



FERTILIZER & ANIMAL WASTE REQUEST FORM

NAME _____		Date Rec. _____	
ADDRESS _____		Grower _____	
CITY _____		Email _____	
STATE & ZIP _____	Phone _____	Sample Date _____	Sampled By _____

UNUSUAL CONDITIONS OR SPECIAL INSTRUCTIONS: _____

CHECK TEST GROUP REQUESTED

TEST GROUPS

<p>TOTAL NUTRIENT ANALYSES</p> <p><input type="checkbox"/> FM-1: Basic Test (WSDA Required) Moisture/Density, Total N/C, Total P, K, NH4-N, NO3-N</p> <p><input type="checkbox"/> FM-2: Complete Moisture/Density, Total N, Total C, P, K, NH4-N NO3-N, pH, EC, Ca, Mg, Na, S, B, Zn, Mn, Cu, Fe</p>	<p><input type="checkbox"/> Heavy Metals Package As, Cd, Co, Cu, Cr, Mo, Ni, Pb, Se Zn, Hg</p>
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HEAVY METALS

<input type="checkbox"/> As	<input type="checkbox"/> Ni	<input type="checkbox"/> Hg-(mercury)
<input type="checkbox"/> Cd	<input type="checkbox"/> Pb	
<input type="checkbox"/> Co	<input type="checkbox"/> Se	
<input type="checkbox"/> Mo	<input type="checkbox"/> Other: _____	



INDICATE INDIVIDUAL TESTS BELOW IF NO TEST GROUP IS CHOSEN

SAMPLE I.D.	NITROGEN		Test #	P	K	S	Ca	Mg	Na	B	Zn	Mn	Cu	Fe
	TOTAL	NITRATE												

We will make every effort to provide an accurate analysis of this sample. For reasonable cause, we will repeat the tests, but because of factors beyond our control in sampling procedures, and the inherent variability of soils and plants, our liability is limited to the price of the tests.