Log-in Checklist

RQ- 2018-01-22-14

Shipping Method: Fed Ex

Date/Time of Receipt: 1-23-18 1040

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	
Red	1-8C	16		✓			

*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-Cl-R		

PRESERVATION CHECK (EXCLUDING SAMPLES SENT TO OVERFLOW LABS, "OV-")

**Acid Preserved Samples: pH ≤ 2.0? Yes ✓ No____ NA____ Init: AB ✓

**W-1-4-DIOX (Green dot on container) preserved to pH < 4.0? Yes____ No____ NA ✓ Init: ✓

Coolers Unpacked/Checked by: AB ✓ Date: 1-23-18 NCRs (Y/N)? ✓

Event ID: Hills Lakes SW-DIST-2018-01-23-01 (SMP) _____ NCR # _____

Date Received: 23-JAN-2018 10:40

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:

Request Number: RQ-2018-01-22-14

Hills Lakes

Customer: SW-DIST

Project ID: SMP

Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Jan 3, 2018

Requester: Judy Ashton

Field Report Prepared By: Judy Ashton

Collected By: J. Ashton, B. Passmore

Sampling Agency: FDEP

Location

WIN/FIELD ID ⇨ G1SW0059

Lake Magdalene

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 1-22-18 Time 1000 Eastern Central | Composite end Date Time | Bottle Group(s) (See pg 2) A/B

Matrix (type, e.g., Salt, Fresh, etc) | Diss. Oxygen 9.94 ☒ mg/L ☐ % sat | Total Res. Chlorine (mg/L)

Temp (C) 15.28 | pH 7.14 | Sample Depth 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm) 256

☐ dd ☐ dms | Salinity (ppt) 0.12 | Comments E. COLI DROPPED OFF @ AEL

Location

WIN/FIELD ID ⇨ G1SW0030

~~Lake Western~~

LAKE ARMISTEAD

☒ Comp ☒ Grab | Collection (comp begin or grab) Date 1-22-18 Time 1110 Eastern Central | Composite end Date Time | Bottle Group(s) A/B

Matrix (type, e.g., Salt, Fresh, etc) | Diss. Oxygen 107.4 ☒ mg/L ☐ % sat | Total Res. Chlorine (mg/L)

Temp (C) 16.63 | pH 6.79 | Sample Depth 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm) 178

☐ dd ☐ dms | Salinity (ppt) 0.08 | Comments E. COLI DROPPED OFF @ AEL

Location

WIN/FIELD ID ⇨ G1SW0020

~~Lake Armistead~~

LAKE WASTENA

☐ dms

☒ Comp ☒ Grab | Collection (comp begin or grab) Date 1-22-18 Time 1150 Eastern Central | Composite end Date Time | Bottle Group(s) A/B

Matrix (type, e.g., Salt, Fresh, etc) | Diss. Oxygen 12.56 ☒ mg/L ☐ % sat | Total Res. Chlorine (mg/L)

Temp (C) 16.00 | pH 7.11 | Sample Depth 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm) 137

☐ dd ☐ dms | Salinity (ppt) 0.06 | Comments E. COLI DROPPED OFF @ AEL

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)

WIN/STORET # | Temp (C) | pH | Sample Depth ☐ ft ☐ m | Sp. Conductance (umho/cm)

Latitude ☐ dd ☐ dms | Longitude ☐ dd ☐ dms | Salinity (ppt) | Comments

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Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
Judy Ashton	1-22-18 1700	FAS Ly	1	AB	01-23-18 1040

Group: A	Bottle Type:	P-1L	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	

ALKALINITY
TURBIDITY
W-CL-IC
W-COLOR
W-F
W-SO4-IC
W-TDS
W-TSS

Group: A	Bottle Type:	BP-1L	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	

CHLSUITE-W

Group: A	Bottle Type:	P-120ML-WC-THI	# of Bottles: 5	Preservative:	ICE	Enter Number of Bottles Sent to Lab	

SWD-AEL-EC

Group: A	Bottle Type:	P-500ML	# of Bottles: 5	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: 5	Preservative:	FILTER-ICE	Enter Number of Bottles Sent to Lab	

W-PO4-F

Group: B	Bottle Type:	P-120ML-WC-THI	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	Ø

