Login Checklist

RQ- 2021 - 12 - 13 - 56 Login Station ID: # 3

Shipping Method: FedEx | UPS | HD | Greyhound Date/Time of Receipt: 12/17/2021 / 14:40

*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	
3.9C				1		X			5225 5542 1340

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-")* ABS

**Acid Preserved Samples: pH< 2.0? Yes ~~X~~ No_____ NA X 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:** 12/17/2021 **Event contains NCRs (Y/N)?** N

Event ID: NE-DIST-2021-12-17-0 2

Login Checklist

Login Preservation Equipment	Lot # & Exp: Date
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

Additional Comments:

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:	12/16/2021	**Collected By:**	Kimberly Appleby, Katrin Villinger
Customer:	NE-DIST	**Sampling Agency:**	FDEP
RQ:	RQ-2021-12-13-56	**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
Cradle creek 0.6 mi upstream	G2NE1215

RELINQUISHED BY(SIGNATURE):

DATE/TIME: 12/16/2021 1600EST

THIS SECTION TO BE COMPLETED BY LABORATORY

Rec'd/Inspected By: A.SHAII **Rec'd/Inspected Date:** 12/17/2021

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: DESI RQ- 2021-12-13-56 Project: SMP Cradle Creek

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.	Katrin Villinger	12/16/21	725	20.3	766.6	9.1	—	100.9	—	1.0658	(P) F	(L) F
ICV	↓	↓	728	20.1	766.6	9.2	9.16	100.9	—	1.0658	(P) F	(L) F
CCV	↓	↓	1215	22.4	766.0	8.7	8.75	101.1	—	1.0658	(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.	Katrin Villinger	12/16/21	735	2109178	9/22	1000	1000	(P) F	(L) F
ICV	↓	↓	738	2109178	9/22	50,000	50087	(P) F	(L) F
CCV	↓	↓	1221	211122A	12/22	15000	15013	(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.	Katrin Villinger	12/16/21	741	2109M25	9/23	7.02	20.2	7.02	-26.1	(P) F	(L) F
Calibr.	↓	↓	744	2108F51	8/23	4.00	20.4	4.00	152.7	(P) F	(L) F
Calibr.	↓	↓	748	2012E08	6/22	10.00	19.4	10.06	-195.1	(P) F	(L) F
ICV	↓	↓	751	2109M25	9/23	7.02	20.2	7.07	-25.4	(P) F	(L) F
CCV	↓	↓	1217	2108H37	2/23	10.04	20.6	10.07	-198.2	(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 10 169, slope from 4 to 7 178.8 (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	Katrin Villinger	12/16/21	752	0.000	0000	(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:

RQ-2021-12-13-56
Customer: WQAP
Project ID: SMP

Collected By: Kimberly Appleby, Katrin Villinger
Field Report Prepared By: Kimberly Appleby
Sampling Agency: FDEP

Place Label Here

WIN ID/Field ID: G2NE1215

Location: Cradle creek 0.6 mi upstream

Comments:

Matrix: Marine

(Check one) ☒ GRAB ☐ COMPOSITE

Date	Time	DO (mg/L)	DO (%SAT)	Temp. (C°)	pH	Sample Depth (m)	Secchi Disk (m)	Total Depth (m)	Sp COND (µmhos/cm)	Salinity (PPTh)
12/16/2021	940 EST	6.17	76.2	19.5	7.41	0.3	1.2 ☐ VOB (S)	2.847	33271	20.88
	943 EST	6.23	76.7	19.5	7.43	2.326			33380	20.96

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 **Lot #** **Exp:**	☐ Ice ☐ $H2SO_4$*	☐ <2		
Metals (P-500ML)	☐ W-ICPMS ☐ W-ICP ☐ W-HARD **Lot #** **Exp:**	☐ Ice ☐ HNO_3*	☐ <2		
Filtered Nutrients (P125ML)	☐ W-PO4-F ☐ Field Filtered 0.45 µm Filter **Filter Lot #** **Syringe Lot #**	☐ Ice			
Chlorophyll (BP-1L)	☐ CHLSUITE-W	☐ Ice			
Physical/Aggregate (Fresh) (P-1L)	☐ Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-IC / W-COLOR / W-SO4-IC / W-TDS	☐ Ice			
Physical/Aggregate (Marine) (P-1L)	☐ Alkalinity / W-BR-IC / W-F / W-TSS / TURBIDITY	☐ Ice			
Macroinvertebrates (PJ-2L)	☐ MI-FW-QLDC **Formalin Lot #**	☐ Formalin			
Periphyton (PT-50ML)	☐ ALGAE-ID	☐ Ice			
Microbiology (Contract Lab Bottle)	☐ E Coli ☐ F Coli ☒ Enterococci ☐ Contract Lab	☒ Ice		1	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-TQ-R / W-CARB-AA (5 ml of MCAA** Buffer Solution)	☐ Ice			
Phytoplankton/Periphyton	DTY-QN-C / PKD-QN-BV	☐ Ice			

Name:
Kimberly Appleby
Katrin Villinger

Signature: Katrin E. Villinger

Date: 12/16/2021

*2.0 ml of Preservative used unless noted otherwise.
**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: Cradle creek 0.6 mi upstream **Date:** 12/16/2021

WIN/Field ID: G2NE1215 **WBID:** 2205C **ENR:** - **Latitude:** 30.2723

County: DUVAL **Org ID:** 21FLA **Longitude:** -81.41

Receiving Body of Water: Lower St. Johns **RQ-** 2021-12-13-56

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
[x] Kimberly Appleby	x		x		
[x] Katrin Villinger		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# DESI

Photos: NO **Flow:** FLOW **Tide:** FALLING **Tide Times:** High: Low:

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

SBIO ID Numbers:

Notes:

PLANT DEBRIS AND PARTICULATE MATTER SEEN ON SURFACE AND IN WATER COLUMN. WEATHER: SUNNY.

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 KV 12/16/2021 (Initials/Date) **Migrate Data to WIN:** (Initials/Date) **Verify Data In WIN:** (Initials/Date)

RQ-2021-12-13-56

Date of Request: 10-DEC-2021
Created By: PARRISH_J On: 10-DEC-2021
Modified By: JASROTIA_P On: 16-DEC-2021
Customer: NE-DIST
Project: SMP
Division: Division of Environmental Assessment and Restoration
District: Northeast District
Event Description: ICW Boat makeup

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: 16-DEC-2021
Sampling Kit Required: NO Ship on:
Sampling Kit Shipped:
Sampling Kit Packed By:
Preservatives Needed: NO
Date to Receive Samples: 13-DEC-2021
Logged In By: SHAIK_A On: 17-DEC-2021

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) 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