

September 18, 2018

Frances Moore  
FDEP - Biology Program  
Twin Towers Lab Complex A  
2600 Blair Stone RD MS  
Tallahassee, FL 32399

RE: Project: SMP RQ-2018-09-10-17  
Pace Project No.: 35416644

Dear Frances Moore:

Enclosed are the analytical results for sample(s) received by the laboratory on September 11, 2018. The results relate only to the samples included in this report. Results reported herein conform to the most current, applicable TNI/NELAC standards and the laboratory's Quality Assurance Manual, where applicable, unless otherwise noted in the body of the report.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Jeff Baylor  
jeff.baylor@pacelabs.com  
(386)672-5668  
Project Manager

Enclosures



## REPORT OF LABORATORY ANALYSIS

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## CERTIFICATIONS

Project: SMP RQ-2018-09-10-17

Pace Project No.: 35416644

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### Tampa Certification IDs

110 South Bayview Blvd., Tampa, FL 34677

Florida Certification #:E84129

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## SAMPLE SUMMARY

Project: SMP RQ-2018-09-10-17

Pace Project No.: 35416644

| Lab ID      | Sample ID | Matrix | Date Collected | Date Received  |
|-------------|-----------|--------|----------------|----------------|
| 35416644001 | G1SW0099  | Water  | 09/11/18 10:05 | 09/11/18 13:11 |
| 35416644002 | G1SW0100  | Water  | 09/11/18 10:50 | 09/11/18 13:11 |
| 35416644003 | G5SW0134  | Water  | 09/11/18 11:30 | 09/11/18 13:11 |
| 35416644004 | G5SW0130  | Water  | 09/11/18 12:10 | 09/11/18 13:11 |

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## SAMPLE ANALYTE COUNT

Project: SMP RQ-2018-09-10-17

Pace Project No.: 35416644

| Lab ID      | Sample ID | Method                 | Analysts | Analytes Reported | Laboratory |
|-------------|-----------|------------------------|----------|-------------------|------------|
| 35416644001 | G1SW0099  | SM 9222D               | HG1      | 1                 | PASI-Tp    |
|             |           | Enterolert/Quanti-Tray | HG1      | 1                 | PASI-Tp    |
| 35416644002 | G1SW0100  | SM 9222D               | HG1      | 1                 | PASI-Tp    |
|             |           | 9223B/Quanti-Tray      | HG1      | 1                 | PASI-Tp    |
| 35416644003 | G5SW0134  | 9223B/Quanti-Tray      | HG1      | 1                 | PASI-Tp    |
| 35416644004 | G5SW0130  | 9223B/Quanti-Tray      | HG1      | 1                 | PASI-Tp    |

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## ANALYTICAL RESULTS

Project: SMP RQ-2018-09-10-17

Pace Project No.: 35416644

| <b>Sample: G1SW0099</b>                                                              |             | <b>Lab ID: 35416644001</b> |      | Collected: 09/11/18 10:05 |    | Received: 09/11/18 13:11 |                | Matrix: Water |      |
|--------------------------------------------------------------------------------------|-------------|----------------------------|------|---------------------------|----|--------------------------|----------------|---------------|------|
| Parameters                                                                           | Results     | Units                      | PQL  | MDL                       | DF | Prepared                 | Analyzed       | CAS No.       | Qual |
| <b>9222D Fecal Coliform Tampa</b>                                                    |             |                            |      |                           |    |                          |                |               |      |
| Analytical Method: SM 9222D Preparation Method: SM 9222D                             |             |                            |      |                           |    |                          |                |               |      |
| Fecal Coliforms                                                                      | <b>13.0</b> | CFU/100 mL                 | 1.0  | 1.0                       | 1  | 09/11/18 15:16           | 09/12/18 14:20 |               | B    |
| <b>Enterolert/Quanti-Tray</b>                                                        |             |                            |      |                           |    |                          |                |               |      |
| Analytical Method: Enterolert/Quanti-Tray Preparation Method: Enterolert/Quanti-Tray |             |                            |      |                           |    |                          |                |               |      |
| Enterococci                                                                          | <b>1350</b> | MPN/100mL                  | 10.0 | 10.0                      | 10 | 09/11/18 14:35           | 09/12/18 14:47 |               |      |

