Login Checklist

RQ-2021-02-22-15

Login Station ID: #4

Shipping Method: FedEx | UPS | HD | Greyhound

Date/Time of Receipt: 02/25/2021 @ 10:30

*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	
0.9 C				4 (10) TR		X			9293 8009 4518

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 (X) TR

CONTAINER CHECK

Evidence Tape on Bottles? Yes ____ No ____ NA X

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 TR (✓) No X Init: TyLynn

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

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: TyLynn

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

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

Coolers Unpacked/Checked by: TyLynn **Date:** 02/25/2021 **Event contains NCRs (Y/N)?** None

Event ID: unnamed run 2021
NE-DIST-2021-02-25-01 (SMP)
Date Received: 25-FEB-2021 10:30

Login Checklist

Login Preservation Equipment	Lot # & Exp: Date
Infrared Thermometer ID:	#4 Temp Gun EXP:10/28/2021
pH Test Strips 0 – 6	N/A
pH Paper 0 – 3	N/A
pH Paper 0 – 13	231019 EXP:11/01/2022
Chlorine Test Strips	8261 EXP:07/2021

Additional Comments:

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: _____

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
CHAIN OF CUSTODY FORM

Date: 2/24/2021
Customer: NE-DIST
RQ: RQ-2021-02-22-15

Collected By: Kimberly Appleby, Kelly McDonald
Sampling Agency: FDEP
Project ID: SMP

PLEASE RETURN THE ORIGINAL OF THIS FORM WITH SAMPLE SUBMITTAL FORMS AND THE COOLER PACKING WORKSHEET TO THE LAB

Number of Coolers Shipped: 1

FIELD ID (Labels) submitted under this RQ for this collection date.

Site Location	Field ID/WIN ID
Unnamed Drain South Entrance	G5NE0591

RELINQUISHED BY(SIGNATURE): Kelly A McDonald **DATE/TIME:** 2/24/2021 1600

THIS SECTION TO BE COMPLETED BY LABORATORY

Rec'd/Inspected By: Tyler R. **Rec'd/Inspected Date:** 02/25/2021

CALIBRATION AND VERIFICATION LOG (FDEP SOP FT 1000-FT 1500, FD 1000-FD 4000)

Boldly "x" this box if there are qualified data on this page.

Meter ID: SI Multi RQ- 2021-07-22 15 Project: Unnamed Run

Notes: (1) Always wait for meter to stabilize before recording any readings.
(2) Report all digits displayed. Do not round before reporting measurements. (See special instructions for depth).
(3) For Calibrations, record calibrated meter reading. Do not record initial meter reading before calibration.

Temperature (Quarterly) FT 1400 Date of Last Temperature Verification 2/15/21

DO DEP SOP FT 1500	Name	Date	Time CT-ET	Temp °C	Baro-meter mmHg	D.O. Chart mg/L	Meter D.O. mg/L	% DO	Probe Charge	Probe Gain	Pass / Fail	Lab / Field
Calibr.	Kim Appleby	2/24/21	747	20.2	766.4	9.1	-	100.9	-	-63.5	(P) F	(L) F
ICV	↓	↓	748	20.2	766.5	9.1	9.14	100.9	-	-68.4	(P) / F	(L) F
CCV	↓	↓	1355	20.9	761.4		8.93	99.9	-	-73.4	(P) F	(L) / F
CCV											P / F	L / F

DO Acceptance criteria from Table ± 0.3 mg/L. **Rapid-Pulse Sensors:** DO Gain Range 0.7 to 1.4; DO Charge Range 25-75.
Optical: DO gain range 0.85 to 1.15 (Pro DSS 0.75 to 1.50); DO charge N/A. **Steady-state & Galvanic Sensors:** DO Gain & Charge N/A.

