

Brandt Lake LVI

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQAP

Requester: Judy Ashton

Field Report Prepared By: Judy Ashton

Project ID: SMP

Collected By: Judy Ashton, L. BahtlerSampling Agency: FDEP

Location		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>8-17-17</u> Time <u>1116</u>		☒ Eastern ☐ Central	Composite end Date _____ Time _____		Bottle Group(s) (See pg 2)	
Field ID	RQ-2017-08-14-44 Date: 08-17-2017 Time: _____	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		A	
STORET	G1SW0025 Field ID STORET	Temp (C)	pH	Sample Depth	☐ ft ☒ m	Sp. Conductance (umho/cm)			
Latitude	Brandt Lake	Salinity (ppt)	Comments						
		☐ dd ☐ dms							
Location		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>8-17-17</u> Time <u>1120</u>		☒ Eastern ☐ Central	Composite end Date _____ Time _____		Bottle Group(s)	
Field ID	RQ-2017-08-14-44 Date: 08-17-2017 Time: _____	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		A	
STORET	G1SW0025 Field ID STORET	Temp (C)	pH	Sample Depth	☐ ft ☒ m	Sp. Conductance (umho/cm)			
Latitude	Brandt Lake <u>Dup</u>	Salinity (ppt)	Comments						
		☐ dd ☐ dms							
Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date <u>8-17-17</u> Time <u>1130</u>		☐ Eastern ☐ Central	Composite end Date _____ Time _____		Bottle Group(s)	
Field ID	RQ-2017-08-14-44 Date: 08-17-2017 Time: _____	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		A	
STORET	BLANK Field ID STORET	Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)			
Latitude	BLANK	Salinity (ppt)	Comments						
		☐ dd ☐ dms			FIELD BLANK				
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	☐ ft ☐ m	Sp. Conductance (umho/cm)			
Latitude		Salinity (ppt)	Comments						
		☐ dd ☐ dms							

Relinquished By: <u>J. Ashton</u>	Date/Time: <u>8-17-17 1700</u>	Shipping Method: <u>FED EP</u>	Number of Coolers Shipped: <u>1</u>	Received By: <u>ABJ</u>	Date/Time: <u>08-18-17 19:55</u>
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Group: A	Bottle Type:	P-1L	# of Bottles: 3	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>3</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: 3	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>3</u>
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 3	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	<u>3</u>
	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	<u>3</u>
	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: Brandt 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: R
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 27-JUL-2017
 Biology Request Reviewed By: SWANSON_C On: 27-JUL-2017
 Sampling Kit Required: YES Ship on: 02-AUG-2017
 Sampling Kit Shipped: YES On: 01-AUG-2017
 Sampling Kit Packed By: REYNOLDS_T
 Preservatives Needed: NO
 Date to Receive Samples: 17-AUG-2017
 Received By: SHAIK_A On: 18-AUG-2017

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 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 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: 3	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: 3	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: 3	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- 2017-08-14-44

Shipping Method: Fed Exl

Date/Time of Receipt: 8-18-17/9-55

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	Yes	No		
BLUE	1.9C	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: ADP

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

Coolers Unpacked/Checked by: ADP Date: 8-18-17 NCRs (Y/N)? ☒

Event ID: Brandt Lake LVI NCR #

WQAP-2017-08-18-01 (SMP)

Date Received: 18-AUG-2017 09:55

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
ExpressPackage
US AirbillFedEx
Tracking
Number

8115 9628 1580

fedex.com 1800.GoFedEx 1800.463.3339

1 From
 Date 8-17-17
 Sender's Name _____ Phone 813-416-5
 Company _____
 Address _____
 City _____ State _____ ZIP _____
 Dept./Floor/Suite/Room _____

2 Your Internal Billing Reference

3 To
 Recipient's Name CAMPBELL RECEIVING Phone 850-345-8085
 Company FLORIDA DEPARTMENT OF TRANSPORTATION
 Address 2400 PLAINFIELD 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 32309



8115 9628 1580

0126912290

0215

4 Express Package Service

* To most locations.

 Packages up to 150 lbs.
 For packages over 150 lbs., see 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**
 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 ☐ Yes ☐ Yes
 As per attached Shopper's Declaration Shopper's Declaration not required
- ☐ Dry Ice ☐ Cargo Aircraft Only
 Dry Ice, 8 UN 1845 _____ kg
- Restrictions apply for dangerous goods — see the current FedEx Service Guide.

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

Total Packages _____

Total Weight _____

Credit Card Acct. _____

*Our liability is limited to \$5000 unless you declare a higher value. See the current FedEx Service Guide for details.

611

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