



1602 Clare Avenue
 West Palm Beach, FL 33401
 t: 561.833.4200 | info@evergladeslabs.com

Lucas Schaffer
Northern Palm Beach County Improvement District
359 Hiatt Drive
Palm Beach Gardens FL 33418

The accompanying report provides the analytical results for the samples listed below. This report is created directly from our database system. The format is designed to comply with the reporting requirements of Chapter 62-160 Florida Administrative Code. The reported data is divided into several sections. Information about each sample is separated by bold lines. In this grouping, sample information appears first which includes the sample number, date and time of collection and receipt in the laboratory, sample collector, sample identifiers and the receipt condition. Each analyte is listed below the appropriate header, starting with METHOD. The Method number, analyte name, results, date (and time) of extraction and analysis, analyst initials, MDL, PQL, batch number, CAS number, duplicate analysis if available, bottle number and field preservation information are listed. Quality assurance information is below the analysis information. Where no data is available, zero is used as a placeholder. Headers describing the information being reported only appear if data is available. Matrix spike and matrix spike duplicate information appears on the left, LCS (Laboratory Control Sample) information appears on the right. The lower space of this section is provided for comments. This line ends with the laboratory ID number for that particular analyte. Reports from other laboratories that provided some of the testing for this report are transmitted as part of this report, but results are not necessarily entered into our data system. Invoices and reports list the total number of pages and the page numbers of official Everglades Laboratories, Inc. documents only. Reports may be printed in duplex mode. Field data may be printed as a separate report document

SAMPLE:	DATE/TIME COLLECTED	CONDITION	MATRIX
191261 Lake S/S Juno Isles Blvd.	03/09/21 1100	2.0°C Wet Ice	SW

LAB ID E86048
 05-Apr-21
 191261 187633 1036 17385
 FORM DATE 1-17-17



**SAMPLE INSTRUCTIONS
 AND CHAIN OF
 CUSTODY FORM**

 Invoice: 17385
 Sample No: **191261**

575

3/9/2021

 1602 Clare Avenue
 West Palm Beach, FL 33401
 t: 561.833.4200 | info@evergladeslabs.com
 1036
 187633

 Northern Palm Beach County Improvement District
 359 Hiatt Drive
 Palm Beach Gardens FL 33418
 P: 561 624 7830 F: 561 624 7839

SCHEDULED:

FREQUENCY: MONTHLY

 PROJECT: SURFACE WATER SAMPLE
 Lake; S/S Juno Isles Blvd., North Palm Beach, FL 33408
PWSID:

Lake S/S Juno Isles Blvd.

COMPOSITE SET UP DATE TIME

*Field measurements made with HH01 FOR pH, TEMP, DO AND COND - 170112567032;. pH ALSO WITH OA02

	BDESC	AN METHOD	ANALYTE
<i>Pace</i>	5 Plastic 250ml + HNO3	5419 EPA 200.7	Sodium
	16 Plastic 250ml	5457 EPA 300.0	Chloride

DO	TEMP	SLOPE	READS	TABLE	TIME	pH 7.00	SET	READS	TIME
COND	SET	VALUE	READS	TIME		pH 4.01	SET	READS	TIME
COND	SET	VALUE	READS	TIME		pH ICV	SET	READS	TIME
COND	SET	VALUE	READS	TIME		pH CCV	SET	READS	TIME
DO mg/L	T °C	SC μS/cm	pH	T or F	Cl2 mg/L	WL Ft	DEPTH Ft		

 SAMPLE COLLECTED BY: [Signature] DATE: 3-9-21 TIME: 11:00
Bottle Temp °C 20 Wet Ice
 SAMPLE RELINQUISHED BY: [Signature] DATE: 3-9-21 TIME: 13:45

