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: Bellows Outlet **Date:** 8-9-17 (mm/dd/yyyy)

STORET Station ID: G1SW0060 **WBID:** 1579 **Latitude:** 27° 59' 15.3" N (Decimal Degrees)

County: Hillsborough **RQ -** 2017-08-07-24 **ORG ID:** 21FLTPA **Longitude:** 82° 22' 22.9" W (Decimal Degrees)

Receiving Body of Water: _____ **Field ID:** G1SW0060

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Judy Ashton		X		X	X
Laurie Brewer	X		X		

Sampling Equipment

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

Equipment ID _____

Collection Method

- [ ] Wading
- [X] 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# Busm **Photos:** Yes / (No)

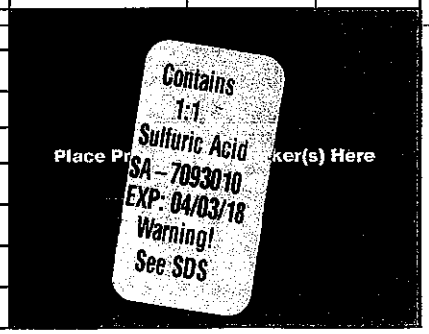
Tide Falling: Yes / No / (NA)

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)	1220	0.3	0.5	3.3	43	7.1	0.07	0.4	157	30.7
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	[X] W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	[X] Ice [X] H_2SO_4	SA-7093010	04/03/18	[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	[ ] 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				



Notes:

RQ-2017-08-07-24
Date: 08-09-2017
Time:

Bellows Outlet

G1SW0060
Field ID
STORET
G1SW0060

Signature: _____ **Date:** 8-9-17

Field Parameters Entered into LIMS: SM 08/21/2017 (Initials/Date) Field Parameters QC in LIMS: SM 10/17/2017 (Initials/Date)

Date Migrated to STORET: _____ (Initials/Date) Field Sheets Scanned/Saved: SM 10/17/2017 (Initials/Date)

Advanced
Environmental Laboratories, Inc.
6501 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574
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528 S. North Lake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597 • E83076

LAB NUMBER:

Page 1 of 1

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	BOTTLE SIZE & TYPE	Preserv	Ice, T	AR NE AQ LU YI SR IE SD	LAB NUMBER
RQ-2017-08-07-24 Date: 08-09-2017 Time: Bellows Outlet	G1SW0060 Field ID STORET G1SW0060	Grab	8-9-17	1220	SW	1	Sterile Plastic Bottle		1	E. Coli	
		Grab			SW						
		Grab			SW						
		Grab			SW						
		Grab			SW						
		Grab			SW						

I-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	L. Bachler	8-9-17	12:45		8/9/17	1245
2						
3						
4						

revised 1/12

Request Number: RQ-2017-08-07-24

RUN 9

Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQ-ASSESS

Project ID: SMP

Requester: Judy Ashton

Collected By: Judy Ashton, Laurie Brenner

Field Report Prepared By: Judy Ashton

Sampling Agency: FSEP

Location: Armistead

Field ID: RQ-2017-08-07-24 Date: 08-09-2017 Time: G1SW0030 Field ID STORET G1SW0030

STORET #:

Latitude: ☐ dd ☐ dms

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 8-9-17 Time 1025 | Eastern Central | Composite end Date Time | Bottle Group(s) (See pg 2): A*

Matrix (type, e.g., Salt, Fresh, etc): | Diss. Oxygen: 4.5 ☒ mg/L ☐ % sat | Total Res. Chlorine (mg/L):

Temp (C): 31.2 | pH: 7.0 | Sample Depth: 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm): 212

Salinity (ppt): 0.10 | Comments: GROUP A LESS W-CT-CL-R

Location: Magdalene

Field ID: RQ-2017-08-07-24 Date: 08-09-2017 Time: G1SW0059 Field ID STORET G1SW0059

STORET #:

Latitude: ☐ dd ☒ dms

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 8-9-17 Time 1125 | Eastern Central | Composite end Date Time | Bottle Group(s): B/C/D*

Matrix (type, e.g., Salt, Fresh, etc): | Diss. Oxygen: 7.1 ☒ mg/L ☐ % sat | Total Res. Chlorine (mg/L):

Temp (C): 31.5 | pH: 7.8 | Sample Depth: 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm): 246

Salinity (ppt): 0.11 | Comments: * NO E.COLI *

Location: Bellows Outlet

Field ID: RQ-2017-08-07-24 Date: 08-09-2017 Time: G1SW0060 Field ID STORET G1SW0060

STORET #:

Latitude: ☐ dms

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 8-9-17 Time 1220 | Eastern Central | Composite end Date Time | Bottle Group(s): C/D