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## ANALYTICAL RESULTS

Project: SMP RQ-2018-09-10-17

Pace Project No.: 35416644

| <b>Sample: G1SW0100</b>           |            | <b>Lab ID: 35416644002</b>                                                 |      | Collected: 09/11/18 10:50 |    | Received: 09/11/18 13:11 |                | Matrix: Water |      |
|-----------------------------------|------------|----------------------------------------------------------------------------|------|---------------------------|----|--------------------------|----------------|---------------|------|
| Parameters                        | Results    | Units                                                                      | PQL  | MDL                       | DF | Prepared                 | Analyzed       | CAS No.       | Qual |
| <b>9222D Fecal Coliform Tampa</b> |            |                                                                            |      |                           |    |                          |                |               |      |
|                                   |            | Analytical Method: SM 9222D Preparation Method: SM 9222D                   |      |                           |    |                          |                |               |      |
| Fecal Coliforms                   | <b>100</b> | CFU/100 mL                                                                 | 1.0  | 1.0                       | 1  | 09/11/18 15:16           | 09/12/18 14:20 |               | B    |
| <b>Colilert/Quanti-Tray MPN</b>   |            |                                                                            |      |                           |    |                          |                |               |      |
|                                   |            | Analytical Method: 9223B/Quanti-Tray Preparation Method: 9223B/Quanti-Tray |      |                           |    |                          |                |               |      |
| E.coli                            | <b>460</b> | MPN/100mL                                                                  | 10.0 | 10.0                      | 10 | 09/11/18 14:54           | 09/12/18 10:06 |               |      |

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## ANALYTICAL RESULTS

Project: SMP RQ-2018-09-10-17

Pace Project No.: 35416644

| <b>Sample: G5SW0134</b>                                                                                    |            | <b>Lab ID: 35416644003</b> |      | Collected: 09/11/18 11:30 |    | Received: 09/11/18 13:11 |                | Matrix: Water |      |
|------------------------------------------------------------------------------------------------------------|------------|----------------------------|------|---------------------------|----|--------------------------|----------------|---------------|------|
| Parameters                                                                                                 | Results    | Units                      | PQL  | MDL                       | DF | Prepared                 | Analyzed       | CAS No.       | Qual |
| <b>Colilert/Quanti-Tray MPN</b> Analytical Method: 9223B/Quanti-Tray Preparation Method: 9223B/Quanti-Tray |            |                            |      |                           |    |                          |                |               |      |
| E.coli                                                                                                     | <b>465</b> | MPN/100mL                  | 10.0 | 10.0                      | 10 | 09/11/18 14:54           | 09/12/18 10:06 |               |      |

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## ANALYTICAL RESULTS

Project: SMP RQ-2018-09-10-17

Pace Project No.: 35416644

| <b>Sample: G5SW0130</b>                                                    |            | <b>Lab ID: 35416644004</b> |      | Collected: 09/11/18 12:10 |    | Received: 09/11/18 13:11 |                | Matrix: Water |      |
|----------------------------------------------------------------------------|------------|----------------------------|------|---------------------------|----|--------------------------|----------------|---------------|------|
| Parameters                                                                 | Results    | Units                      | PQL  | MDL                       | DF | Prepared                 | Analyzed       | CAS No.       | Qual |
| <b>Colilert/Quanti-Tray MPN</b>                                            |            |                            |      |                           |    |                          |                |               |      |
| Analytical Method: 9223B/Quanti-Tray Preparation Method: 9223B/Quanti-Tray |            |                            |      |                           |    |                          |                |               |      |
| E.coli                                                                     | <b>228</b> | MPN/100mL                  | 10.0 | 10.0                      | 10 | 09/11/18 14:54           | 09/12/18 10:06 |               |      |

## REPORT OF LABORATORY ANALYSIS

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## QUALITY CONTROL DATA

Project: SMP RQ-2018-09-10-17

Pace Project No.: 35416644

QC Batch: 476863

Analysis Method: SM 9222D

QC Batch Method: SM 9222D

Analysis Description: 9222D MBIO Fecal Coliform Tampa

Associated Lab Samples: 35416644001, 35416644002

METHOD BLANK: 2582546

Matrix: Water

Associated Lab Samples: 35416644001, 35416644002

| Parameter       | Units      | Blank Result | Reporting Limit | MDL | Analyzed       | Qualifiers |
|-----------------|------------|--------------|-----------------|-----|----------------|------------|
| Fecal Coliforms | CFU/100 mL | 1.0 U        | 1.0             | 1.0 | 09/12/18 14:20 |            |

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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## QUALITY CONTROL DATA

