



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2017

A-KIT

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Data Qualified?

Yes / No

STORET Station Name: Poley Creek

Date: 5-2-17

STORET Station ID: G2SW0014

WBID: 1583

Latitude: 27° 56' 19.8" N

County: Polk RQ: 2017-05-01-35

ORG ID: 21FLTPA

Longitude: 82° 01' 23.1" W

Receiving Body of Water: _____

Field ID: G2SW0014

Sampling Team Members					WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check	Sampling Equipment			
<u>Laurie Bachler</u> <u>Judy Ashton</u>					☒	☒	☒	☒	☒	☒ 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 / <u>Low</u> / Normal / High / Flooded						Matrix: <u>Fresh</u> / Marine / DI											
Meter ID# <u>L1 Jdn</u>						Photos: Yes / <u>No</u>						Tide Falling: Yes / No / <u>NA</u>					
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	1100	0.3	0.3	5.8	68	7.3	0.18	0.3	388	24.9							
CEN								"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
Reserved Nutrients	☒ W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	☒ Ice ☒ H2SO4			☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO2			☐ <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-CH-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 ☐ Enteroc ☐ 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: <u>Entered into Field Data sheet</u>	
RQ-2017-05-01-35 Date: <u>05/02/17</u> Time: _____ Poley	
G2SW0014 ↓ STORET Field ID ↑ G2SW0014	
Signature: <u>Judy Ashton</u>	Date: <u>5-2-17</u>

Field Parameters Entered into LIMS: LB 5-3-17 Field Parameters QC in LIMS: SM 05/04/2017/02-MB

Date Migrated to STORET: MB 9/6/17 (Initials/Date)
17-05-03-03 (Initials/Date)

Field Sheets Scanned/Saved: _____ (Initials/Date)

Request Number: RQ-2017-05-01-35

RUN 16

Florida Department of Environmental Protection Central Laboratory Submittal Form

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last revised Apr 7, 2016

Customer: WQAP

Project ID: SMP

Requester: Judy Ashton

Field Report Prepared By:

Collected By: J. Ashton, L. BARNER

Sampling Agency:

Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 5-2-17 Time 1010		☒ Eastern ☐ Central		Composite end Date Time		Bottle Group(s) (See pg 2)	
Field ID RQ-2017-05-01-35 Date: 05/02/17 Time:		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 1.1		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		A/B/C	
STORET # Peace River		Temp (C) 26.8		pH 6.7		Sample Depth 0.3		☐ ft ☒ m		Sp. Conductance (umho/cm) 278	
Latitude		☐ dd ☐ dms		Salinity (ppt) 0.13		Comments E. COLI BIOPHORES OFF A&L					
Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 5-2-17 Time 1015		☒ Eastern ☐ Central		Composite end Date Time		Bottle Group(s)	
Field ID RQ-2017-05-01-35 Date: 05/02/17 Time:		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		B	
STORET # Peace River DUPLICATE		Temp (C)		pH		Sample Depth		☐ ft ☐ m		Sp. Conductance (umho/cm)	
Latitude		☐ dd ☐ dms		Salinity (ppt)		Comments TRACER DUPLICATE ONLY B6-1L					
Location		☐ Comp ☐ Grab		Collection (comp begin or grab) Date Time		☐ Eastern ☐ Central		Composite end Date Time		Bottle Group(s)	
Field ID RQ-2017-05-01-35 Date: 05/02/17 Time:		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☐ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		B	
STORET # FIELD BLANK		Temp (C)		pH		Sample Depth		☐ ft ☐ m		Sp. Conductance (umho/cm)	
Latitude		☐ dd ☐ dms		Salinity (ppt)		Comments TRACER BLANK ONLY B6-1L					
Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 5-2-17 Time 1100		☒ Eastern ☐ Central		Composite end Date Time		Bottle Group(s)	
Field ID RQ-2017-05-01-35 Date: 05/02/17 Time:		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 5.8		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		C	
STORET # Poley		Temp (C) 24.9		pH 7.3		Sample Depth 0.3		☐ ft ☒ m		Sp. Conductance (umho/cm) 388	
Latitude		☐ dd ☐ dms		Salinity (ppt) 0.18		Comments E. COLI BIOPHORES OFF A&L					

Relinquished By: J. Ashton	Date/Time: 5/2/17 1700	Shipping Method: FES EP	Number of Coolers Shipped: 1	Received By:	Date/Time:
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Group: A	Bottle Type:	P-1L	# of Bottles: 2	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: 2	Preservative: ICE	Enter Number of Bottles Sent to Lab	2
	CHLSUITE-W					
Group: A	Bottle Type:	P-500ML	# of Bottles: 2	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: 2	Preservative: ICE-FLTR	Enter Number of Bottles Sent to Lab	2
	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	3
	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	2
	SWD-AEL-EC					
	DROPPED W/ D AEL					



Advanced
Environmental Laboratories, Inc.

6501 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82674
9510 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84589
2106 NW 67th Place, Ste. 7 • Gainesville, FL 32605 • 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 • E53075

LAB NUMBER:

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CLIENT NAME:		PROJECT NAME:		BOTTLE SIZE & TYPE		Sterile Plastic Bottle		LAB	
ADDRESS:		P.O. NUMBER/PROJECT NUMBER:		PROJECT LOCATION:		A R		N E	
PHONE:		FAX:		SAMPLER BY:		A Q		L U	
CONTACT:		REMARKS/SPECIAL INSTRUCTIONS:		PRESERV		I E		S D	
TURN AROUND TIME:		*Samples are ambient water and not suspected to contain chlorine*		Ice, T		NO. COUNT		NUMBER	
STANDARD		RUSH		DATE		TIME		MATRIX	
WW=waste water		SW=surface water		GW=ground water		DW=drinking water		SL=sediment	
Field ID		SITE NAME		Grab Comp		DATE		TIME	
RQ-2017-05-01-35		G3SW0042		Grab		5-2-17		1010	
Date: 05/02/17		↓STORET Field ID ↑		Grab				SW	
Time:		Peace River		Grab				SW	
RQ-2017-05-01-35		G2SW0014		Grab		5-2-17		1100	
Date: 05/02/17		↓STORET Field ID ↑		Grab				SW	
Time:		Poley		Grab				SW	
RQ-2017-05-01-35		G2SW0033		Grab		5-2-17		1200	
Date: 05/02/17		↓STORET Field ID ↑		Grab				SW	
Time:		Rice Creek		Grab				SW	
Hce		H=(HCl)		S=(H ₂ SO ₄)		N=(HNO ₃)		T=(Sodium Thiosulfate)	
Shipment		Method		Sample Kit		Cooler #		Refrigerator by:	
Out:		Via:		RB		D/T		Date	
Rel:		Via:		AB		D/T		Time	
Received on 1c		Yes		No		QC		sent	
								received	

fedEx Package
Express **US Airbill**

FedEx Tracking Number **8113 0563 0969**

From **Please print and press hard.**

Date **5-2-17**

Sender's FedEx Account Number

SENDER'S FEDEX ACCOUNT NUMBER

Sender's Name **FDRP**

Phone **(813) 470-5770**

Company **SW ROC**

Address **13051 N. TELLOM AVE**

Dept./Floor/Suite/Room

City **TAMPA FLORIDA**

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 construction of your shipping address.

City **TALLAHASSEE**

State **FL**

ZIP **32399**

0126430468

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, 6, 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**

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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