FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
CHAIN OF CUSTODY FORM

Date:	4/12/2021	**Collected By:**	Jeremy Parrish, Brian Davis
Customer:	NE-DIST	**Sampling Agency:**	FDEP
RQ:	RQ-2021-04-12-36	**Project ID**:	SMP

PLEASE RETURN THE ORIGINAL OF THIS FORM WITH SAMPLE SUBMITTAL FORMS AND THE COOLER PACKING WORKSHEET TO THE LAB

Number of Coolers Shipped: 2 **Delivery Method:** FedEx

FIELD ID (Labels) submitted under this RQ for this collection date.

Site Location	Field ID/WIN ID
Escambia Slough at Escambia st.	G4NE0287
Escambia slough at Dade st.	G4NE0310
Escambia slough at Calhoun st.	G4NE0311
Egans Creek at N. 14th	G4NE0290
Egan creek at Atlantic	G4NE0285
Egans Creek at Jasmine st.	G4NE0305

DATE/TIME:
4/12/2021 1600

RELINQUISHED BY(SIGNATURE):

THIS SECTION TO BE COMPLETED BY LABORATORY

Rec'd/Inspected By: **Rec'd/Inspected Date**:

CALIBRATION AND VERIFICATION LOG (FDEP SOP FT 1000-FT 1500, FD 1000-FD 4000)

Boldly "X" this box if there are qualified data on this page. ☐

Meter ID: Stitch RQ- 202-04-12-38 Project: Nassau North 2

Notes: (1) Always wait for meter to stabilize before recording any readings.
(2) Report all digits displayed. Do not round before reporting measurements. (See special instructions for depth).
(3) For Calibrations, record calibrated meter reading. Do not record initial meter reading before calibration.

Temperature (Quarterly) FT 1400 Date of Last Temperature Verification 2/15/21

DO DEP SOP FT 1500	Name	Date	Time CT-ET	Temp °C	Baro-meter mmHg	D.O. Chart mg/L	Meter D.O. mg/L	% DO	Probe Charge	Probe Gain	Pass / Fail	Lab / Field
Calibr.	Brian D.	4/12/21	744	21.9	757.0	8.7	—	99.6	—	1.03	(P) / F	(L) / F
ICV			750	22.0	757.1	8.7	8.71	99.7	—	1.03	(P) F	(L) F
CCV	JPamsh	4/12/21	1536	24.2	757.5	8.4	8.38	99.7	—	1.03	(P) / F	(L) / F
CCV											P / F	L / F

DO Acceptance criteria from Table ± 0.3 mg/L. **Rapid-Pulse Sensors:** DO Gain Range 0.7 to 1.4; DO Charge Range 25-75.
Optical: DO gain range 0.85 to 1.15 (Pro DSS **0.75** to 1.50); DO charge N/A. **Steady-state & Galvanic Sensors:** DO Gain & Charge N/A.

Spec. Cond. FT 1200	Name	Date	Time CT-ET	Lot #	Expir. Date	Standard µmhos/cm	Meter Reading µmhos/cm	Pass / Fail	Lab / Field
Calibr.	Brian D.	4/12/21	754	201222B	1/22	1000	1000	(P) F	(L) F
ICV		756		201222C	1/22	50,000	49879	(P) / F	(L) / F
CCV	JPamsh	4/12/21	1534	200407B	4/21	20,000	19315	(P) / F	(L) / F
CCV								P / F	L / F

Conductivity Acceptance criteria ± 5%

pH DEP SOP FT 1100	Name	Date	Time CT-ET	Lot #	Expir. Date	pH Buffer SU	Temp °C	Meter reading SU	mV	Pass / Fail	Lab / Field
Calibr.	Brian D.	4/12/21	800	2010F27	10/22	7.01	22.7	7.01	-19.2	(P) F	(L) F
Calibr.			805	201003	9/22	4.00	22.6	4.00	158.1	P / F	L / F
Calibr.			808	2012797	5/22	10.02	22.6	10.03	-191.8	P / F	L / F
ICV			813	2010F27	10/22	7.01	22.6	7.04	-19.0	(P) F	(L) / F
CCV	JPamsh		1540	2012797	5/22	10.00	22.7	10.09	-196.5	(P) / F	(L) F
CCV										P / F	L / F

pH Acceptance criteria ± 0.2 SU; mV pH 7 Range 0 ± 50; mV pH 4 Range +180 ± 50; mV pH 10 Range -180 ± 50;
If mV are recorded: **slope from** 7 to 10 _____, slope from 4 to 7 _____ (both must be between 165 and 180 mV)

Does meter have a depth sensor that will be used to measure total depth & sample depth? YES / NO / NA (not surf. water project)

If **YES**, complete daily **Calibr. & ICV** below and list date of last quarterly depth verification: _____

If **NO**, what will be used? (circle one) **Secchi Disk Line / Sonar** Unique ID: _____; Date of last verification: _____

Depth Sensor (Daily Calibration & ICV)	Name	Date	Time CT-ET	Calibrated Value (0.00 or Offset), meters	ICV Value, meters	Pass / Fail	Lab / Field
Pressure mode in air	Brian D.	4/12/21	817	0.00	0.00	(P) F	(L) F

Report two decimal places. Round numbers ≤ 4 down, ≥ 5 up. ICV acceptance criteria ± 5 % or ± 0.05m, whichever is greater.

