

Mail to: Insect Identification Lab
Department of Entomology
501 ASI Building
453 Shortlidge Rd
The Pennsylvania State University
University Park, PA 16802

FOR OFFICE USE ONLY	
Specimen No:	_____
Date Rec'	_____
ID By	_____
Report Via:	_____
Report Date:	_____

INSECT IDENTIFICATION REQUEST

County contact information

Co. Contact _____
Co. Ext. Office _____
 Email _____
 Phone _____
 Address _____
 Contact _____
client directly _____

Client contact information

Requested By _____
Date _____
 Email _____
 Phone _____
 Address/
letter _____

Please indicate () the preferred method of contact (email, phone, or physical letter) above.

WHERE WAS THE INSECT
FOUND (house/room, plant
species, etc)

PART AFFECTED/DAMAGE/
WHAT WAS THE INSECT
DOING? (eg, chewing on leaves)

HAS INSECT BEEN SEEN
BEFORE?
IF YES, HOW OFTEN?

CONTROL MEASURES
YOU HAVE TAKEN

OTHER INFORMATION
(chronology of events,
collection locality different
from contact address, etc.)

