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: McKay Creek **Date:** 3-8-17 (mm/dd/yyyy)

STORET Station ID: G5SW0126 **WBID:** 1633B **Latitude:** 27°54'34" N (Decimal Degrees)

County: Pinellas **RQ -** 2017-03-06-21 **ORG ID:** 21FLTPA **Longitude:** 82° 48'58.9" W (Decimal Degrees)

Receiving Body of Water: _____ **Field ID:** G5SW0126

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Jody Ashton	X		X		
Laurie Barker		X		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# LIC JON **Photos:** Yes / (No)

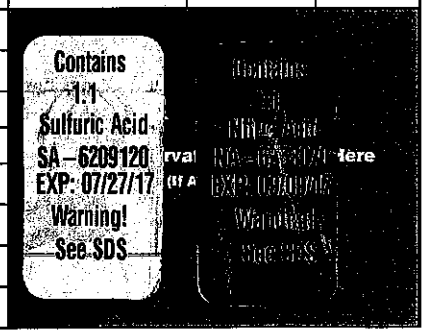
Tide Falling: Yes / No / (NA)

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)	1150	0.3	0.4	8.0	106	7.4	13.9	0.42 ~~0.3~~	22800	26.4
CEN								11 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
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_3			☐ <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				



Notes:

RQ-2017-03-06-21
Date: 03/08/17
Time:
McKay Creek

G5SW0126
STORET Field ID
G5SW0126

Signature: _____ Date: 3-8-17

Field Parameters Entered Into LIMS: SM 03/09/2017 (Initials/Date)

Field Parameters QC In LIMS: LB 4/4/17 SM 04/19/2017 (Initials/Date)

Date Migrated to STORET: 121273 (Initials/Date)

Field Sheets Scanned/Saved: SM 05/01/2017 (Initials/Date)

Advanced
Environmental Laboratories, Inc.
6601 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574
☑ 9810 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84589
2106 NW 67th Place, Ste. 7 • Gainesville, FL 32606 • 352.367.1500 • Fax 352.367.0050 • E82620
526 S. North Lake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597 • E53076

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 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	Preserv	Ice, T	BOTTLE SIZE & TYPE: Sterile Plastic Bottle							LAB NUMBER
									ARNEAQLUYISRIESD	• Fecal Coliforms	E. Coli					
~~GSW~~ G55W0118	PP Ditch #5	Grab	3/8/17	1105	SW	1		✓		1						
G55W0180	Mckay Creek	Grab	3/8/17	1150	SW	1		✓		1						
		Grab			SW											
		Grab			SW											
		Grab			SW											
		Grab			SW											

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

Shipment	Method	Sample Kit	Cooler #
Out:	Via:	RB D/T	
		AB D/T	
Ret:	Via:	Trip Bl.	

	Relinquish by:	Date	Time	Received by:	Date	Time
1	[illegible]	3/8/17	1300	[illegible]	3-8	13.02
2						
3						
4						

Received on Ice ☐ Yes ☐ No QC ☐ sent ☐ received

revised 1/12

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

SMP RUN 4

Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: SW-DIST

Project ID: SMP

Requester: Judy Ashton

Collected By: Judy Ashton, Lance Barber

Field Report Prepared By: Judy Ashton

Sampling Agency: FDEP

Field	Value
Location	McKay Creek
Field ID	RQ-2017-03-06-21 / G5SW0126
Date	03/08/17
Time	
STORET #	
Latitude	☐ dd ☐ dms
Longitude	☐ dd ☐ dms
Comp / Grab	☒ Grab
Collection (comp begin or grab) Date	3-8-17
Time	1150 (Eastern)
Composite end Date / Time	
Matrix (type, e.g., Salt, Fresh, etc)	(Fresh circled)
Diss. Oxygen	8.0 (☐ mg/L, ~~☐ % sat~~)
Total Res. Chlorine (mg/L)	—
Temp (C)	26.4
pH	7.4
Sample Depth	0.3 ☒ m
Sp. Conductance (umho/cm)	22800
Salinity (ppt)	13.9
Comments	
Bottle Group(s) (See pg 2)	A/B/C/D

(Remaining sample blocks on the form are blank: 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
Judy Ashton	3-8-17 1500	Fed Ex	3		

Group: A	Bottle Type: ALKALINITY, TURBIDITY, W-CL-IC, W-COLOR, W-F, W-SO4-IC, W-TDS, W-TSS	P-1L	# of Bottles: 4	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	5
Group: A	Bottle Type: CHLSUITE-W	BP-1L	# of Bottles: 4	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	5
Group: A	Bottle Type: W-NH3, W-NO2NO3, W-S-A-TP, W-TKN, W-TOC	P-500ML	# of Bottles: 4	Preservative:	ICE And H2SO4	**Enter Number of Bottles Sent to Lab**	5
Group: A	Bottle Type: W-PO4-F	P-125ML	# of Bottles: 4	Preservative:	ICE-FLTR	**Enter Number of Bottles Sent to Lab**	5
GROUP B	W-SUC-AA-R ~~W-UHH~~ W-UHERB-AA	B6-IL		ICE		# BOTTLES SENT	2
GROUP B	PCR-FILTER	P-250 ML		ICE		# BOTTLES SENT	4
GROUP C	W-ICP W-ICPMS	P-500ML		ICE, NITRIC		# BOTTLES SENT	1
GROUP D	SWD-AEL-EC	P-120ML		ICE		# BOTTLES SENT	0

→ DROPPED AT LAB

FedEx Express — Package US Airbill

FedEx Tracking Number: 8104 1402 6548

Form ID No. 0215

From *Please print and press hard.*

Date 3-8-17 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 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.

0124452251

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	2 or 3 Business Days
☐ FedEx First Overnight — Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.	☐ FedEx 2Day A.M. — Second business morning.* Saturday Delivery NOT available.
☒ FedEx Priority Overnight — Next business morning.* Friday shipments will be delivered on Monday unless Saturday Delivery is selected.	☐ FedEx 2Day — Second business afternoon.* Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.
☐ FedEx Standard Overnight — Next business afternoon.* Saturday Delivery NOT available.	☐ 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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FedEx Express — Package US Airbill

FedEx Tracking Number: 8111 7111 9290

Form ID No. 0215

From Please print and press hard.
Date 3-8-17 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 24 characters will appear on invoice.
To
Recipient's Name 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
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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.
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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 Tracking Number **8111 7111 9315**

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Dept/Floor/Suite/Room

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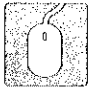

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* To most locations.

Packages up to 150 lbs.
For packages over 150 lbs., use the FedEx Express Freight US Airbill.

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☐ Sender — Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check

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