



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: Delany Creek Date: 4-17-17
STORET Station ID: G1SW0046 WBID: 1605 Latitude: 27° 54' 55.81" N
County: Hillsborough RQ - 2017-04-17-27 ORG ID: 21FLTPA Longitude: 82° 23' 30.71" W
Receiving Body of Water: _____ Field ID: G1SW0046

Sampling Team Members		WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check	Sampling Equipment		Collection Method	
							☒ 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>L110N</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 (umhos/cm)	Temp. (C°)
<u>EST</u>	<u>1015</u>	<u>0.3</u>	<u>0.66</u>	<u>2.4</u>	<u>30</u>	<u>7.1</u>	<u>5.29</u>	<u>0.4</u>	<u>9537</u>	<u>23.7</u>
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 ☒ H2SO4			☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO2			☐ <2
Filtered Nutrients	☒ W-PO4-F ☐ Field Filtered 0.45 um Filter	☒ Ice			
Chlorophyll	☒ CHLSUITE-W	☒ Ice			
Physical/Aggregate (Fresh)	☒ Alkalinity / W-F / W-TSS / TURBIDITY / W-CHC / 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 ☐ Enteric ☐ 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: O-PLA FILTER
E. COLI, METALS, MARKERS
Signature: Judy Ashton Date: 4-17-17
RQ-2017-04-17-27 Date: 04/17/17 Time: 1015
Delany Creek STORET Field ID: G1SW0046

Field Parameters Entered into LIMS: SM 04/19/2017 Field Parameters QC in LIMS: LB 4/19/17
Date Migrated to STORET: 6/12/17 MB 121640 Field Sheets Scanned/Saved: SM 06/21/2017
Event: 04-18-04

Request Number: RQ-2017-04-17-27

Florida Department of Environmental Protection

Central Laboratory Submittal Form

RUN 17

10A3

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last revised Apr 7, 2016

Customer: WQAP

Requester: Judy Ashton

Field Report Prepared By: Judy Ashton

Project ID: SMP

Collected By: J. Ashton, L. Bachtel

Sampling Agency: FDEP

Location G2SW0006		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 4-17-17 Time 9:15	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)
Field ID RQ-2017-04-17-27 Date: 04/17/17 Time: _____	G2SW0046 ↓STORET Field ID ↑	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 9.0	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET English Crk		Temp (C) 19.6	pH 7.4	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 387
Latitude	☐ dd ☐ dms	Salinity (ppt) 0.19	Comments E. COLI DROPPED OFF 2 ALL			
Location DELANY CREEK		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 4-17-17 Time 10:15	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)
Field ID RQ-2017-04-17-17 Date: 04/17/17 Time: _____	G1SW0046 ↓STORET Field ID ↑	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 2.4	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET Delany Creek		Temp (C) 23.7	pH 7.1	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 9577
Latitude	☐ dd ☐ dms	Salinity (ppt) 5.29	Comments E. COLI DROPPED OFF 2 ALL			
Location DELANY CREEK @ MAYDELL		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 4-17-17 Time 10:30	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)
Field ID RQ-2017-04-17-17 Date: 04/17/17 Time: _____	G1SW0066 ↓STORET Field ID ↑	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 5.3	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET Delany Creek		Temp (C) 22.0	pH 7.4	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 705
Latitude	☐ dd ☐ dms	Salinity (ppt) 0.34	Comments E. COLI DROPPED OFF 2 ALL			
Location		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 4-17-17 Time 11:55	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s)
Field ID RQ-2017-04-17-27 Date: 04/17/17 Time: _____	G2SW0016 ↓STORET Field ID ↑	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 5.8	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET BRADEN R.		Temp (C) 24.0	pH 7.3	Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm)
Latitude	☐ dd ☐ dms	Salinity (ppt) 0.35	Comments E. COLI DROPPED OFF 2 ALL			

Relinquished By: J. Ashton	Date/Time 4-17-17 12:00	Shipping Method FEDEX	Number of Coolers Shipped: 1	Received By:	Date/Time
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Group: A Bottle Type: P-120ML-WC-THI # of Bottles: 6 Preservative: ICE Enter Number of Bottles Sent to Lab 0

SWD-AEL-EC

DROPPERS ON 2 AEL

GROUP B 136-16 ICE 3000W2SD 3
W-AELB-AA, W-UTELB-AA, W-SUC-AA-R # BOTTLES SHIPPED

P-120ML-WC-THI

ICE

GROUP D SWD-AEL-EN DROPPERS ON 2 AEL # BOTTLES SHIPPED 0

QPCA-P-250ML

ICE

GROUP C PCA-FILTER # BOTTLES SHIPPED 6



6601 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574
9810 Princess Palm Ave. • Tampa, FL 33619 • 813.630.8616 • Fax 813.630.4327 • E84589
2106 NW 67th Place, Ste. 7 • Gainesville, FL 32608 • 352.367.1500 • Fax 352.367.0050 • E82620
528 S. North Lake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.937.1554 • Fax 407.937.1597 • E53078

: LAB NUMBER:

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[illegible]

revised 1/12

From Please print and press hard.

Date 4-17-17

Sender's FedEx Account Number

SENDER'S ACCOUNT NUMBER

Sender's Name

Phone 013, 470-5770

Company

FDEP

Address

13051 N. TRUCK COM HWY

Dept./Floor/Suite/Room

City

TAMPA

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 continuation of your shipping address.

City

TALLAHASSEE

State

FL

ZIP

32399

0126430468

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.

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

Fee 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

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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