

Log-in Checklist

RQ- 2018-01-01-53

Shipping Method: Fedex

Date/Time of Receipt: 1-5-18/9:38

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	Yes	No		
Red	0.4	5		✓			

*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: SR

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

Coolers Unpacked/Checked by: SR Date: 1-5-17

NCRs (Y/N)? N

Event ID: SW-DIST-2018-01-05-01

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:

SMP: ~~Florida Keys~~

RQ-2018-01-01-53

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: SO-DIST

Requester: Benjamin Paswater

Field Report Prepared By: Judy Ashton

Project ID: SMP

Collected By: JUDY ASHTON, BEN PASWATERSampling Agency: FLDP

Location		☐ Comp ☐ Grab		Collection (comp begin or grab) Date <u>01-04-18</u> Time <u>12:30</u>		Eastern Central		Composite end Date _____ Time _____		Bottle Group(s) (See pg 2)	
Field ID <u>RQ-2018-01-01-53</u> Date: <u>01/04/18</u> Time: _____		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen <u>9.38</u> ☒ mg/L ☐ % sat		Total Res. Chlorine (mg/L)				A	
STORET # <u>G1SW0102</u> Field ID STORET		Temp (C) <u>13.56</u>		pH <u>7.69</u>		Sample Depth <u>0.4</u> ☐ ft ☒ m		Sp. Conductance (umho/cm) <u>47454</u>			
Latitude ☐ dd ☐ dms		Longitude ☐ dd ☐ dms		Salinity (ppt) <u>12.2</u>		Comments <u>NO SALINITY ON MEAS</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)		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)		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)		Comments					

Relinquished By: <u>JUDY ASHTON</u>	Date/Time: <u>01-04-18</u>	Shipping Method: <u>FEDEX</u>	Number of Coolers Shipped: <u>1</u>	Received By: <u>SPR</u>	Date/Time: <u>1-5-18/9:38</u>
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Group: A	Bottle Type: P-1L	# of Bottles: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab
ALKALINITY				
TURBIDITY				
W-F				
W-TSS				
Group: A	Bottle Type: BP-1L	# of Bottles: 14	Preservative: ICE	Enter Number of Bottles Sent to Lab
CHLSUITE-W				
Group: A	Bottle Type: P-500ML	# of Bottles: 14	Preservative: HNO3	Enter Number of Bottles Sent to Lab
W-ICP				
W-ICPMS				
Group: A	Bottle Type: P-500ML	# of Bottles: 14	Preservative: ICE And H2SO4	Enter Number of Bottles Sent to Lab
W-NH3				
W-NO2NO3				
W-S-A-TP				
W-TKN				
W-TOC				
Group: A	Bottle Type: P-125ML	# of Bottles: 14	Preservative: FILTER-ICE	Enter Number of Bottles Sent to Lab
W-PO4-F				

Group A SWD-AEL-EC

DROPPED WK 2 AEL



Advanced
Environmental Laboratories, Inc.

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528 S. North Lake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.937.1594 • Fax 407.937.1597 • E23078

LAB NUMBER:

Page 1 of 1

CLIENT NAME: FDEP - SW District		PROJECT NAME: TMDL / SMP		BOTTLE SIZE & TYPE		Sterile Plastic Bottle												LAB NUMBER	
ADDRESS: 13051 N. Telecom Pkwy		P.O. NUMBER/PROJECT NUMBER:		PROJECT LOCATION: Florida		FAX: 813-470-5998		SAMPLED BY:		REMARKS/SPECIAL INSTRUCTIONS:		Fecal Coliforms		E. COLI					
PHONE: 813-470-5700																			
CONTACT: Matthew Bearden Sarah-Ernst																			
TURN AROUND TIME:																			
☒ STANDARD																			
☐ RUSH																			
Samples are ambient water and not suspected to contain chlorine																			
WW=waste water SW=surface water GW=ground water DW=drinking water																			
Field ID		SITE NAME		Grab Comp		SAMPLING		MATRX		NO. COUNT		Preserv		Ice, T					
RQ-2018-01-01-53		G1SW0102		Grab		DATE		TIME		SW									
Date: 01/04/18		field ID ↑				01-04-18		1230		1									
Time:		STORET																	
Terra Ceia Bay		G1SW0102		Grab															
				Grab															
				Grab															
				Grab															
				Grab															
				Grab															
				Grab															
				Grab															

