Request Number: RQ-2017-02-06-27

SMP RUN 9

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, Sarah Meyer

Field Report Prepared By: Judy Ashton

Sampling Agency: FDEP

Location: RQ-2017-02-06-27 Date: 02/06/2017 Time:

Field ID: G1SW0044 (STORET Field ID)

STORET #: BELLOWS LK

Latitude: ☐ dd ☐ dms **Longitude:** ☐ dd ☐ dms

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 2-7-17 Time 9:15 Eastern Central | Composite end Date Time | Bottle Group(s) (See pg 2): A

Matrix (type, e.g., Salt, Fresh, etc): | Diss. Oxygen 9.4 ☐ mg/L ☐ % sat | Total Res. Chlorine (mg/L)

Temp (C) 19.4 | pH 8.6 | Sample Depth 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm) 152

Salinity (ppt) 0.07 | Comments

Location:

Field ID: RQ-2017-02-06-27 Date: 02/07/17 Time: G1SW0053 (STORET Field ID)

STORET #: ROCKY CRK

Latitude: ☐ dd ☐ dms

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 2-7-17 Time 12:00 Eastern Central | Composite end Date Time | Bottle Group(s): A

Matrix (type, e.g., Salt, Fresh, etc): | Diss. Oxygen 8.7 ☐ mg/L ☐ % sat | Total Res. Chlorine (mg/L)

Temp (C) 18.5 | pH 7.4 | Sample Depth 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm)

Salinity (ppt) 0.19 | Comments

Location:

Field ID: RQ-2017-02-06-27 Date: 02/06/2017 Time: G1SW0030 (STORET Field ID)

STORET #: ARMISTEAD

Latitude: ☐ dms ☐ dd ☐ dms

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 2-7-17 Time 12:50 Eastern Central | Composite end Date Time | Bottle Group(s): A/B/C

Matrix (type, e.g., Salt, Fresh, etc): | Diss. Oxygen 9.0 ☐ mg/L ☐ % sat | Total Res. Chlorine (mg/L)

Temp (C) 20.5 | pH 7.4 | Sample Depth 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm) 173

Salinity (ppt) 0.08 | Comments: GROUP C = ALGAL ID

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	2-7-17 17:00	FRS Ex	2		2/8/17 11:35

Group: A Bottle Type: P-1L # of Bottles: 3 Preservative: ICE **Enter Number of Bottles Sent to Lab** 3

ALKALINITY
TURBIDITY
W-CL-IC
W-COLOR
W-F
W-SO4-IC
W-TDS
W-TSS

Group: A Bottle Type: BP-1L # of Bottles: 3 Preservative: ICE **Enter Number of Bottles Sent to Lab** 3

CHLSUITE-W

Group: A Bottle Type: P-500ML # of Bottles: 3 Preservative: ICE And H2SO4 **Enter Number of Bottles Sent to Lab** 3

W-NH3
W-NO2NO3
W-S-A-TP
W-TKN
W-TOC

Group: A Bottle Type: P-125ML # of Bottles: 3 Preservative: ICE-FLTR **Enter Number of Bottles Sent to Lab** 3

W-PO4-F

~~Group: B Bottle Type: P-120ML-WC-THI # of Bottles: 1~~ Preservative: ICE **Enter Number of Bottles Sent to Lab** —

~~SWD-AEL-EN~~

GROUP B MI-FW-QLDC 2L FORMALIN ICE 1

GROUP C 50ML ALGAL ID RANK # 3-6 1

Request Number: RQ-2017-02-06-27

SMP RUN 9

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Central Laboratory Submittal Form

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Customer: SW-DIST

Project ID: SMP

Requester: Judy Ashton

Collected By: Judy Ashton, Sarah Meyer

Field Report Prepared By: Judy Ashton

Sampling Agency: FDEP

Location: RQ-2017-02-06-27 Date: 02/06/2017 Time: — **Field ID:** G1SW0044 (STORET Field ID) — **STORET #:** BELLOWS LK

☐ Comp ☒ Grab — Collection (comp begin or grab) Date 2-7-17 Time 9:15 — Eastern / Central — Composite end Date — Time — Bottle Group(s) (See pg 2): A

Matrix (type, e.g., Salt, Fresh, etc): — Diss. Oxygen: 9.4 ☐ mg/L ☐ % sat — Total Res. Chlorine (mg/L): —