 SAMPLE RECEIVED BY: [Signature] DATE: 3-9-21 TIME: 13:45

 SAMPLE RELINQUISHED BY: [Signature] DATE: 3-9-21 TIME: 13:45

 SAMPLE RECEIVED BY: [Signature] DATE: 3-9-21 TIME: 13:45

 Acid preserved sample verification: record pH H2SO4: HNO3: NaOH: HCL:



Sample Condition Report (SCR)



Client: Northern Palm Beach County Improvement District

Invoice No

17385
3/9

Samples Delivered B RS

Samples Received By Pm3

Date Form Complete

Check all applicable fields:

PWSID

Sample appearance OK
Chain of Custody Document
Containers Intact
Sample Labels Match COC
Sample Preservative Verification

YES /	NO
YES /	NO
YES /	NO
YES /	NO
YES /	NO

Containers conform to samples	YES /	NO	
Chlorine residual Present	YES	NO /	
Sample underfilled	YES	NO /	
Ice or Ice Packs Present	YES /	NO	
Packing Material	None /	Bubble Wrap	Paper
Sample within Hold Time	YES /	NO	
VOC Vials without bubbles	YES	NO	
Analyses Subbed? Lab <u>MA</u>	YES /	NO	

Fluke IR Thermometer FL01 Used to Measure Representative Bottle. FL TID4 20°C Wet Ice Blue Ice No ice

Project No 187633

Sample No.	Date/Time Collected	Date/Time Received	Sampled By	Sample Matrix	No. of Container
191261	3/9/2021 1100	3/9/2021 1345	RG	SW	<u>2</u>

Lake S/S
Juno Isles
Blvd.

CID:

--	--	--	--	--	--	--	--	--	--	--	--	--

Bottle Desc:

<u>5</u>	<u>16</u>											
----------	-----------	--	--	--	--	--	--	--	--	--	--	--



Analysis Assignment Report (AAR)



1036

Northern Palm Beach County Improvement Distr

359 Hiatt Drive

Palm Beach Gardens

FL 33418

Sample Number **191261**

Date Collected 3/9/2021

Date Received 3/9/2021

Sample ID Lake S/S Juno Isles Blvd.

Time Collected 1100

Time Received 1345

ANALYTE

Chloride

Sodium

METHOD

EPA 300.0

EPA 200.7

LABID

E83079

E83079

LAB_NAME

Pace Analytical Services LLC

Pace Analytical Services LLC



March 17, 2021

Ph.D Ben Martin
Everglades Laboratories, Inc.
1602 Clare Avenue
West Palm Beach, FL 33401

RE: Project: 17385
Pace Project No.: 35617644

Dear Ph.D Martin:

Enclosed are the analytical results for sample(s) received by the laboratory on March 09, 2021. The results relate only to the samples included in this report. Results reported herein conform to the applicable TNI/NELAC Standards and the laboratory's Quality Manual, where applicable, unless otherwise noted in the body of the report.

The test results provided in this final report were generated by each of the following laboratories within the Pace Network:
• Pace Analytical Services - Ormond Beach

If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Martha Montero
martha.montero@pacelabs.com
(386)672-5668
Project Manager