Spec. Cond. FT 1200	Name	Date	Time CT-ET	Lot #	Expir. Date	Standard µmhos/cm	Meter Reading µmhos/cm	Pass / Fail	Lab / Field
Calibr.	Kim Appleby	2/24/21	752	20,222B	1/2022	1000	1000	(P) / F	(L) F
ICV	↓	↓	753	2012226	1/2022	50,000	49767	(P) F	(L) F
CCV	↓	↓	1358	200407B	4/2021	70,000	19628	(P) F	(L) F
CCV								P / F	L / F

Conductivity Acceptance criteria ± 5%

pH DEP SOP FT 1100	Name	Date	Time CT-ET	Lot #	Expir. Date	pH Buffer SU	Temp °C	Meter reading SU	mV	Pass / Fail	Lab / Field
Calibr.	Kim Appleby	2/24/21	755	200FS2	6/2022	7.00	21.8	7.00	-16.2	(P) F	(L) / F
Calibr.	↓	↓	757	2912871	12/2021	4.00	21.7	4.00	159.9	(P) F	(L) F
Calibr.	↓	↓	759	200E27	12/2021	10.00	21.5	10.00	-184.2	(P) F	(L) F
ICV	↓	↓	800	200FS2	6/2022	7.00	21.9	7.03	-15.7	(P) / F	(L) / F
CCV	↓	↓	1359	200E25	12/21	10.00	22.2	10.01	-190.1	(P) / F	(L) / F
CCV										P / F	L / F

pH Acceptance criteria ± 0.2 SU; mV pH 7 Range 0 ± 50; mV pH 4 Range +180 ± 50; mV pH 10 Range -180 ± 50;
If mV are recorded: slope from 7 to 10 _____, slope from 4 to 7 _____ (both must be between 165 and 180 mV)

Does meter have a depth sensor that will be used to measure total depth & sample depth? (YES) NO / NA (not surf. water project)
If YES, complete daily Calibr. & ICV below and list date of last quarterly depth verification: 2/15/21
If NO, what will be used? (circle one) Secchi Disk Line / Sonar Unique ID: _____; Date of last verification: _____

Depth Sensor (Daily Calibration & ICV)	Name	Date	Time CT-ET	Calibrated Value (0.00 or Offset), meters	ICV Value, meters	Pass / Fail	Lab / Field
Pressure mode in air	Kim Appleby	2/24/21	802	0.00	0.00	(P) F	(L) / F

Report two decimal places. Round numbers ≤ 4 down, ≥ 5 up. ICV acceptance criteria ± 5 % or ± 0.05m, whichever is greater.

COMMENTS:

Form effective August 1, 2018

RQ-2021-02-22-15
Customer: WQAP
Project ID: SMP

Collected By: Kimberly Applebee, Kelly McDonald
Field Report Prepared By: Kimberly Applebee
Sampling Agency: FDEP

Place Label Here

WIN ID/Field ID: G5NE0591

Location: Unnamed Drain South Entrance

Comments: Microbiology sample(s) submitted to contract laboratory

Matrix: Marine

(Check one) ☒ GRAB ☐ COMPOSITE

Date	Time	DO (mg/L)	DO (%SAT)	Temp. (C⁰)	pH	Sample Depth (m)	Secchi Disk (m)	Total Depth (m)	Sp COND (µmhos/cm)	Salinity (PPTh)
2/24/2021	1105 EST	7.3	88.4	17.6	7.74	0.3	0.85 ☐ VOB (S)	0.9	38234	24.21
							Central Lab please use top row for login purposes			
	EST									

Parameter Suite	Parameter Methods			Preservation	pH Check	# Bottles sent to Lab	Bottle Group
Preserved Nutrients (P-500ML)	☒ W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP			☒ Ice ☒ H_2SO_4*	☒ <2	1	A
	Lot # SA0293040		**Exp:**	10/19/21			
Metals (P-500ML)	☐ W-ICPMS ☐ W-ICP ☐ W-HARD			☐ Ice ☐ HNO_3*	☐ <2		
	Lot #		**Exp:**				
Filtered Nutrients (P125ML)	☒ W-PO4-F ☒ Field Filtered 0.45 µm Filter			☒ Ice		1	A
	Filter Lot # R0CB48647						
	Syringe Lot #						
Chlorophyll (BP-1L)	☒ CHLSUITE-W			☒ Ice		1	A
Physical/Aggregate (Fresh) (P-1L)	☐ Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-IC / W-COLOR / TDS / W-SO4-IC / W-			☐ Ice			
Physical/Aggregate (Marine) (P-1L)	☒ Alkalinity / W-BR-IC / W-F / W-TSS / TURBIDITY			☒ Ice		1	A
Macroinvertebrates (PJ-2L)	☐ MI-FW-QLDC			☐ Formalin			
Periphyton (PT-50ML)	☐ ALGAE-ID			☐ Ice			
Microbiology (Contract Lab Bottle)	☐ E Coli ☒ F Coli ☒ Enterococci ☒ Contract Lab			☒ Ice		2	A
Molecular (QPCR-P-500ML)	☐ PCR-HF183 ☐ PCR-BacR ☐ PCR-DG3 ☐ PCR-GULL2 ☐ PCR-GFD ☐			☐ Ice			
Tracers (BG-500ML)	☐ W-E8321-DI ☐ W-E8321-MS			☐ Ice			
Pesticides (BG-500ML) (BG-1L)	☐ W-E8321-DI ☐ WE8321-MS ☐ W-PSNP-TQ ☐ W-CT-CL-R ☐ W-PCL-SQ-R ☐ W-CARB-AA (5 ml of MCAA** Buffer Solution) ☐ W-DIELDRIN			☐ Ice			
Phytoplankton/Periphyton	☐ DTM-QL-C ☐ PEN-QL-C ☐ DTY-QN-C ☐ PKD-QN-C ☐ DTM-QN-C ☐ PRN-QN-C ☐ PKD-QN-BV			☐ Ice			

