



CSU SPUR
COLORADO STATE UNIVERSITY



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Horticulture Soil Sample Submittal Form (Vegetable Garden, Landscape, and Reclamation)

Report and Billing To						Sample Information				
Name:						Sampling Date:				
Address:						Mailing Date:				
City:		State:		Zip:		Sample Received Date:				
Email:						County:				
Tel:						Location GPS (Optional):				
Lab Number (Lab Use Only)	Sample ID	Sample Depth (inches)	Horticulture Crop						Test Code	Comments
			Lawn/Turf	Vegetable Garden	Flower Beds	Orchard	Trees	Other		
							Payment Information			
							Include Check	Yes	No	Check #
Fertilizer rate recommendations			Yes	No		Amount: \$				