Temp (C): 19.4 — pH: 8.6 — Sample Depth: 0.3 ☐ ft ☒ m — Sp. Conductance (umho/cm): 152

Latitude ☐ dd ☐ dms — Longitude ☐ dd ☐ dms — Salinity (ppt): 0.07 — Comments:

Location: RQ-2017-02-06-27 Date: 02/07/17 Time: — **Field ID:** G1SW0053 (STORET Field ID) — **STORET #:** ROCKY CRK

☐ Comp ☒ Grab — Collection (comp begin or grab) Date 2-7-17 Time 12:00 — Eastern / Central — Composite end Date — Time — Bottle Group(s): A

Matrix (type, e.g., Salt, Fresh, etc): — Diss. Oxygen: 8.7 ☐ mg/L ☐ % sat — Total Res. Chlorine (mg/L): —

Temp (C): 18.5 — pH: 7.4 — Sample Depth: 0.3 ☐ ft ☒ m — Sp. Conductance (umho/cm): —

Latitude ☐ dd ☐ dms — Salinity (ppt): 0.19 — Comments:

Location: RQ-2017-02-06-27 Date: 02/06/2017 Time: — **Field ID:** G1SW0030 (STORET Field ID) — **STORET #:** ARMISTEAD

☐ Comp ☒ Grab — Collection (comp begin or grab) Date 2-7-17 Time 12:50 — Eastern / Central — Composite end Date — Time — Bottle Group(s): A/B/C

Matrix (type, e.g., Salt, Fresh, etc): — Diss. Oxygen: 9.0 ☐ mg/L ☐ % sat — Total Res. Chlorine (mg/L): —

Temp (C): 20.5 — pH: 7.4 — Sample Depth: 0.3 ☐ ft ☒ m — Sp. Conductance (umho/cm): 173

Latitude ☐ dd ☐ dms — Salinity (ppt): 0.08 — Comments: GROUP C = ALGAL ID

Location: — **Field ID:** — **STORET #:** —

☐ 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): —

Latitude ☐ dd ☐ dms — Longitude ☐ dd ☐ dms — Salinity (ppt): — Comments:

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
Judy Ashton	2-7-17 17:00	FRS Ex	2	J.D.	2/8/17 11:35

Group: A Bottle Type: P-1L # of Bottles: 3 Preservative: ICE **Enter Number of Bottles Sent to Lab** 3

ALKALINITY
TURBIDITY
W-CL-IC
W-COLOR
W-F
W-SO4-IC
W-TDS
W-TSS

Group: A Bottle Type: BP-1L # of Bottles: 3 Preservative: ICE **Enter Number of Bottles Sent to Lab** 3

CHLSUITE-W

Group: A Bottle Type: P-500ML # of Bottles: 3 Preservative: ICE And H2SO4 **Enter Number of Bottles Sent to Lab** 3

W-NH3
W-NO2NO3
W-S-A-TP
W-TKN
W-TOC

Group: A Bottle Type: P-125ML # of Bottles: 3 Preservative: ICE-FLTR **Enter Number of Bottles Sent to Lab** 3

W-PO4-F

~~Group: B Bottle Type: P-120ML-WC-THI # of Bottles: 1~~ Preservative: ICE **Enter Number of Bottles Sent to Lab**

~~SWD-AEL-EN~~

GROUP B MI-FW-QLDC 1L FORMALIN ICE 1

GROUP C 50ML ALGAL ID RANK # 3-6 1

RQ-2017-02-06-27

Date of Request: 11-JAN-2017
Created By: ASHTON_J On: 11-JAN-2017
Modified By: MATTHEWS_D On: 19-JAN-2017
Customer: SW-DIST
Project: SMP
Division:
District: Southwest District
Sampling Event: SMP RUN 9

Send Coolers To:

Phone: 813-470-5951
FL Dept. of Environmental Protection
13051 N. Telecom Parkway
Temple Terrace, FL 33637-0926
Attn: Judy Ashton

Send Final Report To:

FL Dept. of Environmental Protection
13051 N. Telecom Parkway
Temple Terrace, FL 33637-0926
Attn: Judy Ashton

