

University of Florida Insect ID Lab
Entomology and Nematology Dept.

<http://edis.ifas.ufl.edu/sr010>

Sample being submitted with this paperwork
is for the Collaborative and Enhanced First
Detector 2013 Pest Detection Workshops

Mail sample to:

Lyle Buss

Bldg. 970, Natural Area Dr.
P.O. Box 110620
Gainesville, FL 32611-0620

If submitting a live
specimen, please:

- 1) Call ahead and notify Mr.
Buss at (352) 273-3933.
- 2) Ship **overnight**.

Survey Information:

Date surveyed: _____
County: _____
Name: _____
Address: _____
E-mail: _____
Phone: _____
FAX: _____

Submitted by (if different from collector):

Extension Agent: _____
Name: _____
Company: _____
Address: _____
E-mail: _____
Phone: _____
FAX: _____

Response method:

- ☐ E-mail (preferred)
☐ FAX
☐ Telephone
☐ Regular mail

Notify:

- ☐ Collector
☐ Submitter
☐ Agent only

Information requested:

- ☐ Control information
☐ Species identification
☐ Other (please explain)

Priority:

- ☐ Routine
☐ Urgent (explain why)

Pest surveyed for: _____

Plants surveyed: ☐ Ornamentals ☐ Field crop
☐ Fruit ☐ Greenhouse
☐ Vegetables ☐ Pasture
☐ Forest / Shade tree ☐ Turf

Plant name: _____

Number of plants surveyed: _____ % of plants infested: _____

Parts where pest located

- ☐ Leaves
☐ Growing tips
☐ Buds
☐ Blossoms
☐ Fruit / Nuts / Seeds
☐ Stem / Trunk
☐ Branches / Twigs
☐ Roots
☐ Tubers / Bulbs

Symptoms

- ☐ Die back
☐ Leaf discoloration
☐ Leaf drop
☐ Tip burn
☐ Fruit damage
☐ Abnormal growth
☐ Galls
☐ Stunting
☐ Slow decline
☐ Sudden collapse
☐ Other: _____

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ADDITIONAL INFORMATION ABOUT SPECIMEN: