



**PLANT PATHOLOGY**  
 E 1, MAIN BUILDING,  
 PRIVATE BAG X1  
 ELSENBURG, 7607  
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<b>PRODUCER :</b>	<b>DATE :</b>
<b>FARM / BUSINESS NAME :</b>	<b>DISTRICT :</b>
<b>POSTAL ADDRESS :</b>	
<b>TEL. NO. :</b>	<b>FAX NO. :</b>
<b>PERSON LIABLE FOR ACCOUNT :</b>	
<b>POSTAL ADDRESS :</b>	
<b>TEL. NO. :</b>	<b>FAX NO. :</b>
<b>FORM COMPLETED BY :</b>	<b>CONTACT NO. :</b>

<b>CROP :</b>	<b>LAND/BLOCK :</b>
<b>CULTIVAR :</b>	<b>SIZE (ha) :</b>
<b>AGE OF CROP :</b>	<b>TOTAL VALUE (R) :</b>
<b>PREVIOUS CROP :</b>	<b>AREA AFFECTED (ha) :</b>
<b>PLANT PART TO INVESTIGATE</b>	<b>% LOSS :</b>
<b>SYMPTOM(s) [complete] :</b>	

<b>FUNGICIDE(S) APPLIED :</b>	<b>DATE :</b>			
<b>CONCENTRATION :</b>				
<b>INSECTICIDE(S) APPLIED :</b>	<b>DATE :</b>			
<b>CONCENTRATION :</b>				
<b>HERBICIDE(S) APPLIED :</b>	<b>DATE :</b>			
<b>CONCENTRATION :</b>				
<b>OTHER CONTROL MEASURES :</b>				
<b>INSECTS OBSERVED :</b>				
<b>FERTILIZER(S) :</b>				
<b>Rainfall :</b>	High	Normal	Low	<b>Irrigation regime :</b>
<b>Temp.</b>	High	Normal	Low	<b>Resistance measurement:</b>
<b>Soil type :</b>	<b>Depth :</b>			<b>pH :</b>

<b>FOR OFFICE USE</b>				<b>LAB. NR. :</b>				
<b>STATE OF SAMPLE WITH SUBMISSION :</b>	Good	Relative	Poor					
<b>INVESTIGATE :</b>	Fungus	Bacterium	Virus	Insect	Nutrition	Soil	Nematode	Other :