Request Number: RQ-2016-06-27-15

1329G, 1758F

Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: SW-DIST

Project ID: SMP

Requester: Judy Ashton

Field Report Prepared By: A. Salmeron

Collected By: Ashley Salmeron, Stephen Clingerman

Sampling Agency: FDEP

Location: Lake Isabelle SW	☐ Comp ☒ Grab	Collection (comp begin or grab) Date 06/27/2016 Time 1025	Eastern / Central	Composite end Date	Time	Bottle Group(s) (See pg 2): A					
Field ID: RQ-2016-06-27-15 Date: 06/27/2016 Time: G4SW0097	Matrix (type, e.g., Salt, Fresh, etc): Fresh	Diss. Oxygen 2.7 ☒ mg/L 32 ☒ % sat	Total Res. Chlorine (mg/L)								
STC	Temp (C) 30.8	pH 6.2	Sample Depth 0.3 ☐ ft ☒ m	Sp. Conductance (umho/cm) 161							
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) 0.07	Comments								
Location: Lake Isabelle C	☐ Comp ☒ Grab	Collection (comp begin or grab) Date 06/27/2016 Time 1035	Eastern / Central	Composite end Date	Time	Bottle Group(s): A					
Field ID: RQ-2016-06-27-15 Date: 06/27/2016 Time: G4SW0095	Matrix (type, e.g., Salt, Fresh, etc): Fresh	Diss. Oxygen 3.5 ☒ mg/L 46 ☒ % sat	Total Res. Chlorine (mg/L)								
STORE	Temp (C) 30.5	pH 6.1	Sample Depth 0.3 ☐ ft ☒ m	Sp. Conductance (umho/cm) 158							
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) 0.07	Comments								
Location: Lake Isabelle SE	☐ Comp ☒ Grab	Collection (comp begin or grab) Date 06/27/2016 Time 1045	Eastern / Central	Composite end Date	Time	Bottle Group(s): A					
Field ID: RQ-2016-06-27-15 Date: 06/27/2016 Time: G4SW0098	Matrix (type, e.g., Salt, Fresh, etc): Fresh	Diss. Oxygen 3.7 ☒ mg/L 48 ☒ % sat	Total Res. Chlorine (mg/L)								
STOI	Temp (C) 30.0	pH 6.2	Sample Depth 0.3 ☐ ft ☒ m	Sp. Conductance (umho/cm) 158							
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) 0.07	Comments								
Location: Lake Isabelle N	☐ Comp ☒ Grab	Collection (comp begin or grab) Date 06/27/2016 Time 1100	Eastern / Central	Composite end Date	Time	Bottle Group(s): A					
Field ID: RQ-2016-06-27-15 Date: 06/27/2016 Time: G4SW0096	Matrix (type, e.g., Salt, Fresh, etc): Fresh	Diss. Oxygen 2.7 ☐ mg/L 36 ☐ % sat	Total Res. Chlorine (mg/L)								
STOF	Temp (C) 30.3	pH 6.1	Sample Depth 0.3 ☐ ft ☒ m	Sp. Conductance (umho/cm) 155							
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt) 0.07	Comments								

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
A. Salmeron	6/27/16, 1430	FEDEX	2	AE	6-28-16/10:30

Group: A	Bottle Type:	P-1L	# of Bottles: 5	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	5
	ALKALINITY						
	TURBIDITY						
	W-CL-IC						
	W-COLOR						
	W-F						
	W-SO4-IC						
	W-TDS						
	W-TSS						
Group: A	Bottle Type:	BP-1L	# of Bottles: 5	Preservative:	ICE	**Enter Number of Bottles Sent to Lab**	5
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 5	Preservative:	ICE And H2SO4	**Enter Number of Bottles Sent to Lab**	5
	W-NH3						
	W-NO2NO3						
	W-S-A-TP						
	W-TKN						
	W-TOC						
Group: A	Bottle Type:	P-125ML	# of Bottles: 5	Preservative:	ICE-FLTR	**Enter Number of Bottles Sent to Lab**	5
	W-PO4-F						

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Florida Department of Environmental Protection
Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: SW-DIST

Project ID: SMP

Requester: Judy Ashton

Collected By: A. Salmeron, S. Clingerman

Field Report Prepared By: A. Salmeron

Sampling Agency: FDEP

Location: Withlacoochee River		☐ Comp ☒ Grab	Collection (comp begin or grab) Date 06/27/2016 Time 1245 (Eastern) Central	Composite end Date Time	Bottle Group(s) (See pg 2): A
Field ID: RQ-2016-06-27-15 Date: 06/27/2016 Time: G4SW0099		Matrix (type, e.g., Salt, Fresh, etc): Fresh	Diss. Oxygen 2.4 ☒ mg/L; 28 ☒ % sat	Total Res. Chlorine (mg/L) (struck through)	
STORET #		Temp (C): 24.0	pH: 4.1	Sample Depth 0.3 ☐ ft ☒ m	Sp. Conductance (umho/cm): 90
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt): 0.04	Comments		

Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date Time Eastern Central	Composite end Date Time	Bottle Group(s)
Field ID		Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen ☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
STORET #		Temp (C)	pH	Sample Depth ☐ ft ☐ m	Sp. Conductance (umho/cm)
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments		

Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date Time Eastern Central	Composite end Date Time	Bottle Group(s)
Field ID		Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen ☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
STORET #		Temp (C)	pH	Sample Depth ☐ ft ☐ m	Sp. Conductance (umho/cm)
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments		

Location		☐ Comp ☐ Grab	Collection (comp begin or grab) Date Time Eastern Central	Composite end Date Time	Bottle Group(s)
Field ID		Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen ☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)	
STORET #		Temp (C)	pH	Sample Depth ☐ ft ☐ m	Sp. Conductance (umho/cm)
Latitude ☐ dd ☐ dms	Longitude ☐ dd ☐ dms	Salinity (ppt)	Comments		

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
A. Salmeron	6/27/16, 1430	FEDEX	2	[signature]	6-28-16 / 10:30

Group: A	Bottle Type:	P-1L	# of Bottles: 5	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** —
	ALKALINITY					
	TURBIDITY					
	W-CL-IC					
	W-COLOR					
	W-F					
	W-SO4-IC					
	W-TDS					
	W-TSS					

Group: A	Bottle Type:	BP-1L	# of Bottles: 5	Preservative:	ICE	**Enter Number of Bottles Sent to Lab** —
	CHLSUITE-W					

Group: A	Bottle Type:	P-500ML	# of Bottles: 5	Preservative:	ICE And H2SO4	**Enter Number of Bottles Sent to Lab** —
	W-NH3					
	W-NO2NO3					
	W-S-A-TP					
	W-TKN					
	W-TOC					

Group: A	Bottle Type:	P-125ML	# of Bottles: 5	Preservative:	ICE-FLTR	**Enter Number of Bottles Sent to Lab** —
	W-PO4-F					

RQ-2016-06-27-15

Date of Request: 06-JUN-2016
Created By: ASHTON_J On: 06-JUN-2016
Modified By: MATTHEWS_D On: 14-JUN-2016
Customer: SW-DIST
Project: SMP
Division:
District: Southwest District
Sampling Event: 1329G, 1758F

Send Coolers To:

Phone: 813-470-5951
FL Dept. of Environmental Protection
13051 N. Telecom Parkway
Temple Terrace, FL 33637-0926
Attn: Matthew Bearden

Send Final Report To:

FL Dept. of Environmental Protection
13051 N. Telecom Parkway
Temple Terrace, FL 33637-0926
Attn: Stephen Clingerman

Program Module Number:
Priority: 3
Event Status: R
Criminal Investigation: NO
Chemistry Request Reviewed By: WATTS_J On: 13-JUN-2016
Biology Request Reviewed By: MATTHEWS_D On: 14-JUN-2016
Sampling Kit Required: YES Ship on: 15-JUN-2016
Sampling Kit Shipped: YES On: 14-JUN-2016
Sampling Kit Packed By: BOWDEN_M
Preservatives Needed: NO
Date to Receive Samples: 27-JUN-2016
Received By: SHAIK_A On: 28-JUN-2016

Report Type: Final Only
FTP Data: NO
QC Report: YES
Date Log: NO
Authorization Log: NO

Comments:

Bottle Group A (Water) With 5 Samples:

Bottle Type: P-1L	Number of Bottles: 5	Preserved With: ICE	
ALKALINITY	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO3/L	
TURBIDITY	Template: DEFAULT	(EPA 180.1 Rev. 2.0) Turbidity in aqueous matrices	
W-CL-IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Chloride in aqueous matrices	
W-COLOR	Template: DEFAULT	(SM 2120 B) True Color measured at 450 nm	
Color (true)			
W-F	Template: DEFAULT	(SM 4500 F-C-97) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)	
W-SO4-IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Sulfate in aqueous matrices	
W-TDS	Template: DEFAULT	(SM 2540 C-97) Total Dissolved Solids in aqueous matrices	
W-TSS	Template: DEFAULT	(SM 2540 D-97) Total Suspended Solids in aqueous matrices	
Bottle Type: BP-1L	Number of Bottles: 5	Preserved With: ICE	
CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, phaeophytin and ratio by spectrophotometry	
Bottle Type: P-500ML	Number of Bottles: 5	Preserved With: ICE And H2SO4	
W-NH3	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L	
W-NO2NO3	Template: DEFAULT	(EPA 353.2 Rev. 2.0) Nitrite/Nitrate in aqueous matrices as mg N/L	
W-S-A-TP	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Total Phosphorus in aqueous matrices as mg P/L	
W-TKN	Template: DEFAULT	(EPA 351.2 Rev. 2.0) Total Kjeldahl Nitrogen in aqueous matrices	
W-TOC	Template: DEFAULT	(SM 5310 B-00) Nonpurgeable Organic Carbon in aqueous matrices	
Bottle Type: P-125ML	Number of Bottles: 5	Preserved With: ICE-FLTR	
W-PO4-F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L	