Project: SMP RQ-2018-09-10-17

Pace Project No.: 35416644

|                         |                                       |                       |                   |
|-------------------------|---------------------------------------|-----------------------|-------------------|
| QC Batch:               | 476699                                | Analysis Method:      | 9223B/Quanti-Tray |
| QC Batch Method:        | 9223B/Quanti-Tray                     | Analysis Description: | Colilert MPN      |
| Associated Lab Samples: | 35416644002, 35416644003, 35416644004 |                       |                   |

METHOD BLANK: 2581855 Matrix: Water

Associated Lab Samples: 35416644002, 35416644003, 35416644004

| Parameter | Units     | Blank Result | Reporting Limit | MDL | Analyzed       | Qualifiers |
|-----------|-----------|--------------|-----------------|-----|----------------|------------|
| E.coli    | MPN/100mL | <1           | 1.0             | 1.0 | 09/12/18 10:06 |            |

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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## QUALITY CONTROL DATA

Project: SMP RQ-2018-09-10-17

Pace Project No.: 35416644

QC Batch: 476858

Analysis Method: Enterolert/Quanti-Tray

QC Batch Method: Enterolert/Quanti-Tray

Analysis Description: Enterolert MPN

Associated Lab Samples: 35416644001

METHOD BLANK: 2582507

Matrix: Water

Associated Lab Samples: 35416644001

| Parameter   | Units     | Blank Result | Reporting Limit | MDL | Analyzed       | Qualifiers |
|-------------|-----------|--------------|-----------------|-----|----------------|------------|
| Enterococci | MPN/100mL | <1           | 1.0             | 1.0 | 09/12/18 14:47 |            |

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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## QUALIFIERS

Project: SMP RQ-2018-09-10-17

Pace Project No.: 35416644

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### DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

TNTC - Too Numerous To Count

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

### LABORATORIES

PASI-Tp Pace Analytical Services - Tampa

### ANALYTE QUALIFIERS

U Compound was analyzed for but not detected.

B Results based upon colony counts outside the acceptable range.

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## QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: SMP RQ-2018-09-10-17

Pace Project No.: 35416644

| Lab ID      | Sample ID | QC Batch Method        | QC Batch | Analytical Method      | Analytical Batch |
|-------------|-----------|------------------------|----------|------------------------|------------------|
| 35416644001 | G1SW0099  | SM 9222D               | 476863   | SM 9222D               | 476866           |
| 35416644002 | G1SW0100  | SM 9222D               | 476863   | SM 9222D               | 476866           |
| 35416644002 | G1SW0100  | 9223B/Quanti-Tray      | 476699   | 9223B/Quanti-Tray      | 476700           |
| 35416644003 | G5SW0134  | 9223B/Quanti-Tray      | 476699   | 9223B/Quanti-Tray      | 476700           |
| 35416644004 | G5SW0130  | 9223B/Quanti-Tray      | 476699   | 9223B/Quanti-Tray      | 476700           |
| 35416644001 | G1SW0099  | Enterolert/Quanti-Tray | 476858   | Enterolert/Quanti-Tray | 476860           |

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WO#: 35416644



# OUT-OF-CUSTODY / Analytical Request Document

Out-Of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

|                                                                                                                                                                                                                                          |  |                                                                                                                                                           |  |                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                    |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Section A</b><br>Required Client Information:<br>Company: FDEP<br>Address: 13051 N. Telecom Pkwy<br>Temple Terrace, FL 33637<br>Email To: DEP-Overflowmicro<br>Phone: 813-470-5772<br>Contact: Judy Ashton<br>Requested Due Date/TAT: |  | <b>Section B</b><br>Required Project Information:<br>Report To:<br>Copy To:<br>Purchase Order No.: B374A0<br>Project Name: SMP<br><b>RQ-2018-09-10-17</b> |  | <b>Section C</b><br>Invoice Information:<br>Attention:<br>Company Name:<br>Address:<br>Pace Quote Reference:<br>Pace Project Manager: Jeff Baylor<br>Pace Profile #: 10742 |  | Page: 1 of 2<br>REGULATORY AGENCY<br><input type="checkbox"/> NPDES <input type="checkbox"/> GROUND WATER <input type="checkbox"/> DRINKING WATER<br><input type="checkbox"/> UST <input type="checkbox"/> RCRA <input checked="" type="checkbox"/> OTHER Surface Water<br>Site Location: <b>FLORIDA</b><br>STATE: |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|

