



*Ft. Myers Lab02  
10090 Bavaria Rd.  
Fort Myers, FL 33913  
TEL: (239) 590-0337 FAX: (239) 590-0536  
Website: www.sanderslabs.net*

June 05, 2018

Arielle Taylor-Manges  
DEP-Bureau or Labs-Biology Section  
Twin Towers Lab Complex A RM 216 6515  
Tallahassee, FL 32399  
TEL: (850) 245-8191  
FAX:

RE: DEP Fecals

Order No.: 1805850

Dear Arielle Taylor-Manges:

Sanders Laboratories, Inc received 3 sample(s) on 5/31/2018 for the analyses presented in the following report.

These pages may include, but are not limited to: Analytical Data, Chains of Custodies, Subcontracted Data and Case Narratives.

Reports are archived for a minimum of 5 years. Copies of reports are available for a fee of \$50.00. Copies will be provided within 2 weeks of the time of the request. Laboratory PQL's are available upon request.

Test results meet all the requirements of the NELAP standards, unless otherwise noted.  
Nokomis Certificate # E84380 Fort Myers Certificate # E85457

A statement of estimated uncertainty of results is available upon request.  
Laboratory report shall not be reproduced except in full, without the written approval of Sanders Laboratories.

Sanders Laboratories follows DEP standard operating procedures for field sampling, unless otherwise noted.

Katie Strothman  
Laboratory Director



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## Definition Only

WO#: 1805850  
Date: 6/5/2018

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### Definitions:

B: Results based upon colony counts outside the acceptable range.

G: Sample value indicates that the analyte was detected at or above the method detection limit in both the sample and the associated field blank, equipment blank, or trip blank, and the blank value was greater than 10% of the associated sample value. The value in the blank shall not be subtracted from associated samples.

I: The reported value is greater than or equal to the laboratory MDL but less than the laboratory PQL.

J: Estimated Value.

J7: Excessive amounts of Sodium Sulfite used to dechlorinate the sample due to high levels of chlorine present.

K: Off scale low, actual value is known to be less than the value given.

L: Off scale high, actual value is known to be greater than the value given.

NC: Not Certified. Parameter was ran but is not covered under laboratory accredited scopes.

Q: Sample held beyond acceptable holding time.

U: The compound was analyzed for, but not detected.

V: Indicates that the analyte was detected at or above the MDL in both the sample and the associated method blank and the value of 10 times the blank value was equal to or greater than the associated sample value.

Y: The laboratory analysis was from an improperly preserved sample.

Z: Too many colonies were present for accurate counting.



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## Analytical Report

(continuous)

WO#: 1805850

Date Reported: 6/5/2018

CLIENT: DEP-Bureau or Labs-Biology Section

Lab Order: 1805850

Project: DEP Fecals

Lab ID: 1805850-001

Collection Date: 5/31/2018 11:40:00 AM

Client Sample ID: G5SD0026

Matrix: MARINE WATER

| Analyses        | Result | MDL        | Qual | Units     | DF | Date Analyzed        |
|-----------------|--------|------------|------|-----------|----|----------------------|
| ENTEROCOCCUS    |        | ENTEROLERT |      |           |    | Analyst: TC          |
| Enterococcus    | ND     | 10.0       | U    | MPN/100mL | 1  | 5/31/2018 3:45:00 PM |
| FECAL COLIFORM  |        | A9222D     |      |           |    | Analyst: TC          |
| Coliform, Fecal | ND     | 2.00       | U    | CFU/100ml | 1  | 5/31/2018 4:10:00 PM |

Lab ID: 1805850-002

Collection Date: 5/31/2018 1:00:00 PM

Client Sample ID: G1SD0090

Matrix: MARINE WATER

| Analyses        | Result | MDL        | Qual | Units     | DF | Date Analyzed        |
|-----------------|--------|------------|------|-----------|----|----------------------|
| ENTEROCOCCUS    |        | ENTEROLERT |      |           |    | Analyst: TC          |
| Enterococcus    | ND     | 10.0       | U    | MPN/100mL | 1  | 5/31/2018 3:45:00 PM |
| FECAL COLIFORM  |        | A9222D     |      |           |    | Analyst: TC          |
| Coliform, Fecal | 13.0   | 2.00       | B    | CFU/100ml | 1  | 5/31/2018 4:10:00 PM |

|             |    |                                                                       |    |                                                    |
|-------------|----|-----------------------------------------------------------------------|----|----------------------------------------------------|
| Qualifiers: | H  | Holding times for preparation or analysis exceeded                    | M  | Manual Integration used to determine area response |
|             | ND | Not Detected at the Reporting Limit                                   | PL | Permit Limit                                       |
|             | RL | Reporting Detection Limit                                             | U  | Samples with CalcVal < MDL                         |
|             | W  | Sample container temperature is out of limit as specified at testcode |    |                                                    |



