Crop	Pro	ote	ctior	ı La	bor		Plant			Lab #:				
							Disease							
Send Sam 1610 Par Regina S DO NOT	k Stree K S4N	et 2G1		pl@gov			Payment Method:  □ Credit □ Debit  Total Am			d: ount Owing:				
Contact Information for Processing and Payment (required*)														
Company				Comuc			ntact for Payment Name*							
Address* Er									mail*					
Town/City	<b>,</b> *	Province*			Postal Code*			Work/Home Phone*				Cell Phone		
Compale Idea	. <b>.</b> : £:				•		•							
Sample Identifiers												11.		
Field ID (ex.	field)							Crop Type*			Cultivar			
* Land Location	Quarte	er	Section Townshi		ship f	p Range I		ian	n Latitude: N			Longitude: W		
<u>or</u> GPS														
Cost: ☐ \$50 + GST (SK resident) OR ☐ \$125 + GST (Non-SK resident)  Planting and Crop Information														
	ī					A ff+  /0	· - •	-> \	//		la dia a			
Planting Dat	te ivia	ain Syn	nptom of co	oncern?	Area Affected (% of acre			- 1	When did the problem start (date/crop stage) Is the problem spread			roblem getting worse / ing?		
Crop Rotatio	on and D	isease	History (ad	d additio	nal shee	t if needed	)							
Crop Rotation and Disease History (add additional sheet if needed)														
		Part o	f Plant Affe	cted (ma	rk all tha	t apply)		Wa	Vas there a pattern of symptoms in the field (describe/draw)					
Symptoms		Roots	Stem	Leaves	Head /	Seed /	ALL		One plant Scattered	☐ Patche	es	☐ Entire Field ☐ Unknown		
Wilting														
Stunting														
Discolourat	tion													
Malformati	ion													
Physical Damage														
Mould Growth								_						
Lesions/Spo								-						
Rotting/De	au							<u> </u>						
Severity of the <u>main symptom</u> of concern (check one below)  What do you think caused the <u>main symptom</u> of concern —								☐ Environment☐ Insects	•	☐ Diseas ☐ Fertilit				
☐ Slight ☐ Severe ☐ Wariable					Did you take photos →				☐ Included with Sample ☐ S			ent to cpl@gov.sk.ca		



Primary Soil Type	Tillage C	Operation		Environmental Conditions (prior to symptom development)					
☐ Clay	☐ High	disturbance		☐ Wet		Weather Events:			
☐ Loam	☐ Conv	entional		☐ Average					
☐ Sand	☐ Minir	mum / Zero		☐ Dry					
				☐ Other					
Other Soil Informatio	n:			Habitat		Other Comments:			
				☐ Field	☐ Pasture				
Field Topography	Slope Po	osition of Affected		☐ Shelterbelt	☐ Ditch				
☐ Level ☐ Rollin			Mid-slopes	☐ Greenhouse					
☐ Hilly ☐ Othe	-	•	•						
		•				•			
Fertilizer	Fertilizer Date/Stage		Rate	Form	Placement	Soil test information			
N-P-K-S									
Inoculant									
Micronutrients									
What posticides/barbi	icidos woro an	nlied to affected fie	ld this seeson (inclu	ding fall applicati	ons dating to mid	August\2			
Application Date (M			Crop Stage	ding fall applications dating to mid-August)?  Product Rate					
Application bate (W	141,00,111	Crop and	crop stage	•	Toduct	nate			
						•			
Prior to above applicat		se did you use in you	ur sprayer (including	in other fields)?					
Application Date (M	M/DD/YY)	Cleanout	Method	P	roduct	Rate			
What other cultural or	chemical con	trols were used/an	alied to the affected	field prior to this	season (un to 3 ve	pare)?			
What other cultural of	chemical con	tiois were useu, app	oned to the affected	neia prior to tina	season (up to 5 ye				
LAB USE ONLY (dia	ignosis)								
Notes:					Addi	tional Testing Instructions:			
☐ Identification Complete									
Common Name:	·			Scientific Name:					
				Colonial Hullici					
Dogulto and said	fidontial a	nome whoma NA::	akmı in unanıdıra d			ine ou vogulatom, ciamificanas			
Results are confidential except where Ministry is required to report the results (quarantine or regulatory significance).									

