



Florida Department of Agriculture and Consumer Services
Division of Plant Industry

SPECIMEN SUBMISSION FORM

WILTON SIMPSON
COMMISSIONER

Section 581.031(14)(a), F.S. / Incorporated in Rule 5B-2.0011, F.A.C.
Referenced in Rule 5B-2.010, F.A.C.

Form with fields for Apiary, Botany, Entomology, IFA, Nematology, Pathology, Priority, Purpose, Disposition, Log Number, Date Received, Host Plant Scientific Name, Host Plant Common Name, Diagnosis or Determination, Date Collected, Collector, DPS #, Date Sent, Sender, Owner, Nursery, Grove or Apiary Yard Name, Address or Location of Specimen, Nursery #, City, State, Zip, Block #, County, Country, GPS Coordinates, Total Number of Plants Involved, Total Acres Involved, Total Number of Plants Affected, Total Acres Affected, Infection or Infestation Intensity, Part Involved, Stage or Organism, Collecting Technique, Remarks, Email Address(es) for Additional Reports, Determiner, Date Completed, Recipient of Report.

NEMATODE CERTIFICATION FORM

Date: _____

AZ

SURVEY

Collector: _____

CA

PLANT PROBLEM

Owner, Nursery or Grove: _____

TX

BN BUFFER

LA

PIT

EU

SOIL FORMULATOR

Address or Location: _____

PM

OTHER

City: _____

SITE

Total Samples: _____

| Collection Number | Host | Block | Accession Number (Lab Only) |
|----------------------|-------|-------|-----------------------------------|
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Remarks:
