

Simms Branch

## Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQAP

Requester: Judy Ashton

Field Report Prepared By: S Meyer

Project ID: SMP

Collected By: J Ashton + S Meyer

Sampling Agency: FDEP SW ROC

|          |                                                             |                    |                                                             |                                                                           |                                                              |                                                                            |                                 |                                  |
|----------|-------------------------------------------------------------|--------------------|-------------------------------------------------------------|---------------------------------------------------------------------------|--------------------------------------------------------------|----------------------------------------------------------------------------|---------------------------------|----------------------------------|
| Loc      | RQ-2017-09-11-23                                            | Field ID<br>STORET | G1SW0056                                                    | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date 09/14/2017 Time 1013 | Eastern<br>Central                                                         | Composite end<br>Date Time      | Bottle<br>Group(s)<br>(See pg 2) |
| Field    | Date: 09/14/17<br>Time:<br>Sims Branch                      | Field ID<br>STORET | G1SW0056                                                    | Matrix (type, e.g., Salt, Fresh, etc)                                     | Diss. Oxygen<br>5.7                                          | <input checked="" type="checkbox"/> mg/L<br><input type="checkbox"/> % sat | Total Res. Chlorine<br>(mg/L)   | A                                |
| STC      |                                                             | Field ID<br>STORET | G1SW0056                                                    | Temp (C) 28.0                                                             | pH 7.6                                                       | Sample Depth 0.3                                                           | Sp. Conductance (umho/cm) 24540 |                                  |
| Latitude | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Longitude          | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Salinity (ppt) 14.87                                                      | Comments<br>ENTRELO MOPAKS OUT @ AEL                         |                                                                            |                                 |                                  |
| Loc      | RQ-2017-09-11-23                                            | Field ID<br>STORET | G1SW0056                                                    | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date 9-14-17 Time 1015    | Eastern<br>Central                                                         | Composite end<br>Date Time      | Bottle<br>Group(s)               |
| Field    | Date: 09/14/17<br>Time:<br>Sims Branch<br>DUPLICATE         | Field ID<br>STORET | G1SW0056                                                    | Matrix (type, e.g., Salt, Fresh, etc)                                     | Diss. Oxygen<br>5.7                                          | <input checked="" type="checkbox"/> mg/L<br><input type="checkbox"/> % sat | Total Res. Chlorine<br>(mg/L)   | A                                |
| ST       |                                                             | Field ID<br>STORET | G1SW0056                                                    | Temp (C) 28.0                                                             | pH 7.6                                                       | Sample Depth 0.3                                                           | Sp. Conductance (umho/cm) 24540 |                                  |
| Latitude | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Longitude          | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Salinity (ppt) 14.87                                                      | Comments<br>DUPLICATE - TRACKER ONLY                         |                                                                            |                                 |                                  |
| Location | RQ-2017-09-11-23                                            | Field ID<br>STORET | BLANK                                                       | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date 9/14/17 Time 1018    | Eastern<br>Central                                                         | Composite end<br>Date Time      | Bottle<br>Group(s)               |
| Field    | Date: 09/14/17<br>Time:<br>BLANK                            | Field ID<br>STORET | BLANK                                                       | Matrix (type, e.g., Salt, Fresh, etc)                                     | Diss. Oxygen                                                 | <input type="checkbox"/> mg/L<br><input type="checkbox"/> % sat            | Total Res. Chlorine<br>(mg/L)   | A                                |
| STOF     |                                                             | Field ID<br>STORET | BLANK                                                       | Temp (C)                                                                  | pH                                                           | Sample Depth                                                               | Sp. Conductance (umho/cm)       |                                  |
| Latitude | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Longitude          | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Salinity (ppt)                                                            | Comments<br>BLANK - TRACKER ONLY                             |                                                                            |                                 |                                  |
| Location |                                                             |                    |                                                             | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab            | Collection (comp begin or grab)<br>Date Time                 | Eastern<br>Central                                                         | Composite end<br>Date Time      | Bottle<br>Group(s)               |
| Field ID |                                                             |                    |                                                             | Matrix (type, e.g., Salt, Fresh, etc)                                     | Diss. Oxygen                                                 | <input type="checkbox"/> mg/L<br><input type="checkbox"/> % sat            | Total Res. Chlorine<br>(mg/L)   |                                  |
| STORET # |                                                             |                    |                                                             | Temp (C)                                                                  | pH                                                           | Sample Depth                                                               | Sp. Conductance (umho/cm)       |                                  |
| Latitude | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Longitude          | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Salinity (ppt)                                                            | Comments                                                     |                                                                            |                                 |                                  |

|                               |                           |                           |                                 |                       |                            |
|-------------------------------|---------------------------|---------------------------|---------------------------------|-----------------------|----------------------------|
| Relinquished By:<br>J. Ashton | Date/Time<br>9-14-17 1700 | Shipping Method<br>Fed Ex | Number of Coolers Shipped:<br>1 | Received By:<br>J. O. | Date/Time<br>9/15/17 10:00 |
|-------------------------------|---------------------------|---------------------------|---------------------------------|-----------------------|----------------------------|