Name: Kimberly Applebee, Kelly McDonald

Signature: Kelly A McDonald

Date: 2/24/2021

*2.0 ml of Preservative used unless noted otherwise.
**MCAA: Monochloroacetic acid buffer solution

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2020

Meter Passed End of Day CCV
(Yes) / No

WIN Station Name: Unnamed Drain South Entrance **Date:** 2/24/2021

WIN/Field ID: G5NE0591 **WBID:** 2573 **ENR:** _____ **Latitude:** 29.69583

County: ST. JOHNS **Org ID:** 21FLA **Longitude:** -81.23358

Receiving Body of Water: Upper East Coast **RQ-** 2021-02-22-15

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
[x] Kimberly Applebee	x		x		
[x] Kelly McDonald		x		x	x
[ ]					
[ ]					

Sampling Equipment

- [x] Sample Container
- [ ] Dipper
- [ ] Syringe
- [ ] Carboy
- [ ] Van Dorn
- [ ] Pole

Depth measured with: Meter
Secchi Equipment ID:

Collection Method

- [ ] Wading
- [ ] From Shore
- [ ] Other _____
- [ ] Canoe/Kayak
- [ ] Electric Motor
- [x] Gasoline Motor

Water Level: [X] Normal [ ] Low [ ] High [ ] Dry [ ] Pooled [ ] Flooded

Meter ID# STITCH

Photos: YES **Flow:** FLOW **Tide:** FALLING **Tide Times:** High: 600 Low:

Biological Samples Collected: [X] None [ ] HA [ ] SCI [ ] RPS [ ] Algae ID [ ] LVS [ ] LVI Other:

SBIO ID Numbers:

Notes:

Duplicate Sample

Time Zone: EST **Time:** _____ **Field ID:** N/A (WIN ID_DUP)

WIN DMT Activity ID: _____

Blank

Time Zone: _____ **Time:** _____ **Field ID:** _____ (Blank Type_DDMMYYYY)

DI Source: _____ **Location:** _____

DI Type: _____ **Equipment ID:** _____

DI Container (Name/ID): **DI Container Type:**

LIMS EVENT ID: _____ **WIN Import ID:** _____

Enter Field Parameters, Verify Station ID In LIMS DMT: _____ (Initials/Date) **QC Station ID, Field Parameters In LIMS DMT:** _____ (Initials/Date)

Scan/Save Field Sheets _____ (Initials/Date) **Migrate Data to WIN:** _____ (Initials/Date) **Verify Data In WIN:** _____ (Initials/Date)

CHAIN OF CUSTODY / LABORATORY ANALYSIS REQUEST FORM

SR #

ALS Contact: Mandy Sullivan

ALS Environmental

9143 Philips Highway, Suite 200 Jacksonville, FL 32256 / Ph(904) 739-2277 / FAX (904) 739-2011

Page 1 of 1

Client Name	Project Number
FDEP-NE ROC	RQ-2021-02-22-15
Report To	Report CC
Dep-Overflowmicro@dep.state.fl.us	
Company/Address	
8800 Baymeadows Way W	
Jacksonville, Fl 32256	
Phone #	FAX #
904-256-1700	
Sampler's Signature	Sampler's Printed Name
Kelly A McDonald	Kelly A McDonald

ANALYSIS REQUESTED (Include Method Number and Container Preservative)

