

Tully Soil Biology Labortory Pachymetra and Nematode Assay Request Form

Extension/Productivity Officer Details:

HCPSL Officer: Sandra Coco Phone: 47761808
Office or Origin: HERBERT - INGHAM Email: HCPSLFrontDesk@hcpsl.com.au

Grower Details: _____ Farm No: _____

Address: _____ Phone No: _____

Pricing (please X one box):

☐	HCPSL Levy Payers	(Pachy)	\$80	☐	Collection	\$50
		(Nematode)	\$120			
☐	HCPSL non-levy payers		\$130			
☐	HCPSL Staff		\$70 (project code required)			

Charge to (please X one box and enter details):

☐	HCPSL project code:	Address:	HCPSL PO Box 135 INGHAM QLD 4850
☐	HCPSL Invoice Grower:		

(All results to come thru HCPSL Office to enable grower to discuss results with extension)

Assay requested (please X):	Minimum assay time	Minimum soil required
☐ Pachymetra	15 working days	250 g
☐ Pathogenic nematodes (those that impact on yield)	15 working days	250 g
☐ Free-living nematodes	15 working days	250 g

Mill Area:	_____	Date sampled:	_____
Date Samples sent:	_____	Method of despatch:	_____
Depth of sampling:	_____	Block Number:	_____
GPS Coordinates:	_____	Previous Variety:	_____
Current variety:	_____	Soil Type:	_____
Crop class or fallow:	_____	Fallow crop (if applicable)	_____
Sample Taken:	☐ Existing/old cane row	☐ Zonal tilled field	☐ Fully tilled

Please fax (4068 1907) or email AssayLabTully@sugarresearch.com.au and attach a copy directly to the sample

Tully Station Office use only

Dates sample rec'd: _____ Date results sent: _____

