



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:

Sims Branch

Date:

6-6-17

STORET Station ID:

G1SW0056

WBID:

11091

Latitude:

27°48' 26.2" N

County:

Manatee

RQ - 2017-06-05-40

ORG ID:

21FLTPA

Longitude:

82°23' 51.1" W

Receiving Body of Water:

Field ID:

G1SW0056

Sampling Team Members

Laurie Bachner
Asst. Mgr.

WQ Measurements
Sample Collection
Documentation
Preservation
Preservation Check

X
X
X
X
X

Sampling Equipment

☒ 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 / High / Flooded

Matrix: Fresh / Marine / DI

Meter ID#

Well

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 (umhos/cm)	Temp. (C°)
EST	1155	0.3	0.3	6.0	94	7.7	30.7	0.3	47436	29.44
CEN								15"		

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	☒ CHL500E-W	☒ Ice			
Physical/Aggregate (Fresh)	☐ Alkalinity / W-F / W-TSS / TURBIDITY / W-C-IC / W-COLOR / W-SO4-IC / W-TDS	☐ Ice			
Physical/Aggregate (Marine)	☒ Alkalinity / W-F / W-TSS / TURBIDITY	☒ Ice			
Macroinvertebrates	☐ M-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			

Contains
1:1
Sulfuric Acid
SA-6302030
EXP: 10/28/17
Warning!
See SDS

Notes:

RQ-2017-06-05-40

Date: 06-06-2017

Time:

Sims Branch

G1SW0056

Field ID
STORET



G1SW0056

Signature:

[Signature]

Date:

6-6-17

Field Parameters Entered Into LIMS: SM 06/08/2017

(Initials/Date)

Field Parameters QC in LIMS: SM 08/29/2017

(Initials/Date)

Date Migrated to STORET:

(Initials/Date)

Field Sheets Scanned/Saved: SM 09/25/2017

(Initials/Date)

Request Number: RQ-2017-06-05-40

RUN 15

Florida Department of Environmental Protection Central Laboratory Submittal Form

Page 1 of 2

last revised Apr 7, 2016:

Customer: WQAP

Project ID: SMP

Requester: Judy Ashton

Field Report Prepared By: J. AshtonCollected By: J. Ashton, L. BarkerSampling Agency: FDEP

Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date <u>6-6-17</u> Time <u>1100</u>		☒ Eastern ☐ Central		Composite end Date _____ Time _____		Bottle Group(s) (See pg 2)	
Field ID RQ-2017-06-05-40 Date: 06-06-2017 Time: _____		STORET # G2SW0029 Field ID STORET		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen <u>2.1</u>		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)	
Temp (C) <u>29.5</u>		pH <u>7.4</u>		Sample Depth <u>0.3</u>		☐ ft ☒ m		Sp. Conductance (umho/cm) <u>50070</u>			
Latitude <u>Wares Creek (Tidal)</u>		☐ dd ☐ dms		Salinity (ppt) <u>32.7</u>		Comments					
Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date <u>6-6-17</u> Time <u>1155</u>		☒ Eastern ☐ Central		Composite end Date _____ Time _____		Bottle Group(s)	
Field ID RQ-2017-06-05-40 Date: 06-06-2017 Time: _____		STORET # G1SW0056 Field ID STORET		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen <u>6.0</u>		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)	
Temp (C) <u>29.44</u>		pH <u>7.7</u>		Sample Depth _____		☐ ft ☒ m		Sp. Conductance (umho/cm) <u>47438</u>			
Latitude <u>Sims Branch</u>		☐ dd ☐ dms		Salinity (ppt) <u>30.7</u>		Comments					
Location		☐ Comp ☐ Grab		Collection (comp begin or grab) Date _____ Time _____		☐ Eastern ☐ Central		Composite end Date _____ Time _____		Bottle Group(s)	
Field ID		STORET #		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)			
Latitude		Longitude		Salinity (ppt)		Comments					
Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date _____ Time _____		☐ Eastern ☐ Central		Composite end Date _____ Time _____		Bottle Group(s)	
Field ID		STORET #		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)			
Latitude		Longitude		Salinity (ppt)		Comments					

Relinquished By: <u>J. Ashton</u>	Date/Time: <u>6-6-17 1700</u>	Shipping Method: <u>FED EX</u>	Number of Coolers Shipped: <u>1</u>	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 _____
ALKALINITY TURBIDITY W-F W-TSS				
Group: A	Bottle Type: BP-1L	# of Bottles: 2	Preservative: ICE	Enter Number of Bottles Sent to Lab _____
CHLSUITE-W				
Group: A	Bottle Type: P-500ML	# of Bottles: 2	Preservative: ICE And H2SO4	Enter Number of Bottles Sent to Lab _____
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 _____
W-PO4-F				
Group: B	Bottle Type: QPCR-P-250ML	# of Bottles: 4	Preservative: ICE	Enter Number of Bottles Sent to Lab _____
PCR-FILTER				
Group: B	Bottle Type: P-120ML-WC-THI	# of Bottles: 2	Preservative: ICE	Enter Number of Bottles Sent to Lab _____
SWD-AEL-EN <i>NOPPED OUT @ AEL</i>				
Group: B	Bottle Type: BG-1L	# of Bottles: 2	Preservative: ICE	Enter Number of Bottles Sent to Lab _____
W-AHERB-AA W-SUC-AA-R W-UHERB-AA				

Group C PCR-HA1B3 QPCR-P-250ML ICE # BOTTLES SENT TO LAB _____



Advanced
Environmental Laboratories, Inc.

6901 Southpoint Pkwy., • Jacksonville, FL 32216 • 904.363.0250 • Fax 904.363.9354 • ES2574
5010 Princess Palm Ave., • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • ES4589
2106 NW 67th Place, Ste. 7 • Gainesville, FL 32609 • 352.367.1500 • Fax 352.367.0030 • ES2620
528 S. North Lake Blvd., Ste. 1019 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597 • ES3076

LAB NUMBER:

Page 2 of 2

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:		PROJECT LOCATION: Florida		AR															
Temple Terrace, FL 33637				FAX: 813-470-5996		NE															
PHONE: 813-470-5700				SAMPLED BY:		AQ															
CONTACT: Matthew Bearden Sarah-Ems						LU															
TURNAROUND TIME:						YI															
☒ STANDARD						SR															
☐ RUSH						IE															
						SD															
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=sell		SL=sediment							
Field ID		SITE NAME		Grab Comp		SAMPLING		DATE		TIME		MATRIX		NO. COUNT		Preserv		Ice, T			
RQ-2017-06-05-40		G1SW0056		Grab		6-6-17		1155		SW		1									
Date: 06-06-2017		Field ID																			
Time:		STORET																			
Sims Branch		G1SW0056		Grab		6-6-17		1230		SW		1									
RQ-2017-06-05-39		G2SW0033		Grab																	
Date: 06/06/17		Field ID																			
Time:		STORET																			
Rice Creek		G2SW0033		Grab																	
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Package
US Airbill

FedEx
Tracking
Number

8113 0562 7951

From Please print and press hard.

Date 6-6-17 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

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



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

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.

2nd 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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