



PLANT DIAGNOSTIC LAB
101 EXTENSION HALL
AUBURN UNIVERSITY, AL 36849-5624

For Auburn Office Use Only

Number _____
Date rec'd. _____
Specialist _____

INSECT IDENTIFICATION RECORD

County _____ Owner/ grower _____ Check owner type:
Agent _____ Address _____ Business (office, restaurant, shop, etc.)
Phone _____ Commercial landscaper
Crop / Host _____ City, Zip _____ Country Club
Date Collected _____ Phone _____ Farm center
Farmer
Feed store
Garden center
Golf course
Government (parks, schools)
Grain elevator
Greenhouse
Homeowner
Lawn care
Service
Nursery
PCO
Rancher
Sod producer
Other _____

Describe type and severity of damage: _____

Completed forms aid in identification of insects and timely response.

Note: Most insects should be mailed in a vial of alcohol.
If possible send duplicate insects.

To be filled in by entomologist:

Identification _____

Control recommendation _____

Signed _____ Date _____

Instructions: Send white and yellow copies to Plant Diagnostic Lab, Extension Hall, Room 101; Retain Blue copy for your records.

Issued in furtherance of Cooperative Extension work in agriculture and home economics. Acts of May 8 and June 30, 1914, in cooperation with the U.S. Department of Agriculture. The Alabama Cooperative Extension Service, Auburn University, Ann E. Thompson, Director, offers educational programs and materials to all people without regard to race, color, national origin, sex, age, or handicap and is an equal opportunity employer.



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