

SEED HEALTH & PHYTOSANITARY TESTING



Lab use only:	
Date In:	_____
Lab #:	_____
PDIS #:	_____
<input type="checkbox"/> Results entered	

NDSU Plant Diagnostic Lab – Shipping Information	
USPS: NDSU Dept 7660 PO Box 6050 Fargo ND 58108-6050	Private Shippers: 206 Waldron Hall Fargo ND 58102
Telephone: 701-231-7854 email: ndsu.pdl@ndsu.edu web: www.ag.ndsu.edu/pdl	

Contact Information

Submitted By: _____ Business (or Client): _____ Address: _____ City/State/Zip: _____ Phone: _____ Fax: _____ Cell: _____ E-mail: _____	Send copies of report to: <input type="checkbox"/> Submitter <input type="checkbox"/> NDDA <input type="checkbox"/> ND State Seed Dept <input type="checkbox"/> Other: _____	Send Invoice to: <input type="checkbox"/> Submitter <input type="checkbox"/> NDDA <input type="checkbox"/> ND State Seed Dept <input type="checkbox"/> Other: _____
--	---	--

Crop: _____	Variety/Cultivar/Type: _____	Origin of production (County and State): _____
Lot # _____	Generation: _____	
or ID: _____		

Seed Health Testing Services Requested

Potato <input type="checkbox"/> PVA <input type="checkbox"/> PVM <input type="checkbox"/> PVS <input type="checkbox"/> PVX <input type="checkbox"/> PVY <input type="checkbox"/> PLRV <input type="checkbox"/> PSTV <input type="checkbox"/> Soil – SCN phyto <input type="checkbox"/> Bacterial Ring Rot <input type="checkbox"/> Other: _____	Pulse Crop <input type="checkbox"/> Ascochyta <input type="checkbox"/> Anthracnose <input type="checkbox"/> Nematode seed wash <input type="checkbox"/> Other: _____	Dry Bean <input type="checkbox"/> Dome test <input type="checkbox"/> Anthracnose <input type="checkbox"/> Germination (forward to ND State Seed) <input type="checkbox"/> Other: _____	Small Grains <input type="checkbox"/> Virus <input type="checkbox"/> High Plains Virus <input type="checkbox"/> WSMV <input type="checkbox"/> BYDV-strain: _____ <input type="checkbox"/> Black point <input type="checkbox"/> Seed wash for spores Pathogen: _____ <input type="checkbox"/> Mold count <input type="checkbox"/> Other: _____	Other: <input type="checkbox"/> Nematode seed wash Host: _____ <input type="checkbox"/> Canola black leg <input type="checkbox"/> Other: _____
--	---	---	---	---