Log-in Checklist

RQ-2016-06-27-15

Shipping Method: Fed Exp

Date/Time of Receipt: 06-28-16 10:30

Cooler ID	Cooler Temperature*	No. Sample Containers in Cooler	Evidence Tape				Tracking # (fill out only if waybill copy is damaged)
			Present?		*Intact?		
			Yes	No	Yes	No	
Red	1.5°C	8		✓			
BLUE	0.8°C	12		✓			

*If the temperature of a cooler is above 6.0 °C (or above 10.0 °C for W-1-4-DIOX), or if Evidence Seal is damaged, identify the containers in the affected cooler(s) on back of this form.

****Note:** If "No" is checked in any of the fields below, fill out the back of this form with additional details (Field ID, Test IDs, etc.) and generate an **NCR**.

**Chain of Custody/ Field Sheet(s) Included? Yes ✓ No_____

CONTAINER CHECK

****Evidence Tape on Bottles?** Yes_____ No ✓ **If yes, is it intact?** Yes_____ No_____

**Caps on tight? Yes ✓ No_____ **Containers intact? Yes ✓ No_____

**Sufficient Sample Volume: Yes ✓ No_____

CHLORINE CHECK (Blue dot on container)

Check the Box marked "Yes" or "No" for the Presence of Chlorine. If Cl detected, an NCR is required.					
Analysis	Yes	No	Analysis	Yes	No
W-1,4 DIOX			W-PC-AA-SF		
W-AHERB-AA (-AHB-AA-R)			W-PCL-SQ (-R)		
W-BNA (-625, -R)			W-PDQUAT		
W-CARB-AA (-CAB-AA-R)			W-PESTNP-R		
W-ENDO-AA			W-PSCL-TQ		
W-GLYPH			W-PSNP-TQ		
W-NP-AA-SF			W-PST-CL-R		
W-PAH (-R)			W-TR-TQ		
W-PCB-R					

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

**Acid Preserved Samples: pH ≤ 2.0? Yes ✓ No____ NA_____ Init: [illegible]

**W-1-4-DIOX (Green dot on container) preserved to pH < 4.0? Yes____ No____ NA____ Init: _____

Coolers Unpacked/Checked by: [illegible] **Date:** 6-28-16 **NCRs (Y/N)?** _____

Event ID: 13296, 1758F - SW-DIST-2016-06-28-01 (SMP) _____ **NCR #** _____

Date Received: 28-JUN-2016 10:30

Log-in Checklist

Samples with Incorrect pH Preservation or presence of Chlorine

Field ID	Bottle Test ID(s)	pH / Cl	Action Taken

***Samples in Coolers* with Incorrect Preservation or Damaged Evidence Tape**

Cooler ID	Field ID	Bottle Test ID(s)

Bottles Not Intact

Field ID	Bottle Test ID(s)	Loose Cap	Damaged Cap		Damaged Container		Evidence Tape Not Intact
			CK	BR	CK	BR	

Samples with Insufficient Volume for Analyses

Field ID	Bottle Test ID(s)	Action Taken

ENCORE SAMPLES

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

Were Encore samples received? Yes____ No_____

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_____

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: _____

Additional Comments:

01000

FedEx Express **Package US Airbill**

FedEx Tracking Number 8100 1917 4896

Form ID No. 0215

1 From

Date 04/11/2014

Sender's Name TDEP Phone 813 470-5700

Company

Address 13051 N Telecom Pkwy Dept./Floor/Suite/Room

City Temple Terrace State FL ZIP 33637

2 Your Internal Billing Reference

3 To

Recipient's Name SAMPLE RECEIVING Phone 850 245-8085

Company FLORIDA DEP/CHEMISTRY SECTION

Address 2600 BLAIRSTONE RD Dept./Floor/Suite/Room

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City TALLAHASSEE State FL ZIP 32399

Hold Weekday — FedEx location address REQUIRED. NOT available for FedEx First Overnight.