| ITEM # | Section D<br>Required Client Information                        | Valid Matrix Codes |      | MATRIX CODE WT | SAMPLE TYPE = GRAB | COLLECTED |      |                                   | # OF CONTAINERS | Preservatives |        |       | Analysis Test Y/N | Requested Analysis Filtered (Y/N) |        |       |  |  | Residual Chlorine (Y/N) | Pace Project No./ Lab I.D. |
|--------|-----------------------------------------------------------------|--------------------|------|----------------|--------------------|-----------|------|-----------------------------------|-----------------|---------------|--------|-------|-------------------|-----------------------------------|--------|-------|--|--|-------------------------|----------------------------|
|        |                                                                 | MATRIX             | CODE |                |                    | DATE      | TIME | SAMPLE TEMP AT TIME OF COLLECTION |                 | ICE           | Na2S03 | Other |                   | E. COLI                           | ENTERO | FECAL |  |  |                         |                            |
|        | <b>SAMPLE ID</b><br>(A-Z, 0-9 / -)<br>Sample IDs MUST BE UNIQUE | WATER              | WT   |                |                    |           |      |                                   |                 |               |        |       |                   |                                   |        |       |  |  |                         |                            |
|        |                                                                 | FRESH              | F    |                |                    |           |      |                                   |                 |               |        |       |                   |                                   |        |       |  |  |                         |                            |
|        |                                                                 | MARINE             | M    |                |                    |           |      |                                   |                 |               |        |       |                   |                                   |        |       |  |  |                         |                            |
|        | Field ID/WIN                                                    |                    |      |                |                    |           |      |                                   |                 |               |        |       |                   |                                   |        |       |  |  |                         |                            |
|        |                                                                 |                    |      |                |                    |           |      |                                   |                 |               |        |       |                   |                                   |        |       |  |  |                         |                            |
|        | Site Name:                                                      |                    |      |                |                    |           |      |                                   |                 |               |        |       |                   |                                   |        |       |  |  |                         |                            |
|        |                                                                 |                    |      |                |                    |           |      |                                   |                 |               |        |       |                   |                                   |        |       |  |  |                         |                            |
|        | Field ID/WIN                                                    |                    |      |                |                    |           |      |                                   |                 |               |        |       |                   |                                   |        |       |  |  |                         |                            |
|        |                                                                 |                    |      |                |                    |           |      |                                   |                 |               |        |       |                   |                                   |        |       |  |  |                         |                            |
|        | Site Name:                                                      |                    |      |                |                    |           |      |                                   |                 |               |        |       |                   |                                   |        |       |  |  |                         |                            |
|        |                                                                 |                    |      |                |                    |           |      |                                   |                 |               |        |       |                   |                                   |        |       |  |  |                         |                            |
|        | Field ID/WIN                                                    |                    |      |                |                    |           |      |                                   |                 |               |        |       |                   |                                   |        |       |  |  |                         |                            |
|        |                                                                 |                    |      |                |                    |           |      |                                   |                 |               |        |       |                   |                                   |        |       |  |  |                         |                            |
|        | Site Name:                                                      |                    |      |                |                    |           |      |                                   |                 |               |        |       |                   |                                   |        |       |  |  |                         |                            |
|        |                                                                 |                    |      |                |                    |           |      |                                   |                 |               |        |       |                   |                                   |        |       |  |  |                         |                            |

|                            |                             |         |      |                         |         |      |                         |                       |                             |                      |   |
|----------------------------|-----------------------------|---------|------|-------------------------|---------|------|-------------------------|-----------------------|-----------------------------|----------------------|---|
| ADDITIONAL COMMENTS        | RELINQUISHED BY/AFFILIATION | DATE    | TIME | ACCEPTED BY/AFFILIATION | DATE    | TIME | T203                    | 1.3                   | N                           | A                    | Y |
|                            | <i>Be Pino</i>              | 9/11/18 | 1337 | MURPHY/PAE              | 9/11/18 | 1339 |                         |                       |                             |                      |   |
| SAMPLER NAME AND SIGNATURE |                             |         |      |                         |         |      | Temp in °C              | Received on Ice (Y/N) | Custody Sealed Cooler (Y/N) | Samples Intact (Y/N) |   |
| PRINT Name of SAMPLER:     |                             |         |      |                         |         |      |                         |                       |                             |                      |   |
| SIGNATURE of SAMPLER:      |                             |         |      |                         |         |      |                         |                       |                             |                      |   |
|                            |                             |         |      |                         |         |      | DATE Signed (MM/DD/YY): |                       |                             |                      |   |



|                                                                                  |                                    |                                                |
|----------------------------------------------------------------------------------|------------------------------------|------------------------------------------------|
|  | Document Name:                     | Document Revised:                              |
|                                                                                  | Sample Condition Upon Receipt Form | May 30, 2018                                   |
|                                                                                  | Document No.: F-FL-C-007 rev. 13   | Issuing Authority: Pace Florida Quality Office |

