

UConn Plant Diagnostic Lab

Insect Identification submission form



Name: _____ Business: _____ Street Address: _____ City, State, Zip: _____ Phone: _____ Email: _____	\$15 diagnostic fee per sample. Make checks payable to <i>UConn</i> . Drop off or mail sample, form, and check to: UConn Plant Diagnostic Lab 1380 Storrs Road, U-4115 Storrs, CT 06269-4115
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Insect(s) Found on:	Specific Location of Insect
<i>Check all that apply.</i> <input type="checkbox"/> Tree or Shrub <input type="checkbox"/> Herbaceous Ornamental Plants <input type="checkbox"/> Vegetables <input type="checkbox"/> Turf <input type="checkbox"/> Fruits <input type="checkbox"/> Houseplants <input type="checkbox"/> Outdoors, not on a plant <input type="checkbox"/> Indoors Where? _____	<i>If insect was found on a plant, please specify the host below.</i> _____ Common and/or scientific name
	Quantity Found <i>How many insects did you find?</i> _____

Description of Problem:

Shipping and collection tips on back.

FOR OFFICE USE ONLY				
Date received: _____	Vis	Mic	Phy	Pho
Check #: _____				
ID: _____				
Date of report: _____				

Shipping Insect Samples by Mail

1. **Do not** ship live insects or arthropods. Crushed insects and insects stuck to clear tape are unidentifiable. Place insects in freezer to kill them. Preserve soft-bodied insects in a leak-proof vial of alcohol.
2. For suspected bed bugs, **please email ladybug@uconn.edu with an image of the insect before shipping.**
3. Place the entire sample into a **sealed plastic bag**.
4. Ship in a **box** to avoid damaging the sample during transit. Insects will be crushed by mail machines if sent in a plain envelope.
5. Do not ship over a weekend or holiday to limit the time the sample is in transit.