

SMP-0015 ~~RQ-2017-01-23-61~~ RQ-2017-06-12-41

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: SW-DIST

Requester: Judy Ashton

Field Report Prepared By: Judy Ashton

Project ID: SMP

Collected By: J. Ashton, L. Bacher

Sampling Agency: FDP

Location RQ-2017-06-12-41 Date: 06-12-17 Time: Pasadena		Field ID G5SW0119 STORET Pasadena		☐ Comp ☒ Grab Collection (comp begin or grab) Date 6-12-17 Time 0940 Eastern Central		Composite end Date _____ Time _____		Bottle Group(s) (See pg 2) A	
Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 5.9 mg/L		☒ % sat Total Res. Chlorine (mg/L)		Temp (C) 28.7		pH 7.9	
Sample Depth 0.3		☐ ft ☒ m		Sp. Conductance (umho/cm) 392		Salinity (ppt) 0.19		Comments	
☐ dd ☐ dms		☐ dd ☐ dms							
Location RQ-2017-06-12-41 Date: 06-12-17 Time: PP Ditch #5		Field ID G5SW0118 STORET PP Ditch #5		☐ Comp ☒ Grab Collection (comp begin or grab) Date 6-12-17 Time 1030 Eastern Central		Composite end Date _____ Time _____		Bottle Group(s) A/B	
Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 2.8 mg/L		☒ % sat Total Res. Chlorine (mg/L)		Temp (C) 27.1		pH 7.2	
Sample Depth 0.3		☐ ft ☒ m		Sp. Conductance (umho/cm) 467		Salinity (ppt) 0.22		Comments Dropped off E. coli at AEL	
☐ dd ☐ dms		☐ dd ☐ dms							
Location		Field ID		☐ 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		Longitude		Salinity (ppt)		Comments			
☐ dd ☐ dms		☐ dd ☐ dms							
Location		Field ID		☐ 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		Longitude		Salinity (ppt)		Comments			
☐ dd ☐ dms		☐ dd ☐ dms							

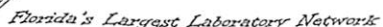
Relinquished By: Judy Ashton	Date/Time: 6-12-17 1700	Shipping Method: FedEx	Number of Coolers Shipped: 1	Received By: JR	Date/Time: 6-13-17/9:40
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Group: A	Bottle Type:	P-1L	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>2</u>
	ALKALINITY TURBIDITY W-CL-IC W-COLOR W-F W-SO4-IC W-TDS W-TSS						
Group: A	Bottle Type:	BP-1L	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>2</u>
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 4	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	<u>2</u>
	W-NH3 W-NO2NO3 W-S-A-TP W-TKN W-TOC						
Group: A	Bottle Type:	P-125ML	# of Bottles: 4	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	<u>2</u>
	W-PO4-F						

Group B PCL-FILTER BPCL-P-250ML ICE # SENT TO LAB 2

Group B SWD-ALL-EC P-100ML ICE # SENT TO LAB 0
 DROPPED W/ 2 ALL

Group B W-ATHEL-AT 136-1L ICE # SENT TO LAB 1
 W-SUC-AA-R
 W-UTHEL-AT



☐ **Altamonte Springs:** 380 Northlake Blvd., Ste. 1048 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597

☐ **Jacksonville:** 6681 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354

☐ **Tallahassee:** 2639 North Monroe St., Suite D, Tallahassee, FL 32303 • 850.219.6274 • Fax 850.219.6275

☐ **Gainesville:** 4965 SW 41st Blvd. • Gainesville, FL 32608 • 352.377.2349 • Fax 352.395.6639

Matrix Code: WW = wastewater SW = surface water GW = ground water DW = drinking water O = oil A = air SO = soil SL = sludge

Preservation Code: I = ice H=(HCl) S = (H₂SO₄) N = (HNO₃) T = (Sodium Thiosulfate)

Temp. when received (observed) _____ °C Temp. when received (corrected) _____ °C

Device used for measuring Temp by unique identifier (circle IR temp gun used) J: 9A G: LT-1 LT-2 T: 10A A: 3A M: 3A S: 1V

FOR DRINKING WATER USE:

(When PWS Information not otherwise supplied) PWS ID:

Contact Person: _____ Phone: _____

Supplier of Water: _____

Site-Address:

Date of Request: 24-MAY-2017
 Created By: ASHTON_J On: 24-MAY-2017
 Modified By: MATTHEWS_D On: 06-JUN-2017
 Customer: WQAP
 Project: SMP
 Division: Division of Environmental Assessment and Restoration
 District:
 Sampling Event: RUN 4

