

Login Checklist

RQ-_____

Login Station ID: _____

Shipping Method: FedEx | UPS | HD | Greyhound

Date/Time of Receipt: _____

*Cooler Temperature	Samples Frozen?	* All Samples in Cooler Preserved with		Number of Sample Containers in Cooler	Evidence Tape				Waybill Tracking #
					Present?		*Intact?		
	YES	HNO ₃	Formalin		Yes	No	Yes	No	

COOLER CHECK

***All samples received on ice unless otherwise noted. HNO3 and Formalin preserved samples do NOT have a temperature requirement.**

- If the temperature of a cooler exceeds 6.0 oC (above 10.0 oC for W-1-4-DIOX and microbiology) or received without ice, identify affected samples in an NCR. **NCR#** _____
- DOH coolers can exceed 2.0 °C above the standard temperature (6.0 or 10.0 °C for W-1-4-DIOX) without login confirmation from customer for samples requiring ice preservation; identify affected samples in an NCR. **NCR#** _____
- If cooler or samples are received with a damaged Evidence Seal; identify the affected samples in an NCR. **NCR#** _____
- If coolers or samples are received late; identify the affected samples in an NCR. **NCR#** _____

Chain of Custody/ Field Sheet(s) Included? Yes _____ No _____

Micro-Biology Overflow Chain of Custody/ Field Sheet(s) Included? Yes _____ No _____

CONTAINER CHECK

Evidence Tape on Bottles? Yes _____ No _____ NA _____ Evidence Tape intact? Yes _____ No _____

If Criminal, photographs taken? Yes _____ No _____ Containers intact? Yes _____ No _____

Caps on tight? Yes _____ No _____

Sufficient Sample Volume: Yes _____ No _____

If **NO** is checked above, generate an NCR listing affected sample IDs in its appropriate category. **NCR#** _____

CHLORINE CHECK REQUIRED? (Blue dot on container) Yes _____ No _____ Init: _____

Chlorine detected? (One container checked per Field ID) Yes _____ No _____ Init: _____

If chlorine is detected, generate an NCR listing affected sample IDs . **NCR#** _____

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

****Acid Preserved Samples:** pH< 2.0? Yes _____ No _____ NA _____ Init: _____

****W-1-4-DIOX** (Green dot on container) preserved to pH<4.0? Yes _____ No _____ NA _____ Init: _____

If samples were not preserved correctly, generate an NCR listing affected sample IDs . **NCR#** _____

Coolers Unpacked/Checked by: _____ Date: _____ Event contains NCRs (Y/N)? _____

Event ID: _____

Login Checklist

Login Preservation Equipment

Lot # & Exp: Date

Additional Comments:

Infrared Thermometer ID:	
pH Test Strips 0 – 6	
pH Paper 0 – 3	
pH Paper 0 – 13	
Chlorine Test Strips	

ENCORE SAMPLES

S-VOC-MS samples in Encores must be frozen within 48 hours of collection.

Were Encore samples received? Yes _____ Init: _____

Date and time placed in freezer _____

Were all samples placed in freezer within 48 hours of collection? Yes _____ No _____

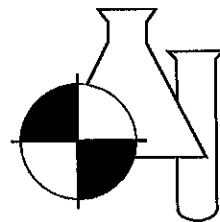
If no, were samples shipped on dry ice? Yes _____ No _____

If S-VOC-MS samples were not preserved correctly, generate an NCR listing affected sample IDs . NCR# _____

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: _____



ANALYTICAL TEST REPORT

THESE RESULTS MEET NELAC STANDARDS

Submission Number : S23050057

Florida Dept Of Env Protection
2600 Blair Stone Rd
Tallahassee, FL 32399

Project Name : RQ-2023-04-24-71

Date Received : 05/02/2023

Time Received : 13:32

Submission Number: 23050057
Sample Number: 001
Sample Description: G3SD0076

Sample Date: 05/02/2023
Sample Time: 10:30
Sample Method: Grab

Parameter	Result	Units	MDL	PQL	Procedure	Preparation Date/Time	Analysis Date/Time	Analyst
ENTEROCOCCI	467	#/100 ML	10	10	ENTEROLERT	05/02/2023 14:23	05/03/2023 14:34	MM/GF

