# Turf Disease Sample Submission Form

**Date:** __________  
**Name:** ___________________________  
**Organization:** ___________________________

<table>
<thead>
<tr>
<th>Street Address: ___________________________</th>
<th>City: __________</th>
<th>State: __________</th>
</tr>
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<thead>
<tr>
<th>Zipcode: _______</th>
<th>Phone: ___________</th>
<th>Email: ___________</th>
<th>Fax: __________</th>
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**Does submission include pictures?**  
**Y / N**  
**Best method for contact:** phone [ ]  email [ ]

**Describe Turf Species/Cultivars:** ___________________________

**Age of stand:** __________

**Describe Turf Type (greens, fairway, lawn...):** ___________________________

**Height of cut:** __________

**Describe the Damage (Patches, streaks, circles, spots...):** ___________________________

**Approximate size of individual damaged areas:** __________

**Soil type:** ___________________________  
**When did you first notice the problem:** ___________________________

**Is this a recurring problem for you?**  
**Y / N**  
**Since when?:** ___________________________

**What pesticides have you applied to this turf recently (date, rate)?:** ___________________________

**Describe cultural practices (aeration, topdressing):** ___________________________

**Describe environmental conditions of affected turf (temperature, irrigation, rain, drainage, fertilization...):** ___________________________

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## Service Requested:

- Diagnosis + phone consultation ($100) [ ]
- Diagnosis + written report + phone consultation ($150) [ ]
- Diagnosis + site visit + written report ($250) [ ]
- Subscription 1 (5 samples: written reports, phone consultations ($500) [ ]
- Subscription 2 – unlimited samples: written reports, phone consultations, one site visit ($1000) [ ]

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You will be contacted within 24 h for samples arriving Monday to Thursday. You will be contacted the following Monday for samples arriving on Friday.

Take samples from the edge of diseased area and deep enough to include roots. Package samples with the root zone (not leaves) wrapped in foil and firmly pack the sample into a box with newspaper. Do not package samples in plastic bags.

Ship disease samples overnight or early in the week to avoid sample degradation.

Accompanying pictures (with contact information) can help with diagnosis and can be emailed to: pdc@umn.edu

Send samples to:

**Plant Disease Clinic, 495 Borlaug Hall 1991 Upper Buford Circle, University of Minnesota, St. Paul, MN, 55108**

Call 612-625-1275 for questions regarding submissions / samples, subscription services, or payment.

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Sample Received By: ___________________________  
Sample Received date: ___________________________