H=HCl S=(H ₂ SO ₄) N=(HNO ₃) T=(Sodium Thiosulfate)		Method		Sample Kit		Cooler #	
Shipment	Via:	Out:	Via:	RB	D/T		
Ret:	Via:	AB	D/T	Trip BL			

Relinquish by:		Date		Time		Received by:		Date		Time	
1	J. H. Smith	1/4/18	1327					1/4/18	1327		
2											
3											
4											

Received on Ice ☐ Yes ☐ No ☐ sent ☐ received

revised 1/12

Date of Request: 03-JAN-2018
 Created By: ASHTON_J On: 03-JAN-2018
 Modified By: WATTS_J On: 05-JAN-2018
 Customer: SW-DIST
 Project: SMP
 Division:
 District: Southwest District
 Sampling Event: Terra Ceia

Send Coolers To:

Phone: 813-632-7600
 FL Dept. of Environmental Protection
 13051 N. Telecom Parkway
 Temple Terrace, FL 33637-0926
 Attn: Judy Ashton

Program Module Number:
 Priority: 3
 Event Status: R
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 05-JAN-2018
 Biology Request Reviewed By: WATTS_J On: 05-JAN-2018
 Sampling Kit Required: NO Ship on:
 Sampling Kit Shipped:
 Sampling Kit Packed By:
 Preservatives Needed: NO
 Date to Receive Samples: 03-JAN-2018
 Received By: REAVES_S On: 05-JAN-2018

Send Final Report To:

FL Dept. of Environmental Protection
 13051 N. Telecom Parkway
 Temple Terrace, FL 33637-0926
 Attn: Judy Ashton

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

Comments: Group A: Marine Kit With 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-F	Template: DEFAULT	(SM 4500 F-C-97) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)
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:	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: P-500ML	Number of Bottles: 1	Preserved With: HNO ₃
W-ICP	Template:	(EPA 200.7 Rev. 4.4) Total Recoverable Metals analysis using ICP emission spectroscopy for aqueous samples supporting Clean Water Act Projects
Chromium		
Iron		
Zinc		
W-ICPMS	Template: PRTY	(EPA 200.8 Rev. 5.4) Total Recoverable Metals analysis using ICP-MS for aqueous samples supporting Clean Water Act Projects
Arsenic		
Cadmium		
Copper		
Lead		
Nickel		
Silver		
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

Bottle Group A (Water) With 1 Samples:

Bottle Type: P-500ML	Number of Bottles: 1	Preserved With: ICE And H2SO4
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: 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

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FEDEX Express Package
US Airbill

FedEx
Tracking
Number

8119 3903 9920

1 From

Date 01-04-18

Sender's
Name

Phone 813 470-5700

Company FTDP

Address 13051 N. Teleca Dr

City Tempe Terrace

State FL

ZIP 33037

2 Your Internal Billing Reference

3 To

Recipient's
Name

SAMPLE RECEIVING

Phone 850 245-8083

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 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 9920

0127691333

Form
ID No. **0215**

MUR 4

4 Express Package Service

* To most locations.

Recipient's Copy

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.
- Restrictions apply for dangerous goods — see the current FedEx Service Guide.

☐ **Dry Ice**
Dry Ice, 9, UN 1845 x kg
☐ **Cargo Aircraft Only**

7 Payment Bill to:

- Enter FedEx Acct. No. or Credit Card No. below.
- ☐ **Sender** Acct. No. In Section 1 will be billed. ☒ **Recipient** ☐ **Third Party** ☐ **Credit Card** ☐ **Cash/Check**
- Obtain recip. Acct. No. ☐

Total Packages 1 Total Weight 5 lbs.

Credit Card Auth.

*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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