\* Sample collection date taken from  
sample container.

|            |                             |                 |                   |                                     |   |
|------------|-----------------------------|-----------------|-------------------|-------------------------------------|---|
| Group: A   | Bottle Type: QPCR-P-250ML   | # of Bottles: 2 | Preservative: ICE | Enter Number of Bottles Sent to Lab | 2 |
| PCR-FILTER |                             |                 |                   |                                     |   |
| Group: A   | Bottle Type: P-120ML-WC-THI | # of Bottles: 1 | Preservative: ICE | Enter Number of Bottles Sent to Lab | 0 |
| SWD-AEL-EN |                             |                 |                   |                                     |   |
| Group: A   | Bottle Type: BG-1L          | # of Bottles: 1 | Preservative: ICE | Enter Number of Bottles Sent to Lab | 3 |
| W-AHERB-AA |                             |                 |                   |                                     |   |
| W-SUC-AA-R |                             |                 |                   |                                     |   |
| W-UHERB-AA |                             |                 |                   |                                     |   |



Advanced  
Environmental Laboratories, Inc.

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9010 Princess Palm Ave. • Tampa, FL 33610 • 813.630.9616 • Fax 813.630.4327 • E84589  
2100 NW 67th Place, Ste. 7 • Gainesville, FL 32608 • 352.367.1500 • Fax 352.367.0050 • E82620  
520 S. North Lake Blvd., Ste. 1010 • Altamonte Springs, FL 32701 • 407.537.1594 • Fax 407.537.1597 • E53078

LAB NUMBER:

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| CLIENT NAME: FDEP - SW District                                                                 |  | PROJECT NAME: TMDL / SMP                  |  | BOTTLE SIZE & TYPE | Sterile Plastic Bottle |  |        |           |         |        |  |  |  |  |  | L A B       |  |  |  |  |
|-------------------------------------------------------------------------------------------------|--|-------------------------------------------|--|--------------------|------------------------|--|--------|-----------|---------|--------|--|--|--|--|--|-------------|--|--|--|--|
| ADDRESS: 13051 N. Telecom Pkwy                                                                  |  | P.O. NUMBER/PROJECT NUMBER:               |  |                    |                        |  |        |           |         |        |  |  |  |  |  | N U M B E R |  |  |  |  |
| Temple Terrace, FL 33637                                                                        |  | PROJECT LOCATION: Florida                 |  |                    |                        |  |        |           |         |        |  |  |  |  |  |             |  |  |  |  |
| PHONE: 813-470-5700                                                                             |  | FAX: 813-470-5996                         |  |                    |                        |  |        |           |         |        |  |  |  |  |  |             |  |  |  |  |
| CONTACT: Matthew Bearden Sarah Ernst                                                            |  | SAMPLED BY: J Ashton & S Meyer            |  |                    |                        |  |        |           |         |        |  |  |  |  |  |             |  |  |  |  |
| TURN AROUND TIME:                                                                               |  | REMARKS/SPECIAL INSTRUCTIONS:             |  |                    |                        |  |        |           |         |        |  |  |  |  |  |             |  |  |  |  |
| <input checked="" type="checkbox"/> STANDARD<br><input type="checkbox"/> RUSH                   |  | PO AF315E                                 |  |                    |                        |  |        |           |         |        |  |  |  |  |  |             |  |  |  |  |
| *Samples are ambient water and not suspected to contain chlorine*                               |  |                                           |  |                    |                        |  |        |           |         |        |  |  |  |  |  |             |  |  |  |  |
| WW=waste water SW=surface water GW=ground water DW=drinking water G=oil A=air SO=soil SL=sludge |  |                                           |  |                    |                        |  |        |           |         |        |  |  |  |  |  |             |  |  |  |  |
| RQ-2017-09-11-23<br>Date: 09/14/17<br>Time:<br>Sims Branch                                      |  | G1SW0056<br>Field ID ↓<br>STORET          |  | Grab Comp          | SAMPLING<br>DATE TIME  |  | MATRIX | NO. COUNT | Preserv | Icc, T |  |  |  |  |  |             |  |  |  |  |
|                                                                                                 |  | G1SW0056                                  |  | Grab               | 09/14/2017 10 13       |  | SW     | 1         |         |        |  |  |  |  |  |             |  |  |  |  |
| RQ-2017-09-11-23<br>Date: <del>09/14/17</del><br>Time:<br>Sims Branch<br>DUPLICATE              |  | G1SW0056                                  |  | Grab               | 09/14/2017 10 15       |  | SW     | 1         |         |        |  |  |  |  |  |             |  |  |  |  |
| RQ-2017-09-11-23<br>Date: 09/14/17<br>Time:<br>BLANK                                            |  | G1SW0056<br>Field ID ↓<br>STORET<br>BLANK |  | Grab               | 09/14/2017 10 18       |  | SW     | 1         |         |        |  |  |  |  |  |             |  |  |  |  |
|                                                                                                 |  | BLANK                                     |  | Grab               |                        |  | SW     |           |         |        |  |  |  |  |  |             |  |  |  |  |
|                                                                                                 |  |                                           |  | Grab               |                        |  | SW     |           |         |        |  |  |  |  |  |             |  |  |  |  |
|                                                                                                 |  |                                           |  | Grab               |                        |  | SW     |           |         |        |  |  |  |  |  |             |  |  |  |  |
|                                                                                                 |  |                                           |  | Grab               |                        |  | SW     |           |         |        |  |  |  |  |  |             |  |  |  |  |