Matrix (type, e.g., Salt, Fresh, etc): | Diss. Oxygen: 3.3 ☒ mg/L ☐ % sat | Total Res. Chlorine (mg/L):

Temp (C): 30.7 | pH: 7.1 | Sample Depth: 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm): 157

Salinity (ppt): 0.07 | Comments: E.COLI DROPPED OFF DAIL

Location:

Field ID:

STORET #:

Latitude: ☐ dd ☐ dms **Longitude:** ☐ dd ☐ dms

☐ Comp ☐ Grab | Collection (comp begin or grab) Date Time | Eastern Central | Composite end Date Time | Bottle Group(s):

Matrix (type, e.g., Salt, Fresh, etc): | Diss. Oxygen: ☐ mg/L ☐ % sat | Total Res. Chlorine (mg/L):

Temp (C): | pH: | Sample Depth: ☐ ft ☐ m | Sp. Conductance (umho/cm):

Salinity (ppt): | Comments:

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
J. Ashton	8-9-17 1700	FED EX	3		

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:	BG-500ML	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
	W-CT-CI-R						
Group: A	Bottle Type:	P-500ML	# of Bottles: 1	Preservative:	HNO3	Enter Number of Bottles Sent to Lab	1
	W-ICP W-ICPMS						
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:	BG-1L	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab	2
	W-AHERB-AA W-GLYPH W-PYR-AA-R W-SUC-AA-R W-UHERB-AA						
Group: B	Bottle Type:	BG-500ML	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
	W-CT-CI-R W-PCL-SQ-R						

Group: B	Bottle Type: W-PSNP-TQ	BG-1L	# of Bottles: 4	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	4
Group: C	Bottle Type: ALKALINITY TURBIDITY W-CL-IC W-COLOR W-F W-SO4-IC W-TDS W-TSS	P-1L	# of Bottles: 2	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	
Group: C	Bottle Type: CHLSUITE-W	BP-1L	# of Bottles: 2	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	2
Group: C	Bottle Type: W-NH3 W-NO2NO3 W-S-A-TP W-TKN W-TOC	P-500ML	# of Bottles: 2	Preservative:	ICE And H2SO4	**Enter Number of Bottles Sent to Lab**	2
Group: C	Bottle Type: W-PO4-F	P-125ML	# of Bottles: 2	Preservative:	ICE-FLTR	**Enter Number of Bottles Sent to Lab**	2
Group: D	Bottle Type: PCR-FILTER	QPCR-P-250ML	# of Bottles: 2	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	2
Group: D	Bottle Type: SWD-AEL-EC	P-120ML-WC-THI	# of Bottles: 1	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	0
		DROPPED	WP E.COLI & AEL				
Group: D	Bottle Type: W-AHERB-AA W-SUC-AA-R W-UHERB-AA	BG-1L	# of Bottles: 1	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	1

FedEx Express **Package US Airbill**

FedEx Tracking Number: 8119 3904 6418

Form ID No. 0215

From *Please print and press hard.*

Date: 8-9-17 Sender's FedEx Account Number:

Sender's Name: Phone: 813, 470-5700

Company: FDEP

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: SAMPLE RECEIVING Phone: 850 245-8085

Company: FLORIDA DEP/CHEMISTRY SECTION

Address: 2600 BLAIRSTONE RD Dept./Floor/Suite/Room
We cannot deliver to P.O. boxes or P.O. ZIP codes.

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

City: TALLAHASSEE State: FL ZIP: 32399-6542

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. ☐

0127681333

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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, 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. ☒ 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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FedEx Express **Package US Airbill**

FedEx Tracking Number: 8085 1642 7595

Form ID No. 0215

From *Please print and press hard.*

Date: 8-9-17 Sender's FedEx Account Number:

Sender's Name: Phone: 813, 470-5700

Company: FDEP

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: SAMPLE RECEIVING Phone: 850 245-8085

Company: FLORIDA DEP/CHEMISTRY SECTION

Address: 2600 BLAIRSTONE RD Dept./Floor/Suite/Room
We cannot deliver to P.O. boxes or P.O. ZIP codes.

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

City: TALLAHASSEE State: FL ZIP: 32399-6542

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. ☐

0119899085

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4 Express Package Service * To most locations.

NOTE: Service order has changed. Please select carefully.

Packages up to 150 lbs.
For packages over 150 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

- ☐ 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

☐ 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, 9, UN 1845 ____ x ____ 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.

☐ 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: 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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FedEx Express **Package US Airbill**

FedEx Tracking Number 8119 3904 6407

Form ID No. 0215

From *Please print and press hard.*

Date 8-9-17 Sender's FedEx Account Number

Sender's Name Phone (813) 470-5700

Company FDEP

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 SAMPLE RECEIVING Phone (850) 245-8085

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

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

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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.

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

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, 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. ☒ 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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