

**FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION**  
**Central Lab Sample Submittal Form**

Request Number: RQ-2017-04-03-75

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Event: Killarney\_ Kanturk Bloom response

Requester: Curtis Musson

Field Report Prepared By: Curtis Musson

Customer: WQ-ASSESS

Sampling Agency: FDEP

Project ID: SMP

Collected By: Curtis Musson

|                                          |                                                                           |                                                                         |                                                                           |                                                          |                 |
|------------------------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------------------|---------------------------------------------------------------------------|----------------------------------------------------------|-----------------|
| Location<br><u>Lake Kanturk Outlet</u>   | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab            | Collection (comp begin or grab)<br>Date <u>4/3/17</u> Time <u>10:55</u> | <input checked="" type="radio"/> Eastern<br><input type="radio"/> Central | Collection (comp begin or grab)<br>Date _____ Time _____ | Bottle Group(s) |
| Field ID                                 | Matrix (Salt, Fresh)                                                      | Diss. Oxygen (mg/L)                                                     |                                                                           |                                                          |                 |
| STORET #                                 | Temp (C)                                                                  | pH                                                                      | Sample Depts (m)                                                          | Sp. Conductance (umho/cm)                                |                 |
|                                          | Salinity (ppt)                                                            | Comments<br><u>Not Collected</u>                                        |                                                                           |                                                          |                 |
|                                          | Latitude (Decimal Degrees)                                                |                                                                         | Longitude (Decimal Degrees)                                               |                                                          |                 |
| Location<br><u>Lake Killarney Outlet</u> | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date <u>4/3/17</u> Time <u>11:00</u> | <input checked="" type="radio"/> Eastern<br><input type="radio"/> Central | Collection (comp begin or grab)<br>Date _____ Time _____ | Bottle Group(s) |
| Field ID                                 | Matrix (Salt, Fresh)                                                      | Diss. Oxygen (mg/L)                                                     |                                                                           |                                                          |                 |
|                                          | Temp (C)                                                                  | pH                                                                      | Sample Depts (m)                                                          | Sp. Conductance (umho/cm)                                |                 |
|                                          | Salinity (ppt)                                                            | Comments                                                                |                                                                           |                                                          |                 |
|                                          | Latitude (Decimal Degrees)                                                |                                                                         | Longitude (Decimal Degrees)                                               |                                                          |                 |
| Location                                 | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab            | Collection (comp begin or grab)<br>Date _____ Time _____                | <input type="radio"/> Eastern<br><input type="radio"/> Central            | Collection (comp begin or grab)<br>Date _____ Time _____ | Bottle Group(s) |
| Field ID                                 | Matrix (Salt, Fresh)                                                      | Diss. Oxygen (mg/L)                                                     |                                                                           |                                                          |                 |
|                                          | Temp (C)                                                                  | pH                                                                      | Sample Depts (m)                                                          | Sp. Conductance (umho/cm)                                |                 |
|                                          | Salinity (ppt)                                                            | Comments                                                                |                                                                           |                                                          |                 |
|                                          | Latitude (Decimal Degrees)                                                |                                                                         | Longitude (Decimal Degrees)                                               |                                                          |                 |

|                                       |                                |                             |                                 |                                |
|---------------------------------------|--------------------------------|-----------------------------|---------------------------------|--------------------------------|
| Relinquished By: <u>Curtis Musson</u> | Date/Time: <u>4/3/17 11:27</u> | Number of Coolers: <u>1</u> | Received By: <u>[Signature]</u> | Date/Time: <u>4/3/17 11:32</u> |
|---------------------------------------|--------------------------------|-----------------------------|---------------------------------|--------------------------------|

Date of Request: 03-APR-2017  
Created By: MUSSON\_C On: 03-APR-2017  
Modified By: MUSSON\_C On: 03-APR-2017  
Customer: WQ-ASSESS  
Project: SMP  
Division: Division of Environmental Assessment and Restoration  
District:  
Sampling Event: Killarney\_Kanturk Bloom response

**Send Coolers To:**

Phone: 850-245-8453  
Division Of Water Facilities, FL DEP  
2600 Blair Stone Rd.  
Tallahassee, FL 32399-2400  
Attn: Curtis Musson

**Program Module Number:**

Priority: 3  
Event Status: A  
Criminal Investigation: NO  
Chemistry Request Reviewed By:  
Biology Request Reviewed By: MATTHEWS\_D On: 03-APR-2017  
Sampling Kit Required: NO Ship on:  
Sampling Kit Shipped:  
Sampling Kit Packed By:  
Preservatives Needed: NO  
Date to Receive Samples: 03-APR-2017  
Received By:

**Send Final Report To:**

Division Of Water Facilities, FL DEP  
2600 Blair Stone Rd.  
Tallahassee, FL 32399-2400  
Attn: curtis musson

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

Comments: Group A: Algae\_ID

Packing Notes:

Do not pack we have the bottles

**Bottle Group A (Water) With 2 Samples:**

|                    |                      |                                                                                               |
|--------------------|----------------------|-----------------------------------------------------------------------------------------------|
| Bottle Type: BP-1L | Number of Bottles: 2 | Preserved With: Lugols                                                                        |
| DTY-QN-C           | Template: DEFAULT    | (SOP-AB05_1) No. of diatom taxa of quantitative phytoplankton sample.                         |
| PKD-QN-BV          | Template: DEFAULT    | (SOP-AB05) No. of wet taxa of quantitative phytoplankton sample w/speciation and cell counts. |
| PKD-QN-C           | Template: DEFAULT    | (SOP-AB05) No. of wet taxa of quantitative phytoplankton sample.                              |

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

# Log-in Checklist

RQ-2017-04-03-75

Shipping Method: Hand Delivery

Date/Time of Receipt: 4/3/17 11:32

| Cooler ID | Cooler Temperature* | No. Sample Containers in Cooler | Evidence Tape      |                                     | Tracking # (fill out only if waybill copy is damaged) |  |
|-----------|---------------------|---------------------------------|--------------------|-------------------------------------|-------------------------------------------------------|--|
|           |                     |                                 | Present?<br>Yes No | *Intact?<br>Yes No                  |                                                       |  |
| RED       | 6.8°C               | 1                               |                    | <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                                                                                           |     |    | 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.D.

**Coolers Unpacked/Checked by:** J.D. **Date:** 4/3/17 **NCRs (Y/N)?** ☐

**Event ID:** WQ-ASSESS-2017-04-03-01 **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:**