



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

September 20, 2022

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.: 2209582

Dear Arielle Taylor-Manges:

Sanders Laboratories, Inc received 5 sample(s) on 9/19/2022 for the analyses presented in the following report.

These results only pertain to the samples as received. These pages may include, but are not limited to: Analytical Data, Chains of Custodies, Subcontracted Data and Case Narratives for samples. Results relate only to the samples in the report.

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.
SL 001= Nokomis Certificate # E84380 1050 Endeavor Court Nokomis Fl 34275. SL002= Fort Myers Certificate # E85457 10090 Bavaria Road Fort Myers Fl 33913

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.

A handwritten signature in blue ink, appearing to read "Katie", on a light blue background.

Katie Strothman
Laboratory Director



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Definition Only

WO#: 2209582
Date: 9/20/2022

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. Also if the RPD on a field duplicate exceeds allowable control limit.

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#: 2209582

Date Reported: 9/20/2022

CLIENT: DEP-Bureau or Labs-Biology Section

Lab Order: 2209582

Project: DEP Fecals

Lab ID: 2209582-001

Collection Date: 9/19/2022 8:40:00 AM

Client Sample ID: G3SD0085

Matrix: SURFACE WATER

Analyses	Result	MDL	Qual	Units	DF	Date Analyzed
TOTAL COLIFORM MMO-MUG					A9223B	Analyst: HN
Escherichia Coli	261	1.00		MPN/100mL	1	9/19/2022 1:59:00 PM

Lab ID: 2209582-002

Collection Date: 9/19/2022 9:20:00 AM

Client Sample ID: G3SD0226

Matrix: SURFACE WATER

Analyses	Result	MDL	Qual	Units	DF	Date Analyzed
TOTAL COLIFORM MMO-MUG					A9223B	Analyst: HN
Escherichia Coli	435	1.00		MPN/100mL	1	9/19/2022 1:59:00 PM

Lab ID: 2209582-003

Collection Date: 9/19/2022 10:15:00 AM

Client Sample ID: G3SD0227

Matrix: MARINE WATER

Analyses	Result	MDL	Qual	Units	DF	Date Analyzed
TOTAL COLIFORM MMO-MUG					A9223B	Analyst: HN
Escherichia Coli	201	1.00		MPN/100mL	1	9/19/2022 1:59:00 PM

Qualifiers:	H	Holding times for preparation or analysis exceeded	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#: 2209582

Date Reported: 9/20/2022

CLIENT: DEP-Bureau or Labs-Biology Section

Lab Order: 2209582

Project: DEP Fecals

Lab ID: 2209582-004

Collection Date: 9/19/2022 10:35:00 AM

Client Sample ID: G3SD0028

Matrix: SURFACE WATER

Analyses	Result	MDL	Qual	Units	DF	Date Analyzed
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TOTAL COLIFORM MMO-MUG

A9223B

Analyst: HN

Escherichia Coli	248	1.00		MPN/100mL	1	9/19/2022 1:59:00 PM
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Lab ID: 2209582-005

Collection Date: 9/19/2022 11:00:00 AM

Client Sample ID: G3SD0176

Matrix: SURFACE WATER

Analyses	Result	MDL	Qual	Units	DF	Date Analyzed
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TOTAL COLIFORM MMO-MUG

A9223B

Analyst: HN

Escherichia Coli	435	1.00		MPN/100mL	1	9/19/2022 1:59:00 PM
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Qualifiers:	H	Holding times for preparation or analysis exceeded	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)

2209 582

Client Florida Dept of environmental protection

Address 2600 Blairstone Rd Tallahassee

FL 32399

Phone 239-344-5719

Fax 202-277-09-12-31

Email: DEP-arfflowmicro@Dep.State.FL.us

Report To: _____

Bill to: Cavina + u1

P.O. # Lab# COL36A

Preservative: HCL = H, HNO₃ = N, Na₂S₂O₃ = ST

H₂SO₄ = S, NaOH = SH, NH₄Cl = NH

Project Name: SMP

Project Location: Hendry creek

Permit #: _____

Kit #: _____

Requested Due Date: _____

Fax 202-277-09-12-31

Sampled By (PRINT)

Monica Jaeger

Sampler Signature

[Signature]

Matrix

Sample Description

Date

Time

Type

H

S

ST

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Bottle Lot #

Chem ID

Exp Date

Comments

Okay to Run
As Is...

Client Initial:

Samples On
Ice

Temp °C ↓

4.6

Yes No

Relinquished By/Affiliation

Date

Time

Accepted By/Affiliation

Date

Time

Monica Jaeger

9/19/22

1202

9/19

1202

By signing the Chain of Custody, the client, acknowledges, and authorizes analysis of the parameters listed above.

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