

Florida LAKEWATCH Saline Data Sheet

Waterbody Name: _____ County: _____

Sampler: _____ Phone: () _____ Sampling Date: _____

Yes___ No___: Surface Water Collected for Total Phosphorus and Total Nitrogen.

Yes___ No___: Surface Water Collected for Chlorophyll and Filtered Within 48 Hours.

Yes___ No___: Secchi Depth Reading Taken.

Secchi Disc Measurements:

- For **Secchi depth** and **water depth** measurements, please indicate the number of feet and then estimate and circle the appropriate fraction, if needed.
- If your **disc is visible on the bottom** write **B**, if your **disc disappears in the weeds** write **W**, in the **vanishing point** column and the **depth** at which your disc disappears.

Vanishing Point	Sun Code Number	Sun Code Key <i>Use the codes from below to fill in the Sun Code Number column.</i>	Water Depth	Sampling Time
Sta 1 ft. 1/4 1/2 3/4		1 = full sun	ft. 1/4 1/2 3/4	
Sta 2 ft. 1/4 1/2 3/4		2 = haze over sun	ft. 1/4 1/2 3/4	
Sta 3 ft. 1/4 1/2 3/4		3 = thin cloud cover	ft. 1/4 1/2 3/4	
Sta 4 ft. 1/4 1/2 3/4		4 = medium cloud cover	ft. 1/4 1/2 3/4	
Sta 5 ft. 1/4 1/2 3/4		5 = heavy cloud cover	ft. 1/4 1/2 3/4	
Sta 6 ft. 1/4 1/2 3/4			ft. 1/4 1/2 3/4	
Sta 7 ft. 1/4 1/2 3/4			ft. 1/4 1/2 3/4	
Sta 8 ft. 1/4 1/2 3/4			ft. 1/4 1/2 3/4	
Sta 9 ft. 1/4 1/2 3/4			ft. 1/4 1/2 3/4	
Sta 10 ft. 1/4 1/2 3/4			ft. 1/4 1/2 3/4	
Sta 11 ft. 1/4 1/2 3/4			ft. 1/4 1/2 3/4	
Sta 12 ft. 1/4 1/2 3/4			ft. 1/4 1/2 3/4	
Sta 13 ft. 1/4 1/2 3/4			ft. 1/4 1/2 3/4	

Date and Time of Chlorophyll Filtration:

Station	Filtering Date	Filtering Time
Sta 1		
Sta 2		
Sta 3		
Sta 4		
Sta 5		
Sta 6		
Sta 7		
Sta 8		
Sta 9		
Sta 10		
Sta 11		
Sta 12		
Sta 13		

DESCRIBE any unique occurrences since your last your sampling date, either in the coastal waters or on the local watershed, on the back of this data sheet.

Call LAKEWATCH (1-800-LAKEWAT) if you have any questions on how to get started.