CLIENT SAMPLE ID	LAB ID	SAMPLING DATE	SAMPLING TIME	Matrix	NUMBER OF CONTAINERS	E Coli	Enterococci	Fecal	REMARKS
G5NED591		2/24	1105	SW	2		X	X	Salt

Preservative Key: 0. None; 1. HCL; 2. HNO3; 3. H2SO4; 4. NaOH; 5. Zn Acetate; 6. MeOH; 7. NaHSO4; 8. ICE

Special Instructions/Comments: Email Report to: Dep-Overflowmicro@dep.state.fl.us

0.3

TURNAROUND REQUIREMENTS

___ RUSH (SURCHARGES APPLY)

X STANDARD

REQUESTED FAX DATE: N/A

REQUESTED REPORT DATE: N/A

REPORT REQUIREMENTS

I. Results Only

II. Results + QC Summaries (LCS, DUP, MS/MSD as required)

III. Results + QC and Calibration Summaries

IV. Data Validation Report with Raw Data

Edata ___ Yes ___ No

INVOICE INFORMATION

P.O. # 84838

Bill to:

Relinquished By	Received By	Relinquished By	Received By	Relinquished By	Received By
Signature: Kelly A McDonald	Signature: Cheryl	Signature:	Signature:	Signature:	Signature:
Printed Name: Kelly A McDonald	Printed Name: Cheryl Weygand	Printed Name:	Printed Name:	Printed Name:	Printed Name:
Firm: EDEP NE ROC	Firm: ALS	Firm:	Firm:	Firm:	Firm:
Date/Time: 2/24/21 1327	Date/Time: 2/24/21 1327	Date/Time:	Date/Time:	Date/Time:	Date/Time:

RQ-2021-02-22-15

Date of Request: 27-JAN-2021
Created By: PARRISH_J On: 27-JAN-2021
Modified By: JASROTIA_P On: 28-JAN-2021
Customer: NE-DIST
Project: SMP
Division: Division of Environmental Assessment and Restoration
District: Northeast District
Event Description: unnamed run 2021

Send Coolers To:

Phone: 904-256-1693
8800 Baymeadows Way West
Suite 100
Jacksonville, FL 32256
Attn: Jeremy Parrish
Cooler Ship EMail: Jeremy.M.Parrish@dep.state.fl.us

Priority: 3
Event Status: A
Criminal Investigation: NO
Chemistry Request Reviewed By: WATTS_J On: 28-JAN-2021
Biology Request Reviewed By: JASROTIA_P On: 28-JAN-2021
Sampling Kit Required: NO Ship on:
Sampling Kit Shipped:
Sampling Kit Packed By:
Preservatives Needed: NO
Date to Receive Samples: 22-FEB-2021
Logged In By:

Send Final Report To:

8800 Baymeadows Way West
Suite 100
Jacksonville, FL 32256
Attn: Jeremy Parrish
Report Notification EMail: Jeremy.M.Parrish@dep.state.fl.us

Comments: Group A: (Surf.-Salt) Nutrients, Bacteria

NE-ALS-ENQ
NE-ALS-FC

Packing Notes:

Bottle Group A (Water) With 1 Samples:

Bottle Type: P-1L Number of Bottles: 1 Preserved With: ICE

ALKALINITY	Template: DEFAULT	(SM 2320 B-2011) Alkalinity in aqueous matrices as mg CaCO3/L
TURBIDITY	Template: DEFAULT	(EPA 180.1 Rev. 2.0) Turbidity in aqueous matrices
W-BR-IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Bromide in aqueous matrices
W-F	Template: DEFAULT	(SM 4500 F-C-2011) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)
W-TSS	Template: DEFAULT	(SM 2540 D-2011) Total Suspended Solids in aqueous matrices using a maximum of 250 mL of sample

Bottle Type: BP-1L Number of Bottles: 1 Preserved With: ICE

CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry

Bottle Type: P-250ML-WI-THI Number of Bottles: 1 Preserved With: ICE

NE-ALS-ENQ	Template: DEFAULT	(ASTM D650399) Enterococci by Enterolert/QT by ALS in Jacksonville

Bottle Type: P-250ML-WI-THI Number of Bottles: 1 Preserved With: ICE

NE-ALS-FC	Template: DEFAULT	(SM 9222 D) Fecal coliforms by MF by ALS in Jacksonville

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-2011) Nonpurgeable Organic Carbon in aqueous matrices

Bottle Type: P-125ML Number of Bottles: 1 Preserved With: FILTER-ICE

W-PO4-F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L