

Florida Department of Environmental Protection
Central Laboratory Submittal Form

Lakes-A-kits

Customer: WQAP

Requester: Judy Ashton

Field Report Prepared By: Sarah Panek

Project ID: SMP

Collected By: FDEP

Sampling Agency: FDEP

Location <u>Lake Helen</u>	RQ-2017-08-28-14 Date: <u>8/29/17</u>	Field ID <u>G1SW0069</u>	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>8/29/17</u> Time <u>1015</u>	<u>Eastern</u> Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2) <u>A</u>
Field ID <u>G1SW0069</u>	Time: <u>1015</u>	STORET <u>G1SW0069</u>	Matrix (type, e.g., Salt, Fresh, etc) <u>Fresh, Surface</u>		Diss. Oxygen <u>6.74</u>	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET # <u>G1SW0069</u>	Lake Helen		Temp (C) <u>29.9</u>	pH <u>6.38</u>	Sample Depth <u>>6</u>	☐ ft ☒ m	Sp. Conductance (umho/cm) <u>245.3</u>
Latitude <u>28.12178056</u>	☒ dd ☐ dms	Longitude <u>-82.53870556</u>	☒ dd ☐ dms	Salinity (ppt)	Comments		
Location <u>Dosson Lake</u>	RQ-2017-08-28-14 Date: <u>8/29/17</u>	Field ID <u>G1SW0073</u>	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>8/29/17</u> Time <u>1330</u>	<u>Eastern</u> Central	Composite end Date _____ Time _____	Bottle Group(s) <u>A</u>
Field ID <u>G1SW0073</u>	Time: <u>1330</u>	STORET <u>G1SW0073</u>	Matrix (type, e.g., Salt, Fresh, etc) <u>Fresh, Surface</u>		Diss. Oxygen <u>6.2</u>	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET # <u>G1SW0073</u>	Dosson Lake		Temp (C) <u>27.9</u>	pH <u>6.08</u>	Sample Depth <u>>4</u>	☐ ft ☒ m	Sp. Conductance (umho/cm) <u>103.7</u>
Latitude <u>28.1231</u>	☒ dd ☐ dms	Longitude <u>-82.52553056</u>	☒ dd ☐ dms	Salinity (ppt)	Comments		
Location <u>Sunshine Lake</u>	RQ-2017-08-28-14 Date: <u>8/29/17</u>	Field ID <u>G1SW0072</u>	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>8/29/17</u> Time <u>1400</u>	<u>Eastern</u> Central	Composite end Date _____ Time _____	Bottle Group(s) <u>A</u>
Field ID <u>G1SW0072</u>	Time: <u>1400</u>	STORET <u>G1SW0072</u>	Matrix (type, e.g., Salt, Fresh, etc) <u>Fresh, Surface</u>		Diss. Oxygen <u>6.49</u>	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET # <u>G1SW0072</u>	Sunshine Lake		Temp (C) <u>29.4</u>	pH <u>6.18</u>	Sample Depth <u>>4</u>	☐ ft ☒ m	Sp. Conductance (umho/cm) <u>109.2</u>
Latitude <u>28.11981111</u>	☒ dd ☐ dms	Longitude <u>-82.52588056</u>	☒ dd ☐ dms	Salinity (ppt)	Comments		
Location			☐ Comp ☐ Grab	Collection (comp begin or grab) Date _____ Time _____	<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)
STORET #			Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments		

Relinquished By: <u>Sarah Panek</u>	Date/Time <u>8/29/17/1530</u>	Shipping Method <u>FedEx</u>	Number of Coolers Shipped: <u>2</u>	Received By: <u>G.D.</u>	Date/Time <u>8/30/17 10:29</u>
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Group: A	Bottle Type:	P-1L	# of Bottles: 17	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: 17	Preservative:	ICE	Enter Number of Bottles Sent to Lab	3
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 17	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: 17	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	3
	W-PO4-F						

