

UNIVERSITY OF KENTUCKY

Department of Horticulture
and Landscape Architecture

College of Agriculture Cooperative Extension Service

Division of Regulatory Services

COMMERCIAL HORTICULTURAL SOIL SAMPLE INFORMATION SHEET

Section I. Grower I.D. No.

Name _____

Address _____

City _____ State _____ Zip _____

Telephone Number _____ Acres: _____

Owner's Sample Identification

Date Soil Sample _____
Received by County: _____

Section II. Test(s) to Be Made

01 Routine Soil Test (P, K, pH, buffer
 pH, Ca, Mg, Zn)

In Addition to Above Only
 OM (Org. Matter) BO (Boron)

SECTION IV. Lab Use Only

SECTION V.

For County Use Only

County Code

County Sample #

Lab Use Only

Billing Code

SECTION III. CROP/MANAGEMENT SELECTION — Mark (x) only one crop to be grown.

Part A1. FLOWERS/NURSERY

	<i>Crop To Be Grown</i>	<i>Previous Crop Grown</i>	
	<input type="checkbox"/>	<input type="checkbox"/>	Flowers
02	<input type="checkbox"/>	<input type="checkbox"/>	Annuals
04	<input type="checkbox"/>	<input type="checkbox"/>	Perennials (not bulbs)
06	<input type="checkbox"/>	<input type="checkbox"/>	Bulbs
96	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____

Nursery

10	<input type="checkbox"/>	<input type="checkbox"/>	Azaleas
12	<input type="checkbox"/>	<input type="checkbox"/>	Conifers, junipers
14	<input type="checkbox"/>	<input type="checkbox"/>	Conifers, pines
16	<input type="checkbox"/>	<input type="checkbox"/>	Conifers (not pines or junipers)
18	<input type="checkbox"/>	<input type="checkbox"/>	Deciduous Shrubs
20	<input type="checkbox"/>	<input type="checkbox"/>	Deciduous Trees
22	<input type="checkbox"/>	<input type="checkbox"/>	Evergreen Shrubs, Broadleaved
24	<input type="checkbox"/>	<input type="checkbox"/>	Evergreen Trees, Broadleaved
26	<input type="checkbox"/>	<input type="checkbox"/>	Hollies
28	<input type="checkbox"/>	<input type="checkbox"/>	Rhododendrons
97	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____

Part A2. Management System

01	<input type="checkbox"/>	<input type="checkbox"/>	Sod Nursery
02	<input type="checkbox"/>	<input type="checkbox"/>	Tilled Nursery with complete weed control
03	<input type="checkbox"/>	<input type="checkbox"/>	Limited Tillage with complete weed control
04	<input type="checkbox"/>	<input type="checkbox"/>	Limited Tillage with no weed control
12	<input type="checkbox"/>	<input type="checkbox"/>	Sampled before planting

Part A3. Irrigation

01	<input type="checkbox"/>	<input type="checkbox"/>	Irrigated
02	<input type="checkbox"/>	<input type="checkbox"/>	Not Irrigated

Part A4. Site Drainage

01	<input type="checkbox"/>	<input type="checkbox"/>	Well
02	<input type="checkbox"/>	<input type="checkbox"/>	Moderately Well
03	<input type="checkbox"/>	<input type="checkbox"/>	Somewhat Poorly
04	<input type="checkbox"/>	<input type="checkbox"/>	Poorly

Herbicides Used Last Year: _____

Part B1. VEGETABLES

	<i>Crop To Be Grown</i>	<i>Previous Crop Grown</i>	
	<input type="checkbox"/>	<input type="checkbox"/>	Asparagus
32	<input type="checkbox"/>	<input type="checkbox"/>	Beans (snap, dry, lima, etc.)
34	<input type="checkbox"/>	<input type="checkbox"/>	Cole Crops (broccoli, etc.)
36	<input type="checkbox"/>	<input type="checkbox"/>	Corn, Sweet
38	<input type="checkbox"/>	<input type="checkbox"/>	Cucumbers
40	<input type="checkbox"/>	<input type="checkbox"/>	Eggplant
42	<input type="checkbox"/>	<input type="checkbox"/>	Greens (collards, kale, etc.)
44	<input type="checkbox"/>	<input type="checkbox"/>	Muskmelons (cantaloupes)
46	<input type="checkbox"/>	<input type="checkbox"/>	Onions (green & bulb)
48	<input type="checkbox"/>	<input type="checkbox"/>	Peppers (bell and pimienta)
50	<input type="checkbox"/>	<input type="checkbox"/>	Potatoes
52	<input type="checkbox"/>	<input type="checkbox"/>	Rhubarb
54	<input type="checkbox"/>	<input type="checkbox"/>	Root Crops (beets, carrots, etc.)
56	<input type="checkbox"/>	<input type="checkbox"/>	Squash & Pumpkins
58	<input type="checkbox"/>	<input type="checkbox"/>	Sweet Potatoes
60	<input type="checkbox"/>	<input type="checkbox"/>	Tomatoes
62	<input type="checkbox"/>	<input type="checkbox"/>	Watermelons
64	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____
68	<input type="checkbox"/>	<input type="checkbox"/>	