Send Coolers To:

Phone: 813-470-5772
 13051 N. Telecom Parkway

 Tampa, FL 33637
 Attn: Judy Ashton

Send Final Report To:

13051 N. Telecom Parkway

 Tampa, FL 33637
 Attn: Judy Ashton

Program Module Number:

Priority: 3

Event Status: A

Criminal Investigation: NO

Chemistry Request Reviewed By: WATTS_J On: 02-JUN-2017

Biology Request Reviewed By: MATTHEWS_D On: 06-JUN-2017

Sampling Kit Required: NO Ship on:

Sampling Kit Shipped:

Sampling Kit Packed By:

Preservatives Needed: NO

Date to Receive Samples: 12-JUN-2017

Received By:

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

Comments: Group A: Freshwater Kit, No Metals

Bottle Group A (Water) With 2 Samples:

Bottle Type: P-1L	Number of Bottles: 2	Preserved With: ICE
ALKALINITY	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO ₃ /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	Template: DEFAULT	(SM 2120 B) True Color measured at 450 nm
Color (true)		
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: 2	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: 2	Preserved With: ICE And H ₂ SO ₄
W-NH ₃	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
W-NO ₂ NO ₃	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: 2	Preserved With: ICE-FLTR
W-PO ₄ -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: QPCR-P-250ML	Number of Bottles: 2	Preserved With: ICE
PCR-FILTER	Template: DEFAULT	(SOP-PCR-4.0) Preparation of Samples by Filtration and held for qPCR Analysis
Bottle Type:	Number of Bottles: 1	Preserved With: ICE
SWD-AEL-EC	Template: DEFAULT	(EPA 1603) Escherichia coli by membrane filter method using modified mTEC by Advanced Environmental Tampa Lab for SWD
Bottle Type: BG-1L	Number of Bottles: 1	Preserved With: ICE

Bottle Group B (Water) With 1 Samples:

Bottle Type: BG-1L	Number of Bottles: 1	Preserved With: ICE
W-AHERB-AA	Template: DEFAULT	(USGS O-2060-01) Chlorinated (phenoxy acid) herbicides in water matrices by HPLC/MS/MS
W-SUC-AA-R	Template: DEFAULT	(EPA 8321B) Analysis of sucralose in water matrices by HPLC/MS/MS
W-UHERB-AA	Template: DEFAULT	(USGS O-2060-01) Urea herbicides and other chemicals in water matrices by HPLC/MS/MS

* - The laboratory is not NELAP certified for this analyte/method, or certification is not applicable.

RQ- 2017-0642-41

Log-in Checklist

Shipping Method: RedexDate/Time of Receipt: 6-13-17/9:40

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	
<u>Red</u>	<u>0.3</u>	<u>11</u>		☒			

*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 $\leq$ 2.0? Yes ☒ No ☐ NA ☐ Init: SR

**W-1-4-DIOX (Green dot on container) preserved to pH < 4.0? Yes ☐ No ☒ NA ☐ Init: SR

Coolers Unpacked/Checked by: SR Date: 6-11-17 NCRs (Y/N)? N

Event ID: WQAP-2017-06-13-01 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:

00670

01000

FedEx
ExpressPackage
US AirbillFedEx
Tracking
Number

8115 9551 9120

1 From

Date

6-12-17

Sender's
Name

Phone

813 470-5700

Company

FDEP

Address

13051 N. Telecom Pkwy

City

Temple Terrace

State

FL ZIP 33637

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

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.☐Form
ID No.

0215

MUR4

Recipient's Copy

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 OvernightEarliest next business morning delivery to select
locations. Friday shipments will be delivered on
Monday unless Saturday Delivery is selected.☒ FedEx Priority OvernightNext business morning.* Friday shipments will be
delivered on Monday unless Saturday Delivery
is selected.☐ FedEx Standard OvernightNext business afternoon.*
Saturday Delivery NOT available.

2 or 3 Business Days

☐ FedEx 2Day A.M.Second business morning.*
Saturday Delivery NOT available.☐ FedEx 2DaySecond business afternoon.* Thursday shipments
will be delivered on Monday unless Saturday
Delivery is selected.☐ FedEx Express SaverThird 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?

☒ 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.

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

Total Packages

Total Weight

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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8115 9551 9120

611