

Login Checklist

RQ- **2021 - 10 - 25 - 63**

Login Station ID: **# 3**

Shipping Method: **FedEx** | UPS | HD | Greyhound

Date/Time of Receipt: **11/23/2021 / 09:48**

*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	
2.1c				1		X			5225 5541 5193

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 **X** No _____

Micro-Biology Overflow Chain of Custody/ Field Sheet(s) Included?

Yes _____ No **X**

CONTAINER CHECK

Evidence Tape on Bottles?

Yes _____ No _____ NA **X**

Evidence Tape intact? Yes _____ No _____

If Criminal, photographs taken?

Yes _____ No _____

Containers intact? Yes **X** No _____

Caps on tight?

Yes **X** No _____

Sufficient Sample Volume:

Yes **X** 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 **X** Init: **ABS/**

Chlorine detected? (One container checked per Field ID)

Yes _____ No _____ Init: **ABS/**

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 **X** No _____ NA **N** Init: **ABS/**

**W-1-4-DIOX (Green dot on container) preserved to pH<4.0?

Yes _____ No _____ NA **X** Init: **ABS**

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

Coolers Unpacked/Checked by: **ABS/**

Date: **11/23/2021** Event contains NCRs (Y/N)? **n**

Event ID:

NE - DIST - 2021 - 11 - 23 - 0

Login Checklist

Login Preservation Equipment

Lot # & Exp: Date

Additional Comments:

Infrared Thermometer ID:	IRTG # 3 EXP:10/19/2022
pH Test Strips 0 – 6	LOT # 223819AV EXP:08/30/2023
pH Paper 0 – 3	N/A
pH Paper 0 – 13	LOT 207621 EXP:03/15/2024
Chlorine Test Strips	0261 2023/05

ENCORE SAMPLES

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

Were Encore samples received? Yes _____ Init: ABS

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: 11/22/2021
Customer: NE-DIST
RQ: RQ-2021-10-25-63
Collected By: Jeremy Parrish, Brian Davis
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

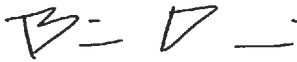
Number of Coolers Shipped: 1

Delivery Method: FedEx

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

Site Location	Field ID/WIN ID
PELLICER CR AT US 1	 27010016

RELINQUISHED BY(SIGNATURE):



DATE/TIME: 11/22/2021
1600EST

THIS SECTION TO BE COMPLETED BY LABORATORY

Rec'd/Inspected By: **A.SHAIK**

Rec'd/Inspected Date: **11/23/2021**

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

Meter ID: YSI 5700

RQ: 2021-10-25-03

Project: Pellier Boat

Holdly "X" this box if there are qualified data on this page.

- 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 11/10/21

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.	J. Pansh	11/22/21	805	22.3	761	8.7	8.7	100.1	-	1.019	P/F	L/F
ICV	J	11/22/21	806	22.3	761	8.7	8.72	100.2	-	1.019	P/F	L/F
CCV	J. Pansh	11/22/21	1405	22.5	758	8.6	8.63	99.6	-	-	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 μ mhos/cm	Meter Reading μ mhos/cm	Pass / Fail	Lab / Field
Calibr.	J. Pansh	11/22/21	807	2109173	9/22	1000	1000	P/F	L/F
ICV	J. Pansh	11/22/21	910	2104264	5/22	100	98.5	P/F	L/F
CCV	J. Pansh	11/22/21	1407	2104173	9/22	1000	996	P/F	L/F
CCV								P/F	L/F

Conductivity Acceptance criteria $\pm 5\%$

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.	J. Pansh	11/22/21	815	2109173	9/23	7.	22.8	7.01	-37	P/F	L/F
Calibr.	J		816	2107640	5/23	4.	22.9	4.00	143	P/F	L/F
Calibr.	J		817	2012608	6/22	10.	22.8	10.03	-204.5	P/F	L/F
ICV	J		818	2107640	7/23	4.	22.8	9.96	-203	P/F	L/F
CCV	J. Pansh	11/22/21	1408	2012608	6/22	10.	22.3	10.16	-215	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 $+180 \pm 50$;

mV pH 10 Range -180 ± 50 ;

If mV are recorded: slope from 7 to 10 167.5, slope from 4 to 7 180 (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: 11/10/21

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	J. Pansh	11/22/21	819	0.00	0.00	P/F	L/F

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

COMMENTS:



**MCAA; Monochloroacetic acid buffer solution



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION STRATEGIC MONITORING PLAN FIELD SHEET

January 2020

Meter Passed End
of Day CCV
Yes / No

WIN Station Name: PELLICER CR AT US 1

Date: 11/22/2021

WIN/Field ID: 27010016

WBID: 2580B

ENR: ENRT4

Latitude: 29.6513

County: FLAGLER

Org ID: 21FLA

Longitude: -81.29

Receiving Body of Water: Upper East Coast

RQ- 2021-10-25-63

Sampling Team Members		WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
☒	Jeremy Parrish	x	x		x	x
☒	Brian Davis			x		
☐						
☐						

Sampling Equipment	
☒ Sample Container	☐ Carboy
☐ Dipper	☐ Van Dorn
☐ Syringe	☐ Pole
Depth measured with: Meter	
Secchi Equipment ID:	
Collection Method	
☐ Wading	☐ Canoe/Kayak
☐ From Shore	☐ Electric Motor
☐ Other	☒ Gasoline Motor

Water Level: ☒ Normal ☐ Low ☐ High ☐ Dry ☐ Pooled ☐ Flooded		Meter ID# STITCH	
Photos: No	Flow: NA	Tide: N/A	Tide Times: High: Low:
Biological Samples Collected: ☒ 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 BD 11/22/2021 (Initials/Date) Migrate Data to WIN: (Initials/Date) Verify Data In WIN: (Initials/Date)

Date of Request: 13-OCT-2021
Created By: PARRISH_J On: 13-OCT-2021
Modified By: JASROTIA_P On: 14-OCT-2021
Customer: NE-DIST
Project: SMP
Division: Division of Environmental Assessment and Restoration
District: Northeast District
Event Description: Pellicer Creek deploy

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: R
Criminal Investigation: NO
Chemistry Request Reviewed By:
Biology Request Reviewed By: JASROTIA_P On: 14-OCT-2021
Sampling Kit Required: NO Ship on:
Sampling Kit Shipped:
Sampling Kit Packed By:
Preservatives Needed: NO
Date to Receive Samples: 25-OCT-2021
Logged In By: SHAIK_A On: 23-NOV-2021

Send Final Report To:

8800 Baymeadows Way West
Suite 100
Jacksonville, FL 32256
Attn: Jeremy Parrish
Report Notification EMail: Jeremy.M.Parrish@floridadep.gov

Comments: Group A:(Surf.Salt)Bacteria

Packing Notes:**Bottle Group A (Water) With 1 Samples:**

Bottle Type: P-250ML-WO-THI	Number of Bottles: 1	Preserved With: ICE
ENT-24-QT	Template: DEFAULT	(Enterolert/QT) Enterococci by Enterolert Quanti-Tray method - non-chlorinated water systems
Bottle Type: P-250ML-WO-THI	Number of Bottles: 1	Preserved With: ICE
FCOLI-MF	Template: DEFAULT	(SM 9222 D) Fecal coliforms by membrane filter method - non-chlorinated water systems