Enclosures



REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

CERTIFICATIONS

Project: 17385
Pace Project No.: 35617644

Pace Analytical Services Ormond Beach

8 East Tower Circle, Ormond Beach, FL 32174

Alaska DEC- CS/UST/LUST

Alabama Certification #: 41320

Arizona Certification# AZ0819

Colorado Certification: FL NELAC Reciprocity

Connecticut Certification #: PH-0216

Delaware Certification: FL NELAC Reciprocity

Florida Certification #: E83079

Georgia Certification #: 955

Guam Certification: FL NELAC Reciprocity

Hawaii Certification: FL NELAC Reciprocity

Illinois Certification #: 200068

Indiana Certification: FL NELAC Reciprocity

Kansas Certification #: E-10383

Kentucky Certification #: 90050

Louisiana Certification #: FL NELAC Reciprocity

Louisiana Environmental Certificate #: 05007

Maryland Certification: #346

Michigan Certification #: 9911

Mississippi Certification: FL NELAC Reciprocity

Missouri Certification #: 236

Montana Certification #: Cert 0074

Nebraska Certification: NE-OS-28-14

New Hampshire Certification #: 2958

New Jersey Certification #: FL022

New York Certification #: 11608

North Carolina Environmental Certificate #: 667

North Carolina Certification #: 12710

North Dakota Certification #: R-216

Ohio DEP 87780

Oklahoma Certification #: D9947

Pennsylvania Certification #: 68-00547

Puerto Rico Certification #: FL01264

South Carolina Certification: #96042001

Tennessee Certification #: TN02974

Texas Certification: FL NELAC Reciprocity

US Virgin Islands Certification: FL NELAC Reciprocity

Virginia Environmental Certification #: 460165

West Virginia Certification #: 9962C

Wisconsin Certification #: 399079670

Wyoming (EPA Region 8): FL NELAC Reciprocity

REPORT OF LABORATORY ANALYSIS

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SAMPLE SUMMARY

Project: 17385
Pace Project No.: 35617644

<u>Lab ID</u>	<u>Sample ID</u>	<u>Matrix</u>	<u>Date Collected</u>	<u>Date Received</u>
35617644001	191261	Water	03/09/21 11:00	03/09/21 16:50

REPORT OF LABORATORY ANALYSIS

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SAMPLE ANALYTE COUNT

Project: 17385
Pace Project No.: 35617644

Lab ID	Sample ID	Method	Analysts	Analytes Reported	Laboratory
35617644001	191261	EPA 200.7	CS2	1	PASI-O
		EPA 300.0	YMP	1	PASI-O

PASI-O = Pace Analytical Services - Ormond Beach

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ANALYTICAL RESULTS

Project: 17385
 Pace Project No.: 35617644

Sample: 191261 **Lab ID: 35617644001** Collected: 03/09/21 11:00 Received: 03/09/21 16:50 Matrix: Water

Parameters	Results	Units	PQL	MDL	DF	Prepared	Analyzed	CAS No.	Qual
200.7 MET ICP	Analytical Method: EPA 200.7 Preparation Method: EPA 200.7 Pace Analytical Services - Ormond Beach								
Sodium	182	mg/L	2.0	0.54	1	03/16/21 14:24	03/17/21 03:54	7440-23-5	
300.0 IC Anions 28 Days	Analytical Method: EPA 300.0 Pace Analytical Services - Ormond Beach								
Chloride	382	mg/L	50.0	25.0	10		03/15/21 23:23	16887-00-6	

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QUALITY CONTROL DATA

Project: 17385
 Pace Project No.: 35617644

QC Batch: 713273	Analysis Method: EPA 200.7
QC Batch Method: EPA 200.7	Analysis Description: 200.7 MET
	Laboratory: Pace Analytical Services - Ormond Beach

Associated Lab Samples: 35617644001

METHOD BLANK: 3888746 Matrix: Water
 Associated Lab Samples: 35617644001

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Sodium	mg/L	0.54 U	2.0	0.54	03/17/21 03:14	

LABORATORY CONTROL SAMPLE: 3888747

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Sodium	mg/L	12.5	11.5	92	85-115	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 3888748 3888749

Parameter	Units	35616272001		3888749		MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
		MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result						
Sodium	mg/L	1430	12.5	12.5	1070	1060	-2880	-2940	70-130	1 20	J(M1), L

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

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QUALITY CONTROL DATA

Project: 17385
 Pace Project No.: 35617644

QC Batch: 712921 Analysis Method: EPA 300.0
 QC Batch Method: EPA 300.0 Analysis Description: 300.0 IC Anions
 Laboratory: Pace Analytical Services - Ormond Beach

Associated Lab Samples: 35617644001

METHOD BLANK: 3887344 Matrix: Water
 Associated Lab Samples: 35617644001

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Chloride	mg/L	2.5 U	5.0	2.5	03/15/21 14:33	

