Insect Diagnostic Laboratory (IDL) SUBMISSION FORM

Name: ___________________________________________  If different -- Where sample came from:

(Company) ______________________________________  (Name): ________________________________

Address: _______________________________________  Address: _________________________________

Town, State, Zip: _________________________________  Town: _________________________________

E-mail: ________________________________  State, Zip: ________________________________
(or a friend or relative’s email who can contact you directly with the results)

Phone: (_______)_________________________  Date sample was found: __________________________

Where found (kind of plant, food, “indoors”, etc.): ________________________________

If found indoors: (house, office, etc.) room(s), floor(s): ________________________________

If outdoors not associated with a plant: (foundation, deck, etc.): ________________________________

Nature and extent of problem, and when it was first noticed:  (use back of page if needed)

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

If found on a plant: What kind of plant: ________________________________

When was it first seen on the plant?: ________________________________  Is it getting worse?: ______

Distribution of plant pest (entire field, a few of the plants, dry or wet areas, single houseplant?, etc.):

______________________________________________________________________________

Mail sample, $25 payment, and this form to:
Insect Diagnostic Laboratory
Cornell University
2144 Comstock Hall, Entomology
Ithaca NY 14853-2601

For more information see: http://idl.entomology.cornell.edu

Put sample in a sealed bag or container, inside a box or crush-proof container

Make sure to use enough postage (thick or lumpy requires more stamps)

Enclose a check or money order for $25 payable to “Cornell University”

Include email address on form (yours, or a friend or relative) for our ID reply

Questions? Send an email to: <IDLDiagnosticLab@cornell.edu>

Material received: adult immature egg leaves branches roots whole plant other: