

Request Number:

2017-07-31-57

Florida Department of Environmental Protection

Central Laboratory Submittal Form

Page 1 of 2

last revised Apr 7, 2016

Customer: SW-DIST

Requester: Judy Ashton

Field Report Prepared By: C. Orr

Project ID: SMP

MANGO LK

Collected By: C. Orr

Sampling Agency: 8040

Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 8/10/17 Time 1145		☒ Eastern ☐ Central		Composite end Date _____ Time _____		Bottle Group(s) (See pg 2)	
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		Sp. Conductance (umho/cm)			
Latitude		Salinity (ppt)		Comments							
Date: 07/31/17 8/10/17		Mango Lake		31.5		6.5		0.3		170	
Barcode: G1SW0034		Barcode: G1SW0034									

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		Salinity (ppt)		Comments							
Longitude		dd dms		dd dms							

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		Salinity (ppt)		Comments							
Longitude		dd dms		dd dms							

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		Salinity (ppt)		Comments							
Longitude		dd dms		dd dms							

Relinquished By: C. Orr	Date/Time: 8/10/17; 1300	Shipping Method: FedEx	Number of Coolers Shipped: 1	Received By: [Signature]	Date/Time: 8/11/17 10:05
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Group: A	Bottle Type:	P-1L	# of Bottles: 6	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	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	1
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 6	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	1
	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	1
	W-PO4-F						

Date of Request: 26-JUL-2017
 Created By: ASHTON_J On: 26-JUL-2017
 Modified By: SWANSON_C On: 27-JUL-2017
 Customer: WQAP
 Project: SMP
 Division: Division of Environmental Assessment and Restoration
 District:
 Sampling Event: Mango Lake LVI

Send Coolers To:

Phone: 813-470-5772
 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: 26-JUL-2017
 Biology Request Reviewed By: SWANSON_C On: 27-JUL-2017
 Sampling Kit Required: NO Ship on:
 Sampling Kit Shipped:
 Sampling Kit Packed By:
 Preservatives Needed: NO
 Date to Receive Samples: 31-JUL-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 1 Samples:

Bottle Type: P-1L	Number of Bottles: 1	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	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: 1	Preserved With: ICE
CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry
Bottle Type: P-500ML	Number of Bottles: 1	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: 1	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

Log-in Checklist

RQ- 2017-07-31-57

Shipping Method: FedEx

Date/Time of Receipt: 8/11/17 10:05

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	
BLUE	1.9°C	4		☒			

*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.D.

**W-1-4-DIOX (Green dot on container) preserved to pH < 4.0? Yes ☐ No ☐ NA ☒ Init: J.2

Coolers Unpacked/Checked by: J.D. Date: 8/11/17 NCRs (Y/N)? ☐

Event ID: WQAP-2017-08-11-03 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:

01000

FedEx
Express

 Package
US Airbill

 FedEx
Tracking
Number

8119 3904 5271

1 From

Date

8/15/17

Sender's
Name

Phone

713 470-5700

Company

FTEP

Address

1151 N TOLSON PKWY

Dept./Floor/Suite/Room

City

Temple Terrace

State

FL

ZIP

33637

2 Your Internal Billing Reference

3 To

Recipient's
Name

SAMPLE RECEIVING

Phone

850 245-8088

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



8119 3904 5271

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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