LABORATORY CONTROL SAMPLE: 3887345

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Chloride	mg/L	50	48.3	97	90-110	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 3887346 3887347

Parameter	Units	35616168002 Result	MS	MSD	MS	MSD	MS	MSD	% Rec	RPD	Max RPD	Qual
			Spike Conc.	Spike Conc.	Result	Result	% Rec	% Rec	Limits			
Chloride	mg/L	20.6	50	50	77.0	76.0	113	111	90-110	1	20	J(M1)

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 3887348 3887349

Parameter	Units	35617676001 Result	MS	MSD	MS	MSD	MS	MSD	% Rec	RPD	Max RPD	Qual
			Spike Conc.	Spike Conc.	Result	Result	% Rec	% Rec	Limits			
Chloride	mg/L	42.0	50	50	99.7	99.0	115	114	90-110	1	20	J(M1)

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

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QUALIFIERS

Project: 17385
Pace Project No.: 35617644

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.
ND - Not Detected at or above adjusted reporting limit.
TNTC - Too Numerous To Count
MDL - Adjusted Method Detection Limit.
PQL - Practical Quantitation Limit.
RL - Reporting Limit - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.
S - Surrogate
1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.
Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.
LCS(D) - Laboratory Control Sample (Duplicate)
MS(D) - Matrix Spike (Duplicate)
DUP - Sample Duplicate
RPD - Relative Percent Difference
NC - Not Calculable.
SG - Silica Gel - Clean-Up
U - Indicates the compound was analyzed for, but not detected.
N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.
Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.
TNI - The NELAC Institute.

ANALYTE QUALIFIERS

U Compound was analyzed for but not detected.
J(M1) Estimated Value. Matrix spike recovery exceeded QC limits. Batch accepted based on laboratory control sample (LCS) recovery.
L Off-scale high. Actual value is known to be greater than value given.

REPORT OF LABORATORY ANALYSIS

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

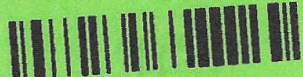
Project: 17385
Pace Project No.: 35617644

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
35617644001	191261	EPA 200.7	713273	EPA 200.7	713367
35617644001	191261	EPA 300.0	712921		

REPORT OF LABORATORY ANALYSIS

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WU#: 35617644



35617644

CHAIN OF CUSTODY RECORD

LAB W.O.# _____

Quote: _____

Page 1 of 1

Container Type Codes

AV Amber Vial ES Ecosort Sampler
CV Clear Vial PPV Prepreserved vial
P Plastic PL C Plastic copolimer
AL Amber Litr PL J Plastic Jar
CL Clear Litr Z Ziploc bag
AP Amber Plastic TB Tedlar bag
AG Amber Glass WP Whirl pak
SJ Soil Jar G Gallon Jug
Other TC Terra-core
PPV Prepreserved vial
Size(s): 2oz, 4oz, 8oz, 16oz, 32oz or 1L, other
40ml, 500ml, 250ml, 125ml
Example: 4ozP = 4oz Plastic, 8ozSJ = 8oz Soil Jar

Company Name: Everglades Labs., Inc. PO#
Address: 1602 Clare Ave.
City: West Palm Beach State: FL Zip: 33401
Attn: Ben Martin III B.S. Fax#
email: info@evergladeslabs.com Phone:

LAB ANALYSIS

Sample	TRC	pH	Pos Codes	Parameters	# of Containers Size/Type																		
			B A	Sodium Chloride 200.7 300.0																			

Project Name: 17385
Sampler Signature: *Ben Martin*
Circle One Event: Daily Quarterly Semi-Annual Weekly Annual Monthly N/A

Sample #	Sample ID	Collect Date	Collect Time	Matrix Code*	Field	Filtered	Integrity OK(Y/N)	Total # of containers
----------	-----------	--------------	--------------	--------------	-------	----------	-------------------	-----------------------

