REQUEST FOR INSECT IDENTIFICATION

University of Idaho Extension

CLIENT INFORMATION

Today's date: _____

Name	
Address	
City	
State / Zip Code	

Phone	
Fax	
Email	

PROBLEM DESCRIPTION:
tell us as much as you can about the problem so that we can make the best diagnosis

1. **Where** did you find the insect? (e.g. yard & garden, commercial crop, inside home)

2. **When** (month/day/year) did you collect the specimen(s): _____

3. About **how many** insects were there? _____

4. **Describe** the damage they are causing:

For insect problems on plants, please include the following information

name of plant: _____

part of plant injured : _____

number of plants injured:_____ age of plants: _____

5. Have you had this problem before?
   If YES, when did you first notice the problem?

6. Name any **insecticide or pesticide** products you have applied for this problem:

7. Specific **site-location** where pest was found (eg. 5 mile NE of Boise, ADA County):

DIAGNOSIS & CONTROL ADVICE *(for use by University of Idaho personnel)*

Specimen forwarded on _____ **to** _____
date UI Specialist

UI County Extension contact person for diagnosis/recommendation -- return completed form to:

Lydia Clayton or Mary Busch UI/Nez Perce County Extension, 1239 Idaho Street, Lewiston, ID 83501
UI faculty / staff name address (Nez Perce County)

Insect Identification:

Recommended control measures:

Additional biological information or advice:

Determined by: _____ date: _____

UI specimen identification # [ ]

References used:

Field Guide to Structure-Infesting Ants	page #	____
Field Guide to Structure-Infesting Beetles vol. I		____
Field Guide to Structure-Infesting Beetles vol. II		____
Field Guide to Urban Spiders		____
Insects of Western North America (Essig)		____
Insects that Feed on Trees & Shrubs (Johnson & Lyon)		____
Introduction to the Insects (Borror et al.)		____
Nat. Pest Control Assoc. Field Guide to Structural Pests		____
PNW Insect Control Handbook		____
Western Forest Insects (Furniss & Carolin)		____

other references:

Client contact information

Client contacted by: _____
name

_____ initial contact date

_____ follow-up contact date

_____ final recommendation date

recommendation delivered via

- in person [ ]
- telephone [ ]
- mail [ ]
- Fax [ ]
- Email [ ]