COMMENTS:

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2020

Meter Passed End of Day CCV
Yes / No

WIN Station Name: Egans Creek at Jasmine st. **Date:** 4/12/2021

WIN/Field ID: G4NE0305 **WBID:** 2127A **ENR:** - **Latitude:** 30.6557

County: NASSAU **Org ID:** 21FLA **Longitude:** -81.4388

Receiving Body of Water: Nassau - St. Marys **RQ-** 2021-04-12-36

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
[x] Jeremy Parrish	x		x		
[x] Brian Davis		x		x	x
[ ]					
[ ]					

Sampling Equipment

- [x] Sample Container
- [ ] Dipper
- [ ] Syringe
- [ ] Carboy
- [ ] Van Dorn
- [x] Pole

Depth measured with: Meter
Secchi Equipment ID:

Collection Method

- [ ] **Wading**
- [x] **From Shore**
- [ ] **Other** _____
- [ ] **Canoe/Kayak**
- [ ] **Electric Motor**
- [ ] **Gasoline Motor**

Water Level: [x] Normal [ ] Low [ ] High [ ] Dry [ ] Pooled [ ] Flooded

Meter ID# STITCH

Photos: NO **Flow:** FLOW **Tide:** RISING **Tide Times:** High: 1000 Low: 1400

Biological Samples Collected: [x] None [ ] HA [ ] SCI [ ] RPS [ ] Algae ID [ ] LVS [ ] LVI Other:

SBIO ID Numbers:

Notes:

Duplicate Sample

Time Zone: EST **Time:** _____ **Field ID:** N/A (WIN ID_DUP)

WIN DMT Activity ID: _____

Blank

Time Zone: _____ **Time:** _____ **Field ID:** _____ (Blank Type_DDMMYYYY)

DI Source: _____ **Location:** _____

DI Type: _____ **Equipment ID:** _____

DI Container (Name/ID): **DI Container Type:**

LIMS EVENT ID: _____ **WIN Import ID:** _____

Enter Field Parameters, Verify Station ID In LIMS DMT: _____ (Initials/Date) **QC Station ID, Field Parameters In LIMS DMT:** _____ (Initials/Date)

Scan/Save Field Sheets _____ (Initials/Date) **Migrate Data to WIN:** _____ (Initials/Date) **Verify Data In WIN:** _____ (Initials/Date)

RQ-2021-04-12-36
Customer: WQAP
Project ID: SMP

Collected By: Jeremy Parrish, Brian Davis
Field Report Prepared By: Jeremy Parrish
Sampling Agency: FDEP

Place Label Here

WIN ID/Field ID: G4NE0305

Location: Egans Creek at Jasmine st.

Comments: Microbiology sample(s) submitted to contract laboratory

Samples are R qualified.

Matrix: Marine

(Check one) ☒ GRAB ☐ COMPOSITE

Date	Time	DO (mg/L)	DO (%SAT)	Temp. (C°)	pH	Sample Depth (m)	Secchi Disk (m)	Total Depth (m)	Sp COND (µmhos/cm)	Salinity (PPTh)
4/12/2021	1345 EST	2.46	29.7	19.9	7.13	0.3	0.88 ☒ VOB (S)	0.88	26966	16.59
							Central Lab please use top row for login purposes			
	EST									

