Department of Soil Science
College of Agricultural and Life Sciences
University of Wisconsin – Madison/Extension

Soil & Plant Analysis Lab
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For Lab Use Only:

Date:

Lime Quality Submission Form

Lab No.:

Customer Information	Payment Information
Name: Ac	count ID:
Company Name:	Amount Paid *(if not being billed)*: $
❒ Address:*	Payment Type:
City: State: Zip:	
County:	*Please call to pay by credit card.*
Phone:	
❒ Fax Results To:*	❒ Check – Number: ❒ Cash

**Please check how you would like to receive your results.*

Sample Submission	
Type of Material	Source or Quarry
Sampled at (e.g. stockpile, bin, belt, etc.)	County
Date Sampled	Zone
Do you wish to test for Calcium and Magnesium? ☐ Yes ☐ No	