

PLANT/WEED IDENTIFICATION

Commercial

Residential

Name _____ Company Name _____
LAST FIRST MI (IF APPLICABLE)

Mailing Address _____
STREET CITY STATE ZIP

Phones () (HOME • WORK • CELL?) () (HOME • WORK • CELL?)

EMAIL (reports are emailed – print clearly)

Copy report to Clemson staff: _____ @clemson.edu @clemson.edu

| | |
|---|--------------------------------------|
| Sample Collection Site: <i>(if different from above)</i> | Name/Company _____ |
| | Address _____ |
| | Phone _____ Email _____ County _____ |

| | | |
|--|--|----------------------|
| SELECT ONE: <input type="checkbox"/> \$20.00 South Carolina collection site <input type="checkbox"/> \$30.00 out-of-state collection site | BILLING ACCOUNT: _____ If none, submit payment with sample material. Make checks payable to Clemson University . | Check # _____ |
|--|--|----------------------|

Submit **entire plant**, if possible, including roots, leaves, flowers, seeds, pods, berries, and any other identifying characteristics. Enclose plants or turfgrass in a sealed plastic bag. If submitting **mushrooms**, enclose in a **paper bag** only. **Mold** cannot be identified.

Turfgrass can be identified to genus (e.g. Bermuda, Centipede, Zoysia), but not to cultivar (e.g. Diamond, Palisades, Tif Dwarf, Zenith).

Questions marked with an asterisk (*) are **required** in order to provide **control recommendations**. If this information is left blank, report will consist of identification only.

Suspected identification and/or comments: _____

* Infested plant/crop/pond _____ Planting date _____

Field ID/Reference _____ (Optional, up to 20 characters. Examples: East Field, Irrigation Pond)

County where collected _____ Date collected _____

Degree of infestation light moderate severe

Previous herbicides used for control NONE UNKNOWN

Product name _____ Rate _____ Date _____

Product name _____ Rate _____ Date _____

* Is livestock present, or will they be feeding on this crop? Yes No

* If from a pond: Are fish present? Yes No

Do animals drink the water? Yes No

Is water used for plant/crop irrigation? Yes No

* If yes, plants/crops irrigated _____

Growth habit climbing/vine low-growing upright floating submerged

Flowers Season/month in bloom _____

Flower color _____

Fruit/Seeds Season/month seen _____

Type of fruit/seeds _____

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|---|
| Location of planting <input type="checkbox"/> Field <input type="checkbox"/> Forest <input type="checkbox"/> Greenhouse <input type="checkbox"/> Landscape – commercial <input type="checkbox"/> Landscape – residential <input type="checkbox"/> Nursery <input type="checkbox"/> Orchard <input type="checkbox"/> Pasture <input type="checkbox"/> Pond <input type="checkbox"/> Vegetable/herb garden |
|---|