

Field Sheets Scanned/Saved: SM 08/30/2017

Request Number: RQ-2017-03-06-21

SMP RUN 4

2017-03-06-20

Florida Department of Environmental Protection

Central Laboratory Submittal Form

Page 1 of 2

last revised Apr 7, 2016

Customer: SW-DIST

Project ID: SMP

Requester: Judy Ashton

Field Report Prepared By: Judy Ashton

Collected By: J. Ashton, L. Belcher

Sampling Agency: FDEP

Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 3-7-17 Time 1000		Eastern Central		Composite end Date Time		Bottle Group(s) (See pg 2)	
Field ID: RQ-2017-03-06-20 Date: 03/07/17 Time: 1000		G2SW0021		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 4.0		Total Res. Chlorine (mg/L)		Bottle Group(s)	
STORET #		↓STORET Field ID ↑		Temp (C) 17.6		pH 7.4		Sample Depth 0.3		Sp. Conductance (umho/cm) 360	
Latitude		Trout Crk		☐ dd ☐ dms		Salinity (ppt) 0.17		Comments		E. COLI DROPPED OUT OF ALL	
Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date Time		Eastern Central		Composite end Date Time		Bottle Group(s)	
Field ID: RQ-2017-03-06-20 Date: 03/07/17 Time: 1000		G2SW0012		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		Total Res. Chlorine (mg/L)		Bottle Group(s)	
STORET #		↓STORET Field ID ↑		Temp (C)		pH		Sample Depth		Sp. Conductance (umho/cm)	
Latitude		Baker Creek		☐ dd ☐ dms		Salinity (ppt)		Comments		E. COLI DROPPED OUT OF ALL	
Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date Time		Eastern Central		Composite end Date Time		Bottle Group(s)	
Field ID: RQ-2017-03-06-20 Date: 03/07/17 Time: 1000		G2SW0013		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		Total Res. Chlorine (mg/L)		Bottle Group(s)	
STORET #		↓STORET Field ID ↑		Temp (C)		pH		Sample Depth		Sp. Conductance (umho/cm)	
Latitude		Spartman		☐ dd ☐ dms		Salinity (ppt)		Comments		E. COLI - DROPPED OUT OF ALL	
Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date Time		Eastern Central		Composite end Date Time		Bottle Group(s)	
Field ID		G2SW0012		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		Total Res. Chlorine (mg/L)		Bottle Group(s)	
STORET #		↓STORET Field ID ↑		Temp (C)		pH		Sample Depth		Sp. Conductance (umho/cm)	
Latitude		Longitude		☐ dd ☐ dms		Salinity (ppt)		Comments		E	

Relinquished By:

J. Ashton

Date/Time

3-7-17 1500

Shipping Method

Krisp

Number of Coolers Shipped:

Received By:

Date/Time

Group: A	Bottle Type: P-1L	# of Bottles: 4	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: 4	Preservative: ICE	Enter Number of Bottles Sent to Lab
CHLSUITE-W				
Group: A	Bottle Type: P-500ML	# of Bottles: 4	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: 4	Preservative: ICE-FLTR	Enter Number of Bottles Sent to Lab
W-PO4-F				
GROUP B	W-SUC-AA-R	B6-1L	ICE	# BOTTLES SENT 1
W-UHL W-UHERB-AA				
GROUP B	PCR-FILTER	P-250ML	ICE	# BOTTLES SENT 2
GROUP C	W-ICP	P-500ML	ICE, NITRIC	# BOTTLES SENT 0
W-ICPMS				
GROUP D	SND-AEL-EC	P-120ML	ICE	# BOTTLES SENT 0
→ DROPPED AT 2 LAB				



Advanced
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LAB NUMBER:

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CLIENT NAME: FDEP - SW District		PROJECT NAME: TMDL / SMP		BOTTLE SIZE & TYPE		Sterile Plastic Bottle												LAB NUMBER	
ADDRESS: 13051 N. Telecom Pkwy		P.O. NUMBER/PROJECT NUMBER:		PROJECT LOCATION: Florida		PHONE: 813-470-5700		FAX: 813-470-5996		CONTACT: Matthew Bearden Sarah Ernst		TURN AROUND TIME:		REMARKS/SPECIAL INSTRUCTIONS:		STANDARD		RUSH	
TURN AROUND TIME:		REMARKS/SPECIAL INSTRUCTIONS:		STANDARD		RUSH		PRESERV		ICE, T									
Field ID	SITE NAME	Grab Comp	SAMPLING DATE TIME		MATRIX	NO. COUNT	PRESERV		ICE, T										
G25W00021	TROUT CREEK	Grab	3/7/17	1000	SW	1												001	
G25W00012	BAKER CREEK	Grab	3/7/17	1100	SW	1												002	
G25W00013	SPALTMAN BRANCH	Grab	3/7/17	1130	SW	1												003	
		Grab			SW														
		Grab			SW														
		Grab			SW														

H=(HCl) S=(H ₂ SO ₄) N=(HNO ₃) T=(Sodium Thiosulfate)		Sample Kit		Cooler #	
Shipment	Method	RB	D/T		
Out:	Via:	AB	D/T		
Ret:	Via:	Trip Bl.			
Relinquish by: <u>[Signature]</u> Date: <u>3/7/17</u> Time: <u>1201</u>		Received by: <u>[Signature]</u> Date: <u>3/8/17</u> Time: <u>1201</u>			
1		2		3	
4		5		6	

Received on to

☐ Yes ☐ No

QC ☐ sent

☐ received

revised 1/12



Package
US Airbill

FedEx
Tracking
Number

8111 7111 5982

From Please print and press hard.

Date 3-7-17

Sender's FedEx
Account Number

4490-2262-9

Sender's
Name

FDEP

Phone (813) 470-5700

Company

Address

13051 N. Telecom Pkwy

Dept./Floor/Suite/Room

City Temple Terrace

State FL ZIP

33637

Your Internal Billing Reference

First 21 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

Address

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

City TALLAHASSEE

State FL ZIP

32399-6542

0125636852



Leave the packing to the pros at FedEx Office.
Go to fedex.com/office

MUR4

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.

2nd/3rd 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 6, UN 1845 _____ x _____ kg

☐ Cargo Aircraft Only

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

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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