

Request Number: 2017-06-26-18RUN # BFlorida Department of Environmental Protection
Central Laboratory Submittal Form

1043

Page 1 of 2

last revised Apr 7, 2016

Customer: SW-DIST

Requester: Judy AshtonField Report Prepared By: Judy Ashton

Project ID: SMP

Collected By: Judy Ashton, LAUREL BACONSampling Agency: FSLP

Location	RQ-2017-06-26-18 Date: 06/27/17 Time: Dead Lady	 G1SW0021 Field ID STORET	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>6-27-17</u> Time <u>0930</u>	<u>Eastern</u> Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)
Field ID				Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen <u>6.1</u> mg/L ☐ % sat	Total Res. Chlorine (mg/L)	A
STORET #				Temp (C) <u>29.5</u>	pH <u>6.4</u>	Sample Depth <u>0.3</u> ft ☒ m	
Latitude	☐ dd ☐ dms			Salinity (ppt) <u>0.08</u>	Comments		
Location	RQ-2017-06-26-18 Date: 06-27-2017 Time: Dead Lady Dup	 G1SW0021 Field ID STORET	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>6-27-17</u> Time <u>0933</u>	<u>Eastern</u> 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)	A
STORET #				Temp (C) _____	pH _____	Sample Depth _____ ft _____ m	
Latitude	☐ dd ☐ dms			Salinity (ppt) _____	Comments		
Location	RQ-2017-06-26-18 Date: 06-27-2017 Time: BLANK	 BLANK Field ID STORET	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>6-27-17</u> Time <u>0940</u>	<u>Eastern</u> 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)	A
STORET #				Temp (C) _____	pH _____	Sample Depth _____ ft _____ m	
Latitude	☐ dd ☐ dms			Salinity (ppt) _____	Comments		
Location	RQ-2017-06-26-18 Date: 06-27-2017 Time: Juanita	 G1SW0019 Field ID STORET	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>6-27-17</u> Time <u>1026</u>	<u>Eastern</u> Central	Composite end Date _____ Time _____	Bottle Group(s)
Field ID				Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen <u>6.9</u> mg/L ☐ % sat	Total Res. Chlorine (mg/L)	A
STORET #				Temp (C) <u>31.0</u>	pH <u>7.0</u>	Sample Depth <u>0.3</u> ft ☒ m	
Latitude	☐ dd ☐ dms			Salinity (ppt) <u>0.07</u>	Comments		

Relinquished By: <u>Judy Ashton</u>	Date/Time: <u>6-27-17 1700</u>	Shipping Method: <u>Fed Ex</u>	Number of Coolers Shipped: <u>2</u>	Received By: <u>SR</u>	Date/Time: <u>6-28-17 9:50</u>
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Group: A Bottle Type: P-1L # of Bottles: 6 Preservative: ICE Enter Number of Bottles Sent to Lab 6

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

Group: A Bottle Type: BP-1L # of Bottles: 6 Preservative: ICE Enter Number of Bottles Sent to Lab 6

CHLSUITE-W

Group: A Bottle Type: P-500ML # of Bottles: 6 Preservative: ICE And H2SO4 Enter Number of Bottles Sent to Lab 6

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

Group: A Bottle Type: P-125ML # of Bottles: 6 Preservative: ICE-FLTR Enter Number of Bottles Sent to Lab 6

W-PO4-F

Request Number: 2017-06-26-18

Florida Department of Environmental Protection

Central Laboratory Submittal Form

last revised Apr 7, 2016

Page 1 of 2

Customer: SW-DIST

Requester: Judy Ashton

Field Report Prepared By: Judy Ashton

Project ID: SMP

Collected By: J. Ashton L. Bacher

Sampling Agency: FDEP

Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 6-27-17 Time 11:30		Eastern Central		Composite end Date Time		Bottle Group(s) (See pg 2)	
Field ID RQ-2017-06-26-18 Date: 06-27-2017 Time:		G1SW0027 Field ID STORET		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 6.1		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)	
STORET Lake Estes		G1SW0027		Temp (C) 30.7		pH 7.0		Sample Depth 0.3		Sp. Conductance (umho/cm) 250	
Latitude		Longitude		Salinity (ppt) 0.12		Comments					
Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 6-27-17 Time 1200		Eastern Central		Composite end Date Time		Bottle Group(s)	
Field ID RQ-2017-06-26-18 Date: 06-27-2017 Time:		G1SW0064 Field ID STORET		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 2.0		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)	
STORET Chapman		G1SW0064		Temp (C) 30.9		pH 6.7		Sample Depth 0.3		Sp. Conductance (umho/cm) 384	
Latitude		Longitude		Salinity (ppt) 0.18		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		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				Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen		☐ mg/L ☐ % sat		Total Res. Chlorine (mg/L)	
STORET #				Temp (C)		pH		Sample Depth		Sp. Conductance (umho/cm)	
Latitude		Longitude		Salinity (ppt)		Comments					

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By: SR	Date/Time 6-28-17/9:50
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Group: A	Bottle Type:	P-1L	# of Bottles: 6	Preservative:	ICE	Enter Number of Bottles Sent to Lab
	ALKALINITY					
	TURBIDITY					
	W-CL-IC					
	W-COLOR					
	W-F					
	W-SO4-IC					
	W-TDS					
	W-TSS					

Group: A	Bottle Type:	BP-1L	# of Bottles: 6	Preservative:	ICE	Enter Number of Bottles Sent to Lab
	CHLSUITE-W					

Group: A	Bottle Type:	P-500ML	# of Bottles: 6	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: 6	Preservative: ICE-FLTR		Enter Number of Bottles Sent to Lab
	W-PO4-F					

Printed: 6/28/2017 11:07:27 AM

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Date of Request: 05-JUN-2017
 Created By: ASHTON_J On: 05-JUN-2017
 Modified By: MATTHEWS_D On: 08-JUN-2017
 Customer: WQAP
 Project: SMP
 Division: Division of Environmental Assessment and Restoration
 District:
 Sampling Event: RUN 8

Send Coolers To:

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

 Tampa, FL 33637
 Attn: Judy Ashton

Program Module Number:

Priority: 3

Event Status: S

Criminal Investigation: NO

Chemistry Request Reviewed By: WATTS_J On: 06-JUN-2017

Biology Request Reviewed By: MATTHEWS_D On: 08-JUN-2017

Sampling Kit Required: YES Ship on: 13-JUN-2017

Sampling Kit Shipped: YES On: 12-JUN-2017

Sampling Kit Packed By: REAVES_S

Preservatives Needed: NO

Date to Receive Samples: 27-JUN-2017

Received By:

Send Final Report To:

13051 N. Telecom Parkway

 Tampa, FL 33637
 Attn: Judy Ashton

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 5 Samples:

Bottle Type: P-1L	Number of Bottles: 5	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-SO ₄ -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: 5	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: 5	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: 5	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

Log-in Checklist

RQ- 20170628 (B)

Shipping Method: Fedex

Date/Time of Receipt: 6-28-17 / 9:50

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	
Res	0.6	12		✓	✓		
Res	0.9	12		✓			

*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: 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: 6-28-17

NCRs (Y/N)? N

Event ID: WQAP-2017-06-28-03

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:

00914

01000

FedEx Package
Express US Airbill
FedEx
Tracking
Number

8113 0563 2480

1 9230

fedex.com 1800.GoFedEx 1800.463.3339

06435039

1 From
Date 6-27-17
Sender's
Name

Phone

Company

Address

City

State

ZIP

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

32397

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.
☐

0126430468



8113 0563 2480

Form
ID No.

0215

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 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

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.

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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611

fedex.com 1800.GoFedEx 1800.463.3339

00913
01000

19230

1800.GoFedEx 1800.463.3339
fedex.com**FedEx** Package
Express US AirbillFedEx
Tracking
Number

8113 0563 2479

Form
ID No.

0215

Recipient's Copy

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

1 From

Date

6-27-17

Sender's
Name

Phone

813 470-5266

Company

Address

City

State

ZIP

Dept./Floor/Suite/Room

2 Your Internal Billing Reference

3 To
Recipient's
Name

Phone

850 245-8085

Company

Address 2600 BLAIRSTONE RD

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

02399

Dept./Floor/Suite/Room

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.

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

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☐

Cargo Aircraft Only

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

7 Payment Bill to:

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

Obtain recip.
Acct. No.☐Sender
Acct. No. in Section
I will be billed.☒

Recipient

☐

Third Party

☐

Credit Card

☐

Cash/Check

Total Packages

Total Weight

lbs.

*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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