



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

January 26, 2023

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.: 2301729

Dear Arielle Taylor-Manges:

Sanders Laboratories, Inc received 5 sample(s) on 1/24/2023 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#: 2301729
Date: 1/26/2023

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. Lab QC not in range.

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.

Original



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Analytical Report

(continuous)

WO#: 2301729

Date Reported: 1/26/2023

CLIENT: DEP-Bureau or Labs-Biology Section
Project: DEP Fecals

Lab Order: 2301729

Lab ID: 2301729-001

Collection Date: 1/24/2023 10:00:00 AM

Client Sample ID: G4SD0216

Matrix: SURFACE WATER

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

A9223B

Analyst: **HN**
Labcode **SL002**

Escherichia Coli	2,420	1.00	1.00	Z	MPN/100mL	1	01/24/2023 17:00
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Lab ID: 2301729-002

Collection Date: 1/24/2023 10:15:00 AM

Client Sample ID: G4SD0214

Matrix: SURFACE WATER

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

A9223B

Analyst: **HN**
Labcode **SL002**

Escherichia Coli	25.0	1.00	1.00		MPN/100mL	1	01/24/2023 17:00
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Lab ID: 2301729-003

Collection Date: 1/24/2023 11:00:00 AM

Client Sample ID: G4SD0111

Matrix: SURFACE WATER

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

A9223B

Analyst: **HN**
Labcode **SL002**

Escherichia Coli	250	1.00	1.00		MPN/100mL	1	01/24/2023 17:00
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Lab ID: 2301729-004

Collection Date: 1/24/2023 11:20:00 AM

Client Sample ID: G4SD0215

Matrix: SURFACE WATER

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

A9223B

Analyst: **HN**
Labcode **SL002**

Escherichia Coli	1,300	1.00	1.00		MPN/100mL	1	01/24/2023 17:00
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Qualifiers:

C	Value is below Minimum Compound Limit.
H	Holding times for preparation or analysis exceeded
O	RSD is greater than RSDlimit
Q	Calculated Lab Limit greater than Client Requested limit
RL	Reporting Detection Limit

E	Value above quantitation range
ND	Not Detected at the Reporting Limit
PL	Permit Limit
R	RPD outside accepted recovery limits
U	Samples with CalcVal < MDL



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Analytical Report

(continuous)

WO#: 2301729

Date Reported: 1/26/2023

CLIENT: DEP-Bureau or Labs-Biology Section
Project: DEP Fecals

Lab Order: 2301729

Lab ID: 2301729-005

Collection Date: 1/24/2023 11:50:00 AM

Client Sample ID: G4SD0105

Matrix: SURFACE WATER

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

A9223B

Analyst: **HN**
Labcode **SL002**

Escherichia Coli	2,420	1.00	1.00		MPN/100mL	1	01/24/2023 17:00
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Qualifiers:

C	Value is below Minimum Compound Limit.
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Q	Calculated Lab Limit greater than Client Requested limit
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ND	Not Detected at the Reporting Limit
PL	Permit Limit
R	RPD outside accepted recovery limits
U	Samples with CalcVal < MDL

Original
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CHAIN OF CUSTODY RECORD

Project #
(Lab Use Only)

2301 729

Client Florida Dept. of Environmental Protection

Report To: DEP-OverflowMicro@dep.state.fl.us

Address 2600 Blairstone Rd. Tallahassee, FL 32399

Bill to: Carina Tull

Customer Type: FDEP - South ROC

Phone 239-344-5718

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

Requested Due Date:

Fax

H₂SO₄ = S, NaOH = SH, NH₄Cl = NH

Sampled By (PRINT)

Monica Jaeger

Sampler Signature

w

Sample		Preservatives		Analysis Requested		Sample ID # (Lab Use Only)
Date	Time	H	S	Enterococci	Fecal Coliforms	
12/23	1000	Grab	X	X		1A
12/23	1015	Grab	X	X		2A
12/23	1100	Grab	X	X		3A
12/23	1120	Grab	X	X		4A
12/23	1150	Grab	X	X		5A

Relinquished By/Affiliation	Date	Time	Accepted By/Affiliation	Date	Time
Monica Jaeger	12/23	1430		1/24	1430

Okay to Run As Is	Client Initial:	Samples On Ice	Yes	No

Botle Lot #	2022	2023
	RQ-2021	2023-01-23-17

1050 Endeavor Ct, Nokomis, FL 34275-3623 (941) 488-8103 fax(941) 484-6774

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Form #: RCF -02 Approved by: KS 7/1/2016