Program Module Number:
Priority: 3
Event Status: S
Criminal Investigation: NO
Chemistry Request Reviewed By: WATTS_J On: 19-JAN-2017
Biology Request Reviewed By: MATTHEWS_D On: 19-JAN-2017
Sampling Kit Required: YES Ship on: 03-FEB-2017
Sampling Kit Shipped: YES On: 02-FEB-2017
Sampling Kit Packed By: KITCHEN_S
Preservatives Needed: NO
Date to Receive Samples: 07-FEB-2017
Received By:

Report Type: Final Only
FTP Data: NO
QC Report: YES
Date Log: NO
Authorization Log: NO

Comments:

Bottle Group A (Water) With 3 Samples:

Bottle Type: P-1L Number of Bottles: 3 Preserved With: ICE

ALKALINITY	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO3/L
TURBIDITY	Template: DEFAULT	(EPA 180.1 Rev. 2.0) Turbidity in aqueous matrices
W-CL-IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Chloride in aqueous matrices
W-COLOR Color (true)	Template: DEFAULT	(SM 2120 B) True Color measured at 450 nm
W-F	Template: DEFAULT	(SM 4500 F-C-97) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)
W-SO4-IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Sulfate in aqueous matrices
W-TDS	Template: DEFAULT	(SM 2540 C-97) Total Dissolved Solids in aqueous matrices
W-TSS	Template: DEFAULT	(SM 2540 D-97) Total Suspended Solids in aqueous matrices

Bottle Type: BP-1L Number of Bottles: 3 Preserved With: ICE

CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, phaeophytin and ratio by spectrophotometry

Bottle Type: P-500ML Number of Bottles: 3 Preserved With: ICE And H2SO4

W-NH3	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
W-NO2NO3	Template: DEFAULT	(EPA 353.2 Rev. 2.0) Nitrite/Nitrate in aqueous matrices as mg N/L
W-S-A-TP	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Total Phosphorus in aqueous matrices as mg P/L
W-TKN	Template: DEFAULT	(EPA 351.2 Rev. 2.0) Total Kjeldahl Nitrogen in aqueous matrices
W-TOC	Template: DEFAULT	(SM 5310 B-00) Nonpurgeable Organic Carbon in aqueous matrices

Bottle Type: P-125ML Number of Bottles: 3 Preserved With: ICE-FLTR

W-PO4-F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L

Bottle Group B (Water) With 1 Samples:

Bottle Type: Number of Bottles: 1 Preserved With: ICE

SWD-AEL-EN	Template: DEFAULT	(SM 9230 C) Enterococci by membrane filter method by Advanced Environmental Overflow Laboratories for SWD

Log-in Checklist

RQ- 2017-02-06-27

Shipping Method: Fed Ex Date/Time of Receipt: 2/8/17 11:35

Cooler ID	Cooler Temperature*	No. Sample Containers in Cooler	Evidence Tape				Tracking # (fill out only if waybill copy is damaged)
			Present?		*Intact?		
			Yes	No	Yes	No	
RED	2.0°C	5		✓			
RED	1.9°C	9		✓			

*If the temperature of a cooler is above 6.0 °C (or above 10.0 °C for W-1-4-DIOX), or if Evidence Seal is damaged, identify the containers in the affected cooler(s) on back of this form.

**Note: If "No" is checked in any of the fields below, fill out the back of this form with additional details (Field ID, Test IDs, etc.) and generate an NCR.

**Chain of Custody/ Field Sheet(s) Included? Yes ✓ No____

CONTAINER CHECK

**Evidence Tape on Bottles? Yes____ No ✓ If yes, is it intact? Yes____ No____

**Caps on tight? Yes ✓ No____ **Containers intact? Yes ✓ No____

**Sufficient Sample Volume: Yes ✓ No____

CHLORINE CHECK (Blue dot on container)

Check the Box marked "Yes" or "No" for the Presence of Chlorine. If Cl detected, an NCR is required.					
Analysis	Yes	No	Analysis	Yes	No
W-1,4 DIOX			W-PC-AA-SF		
W-AHERB-AA (-AHB-AA-R)			W-PCL-SQ (-R)		
W-BNA (-625, -R)			W-PDQUAT		
W-CARB-AA (-CAB-AA-R)			W-PESTNP-R		
W-ENDO-AA			W-PSCL-TQ		
W-GLYPH			W-PSNP-TQ		
W-NP-AA-SF			W-PST-CL-R		
W-PAH (-R)			W-TR-TQ		
W-PCB-R			W-CT-CI-R		

PRESERVATION CHECK (EXCLUDING SAMPLES SENT TO OVERFLOW LABS, "OV-")