1	191261	3-9-21	11:00	SW				2
2								
3								
4								
5								
6								
7								
8								
9								
10								

EXAMPLE
Diss. Lead 6010

Matrix Codes
SD Solid Waste OL Oil
GW Ground Water SL Sludge
EFF Effluent SO Soil Sediment
AFW Analyte Free H2O AQ Aqueous
WW Waste Water NA Nonaqueous
DW Drinking Water PE Petroleum
SW Surface Water O Other
ML Misc Liquid (Please specify)

Preservative Type Codes
A. None E. HCL I. Ice
B. HNO3 F. MeOH J. MCAA
C. H2SO4 G. Na2S2O3 K. Zn Acetate
D. NaOH H. NaHSO4 O. Other

REMARKS

Version: 1.0 (04/01/2018) (When Form Expires)		Short Hold	Circle QA/QC Report Level	EDD (Fees May Apply)	COC Condition	Required State Certification	Coolers #'s - Temp °C					
<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Today 1D 2D 3D 4D SD	Y _____ N <input checked="" type="checkbox"/>	1 2 3 4 CLP AFCEE QAPP Other	ADaPT SEDD ERPIMS TSV CSV Other	OK Incomplete	FL GA SC NC NJ PA LA TX IL	392 3 4 5					
Item	Relinquished by	Affiliation	Date	Time	Received by	Affiliation	Date	Time	Lab Use Only	YES	NO	N/A
1	<i>Ben Martin</i>	Everglades Labs., Inc.	3-9-21	16:50	<i>[Signature]</i>	<i>Pace</i>	3/9/21	1650	Non-Conformance Found?	___	___	___
2	<i>[Signature]</i>	<i>Pace</i>	3/9/21	19:00	<i>TMA</i>	<i>Pace</i>	3/9/21	2313	Samples INTACT upon arrival?	___	___	___
3									Received on Wet Ice?	___	___	___
4									Proper Preservatives Indicated?	___	___	___
									Received within holding time?	___	___	___
									Custody seals Intact?	___	___	___
									Volatiles rec'd without headspace?	___	___	___
									Proper Containers Used?	___	___	___

Page 10 of 12

Pompano Lab 954-582-4300

Revision: F-ALL-C-007- Rev.00



Document Name:
Sample Condition Upon Receipt Form
Document No.:
F-FL-C-007 rev. 13

Document Revised:
May 30, 2018
Issuing Authority:
Pace Florida Quality Office

Sample Condition Upon Receipt Form (SCUR)

Project **WO# : 35617644**
 Project Manager **PM: MIM** Due Date: **03/17/21**
 Client **CLIENT: EVELAB**

Date and Initials of person:
 Examining contents: **TMA**
 Label: _____
 Deliver: _____
 pH: _____

Thermometer Used: 1557 Date: 3/19/21 Time: 2338 Initials: CSA

State of Origin: _____ For WV projects, all containers verified to $\pm 6^\circ\text{C}$

- Cooler #1 Temp. °C 1.8 (Visual) 70.1 (Correction Factor) 1.9 (Actual) Samples on ice, cooling process has begun
- Cooler #2 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual) Samples on ice, cooling process has begun
- Cooler #3 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual) Samples on ice, cooling process has begun
- Cooler #4 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual) Samples on ice, cooling process has begun
- Cooler #5 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual) Samples on ice, cooling process has begun
- Cooler #6 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual) Samples on ice, cooling process has begun

- Courier: Fed Ex UPS USPS Client Commercial Pace Other _____
- Shipping Method: First Overnight Priority Overnight Standard Overnight Ground International Priority
 Other _____

- Billing: Recipient Sender Third Party Credit Card Unknown

Tracking # _____

Custody Seal on Cooler/Box Present: Yes No Seals intact: Yes No Ice: Wet Blue Dry None