SWD-AEL-EC

DROPPED AT 2 AEL

3 of 3

~~Page 1 of 2~~

Request Number: RQ-2018-01-22-14

Hills Lakes

Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Jan 3, 2018

Customer: SW-DIST

Project ID: SMP

Requester: Judy Ashton

Collected By:

Field Report Prepared By:

Sampling Agency:

Location

WIN/FIELD ID ⇨ G1SW0006

Little Lake Wilson

☐ Comp ☒ Grab | Collection (comp begin or grab) Date 1-18-22 Time 1230 (Eastern) Central | Composite end Date Time | Bottle Group(s) (See pg 2) A/B

Matrix (type, e.g., Salt, Fresh, etc) | Diss. Oxygen 14.6 ☑ mg/L ☐ % sat | Total Res. Chlorine (mg/L)

Temp (C) 17.07 | pH 7.4 | Sample Depth 0.3 ☐ ft ☒ m | Sp. Conductance (umho/cm) 284

☐ dd ☐ dms | Salinity (ppt) | Comments E. COLI DROPPED OFF 2 ATL

Location

WIN/FIELD ID ⇨ G1SW0009

Little Lake Wilson South

☐ Comp ☑ Grab | Collection (comp begin or grab) Date 1/22/18 Time 1240 (Eastern) Central | Composite end Date Time | Bottle Group(s) A/B

Matrix (type, e.g., Salt, Fresh, etc) | Diss. Oxygen 15.03 ☑ mg/L ☐ % sat | Total Res. Chlorine (mg/L)

Temp (C) 15.9 | pH 7.8 | Sample Depth 0.3 ☐ ft ☑ m | Sp. Conductance (umho/cm) 285

☐ dms ☐ dd ☐ dms | Salinity (ppt) | Comments E. COLI DROPPED OFF 2 ATL

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)

WIN/STORET # | Temp (C) | pH | Sample Depth ☐ ft ☐ m | Sp. Conductance (umho/cm)

Latitude ☐ dd ☐ dms | Longitude ☐ dd ☐ dms | Salinity (ppt) | Comments

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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)

WIN/STORET # | Temp (C) | pH | Sample Depth ☐ ft ☐ m | Sp. Conductance (umho/cm)

Latitude ☐ dd ☐ dms | Longitude ☐ dd ☐ dms | Salinity (ppt) | Comments

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Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
				AB	01-23-18 1044

Bottle group "A" samples not received.
AB 01-23-18

Group: A	Bottle Type:	P-1L	# of Bottles: 5	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	4
ALKALINITY TURBIDITY W-CL-IC W-COLOR W-F W-SO4-IC W-TDS W-TSS							
Group: A	Bottle Type:	BP-1L	# of Bottles: 5	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	4
CHLSUITE-W							
Group: A	Bottle Type:	P-120ML-WC-THI	# of Bottles: 5	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	4
SWD-AEL-EC							
Group: A	Bottle Type:	P-500ML	# of Bottles: 5	Preservative:	ICE And H2SO4	**Enter Number of Bottles Sent to Lab**	4
W-NH3 W-NO2NO3 W-S-A-TP W-TKN W-TOC							
Group: A	Bottle Type:	P-125ML	# of Bottles: 5	Preservative:	FILTER-ICE	**Enter Number of Bottles Sent to Lab**	4
W-PO4-F							
Group: B	Bottle Type:	P-120ML-WC-THI	# of Bottles: 1	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	5 to AEL
SWD-AEL-EC							

Advanced
Environmental Laboratories, Inc.
☐ 6981 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354 • E82574
☑ 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327 • E84589
☐ 2106 NW 67th Place, Ste. 7 • Gainesville, FL 32606 • 352.337.1500 • Fax 352.337.0050 • E82620
☐ 525 D. North Lake Blvd., Ste. 1016 • Altamonte Springs, FL 32701 • 407.037.1534 • Fax 407.037.1607 • E53076

LAB NUMBER:

Page 1 of 1

CLIENT NAME: FDEP - SW District	PROJECT NAME: TMDL / SMP		
ADDRESS: 13051 N. Telecom Pkwy	P.O. NUMBER/PROJECT NUMBER:		
Temple Terrace, FL 33637	PROJECT LOCATION: Florida		
PHONE: 813-470-5700	FAX: 813-470-5998		
CONTACT: Matthew Bearden Sarah Ernst	SAMPLED BY:		
TURN AROUND TIME: RQ2018-01-22-14	REMARKS/SPECIAL INSTRUCTIONS: PO AF315E 813- CONTACT: Jenny Ashton 470-5772		
☑ STANDARD ☐ RUSH			

