

UMass Extension Plant Diagnostic Lab: *TURF FORM**



UMass Plant Diagnostic Lab –Lab 3, French Hall, 230 Stockbridge Road, Amherst, MA 01003
 Telephone: (413) 545-3208 - ag.umass.edu/diagnostics

Send specimen to above address. Please include check payable to *University of Massachusetts*

⇒ **THIS FORM IS FOR:** Turf Disease (\$75) Insect ID (\$50) Grass/Weed ID (\$30)

Grass species: _____ Cultivar(s): _____ Date Collected: _____
 Year Established: _____ Origin: Seeded Sodded Plugged Unknown

Describe Symptoms: _____

When Did Symptoms Occur? _____ Symptoms Apparent in Previous Years? _____

Products Applied, Rates, and Dates of Application: _____

Relevant Cultural Practices, Site Conditions, Additional Info: _____

Circle all that apply:

| <u>Location</u> | <u>Site Condition</u> | <u>Soil</u> | <u>Drainage</u> | <u>Irrigation</u> | <u>Symptoms</u> |
|--------------------------------------|-----------------------|-------------|-----------------|-------------------|------------------|
| Golf Green/Tee/Collar/Fairway/Rough) | Shade | Sandy | Excellent | None | Patches |
| Lawn | Part Shade | Clay | Good | Sprinklers | Rings, Arcs |
| Athletic Field | Full Sun | Loam | Moderate | Rate _____ | Leaf Spot/Blight |
| Utility/Industrial | Wet | Sand Green | Poor | Frequency _____ | Yellowing |
| Sample ID _____ | Droughty | pH _____ | | | Wilt |

Contact _____ Firm _____ Address _____
 Town _____ State _____ Zip _____ Phone _____
 E-mail _____

THE FOLLOWING SECTION WILL BE COMPLETED BY THE DIAGNOSTIC LAB:

Version 2024- AMM