UMass Extension Plant Diagnostic Lab: TREE AND SHRUB FORM*

UMEPDL –Lab 3, French Hall, 230 Stockbridge Road, Amherst, MA 01003

Telephone: (413) 545-3208 ag.umass.edu/diagnostics

Results are emailed to the client from pdisnoreply@ksu.edu



Send specimen	to address above	. Please include	check payable to	University of Ma	issachusetts	or receipt for online	e payment.		
⇒ USE THIS F	ORM FOR:	Tree/Shrub Dis	ease Analysis (\$50) ☐ Tree/S	hrub Insect	ID (\$50)	vood Nematodes (\$50)		
Host Plant: Cultivar:				Date Collected:					
Approximate Age:				Time in Present Location:					
When Did Symptoms Occur?				Were Symptoms Observed in Previous Years? Yes/No					
Town/County	of Sample Co	llection:							
Briefly Descr	ibe the Proble	m:							
Products Applied, Rates, Dates of Application:									
Describe Site Conditions and Relevant Cultural Practices:									
Circle all that apply:									
Location	<u>Irrigation</u>	Site Conditi	on Soil	<u>Draina</u>	age Sy	<u>/mptoms</u>	Part Affected		
Landscape	Lawn	Shade	Sandy	Good	Ye	ellow/Browning	Roots		
Greenhouse	Overhead	Full Sun	Clay	Mode	rate S1	tunted	Crown		
Nursery	Drip	Wet	Loam	Poor	SI	noot Blight	Branch/Stem		
Forest	None	Dry	Soil Mi	X	Ca	anker	Leaves/Needles		
Other		Compacted	рН		St	tippling/Spots	Fruit		
		Other			01	ther	_		
Contact		Firm			Address				
Town		State	z Zip	<u> </u>	 	none			
		State	Σιμ	,		TOTIE			
E-mail									
THE FOLLOWING SECTIONS WILL BE COMPLETED BY DIAGNOSTIC LAB:									
IIIL I OLLOWI	ING SECTIONS I	VILL DE COIVII	LLILD DI DIAU	INCOLLAD.					

Lab Number	Date Received	Date Answered	Payment
Ver 2024-AMM			

^{*} NOTE – Turf, vegetable, and tree/shrub samples require alternate submission forms. Visit ag.umass.edu/diagnostics for copies.