Parameter Suite	Parameter Methods	Preservation	pH Check	# Bottles sent to Lab	Bottle Group
Preserved Nutrients (P-500ML)	☒ W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	☒ Ice ☒ H_2SO_4*	☒ <2	1	C
	Lot # Sa0293040 **Exp:**	10/19/21			
Metals (P-500ML)	☐ W-ICPMS ☐ W-ICP ☐ W-HARD	☐ Ice ☐ HNO_3*	☐ <2		
	Lot # **Exp:**				
Filtered Nutrients (P125ML)	☒ W-PO4-F ☒ Field Filtered 0.45 µm Filter	☒ Ice		1	C
	Filter Lot # Ronb29490				
	Syringe Lot #				
Chlorophyll (BP-1L)	☒ CHLSUITE-W	☒ Ice		1	C
Physical/Aggregate (Fresh) (P-1L)	☐ Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-IC / W-COLOR / W-SO4-IC / W-TDS	☐ Ice			
Physical/Aggregate (Marine) (P-1L)	☒ Alkalinity / W-BR-IC / W-F / W-TSS / TURBIDITY	☒ Ice		1	C
Macroinvertebrates (PJ-2L)	☐ MI-FW-QLDC	☐ Formalin			
Periphyton (PT-50ML)	☐ ALGAE-ID	☐ Ice			
Microbiology (Contract Lab Bottle)	☐ E Coli ☐ F Coli ☒ Enterococci ☒ Contract Lab	☒ Ice		1	C
Molecular (QPCR-P-500ML)	☐ PCR-HF183 ☐ PCR-BacR ☐ PCR-DG3 ☐ PCR-GULL2 ☐ PCR-GFD ☐	☐ Ice			
Tracers (BG-500ML)	☐ W-E8321-DI ☐ W-E8321-MS	☐ Ice			
Pesticides (BG-500ML) (BG-1L)	☐ W-E8321-DI ☐ WE8321-MS ☐ W-PSNP-TQ ☐ W-CT-CL-R ☐ W-PCL-SQ-R ☐ W-CARB-AA (5 ml of MCAA** Buffer Solution) ☐ W-DIELDRIN	☐ Ice			
Phytoplankton/Periphyton	☐ DTM-QL-C ☐ PEN-QL-C ☐ DTY-QN-C ☐ PKD-QN-C ☐ DTM-QN-C ☐ PRN-QN-C ☐ PKD-QN-BV	☐ Ice			

Name:
Jeremy Parrish
Brian Davis

Signature: Jeremy Parrish

Date: 4/12/2021

*2.0 ml of Preservative used unless noted otherwise.
**MCAA: Monochloroacetic acid buffer solution

CHAIN OF CUSTODY / LABORATORY ANALYSIS REQUEST FORM

ALS Environmental

SR #

ALS Contact

9143 Philips Highway, Suite 120. Jacksonville, FL 32256
Phone (904) 739-2277 / 800-695-7222 x06 / FAX (904) 739-2011
www.alsglobal.com

Project Name	Project Number
Nassau North 2	RQ-2021-04-12-36
Report To	**Report CC**
DEP-Overflow.ica@floridadep.gov	J Parrish
Company/Address	
8800 Baymeadows Way W Suite 100	
Jax FL 32256	
Phone #	**FAX #**
904-256-1700	
Sampler's Signature	**Sampler's Printed Name**
B-D-	Brian Davis

ANALYSIS REQUESTED (Include Method Number and Container Preservative)

CLIENT SAMPLE ID	LAB ID	SAMPLING DATE	SAMPLING TIME	Matrix	NUMBER OF CONTAINERS	Preservative	E.coli	Entero	REMARKS
G4NE0287		4/12/21	1215	SW	2		✓	✓	Marine
G4NE0310		↓	1235	↓	2		✓	✓	↓
G4NE0311			1245		2		✓	✓	Fresh
G4NE0290			1305		1			✓	Marine
G4NE0285			1320		1			✓	↓
G4NE0305		↓	1345	↓	1			✓	

Preservative Key: 0. None; 1. HCL; 2. HNO3; 3. H2SO4; 4. NaOH; 5. Zn. Acetate; 6. MeOH; 7. NaHSO4; 8. Other

Special Instructions/Comments:

1,1

SAMPLE RECEIPT: CONDITION/COOLER TEMP:

CUSTODY SEALS: Y N

TURNAROUND REQUIREMENTS

___ RUSH (SURCHARGES APPLY)
___ STANDARD

REQUESTED FAX DATE

REQUESTED REPORT DATE

REPORT REQUIREMENTS

___ I. Results Only
___ II. Results + QC Summaries (LCS, DUP, MS/MSD as required)
___ III. Results + QC and Calibration Summaries
___ IV. Data Validation Report with Raw Data

Edata ___ Yes ___ No

INVOICE INFORMATION

P.O. # _____

Bill to: _____

Relinquished By	Received By	Relinquished By	Received By	Relinquished By	Received By
Signature: B-D-	Signature: Cheryl Weigand	Signature	Signature	Signature	Signature
Printed Name: Brian Davis	Printed Name: Cheryl Weigand	Printed Name	Printed Name	Printed Name	Printed Name
Firm: DEARNED	Firm: ALS	Firm	Firm	Firm	Firm
Date/Time: 4/12/21 1503	Date/Time: 4/12/21 1503	Date/Time	Date/Time	Date/Time	Date/Time