| Relinquish by: | Date     | Time | Received by:    | Date | Time |
|----------------|----------|------|-----------------|------|------|
| 1. Sarah Meyer | 09/14/17 | 1050 | Matthew Bearden | 9/14 | 1057 |
| 2.             |          |      |                 |      |      |
| 3.             |          |      |                 |      |      |
| 4.             |          |      |                 |      |      |

| Shipment | Method | Sample Kit | Cooler # |
|----------|--------|------------|----------|
| Out:     | Via:   | RB         | D/T      |
| Ret:     | Via:   | AB         | D/T      |
|          |        | Trip BL    |          |

Received on ☐ Yes ☐ No ☐ sent ☐ received

Date of Request: 17-AUG-2017  
Created By: ASHTON\_J On: 17-AUG-2017  
Modified By: SWANSON\_C On: 22-AUG-2017  
Customer: WQAP  
Project: SMP  
Division: Division of Environmental Assessment and Restoration  
District:  
Sampling Event: Simms Branch

**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: 21-AUG-2017  
Biology Request Reviewed By: SWANSON\_C On: 22-AUG-2017  
Sampling Kit Required: YES Ship on: 28-AUG-2017  
Sampling Kit Shipped: YES On: 24-AUG-2017  
Sampling Kit Packed By: REAVES\_S  
Preservatives Needed: NO  
Date to Receive Samples: 11-SEP-2017  
Received By:

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

Comments: Group A: Tracers, Markers

**Bottle Group A (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: SWD-AEL-EN   | Number of Bottles: 1 | Preserved With: ICE                                                                                       |
| SWD-AEL-EN                | Template: DEFAULT    | (SM 9230 C) Enterococci by membrane filter method by Advanced Environmental Overflow Laboratories for SWD |
| 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.

# Log-in Checklist

RQ-2017-09-11-23

Shipping Method: Fed Ex

Date/Time of Receipt: 9/15/17 10:00

| 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            |                                     |                                                       |  |
| WHITE     | 2.3°C               | 5                               |               | <input checked="" type="checkbox"/> |                                                       |  |
|           |                     |                                 |               |                                     |                                                       |  |
|           |                     |                                 |               |                                     |                                                       |  |
|           |                     |                                 |               |                                     |                                                       |  |
|           |                     |                                 |               |                                     |                                                       |  |
|           |                     |                                 |               |                                     |                                                       |  |

\*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                                                                                           |     | <input checked="" type="checkbox"/> | 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: JD

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

Coolers Unpacked/Checked by: J.D. Date: 9/15/17 NCRs (Y/N)? ☐

Event ID: WQAP-2017-09-15-01 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** Package  
Express US AirbillFedEx  
Tracking  
Number

8119 3903 9416

**1 From**

Date 9-14-17

Sender's  
Name

Phone 813-70-5700

Company FDEP

Address 13051 N Telecom Pkwy

Dept./Floor/Suite/Room

City Tampa

State FL

ZIP 33627

**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 32399-6542

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 3903 9416

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 RequiredPackage may be left without  
obtaining a signature for delivery.☐ Direct SignatureSomeone at recipient's address  
may sign for delivery.☐ Indirect SignatureIf 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☐ YesAs per attached  
Shipper's Declaration.☐ YesShipper'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  
1 will be billed.☒ Recipient☐ Third Party☐ Credit Card☐ Cash/Check

Total Packages

Total Weight

Credit Card Auth.

1 50 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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