



# IDENTIFICATION REQUEST

Priority:	Lot Number:
Date Submitted:	Number of Specimens:
Date Needed:	Specimen Disposition: <input type="checkbox"/> Return <input type="checkbox"/> Keep/Discard

Name:	Submitter's Reference Number:	Tentative Identification:
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Address:	Level of Identification Requested: <input type="checkbox"/> Family <input type="checkbox"/> Genus <input type="checkbox"/> Species
	Host:

Telephone:	FAX:	Reason for Identification:  <input type="checkbox"/> A – Biological Control <input type="checkbox"/> B – Damaging Crop/Plants <input type="checkbox"/> C – Suspected Pest of Regulatory Concern <input type="checkbox"/> D – Stored Product Pest <input type="checkbox"/> E – Livestock, Wildlife, or Domestic Animal Pest <input type="checkbox"/> F – Biological Control <input type="checkbox"/> G – Household Pest <input type="checkbox"/> H – Possible Immigrant <input type="checkbox"/> I – Reference Collection <input type="checkbox"/> J – Survey <input type="checkbox"/> K – Thesis Problem <input type="checkbox"/> L – Other (elaborate below)
E-mail:		
Affiliation: <input type="checkbox"/> APHIS/PPQ <input type="checkbox"/> Private Individual <input type="checkbox"/> ARS <input type="checkbox"/> Other Federal (US) <input type="checkbox"/> CICP <input type="checkbox"/> Other State Agency <input type="checkbox"/> Commercial Organization <input type="checkbox"/> Private University <input type="checkbox"/> US Department of Defense <input type="checkbox"/> State Agriculture Agency <input type="checkbox"/> Foreign <input type="checkbox"/> State University <input type="checkbox"/> US Forest Service		

Project Support: <input type="checkbox"/> APHIS/PPQ <input type="checkbox"/> ARS <input type="checkbox"/> DOI <input type="checkbox"/> EPA <input type="checkbox"/> FAO <input type="checkbox"/> FS <input type="checkbox"/> Hatch <input type="checkbox"/> NIH <input type="checkbox"/> NRCS <input type="checkbox"/> NSF <input type="checkbox"/> USAID <input type="checkbox"/> Other
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Collecting Permits: <input type="checkbox"/> Required <input type="checkbox"/> Not Required      If required, please submit copies with specimens.
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Project Description:
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Remarks:
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