



Tobacco Float Water

Agricultural Service Laboratory
171 Old Cherry Road / Clemson, SC 29634
Phone: 864-656-2068 Fax: 864-656-2069
<http://www.clemson.edu/agsrvlb>

LAB USE ONLY

Lab No. _____

Name: _____ Date Sampled: _____
 LAST , FIRST

Address: _____

City: _____

State: _____ Zip Code: _____ Phone Number: (____) _____ - _____

Account: _____ Fax Number: (____) _____ - _____

Email: _____

Sample Label: _____	Check Analysis	In-state Cost	Out-of-State	Enter Cost
Water Source (Check One):	<input type="checkbox"/> Special	\$25.00	\$50.00	_____
<input type="checkbox"/> Municipal	<input type="checkbox"/> Fax Report	\$1.00	\$1.00	_____
<input type="checkbox"/> Well Depth _____ feet (leave blank for unknown)	<input type="checkbox"/> Mailed Report	\$1.00	\$1.00	_____
			Total	_____

Fertilizer Program (Check One):

- 20-10-20
- 20-5-20
- 16-5-16
- 16-4-16 or 16-4-13
- 15-5-15

Special Analysis includes pH, electrical conductivity (EC), calculated total dissolved solids (TDS), phosphorus, potassium, calcium, magnesium, iron, zinc, copper, manganese, sodium, chloride, boron, sulfur, nitrate nitrogen, bicarbonate, carbonate, and calculated sodium adsorption ratio.

Suspected Problems/Comments:

Injection Pump

- Yes
- No

Tank Volume _____

Make checks payable to Clemson University

Extension Approval: _____

Check Number: _____

Ag Lab Approval: _____ LAB USE ONLY

Date Sample Received: _____ LAB USE ONLY