Part B2. Management System

05	<input type="checkbox"/>	<input type="checkbox"/>	Conventional tillage
06	<input type="checkbox"/>	<input type="checkbox"/>	No tillage
07	<input type="checkbox"/>	<input type="checkbox"/>	Plants grown through black plastic mulch

Part B3. Irrigation

01	<input type="checkbox"/>	<input type="checkbox"/>	Irrigated
02	<input type="checkbox"/>	<input type="checkbox"/>	Not Irrigated

Part B4. Site Drainage

01	<input type="checkbox"/>	<input type="checkbox"/>	Well
02	<input type="checkbox"/>	<input type="checkbox"/>	Moderately Well
03	<input type="checkbox"/>	<input type="checkbox"/>	Somewhat Poorly
04	<input type="checkbox"/>	<input type="checkbox"/>	Poorly

Herbicides Used Last Year: _____

Part C1. FRUITS AND NUTS

	<i>Crop To Be Grown</i>	<i>Previous Crop Grown</i>	
	<input type="checkbox"/>	<input type="checkbox"/>	Apples
72	<input type="checkbox"/>	<input type="checkbox"/>	Blueberries
74	<input type="checkbox"/>	<input type="checkbox"/>	Brambles
76	<input type="checkbox"/>	<input type="checkbox"/>	Cherries, Tart
78	<input type="checkbox"/>	<input type="checkbox"/>	Currants and Gooseberries
80	<input type="checkbox"/>	<input type="checkbox"/>	Grapes
82	<input type="checkbox"/>	<input type="checkbox"/>	Peaches
84	<input type="checkbox"/>	<input type="checkbox"/>	Pears
86	<input type="checkbox"/>	<input type="checkbox"/>	Pecans
88	<input type="checkbox"/>	<input type="checkbox"/>	Plums
90	<input type="checkbox"/>	<input type="checkbox"/>	Strawberries
92	<input type="checkbox"/>	<input type="checkbox"/>	Walnuts
94	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____
99	<input type="checkbox"/>	<input type="checkbox"/>	

Part C2. Management System

08	<input type="checkbox"/>	<input type="checkbox"/>	Bare Sod
09	<input type="checkbox"/>	<input type="checkbox"/>	Sod Orchard
10	<input type="checkbox"/>	<input type="checkbox"/>	Black Plastic Mulch
11	<input type="checkbox"/>	<input type="checkbox"/>	Organic Mulch
12	<input type="checkbox"/>	<input type="checkbox"/>	Sampled before planting

Part C3. Irrigation

01	<input type="checkbox"/>	<input type="checkbox"/>	Irrigated
02	<input type="checkbox"/>	<input type="checkbox"/>	Not Irrigated

Part C4. Site Drainage

01	<input type="checkbox"/>	<input type="checkbox"/>	Well
02	<input type="checkbox"/>	<input type="checkbox"/>	Moderately Well
03	<input type="checkbox"/>	<input type="checkbox"/>	Somewhat Poorly
04	<input type="checkbox"/>	<input type="checkbox"/>	Poorly

Part C5

Herbicides Used Last Year: _____

Signature of Extension Agent

Paid

RS-50-26C-2

Commercial Horticultural Soil Sample INSTRUCTIONS

General:

1. Use this sheet **only** for **commercial** (not home) Vegetable, Flower, Fruit, or Nursery (not container) soil samples. Use one soil sample and one completed sheet for **each** crop.
2. Samples must be submitted through your County Extension Agent in bags/boxes furnished by the Agent. No sample will be tested unless it is in the special bag/box and is accompanied by this properly completed form.
3. Explain any soil or plant problems associated with the sample to the County Agent so he/she can consider this in any subsequent recommendations.
4. Sections I through III are to be completed by the grower.
Section IV is for the use of the UK Soil Laboratory only.
Section V is to be completed by the County Agent.

Specific:

Section I — Print name and address; be sure to include your zip code.

Owner's Sample Identification — any combination of four (4) numbers or letters that will identify the specific location of sampled areas, such as **BEAN, TOM1, TOM2**, etc.

Section II — Mark (x) the box indicating desired tests. Check with the County Agent for special analyses needed.

Section III — One and **only** one "Crop To Be Grown" may be selected.

Parts A1, B1, or C1. Mark (x) the box associated with the **one** crop or planting to be grown **and** mark (x) the box associated with the previous crop grown on the sampled area. If "other" is marked, please write in the specific crop.

Parts A2, B2, C2. For the **one** crop selected in either Part A1, B1, or C1, mark (x) the box associated with the management system you plan to use. For example, if a crop in part B1 is selected then select a management system in part B2.

Parts A3, B3, or C3. For the **one** crop selected in either Part A1, B1, or C1, mark (x) the box associated with the best description of the soil drainage.

Parts A5, B5, or C5. Write in the names of the herbicides used last year on the sampled area.

Section IV — For UK Soil Laboratory Use Only.

Section V — For County Use Only.