

Soil Test Submittal Form – Return this form and soil sample(s) to MCSWCD located at USDA Service Center 1931 S Liberty Drive – Bloomington, IN 47403

CONSERVATION DISTRICT					
Date:	Name:				
Address:		City		ST :	Zip :
Phone:		Email:			
Sample Name:					
Sample Type: Crop to Produce:	Veg. Garden Flow	vers 🗌 Lawn	Fruit Trees	Other	
Sample Type AG: Crop to Produce:	Pasture	Ηαγ	Crop		
Was the sample	e made up of several soil	plugs?		YES	NO NO
Was each plug t	taken from at least 6" de	ep?			NO NO
Was all mulch/v	vegetation/debris remov	ed from the surface	prior to plug colled	ction? 🗌 YES	; 🗍 NO
What tool was u	used to collect each plug	?			DBE SHOVEL
Sample Name:					
Sample Type: Crop to Produce:	Veg. Garden Flow	vers Lawn	Fruit Trees	Other	
Sample Type AG: Crop to Produce:	Pasture	Нау	Crop		
Was the sample	e made up of several soil	plugs?		YES	i 🗌 NO
Was each plug t	taken from at least 6" de	ep?			NO NO
Was all mulch/vegetation/debris removed from the surface prior to plug collection?					i NO
What tool was u	used to collect each plug	?			DBE SHOVEL
Sample Name:					
Sample Type: Crop to Produce:	Veg. Garden Flow	vers 🗌 Lawn	Fruit Trees	Other	
Sample Type AG: Crop to Produce:	Pasture	Нау	Crop		
Was the sample	e made up of several soil	plugs?		YES	NO NO
Was each plug taken from at least 6" deep?					
Was all mulch/vegetation/debris removed from the surface prior to plug collection? VES NO					

I agree to pay for the soil tests I am requesting upon receipt of an invoice. I understand that Soil test will be charged at the following rates: \$10 per pasture, hay & crop ground tests / \$25 per lawn, garden, flowers, tree tests + shipping costs.

SHOVEL

PROBE

Signature of customer: _____

What tool was used to collect each plug?