



— Please read instructions on back before filling in information below —

Professional Lawn Care and Landscaper Information Sheet

SOIL TESTING PROGRAM - UNIVERSITY OF DELAWARE - 531 SOUTH COLLEGE AVENUE - 152 TOWNSEND HALL - NEWARK, DE 19716-2170 - 302-831-1392

1. NAMES AND ADDRESSES				LAB USE ONLY	
BUSINESS NAME (PRINT)		CLIENT NAME		LAB # _____	
ADDRESS		ADDRESS		BAG # _____	
CITY	STATE	ZIP	CITY	STATE	ZIP
PHONE NO.	EMAIL		SEND CLIENT COPY TO		REC'D _____
			<input type="checkbox"/> BUSINESS <input type="checkbox"/> CLIENT		

2. SAMPLE DESCRIPTION																			
<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td> </tr> </table> <p align="center">YOUR SAMPLE NAME OR NUMBER (Up to 15 characters)</p>																<p align="center">SAMPLE DEPTH</p> <hr/> <p align="center">NUMBER OF INCHES</p>	<table border="1" style="width: 100%; height: 40px; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;"></td> </tr> </table> <p align="center">DATE SAMPLED (month/day/year)</p>		

3. PLANTS GROWN	4. LAST LIME APPLICATION	AMOUNT APPLIED (X)				
Enter one or more 3- LETTER PLANT CODES from bottom of sheet in blocks below	MONTHS since lime was last applied (X)	Pounds per <u>100</u> square feet	Pounds per <u>1000</u> square feet			
1. <table border="1" style="display: inline-table; width: 60px; height: 20px; vertical-align: middle;"> <tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td></tr> </table>				<input type="checkbox"/> 0-6 months <input type="checkbox"/> 7-12 months <input type="checkbox"/> 13-18 months <input type="checkbox"/> 18+ months <input type="checkbox"/> Never <input type="checkbox"/> Unknown	<input type="checkbox"/> 1-4 <input type="checkbox"/> 5-8 <input type="checkbox"/> 9-12 <input type="checkbox"/> 12+	<input type="checkbox"/> 10-40 <input type="checkbox"/> 50-80 <input type="checkbox"/> 90-120 <input type="checkbox"/> 120+
2. <table border="1" style="display: inline-table; width: 60px; height: 20px; vertical-align: middle;"> <tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td></tr> </table>						
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5. SOIL TESTS REQUESTED:	
<input type="checkbox"/> Routine fertility and recommendations\$18.00 (Includes pH, lime requirement, organic matter, and plant nutrients)	<input type="checkbox"/> Soluble Salts \$10.00 <input type="checkbox"/> Lead Screening \$4.50

Payment should be made in advance (e.g., when kits are purchased) or should accompany the sample. Cash, checks (payable to the "University of Delaware"), money orders and credit cards are accepted. To pay by credit card, complete the form on the back of this sheet.

PLANT CODE LIST

CODE	NAME	CODE	NAME
LAWNS		SHRUBS AND TREES	
BFE	New Seeding / Sodding - Bluegrass/Fescue/Ryegrass Lawns	ACD	Acid Loving Shrubs - e.g., azaleas, rhododendrons, andromeda, leucothoe, laurels, etc
BFM	Maintaining Established Bluegrass/Fescue/ Ryegrass Lawns	SHR	Other Shrubs - lilac, forsythia, cotoneaster, boxwood, etc
BZE	New Planting - Bermudagrass / Zoysiagrass Lawns	EVG	Evergreen Trees and shrubs - yew, hemlock, pine, holly, etc
BZM	Maintaining Established Bermudagrass / Zoysiagrass Lawns	FTR	Flowering Trees – crabapple, cherry, magnolia, dogwood, etc
PTE	Professional Turf Establishment	SHD	Shade Trees - maple, oak, ash, etc
PTM	Professional Turf Management	GRC	Ground Covers - pachysandra, ivy, etc
FRUITS		GARDEN	
APP	Apples	VGG	Vegetable Garden
CHY	Cherries	FLB	Flower Beds
PCH	Peaches, Nectarines	ROS	Roses
PRS	Pears	SOIL BASED GOLF COURSES	
PLM	Plums	GBT	Golf Course - Bentgrass Greens and Tees
BLB	Blueberries	GBL	Golf Courses - Bluegrass Tees and Fairways
GRP	Grapes	GBF	Golf Courses - Bentgrass Fairways
RSP	Raspberries, Blackberries		
STY	Strawberries		

INSTRUCTIONS FOR COMPLETING SOIL TEST

Completing the Information Sheet

Please fill out the information sheet as completely as possible. The more information provided, the better. When submitting multiple samples, use one information sheet per sample and included all information on **each** sheet.

1. **Names and Addresses** – Clearly PRINT your name, address and zipcode in the first box. If you wish to have a copy of your report sent to someone else (e.g., your landscaper), complete the information in the 2nd box.
2. **Sample Identification** – Record your sample name or number in the boxes provided – e.g., “Vegetable Garden” or “Front Lawn”. Under SAMPLE DEPTH, write down how deep you took your sample – e.g., 6” if you sampled the top 6” of your garden’s topsoil. Record the DATE SAMPLED in the appropriate boxes.
3. **Plants Grown** – Enter the 3 letter plant code from the list at the bottom of the sheet for the plants you are growing – e.g., VGG for vegetable garden – in the boxes provided. If your sample is from an area with more than one type of planting, you can select up to three plant codes. Recommendations will be generated for each one.

