



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2017

B-KIT

PAGE 1 OF 1

Data Qualified?

Yes / No

STORET Station Name: SIMMS BRANCH

Date: 4-17-17

(mm/dd/yyyy)

STORET Station ID: G1SW0056

WBID: 1691

Latitude: _____

(Decimal Degrees)

County: MANHATTAN RQ: 2017-04-17-27

ORG ID: 21FLTPA

Longitude: _____

(Decimal Degrees)

Receiving Body of Water: TAUPOA BAY

Field ID: G1SW0056

Sampling Team Members				WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check	Sampling Equipment			
<u>Judy Asatryan</u> <u>Lanale Brink</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 / Low / Normal / <u>High</u> / Flooded				Matrix: Fresh / <u>Marine</u> / DI							
Meter ID# <u>L1</u> <u>Ton</u>				Photos: Yes / <u>No</u>				Tide Falling: Yes / <u>No</u> / NA			
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>1410</u>	<u>0.3</u>	<u>1.0</u>	<u>7.4</u>	<u>108</u>	<u>7.8</u>	<u>28.9</u>	<u>1.0</u> <u>"5"</u>	<u>44768</u>	<u>24.9</u>	
<u>CEN</u>											

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 ☐ HNO3			☐ <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-CL-IC / W-COLOR / W-SO4-IC / W-TDS	☐ Ice			
Physical/Aggregate (Marine)	☒ Alkalinity / W-F / W-TSS / TURBIDITY	☒ Ice			
Macroinvertebrates	☐ MI-FW-QDC	☐ Formalin			
Periphyton	☐ ALGAE-ID	☐ Ice			
Microbiology	☐ E Coli ☐ F Coli ☒ Enterococcus ☐ 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			

Notes: <u>Q-PCR-FILTER</u> <u>ENTEROC, PARAS, MOLLUSCS</u>	RQ-2017-04-17-27 Date: 04/17/17 Time: _____ SIMMS BRCH	 G1SW0056 ↓ STORET Field ID ↑
	Signature: <u>Judy Asatryan</u> Date: <u>4-17-17</u>	

Field Parameters Entered into LIMS: SM 04/19/2017 (Initials/Date)

Date Migrated to STORET: 6/12/17 MB 121640 (Initials/Date)

Event: 04-18-04

Field Parameters QC in LIMS: LB 4/21/17 (Initials/Date)

Field Sheets Scanned/Saved: SM 06/21/2017 (Initials/Date)

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

Florida Department of Environmental Protection

Central Laboratory Submittal Form

RUN 17

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last revised Apr 7, 2016

Customer: WQAP

Requester: Judy Ashton

Field Report Prepared By:

Project ID: SMP

Collected By:

Sampling Agency:

Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 4-17-17 Time 12:15		Eastern Central		Composite end Date Time		Bottle Group(s) (See pg 2)	
Field ID RQ-2017-04-17-27 Date: 04/17/17 Time: NONSENSE		G2SW0015 ↓STORET Field ID ↑ G2SU0015		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 6.6		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)	
STORET #		Temp (C) 21.2		pH 7.3		Sample Depth 0.3		☐ ft ☒ m		Sp. Conductance (umho/cm) 1052	
Latitude ☐ dd ☐ dms		Salinity (ppt) 0.52		Comments E. COU DROPPES W/ 2 AGL							
Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 4-17-17 Time 14:10		Eastern Central		Composite end Date Time		Bottle Group(s)	
Field ID RQ-2017-04-17-27 Date: 04/17/17 Time: SIMMS BRCH		G1SW0056 ↓STORET Field ID ↑ G1SU0056		Matrix (type, e.g., Salt, Fresh, etc) SALT		Diss. Oxygen 7.6		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)	
STORET #		Temp (C) 24.9		pH 7.8		Sample Depth 0.3		☐ ft ☒ m		Sp. Conductance (umho/cm) 44768	
Latitude ☐ dd ☐ dms		Salinity (ppt) 28.9		Comments ENTIRE DROPPES W/ 2 AGL							
Location		☐ Comp ☐ Grab		Collection (comp begin or grab) Date Time		Eastern Central		Composite end Date Time		Bottle Group(s)	
Field ID		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☐ mg/L ☐ % sat		Total Res. Chlorine (mg/L)			
STORET #		Temp (C)		pH		Sample Depth		☐ ft ☐ m		Sp. Conductance (umho/cm)	
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms		Salinity (ppt)		Comments					
Location		☐ Comp ☐ Grab		Collection (comp begin or grab) Date Time		Eastern Central		Composite end Date Time		Bottle Group(s)	
Field ID		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☐ mg/L ☐ % sat		Total Res. Chlorine (mg/L)			
STORET #		Temp (C)		pH		Sample Depth		☐ ft ☐ m		Sp. Conductance (umho/cm)	
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms		Salinity (ppt)		Comments					
Relinquished By:		Date/Time		Shipping Method		Number of Coolers Shipped:		Received By:		Date/Time	

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 0000W250 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

GROUP C QPCA-P-250ML ICE
PCA-FILTER # BOTTLES SHIPPED 6



Advanced

Environmental Laboratories, Inc.

6501 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574
 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9816 • Fax 813.630.4327 • E84598
 2106 NW 67th Place, Ste. 7 • Gainesville, FL 32605 • 352.367.1000 • Fax 352.367.0058 • E82620
 526 S. North Lake Blvd., Ste. 101B • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597 • E93076

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:		A R														A	
Temple Terrace, FL 33597		PROJECT LOCATION: Florida		N E														B	
PHONE: 813-470-5700		FAX: 813-470-6996		A Q														N	
CONTACT: Matthew Bearden Sarah Ernst		SAMPLED BY:		L U														U	
TURN AROUND TIME:		REMARKS/SPECIAL INSTRUCTIONS:		Y I														M	
☒ STANDARD		PO AF315E		S R														B	
☐ RUSH				I E														E	
				S D														R	
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=sediment					
Field ID		SITE NAME		Grab Comp		SAMPLING		MATRIX		NO. COUNT		Preserv		Ice, T		Ice		Ice	
						DATE		TIME											
RQ-2017-04-17-27		G2SW0015		Grab		4/17/17		1215		SW		1							
Date: 04/17/17		↓STORET Field ID ↑																	
Time:		NONSENSE																	
		G2SU0015																	
RQ-2017-04-17-27		G1SW0055		Grab		4/17/17		1410		SW		1							
Date: 04/17/17		↓STORET Field ID ↑																	
Time:		SIMMS BRCH																	
		G1SU0055																	
				Grab						SW									
				Grab						SW									
				Grab						SW									
				Grab						SW									

H=HCl		S=H ₂ SO ₄		N=HNO ₃		T=(Sodium Thiosulfate)				Relinquish by:		Date		Time		Received by:		Date		Time			
Shipment		Method		Sample Kit		Cooler #				1		J. Asimov		4-17-17		1445		J. Asimov		4/17/17		1445	
Out:		Via:		RB		D/T				2													
Ret:		Via:		AB		D/T				3													
				Trip Bl.						4													

Received on

☐ Yes ☐ NoQC ☐ sent☐ received

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 813, 470-5770

Company

FDEP

Address

13051 N. TALK 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. or 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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