW0129

Signature: _____ Date: 4-12-17

Field Parameters Entered into LIMS: SM 04/13/2017 Field Parameters QC in LIMS: LB 4/24/17 MB QC (Initials/Date)

Date Migrated to STORET: 6/8/17 MB 121628 (Initials/Date) EVENT: 04-13-02

Field Sheets Scanned/Saved: SM 06/22/2017 (Initials/Date)

Request Number: RQ-2017-04-10-24

RUN 11 A-kits

Customer: WQAP

Project ID: SMP

Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Apr 7, 2016

Requester: Judy Ashton

Collected By: J. Ashton, L. [illegible]

Field Report Prepared By: Judy Ashton

Sampling Agency: FDEP

Location: RQ-2017-04-10-24 Date: 04-12-17 Time:	☐ Comp ☒ Grab	Collection (comp begin or grab) Date 4-12-17 Time 1111	Eastern Central	Composite end Date Time		Bottle Group(s) (See pg 2): C
Field ID: G5SW0002	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 4.3 ☐ mg/L ☒ % sat	Total Res. Chlorine (mg/L)		
STORET: Stevenson Crk	Temp (C) 21.8	pH 7.3	Sample Depth 0.3 ☐ ft ☒ m	Sp. Conductance (umho/cm) 553		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) 0.27	Comments: E. COLI ONLY - DROPPED OFF @ ALL			

Location: RQ-2017-04-10-24 Date: 04-12-17 Time:	☐ Comp ☒ Grab	Collection (comp begin or grab) Date 4-12-17 Time 1350	Eastern Central	Composite end Date Time		Bottle Group(s): A/B/C
Field ID: G5SW0129	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 11.3 ☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		
STORET: Cedar Creek	Temp (C) 23.2	pH 7.9	Sample Depth 0.3 ☐ ft ☒ m	Sp. Conductance (umho/cm) 938		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) 0.46	Comments: E. COLI DROPPED OFF @ ALL			

Location	☐ Comp ☐ Grab	Collection (comp begin or grab) Date Time	Eastern Central	Composite end Date Time		Bottle Group(s): ~~A/B/C~~
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 ☐ ft ☐ m	Sp. Conductance (umho/cm)		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments: ~~E. COLI DROPPED OFF @ ALL~~			

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 ☐ ft ☐ m	Sp. Conductance (umho/cm)		
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments			

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
J. Ashton	4-12-17 1700	Fed Ex	1		

Group: A	Bottle Type:	P-1L	# of Bottles: 1	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	1
	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**	1
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 1	Preservative:	ICE And H2SO4	**Enter Number of Bottles Sent to Lab**	1
	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**	1
	W-PO4-F						
Group: B	Bottle Type:	QPCR-P-250ML	# of Bottles: 2	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	2
	PCR-FILTER						
Group: B	Bottle Type:	BG-1L	# of Bottles: 1	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	1
	W-AHERB-AA W-SUC-AA-R W-UHERB-AA						
Group: C	Bottle Type:	P-120ML-WC-THI	# of Bottles: 2	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	Ø
	SWD-AEL-EC						

E. COLI ANALYSIS DONE @ AEL

Advanced
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526 S. North Lake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597 • E83075

LAB NUMBER:

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 E84589		

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	Preserv	Ice, T	BOTTLE SIZE & TYPE: Sterile Plastic Bottle — Fecal Coliforms	E. Coli	EN1220	LAB NUMBER
RQ-2017-04-10-24 Date: 04-12-17 Time: G5SW0002 Field ID STORET G5SW0002 Stevenson Crk	Grab	4/12/17	1111	SW	1				1		
RQ-2017-04-10-23 Date: 04-12-17 Time: G1SW0054 Field ID STORET G1SW0054 Bishop Tidal	Grab	4/12/17	1155	SW	1					1	
RQ-2017-04-10-23 Date: 04-12-17 Time: G5SW0128 Field ID STORET G5SW0128 Cedar Tidal	Grab	4/12/17	1320	SW	1					1	
RQ-2017-04-10-24 Date: 04-12-17 Time: G5SW0129 Field ID STORET G5SW0129 Cedar Creek	Grab	4/12/17	1350	SW	1					1	
	Grab		[illegible]	SW	+				+		

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

Relinquish by:	Date	Time	Received by:	Date	Time
1 J Ashton	4/12/17	1544	[signature]	4/12/17	1544
2					
3					
4					

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

revised 1/12

Advanced Environmental Laboratories, Inc.
Florida's Largest Laboratory Network

Altamonte Springs: 380 Northlake Blvd., Ste. 1048 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597
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Tampa: 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327

Client Name: FDEP - SWDIST
Address: 13051 N. TELECOM PKWY SUITE 101
Phone: 813-716-3381
FAX:
Contact: MATT BEARSE
Sampled By: J. ASHTON, L. BARKER
Turn Around Time: ☐ STANDARD ☐ RUSH
AEL Profile #:

Project Name:
Project Number:
PO Number:
FDEP Facility No:
FDEP Facility Address:
Special Instructions: PO E845B3
☐ ADaPT ☐ EQuIS ☐ Other

ANALYSIS REQUIRED: ENTERED

SAMPLE ID	SAMPLE DESCRIPTION	Grab Comp	SAMPLING DATE	SAMPLING TIME	MATRIX	NO. COUNT	BOTTLE SIZE & TYPE	Preservation	Field-Filtered?	LABORATORY I.D. NUMBER
RQ-2017-04-10-23 Date: 04-12-17 Time: Klosterman TP222	G5SW0129 Field ID STORET G5SW0129	X	4/12/17	1420	SW	1		ICE		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 = (H2SO4) N = (HNO3) 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	J. ASHTON	4/12/17	1544		4/12/17	1544
2						
3						

FOR DRINKING WATER USE:
(When PWS Information not otherwise supplied) PWS ID:_____
Contact Person:_____ Phone :_____
Supplier of Water:_____

MUR4

FedEx Express **Package US Airbill**

FedEx Tracking Number 8111 7111 8216

Form ID No. 0215

From *Please print and press hard.*

Date

Sender's FedEx Account Number

Sender's Name

Phone 813 1470 5770

Company F.D.E.P SWROC

Address 13051 N Telecom Pkwy

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

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

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- [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.

2nd Business Day

- [ ] 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

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- [ ] 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.

- [X] No
- [ ] Yes — As per attached Shipper's Declaration.
- [ ] Yes — Shipper's Declaration not required.
- [ ] Dry Ice — Dry Ice, 9, UN 1845 ____ x ____ kg

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- [ ] Cargo Aircraft Only

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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 1 Total Weight 50 lbs. Total Declared Value† $ ____ .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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