Packing Material: Bubble Wrap Bubble Bags None Other _____

Samples shorted to lab (If Yes, complete) Shorted Date: _____ Shorted Time: _____ Qty: _____

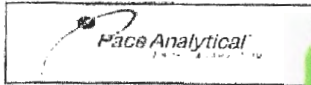
Comments:

Chain of Custody Present	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	No Project Name
Chain of Custody Filled Out	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Relinquished Signature & Sampler Name COC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Samples Arrived within Hold Time	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Rush TAT requested on COC	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Sufficient Volume	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Correct Containers Used	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Sample Labels match COC (sample IDs & date/time of collection)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All containers needing acid/base preservation have been checked	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All Containers needing preservation are found to be in compliance with EPA recommendation: Exceptions: VOA, Coliform, TOC, O&G, Carbamates	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Preservation Information: Preservative: _____ Lot #/Trace #: _____ Date: _____ Time: _____ Initials: _____
Headspace in VOA Vials? (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	

Client Notification/ Resolution:
 Person Contacted: _____ Date/Time: _____

Comments/ Resolution (use back for additional comments): _____

Project Manager Review: _____ Date: _____



Document Name:
Sample Condition Upon Receipt Form
WO#: 35617644

Document Revised:
May 30, 2018
Issuing Authority:
Pace Florida Quality Office

PM: MIM Due Date: 03/17/21 (SCUR)

Project #
Project Manager:
Client:

Date and Initials of person:
Examining contents: U
Label: _____
Deliver: _____
pH: _____

Thermometer Used: T-343 Date: 3/9/21 Time: 1650 Initials: U

State of Origin: FL For WV projects, all containers verified to ≤ 6 °C
Cooler #1 Temp. °C: 3.8 (Visual) +0.1 (Correction Factor) 3.9 (Actual) Samples on ice, cooling process has begun
Cooler #2 Temp. °C: _____ (Visual) _____ (Correction Factor) _____ (Actual) Samples on ice, cooling process has begun
Cooler #3 Temp. °C: _____ (Visual) _____ (Correction Factor) _____ (Actual) Samples on ice, cooling process has begun
Cooler #4 Temp. °C: _____ (Visual) _____ (Correction Factor) _____ (Actual) Samples on ice, cooling process has begun
Cooler #5 Temp. °C: _____ (Visual) _____ (Correction Factor) _____ (Actual) Samples on ice, cooling process has begun
Cooler #6 Temp. °C: _____ (Visual) _____ (Correction Factor) _____ (Actual) Samples on ice, cooling process has begun

Courier: Fed Ex UPS USPS Client Commercial Pace Other _____
Shipping Method: First Overnight Priority Overnight Standard Overnight Ground International Priority
 Other _____
Billing: Recipient Sender Third Party Credit Card Unknown

Tracking # _____

Custody Seal on Cooler/Box Present: Yes No Seals intact: Yes No Ice: Wet Blue Dry None
Packing Material: Bubble Wrap Bubble Bags None Other _____
Samples shorted to lab (if Yes, complete) Shorted Date: _____ Shorted Time: _____ Qty: _____

Comments:

Chain of Custody Present	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Preservation Information: Preservative: _____ Lot #/Trace #: _____ Date: _____ Time: _____ Initials: _____
Chain of Custody Filled Out	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Relinquished Signature & Sampler Name COC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Samples Arrived within Hold Time	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Rush TAT requested on COC	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Sufficient Volume	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Correct Containers Used	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Sample Labels match COC (sample IDs & date/time of collection)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All containers needing acid/base preservation have been checked.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All Containers needing preservation are found to be in compliance with EPA recommendation: Exceptions: VOA, Coliform, TOC, O&G, Carbamates	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Headspace in VOA Vials? (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

Client Notification/ Resolution:
Person Contacted: _____ Date/Time: _____

Comments/ Resolution (use back for additional comments):

Project Manager Review: _____ Date: _____