Hold Saturday — FedEx location address REQUIRED. Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.

0123448864

8100 1917 4896

4 Express Package Service * To most locations.

Next Business Day	2 or 3 Business Days
☐ FedEx First Overnight — Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.	☐ FedEx 2Day A.M. — Second business morning.* Saturday Delivery NOT available.
☒ FedEx Priority Overnight — Next business morning.* Friday shipments will be delivered on Monday unless Saturday Delivery is selected.	☐ FedEx 2Day — Second business afternoon.* Thursday s will be delivered on Monday unless Satur Delivery is selected.
☐ FedEx Standard Overnight — Next business afternoon.* Saturday Delivery NOT available.	☐ FedEx Express Saver — Third business day.* Saturday Delivery NOT available.

5 Packaging * Declared value limit $500.

☐ FedEx Envelope* ☐ FedEx Pak* ☐ FedEx Box ☐ FedEx Tube

6 Special Handling and Delivery Signature Options Fees may apply. See th

☐ Saturday Delivery — NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

☐ No Signature Required — Package may be left without obtaining a signature for delivery.

☐ Direct Signature — Someone at recipient's address may sign for delivery.

☐ Indirect Si — If no one is ava address, some address may si residential deli

Does this shipment contain dangerous goods? One box must be checked.

☒ No ☐ Yes — As per attached Shipper's Declaration. ☐ Yes — Shipper's Declaration not required. ☐ Dry Ice — Dry Ice, 9, UN 1845 ____

Restrictions apply for dangerous goods — see the current FedEx Service Guide. ☐ Cargo Aircraf

7 Payment *Bill to:* Enter FedEx Acct. No. or Credit Card No. below.

☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card

[redacted] 62

Total Packages 1 Total Weight 50 lbs. Credit Card Auth.

†Our liability is limited to US$100 unless you declare a higher value. See the current FedEx Service Guide for details.

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fedex.com 1.800.GoFedEx 1.800.463.3339

00472

01000

FedEx Express **Package US Airbill**

FedEx Tracking Number 8100 1917 9020

MVR

Form ID No. 0215

1 From

Date 04/27/2014

Sender's Name TDEP Phone 813 470-5700

Company

Address 13051 N Telecom Pkwy Dept./Floor/Suite/Room

City Temple Terrace State FL ZIP 33637

2 Your Internal Billing Reference

3 To

Recipient's Name SAMPLE RECEIVING Phone 850 245-8085

Company FLORIDA DEP/CHEMISTRY SECTION

Address 2600 BLAIRSTONE RD Dept./Floor/Suite/Room

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Address

Use this line for the HOLD location address or for continuation of your shipping address.

City TALLAHASSEE State FL ZIP 32399

Hold Weekday — FedEx location address REQUIRED. NOT available for FedEx First Overnight.

Hold Saturday — FedEx location address REQUIRED. Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.

0123448864

8100 1917 9020

4 Express Package Service * To most locations.

Next Business Day	2 or 3 Business Days
☐ FedEx First Overnight — Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.	☐ FedEx 2Day A.M. — Second business morning.* Saturday Delivery NOT available.
☒ FedEx Priority Overnight — Next business morning.* Friday shipments will be delivered on Monday unless Saturday Delivery is selected.	☐ FedEx 2Day — Second business afternoon.* Thursday ship will be delivered on Monday unless Saturda Delivery is selected.
☐ FedEx Standard Overnight — Next business afternoon.* Saturday Delivery NOT available.	☐ FedEx Express Saver — Third business day.* Saturday Delivery NOT available.

5 Packaging * Declared value limit $500.

☐ FedEx Envelope* ☐ FedEx Pak* ☐ FedEx Box ☐ FedEx Tube

6 Special Handling and Delivery Signature Options Fees may apply. See the

☐ Saturday Delivery — NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

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☐ Direct Signature — Someone at recipient's address may sign for delivery.

☐ Indirect Sig — If no one is avail address, someor address may sig residential delive

Does this shipment contain dangerous goods? One box must be checked.

☒ No ☐ Yes — As per attached Shipper's Declaration ☐ Yes — Shipper's Declaration not required. ☐ Dry Ice — Dry Ice, 9, UN 1845 ____

Restrictions apply for dangerous goods — see the current FedEx Service Guide ☐ Cargo Aircraft

7 Payment *Bill to:* Enter FedEx Acct. No. or Credit Card No. below.

☐ Sender Acct. No. in Section 1 will be billed. ☒ Recipient ☐ Third Party ☐ Credit Card

[redacted] 62

Total Packages 1 Total Weight 50 lbs. Credit Card Auth

†Our liability is limited to US$100 unless you declare a higher value. See the current FedEx Service Guide for details.

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