### Sample Condition Upon Receipt Form (SCUR)

**Project #** **WO# : 35416644**  
**Project Manager:** PM: JSB **Due Date:** 09/20/18  
**Client:** CLIENT: DEPBUR

**Date and Initials of person:**  
**Examining contents:** WOM  
**Label:** \_\_\_\_\_  
**Deliver:** \_\_\_\_\_  
**pH:** N/A

Thermometer Used: T-203 Date: 9-11-18 Time: 1339 Initials: WOM

State of Origin: FL ☐ For WV projects, all containers verified to  $\leq 6^{\circ}\text{C}$

|                                                                                           |                                                                               |
|-------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| Cooler #1 Temp. °C <u>1.3</u> (Visual) <u>0.0</u> (Correction Factor) <u>1.3</u> (Actual) | <input checked="" type="checkbox"/> Samples on ice, cooling process has begun |
| Cooler #2 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual)                | <input type="checkbox"/> Samples on ice, cooling process has begun            |
| Cooler #3 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual)                | <input type="checkbox"/> Samples on ice, cooling process has begun            |
| Cooler #4 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual)                | <input type="checkbox"/> Samples on ice, cooling process has begun            |
| Cooler #5 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual)                | <input type="checkbox"/> Samples on ice, cooling process has begun            |
| Cooler #6 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual)                | <input type="checkbox"/> Samples on ice, cooling process has begun            |

**Courier:** ☐ Fed Ex ☐ UPS ☐ USPS ☒ Client ☐ Commercial ☐ Pace ☐ Other \_\_\_\_\_  
**Shipping Method:** ☐ First Overnight ☐ Priority Overnight ☐ Standard Overnight ☐ Ground ☐ International Priority  
☐ Other \_\_\_\_\_  
**Billing:** ☐ Recipient ☐ Sender ☐ Third Party ☐ Credit Card ☐ Unknown

**Tracking #** \_\_\_\_\_

**Custody Seal on Cooler/Box Present:** ☐ Yes ☒ No **Seals intact:** ☐ Yes ☐ No **Ice:** Wet Blue Dry None  
**Packing Material:** ☐ Bubble Wrap ☐ Bubble Bags ☒ None ☐ Other \_\_\_\_\_  
**Samples shorted to lab (If Yes, complete)** Shorted Date: \_\_\_\_\_ Shorted Time: \_\_\_\_\_ Qty: \_\_\_\_\_

#### Comments:

|                                                                                            |                                                                                                  |                                                                                                                               |
|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| Chain of Custody Present                                                                   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | <u>No collection date</u><br><u>Collection date on</u><br><u>Samples say 9/11/18</u>                                          |
| Chain of Custody Filled Out                                                                | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |                                                                                                                               |
| Relinquished Signature & Sampler Name COC                                                  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |                                                                                                                               |
| Samples Arrived within Hold Time                                                           | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |                                                                                                                               |
| Rush TAT requested on COC                                                                  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |                                                                                                                               |
| Sufficient Volume                                                                          | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |                                                                                                                               |
| Correct Containers Used                                                                    | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |                                                                                                                               |
| Containers Intact                                                                          | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |                                                                                                                               |
| Sample Labels match COC (sample IDs & date/time of collection)                             | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |                                                                                                                               |
| All containers needing acid/base preservation have been checked.                           | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A |                                                                                                                               |
| All Containers needing preservation are found to be in compliance with EPA recommendation: | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A | <b>Preservation Information:</b><br>Preservative: _____<br>Lot #/Trace #: _____<br>Date: _____ Time: _____<br>Initials: _____ |
| Exceptions: VOA, Coliform, TOC, O&G, Carbamates                                            |                                                                                                  |                                                                                                                               |
| Headspace in VOA Vials? (>6mm):                                                            | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A |                                                                                                                               |
| Trip Blank Present:                                                                        | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A |                                                                                                                               |

**Client Notification/ Resolution:**  
 Person Contacted: \_\_\_\_\_ Date/Time: \_\_\_\_\_

**Comments/ Resolution (use back for additional comments):**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_