

Soil Sample Information Sheet

Name _____

Farm Name _____

Physical Address _____

Email _____

City, State, Zip Code _____

Phone # _____

 Is this sample for a current USDA Cost Share Program? Yes No

Homeowner Samples (Check Only One)

Farm Samples

- Vegetable Garden Lawn Area
 Flower Garden Greenhouse
 Potted Plants/ Bed Bench
 Containers Containers
 Berries/Orchard High Tunnel

 Crop(s) to planted _____

 Irrigated Non-irrigated
 Type of Irrigation System _____

Cultural Information

 Is this newly cleared land (first time planted)? Yes No What year was land cleared? _____

Please provide history for this area below:

	Two Years Ago	Last Year	Planning This Year
Crops or Plants Grown			
Yield or Results			
Fertilizer Applied (example: 10 lbs 8-32-16)			

 Check here if this recommendation is for an **organic** system

Has lime been applied? _____ If yes: year _____ formulation _____ rate _____

Do have a fertilizer blend or source you prefer? Or do you have fertilizer on hand you would like to use? List and include (N-P-K) : _____

How would you like your recommendation?

- __ Linear ft. of row please provide Row Width: _____ ft Length of row: _____ ft # of rows _____
 __ Total area of field/garden/high tunnel Area: _____ sq. ft. _____ acre(s)
 __ per acre or 100 sq. ft. or 1000 sq. ft.

Office Use Only

Sample #: _____
Date: _____
Received by: _____
Paid (Y/N) via: _____

Please put any additional information on the back of this form.
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