

Bellows Outlet

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: WQAP

Requester: Judy Ashton

Field Report Prepared By: Judy Ashton

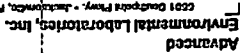
Project ID: SMP

Collected By: Judy Ashton, Laurie BeckerSampling Agency: FDAP

Location		☐ Comp ☒ Grab		Collection (comp begin or grab) Date <u>10-25-17</u> Time <u>0920</u>		☒ Eastern ☐ Central		Composite end Date _____ Time _____		Bottle Group(s) (See pg 2)	
Field ID <u>RQ-2017-10-23-41</u> Date: <u>10/25/17</u> Time: _____		Matrix (type, e.g., Salt, <u>Fresh</u> , etc)		Diss. Oxygen <u>3.3</u> ☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L) _____				A	
STORET # <u>Bellows Outlet</u>		Temp (C) <u>23.7</u>		pH <u>6.7</u>		Sample Depth <u>0.3</u> ☐ ft ☒ m		Sp. Conductance (umho/cm) <u>144</u>			
Latitude ☐ dd ☐ dms		Salinity (ppt) <u>0.07</u>		Comments <u>E. coli dropped off at AEL</u>							
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 ☐ dd ☐ dms		Longitude ☐ dd ☐ dms		Salinity (ppt) ☐ dd ☐ dms		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 ☐ ft ☐ m		Sp. Conductance (umho/cm)			
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms		Salinity (ppt) ☐ dd ☐ dms		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 ☐ ft ☐ m		Sp. Conductance (umho/cm)			
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms		Salinity (ppt) ☐ dd ☐ dms		Comments					

Relinquished By: <u>J. Ashton</u>	Date/Time <u>10-25-17 1700</u>	Shipping Method <u>FDAP</u>	Number of Coolers Shipped: <u>1</u>	Received By: <u>FDAP</u>	Date/Time <u>10-26-17 1100</u>
--------------------------------------	-----------------------------------	--------------------------------	--	-----------------------------	-----------------------------------

Group: A	Bottle Type:	P-1L	# of Bottles: 1	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: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	CHLSUITE-W						
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	1
	SE-AEL-EC						
Group: A	Bottle Type:	BG-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	W-AHERB-AA						
	W-SUC-AA-R						
	W-UHERB-AA						
Group: A	Bottle Type:	P-500ML	# of Bottles: 1	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: 1	Preservative:	FILTER-ICE	Enter Number of Bottles Sent to Lab	1
	W-PO4-F						



6201 Chesapeake Pkwy., Jacksonville, FL 32210-6134; 904.304.9535-9534 • Fax 904.304.9534 • E62574
2120 NW 67th Pkwy., Eustis, FL 32560 • 352.337.1500 • Fax 352.337.0050 • E62563
375 S. North Lake Blvd., Edo., Fla. 32701 • 407.587.1524 • Fax 407.587.1587 • E5370

[illegible]

Date of Request: 10-OCT-2017
 Created By: ASHTON_J On: 10-OCT-2017
 Modified By: SWANSON_C On: 12-OCT-2017
 Customer: WQAP
 Project: SMP
 Division: Division of Environmental Assessment and Restoration
 District:
 Sampling Event: Bellows Outlet

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: R
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 11-OCT-2017
 Biology Request Reviewed By: SWANSON_C On: 12-OCT-2017
 Sampling Kit Required: NO Ship on:
 Sampling Kit Shipped:
 Sampling Kit Packed By:
 Preservatives Needed: NO
 Date to Receive Samples: 25-OCT-2017
 Received By: SHAIK_A On: 26-OCT-2017

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 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: 1	Preserved With: ICE
CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry
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:	Number of Bottles: 1	Preserved With: ICE
SE-AEL-EC	Template: DEFAULT	(EPA 1603) Escherichia coli by membrane filter method using modified mTEC by Advanced Environmental Miami Overflow Laboratories for SED
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
Bottle Type: P-500ML	Number of Bottles: 1	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 Group A (Water) With 1 Samples:

Bottle Type: P-125ML Number of Bottles: 1 Preserved With: FILTER-ICE
W-PO4-F Template: DEFAULT (EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L

* - The laboratory is not NELAP certified for this analyte/method, or certification is not applicable.

Log-in Checklist

RQ-2017-10-23-41

Shipping Method: Red Express

Date/Time of Receipt: 10-26-17 10:30

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	2.1C	7		☒			

*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: 10-26-17 NCRs (Y/N)? —

Event ID: Bellows Outlet NCR # —

WQAP-2017-10-26-02 (SMP)

Date Received: 26-OCT-2017 10:30

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:

00947

01.000

FedEx Package
Express US Airbill
FedEx
Tracking
Number

8119 3898 9327

1 From

Date 10-25-17

Sender's
Name

Phone

813 470 5700

Company

FIDEID

Address

1301 N Telecom Hwy

101
Dept./Floor/Suite/Room

City

Tampa, FL

State

ZIP

33637

2 Your Internal Billing Reference

3 To

Recipient's
Name

SAMPLE RECEIVING

Phone

850 245-8000

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

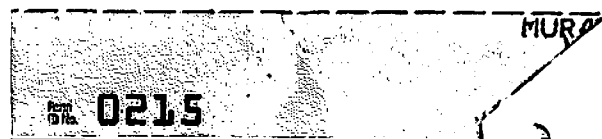
FL

ZIP

32399-6542



8119 3898 9327



4 Express Package Service

* To most locations

Next Business Day

- ☐ FedEx First Overnight
Fastest 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, 6 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

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

fedex.com 1800.GoFedEx 1800.463.3339

fedex.com 1800.GoFedEx 1800.463.3339