

Request Number: RQ-2017-03-20-73

Mizner's Branch

Florida Department of Environmental Protection Central Laboratory Submittal Form

Page 1 of 2

last revised Apr 7, 2016

Customer: CEN-DIST

Requester: Michael Linger

Field Report Prepared By:

Katie Williams

Project ID: SMP

Collected By:

Terry Riordan

Sampling Agency:

21FCEN

Location	Mizner's Branch 50m Upstream of Main Trail Rd.		G5CE0093 Field ID STORET		☐ Comp ☒ Grab		Collection (comp begin or grab) Date 3/23/17 Time 1045		Eastern Central	Composite end Date Time		Bottle Group(s) (See pg 2) A	
Field ID					Matrix (type, e.g., Salt, Fresh, etc) Fresh		Diss. Oxygen 4.2		☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L) n/a			
STORET #	RQ-2017-03-20-73 Date: 03/23/17				Temp (C) 20.4		pH 7.4		Sample Depth 0.3	☐ ft ☒ m	Sp. Conductance (umho/cm) 522		
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt) 0.25	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
				G. J.	3/24/17 10:13

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

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

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

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

Date of Request: 22-MAR-2017
 Created By: LINGER_M On: 22-MAR-2017
 Modified By: WATTS_J On: 23-MAR-2017
 Customer: CEN-DIST
 Project: SMP
 Division:
 District: Central District
 Sampling Event: Mizner's Branch

Send Coolers To:

Phone: 407-897-4180
 FL Dept. of Environmental Protection
 3319 Maguire Blvd., Suite 232
 Orlando, FL 32803-3767
 Attn: Mike Linger

Send Final Report To:

FL Dept. of Environmental Protection
 3319 Maguire Blvd., Suite 232
 Orlando, FL 32803-3767
 Attn: Mike Linger

Program Module Number: 1306
 Priority: 3
 Event Status: A
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 23-MAR-2017
 Biology Request Reviewed By: WATTS_J On: 23-MAR-2017
 Sampling Kit Required: NO Ship on:
 Sampling Kit Shipped:
 Sampling Kit Packed By:
 Preservatives Needed: NO
 Date to Receive Samples: 22-MAR-2017
 Received By:

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

Comments:**Bottle Group A (Water) With 1 Samples:**

Bottle Type: P-1L	Number of Bottles: 1	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: 1	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: 1	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: 1	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- 2017-03-20-73

Shipping Method: Fed Ex

Date/Time of Receipt: 3/24/17 10:13

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	0.3°C	4		✓			

*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			W-CT-CI-R		

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

**Acid Preserved Samples: pH ≤ 2.0? Yes ☒ No ☐ NA ☐ Init: JD

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

Coolers Unpacked/Checked by: JD Date: 3/24/17 NCRs (Y/N)? ☐

Event ID: CEU-DIST-2017-03-24-01 NCR #

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

8111 7111 9017

03284

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06325007

1 From
 Date 3/23/17
 Sender's Name Katie Williams Phone _____
 Company FDEP
 Address 3319 Maguire Blvd Ste 232 Dept./Floor/Suite/Room _____
 City Orlando State FL ZIP 32803

2 Your Internal Billing Reference

3 To
 Recipient's Name _____ 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 32399-6542

0125636852



8111 7111 9017

Form ID No. 0215

Recipient's Copy

4 Express Package Service * To most locations.
Packages up to 150 lbs.
 For packages over 150 lbs., use the
 FedEx Express Freight US Airbill.
Next Business Day
☐ FedEx First Overnight
 Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.

☒ FedEx Priority Overnight
 Next business morning.* Friday shipments will be delivered on Monday unless Saturday Delivery is selected.

☐ FedEx Standard Overnight
 Next business afternoon.* Saturday Delivery NOT available.
2 or 3 Business Days
☐ FedEx 2Day A.M.
 Second business morning.* Saturday Delivery NOT available.

☐ FedEx 2Day
 Second business afternoon.* Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.

☐ FedEx Express Saver
 Third business day.* Saturday Delivery NOT available.
5 Packaging * Declared value limit \$500.
☐ FedEx Envelope* ☐ FedEx Pak* ☐ FedEx Box ☐ FedEx Tube ☒ Other
6 Special Handling and Delivery Signature Options Fees may apply. See the FedEx Service Guide.
☐ 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 Signature
 If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only.
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 _____ x _____ kg

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

☐ Cargo Aircraft Only**7 Payment Bill to:**

Enter FedEx Acct. No. or Credit Card No. below.

Obtain recip. Acct. No. ☐
☐ Sender Acct. No. in Section 1 will be billed.
☒ Recipient☐ Third Party☐ Credit Card☐ Cash/Check

Total Packages

Total Weight

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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