**Acid Preserved Samples: pH ≤ 2.0? Yes ✓ No____ NA____ Init: J.A.

**W-1-4-DIOX (Green dot on container) preserved to pH < 4.0? Yes____ No____ NA ✓ Init: J.A.

Coolers Unpacked/Checked by: J.A. Date: 2/8/17 NCRs (Y/N)? N

Event ID: SW-DIST-2017-02-08-01 NCR #____

Log-in Checklist

Samples with Incorrect pH Preservation or presence of Chlorine

Field ID	Bottle Test ID(s)	pH / Cl	Action Taken

Samples in Coolers with Incorrect Preservation or Damaged Evidence Tape

Cooler ID	Field ID	Bottle Test ID(s)

Bottles Not Intact

Field ID	Bottle Test ID(s)	Loose Cap	Damaged Cap		Damaged Container		Evidence Tape Not Intact
			CK	BR	CK	BR	

Samples with Insufficient Volume for Analyses

Field ID	Bottle Test ID(s)	Action Taken

ENCORE SAMPLES

S-VOC-MS samples in Encores must be frozen within 48 hours of collection.

Were Encore samples received? Yes____ No✓

Date and time placed in freezer _____

Were all samples placed in freezer within 48 hours of collection? Yes_____ No_____

If no, were samples shipped on dry ice? Yes_____ No_____

FOR CLEAN LAB USE ONLY – Total Mercury Preservation Check (W-HG-AF; W-HG-AF-F):

Samples preserved within 48 hours? Yes_____ No_____

Date and time samples preserved: _____

Additional Comments:

00202

01000

16223

fedex.com 1.800.GoFedEx 1.800.463.3339

06175033

FedEx Express Package US Airbill

FedEx Tracking Number 8104 1261 3048

Form ID No. 0215

1 From

Date 12/07/2017

Sender's Name [redacted] Phone [redacted]

Company

Address [redacted]

Dept./Floor/Suite/Room

City [redacted] State FL ZIP [redacted]

2 Your Internal Billing Reference

3 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 32399-6542

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.

0124452242

8104 1261 3048

4 Express Package Service * To most locations.

Package
For package
FedEx Exp

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.
- [X] 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 s will be delivered on Monday unless Satu 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

6 Special Handling and Delivery Signature Options Fees may apply. See th

- [ ] 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 Sig — If no one is avai address, someo address may sig residential deliv

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

Restrictions apply for dangerous goods — see the current FedEx Service Guide.

- [ ] Cargo Aircraft

7 Payment *Bill to:*

Enter FedEx Acct. No. or Credit Card No. below.

- [ ] Sender — Acct. No. in Section 1 will be billed.
- [X] Recipient
- [ ] Third Party
- [ ] Credit Card

[redacted]262

Total Packages 1 Total Weight 50 lbs. Credit Card Auth.

†Our liability is limited to US$100 unless you declare a higher value. See the current FedEx Service Guide for details.

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00025

01000

03503

fedex.com 1.800.GoFedEx 1.800.463.3339

06325007

FedEx Express Package US Airbill

FedEx Tracking Number 8111 7111 0260

Form ID No. 0215

1 From

Date 02/03/2017

Sender's Name EDEP Phone 813 470-5700

Company

Address 1351 N Telecom Pkwy

Dept./Floor/Suite/Room

City TEMPLE TERRACE State FL ZIP 33637

2 Your Internal Billing Reference

3 To

Recipient's Name 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 32399-6542

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.

0125636852

8111 7111 0260

4 Express Package Service * To most locations.

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 availab
- ☐ FedEx 2Day — Second business afternoon.* T will be delivered on Monday u Delivery is selected.
- ☐ FedEx Express Saver — Third business day.* Saturday Delivery NOT availab

5 Packaging * Declared value limit $500.

☐ FedEx Envelope* ☐ FedEx Pak* ☐ FedEx Box ☐

6 Special Handling and Delivery Signature Options Fees may app

☐ 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.

☐ Indi — If no addre addre reside

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

Restrictions apply for dangerous goods — see the current FedEx Service Guide. ☐ Cargo

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 Car

[redacted]262

Total Packages 1 Total Weight 50 lbs. [redacted] Credit Card Auth.

†Our liability is limited to US$100 unless you declare a higher value. See the current FedEx Service Guide for details.

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