Samples are ambient water and not suspected to contain chlorine

WW=waste water SW=surface water GW=ground water DW=drinking water O=oil A=air SO=soil SL=sludge

Field ID	SITE NAME	Grab Comp	SAMPLING DATE	SAMPLING TIME	MATRIX	NO. COUNT	Preserv	Ice, T	Fecal Coliforms	E. Coli					LAB NUMBER
GISWD054	LAKE MAGDALENE	Grab	1-22-18	1000	SW	1			1						
GISWD030	LAKE ARMISTEAD	Grab	1-22-18	1110	SW	1			1						
GISWD020	LAKE WASTENA	Grab	1-22-18	1150	SW	1			1						
GISWD006	Little Lake Wilson Ctr.	Grab	1/22/18	1230	SW	1			1						
GISWD009	Little Lake Wilson South	Grab	1/22/18	1240	SW	1			1						
		Grab			SW										

Ice H=(HCl) O=(H_2SO_4) N=(HNO_3) T=(Sodium Thiosulfate)

Shipment	Method	Sample Kit	Cooler #
Out:	Via:	RB D/T	
Ret:	Via:	AB D/T	
		Trip Bl.	

	Relinquish by:	Date	Time	Received by:	Date	Time
1		1/22/18	1404		1/23/18	1404
2						
3						
4						

Received on Ic ☐ Yes ☐ No cc ☐ sent ☐ received

revised 1/12

RQ-2018-01-22-14

Date of Request: 21-DEC-2017
Created By: ASHTON_J On: 21-DEC-2017
Modified By: SWANSON_C On: 09-JAN-2018
Customer: SW-DIST
Project: SMP
Division:
District: Southwest District
Sampling Event: Hills Lakes

Send Coolers To:

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

Send Final Report To:

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: 08-JAN-2018
Biology Request Reviewed By: SWANSON_C On: 09-JAN-2018
Sampling Kit Required: YES Ship on: 18-JAN-2018
Sampling Kit Shipped: YES On: 18-JAN-2018
Sampling Kit Packed By: REYNOLDS_T
Preservatives Needed: YES
Date to Receive Samples: 22-JAN-2018
Received By: SHAIK_A On: 23-JAN-2018

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

Comments: 4 - cases of Sulfuric Acid

Bottle Group A (Water) With 5 Samples:

Bottle Type: P-1L Number of Bottles: 5 Preserved With: ICE

ALKALINITY	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO3/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 Color (true)	Template: DEFAULT	(SM 2120 B) True Color measured at 450 nm
W-F	Template: DEFAULT	(SM 4500 F-C-97) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)
W-SO4-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: 5 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: 5 Preserved With: ICE

SWD-AEL-EC	Template: DEFAULT	(EPA 1603) Escherichia coli by membrane filter method using modified mTEC by Advanced Environmental Tampa Lab for SWD

Bottle Type: P-500ML Number of Bottles: 5 Preserved With: ICE And H2SO4

W-NH3	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
W-NO2NO3	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 Type: P-125ML Number of Bottles: 5 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

Bottle Group B (Water) With 1 Samples:

Bottle Type: Number of Bottles: 1 Preserved With: ICE

SWD-AEL-EC	Template: DEFAULT	(EPA 1603) Escherichia coli by membrane filter method using modified mTEC by Advanced Environmental Tampa Lab for SWD

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

00530
01000

FedEx Express — Package US Airbill

FedEx Tracking Number 8115 9551 7723

Form ID No. 0215 — Recipient's Copy

1 From
Date 1-22-18 [redacted]
Sender's Name
Phone 470-[illegible]
Company [illegible]
Address [illegible] Telecom Pkwy
City Temple Terrace State FL ZIP [illegible]

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
☐ Hold Weekday — FedEx location address REQUIRED. NOT available for FedEx First Overnight.
Address
Use this line for the HOLD location address or for continuation of your shipping address.
☐ Hold Saturday — FedEx location address REQUIRED. Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.
City TALLAHASSEE State FL ZIP 32399

0126912290

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 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, 9, UN 1845 ___ x ___ kg
Restrictions apply for dangerous goods — see the current FedEx Service Guide. ☐ 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
[redacted]
Total Packages Total Weight [illegible] lbs. [redacted] 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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8115 9551 7723