



company name: \_\_\_\_\_ account number: \_\_\_\_\_

submitted by: \_\_\_\_\_

street: \_\_\_\_\_

city: \_\_\_\_\_ state: \_\_\_\_\_ zip: \_\_\_\_\_

phone: \_\_\_\_\_ fax: \_\_\_\_\_ email: \_\_\_\_\_

shipped via: \_\_\_\_\_ tracking number: \_\_\_\_\_ ship date: \_\_\_\_\_ ship time: \_\_\_\_\_

# WATER/FERTILIZER

## SAMPLE SUBMISSION FORM

Complete questions F-H **ONLY** if submitting a fertilizer sample

### F. FERTILIZER SOLUTION SPECIFICS (select brand and formulation)

Example: Jack's Professional® 20-20-20 = 1.a.)

- |  |                                      |                                     |
|--|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> 1. Jack's Professional® | <input type="checkbox"/> a. 20-20-20 | <input type="checkbox"/> j. 20-8-20 |
| <input type="checkbox"/> 2. Scott's Peters®      | <input type="checkbox"/> b. 20-10-20 | <input type="checkbox"/> k. 17-5-19 |
| <input type="checkbox"/> 3. Masterblend®         | <input type="checkbox"/> c. 15-16-17 | <input type="checkbox"/> l. 17-4-17 |
| <input type="checkbox"/> 4. Plantex®             | <input type="checkbox"/> d. 15-15-15 | <input type="checkbox"/> m. 13-2-13 |
| <input type="checkbox"/> 5. Technigro®           | <input type="checkbox"/> e. 15-0-15  |                                     |
| <input type="checkbox"/> 6. Miller®              | <input type="checkbox"/> f. 21-5-20  |                                     |
| <input type="checkbox"/> 7. Plant Marvel®        | <input type="checkbox"/> g. 20-3-19  |                                     |
| <input type="checkbox"/> 8. Total Gro®           | <input type="checkbox"/> h. 15-5-15  |                                     |
| <input type="checkbox"/> 9. GreenCare®           | <input type="checkbox"/> i. 15-2-20  |                                     |

If other, please list under "I. Other Comments"

### G. DESIRED FERTILIZER CONCENTRATION

- |                                     |                                     |                                     |
|-------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> a. 50 ppm  | <input type="checkbox"/> d. 125 ppm | <input type="checkbox"/> g. 250 ppm |
| <input type="checkbox"/> b. 75 ppm  | <input type="checkbox"/> e. 150 ppm | <input type="checkbox"/> h. 300 ppm |
| <input type="checkbox"/> c. 100 ppm | <input type="checkbox"/> f. 200 ppm | <input type="checkbox"/> i. 350 ppm |

If other, please list under "I. Other Comments"

### H. INJECTOR/RATIO INFORMATION

(Example: Dosatron 1:100 = 2.b.)

- |   |                                   |
|---|-----------------------------------|
| <input type="checkbox"/> 1. Hozon™      | <input type="checkbox"/> a. 1:15  |
| <input type="checkbox"/> 2. Dosatron®   | <input type="checkbox"/> b. 1:100 |
| <input type="checkbox"/> 3. Smith       | <input type="checkbox"/> c. 1:128 |
| <input type="checkbox"/> 4. Anderson    | <input type="checkbox"/> d. 1:200 |
| <input type="checkbox"/> 5. Dosmatic®   | <input type="checkbox"/> e. 1:300 |
| <input type="checkbox"/> 6. GEWA®       |                                   |
| <input type="checkbox"/> 7. No Injector |                                   |

If other, please list under "I. Other Comments"

I. OTHER COMMENTS \_\_\_\_\_

\_\_\_\_\_

**A. SAMPLE ID** Please identify each of your samples with a unique identification code. 20 characters max. (see instruction sheet)  
*Be sure to include your sample identification on the sample bag.*  
Sample Identification Code/Number \_\_\_\_\_  
Date Sample Taken \_\_\_\_\_

### B. SAMPLE TYPE

1. Water                       2. Fertilizer Solution

### C. SOURCE OF WATER

1. Municipal  
 2. Well  
 3. Surface Water  
 a. Pond                       b. Lake                       c. River                       d. Stream  
 4. Other \_\_\_\_\_

### D. HAS WATER BEEN TREATED?

1. No Treatment  
 2. Acidified  
 a. 93% or 96% Sulfuric                       d. 75% Phosphoric  
 b. Battery Acid                                       e. Other \_\_\_\_\_  
 c. 85% Phosphoric

### E. ANY CONCERNS/PROBLEMS WITH WATER?

1. Poor Plant Growth  
 2. Lime Deposits  
 3. Turns Walkways Brown or Red  
 4. No Concerns