Request Number: RQ-2017-08-28-14

Lakes-A-kits

Florida Department of Environmental Protection

Central Laboratory Submittal Form

1 of 3

Page 1 of 2

last revised Apr 7, 2016

Customer: WQAP

Project ID: SMP

Requester: Judy Ashton

Field Report Prepared By: L. Bachler

Collected By: Curtis Musson

Sampling Agency: FDEP

Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 8-29-17 Time 1055		☒ Eastern ☐ Central		Composite end Date Time		Bottle Group(s) (See pg 2)	
Field ID	RQ-2017-08-28-14 Date:	Field ID	Matrix (type, e.g., Salt, Fresh, etc) Fresh		Diss. Oxygen 5.31		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		A
STORET #	Time:	STORET	Temp (C) 30.17		pH 6.27		Sample Depth 0.3		Sp. Conductance (umho/cm) 128		
Latitude	Wood Lake	STORET	Salinity (ppt) 0.06		Comments LVI						
Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 8-29-17 Time 1040		☒ Eastern ☐ Central		Composite end Date Time		Bottle Group(s)	
Field ID	RQ-2017-08-28-14 Date:	Field ID	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 4.3		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		A
STORET #	Time:	STORET	Temp (C) 29.3		pH 6.6		Sample Depth 0.3		Sp. Conductance (umho/cm) 107		
Latitude	Lake Virginia	STORET	Salinity (ppt) 0.08		Comments						
Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 8-29-17 Time 1415		☒ Eastern ☐ Central		Composite end Date Time		Bottle Group(s)	
Field ID	RQ-2017-08-28-14 Date:	Field ID	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 5.3		☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)		A
STORET #	Time:	STORET	Temp (C) 29.7		pH 7.5		Sample Depth 0.3		Sp. Conductance (umho/cm) 270		
Latitude	Round Lake	STORET	Salinity (ppt) 0.13		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: L. Bachler	Date/Time: 8-29-17 1530	Shipping Method: FedEx	Number of Coolers Shipped: 2	Received By: G.A.	Date/Time: 8/30/17 10:29
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Group: A Bottle Type: P-1L # of Bottles: 17 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: 17 Preservative: ICE Enter Number of Bottles Sent to Lab 3

CHLSUITE-W

Group: A Bottle Type: P-500ML # of Bottles: 17 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: 17 Preservative: ICE-FLTR Enter Number of Bottles Sent to Lab 3

W-PO4-F

Date of Request: 24-JUL-2017
 Created By: ASHTON_J On: 24-JUL-2017
 Modified By: SWANSON_C On: 08-AUG-2017
 Customer: WQAP
 Project: SMP
 Division: Division of Environmental Assessment and Restoration
 District:
 Sampling Event: Lakes-A-kits

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: S

Criminal Investigation: NO

Chemistry Request Reviewed By: WATTS_J On: 07-AUG-2017

Biology Request Reviewed By: SWANSON_C On: 08-AUG-2017

Sampling Kit Required: YES Ship on: 10-AUG-2017

Sampling Kit Shipped: YES On: 10-AUG-2017

Sampling Kit Packed By: SHAIK_A

Preservatives Needed: NO

Date to Receive Samples: 28-AUG-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 17 Samples:

Bottle Type: P-1L	Number of Bottles: 17	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: 17	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: 17	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: 17	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- 2017-08-28-141

Shipping Method: Fed Ex

Date/Time of Receipt: 8/30/17 10:29

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	1.5°C	12		☒			
RED	0.7°C	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: 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: 8/30/17 NCRs (Y/N)? ☐

Event ID: WQAP-2017-08-30-01 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:

01000

FedEx
ExpressPackage
US AirbillFedEx
Tracking
Number

8113 0563 1564

Form
No. 0215

19253

fedex.com 1.800.GoFedEx 1.800.463.3339

06435039

1 From

Date 5-24-17

Sender's Name _____ Phone _____

Company _____

Address _____ Dept./Floor/Suite/Room _____

City _____ State _____ ZIP _____

2 Your Internal Billing Reference

3 To

Recipient's Name SAMPLE RECEIVING Phone 850 245-8000

Company FLORIDA DEP/CHEMISTRY SECTION

Address 2500 BLAIRSTONE RD Hold Weekday
We cannot deliver to P.O. boxes or P.O. ZIP codes. FedEx location address
REQUIRED. NOT available for
FedEx First Overnight.

Address _____ Hold Saturday
FedEx location address
REQUIRED. Available ONLY for
FedEx Priority Overnight and
FedEx 2Day to select locations.

City TALLAHASSEE State FL ZIP 32309



8113 0563 1564

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

7 Payment Bill to:

- Sender ☐ Recipient ☒ Third Party ☐ Credit Card ☐ Cash/Check
- Enter FedEx Acct. No. or Credit Card No. below. Obtain recip. Acct. No. ☐
- Total Packages 262 Total Weight 10.00 lbs. Credit Card Auth. 611

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

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FedEx
ExpressPackage
US AirbillFedEx
Tracking
Number

8119 3898 8537

fedex.com 1.800.GoFedEx 1.800.463.3339

1 From
 Date 8-29-17
 Sender's Name _____
 Phone 813 470-5700
 Company FDEP
 Address 13051 N. TALLON PKWY
 City TEMPLE TERRACE State FL ZIP 33637

2 Your Internal Billing Reference

3 To
 Recipient's Name SAMPLE RECEIVING Phone 800 245-8080
 Company FLORIDA DEP/CHEMISTRY SECTION
 Address 2600 BLAIRSTONE RD
 We cannot deliver to P.O. boxes or P.O. ZIP codes.
 Address _____
 Use this line for the MOLD location address or for continuation of your shipping address.
 City TALLAHASSEE State FL ZIP 32399-6842

☐ **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.



8119 3898 8537

Form
100 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**
 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:

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

Total Packages

Total Weight

Credit Card Auth.

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

611

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