

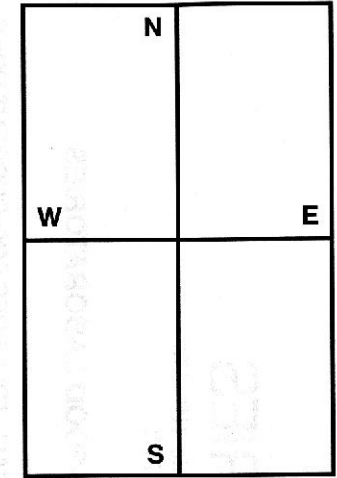


FIELD SOIL SUBMISSION FORM



Unit 1, 503 Imperial Road North, Guelph, Ontario N1H 6T9
 Telephone: (519) 837-1600/1-800-265-7175

**Sampling Map-
 MARK SAMPLING
 AREAS**



SUBMITTED BY:
NAME: _____

ADDRESS: _____

POSTAL CODE: _____
PHONE NO.: (____) _____
FAX NO.: (____) _____
DATE SUBMITTED: _____
REPORTED BY: FAX () MAIL ()
PLEASE CHECK (✓)
COUNTY _____

SUBMITTED FOR:
NAME: _____

ADDRESS: _____

POSTAL CODE: _____
PHONE NO.: (____) _____
FAX NO.: (____) _____

PLEASE FILL OUT COMPLETELY
 FOR AFL III + AFL COMPLETE

TILLAGE PRACTICE

STANDARD PLOW DEPTH _____

MINIMUM TILL _____

NO TILL _____

CORN HEAT UNITS _____

DRAINAGE

SYSTEMATIC _____

RANDOM _____

NATURAL _____

GOOD _____

FAIR _____

POOR _____

TERRAIN

FLAT _____

GENTLY ROLLING _____

ROLLING _____

STEEP _____

ROW WIDTH (INCHES)

7 20 24

28 30 38

**SEND ONE COPY OF THE REPORT TO ABOVE
 ADDRESS YES NO**

Check testing required*

FOR LAB USE ONLY	FIELD NUMBER	ACREAGE	CROP TO BE GROWN	EXPECTED YIELD		LAST CROP GROWN	IF HAY OR PASTURE IS CROP TO BE FERTILIZED OR TO BE PLOWED DOWN BEFORE PLANTING ESTIMATE LEGUME STAND	TEXTURE	
				TONNES HECTARE	BUSHELS ACRE			<input type="checkbox"/>	<input type="checkbox"/>
			1.				Less than 1/3 Legume	<input type="checkbox"/>	COURSE <input type="checkbox"/>
			2.				1/3 to 1/2 Legume	<input type="checkbox"/>	MEDIUM <input type="checkbox"/>
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