Submission Number: 23050057
Sample Number: 002a
Sample Description: G2SD0052

Sample Date: 05/02/2023
Sample Time: 09:30
Sample Method: Grab

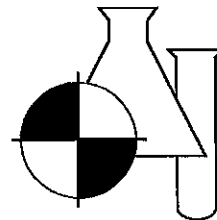
Parameter	Result	Units	MDL	PQL	Procedure	Preparation Date/Time	Analysis Date/Time	Analyst
ENTEROCOCCI	31	#/100 ML	10	10	ENTEROLERT	05/02/2023 14:23	05/03/2023 14:34	MM/GF

Submission Number: 23050057
Sample Number: 002b
Sample Description: G2SD0052

Sample Date: 05/02/2023
Sample Time: 09:30
Sample Method: Grab

Parameter	Result	Units	MDL	PQL	Procedure	Preparation Date/Time	Analysis Date/Time	Analyst
FECAL COLIFORM	38	#/100 ML	1	1	SM9222D	05/02/2023 14:38	05/03/2023 15:00	MM/BK

BENCHMARK EA SOUTH



NELAC Certification #E85086

Melinda Merchant

Dale D. Dixon / Laboratory Director

Melinda Merchant / Laboratory Manager

05/08/2023

Date

DATA QUALIFIERS THAT MAY APPLY:

A = Value reported is an average of two or more determinations.
B = Results based upon colony counts outside the ideal range.
H = Value based on field kit determination. Results may not be accurate.
I = Reported value is between the laboratory MDL and the PQL.
J1 = Estimated value. Surrogate recovery limits exceeded.
J2 = Estimated value. No quality control criteria exists for component.
J3 = Estimated value. Quality control criteria for precision or accuracy not met.
J4 = Estimated value. Sample matrix interference suspected.
J5 = Estimated value. Data questionable due to improper lab or field protocols.
K = Off-scale low. Value is known to be < the value reported.
L = Off-scale high. Value is known to be > the value reported.
N = Presumptive evidence of presence of material.
O = Sampled, but analysis lost or not performed.

Q = Sample held beyond accepted hold time.
T = Value reported is < MDL. Reported for informational purposes only and shall not be used in statistical analysis.
U = Analyte analyzed but not detected at the value indicated.
V = Analyte detected in sample and method blank. Results for this analyte in associated samples may be biased high. Standard, Duplicate and Spike values are within control limits. Reported data are usable.
Y = Analysis performed on an improperly preserved sample. Data may be inaccurate.
Z = Too many colonies were present (TNTC). The numeric value represents the filtration volume.
I = Data deviate from historically established concentration ranges.
? = Data rejected and should not be used. Some or all of QC data were outside criteria, and the presence or absence of the analyte cannot be determined from the data.
* = Not reported due to interference.

NOTES:

J0 = All Quanti-tray wells were positive. Result may be higher than reported.
PQL = 4xMDL.
ND = Not detected at or above the adjusted reporting limit.
X = Value exceeds MCL.
1 dilution (10 mL) on each Enterococci and E.coli sample and 3 dilutions (1 mL, 10 mL, & 100 mL) on each Fecal Coliform sample.

COMMENTS:

For questions or comments regarding these results, please contact us at (941) 625-3137.

Results relate only to the samples.

Benchmark EnviroAnalytical, Inc.
1001 Corporate Ave. Suite 102
North Port, FL 34289
(941) 625-3137 / (941) 240-3071 fax

BEAS Sample Receipt Temp. 41.6 °C
Checked at Benchmark EA South E85086
With Temperature Gun ID #7

Client Name: FDEP
Address: 2600 Blair Stone Rd.
Tallahassee, FL, 32399
Phone: (239) 344-5718
Email: dep-overflowmicro@dep.state.fl.us

Bill to: Frances Moore
P.O. #: Lab C00EF5

Project Name: RQ- 2023-04-24-71
Project Run/Location: Continuous Monitoring

Laboratory Submission #:

523050057

Station ID	Surface Water Sample Matrix ² (Fresh / Marine) Sample Type	Enterococci E.coli (SM9223B Quantitray)	Laboratory Sample #
		E.Coli = 250 mL ; Entero = 120 mL ; Fecal Coliform = 120 mL	
G25A0052 TB	F / M / Grab	E. coli / Entero / Fecal coliform	Date & Time: 05/02/23 0930
G35D0076	F / M / Grab	E. coli / Entero / Fecal coliform	Date & Time: 05/02/23 1030
G25D0052	F / M / Grab	E. coli / Entero / Fecal coliform	Date & Time: 05/02/23 0930
	F / M / Grab	E. coli / Entero / Fecal coliform	Date & Time:
	F / M / Grab	E. coli / Entero / Fecal coliform	Date & Time:
	F / M / Grab	E. coli / Entero / Fecal coliform	Date & Time:
	F / M / Grab	E. coli / Entero / Fecal coliform	Date & Time:
	F / M / Grab	E. coli / Entero / Fecal coliform	Date & Time:
	F / M / Grab	E. coli / Entero / Fecal coliform	Date & Time:
	F / M / Grab	E. coli / Entero / Fecal coliform	Date & Time:
	F / M / Grab	E. coli / Entero / Fecal coliform	Date & Time:
	F / M / Grab	E. coli / Entero / Fecal coliform	Date & Time:

1 "Sample Type" is used to indicate whether the sample was a grab (G) or whether it was a composite (C).

