

2025 Cayuga Lake HABs Priority Site Shoreline Survey Certified Lab Chain of Custody Form

- Report bloom by filling out the Cayuga Lake Bloom Report Form (electronic). Scan the QR code on the back to access the form.
- Collect the sample in the provided amber glass sampling container. Wear Gloves! Fill out the label with sample collector's name, zone number, date, and time sampled.
- Complete this chain-of-custody document for each sample. Information must match the information on the corresponding sample bottle *and* photos.
- **PLEASE SIGN THE BOTTOM OF THE FORM, EVEN IF LEAVING THE SAMPLE AT A DROP OFF LOCATION**

1. Name of the person who observed the suspected HAB: _____

If observed by someone outside of the HABs Monitoring Program, include a phone or email address for them.

Email or Phone: _____

Name of the person who collected the sample: _____

(if different than above)

2. Location of the HAB

Latitude: 42. _____ Longitude: -76. _____

Location Description: _____

Nearest Address: _____

3. Date & Time the HAB:

Was Observed: _____

Sample was Collected: _____

4. Bloom Extent (see back for descriptions):

Extent of the PRIORITY zone that you monitored:

- Less than 25%
- 25%-50%
- 50%-75%
- 75%- Entire Zone

Extent of the HAB within your PRIORITY zone:

- Small localized HAB
- Large localized HAB
- Widespread HAB
- Open Water HAB

5. Does the HAB extend beyond the boundary of your PRIORITY zone?

- Yes No

If the HAB extends outside of your PRIORITY zone, please include notes about where/how it is spreading:

6. Was the sample dropped off with ice? Yes No
 Was the sample transported on ice? Yes No

7. Chain of Custody Documentation:

- ALL volunteers who handle this sample MUST sign off below.
- If you are not handing the sample DIRECTLY to another person, in the “Accepted by” column, list where you dropped off the sample. See example below.
- If you are handing the sample off directly to another person, both need to sign below.
- The final signature should be a CSI Employee “accepting” the sample at the Lab.

	Date	Time	Relinquished by:	Accepted by:	Temperature Upon Receipt:
Ex:	7/23/24	5:30 PM	Alyssa Johnson	CSI After-hours drop off	(leave blank)
1.					°C
2.					°C
3.					°C
4.					°C

DON'T FORGET TO SUBMIT A BLOOM REPORT ONLINE

You can access it by scanning this QR code with a smartphone or tablet:

You can also access the form by typing this URL into your browser:



<https://bit.ly/2025HABsReportForm>

Bloom extent descriptions:

Extent of PRIORITY zone monitored:

- You should answer this question considering ONLY your PRIORITY zone.
- For some volunteers assigned to PRIORITY zones, your zone may be entirely considered “priority”, while for others, only a portion is considered “priority”. See your zone map for reference.

Extent of the HAB within your PRIORITY zone:

- Small localized HAB: 1-2 small private properties or 100 ft or less in length along the shoreline
- Large localized HAB: 2 or more private properties, must be able to see the HAB within your field of view from the point reporting/sample collecting
- Widespread HAB: Many private properties, HAB must extend beyond your field of view
- Open Water HAB: located in the open water of the lake, HAB is likely only detected by boat. If the HAB is viewed from dock and extends towards the shoreline call it "widespread". If the HAB is viewed from a dock and extends towards the center of the lake from your point of view, use "Open Water"