If no plant code is entered, you will receive a report of your results only with a note that no plant code was provided.

If, at a later date, you decide to add an additional plant code, a new report can be requested by calling the program office and providing the sample bag number or lab number and the desired plant to be grown.
4. **Last Lime Application** – To avoid over-liming which can cause nutrient deficiencies in some plants, lime application rates will be adjusted for any recent lime applications. Please indicate how recently the sampling area was limed and how much lime was applied by checking the appropriate boxes.
5. **Soil Tests Requested** – Be sure the tests requested are checked in this section. Tests should either be ordered at the time of purchase or payment must accompany the sample. If tests other than the routine fertility with lead are purchased with the original kit (e.g., soluble salts), a receipt for those special tests will be issued and must be attached to this form and included in the envelope as proof of payment.

If you are submitting a sample and have not purchased a kit in advance (e.g., you have downloaded this form from our website and are submitting your sample in your own container), payment or payment instructions must be included with your sample or you will be invoiced upon receipt of your sample. Cash, checks (payable to “University of Delaware”), money orders and credit cards are accepted. To pay by credit card, complete the form below

6. **Comments** – Comments may be added below or attached as a note to this form. Use this space to include information you feel is important which has not been covered on the information sheet.

Payment by Credit Card

I wish to pay by card.

Daytime phone number where I can be reached for my card information: _____

Taking Soil Samples

A brochure, “How to take a soil sample for Homeowners”, which describes the proper way to collect a representative soil sample is provided with each purchase of soil test kits from our office or the County Extension offices or with each Mailer kit. The brochure is also available on line at: <http://www.udel.edu/Extension/soiltest>

Proper sampling is critical to obtaining accurate soil test results – the test is only as good as the sample collected. The laboratory needs 1-2 cups of soil to perform the routine test. Be sure to fill your soil test kit to **at least** the line shown on the cloth bag to ensure that the laboratory has sufficient sample material.

Submitting Samples

It is preferred that samples be submitted in the soil test kits provided by the UD Soil Testing Program. The two-part kits which consist of a cloth bag with plastic liner for the sample and an attached envelop for the information sheet, are self addressed for mailing to lab and have a serial number for easy tracking. However, we will accept samples submitted in other containers (e.g., ziplock bags, kits from other labs, etc) so long as they 1) are clearly labelled, 2) are accompanied by an information sheet of some type with your contact information, 3) contain enough sample (1-2 cups) and 4) are accompanied by payment or payment instructions.

Completed kits may be returned to the laboratory by dropping them at the Program office, any Delaware Cooperative Extension Office (see below), by US mail (~ \$3.00 per sample) or by any other delivery service (e.g., Fedex, UPS, etc)

Soil Test Reports with Recommendations

Soil test reports are returned directly to the client. An additional copy will be mailed to the person/organization specified in the 2nd box if one has been specified by the client either on this form or at a later time in writing. For Delaware clients, a copy will also be provided to your local county office so that they may assist you with any questions / concerns that you have.

Normally, the soil test report is mailed within 10 business days of the sample’s arrival at the laboratory. During peak periods of November-December and March -April, please allow 15 business days as these are very busy times in the laboratory. Requesting recommendations for plants other than those listed on this form and/or requesting additional special tests may delay your results beyond the normal turn-around times listed here.

Emailing of results is available by request. Contact the office at 302-831-1392 to request this service.

Rush processing is available for an additional charge of \$20 per sample and guarantees 5 business day turn-around for routine testing. Call the office to make arrangements for this service as special steps are required.

County Extension Offices

New Castle County: 461 Wyoming Road, Newark, DE 19716, (302) 831-2506

Kent County: Paradee Center, 69 Transportation Circle, Dover, DE 19901 (302) 730-4000

Sussex County: Carvel Research and Education Center, 16483 County Seat Highway, Georgetown, DE 19947, (302) 856-7303

Comments:

To the extent permitted by applicable State and Federal laws, the University of Delaware is committed to assuring equal opportunity to all persons and does not discriminate on the basis of race, creed, color, sex, age, religion, national origin, veteran or handicapped status or gender identity or expression, or sexual orientation in its educational programs, activities, admissions, or employment practices as required by Title IX of the Educational Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, Title VII of the Civil Rights Act of 1964, and other applicable statutes. The University of Delaware has designated Karen Mancini, Director of the Office of Disabilities Support Services, as its ADA/Section 504 Coordinator under Federal Law. Inquiries concerning Americans with Disabilities Act compliance, Section 504 compliance, campus accessibility, and related issues should be referred to Karen Mancini (302-831-4643) in the Office of Disabilities Support Services. Inquiries concerning Title VII compliance and related issues should be referred to the Director of the Office of Equity and Inclusion, Becki Fogerty (302-831-8063).