2 "Sample Matrix" is used to indicate whether the sample is being discharged to drinking water (DW), groundwater (GW), surface water (SW), fresh surface water (FSW), saline surface water (SSW), soil, sediment (SDMNT), or sludge (SLDG).

3 "Container Type" is used to indicate whether the container is plastic (P) or glass (G).

4 Sample must be refrigerated or stored in wet ice after collection. The maximum temperature during storage should be 6°C (42.8°F). Under "Preservative," list any preservatives that were added to the sample container.

Instructions:

1. Each bottle has a label identifying sample ID, preservative, preservative contained in the bottle, sample type, client ID, and parameters for analysis.

2. The following information should be added to each bottle label after collection with permanent black ink: date and time of collection, sampler's name or initials, and any field number or ID.

3. All bottles not containing preservative may be rinsed with appropriate sample prior to collection.

4. The client is responsible for documentation of the sampling event. Please note special sampling events on the sample custody form.

Laboratory Sample Acceptability:

pH < 2.0 BEAS Temperature: 41.6°C

1	Collector: Thomas Baker	Date: 05/02/23	Time: 1330	Received By: Melinda Merchant	Date: 5/2/23	Time: 1330
2	Relinquished by:	Date:	Time:	Received By: Melinda Merchant	Date:	Time:
3	Relinquished by:	Date:	Time:	Received By:	Date:	Time:
4	Relinquished by:	Date:	Time:	Received By:	Date:	Time:
5	Relinquished by:	Date:	Time:	Received By:	Date:	Time:

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Date of Request: 17-APR-2023
Created By: MULLEN_W On: 17-APR-2023
Modified By: AYRES_J On: 01-MAY-2023
Customer: SO-DIST
Project: SMP
Division: Division of Environmental Assessment and Restoration
District: South District
Event Description: 2023 SMP: Continuous Deployment

Send Coolers To:

Phone: 239-344-5716
FLDEP South District Office
2295 Victoria Ave. Suite 314
Fort Myers, FL 33901-3381
Attn: William Mullen
Cooler Ship EMail: William.Mullen@FloridaDEP.gov

Priority: 3
Event Status: A
Criminal Investigation: NO
Chemistry Request Reviewed By:
Biology Request Reviewed By: AYRES_J On: 01-MAY-2023
Sampling Kit Required: NO Ship on:
Sampling Kit Shipped: YES On: 19-APR-2023
Sampling Kit Packed By: KREUCH_B
Preservatives Needed: NO
Date to Receive Samples: 03-MAY-2023
Logged In By:

Send Final Report To:

FLDEP South District Office
2295 Victoria Ave. Suite 314
Fort Myers, FL 33901-3381
Attn: William Mullen
Report Notification EMail:
Nicole.Reistad@FloridaDEP.gov; John.Barrington@FloridaDEP.gov; William.Mullen@FloridaDEP.gov; Monica.Jaeger@FloridaDEP.gov

Comments: Group A: (Yucca) Entero, Fecal
Group B: (Cemetery) Entero

Bottle Group A (Water) With 1 Samples:

Bottle Type: P-250ML-WI-THI Number of Bottles: 1 Preserved With: ICE
SD-BES-ENQ Template: DEFAULT (Enterolert/QT) Enterococci by Enterolert/QT by BEA South in North Port
Enterococci-Quanti-Tray
Bottle Type: P-250ML-WI-THI Number of Bottles: 1 Preserved With: ICE
SD-BES-FC Template: DEFAULT (SM 9222 D) Fecal coliforms by MF by BEA South in North Port
Fecal Coliforms-Membrane Filter

Bottle Group B (Water) With 1 Samples:

Bottle Type: P-250ML-WI-THI Number of Bottles: 1 Preserved With: ICE
SD-BES-ENQ Template: DEFAULT (Enterolert/QT) Enterococci by Enterolert/QT by BEA South in North Port
Enterococci-Quanti-Tray