

University of Rhode Island  
Cooperative Extension Education Center  
3 East Alumni Avenue, Kingston, RI 02881  
Tel: 401-874-2900

Fee: \$10.00 Per Sample

No. of Samples \_\_\_\_\_  
Amount Paid \_\_\_\_\_  
Date Received \_\_\_\_\_  
Mail in \_\_\_\_\_  
Walk in \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone:

Home \_\_\_\_\_ Work \_\_\_\_\_

### URI PLANT PROTECTION CLINIC QUESTIONNAIRE FOR TURF SPECIMENS

Please answer all questions to the best of your ability by circling a response or filling in the blank. Take a 6" square and 2" deep sample from an advancing margin of the problem patch. Wrap tightly in newspaper and then in foil or plastic wrap, taking care to keep soil off grass. Mail in tightly-fitting box. Attach your check (made out to URI) with the completed questionnaire and turf sample. Walk-in clients may follow the above procedure and leave sample with the Center receptionist.

1. When was lawn established? Within last year    2-3 years    3 years or more

2. Lawn was grown from?    Seed    Sod    Don't know

3. When was soil last tested? \_\_\_\_\_

4. Have you ever dethatched or aerated the lawn?    Yes    No

If yes, when was the last time you dethatched or aerated? \_\_\_\_\_

5. When did you last apply lime? \_\_\_\_\_ How much lime? \_\_\_\_\_

6. When did you last fertilize? \_\_\_\_\_ How much fertilizer? \_\_\_\_\_  
What type of fertilizer? \_\_\_\_\_

7. What time of day do you normally water the lawn?    Morning    Mid-day    Evening

How many times per week on average? \_\_\_\_\_

How long do you water each time?    1/2 hr.    1 hr.    2 hrs.    3 hrs.    Other (Explain on back)

8. What is the sun/shade status of your lawn?    Light shade from trees or light restricted by northern exposure

Mostly in full sun    A few shady areas

Entire lawn in light shade    Entire lawn in heavy shade

9. Did the lawn green up nicely in the springtime?    Yes    No

10. Have you used any herbicides (weed-killer) this year?    Yes    No

If so, when was it applied? \_\_\_\_\_ What type did you use, liquid or granular \_\_\_\_\_

11. At what height is your mower set? \_\_\_\_\_

12. When is the last time the mower blades were sharpened? \_\_\_\_\_

**Additional Comments: On Back**