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## Analytical Report

(continuous)

WO#: 1805850

Date Reported: 6/5/2018

CLIENT: DEP-Bureau or Labs-Biology Section

Lab Order: 1805850

Project: DEP Fecals

Lab ID: 1805850-003

Collection Date: 5/31/2018 1:02:00 PM

Client Sample ID: G1SD0090-DUP

Matrix: MARINE WATER

| Analyses | Result | MDL | Qual | Units | DF | Date Analyzed |
|----------|--------|-----|------|-------|----|---------------|
|----------|--------|-----|------|-------|----|---------------|

### ENTEROCOCCUS

### ENTEROLERT

Analyst: TC

|              |    |      |   |           |   |                      |
|--------------|----|------|---|-----------|---|----------------------|
| Enterococcus | ND | 10.0 | U | MPN/100mL | 1 | 5/31/2018 3:45:00 PM |
|--------------|----|------|---|-----------|---|----------------------|

#### NOTES:

Sample also ran at a 1:1 dilution with a result of 39.3 MPN/100mL

### FECAL COLIFORM

### A9222D

Analyst: TC

|                 |      |      |   |           |   |                      |
|-----------------|------|------|---|-----------|---|----------------------|
| Coliform, Fecal | 5.00 | 2.00 | B | CFU/100ml | 1 | 5/31/2018 4:10:00 PM |
|-----------------|------|------|---|-----------|---|----------------------|

|             |    |                                                                       |    |                                                    |
|-------------|----|-----------------------------------------------------------------------|----|----------------------------------------------------|
| Qualifiers: | H  | Holding times for preparation or analysis exceeded                    | M  | Manual Integration used to determine area response |
|             | ND | Not Detected at the Reporting Limit                                   | PL | Permit Limit                                       |
|             | RL | Reporting Detection Limit                                             | U  | Samples with CalcVal < MDL                         |
|             | W  | Sample container temperature is out of limit as specified at testcode |    |                                                    |



## CHAIN OF CUSTODY RECORD

Project #  
(Lab Use Only)

1805 850

Client

FDEP

Report To: dep-Overflowmicro@dep.state.fl.us

Project Name:

Wilderness Waterway

Address

2600 Blair Stone Rd.

Bill to:

Carina Tull

Project Location:

Collier

Tallahassee, FL 32399

P.O. #

Lab #039

Customer Type:

FDEP - SoROC

Phone

850-245-8085

Preservative: HCL = H, HNO<sub>3</sub> = N, Na<sub>2</sub>S<sub>2</sub>O<sub>3</sub> = ST

Kit #:

Fax

H<sub>2</sub>SO<sub>4</sub> = S, NaOH = SH, NH<sub>4</sub>Cl = NH

Requested Due Date:

Sampled By (PRINT)

Maryann Dugan

Sampler Signature

Maryann Dugan

Preservatives

Sample

Matrix

Sample Description

Date

Time

Type

I

S

S

Analysis Requested

Sample  
ID #  
(Lab Use  
Only)

Matrix

G5SD0026

05/31/18

1140

Grab

X

X

X

-01A/B

Matrix

-ENRE 11 (@ Huaton Bay)

05/31/18

1300

Grab

X

X

X

-02A/B

Matrix

-ENRE 9 (@ Ten Thousand Islands)

05/31/18

1302

Grab

X

X

X

-03A/B

Matrix

GISD0090\_DUP

Bottle Lot #

RQ-2017-05-07-46

Okay to Run  
As Is...

Client Initial:

Relinquished By/Affiliation

Nicole Reistad

Date

05/31/18

Time

1445

Accepted By/Affiliation

TAA

Date

5/31/18

Time

1445

Client

Containers

Samples Are Ambient  
Water

E. Coli by Quanti Tray

Samples On  
Ice

Yes No

1050 Endeavor Ct, Nokomis, FL 34275-3623 (941) 488-8103 fax(941) 484-6774

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Form #: RCF -02 Approved by: KS 7/11/2016