Grotek Analytical Lab

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Fertilizer Submission Form

Submitted By	
Company Name:	
Contact Name:	
Address:	
Province:	Postal Code:
Phone:	Fax:
Email:	

Method of Payment	
☐ Cash:	
☐ Cheque:	
☐ Account:	P/O #:
☐ Visa/M/C#:	
Expiry Date:	
Signature:	

Sample ID	Lab ID (For Office Use)	Sample Description/Type	Analysis Requested

Explanation of Test Packages	
Please add 7% GST (Canadian orders only). Please enclose payment.	
Fertilizers	
☐ GROF1	Total Nitrogen/Total Phosphorus
☐ GROF2	Available P/Total Sulfur
☐ GROF3	Organic N
☐ GROF4	Ca/Mg/Na/K
☐ GROF5	Total N, Total P, Total K
Nutrient Solution	
☐ GROF6	NO_3-N, P, K, Soluble Salts, Ca, Mg, Na, pH, EC
☐ GROF7	Cu, Zn, Mn, B, Fe, Mo, Al

Additional Information
Time of Sample:
Date of Sample:
Point of Sample:
Date Sent:
Date Received:
Name of Technician:
☐ Please fax a copy of the analysis to:
☐ Please email a copy of the analysis to:

Comments: _____

(If additional instructions, or information is required, please record on a separate sheet)

☐ Additional Sheet(s) Attached

GROTEK SCIENCE FOR PLANTS

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